



**Attach Form(s) W-2 – Wages, Salaries, Tips and Other Compensation**

<b>Employer Name</b>	<b>2018 Amount</b>
_____	_____
_____	_____
_____	_____

**Attach Form(s) 1099-R – Distributions from Pensions, Annuities, Retirement, Profit-Sharing, IRAs, etc**

<b>1099-R Payer Name</b>	<b>2018 Amount</b>
_____	_____
_____	_____
_____	_____

**Attach Form(s) SSA-1099 – Social Security/Railroad Benefits**

	<b>Taxpayer</b>	<b>Spouse</b>
Social Security Benefits from Form SSA-1099 .....	_____	_____
Railroad Retirement Benefits from Form RRB-1099 .....	_____	_____
Medicare B premiums withheld .....	_____	_____
Medicare C premiums withheld .....	_____	_____
Medicare D premiums withheld .....	_____	_____

**Attach Form(s) 1099-MISC – Miscellaneous Income**

**1099-MISC Payer Name**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Attach Form(s) 1099-INT – Interest Income**

<b>1099-INT Payer Name</b>	<b>2018 Amount</b>
_____	_____
_____	_____
_____	_____
_____	_____

**Attach Form(s) 1099-DIV – Dividend Income**

<b>1099-DIV Payer Name</b>	<b>2018 Amount</b>
_____	_____
_____	_____
_____	_____
_____	_____

**Attach Form(s) 1099-B, 1099-S – Sales of Stocks, Bonds, Real Estate, etc**  
 Attach all stock sale transaction information, including initial cost information.

**Other Government Forms to attach:**  
 Form(s) 1099-G – Certain Government Payments, Schedule K-1s – Partnership, S-Corporation, Trust or Estate Income, Form(s) W-2G – Gambling or Lottery Winnings, Form(s) 1099-Q – Payments from Qualified Education Programs

**Other Income:**  
 Alimony, jury duty, unreported tips, disability income, etc. Business, rentals, farms: Attach income and expenses for any business, rental or farm you own. Include a list of all new equipment acquired this year, including date of purchase and cost.

	<b>Taxpayer</b>	<b>Spouse</b>
<b>Retirement Plan Contributions</b>		
Traditional IRA contributions made for 2019 .....	_____	_____
Roth IRA contributions made for 2019 .....	_____	_____
SEP, Keogh, Individual 401(k) or SIMPLE Contributions .....	_____	_____

**2019 Deductions**

<b>Medical and Dental Expenses</b>	<b>2019 Amount</b>	<b>2018 Amount</b>
Prescription medications.....	_____	_____
Health insurance premiums .....	_____	_____
Doctors, dentists, etc .....	_____	_____
Hospitals, clinics, etc .....	_____	_____
Eyeglasses and contact lenses .....	_____	_____
Miles driven for medical purposes.....	_____	_____
Other medical and dental expenses: _____	_____	_____
<b>Taxes</b>	<b>2019 Amount</b>	<b>2018 Amount</b>
Real estate taxes paid on principal residence .....	_____	_____
Real estate taxes paid on additional homes or land .....	_____	_____
Auto license registration fees based on the value of the vehicle .....	_____	_____
Other personal property taxes .....	_____	_____
<b>Interest Expenses</b>		
Home mortgage interest paid – Attach Form(s) 1098.		
<b>Lender's Name</b>	<b>2019 Amount</b>	<b>2018 Amount</b>
_____	_____	_____
_____	_____	_____
Points paid on loan to buy, build or improve main home		
<b>Lender's Name</b>	<b>2019 Amount</b>	
_____	_____	
<b>Cash/Check/Credit Contributions</b>	<b>2019 Amount</b>	<b>2018 Amount</b>
_____	_____	_____
_____	_____	_____
_____	_____	_____
<b>Noncash Charitable Contributions</b>		
Attach all receipts with details listing the following information: Donee, donee address, description of donation, date acquired and date contributed, your cost, value at time of donation, and how you acquired the property.		
<b>Miscellaneous Deductions</b>	<b>2019 Amount</b>	<b>2018 Amount</b>
Union and professional dues .....	_____	_____
Professional subscriptions, books, supplies .....	_____	_____
Uniforms and protective clothing (including cleaning) .....	_____	_____
Job search costs .....	_____	_____
Taxpayer educator expenses.....	_____	_____
Spouse educator expenses.....	_____	_____
Tax return preparation fees .....	_____	_____
Safe deposit box rental .....	_____	_____
Gambling losses (to the extent of gambling income) .....	_____	_____
Other expenses (list): _____	_____	_____

