Form 1040 Individual Income Tax Organizer

**New and Returning Clients should use the Organizer on the next page to provide the information required to complete and file Federal & State Individual Income Tax Return.**

This is a simplified organizer we developed to gather the basic information required to complete your tax return with confidence you have provided everything necessary, including changes to your circumstances.

Please visit our website: nwatax.net/tax-forms-and-resources/ for additional forms to assist you in providing information to complete your tax return. Thank you for taking the time to fill out these organizers. The organizers help to ensure we have complete and accurate information to prepare your tax return.

**Returning Clients should ONLY complete the information on Page 1 that is new or changed**. DO NOT enter contact and identifying information that has not changed.

**New Clients should complete ALL of Page 1.**
You may feel it is redundant as you have provided your last filed tax return. Some information required is not visible on a tax return, including: dates of birth and drivers' license information.

**All Clients:**
Gather your Tax Information before you start to complete this Organizer. Please review every page, section, line and box so you do not forget important information. This organizer should takes most people a few minutes to complete. More complicate returns could take an hour or more. If it is taking you longer, or you are becoming frustrated, please see below help options.
If you still have questions,

Call or text our office and ask for assistance: 360-694-8206
Email: nwatax@parse.atomanager.com
Secure Portal: wwww.portal.nwatax.net

**Itemized Deductions:** Many taxpayers do no benefit by providing the traditional Itemized Deductions (mortgage interest, real estate taxes, medical, charity or tithing) because that add up to less than the **"Standard Deduction." The Standard Deduction** is an automatic deduction everyone can use without having to find and list all the Itemized Deductions. If you are unsure if your Itemized Deductions will total more than your Standard Deduction, please see our Form 1040 - Sch A - Itemized Deduction Organizer, which can be found here: docs.nwatax.net/Schedule-A-Organizer.pdf

Northwest Accounting & Tax Service

# Northwest Accounting & Tax Service

Form 1040 Individual Income Drop Off Form

202_

Mark the Following with "X" New Client: ____ Returning Client: ________

**New Client:** Complete Page 1 in-full. Provide last filed tax return.

**Returning Client:** ON PAGE 1, ONLY list YOUR NAME, and any New or Changed information.

**All Clients:** Since your last filed tax return, have you: Been Married, Divorced, Widowed? ________

Added/Removed a Dependent?(Y/N) ________ Name of Added or Removed Dependent: ________

**Complete This Form And Provide With Your Tax Forms (W-2, 1099, 1098, 1095, K-1, etc)**

**Deliver This Form and All Other Tax Documents and Information at One Time and in the Same Manner**

## SECTION 1 - IDENTIFICATION INFORMATION

| **Primary Taxpayer** | | **Spouse** (Include Name, SSN & DOB even if filing separately) | |
|---|---|---|---|
| **Social Security #:** | | **Social Security #:** | |
| **First Name:** | | **First Name:** | |
| **Middle Name:** | | **Middle Name:** | |
| **Last Name:** | | **Last Name:** | |
| **Date of Birth:** | | **Date of Birth:** | |
| **Cell Phone #:** | | **Cell Phone #:** | |
| **Email Address:** | | **Email Address:** | |
| **Occupation:** | | **Occupation:** | |
| **Full-Time Student? (Y/N):** | | **Full-Time Student? (Y/N):** | |
| **Legally Blind? (Y/N):** | | **Legally Blind? (Y/N):** | |
| **Dependent of Someone Else? (Y/N)** | | **Dependent of Someone Else? (Y/N)** | |
| **Driver's License:** **State:** | | **Driver's License:** **State:** | |
| Number: | | Number: | |
| Issue Date: | | Issue Date: | |
| Expiration Date: | | Expiration Date: | |

Upload Copy of Driver's License to portal or give to receptionist to scan

| | | | |
|---|---|---|---|
| **IRS Identity Protection PIN? If Yes, #** | | **IRS Identity Protection PIN? If Yes, #** | |
| **Date of Death:** | | **Date of Death:** | |

