

# CLIENT TAX ORGANIZER

Taxpayer Name: \_\_\_\_\_ DOB: \_\_\_\_\_

Social Security No.: \_\_\_\_ - \_\_\_\_ - \_\_\_\_ Occupation: \_\_\_\_\_

Address: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_

Mobile No.: \_\_\_\_\_ E-mail: \_\_\_\_\_

Filing Status:

- Single   
  Married Filing Jointly   
  Married Filing Separately   
  Head of the Household   
  Qualifying Surviving Spouse  
 Year Spouse Died: \_\_\_\_\_



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INCOME	ANNUAL TOTAL
W-2 Forms	
1099 Forms	
Interest from Banks etc.	
Dividends	
Taxable (State) Refunds	
Alimony Received	
IRA Distribution	
Stock Sales (Broker House Year End)	
Pensions	
Real Estate Rental Income	
Unemployment Compensation	
Social Security Benefits	
Other Income	

SMALL BUSINESS EXPENSES	ANNUAL TOTAL
Total Income	
Advertising Expenses	
Car and Truck Expenses	
Make	
Model	
Year	
Total Business Miles	
Total Miles	
Commission Paid	
Contract Labor	
Equipment Purchases	
Insurance	
Legal & Professional Fees	
Office Expenses	
Repairs	
Supplies	
Taxes and Licenses	
Travel	
Office Rent?	
Meals	
Utilities	
Home Office (square feet)	
Total square foot of home?	
Home rent?	
Cell Phone Purchase	
Cell Phone Use	
Computer Purchase	
Internet Expense	
Tools Purchased	

SPOUSE	ANNUAL TOTAL
First Name	
Middle	
Last Name	
Date of Birth	
Social Security Number	
Occupation	
Telephone	
Email	

DEDUCTIONS	ANNUAL TOTAL
IRA Contributions	
Student Loan Interest Paid	
Medical Expenses	
Dental Expenses	
Prescription Expenses	
Real Estate Taxes Paid	
Auto Registration Paid	
Home Mortgage Interest	
Point Paid	
Church Contributions	
Misc. Contributions	
Goodwill (Bring Receipt)	

DEPENDENTS	ANNUAL TOTAL
First and Last Name	
Date of Birth	
Social Security Number	
Relation (son, daughter, niece, etc)	
Child Care Expenses	
Name & Tax ID # of Child Care Provider	
Address of Provider	
Phone Number	

UNREIMBURSED EMPLOYEE EXPENSES	ANNUAL TOTAL
Union Dues	
Uniforms	
Equipment & Supplies Purchased	
Parking and Toll Roads	
Travel for Work	
Total Miles Driven	
Work Related Miles Driven	

EDUCATION	ANNUAL TOTAL
Education Expenses (include 1098T form)	
Name of Institution	
Address	
Tuition	
Books	
Supplies	
Parking	
Lab Fees	

RENTAL PROPERTY EXPENSE	ANNUAL TOTAL
Rents Received	
Advertising Expense	
Auto & Travel Expense	
Cleaning & Maintenance	
Commissions	
Insurance	
Legal & Professional Fees	
Management Fees	
Mortgage Interest Paid	
Other Interest Paid	
Repairs	
Supplies	
Taxes	
Utilities	
HOA Expense	

BANK INFO	ANNUAL TOTAL
Bank Name:	
Account #:	
Routing:	

OTHER	ANNUAL TOTAL
Did you buy a car?	
Make, Model and Year	
Purchase Price	
Sales Tax	

\_\_\_\_\_  
 All the items are true and correct (signed)

\_\_\_\_\_  
 Date