	<b>Yes</b>	<b>No</b>
1 Did a lender cancel any of your debt in 2019? (Attach any Forms 1099-A or 1099-C).....	<input type="checkbox"/>	<input type="checkbox"/>
2 Did you make energy efficient improvements to your home or purchase any energy-saving property during 2019? If <b>yes</b> , please attach details.....	<input type="checkbox"/>	<input type="checkbox"/>
3 Did you purchase a motor vehicle or boat during 2019 ?..... If <b>yes</b> , attach documentation showing sales tax paid.	<input type="checkbox"/>	<input type="checkbox"/>
4 Did you purchase a hybrid or electric vehicle in 2019? If <b>yes</b> , enter year, make, model, and date purchased: _____	<input type="checkbox"/>	<input type="checkbox"/>
5 Did you donate a vehicle in 2019? If <b>yes</b> , attach Form 1098C.....	<input type="checkbox"/>	<input type="checkbox"/>
6 What was the sales tax rate in your locality in 2019 ? ..... % State ID .....		
7 Did your marital status change during 2019?..... If <b>yes</b> , explain: _____	<input type="checkbox"/>	<input type="checkbox"/>
8 Were you or your spouse permanently and totally disabled in 2019? .....	<input type="checkbox"/>	<input type="checkbox"/>
9 Do you have dependents who must file?.....	<input type="checkbox"/>	<input type="checkbox"/>
10 Do you have children who are under age 19 or a full time student under age 24 with investment income greater than \$2,200?...	<input type="checkbox"/>	<input type="checkbox"/>
11 Did you provide over half the support for any other person during 2019? .....	<input type="checkbox"/>	<input type="checkbox"/>
12 Did you incur adoption expenses during 2019? .....	<input type="checkbox"/>	<input type="checkbox"/>
13 Did you receive a total distribution from an IRA or other qualified plan that was partially or totally rolled over into another IRA or qualified plan within 60 days of the distribution?.....	<input type="checkbox"/>	<input type="checkbox"/>
14 Did you receive any disability payments in 2019? .....	<input type="checkbox"/>	<input type="checkbox"/>
15 Did you receive tip income <b>not</b> reported to your employer? .....	<input type="checkbox"/>	<input type="checkbox"/>
16a Did you buy, sell, refinance, foreclose or abandon a principal residence or other real property in 2019? If <b>yes</b> , attach closing or escrow statements, 1099-C or 1099-A forms.....	<input type="checkbox"/>	<input type="checkbox"/>
b If you sold a home, did you claim the First-Time Homebuyer Credit when you purchased it?.....	<input type="checkbox"/>	<input type="checkbox"/>
17 Did you incur any casualty or theft losses during 2019? .....	<input type="checkbox"/>	<input type="checkbox"/>
18 Did you incur any non-business bad debts?.....	<input type="checkbox"/>	<input type="checkbox"/>
19 Did you pay any individual for domestic services in 2019?.....	<input type="checkbox"/>	<input type="checkbox"/>
20 Did you buy or sell any stocks or bonds in 2019? .....	<input type="checkbox"/>	<input type="checkbox"/>
21 Did you use the proceeds from Series EE or I U.S. savings bonds purchased after 1989 to pay for higher education expenses?..	<input type="checkbox"/>	<input type="checkbox"/>
22 Did you incur any moving expenses? If <b>yes</b> , attach details.....	<input type="checkbox"/>	<input type="checkbox"/>
23 Did you receive any income not included in this Tax Organizer?..... If <b>yes</b> , please attach information.	<input type="checkbox"/>	<input type="checkbox"/>
24 Do you expect your income and deductions in 2020 to be the same as 2019? .....	<input type="checkbox"/>	<input type="checkbox"/>
If <b>no</b> , attach explanation of changes expected.		
25 Did you receive Form 1095-A (Health Insurance Marketplace Statement)? If so, please attach.....	<input type="checkbox"/>	<input type="checkbox"/>
26 At any time during 2019, did you sell, send, exchange, or otherwise acquire any financial interest in any virtual currency?.....	<input type="checkbox"/>	<input type="checkbox"/>
27 If you paid any alimony, enter recipient's SSN: _____ Alimony paid: _____		
28 Enter your state of residence..... <b>Taxpayer</b> _____ <b>Spouse</b> _____		

**Electronic Filing and Direct Deposit of Refund** **Yes**  **No**

If your tax return is eligible for Electronic Filing, would you like to file electronically?.....  **Yes**  **No**

The Internal Revenue Service is able to deposit many refunds directly into taxpayers' accounts.  
If you receive a refund, would you like direct deposit?.....  **Yes**  **No**

If **yes**, please provide a voided check (not a deposit slip) if your bank account information has changed.  
What type of account is this?..... Checking  Savings

**Estimated Tax Paid**

Federal		State			Local		
Date	Amount	Date	Amount	ID	Date	Amount	ID

**Additional Information** (Enter any additional information here and attach any documents.)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

# ADDITIONAL 2019 TAX ORGANIZER INFORMATION

Name(s) \_\_\_\_\_

1. Primary email address to send your 2019 tax returns: \_\_\_\_\_

**Please print clearly**

2. How much rent did you pay in 2019? \$ \_\_\_\_\_ (if applicable)

3. How much did you pay for commuter rail/EZ Pass tolls in 2019, if applicable?

Husband \$ \_\_\_\_\_

Wife \$ \_\_\_\_\_

4. **Necessary** proof of Health Insurance Coverage

(a) Did you buy medical insurance through the Marketplace?

Yes \_\_\_ No \_\_\_

**If yes, did you receive Form 1095A?**

Yes \_\_\_ No \_\_\_

**Need copy of Form 1095A otherwise tax return will be flagged.**

(b) Did you have health insurance coverage while living in Massachusetts?

Yes \_\_\_ No \_\_\_

**If yes, did receive MA Form 1099HC?**

Yes \_\_\_ No \_\_\_

**Need copy of Form 1099-HC otherwise tax return will be flagged.**

5. Checking Account Information: **NEED COPY OF VOIDED CHECK**

Routing # \_\_\_\_\_

Account # \_\_\_\_\_