**Mailing Address:** Street: ________ Apt.: ________

City: ________ State: ________ Zip Code: ________

**In Care of Name: (if a guardian appointed or taxpayer is deceased):** ________

## SECTION 2 - DEPENDENTS

**Any Dependents? If so, how many?** # ________ If more than 3, include on page 5, or by attachment.

| | **Dependent 1** | **Dependent 2** | **Dependent 3** |
|---|---|---|---|
| First Name: | | | |
| Middle Name: | | | |
| Last Name: | | | |
| Social Security #: | | | |
| Relationship: | | | |
| Date of Birth: | | | |
| Is This A New Dependent? (Y/N) | | | |
| Rotates Years with other Parent? (Y/N) | | | |
| Over 18, under 24 & Fulltime Student? (Y/N) | | | |
| IRS Identity Protection PIN? If Yes, # | | | |
| **If Under Age 13 at December 31 of Return Year, did you pay After School or Daycare Expenses?** | | | |
| Amount Paid ($$): | | | |
| Caregiver name: | | | |
| Caregiver EIN/SSN: | | | |

## SECTION 3 - IRS Tax Forms

**Below list the # of Each Form Type - List By Sender & Attach the Form (no staples please)**

(DO NOT list by dollar amount below. IRS Forms sent to you were also sent to the IRS. Therefore, we need the actual Forms.)

### Wages & Retirement Income IRS Forms:

**Form W-2 (Wages & Salary):** # ______ [Indicate Current Employer with "(C)"]

1) ______ 3) ______

2) ______ 4) ______

Tips received Yes/No ______ Overtime Earned Yes/No ______

**Form 1099-R (Retirement):** # ______ Any "Qualified Charitable Distributions"?(Y/N) ______

1) ______ 3) ______

2) ______ 4) ______

**Form 1099-SSA (Social Security):** # ______

### Investment Income IRS Forms: (For Consolidated 1099s with Interest, Dividends & Cap Gain, list once with Broker & Acct #)

**Consolidated 1099 (Int, Div & Sales)** # ______ If more than 4, List on Page 5

1) ______ 3) ______

2) ______ 4) ______

**Form 1099-INT (Interest):** # ______ If more than 4, List on Page 5

1) ______ 3) ______

2) ______ 4) ______

**Form 1099-DIV (Dividends):** # ______ If more than 4, List on Page 5

1) ______ 3) ______

2) ______ 4) ______

**Form 1099-B (Sale of Investments):** # ______ If more than 4, List on Page 5

1) ______ 3) ______

2) ______ 4) ______

### Business Ownership, Estates & Trusts

**1099-Misc or 1099-NEC** # ______ If more than 4, List on Page 5

1) ______ 3) ______

2) ______ 4) ______

*For **Non-employee Compensation**, provide related Income & Expense summary, or complete our Sch C Organizer

*For **Rental** income, provide related Income & Expense summary, or complete our Sch E Organizer

*For **Farm** income, provide related Income & Expense summary, or complete our Sch F Organizer

**Form K-1 (P'Ship, S Corp, Trust):** # ______ If more than 4, List on Page 5

1) ______ 3) ______

2) ______ 4) ______

### Other Miscellaneous IRS Tax Form Transactions:

**Form 1098-E Student Loan Int:** # ______ If more than 2, List on Page 5

1) ______ 2) ______

**Form 1099-G** **(Refunds or Unemployment):** # ______ If more than 2, List on Page 5

1) ______ 2) ______

**Form 5498 (IRA Contributions)** # ______ If more than 2, List on Page 5

1) ______ 2) ______

**Form 5498-SA (HSA Contributions)** # ______ If more than 2, List on Page 5

1) ______ 2) ______

**Form 1099-SA (HSA Distributions)** # ______ If more than 2, List on Page 5

1) ______ 2) ______

## SECTION 4 - Education; Alimony; Gambling; Misc.

**Were you an Educator with out-of-pocket classroom expenses? If Yes, amount** ($300 or less): $ ______

**Did you, or any Dependents, pay College Tuition? If Yes, attach Form 1098-T from the college.** # ______

**Contributions To 529 Qualified Tuition Plan:** (Attach Statement From State Plan or other confirmation)

Contribution By (which spouse): ______ Contribution For (Name): ______

Contribution By (which spouse): ______ Contribution For (Name): ______

**Distributions From 529 Qualified Tuition Plan:** (Attach **Form 1099-QTP** or other confirmation)

Distribution for (Child Name): ______ All Used for Edu Exp? If Not, Excess Amt: $ ______

