

2020 Taxpayer Organizer with Rentals

Thank you for choosing Rock Solid Tax and Accounting LLC to do your tax preparation.



Please read and sign the engagement letter, complete all personal information on the client information sheet and answer all of the questions on the following pages.

You may complete the remaining pages or just use them to help organize your information.

In addition to the organizer, please bring with you:

- the last 3 years' tax returns,
- driver's licenses of taxpayers,
- Social Security cards of all dependents



Client Name: _____

Thank you for choosing Rock Solid Tax and Accounting LLC to assist you with your 2020 taxes. This letter confirms the terms of our engagement with you and outlines the nature and extent of the services we will provide.

We will prepare your 2020 federal and state income tax returns. We will depend on you to provide the information we need to prepare complete and accurate returns. **We may ask you to clarify some items but will not audit or otherwise verify the data you submit. It is our understanding that the information you are providing is truthful, complete and you have receipts, and or canceled checks to support all deductions and expenses provided by you. It may be necessary to request these substantiating documents and it is our understanding that you are willing to provide them to us if requested.** An Organizer is enclosed to help you collect the data required for your return. The Organizer will help you avoid overlooking important information.

The tax return fee does not include bookkeeping. Bookkeeping necessary to make data tax return-ready will be added to the tax preparation fee. We will perform accounting services only as needed to prepare your tax returns. Our work will not include procedures to find defalcations or other irregularities. Accordingly, our engagement should not be relied upon to disclose errors, fraud, or other illegal acts, though it may be necessary for you to clarify some of the information you submit. We will inform you of any material errors, fraud, or other illegal acts we discover.

The law imposes penalties when taxpayers underestimate their tax liability. Call us if you have concerns about such penalties and would like to make estimated payments for 2021.

The impact of the Coronavirus pandemic on the 2020 tax calculations is significant. Congress has passed numerous tax packages over the past year including the SECURE Act, the Families First Act, and the CARES Act. Almost everyone will see some effect from one or all of these important pieces of legislation. It is important that all information related to stimulus payments received, PPP loans, or other Covid-19 related payments be provided. Once again, it is unclear whether or not Arizona will conform with the numerous changes put forth by the IRS. Your tax returns will be prepared with the information that is currently available.

We will use our professional judgment in preparing your returns. Subsequent developments issued by the applicable tax authorities may affect the information we have previously provided, and these effects may be material. Whenever we are aware that a possibly applicable tax law is unclear or that there are conflicting interpretations of the law by authorities (e.g., tax agencies and courts), we will explain the possible positions that may be taken on your return. In accordance with our professional standards, we will follow whatever position you request, if it is consistent with the codes, regulations, and interpretations that have been promulgated. Should we encounter instances of unclear tax law, or of potential conflicts in the interpretation of the law, we will outline the reasonable courses of action and the risks and consequences of each. We will ultimately adopt, on your behalf, the alternative you select.

Our fee is based on the forms required to prepare the return. Invoices are due and payable upon presentation. **Tax returns will not be filed, and copies of the returns will not be provided to you until payment has been received in full.** If you terminate this engagement before completion, all original documentation will be returned to you. Fees charged for tax return preparation do not include audit representation or preparing materials to respond to correspondence from taxing authorities. Such representation is available as a separate engagement. **Preparation fees do include limited assistance and consultation during the year.**

We will return your original records to you at the end of this engagement. Store these records, along with all supporting documents, canceled checks, etc., in a secure location in case these items are needed later to prove accuracy and completeness of a return. We retain copies of your records and our work papers for your engagement for at least four years. If you want us to delete the information after this time you must provide written instructions.

Our engagement to prepare your 2019 tax returns will conclude with the delivery of the completed returns to you (if paper-filing) or your signature and our subsequent submittal of your tax return (if e-filing). If you have not selected to e-file your returns with our office, you will be solely responsible to file the returns with the appropriate taxing authorities. Review all tax-return documents carefully before signing them.

To affirm that this letter correctly summarizes your understanding of the arrangements for this work, please sign and date in the spaces provided. Thank you for the opportunity to be of service. If you have any questions please contact our office at (480) 322-8207.

Sincerely,

Sheryl S. McClure, EA

Sheryl S. McClure, EA
Rock Solid Tax and Accounting LLC

(Both spouses must sign for preparation of joint returns.)

