

2011 INCOME TAX ORGANIZER

Colin M. Cody, CPA, CMA 6004 Main St, Trumbull, CT 06611
voice: 203-268-7000 fax: 773-668-1058

YOUR PERSONAL INFORMATION

Name and Address:

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email Address:

Filing Status:

Single
Married, Filing Jointly
Married, Filing Separately
Head of Household
Widow(er)

Taxpayer D.O.B.	Spouse D.O.B.	Home Phone #	Cellular or Work #

DEPENDENTS – Please list names of all dependents, regardless of age, who received more than half of their support from you. Do not list spouse.

Name of Dependents	Date of Birth	Social Security #	Months in your home in 2011	Full Time Student 5 months or more?

CHILD & DEPENDENT CARE

Qualifying Person's Name	Provider's Name & Address	Provider's ID#	Amount

WAGES INCOME - Please enclose all W-2 Forms provided by your employer(s).

INTEREST & DIVIDEND INCOME - Please include any 1099 Forms you received

Name of Payer	Gross Amount Received

Other Comments

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OTHER INCOME – <i>Please enclose 1099 Forms and Schedule K-1's</i>	Amount
Commissions and Fees	
Prizes and Awards	
Alimony Received	
Tax Refunds (State and Local)	
Unemployment Compensation	
Disability (may qualify for exclusion)	
Social Security Benefits	
Lump Sum Distribution from Pension/Profit Sharing Plans	
Amount of IRA or Pension Rollover	
Gambling Winnings	
Other	

RENTAL AND ROYALTY INCOME AND DEDUCTIONS	<i>Property A</i>	<i>Property B</i>	<i>Property C</i>
Type of Property			
Property Location			
Rental Income			
Royalty Income			
Advertising			
Auto and Travel			
Cleaning and Maintenance			
Commissions			
Insurance			
Professional Fees			
Management Fees			
Mortgage Interest Paid			
Other Interest			
Repairs			
Supplies			
Taxes			
Utilities			
Depreciation (to be computed)			
Improvements and Additions			
Other			

STOCK OR PROPERTY SALES – <i>Please enclose broker statements. Form 1099-B, or Real Estate transaction papers. (do not list more than five transactions here)</i>							
Name of Stock or Property Description	Number of Shares	Date Acquired	Date Sold	Amount of Sales Price	Cost or Other Basis	Expense of Sale	Depreciation or Depletion

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DEDUCTIONS – MEDICAL AND DENTAL EXPENSES	
List All Expenses	Un-Reimbursed Amount
Prescription Drugs and Insulin	
Doctors and Dentists, Hospitals, Lab fees	
Long-term Care Insurance Premiums	
Insurance Premiums you Paid for Medical and Dental Care	
Transportation Expense or Vehicle Miles for Medical Purposes	
Other (List below - including hearing aids, dentures, eyeglasses, braces, wheelchairs, etc.)	

DEDUCTIONS – TAXES	
	Amount
Sales Tax on large items	
Real Estate Tax	
Personal Property Tax	
Automobile Tags	
Other	

DEDUCTIONS – INTEREST	
	Amount
Home Mortgage Interest paid to Financial Institutions (Form 1098)	
Home Mortgage Interest paid to Individuals (show name and address)	
Principal Mortgage Insurance	

DEDUCTIONS – CONTRIBUTIONS	
	Amount
Cash Contributions -	
Non-Cash Contributions -	

DEDUCTIONS - MISCELLANEOUS	
	Amount
Alimony Paid (list recipient's name and SSN)	
Forfeited Interest Penalty for Premature Withdrawal	
Employment Firm Fees	
Teachers – Classroom Supplies and Expenses	
Employee Expenses: Tools, Clothing, Uniforms, Union & Professional Dues	
Subscriptions to Professional Journals	
Other	
Tax Return Preparation Fees or Legal Fees (if for income protection)	
Investment Expenses	
Safe Deposit Box (this lets IRS know that you have a safe deposit box)	

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BUSINESS OR FARM INCOME AND EXPENSES

INCOME	Amount
Type of Income	

Main Product or Principal Activity

EXPENSES

	Amount		Amount
Advertising		Veterinary Fees, Medicine	
Bad Debts		Legal and Professional Services	
Car and Truck Expenses		Office Expenses	
Commissions		Pension / Profit Sharing Plans	
Depletion		Interest:	
Depreciation (discuss with tax consultant)		Bank Loans	
Employee Benefit Program		Credit Cards	
Insurance		Vehicle Loans	
Chemicals		Other	
Conservation Expenses		Other	
Custom Hire		Rent or Lease:	
Feed Purchased		Machinery & Equipment	
Fertilizers and Lime		Other (Land, Animals, etc.)	
Freight, Trucking		Other Business Property	
Gasoline, Fuel, Oil		Other	
Supplies		Cost of Goods Sold:	
Travel		Inventory (Beginning of Year)	
Entertainment & Meals		Purchases of Goods	
Utilities & Telephone		Inventory (End of Year)	
Wages		Other Expenses:	
Jobs Credit			
Repairs, Maintenance			
Seed, Plants Purchased			
Storage, Warehousing			

COLLEGE TUITION (include tuition & fees but not books, room or board)

Name of Student	Relationship	Classification (Circle)	Amount Paid
		Frsh-So-Jr-Sr-Other	
		Frsh-So-Jr-Sr-Other	
		Frsh-So-Jr-Sr-Other	

Estimated Taxes Paid

Federal		State	
Date Paid	Amount	Date Paid	Amount

IRA/SEP Contributions

Date Paid	Roth or Traditional	Taxpayer Amount	Spouse Amount

Other Comments

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