

***BRINK & ASSOCIATES***  
**CERTIFIED PUBLIC ACCOUNTANTS**  
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**2018 INDIVIDUAL TAX ORGANIZER**

Dear Tax Client:

The partners and staff of Brink & Associates, CPA's hope you and your families had a terrific holiday season! Tax time is approaching rapidly and we are thrilled to be of service to you for another tax season. This organizer is meant to assist you in gathering your information, so we can prepare your returns accurately and cost effectively. Please try to answer or check all boxes that you think might apply to you. We look forward to seeing you this tax season!

**Preparing for your Tax Preparation**

- Bring the information/forms listed on the following pages, if they apply
- Review your prior year tax return and notify us of any significant changes
- Complete the organizer as best you can

**Quick List of Things We Need** (please gather all of the forms and documentation that may apply to you)

- All Health Coverage Forms and related information
- All W-2 Forms
- All 1099 Forms, including those from Banks - Credit Unions - Stock Brokerages – and others
- Summary of your business (sole proprietorship) / rental income
- K-1 Forms from any partnerships / S-Corporations
- All 1099 Forms from Social Security
- Any other income you had during the year (unemployment, gambling income, jury pay, etc.)
- Information on regular deductions (see page 6 for details. These can include educator expenses, contributions to IRAs / HSA, self-employed health insurance)
- Information on itemized deductions **if you qualify** (see page 7 for details. These can include medical expenses, state and local tax payments, mortgage interest (bring in 1098 Forms), and charitable contributions.)
- Information on any estimated tax payments that you made (see page 7 for details)
- Any settlement statements (HUD-1) on real estate purchases or home refinances you had during the year
- Social Security card for any new dependents
- Any correspondence you have received from any taxing authorities

Note, this list is not all inclusive but rather a starting point of things we will need to accurately prepare your tax returns. Please see the following pages for further details.

**Quick List of Things You Can do to Minimize Taxes and Tax Preparation Fees**

- Get all of your tax documentation in one place
- Review this organizer and answer questions carefully
- Review your prior year return and ask yourself what has changed and let us know



Social Security No	First Name	Last Name	Exemption Certificate Number	Other Exemption*	Full Year of Coverage	Start Month	End Month
_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____

Other Exemption Type Codes	
A = Unaffordable coverage	F = Incarcerated individual
B = Short coverage gap	G = Hardship (combined coverage unaffordable, initial open enrollment, CHIP)
C = Exempt noncitizen	H = Medicaid/TRICARE/Fiscal year employer plan
D = Health care sharing ministry	X = Insured with minimum essential coverage
E = Indian tribe member	

### General Questionnaire

Please complete the following questions as best as you can. These questions help us ensure we don't miss anything on your tax returns:

**Personal Information**

	Yes	No
Did your marital status change during the year?	<input type="checkbox"/>	<input type="checkbox"/>
If yes, explain: _____		
Did your address change from last year?	<input type="checkbox"/>	<input type="checkbox"/>
If yes, please list: _____		
Can you be claimed as a dependent by another taxpayer?	<input type="checkbox"/>	<input type="checkbox"/>
Would you like any refund directly deposited?	<input type="checkbox"/>	<input type="checkbox"/>
If yes, please provide the following: Bank Acct #: _____		
Routing #: _____		
Acct Type: Checking <input type="checkbox"/> Savings <input type="checkbox"/>		

**Dependent Information**

Were there any changes in dependents from the prior year?	<input type="checkbox"/>	<input type="checkbox"/>
If yes, explain: _____		
Do you have any children under the age of 19 or a full-time student under the age of 24 with unearned income in excess of \$2,100?	<input type="checkbox"/>	<input type="checkbox"/>
Do you have dependents who must file a tax return?	<input type="checkbox"/>	<input type="checkbox"/>
Did you provide over half the support for any other person(s) other than your dependent children during the year?	<input type="checkbox"/>	<input type="checkbox"/>
Did you pay for child care while you worked or looked for work?	<input type="checkbox"/>	<input type="checkbox"/>
Did you pay expenses related to the adoption of a child during the year?	<input type="checkbox"/>	<input type="checkbox"/>
If you are divorced or separated with child(ren), do you have a divorce decree or other form of separation agreement which establishes custodial responsibilities?	<input type="checkbox"/>	<input type="checkbox"/>