Accepted By:

Taxpayer

Spouse

Date

For taxpayer convenience our office may provide forms, information and documents in a digital format and convey them to you via electronic signature software, electronic tax preparation software or a secure portal. If you would like to OPT OUT of allowing us to use these methods to provide forms, information or documents, please sign and date below.

Taxpayer

Spouse

Date



Privacy Policy

Your privacy is important to us. Please read the following privacy policy.

We collect nonpublic personal information about you from various sources, including:

- * Interviews regarding your tax situation
- * Applications, organizers, or other documents that supply such information as your name, address, telephone number, Social Security Number, number of dependents, income, and other tax-related data
- * Tax-related documents you provide that are required for processing tax returns, such as Forms W-2, 1099R, 1099INT and 1099-DIV, and stock transactions

We do not disclose any nonpublic personal information about our clients or former clients to anyone, except as requested by our clients or as required by law.

We restrict access to personal information concerning you, except to our employees who need such information in order to provide products or services to you. We maintain physical, electronic, and procedural safeguards that comply with federal regulations to guard your personal information.

If you have any questions about our privacy policy, please contact us.

Sincerely,

Sheryl S. McClure, EA

Rock Solid Tax and Accounting LLC
8830 E. Germann Road Bldg. 27
Mesa, AZ 85212
(480) 322-8207

2020 Tax Organizer Personal and Dependent Information

Personal Information

	Name	SSN	Has IP PIN	Date of birth
Taxpayer				
Spouse				
Street address, city, state, and ZIP				
	Occupation	Daytime phone	Evening phone	Cell phone
Taxpayer				
Spouse				
Taxpayer email				
Spouse email				

Martial Status at end of 2020

- Married
 Married filing separately
 Single
 Widow(er) If spouse died in 2020 enter the date of death _____

Other Information

- Are you blind?
 Are you disabled?
 Are you a full-time student?
 Do you want \$3 to go to the Presidential Election Campaign Fund?

Taxpayer

- Yes No
 Yes No
 Yes No
 Yes No

Spouse

- Yes No
 Yes No
 Yes No
 Yes No

At any time during 2020 did you receive, sell, send, exchange, or acquire any financial interest in any virtual currency? Yes No

Dependent Information

First and last name SSN	Has IP PIN	Relationship	Months in home	Date of birth	Disabled	Full- time student	Childcare Expenses

List dependents required to file a return _____

COVID-19 Implications

- | | | |
|---|--------------------------|---|
| Yes | No | |
| <input type="checkbox"/> | <input type="checkbox"/> | Did you receive an Economic Impact Payment (EIP)?
<small>If "Yes," provide Notice 1444 from the IRS.</small> |
| <input type="checkbox"/> | <input type="checkbox"/> | Did you experience economic loss due to COVID-19 (loss of job, closed business, etc.)? |
| <input type="checkbox"/> | <input type="checkbox"/> | Were you unemployed for any portion of the year due to COVID-19? |
| <input type="checkbox"/> | <input type="checkbox"/> | Did you continue to receive wages from your employer even if you were unable to work? |
| <input type="checkbox"/> | <input type="checkbox"/> | Did you receive a distribution from a retirement plan (401K, IRA, etc.) due to COVID-19? |
|
 | | |
| If you own a farm or business: | | |
| <input type="checkbox"/> | <input type="checkbox"/> | Did you continue to pay any employee while they were not working? |
| <input type="checkbox"/> | <input type="checkbox"/> | Did you delay withholding FICA taxes from any employee's pay? |
| <input type="checkbox"/> | <input type="checkbox"/> | Did you receive a Paycheck Protection Program (PPP) loan? |
| <small>If "Yes," was the loan forgiven or have you applied for forgiveness? _____</small> | | |
| <input type="checkbox"/> | <input type="checkbox"/> | Were you unable to work due to COVID-19 and, if employed by someone other than yourself, would have qualified for sick or family leave? |

Appointment Information

Your 2020 appointment is scheduled for _____

Additional Taxpayer Information

Name: _____

SSN: _____

Estimates

	Federal		Resident state		Resident city	
	Date paid	Amount	Date paid	Amount	Date paid	Amount
Overpayment applied from 2019	_____	_____	_____	_____	_____	_____
First quarter	_____	_____	_____	_____	_____	_____
Second quarter	_____	_____	_____	_____	_____	_____
Third quarter	_____	_____	_____	_____	_____	_____
Fourth quarter	_____	_____	_____	_____	_____	_____
Additional payments	_____	_____	_____	_____	_____	_____

