Howland Tax Services International



2018 Personal Tax Organizer (United States)

Personal Information

You		Your Spouse		
Name (include initial)		Name (include initial)		
SSN or ITIN		SSN or ITIN		
Date of Birth		Date of Birth		
Preferred Filing Status:		\square Head of Household (with Qualifying Person)		
☐ Single		☐ Married Filing Separately		
☐ Married Filing Jointly		\square Qualifying Widow(er) with Dependent Child		
Address		Address (if different)		
Zip Code		Zip Code		
Phone		Phone		
Email		Email		
Occupation		Occupation		
Filing Category (You):		Filing Category (Your Spouse):		
☐ United States Citizen		☐ United States Citizen		
☐ Green Card Holder		☐ Green Card Holder		
☐ Resident Alien		☐ Resident Alien		
☐ Non-Resident Alien		☐ Non-Resident Alien		
\square Live in Canada, Work in U.S. (Commuter)		☐ Live in Canada, Work in U.S. (Commuter)		
United States Visa type and da Canadian Visa type and date is Non-Resident Aliens – days pro	ssued (if applicable):	2018: 2017	7:2016:	
Your Dependants	1	2	3	
Name				
Date of Birth				
Relationship				
SSN or ITIN				
Income (Type and Amount)				
Months Lived With You				
U.S. Citizen/Resident Alien?	☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No	

Did your marital status change during the year?	☐ Yes	□ No
If yes, indicate change and date of change:		
Did you live apart from your spouse for the entire year?	☐ Yes	□ No
Does your spouse itemize deductions on a separate return?	☐ Yes	□ No
Do you want \$3 to go into the Presidential Election Campaign Fund?	☐ Yes	□ No
Were you or your spouse enrolled as a full-time student during 2018?	☐ Yes	□ No
Did you pay any educational tuition or fees for yourself or a dependent?	☐ Yes	□ No
Were you or your spouse permanently disabled at any time during 2018?		□ No
Were you or your spouse legally blind at any time during 2018?	☐ Yes	□ No
Did you pay childcare expenses?	☐ Yes	□ No
If yes, indicate names, addresses and tax ID numbers (SSN or EIN) of childcare providers	s, and provide	receipts:
Health Care Coverage		
Did everyone in your tax household have qualifying health coverage for all of 2018?		
	☐ Yes	□ No
If you had qualifying health coverage for only part of the year, indicate the months you had \Box Jan \Box Feb \Box Mar \Box Apr \Box May \Box Jun \Box Jul \Box Aug \Box Sep \Box Oct	-	Dec
What kind of health coverage did you have? \Box Employer \Box Government-Sponsored Marketplace \Box Private Exchange (Individual	Insurance Co	mpany)
Were you eligible for an exemption from coverage during 2018?	☐ Yes	□ No
If you were eligible for an exemption from coverage for part of the year, indicate the month ☐ Jan ☐ Feb ☐ Mar ☐ Apr ☐ May ☐ Jul ☐ Aug ☐ Sep ☐ Oct	•	Dec

Documents needed to prepare your return(s) ☐ New clients – complete copies of the last tax returns filed Copies of income tax forms received, including W-2, 1042-S, 1095-A, 1095-B, 1095-C, 1098, 1098-C, 1098-T, 1099-B, 1099-C, 1099-DIV, 1099-G, 1099-INT, 1099-K, 1099-MISC, 1099-OID, 1099-O, 1099-OA, 1099-R, 1099-SA, RRB-1099-R, SSA-1099, SSA-1042-S, Schedule K-1, etc. ☐ Indicate income from alimony, gambling winnings, prizes or awards, scholarships or fellowships, jury duty, etc. ☐ Eligible educators – qualified expenses paid (e.g. classroom materials, professional development courses) Homeowners – statements showing mortgage interest and qualified mortgage insurance payments (e.g. Form 1098), sale of home or other property (e.g. Form 1099-S), real estate taxes paid Receipts for rent paid, if your state return permits a rental tax credit and you qualify \square Receipts for moving expenses, if you are a member of the Armed Forces on active duty, and due to a military order you move because of a permanent change of station \square Documentation of cash gifts, if you gave more than \$15,000 to any one person during the year ☐ Receipts for student loan interest paid ☐ Documentation of qualified educational expenses (e.g. Form 1098-T) ☐ Receipts for auto personal property tax paid Charitable donations – provide bank record, cancelled check or receipt for all amounts ☐ Investment interest expense receipts ☐ Childcare expense receipts ☐ Alimony paid – provide documentation Receipts for medical/dental expenses and reimbursements from health coverage plans ☐ Casualty/theft losses – provide documentation ☐ Estimated tax payments made for 2018 – provide documentation ☐ IRS or State correspondence and assessment notices, if received Receipts for IRA, Keogh, and other retirement plan contributions ☐ Income and expenses from rental properties or businesses – receipts are generally not required if spreadsheets are provided or you fill out one of our checklists ☐ Foreign Tax Credit – if you paid tax to a foreign country for income earned outside the United States, provide details and a copy of the foreign tax return \Box The above is not a complete list – please indicate any other income or expense amounts:

Refunds If you receive a refund on your 2018 income tax return, do you want to apply that refund to your 2019 tax? ☐ Yes ☐ No ☐ Yes □ No Do you want your refund to be direct deposited into your bank accounts? If yes, provide information for up to three accounts (banks must be located in the U.S.): Bank Routings: Account Numbers: Do you want to use a portion of your refund to buy Series I U.S. Savings Bonds? ☐ Yes ☐ No If yes, please indicate preferred amount invested in bonds (must be divisible by 50), and indicate bank routing and account number for deposit of remaining refund: **Foreign Accounts and Investments** Did you have more than \$10,000 in foreign (non-U.S.) bank or financial accounts at any time during 2018 (including Canadian RRSPs, RRIFs, RESPs, or TFSAs)? ☐ Yes ☐ No If yes, FinCEN Report 114 Report of Foreign Bank and Financial Accounts should be filed by April 15, 2019 using the BSA E-Filing system. If you would like us to complete and file the form for you, please provide name and addresses of financial institutions, account numbers and types, and maximum values of each account during 2018:

If you had foreign (non-U.S.) financial assets in 2018, you may also be required to file Form 8938 Statement of Specified Foreign Financial Assets or Form 8621 Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund with your income tax return(s).