



212 TAX / JLD TAX INDIVIDUAL ORGANIZER

How did you hear about 212 Tax or JLD Tax & Accounting LLC?

LEAVE BLANK ANYTHING THAT DOESN'T APPLY OR IS THE SAME AS LAST YEAR

Are you eligible to be claimed as a dependent on another tax return?

Last Name
 First Name
 Middle Name
 Social Security #
 Date of Birth
 Occupation
 Blind or Disabled?
 Are you a veteran?
 Cell Phone #
 Home Phone #
 Home Address
 Apt #
 City
 State
 Zip
 E-mail address

TAXPAYER INFO:		SPOUSE (if applicable):	YES / NO
			Are you filing as:
			Single
			Married Joint
			Need to File Married Filing Separate (we can discuss)
			Head of Household
			NAMES
			MUST MATCH
			SOCIAL SECURITY
			CARDS EXACTLY
Blind or Disabled?	YES/NO	YES/NO	
Are you a veteran?	YES/NO	YES/NO	

Have you been a victim of identity theft ?	YES/NO
If Yes, please provide your IRS 6-digit PIN # :	

Did you change your state residency in 2022?	YES/NO
If yes, when did you move and from what state?	

DEPENDENTS INFO:

First Name			
Middle Name			
Last Name			
Social Security #			
Date of Birth			
Relationship			
Full Time Student?	YES/NO	YES/NO	YES/NO

If you would like direct deposit of your refund or your taxes paid by ACH, please provide:			
Bank Routing #		Bank Account #	
Checking or Savings?		Bank Name	

Were you notified by the IRS, State and/or City of any change to any prior tax return?	YES/NO
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If you are not coming back in to pick up your tax returns, how do you want them sent to you?

Online Portal	E-mail	Messenger - \$ 25	Priority Mail - \$ 10
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Please provide us with originals or copies of all W-2s, 1099s, 1098s, last year's tax returns (if you are a NEW client) and any other paperwork that affects your taxes.

ALL INFORMATION ALWAYS KEPT CONFIDENTIAL

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Driver's License Detail

Taxpayer:

Issuing State	
License Number	
Issue Date	
Expiration Date	
NY Document #*	

Spouse:

Issuing State	
License Number	
Issue Date	
Expiration Date	
NY Document #*	

State Identification Card Detail

Taxpayer:

Issuing State	
License Number	
Issue Date	
Expiration Date	
NY Document #*	

Spouse:

Issuing State	
License Number	
Issue Date	
Expiration Date	
NY Document #*	

By completing this tax organizer and signing below, you certify that all of the information entered onto this tax organizer (all sheets & tabs) is true and complete to the best of your knowledge and belief. We will not audit or verify the data you submit, although we may ask you to clarify it and furnish us with additional information. You are authorizing this information to be used in the preparation of your income tax returns by 212 Tax / JLD Tax & Accounting LLC.

You are also authorizing 212 Tax / JLD Tax & Accounting LLC to mail and e-mail you information and newsletters. If you would like to be removed from our mailing list at anytime please send an e-mail to jldonenfeld@jldtax.com or call us at 201-604-2432.

TAXPAYER SIGNATURE: DATE:

SPOUSE SIGNATURE: DATE:

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YES	NO

- 1) Did you incur any child care expenses?
If yes, please include **Caregiver/Daycare address, tax ID or SS#, and how much paid** for **EACH** child.

- 2) Did you pay college tuition for you, your spouse and/or a dependent?
If yes, please provide form **1098-T** and **how much you paid out-of-pocket** for books & school supplies.

- 3) If you are a **New Jersey resident**, are any of your dependents in college?
If yes, **how many** of your dependents are in college?

- 4) Did you have any student loan interest?
If yes, please provide **how much** and Form **1098-E**.

- 5) Did you contribute to a qualified State Tuition Plan (i.e. 529 plan)?
If yes, please provide the **amount contributed** and to which **State Plan**:

- 6) Did you pay any alimony?
If yes, please provide the **amount paid**, the **recipient's social security number**, and the **date of divorce**.

- 7) Do you own your primary residence?
If yes, please provide how much you paid in **real estate taxes** and **mortgage interest** and please provide **Form 1098**.
Real Estate Taxes Paid: _____ Mortgage Interest (Form 1098) _____
- 8) If you were NOT a full time resident of NY State, did you own/rent a home in NY State?

- 9) Did you live in New Jersey or New York and pay rent?
If yes, please specify the **state** and provide the **total amount paid in 2022**.