Account Information for Deposits or Withdrawals

Name of bank	Bank routing number	Bank account number	Type of account		Use this account for	
			Checking	Savings	Deposits	Withdrawals

Identification Information

Taxpayer

Type of photo ID Driver's license State-issued photo ID

Driver's license or state-issued photo ID number _____

State the driver's license or state-issued photo ID was issued in _____

Issue date of the driver's license or state-issued photo ID _____

Expiration date of the driver's license or state-issued photo ID _____

Spouse

Type of photo ID Driver's license State-issued photo ID

Driver's license or state-issued photo ID number _____

State the driver's license or state-issued photo ID was issued in _____

Issue date of the driver's license or state-issued photo ID _____

Expiration date of the driver's license or state-issued photo ID _____

Questions — All Taxpayers

(Provide related statements or other documentation.)

"You" refers to both taxpayer and spouse—enter "?" if unsure about a question.

LIFESTYLE & TAXES	Yes	No	Are either you or your spouse legally blind?			
	Yes	No	Did you pay or receive alimony in 2020? <i>Paid Received \$</i>	Recipient's SSN	Date of divorce or separation	
	Yes	No	Did you purchase health insurance through a public exchange?			
	Yes	No	Will there be any significant changes in income or deductions next year, such as retirement?			
	Yes	No	Have you paid alternative minimum tax (AMT) in previous years?			
	Yes	No	Did you pay anyone for domestic services in your home?			
	Yes	No	Did you purchase a new energy-efficient car, truck, or van?			
	Yes	No	Are you involved in bankruptcy, foreclosure, repossession, or had any debt (including credit cards) cancelled?			
	Yes	No	Are you a member of the military?	State of residency		
	Yes	No	Were you a citizen of or lived in a foreign country?	Foreign country		
	Yes	No	Do you own or have financial interest in a foreign bank or financial account? Balance exceeds \$50,000			Yes No
	Yes	No	Did you receive an economic impact payment? If so, provide the amount.			
	Yes	No	Would you like to allow your tax preparer or another person to discuss your return with the IRS? <i>Designee's name</i>	<i>Phone number</i>	<i>PIN (any five digits)</i>	
	CHILDREN & EDUCATION	Yes	No	Were any children born or adopted in 2020? (Provide statement for other expenses.)		
Yes		No	Were any children attending college? <i>Year in college</i>	Paid by you: Tuition \$	Student loan interest \$	Books \$
				Paid by student: Tuition \$	Student loan interest \$	Books \$
Yes		No	Did you pay any tuition for a private school for a dependent or take classes yourself?			
			<i>Student</i>		<i>Amount paid \$</i>	
			<i>Name and address of school</i>			
Yes		No	Did you pay for child or dependent care so you could work or go to school? (add statement if needed)			
			<i>Name of provider</i>		<i>EIN or SSN</i>	
			<i>Address</i>		<i>Amount paid \$</i>	
Yes		No	Do you have any children who have unearned income of \$1,100 or more?			
Yes	No	Did you make any contributions to a 529 plan in 2020?				
INVESTMENTS	Yes	No	Did you, or will you, contribute any money to an IRA for 2020?		Traditional IRA Roth IRA	
	Yes	No	Did you roll over any amounts from a retirement account in 2020?			
	Yes	No	Did you sell or transfer any stock or sell rental or investment property?			
	Yes	No	Did you receive any income from an installment sale?			
	Yes	No	Did you have any investments become worthless or were you a victim of investment theft in 2020?			
	Yes	No	Were you granted, or did you exercise, any employee stock options during 2020?			
	Yes	No	Did you receive, sell, send, exchange, or otherwise acquire any financial interest in any virtual currency?			
	Yes	No	Did you, or do you plan to, contribute money before April 15, 2021 to a HSA for 2020? If yes, provide details.			
	Yes	No	Did you pay any interest on a loan for a boat or RV that has living quarters? If yes, provide details.			
	Yes	No	Did you pay sales taxes on a major purchase in 2020, such as a vehicle, boat, or home?			
DEDUCTIONS	Yes	No	Did you make any charitable contributions in 2020? If yes, provide details.			
	Yes	No	Did you work from a home office or use your car for business?			
			Did you receive income from a sharing/gig economy activity (e.g. Airbnb, Uber, etc.)			
			Do you own a business or an interest in a partnership, corporation, LLC, farming activities, or other venture?			
HOME	Yes	No	Did you purchase or sell a main home during the year? If yes, provide closing statement.			
	Yes	No	If you sold a home, did you claim the First-Time Homebuyer Credit when it was purchased? If yes, provide details.			
	Yes	No	Did you refinance a mortgage or take a home equity loan? If yes, provide closing statement.			
	Yes	No	Did you use any mortgage loan proceeds for purposes other than to buy, build, or substantially improve your home?			
	Yes	No	Did you make any new energy-efficient improvements to your home? If yes, provide details.			

