



January, 2020

Greetings:

Thank you for choosing Spinelli CPA, PC as your tax advisor for 2019! We appreciate your business.

TAX ORGANIZER IS HERE

Enclosed is a worksheet that you may use as a guide in gathering your tax return information. Please update phone numbers and email addresses as well as any information that may have changed. If you have specific questions or concerns please include them with your tax information.

ELECTRONIC TAX ORGANIZER

If you prefer an electronic option, we are happy to offer you My1040Data, a new electronic tax organizer. This internet-based option will guide through a series of questions and provide you with an understanding of which tax documents we will need to prepare your return. Additionally, this new tool will provide you with the ability to upload your tax documents to us in a secure manner. Call our office at (508)365-6522 and ask for Suzanne to provide you with a Username and Password.

I HAVE MY TAX INFORMATION, HOW DO I GET STARTED.

Appointments - To set up an appointment to meet with Karen Spinelli, call our office at (508)365-6522. Let us know if you prefer to meet in our Worcester office or Leominster satellite office. If this is the first year that we are preparing your return, we will ask you to bring a copy of your tax return from last year.

Mailing Information - You may mail your tax return information to our Worcester office. The address is:

Spinelli CPA, PC
146 West Boylston Drive, Suite 302
Worcester, MA 01606

Drop Off Information – You may drop off your tax return information to either the Worcester address shown above or our Leominster satellite location located at

119 Merriam Avenue, 2nd Floor
(Antonioni Law Office)
Leominster, MA 01453

Client Portal – A portal will allow you to send us your documents in a secure manner. If you prefer this option, call our office and ask for Suzanne at (508)365-6522. She can provide you with a Username and Password.

PLEASE NOTE – *If you do not have a scheduled appointment, we must have your tax information before March 15, 2019. After that date, an extension may need to be filed.*



146 West Boylston Drive, Suite 302
Worcester, MA 01606
(508)365-6522

119 Merriam Avenue, 2nd Floor
Leominster, MA 01453
(by appointment only)

2019 Tax Organizer

Please use this worksheet to gather your personal tax return information. If this is the first year that we are preparing your return, please provide with a copy of your tax return from last year including depreciation schedules if applicable.

Last Name: _____
First Name: _____ SS#: _____ DOB: _____

Last Name (spouse): _____
First Name (spouse): _____ SS#: _____ DOB: _____

Address: _____

If you changed residence during the year, please provide period of residence at each address.

CONTACT INFORMATION

Email address: _____

Email address (spouse): _____

Home phone: _____

Cell phone: _____

We will be communicating with you through email and/or phone. Check here if you do not have email or would prefer for us contact you by phone _____.

DEPENDENTS

Any new dependents for 2019? If yes, please provide information:
Please note if there are dependents that should not be claimed this year.

Name	Date of Birth	Social Security #	Relationship

Note – if your dependents have income, please provide us with documentation.

Are there dependents in college this year? If yes, please provide name and 1099-T for tuition.

CHILD CARE EXPENSES – Please bring any statements from your child care provider.

Child’s name for which expenses were paid: _____
 Total paid to child care facility: _____
 Name of child care provider: _____
 Address of child care provider: _____
 Tax ID # of child care provider: _____

(This includes day camps for dependents.)

Did you use funds from a Section 125 Plan at work to pay for daycare expenses? YES NO

ESTIMATED TAX PAYMENTS – (please provide copies of cancelled checks) Federal and State

Name of Tax Agency	Amount Paid	Date Paid

INCOME RECEIVED – Please indicate income received from any of these sources and provide documentation:

- Salary and Wages Partnership or S Corp. Social Security Cancelled Debt
- Interest Rental or Farm Sale of Property Sale of Stocks
- Dividends/Cap. Gains Estate or Trust Sole Proprietor HSA Withdrawals
- 1099-R Pension Dist. 1099-MISC Business HSA Contributions
- IRA Distrib./Rollover Unemployment Gambling/Prizes
- Roth IRA Conversion 1099C or 1099A Alimony Paid or Received

Do you have income from other states? YES NO

MAJOR LIFE CHANGES – Please indicate if you spent money in any of these categories:

- Adopted a Child Set up a Trust
- Moved Purchased a Home/Sold a Home
- Paid Student Loan Interest Unreimbursed Employee Business Expenses
- Gave gifts over \$15,000 in 2019 per person Contributed/Converted to a Roth IRA
- Expenditures for renewable energy (solar, etc.) Exercised Stock Options
- Disbursements from Retirement Accounts

ITEMIZED DEDUCTIONS – Please check all that apply and provide documentation.