Distribution for (Child Name): ______ All Used for Edu Exp? If Not, Excess Amt: $ ______

**Did you buy/sell Real Estate, Collectibles, Timber, or other Investments in tax year NOT INCLUDED on an IRS Form 1099, on an attached Sch C, Sch E, or Sch F?** (Yes/No) ______

**If Yes**, attach Closing Statements, Form 1099-S, or other Sales Proceeds and Cost Basis information.

**Did you buy/sell virtual currency NOT INCLUDED in the above IRS Forms?** (Yes/No) ______

**If Yes**, attach summary of all gains and losses of virtual currencies for the year.

**Did you have authority over or receive any income from foreign sources?** (Yes/No) ______

**If yes**, please attach all forms, statements or confirmations

**Alimony: (Paid or Rec'd mark "X")** I Paid: ____ I Received: ____ Amount: $ ______

Ex-spouse Name ______ Ex-spouse SSN: ______

Date of Divorce: ______ (Prior to 12/31/2017)

**Form W2-G (Gambling Income):** # ______ If more than 2, List on Page 5

1) ______ 2) ______

**Gambling Income NOT INCLUDED on Forms W2-G:** ______ Amount: $ ______

**Gambling Losses (Cannot exceed total gambling income included ):**

By Primary or Spouse: Amount: $ ______

By Primary or Spouse: Amount: $ ______

## SECTION 5 - ESTIMATED TAX PAYMENTS

**Did you make any Quarterly Estimated Tax Payments?** ______

(Paid By direct check or on-line. DO NOT include amounts withheld on W-2, 1099R, 1099-SSA, or other IRS Form above.)

| Period: | Date paid: | Amount Paid: | Period: | Date paid: | Amount Paid: |
|---|---|---|---|---|---|
| IRS 1st Qtr. | | $ | State 1st Qtr. | | $ |
| IRS 2nd Qtr. | | $ | State 2nd Qtr. | | $ |
| IRS 3rd Qtr. | | $ | State 3rd Qtr. | | $ |
| IRS 4th Qtr. | | $ | State 4th Qtr. | | $ |

## SECTION 6 - INCOME TAX REFUNDS OR INCOME TAX PAYMENTS

**If DUE a TAX REFUND, Direct Deposited?(Y/N)** ____

**If Yes, Account Information:** Financial Institution/App Name: ______

Routing Number: ______

Account Number: ______

## SECTION 7 - COMPLETED TAX RETURN SIGNATURE AND DELIVERY

**Completed return will be delivered to you in the manner received, unless you request a different method.**

Method of Delivery: Portal: ____ In Person Review*: ______

In Person Pick Up: ____ *15 min appt required

## SECTION 8 - PAYMENT OF TAX PREPARATION FEES

**Completed tax return will NOT be filed until all Fees are paid and Signature Forms received.**

Easily upload documents, pay your fee and e-sign through the Secure Portal: www.portal.nwatax.net
Please visit our website for any additional forms and organizers.

## ADDITIONAL INFORMATION & QUESTIONS?

**Do you have other possible income or expenses not included in previous pages? (Or Excess Form List)**

**Do you have any questions about this year's tax return or taxes in general?**

I/We agree that the information is correct to the best of our ability and will provide documentation supporting the above information for our tax return. We understand that if this is a drop off, processing time may take up to 2 weeks before the return is completed and ready for pickup. If there is any missing information, that will cause delays in completion of the tax return.

| Taxpayer Signature | Date | Spouse Signature | Date |
|---|---|---|---|