State information	Full-year resident	Part-year resident	Nonresident	School district
States of residence during 2020 and dates				Do you rent or own your home? Rent Own

Income Worksheet

Provide to your preparer all Forms W-2, 1099-INT, 1099-DIV, 1099-R, 1099-MISC, and other income reporting statements. Do not list dollar amounts for the following forms. Your preparer will report the appropriate amounts.

Indicate "T" for taxpayer, "S" for spouse, "J" for joint

Provide additional statements if more room is needed

Forms W-2—Wage and Tax Statement

T/S	Employer name	T/S	Employer name
	1)		4)
	2)		5)
	3)		6)

Forms 1099-INT—Interest Income

T/S/J	Name of issuer	T/S/J	Name of issuer
	1)		4)
	2)		5)
	3)		6)

Forms 1099-DIV—Dividends and Distributions

T/S/J	Name of issuer	T/S/J	Name of issuer
	1)		4)
	2)		5)
	3)		6)

Forms 1099-R—Distributions From Pensions, Annuities, Retirement or Profit-Sharing Plans, IRAs, Insurance Contracts, Etc.

T/S	Name of issuer	T/S	Name of issuer
	1)		4)
	2)		5)
	3)		6)

If the distribution is before age 59½, give a reason to determine if an exception to penalty applies.

Tax-Exempt Interest (such as municipal bonds—include statement)

Payer	\$	Payer	\$

Other Income

	\$	Other	\$
State tax refund			
Unemployment compensation			
Social Security (taxpayer)—provide SSA-1099 or RRB-1099			
Social Security (spouse)—provide SSA-1099 or RRB-1099			
Unreported tips			
Business income (see <i>Sole Proprietorship Tax Organizer</i>)		Stock sales	See "Sales and Exchanges Worksheet" below.
Rental income (see <i>Rental Property Tax Organizer</i>)		Sale of other property	

Sales and Exchanges Worksheet

Provide information about sales of stock, real estate, or other property, along with Forms 1099-B, 1099-S, or other supporting statements.

Description of property	Purchase date	Cost/basis	Sale date	Sale price
		\$		\$
		\$		\$
		\$		\$

Notes:

- When stock is sold, you will usually receive Form 1099-B, *Proceeds From Broker and Barter Exchange Transactions*, reporting the proceeds from the sale. However, your statement will not always provide the cost/basis information necessary to compute gain or loss. If the statement does not contain the cost/basis information, you must provide it. You may need to contact your broker for questions about cost/basis and purchase dates of your stock accounts.
- Often, "transfers" of stock or mutual funds within a brokerage account are actually sales of one type of stock and purchase of another. Even if you did not receive any cash from the transaction, you may have taxable gain or loss.
- If your stock dividends are automatically reinvested, the dividends will be taxable even though you did not receive any cash. The transaction is treated as if you had received cash and purchased additional stock. When the stock is sold, the amount reinvested over the years is taken into account. You may need to contact your broker for questions about the amount of reinvested dividends.
- If you sold property other than stock, your taxable gain or loss will be determined by your cost/basis. The cost/basis is usually the original purchase price plus improvements (the cost of repairs and maintenance are not taken into account for cost/basis).