**Purchases, Sales and Debt Information**

- |   |                          |                          |
|---|--------------------------|--------------------------|
| Did you start a new business or purchase rental property during the year?                               | <input type="checkbox"/> | <input type="checkbox"/> |
| Did you acquire a new or additional interest in a partnership or S corporation or other business?       | <input type="checkbox"/> | <input type="checkbox"/> |
| Did you sell, exchange, or purchase any real estate during the year?                                    | <input type="checkbox"/> | <input type="checkbox"/> |
| Did you purchase or sell a principal residence during the year?   | <input type="checkbox"/> | <input type="checkbox"/> |
| Did you foreclose or abandon a principal residence or real property during the year?                    | <input type="checkbox"/> | <input type="checkbox"/> |
| Did you acquire or dispose of any stock during the year?  | <input type="checkbox"/> | <input type="checkbox"/> |
| Did you take out a home equity loan this year?  | <input type="checkbox"/> | <input type="checkbox"/> |
| Did you refinance a principal residence or second home this year?                                       | <input type="checkbox"/> | <input type="checkbox"/> |
| Did you sell an existing business, rental, or other property this year?                                 | <input type="checkbox"/> | <input type="checkbox"/> |
| Did you incur any non-business bad debts?   | <input type="checkbox"/> | <input type="checkbox"/> |
| Did you have any debts canceled or forgiven this year?  | <input type="checkbox"/> | <input type="checkbox"/> |
| Did you purchase a new hybrid, alternative motor, or electric motor energy efficient vehicle this year? | <input type="checkbox"/> | <input type="checkbox"/> |
| Did you pay any student loan interest this year?  | <input type="checkbox"/> | <input type="checkbox"/> |

**Income Information**

- |  |                          |                          |
|--|--------------------------|--------------------------|
| Did you have any foreign income or pay any foreign taxes during the year?  | <input type="checkbox"/> | <input type="checkbox"/> |
| Did you receive any income from property sold prior to this year?  | <input type="checkbox"/> | <input type="checkbox"/> |
| Did you receive any lump-sum payments from a pension, profit sharing or 401(k) plan?                                     | <input type="checkbox"/> | <input type="checkbox"/> |
| Did you make any withdrawals from or contributions to an IRA, Roth, Keogh, SIMPLE, SEP, 401(k), or other qualified plan? | <input type="checkbox"/> | <input type="checkbox"/> |
| Did you make any withdrawals from an education savings or 529 plan account?  | <input type="checkbox"/> | <input type="checkbox"/> |
| Did you receive any distributions from a health savings account (HSA), Archer MSA, or Medicare Advantage MSA this year?  | <input type="checkbox"/> | <input type="checkbox"/> |
| Did you receive any Social Security benefits during the year?  | <input type="checkbox"/> | <input type="checkbox"/> |
| Did you receive any unemployment benefits during the year?   | <input type="checkbox"/> | <input type="checkbox"/> |
| Did you receive any disability income during the year?   | <input type="checkbox"/> | <input type="checkbox"/> |
| Did you receive tip income not reported to your employer this year?  | <input type="checkbox"/> | <input type="checkbox"/> |
| Did any of your life insurance policies mature, or did you surrender any policies?                                       | <input type="checkbox"/> | <input type="checkbox"/> |
| Did you cash any Series EE or I U.S. Savings bonds issued after 1989?  | <input type="checkbox"/> | <input type="checkbox"/> |

