

UNITED STATES PERSONAL INCOME TAX ORGANIZER



**ZOE KLEIN
& COMPANY**

1240 BAY STREET,
SUITE 401,
TORONTO, ON M5R 2A7
TEL 416.323.3709
FAX 416.323.3406
EMAIL OFFICE@ZOEKLEIN.CA
WWW.ZOEKLEIN.CA

ACCOUNTING SERVICES

PERSONAL INFORMATION:

You	Your Spouse
Name (with middle initial)	Name (with middle initial)
Social Security Number	Social Security Number
Address	Address (if different)
Zip Code	Zip Code
Phone/Fax	Phone/Fax
Email	Email
Occupation	Occupation

NEW CLIENTS

You	Your Spouse
Birth Date	Birth Date
Preferred Filing Status	<input type="checkbox"/> Single
<input type="checkbox"/> Married Filing Jointly	<input type="checkbox"/> Head of Household (with qualifying person)
<input type="checkbox"/> Married Filing Separately	<input type="checkbox"/> Qualifying Widow(er) with dependant child

New clients: please provide copies of last years US 1040, State, and Local income tax returns (or the last returns that were filed).

CATEGORIES

You	Your Spouse
<input type="checkbox"/> United States Citizen	<input type="checkbox"/> United States Citizen
<input type="checkbox"/> Green Card Holder	<input type="checkbox"/> Green Card Holder
<input type="checkbox"/> Resident Alien	<input type="checkbox"/> Resident Alien
<input type="checkbox"/> Non-Resident Alien	<input type="checkbox"/> Non-Resident Alien
<input type="checkbox"/> Live in Canada / Work in U.S. (Commuter)	<input type="checkbox"/> Live in Canada / Work in U.S. (Commuter)
<input type="checkbox"/> I'm Not Sure	<input type="checkbox"/> I'm Not Sure

United States Visa type and date issued (if applicable)

Canadian Visa type and date issued (if applicable)

Non-Resident Aliens - days present in U.S. ... this year: last year: year before:

This is a guide intended to assist you in preparing for income tax filing.

It does not necessarily include everything that may be applicable in your specific situation.

We need a copy of your last filed income tax return (if we did not prepare it) and a recent notice of assessment or reassessment.

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DEPENDANT INFORMATION

Name			
Birth Date			
Relationship			
Social Security # or ITIN			
Income			
Months Lived With You			
U.S. Citizen or			
Resident Alien?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

Did your marital status change during the year? Yes No

If yes, indicate date of change.

Did you live apart from your spouse for the entire year? Yes No

Does your spouse itemize deductions on a separate return? Yes No

Do you want \$3 to go into the Presidential Election Campaign Fund? Yes No *(Won't change refund)*

Were you or your spouse enrolled as a full-time student during the year? Yes No

Were you or your spouse legally blind or permanently and totally disabled at any time during last year?
 Yes No

Did you pay childcare expenses? Yes No

If yes, indicate childcare provider's name, address and tax ID number (SSN or EIN).

Did you pay any educational tuition or fees for you or your dependant? Yes No

Did you receive a \$250 Economic Recovery Payment during the year? Yes No

DEDUCTION FOR NEW MOTOR VEHICLE TAXES

Did you or your spouse pay state or local sales or excise taxes * for the purchase of a new motor vehicle *after Feb. 16, of last year and before Jan. 1, * (can increase Standard Deduction)?

Yes No

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FOREIGN FINANCIAL ACCOUNTS

Did you have more than \$10,000 in foreign (non-U.S.) bank or financial accounts at any time during the year? Yes No

If yes, Form TD F 90-22.1 should be filed (received, not postmarked) with the U.S. Department of the Treasury by June 30. If you want us to complete this form for you, please provide name and addresses of financial institutions, account numbers and types, and maximum values of each account during the year.

Name / Addresses Of Financial Institutions
.....
Account Numbers And Types
.....
Values Of Each Account
.....

Do you have a Canadian RRSP or RRIF? Yes No

If yes, provide name and addresses of financial institutions, account numbers, and closing value of each account on Dec. 31, (in CDN \$) for preparation of IRS Form 8891.

Name / Addresses Of Financial Institutions
.....
Account Numbers
.....
Closing Value Of Each Account On Dec. 31, (In Cdn \$)
.....

FIRST-TIME HOMEBUYER CREDIT

Are you a first-time home buyer? Yes No

Have you owned a principal residence at any time during the three years prior to the date of purchase of your new home? Yes No

Are you a long-time homeowner buying a replacement principal residence? Yes No

Did you own and use the previous home as a principal residence for at least five consecutive years of the eightyear period ending on the date of purchase of the new home? Yes No

Did you purchase the new home before April 30, and close the sale before Sept. 30 ?
 Yes No

Please provide details regarding the purchase of the new home including address, date purchased, purchase price, etc. Also provide details regarding disposition of old home including date sold and gain on sale.

New Home Address	Old Home Address
.....
.....
.....
Date Purchased	Date Sold
.....
Purchase Price	Selling Price
.....

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INCOME & EXPENSES

EMPLOYMENT & OTHER INCOME

- W-2 forms
- Pensions and annuities
- Retirement plan distribution -Form 1099-R
- Partnership, trust, S-Corp income -Sched. K-1
- Miscellaneous income - Form 1099-MISC
- Alimony received
- Pay for jury duty
- Gambling/lottery winnings
- Prizes or awards
- Scholarships and fellowships
- State and local income tax refunds
- Unemployment compensation -Form 1099-G

INVESTMENT INCOME

- Interest income -Form 1099-INT or 1099-OID
- Dividend income - Form 1099-DIV
- Capital gains/brokerage transactions - Form 1099-B and confirmation slips

HOMEOWNERS AND RENTERS

- Mortgage interest - Form 1098 and qualified mortgage insurance payments
- Sale of home or other property -Form 1099-S
- Real estate taxes paid
- Rent paid
- Moving expenses

CASH GIFTS

Did you make cash gifts to any one person worth more than \$13,000? Yes No

EXPENSES & DEDUCTIONS

- Student loan interest paid
- Education expenses
- Auto - personal property tax paid
- Charitable donations - provide bank record, cancelled check or receipt for all amounts
- Unreimbursed job expenses (travel, uniforms, union dues, subscriptions, etc.)
- Job hunting expenses
- Investment expenses
- Childcare expenses
- Alimony paid

- Tax return preparation fees
- Receipts for medical/dental expenses, including premiums to Medicare D
- Casualty/theft losses

ALSO PROVIDE...

- Estimated tax payments made for the year
- IRS or State correspondence and assessment notices
- Mailing labels from IRS or State
- Receipts for IRA, Keogh, and other retirement plan contributions
- Business income and expense documents
- Rental income and expense documents

FOREIGN TAX CREDIT

Did you pay tax to a foreign country for income earned outside the United States? Provide details and a copy of the foreign tax return.

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ADDITIONAL ITEMS

This Personal Tax Organizer is not intended to be a complete list. Please provide details regarding any other income or expenses not listed above.

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