

2024 Individual Tax Organizer

Personal Information

Taxpayer

First name	M.I.	Last name	Suffix	Date of birth	SSN or ITIN
Occupation			Email		Phone number
ID type	ID number	Issuing state	Issue date	Expiration date	
Street			City	State	ZIP Code

Spouse

First name	M.I.	Last name	Suffix	Date of birth	SSN or ITIN
Occupation			Email		Phone number
ID type	ID number	Issuing state	Issue date	Expiration date	

Filing status: Single Married filing jointly Married filing separately Head of household Qualifying surviving spouse

Select all that apply to 2024	Taxpayer	Spouse
Legally blind	<input type="checkbox"/>	<input type="checkbox"/>
Permanently and totally disabled	<input type="checkbox"/>	<input type="checkbox"/>
Claimed as a dependent on another individual's tax return	<input type="checkbox"/>	<input type="checkbox"/>
Full-time student	<input type="checkbox"/>	<input type="checkbox"/>
Designate \$3 to the Presidential Election Campaign Fund	<input type="checkbox"/>	<input type="checkbox"/>
Spouse is not filing a tax return (MFS)		<input type="checkbox"/>
Spouse had no income (MFS)		<input type="checkbox"/>

Dependent Information

Name (first and last)	Relationship	Date of birth	SSN or ITIN	Months in home	Received income	Disabled	Full time student	Childcare expenses
					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Banking information

Refund preference

- Direct deposit Paper check
 Apply to 2025 estimated taxes

Balance due preference

- Bank draft Credit card
 Mail a check Payment plan

Financial institution _____

Account holder _____

Routing number _____

Account number _____

Type of account Checking Savings

Personal or business Personal Business

Select if applicable to account: IRA Non-U.S.

2024 Individual Tax Organizer

None apply

2024 Life Events

- | | |
|---|--|
| <input type="checkbox"/> Changed marital status
<input type="checkbox"/> Taxpayer, spouse, or a dependent changed their name with the SSA
<input type="checkbox"/> Received notice or letter from the IRS or a state revenue agency
<input type="checkbox"/> First time filing a tax return
<input type="checkbox"/> Taxpayer, spouse, or a dependent passed away during the year | <input type="checkbox"/> Taxpayer, spouse, or a dependent received an identity protection PIN (IP PIN) from the IRS
<input type="checkbox"/> Had a baby or adopted a child
<input type="checkbox"/> Member of the Armed Forces
<i>Duty type</i> _____
<input type="checkbox"/> Changed address during the year |
|---|--|

None apply

2024 Financial Events

- | | |
|--|--|
| <input type="checkbox"/> Bought, sold, or refinanced a home or rental property
<input type="checkbox"/> Incurred property damage or theft caused by a federally declared disaster
<input type="checkbox"/> Converted or rolled over any retirement accounts
<input type="checkbox"/> Received, sold, exchanged, gifted or otherwise disposed of a digital asset | <input type="checkbox"/> Had a financial interest in or signature authority over a foreign account or trust
<input type="checkbox"/> <i>Combined value of foreign account(s) exceed \$10,000</i>
<input type="checkbox"/> Gifted more than \$18,000 total to one or more individual(s)
<input type="checkbox"/> Purchased health insurance through the Marketplace or a public exchange
<input type="checkbox"/> Had health insurance coverage for the entire year (CA, DC, MA, NJ, and RI only) |
|--|--|

2024 Income Sources

- | | Number of forms | | Number of forms |
|---|-----------------|--|-----------------|
| <input type="checkbox"/> Employment (W-2) | _____ | <input type="checkbox"/> Rent (1099-MISC) | _____ |
| <input type="checkbox"/> Retirement distribution (1099-R) | _____ | <input type="checkbox"/> Royalties (1099-MISC) | _____ |
| <input type="checkbox"/> Social Security (SSA-1099) | _____ | <input type="checkbox"/> ESA or 529 distribution (1099-Q) | _____ |
| <input type="checkbox"/> Self-employment (1099-NEC or 1099-K) | _____ | <input type="checkbox"/> HSA or MSA distribution (1099-SA) | _____ |
| <input type="checkbox"/> State or local tax refund (1099-G) | _____ | <input type="checkbox"/> Partnership (Schedule K-1) | _____ |
| <input type="checkbox"/> Unemployment compensation (1099-G) | _____ | <input type="checkbox"/> S-corporation (Schedule K-1) | _____ |
| <input type="checkbox"/> Interest (1099-INT) | _____ | <input type="checkbox"/> Estate or trust (Schedule K-1) | _____ |
| <input type="checkbox"/> Dividends (1099-DIV) | _____ | <input type="checkbox"/> Gambling (W-2G) | _____ |
| <input type="checkbox"/> Sold stocks or investments (1099-B) | _____ | <input type="checkbox"/> Farming | _____ |
| <input type="checkbox"/> Canceled debt (1099-C) | _____ | <input type="checkbox"/> Other income not listed above _____ | _____ |

None apply

2024 Adjustments and Credits

- | | | Amount |
|--|---|----------|
| <input type="checkbox"/> Higher education expenses | <input type="checkbox"/> Adoption expenses | \$ _____ |
| <input type="checkbox"/> Child or dependent care expenses | <input type="checkbox"/> Alimony paid | \$ _____ |
| <input type="checkbox"/> HSA contributions | <i>Date of divorce or separation</i> _____ | \$ _____ |
| <input type="checkbox"/> IRA contributions | <i>Recipient's SSN</i> _____ | \$ _____ |
| <input type="checkbox"/> Student loan interest | <input type="checkbox"/> Educator expenses | \$ _____ |
| <input type="checkbox"/> Plug-in electric vehicle purchase | <input type="checkbox"/> Household employee expenses | \$ _____ |
| <i>Vehicle year, make, and model</i> _____ | <input type="checkbox"/> Energy-efficient home improvements | \$ _____ |
| | <input type="checkbox"/> Armed Forces moving expenses | \$ _____ |

Itemized Deductions

Medical and dental	
Medical and dental expenses	\$

Casualty and theft	
Casualty and theft losses	\$
<input type="checkbox"/> Check if caused by federally declared disaster	

Taxes paid	
State and local income taxes	\$
Sales taxes	\$
Real estate taxes	\$
Personal property taxes	\$

Gambling	
Gambling losses	\$

Interest paid	
Mortgage interest	\$

Other miscellaneous deductions	
	\$
	\$
	\$
	\$
	\$
	\$

Charitable contributions	
Donations to charity (cash)	\$
Donations to charity (non-cash)	\$

Estimated Taxes

Overpayments and estimated tax payments				
Description	Federal		State:	
	Date	Amount	Date	Amount
2023 overpayment applied to 2024				
First quarterly payment				
Second quarterly payment				
Third quarterly payment				
Fourth quarterly payment				
Additional payment(s)				