Medical Expenses – enter amounts paid and unreimbursed

- | | |
|---|---|
| <input type="checkbox"/> Doctors, dentists, prescriptions | <input type="checkbox"/> Long-term Care Insurance |
| <input type="checkbox"/> Insurance premiums for medical and dental care | <input type="checkbox"/> Mileage |
| <input type="checkbox"/> Eyeglasses, contacts, hearing aids, dentures | <input type="checkbox"/> Other |

Taxes Paid

- | | |
|--|---|
| <input type="checkbox"/> Real Estate for personal residence | <input type="checkbox"/> Excise Tax |
| <input type="checkbox"/> Real Estate Tax for Land/Vacation Home/Other Properties | <input type="checkbox"/> Other taxes paid to states |
| <input type="checkbox"/> Sales Tax paid on vehicles, boats, etc. | |

Interest Paid

- Home Mortgage/Equity Loan
- Mortgage interest paid to an individual
- Did you refinance a mortgage or take a home equity loan in 2019

Charitable Contributions

- Cash and Checks
- Clothing, furniture, etc. (itemize if over \$250)
- Mileage – number of miles driven for volunteer activities

If you had gambling winnings, did you have any losses? If yes, how much? _____

FINAL QUESTIONS:

- | | | |
|---|-----|----|
| Do you/spouse have investments in foreign bank accounts? | YES | NO |
| Did you sell, acquire or exchange Bitcoin or other virtual currencies or engage in any sales or exchanges in Bitcoin or other virtual currencies? If yes, please provide information. | YES | NO |
| Have you been a victim of Identity Theft? If yes, bring letter with PIN issued by IRS. | YES | NO |
| Do you want Direct Deposit of your refund/auto withdrawal of monies owed? | YES | NO |

If you answered yes, please provide us with the following information:

Name of Bank: _____	Checking or Savings _____
Account Number: _____	Routing Number: _____

- | | | |
|---|-----|----|
| If you are older than 70 ½, have you taken your Required Mandatory Distribution? | YES | NO |
| Did you make a qualified charitable distribution (QCD) from your retirement account to give to a charity? | YES | NO |
| Did you and your family have health insurance for all of 2019? | YES | NO |
| Please provide tax forms. If you received health insurance through the Marketplace, please provide 1095-A | | |
| Were you notified by the IRS (other taxing authority) of changes in prior year returns? | YES | NO |

Did you acquire or sell a business in 2019?	YES	NO
Do you own rental property?	YES	NO
If you answered yes, we can provide you with our Schedule E Worksheet to help you in coordinating information for your return. You may call our office or download a copy from our website.		
Are you self-employed or an independent contractor?	YES	NO
If you answered yes, we can provide you with our Schedule C Worksheet or you may download a copy from our website.		
May the IRS or other taxing authority discuss the tax return with us?	YES	NO
Do you have an office in your home?	YES	NO
Did you sell your personal residence?	YES	NO
If yes, did you live in it for two of the five prior years prior to sale?	YES	NO
If yes, please provide settlement sheet (HUD Statement).		
Did you refinance existing loans on your personal residence or other real estate?	YES	NO
If yes, please provide settlement sheet.		
Did you have any stocks or securities that became worthless?	YES	NO
Were you granted or did you exercise any stock options?	YES	NO
If yes, please provide details.		
Did you make any energy efficient improvements, purchase solar or geothermal heat?	YES	NO
Did you incur expenses as an elementary or secondary teacher? How much?	YES	NO
Do you have a household employee?	YES	NO

I (we) have submitted this information for the sole purpose of preparing my (our) tax return(s). Each item can be substantiated by receipts, cancelled checks or other documents. This information is true, correct and complete to the best of my (our) knowledge.

Taxpayer Signature: _____ Date: _____

Spouse Signature: _____ Date: _____

Thank you for choosing Spinelli CPA, PC as your tax advisor. We value your business and are looking forward to working with you.

Sincerely,

Karen Spinelli, CPA
President
Spinelli CPA, PC