

2024	1040	US	Tax Organizer
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Chawla & Chawla PC
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Gaithersburg MD 20877

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 Fax number: **301-216-2727**
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Tax Return Appointment

Date:
 Time:
 Location:

This tax organizer will assist you in gathering information necessary for the preparation of your 2024 tax return. Please enter all pertinent 2024 information.

NOTE: If you claim the earned income credit, please provide proof that your child is a resident of the United States. This proof is typically in the form of: school records or statement, landlord or property management statement, health care provider statement, medical records, child care provider records, placement agency statement, social service records or statement, place of worship, Indian tribal office statement, or employer statement.

NOTE: If your child is disabled, please provide one of the following forms of proof of disability: doctor statement, other health care provider statement, or social services agency or program statement.

CLIENT INFORMATION

Taxpayer

Spouse

First name and initial.....		
Last name.....		
Title/suffix.....		
Social security number.....		
Occupation.....		
Date of birth (m/d/y).....		
Date of death (m/d/y).....		
1=blind.....		
Home phone.....		
Work phone.....		
Work extension.....		
Cell phone.....		
E-mail address.....		

Address

In care of.....
 Street address.....
 Apartment number.....
 City.....
 State.....
 ZIP code.....

DEPENDENTS

Dependent No.

Dependent No.

First name.....		
Last name.....		
Title/suffix.....		
Date of birth (m/d/y).....		
Date of death (m/d/y).....		
Date of adoption (m/d/y).....		
Social security number.....		
Relationship.....		
Months lived at home.....		

Dependent No.

Dependent No.

First name.....		
Last name.....		
Title/suffix.....		
Date of birth (m/d/y).....		
Date of death (m/d/y).....		
Date of adoption (m/d/y).....		
Social security number.....		
Relationship.....		
Months lived at home.....		

Please enter all pertinent 2024 information. If you have attached a government form for an item, check the box and do not enter a 2024 amount.

WAGES, SALARIES AND TIPS

Employer name:

2024 Amount

2023 Amount

Attach Forms W-2

INTEREST INCOME

Payer name:

Attach Forms 1099-INT

DIVIDEND INCOME

Payer name:

Attach Forms 1099-DIV

PENSIONS, IRA AND GAMBLING INCOME

Payer name:

Attach Forms 1099-R & W-2G

Winnings not reported on W-2G.....

Total gambling losses.....

OTHER GOVERNMENT FORMS - INCOME

Form 1099-B - Sales of stock (also include transaction history)

Form 1099-MISC - Miscellaneous income

Form 1099-K - Merchant card and third party network payments

Form 1099-S - Sales of real estate (also include closing statements)

Attach Forms 1099

Form 1099-G - State tax refunds.....

Attach Forms 1099

Taxpayer:

Form SSA-1099 - Social security benefits

Form 1099-G - Unemployment compensation

Form 1099-Q (529 Plan)

Form 1099-QA/5498-QA (ABLE Accounts)

Attach Forms 1099

Spouse:

Form SSA-1099 - Social security benefits

Form 1099-G - Unemployment compensation

Form 1099-Q (529 Plan)

Form 1099-QA/5498-QA (ABLE Accounts)

Attach Forms 1099

Tax Organizer

Other: _____

Self-employed, SEP, SIMPLE, & qualified plan contributions (1=maximum)

[illegible]

Form 1098-T - Tuition and related expenses

Attach Forms 1098	

Form 1095-A - Health Insurance Marketplace Statement

Attach Forms 1095	

Other adjustments to income:

Other adjustments to income:

Other: _____

[illegible]

State income taxes - 1/24 payment on 2023 state estimate

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2024 Amount

2023 Amount

[illegible]

Attach Tax Notice

Attach Forms 1098

Attach Forms 1098	

NOTE: No deduction is allowed for cash or check contributions unless the donor maintains a bank record, or a written communication from the donee, showing the name of the organization, contribution date(s), and contribution amount(s).

NOTE: No deduction is allowed for contributions of clothing and household items that are not in good used condition or better, in addition, a deduction for any item with minimal monetary value may be denied.

Investment expenses.....

Estate tax, section 691(c)

Unreimbursed employee expenses:

[illegible]

Other: _____
