

2015 Tax Organizer Personal and Dependent Information

Personal Information

Name	SSN	Date of Birth	Occupation	Healthcare coverage ALL year
Taxpayer				
Spouse				
Daytime Phone		Evening Phone	Cell Phone	Email
Taxpayer				
Spouse				
Street address, city, state, and ZIP				

Marital Status at end of 2015

- ☐ Married
☐ Married filing separately
☐ Single
☐ Widow(er), Date of Spouse's Death _____

Taxpayer

- ☐ Yes ☐ No
☐ Yes ☐ No
☐ Yes ☐ No
☐ Yes ☐ No

Spouse

- ☐ Yes ☐ No You are blind?
☐ Yes ☐ No You are disabled?
☐ Yes ☐ No You are a full-time student
☐ Yes ☐ No You want \$3 to go to the Presidential Election Camp Fund?

Dependent Information

First and last name	SSN	Relationship	Months in Home	Date of Birth	Disabled	Full-time Student	Required to file a return	Healthcare coverage ALL year

Child and Other Dependent Care Expenses

Name of care provider	Address	SSN or EIN	Amount Paid

Other Information

Information to bring to your appointment

- ☐ Copy of your 2014 income tax return
☐ All income statements (Forms W-2, 1098s, 1099s, etc.)
☐ All healthcare coverage statements (Forms 1095-A, 1095-B, 1095-C)

Select all items that apply to you, your spouse, or dependent

- ☐ You can be claimed as a dependent by someone else
 If yes, explain _____
☐ Another person qualifies to claim any dependent listed above
☐ You have a child under 19 or a full-time student under 24 with more than \$1,900 of unearned income
☐ You are self-employed or received hobby income during 2015
☐ You received income from farming during 2015
☐ You received income from rental property during 2015
☐ You received income from timber, minerals, oil, gas, copyrights, etc. during 2015
☐ You have a financial interest in or signature authority over a financial account located in a foreign country during 2015
☐ You received a distribution from, were a grantor of, or transferor to a foreign trust during 2015

- ☐ Canceled checking or savings slip (for direct deposit or debit of refund or balance due)
☐ Documentation for proof of dependency for earned income credit (school records, medical records, daycare records, etc.)

- ☐ You receive income from or pay taxes to a foreign country
☐ You sold a principal residence during 2015
☐ You foreclosed or abandoned a principal residence during 2015
☐ You had debts canceled or forgiven during 2015
☐ You engaged in a bartering transaction during 2015
☐ You gave a gift of more than \$14,000 to one or more people during 2015
☐ You paid student loan interest during 2015
☐ You paid tuition expenses required to attend classes beyond high school during 2015
☐ You incurred a loss due to damaged or stolen property during 2015
☐ You paid wages to a household employee during 2015
☐ You received a notice from IRS or a state taxing authority