- 10) Did you contribute to a Traditional or Roth IRA or other retirement plan?
If yes, please provide the **amounts contributed** and **type of plan**: (don't include 401-K from work)
Type of plan: Traditional I.R.A. / Roth I.R.A. / Other _____ **Amount Contributed:** _____
- 11) Did you make any charitable contributions to qualified organizations?
If yes, please provide the **name of the organization contributed to** and the **amounts contributed**.
Please provide us with receipts (copies are fine) for any donation valued at \$ 250 or above.

- 12) Did you issue any household employees a W-2? If yes, please provide the W-2.

- 13) Did you make any quarterly estimated tax payments? (please do not include withholdings from W-2)
If yes, please the **dates, amounts paid, and who was paid (i.e., IRS or State, please specify which state)**.

	I.R.S.	New Jersey	N.Y. State	N.Y. City	Other State	Other State
April 15th 2022						
June 15th 2022						
Sept. 15th 2022						
Jan. 15th 2023						

- 14) Did you make any gifts of more than \$ 15,000 to any one US person?

- 15) Did you suffer any casualty loss in a federally declared disaster zone?

- 16) Did your total medical expenses during the year exceed 2% of your income?
If yes, please provide the total amount of expenses.

- 17) Did you make contributions to your HSA account and/or take distributions from it?
If yes, please provide us with your **5498-SA and/or 1099-SA form(s)**.

- 18) Did you receive any reimbursements for deductions (such as medical, moving expenses, etc.) claimed in prior years?
If yes, please provide the amount.

- 19) Did all members of your household have full year health insurance in 2022?
If you had part year insurance, please **provide the dates**. Please provide **Form 1095-A or 1095-B or 1095-C**.

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- 1) What was your immigration status last year and if it has changed, what is it now? [REDACTED]
(Non US Citizens/Non Green card holders may have to answer a few additional questions)

YES	NO
[REDACTED]	[REDACTED]
- 2) Did you receive any wages?
Please provide any **Form W-2s** received.
[REDACTED]
- 3) Did you pay any long-term care insurance premiums? (Form 1099-LTC)
[REDACTED]
- 4) Did you receive any interest or dividend income?
Please provide any **Form 1099 INT / 1099 DIV / 1099B / 1099 Consolidated** received.
[REDACTED]
- 5) Did you sell any stock or exercise or sell employee stock options? (whether you made money or not!)
If yes, please provide the details. (Type of options plan?)
[REDACTED]
- 6) At any time during the year, did you receive, sell, send, exchange or otherwise acquire any financial interest in any virtual currency, CRYPTO and/or N.F.Ts?
If yes, please provide a **break down of your sales** including the **cost basis**.
[REDACTED]
- 7) Did you receive any income from rental real estate in 2022?
If yes, please fill out and return page 6 of the organizer (RENTAL REAL ESTATE).
[REDACTED]
- 8) Did you receive any self employment income in 2022 (1099 NEC, 1099 MISC, 1099K)?
If yes, please fill out and return page 7 of the organizer (SELF EMPLOYED).
[REDACTED]
- 9) Do you receive any K1s? (1065, 1120s, 1041)
If yes, please provide the **K1s**.
[REDACTED]
- 10) Did you take any retirement distributions (IRA, 401K, Keogh, pension funds)? If yes, please provide Form 1099-R.
Did you have any retirement distribution taken COVID-19 related in 2020?
If yes, did you have tax liability extended over the 3 years?
[REDACTED]
- 11) Did you receive any social security benefits in 2022?
If yes, please provide **Form 1099-SSA**.
[REDACTED]
- 12) Did you sell any real estate (Personal Home or investments)?
If issued, please provide **Form 1099-S**.
[REDACTED]
- 13) Did you receive unemployment income?
If yes, please provide **Form 1099-G** (this can be downloaded from the state's website).
[REDACTED]
- 14) Did you purchase any goods that you did not pay sales tax on?
If yes, please provide the amounts.
[REDACTED]
- 15) Did you have any funds in foreign bank accounts?
If yes, please provide the maximum balance in the account during 2022 in USD. If over \$10,000, please provide the name and address of the bank.
Please also provide the **name of the account holder, account number and account type** (e.g., bank, securities, etc.)
[REDACTED]
- 16) Are you a signer on a foreign (non US) account?
[REDACTED]
- 17) Did any one foreign (non US) person give you \$100,000 or more?
[REDACTED]
- 18) Do you own any part of any foreign (non US) company and/or entity?
[REDACTED]
- 20) Did you earn any income outside of the U.S.?
If yes, please specify the **currency**, the **type** of income, the **amount earned**, and the **amount of taxes paid** (if any).
[REDACTED]
- 21) Did you receive alimony income?
If yes, please provide the **amount of alimony received** and the **date of divorce**:
[REDACTED]
- 22) Did you receive gambling winnings?
If yes, please provide the **amount** of gambling winnings and **Form W-2G**:
[REDACTED]
- 23) Did you receive cancellation of debt?
If yes, please provide the **amount** of cancellation of debt income and **Form 1099-C**:
[REDACTED]
- 24) Did you receive jury duty income?
If yes, please provide the **amount** of jury duty income received and **Form 1099-G** or **1099-MISC**, if received.
[REDACTED]
- 25) Did you receive any other income in 2022?
[REDACTED]