**Itemized Deduction Information**

- |   |                          |                          |
|---|--------------------------|--------------------------|
| Did you pay out-of-pocket medical expenses (Co-pays, prescription drugs, etc.)?   | <input type="checkbox"/> | <input type="checkbox"/> |
| Do you have evidence to substantiate charitable contributions?  | <input type="checkbox"/> | <input type="checkbox"/> |
| Did you make any noncash charitable contributions (clothes, furniture, etc.)?   | <input type="checkbox"/> | <input type="checkbox"/> |
| Did you donate a vehicle or boat during the year? If yes, attach Form 1098-C.   | <input type="checkbox"/> | <input type="checkbox"/> |
| Did you have an expense account or allowance during the year?   | <input type="checkbox"/> | <input type="checkbox"/> |
| Did you use your car on the job, for other than commuting?  | <input type="checkbox"/> | <input type="checkbox"/> |
| Did you work out of town for part of the year?  | <input type="checkbox"/> | <input type="checkbox"/> |
| Did you have any expenses related to seeking a new job during the year?   | <input type="checkbox"/> | <input type="checkbox"/> |
| Did you pay mortgage interest this year?  | <input type="checkbox"/> | <input type="checkbox"/> |
| Did you pay real estate taxes this year?  | <input type="checkbox"/> | <input type="checkbox"/> |
| Did you make any major purchases during the year (cars, boats, etc.)?   | <input type="checkbox"/> | <input type="checkbox"/> |
| Did you make any out-of-state purchases (by telephone, internet, mail, in person) that the seller did not collect state sales or use tax? | <input type="checkbox"/> | <input type="checkbox"/> |

**Miscellaneous Information**

- |   |                          |                          |
|---|--------------------------|--------------------------|
| Did you make gifts of more than \$15,000 to any individual?   | <input type="checkbox"/> | <input type="checkbox"/> |
| Did you have any educational expenses during the year on behalf of yourself, your spouse, or a dependent? | <input type="checkbox"/> | <input type="checkbox"/> |
| Did you make any contributions to a Health savings account (HSA) or Archer MSA?                           | <input type="checkbox"/> | <input type="checkbox"/> |
| Did you pay long-term health care premiums for yourself or your family?                                   | <input type="checkbox"/> | <input type="checkbox"/> |
| Did you pay any COBRA health care coverage continuation premiums?   | <input type="checkbox"/> | <input type="checkbox"/> |
| If you are a business owner, did you pay health insurance premiums for your                               |                          |                          |

- employees this year?
- Did you utilize an area of your home for business purposes?
- Did you engage in any bartering transactions?
- Are you an active participant in a pension or retirement plan?
- Did you retire or change jobs this year?
- Did you, your spouse, or your dependents attend a post-secondary school during the year, or plan to attend one in the coming year?
- Did you pay any individual as a household employee during the year?
- Did you make energy efficient improvements to your main home this year?
- Were you a grantor or transferor for a foreign trust, or do you have an interest in or a signature or other authority over a bank account, securities account, or other financial account in a foreign country?
- Did you receive correspondence from the State or the Internal Revenue Service?
- If yes, explain: \_\_\_\_\_
- Did you receive an Identity Protection PIN from the Internal Revenue Service or have you been a victim of identity theft?
- Do you want to designate \$3 to the Presidential Election Campaign Fund?
- If you check yes, it will not change your tax or reduce your refund.

## INCOME

### Wages & Salaries

- Please provide all W-2 Forms

### Interest & Dividend Income

- Please provide all 1099 forms received, including mutual fund year end reports.

### Capital Gains

- Capital gains come from sales or redemptions of stocks, mutual funds, bonds, real estate or personal property. We need all 1099 Forms, brokerage statements, or mutual fund statements. Many times the brokerage statements will contain this information. We don't need information on your transactions in your tax-deferred accounts, such as 401K, pension or IRA accounts.

### Other Income

- State and Local tax refunds
- Distributions from Pensions, IRAs or Annuities - Provide 1099-R Forms
- IRA or pension plan rollover - bring in any 1099-R Forms
- Social Security Received - bring in SSA-1099 Forms
- Alimony Received - Total Received \$ \_\_\_\_\_
- Gambling Winnings \$ \_\_\_\_\_ Gambling Losses \$ \_\_\_\_\_ - bring in all W-2G's and casino statements
- Partnerships, S-Corporations, Joint Ventures, Estate & Trusts - bring in K-1 Forms
- Self Employment Income - bring in a summary of your income and expenses for the year
- Prizes and awards \$ \_\_\_\_\_
- Jury Duty \$ \_\_\_\_\_
- Scholarships / taxable fellowships - bring in 1099s or W-2s
- Unemployment Compensation - bring in unemployment 1099s
- Other Income: \_\_\_\_\_

## ADJUSTMENTS TO INCOME



Due Date	Date Paid	Amount	Date Paid	Amount	Date Paid	Amount
Prior Year						
4/15/18						
6/17/18						
9/16/18						
1/15/19						
Other						

Please include any documentation on any other payments to taxing authorities that you made.