Schedule A - Itemized Deductions

Name: _____

SSN: _____

Medical and Dental Expenses

	2020	2019
Health insurance premiums (paid by you, not through work)	_____	_____
Long-term care premiums (you)	_____	_____
Long-term care premiums (your spouse) _____	_____	_____
Long-term care premiums (dependents) _____	_____	_____
Mileage driven for medical purposes	_____	_____
Out of pocket medical and dental expenses (list)	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Charitable Contributions

	2020	2019
Donations to charity (cash)	_____	_____
Disaster relief contributions	_____	_____
Miles driven for charitable purposes _____	_____	_____
Donations to charity (noncash)	_____	_____
If noncash donations are greater than \$500, list below		
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Taxes Paid

State and local income taxes	_____	_____
Sales tax	_____	_____
Real estate taxes	_____	_____
Personal property taxes	_____	_____
Other taxes (list) _____	_____	_____
_____	_____	_____
_____	_____	_____

Other Miscellaneous Deductions

Amortizable bond premiums	_____	_____
Federal estate tax	_____	_____
Gambling losses	_____	_____
Impairment-related work expenses _____	_____	_____
Claim repayments	_____	_____
Unrecovered pension investments _____	_____	_____
Schedule K-1	_____	_____
Ordinary loss debt instrument	_____	_____
Excess deduction on termination _____	_____	_____

Interest Paid

Mortgage interest paid (attach Form 1098) _____	_____	_____
<input type="checkbox"/> Some of your home mortgage loan was not used to buy, build, or improve your home		
Mortgage interest paid to an individual _____	_____	_____
Paid to:		
Name _____		
Address _____		
City, State, ZIP _____		
SSN or EIN _____		
Mortgage insurance premiums	_____	_____
Investment interest	_____	_____

For state purposes ONLY Job Expenses & Certain Miscellaneous Deductions

Necessary job expenses you paid that were not reimbursed by your employer (list) _____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
Union dues	_____	_____
Tax preparation fees	_____	_____
Other nonpersonal expenses related to taxable income (list) _____	_____	_____
_____	_____	_____
_____	_____	_____
Investment expenses not entered elsewhere	_____	_____
Home equity interest	_____	_____

Rental Property Tax Organizer

Rental Income and Expenses

Indicate type of property as 1-Single Family Residence, 2-Multi-Family Residence, 3-Vacation/Short-Term Rental, 4-Commercial, 5-Land, 6-Self-Rental, or 7-Other (describe).

	Property A		Property B		Property C	
	Location of property:		Location of property:		Location of property:	
	Type		Type		Type	
	Any personal use?	Yes No	Any personal use?	Yes No	Any personal use?	Yes No
	Fair Rental Days	Personal Use Days	Fair Rental Days	Personal Use Days	Fair Rental Days	Personal Use Days
Date placed in service						
Rents received	\$		\$		\$	
Expenses						
Advertising	\$		\$		\$	
Cleaning and maintenance	\$		\$		\$	
Commissions	\$		\$		\$	
Insurance	\$		\$		\$	
Legal and professional fees	\$		\$		\$	
Management fees	\$		\$		\$	
Mortgage interest paid to banks	\$		\$		\$	
Other interest	\$		\$		\$	
Repairs	\$		\$		\$	
Supplies	\$		\$		\$	
Taxes	\$		\$		\$	
Utilities	\$		\$		\$	
Other (list)	\$		\$		\$	
	\$		\$		\$	
	\$		\$		\$	
	\$		\$		\$	
	\$		\$		\$	
	\$		\$		\$	
	\$		\$		\$	

Property Information

If this is your first year with our firm, please provide a depreciation schedule for all property placed in service before 2019.

Property Purchased. Treat the cost of improvements made to real property as the purchase of a new asset.

Asset	Date purchased	Cost	Date placed in service
		\$	
		\$	
		\$	
		\$	
		\$	

Property Sold or Taken Out of Service

Asset	Date sold or taken out of service	Selling price	Trade in?
		\$	
		\$	
		\$	
		\$	
		\$	

MILEAGE STATEMENT

Taxpayer's Name _____

Tax Year _____ **Business Name** _____

VEHICLE #1

Make _____ **Model** _____ **Year** _____ **Total Mileage** _____

Business Miles _____ **Commuting Miles** _____ **Daily RT** _____

VEHICLE #2

Make _____ **Model** _____ **Year** _____ **Total Mileage** _____

Business Miles _____ **Commuting Miles** _____ **Daily RT** _____

VEHICLE #3

Make _____ **Model** _____ **Year** _____ **Total Mileage** _____

Business Miles _____ **Commuting Miles** _____ **Daily RT** _____

By signing this form you acknowledge that you have the written proof you need in a mileage log, diary, statement of expense, or similar record. According to the Internal Revenue Code you must keep records as long as they may be needed, per IRS Publication 463.

Taxpayer's Signature _____ **Date** _____