REMEMBER: ALL WORLDWIDE INCOME MUST BE REPORTED ON US TAX RETURNS

RENTAL REAL ESTATE

	Rental Property # 1	Rental Property # 2
Complete Address:		
Date Purchased:		
Purchase Price:		
Value of Building(s)/Land: NOT FMV (Check your Property Tax Statement)		
# of Days Rented Out:		
# of Days of Personal Use:		
Rental Income Received:		
2022 Capital Improvements:		
EXPENSES:		
Auto MILES driven (# of miles driven)		
Advertising & Marketing		
Association dues		
Travel		
Cleaning & Maintenance		
Commissions		
Insurance		
Legal & Professional fees		
Licenses & Permits		
Management fees		
Mortgage interest on form 1098		
Other interest		
Repairs (not capital improvements)		
Supplies		
Pest control		
Property Taxes		
Utilities		
Yard work & Snow removal		
Other _____		
Other _____		

Repairs can be related to electrical, heating/air conditioning, painting, plumbing & roofing
 Utilities can consist of electricity, heat, telephone, trash removal, water/sewer, internet/TV

Please be as specific as possible when classifying expenses

SELF EMPLOYMENT (OWN BUSINESS)

THIS SHEET IS FOR Taxpayers who are self-employed or SINGLE MEMBER LLCs.

Business Name:		Type of Business:		Tax ID (EIN #):	
EXPENSES (fill in only what applies to your business) :					
Advertising & Marketing		Did you make any payments that would require you to file a 1099? (payments of \$600 or more annually to Individuals and LLCs)			YES/NO
Bank Fees & Credit Card Merchant Fees		If YES, did you issue all required 1099s ?			YES/NO
Business Gifts (up to \$ 25 per client)		Did you pay health insurance premiums ?			YES/NO
Business MEALS		If YES, how much ?			\$ -
Commissions paid					
Contract Labor		INCOME			
Cost of Goods Sold (we can help with this)		Income on 1099-MISC or 1099-NEC			
Dues, Subscriptions & Memberships		Income on 1099-K (from credit card processors)			
Employee Benefits (specify type please)		Other SELF-EMPLOYED income (not on 1099s)			
Equipment Rent		TOTAL GROSS INCOME:			\$ -
Insurance (except for health, specify type)		Have you made purchases of the following items:			YES/NO
Interest paid (specify type please)		COMPUTERS, EQUIPMENT, PHONES, SOFTWARE & TABLETS			
Internet (not home office)		If yes, please provide the following details:			
Legal & Professional Fees		Item Description	Date Purchased	Price	
Licenses & Permits					
Office Expenses					
Office Rent (not home office)					
Office Supplies					
Other taxes (non payroll related)					
Payroll fees / services (Paychex, ADP, etc.)		HOME OFFICE EXPENSES:			
Payroll Taxes		Square Footage of Home Office EXCLUSIVELY used for business:			
Printing, copying, signs, etc.		Total Square Footage of Home:			
Repairs and Maintenance (not home office)		Total Rent Paid:			
Salaries paid to employees (provide W2's)		Total Insurance:			
Shipping, Postage & Messengers		Total Internet:			
Small tools & equipment (under \$ 500 each)		Total Repairs & Maintenance:			
Tax Preparation and Accounting		Total Telephone & Fax:			
Taxis & Ubers		Total Utilities:			
Telephone (Landline & Cellular monthly bills)		BUSINESS VEHICLE EXPENSES:			
Trade Publications		Make, Model, and Year of Car:			
Travel		Total miles driven during the year:			
Uniforms & Dry Cleaning of uniforms		Business miles (do not include commuting miles)			
Utilities (not home office)		Gas:			
Vehicle Rentals		Insurance & Registration:			
Miscellaneous expenses		Parking:			
Retirement Plan Contributions		Cleaning, Repairs, Maintenance:			
Additional Comments		Tolls:			
		Is the vehicle leased / financed / paid-off?			
		If financed/paid-off , please provide:			
		Date of Purchase			
		Purchase Price			
		Annual Car Loan Interest			
		If leased , please provide monthly lease payment:			
		If leased , please provide start date of lease :			
		If leased , please provide Fair Market Value :			
		Do you have another vehicle for personal use?			YES/NO