## ITEMIZED DEDUCTIONS

### Medical Expenses

**Your total medical expense must be greater than 7.5% of your adjusted gross income to receive any deduction.**

Please summarize your total medical expenses or bring in documentation supporting your deduction. Below are some common deductible medical expenses:

- |  |   |
|--|---|
| <input type="checkbox"/> Hospital, Health Facility, Nurse Help<br><input type="checkbox"/> Eye glasses, contacts, hearing aids<br><input type="checkbox"/> Mileage to/from doctor: _____<br><input type="checkbox"/> Ambulance, Parking, Taxi<br><input type="checkbox"/> Other: | <input type="checkbox"/> Health insurance<br><input type="checkbox"/> Sick room supplies, wheelchair<br><input type="checkbox"/> Prescription drugs<br><input type="checkbox"/> Home improvements for health<br><input type="checkbox"/> Long-term care insurance |
|--|---|

### Taxes Paid

Please summarize your total real estate taxes below:

- |  |  |
|--|--|
| <input type="checkbox"/> Real estate – homes, second residence, camps<br><input type="checkbox"/> Real estate – land | <input type="checkbox"/> Auto/boat personal property taxes<br><input type="checkbox"/> Personal property taxes |
|--|--|

**Sales Tax Paid** - If you purchased a vehicle or have other large purchases, you may be entitled to this deduction. It is taken in lieu of the State Income Taxes paid. Please bring in documents purchasing your major purchases during the year.

### Interest Expense

- Mortgage Interest - Please bring in all 1098 Forms and/or mortgage statements. Bring in any settlement statements if you refinanced.**
- Investment Interest – please bring in any documentation you have in connection with any investment interest you had during the year.

### Charitable Contributions

The law now requires that you have a receipt or cancelled check for all contributions. For contributions over \$250, you must have a written statement from the charity. Please bring in any support you have for your charitable contributions or feel free to use the following two charts:

Charity	Amount	Charity	Amount
Church/Temple/House of Worship			
Payroll Deduction (United Way, etc)			
Other –			

**Non-cash Charity** (If total value is under \$500, the list below is not required) Value, if over \$500

Name of Charity		Name of Charity	
Brief Description Of the Items		Brief Description Of the Items	
Date Given		Date given	
Original Cost:	Value:	Original Cost:	Value:

### **Important Note about the IRS**

The IRS has vastly expanded its audit programs as it has been directed by Congress to “close” the tax gap. As a result, more audits and spot checks are to be expected. Protect yourself: keep good records, and keep them for at least seven years. Never ignore correspondence from tax authorities. The IRS has a tendency to bill for taxes and penalties without first checking the facts, so be wary.

### **Warnings about Identity Theft**

The IRS does not send out unsolicited emails or phone calls requesting detailed personal information. Such authentic-looking emails are called “phishing” emails and responding may expose you to identity theft. If you receive such an email from the IRS, send a copy of the email to [phishing@irs.gov](mailto:phishing@irs.gov). Please do not respond to the email unless the email requests you send to the IRS has been verified as legitimate. You may also contact our office regarding any correspondence, written or electronic, that you receive from the IRS.

### **Electronic Filing Mandate**

IRS regulations require paid tax preparers who expect to prepare and file 11 or more federal individual or trust tax returns to file them electronically. To comply with this requirement, your return will be electronically filed this year. The benefits of e-filing include a secure way to file tax returns and it provides proof that the IRS has accepted your return for processing. Contact our office if you prefer to have your return filed on paper.

### **Information on Your Confidentiality**

Like all providers of personal financial services, tax professionals are required by law to inform clients of their policies regarding privacy of client information. Our firm continues to adhere to professional standards of confidentiality that are even more stringent than those required by law. We have always protected the security and privacy of your personal and financial information.

#### *Types of Nonpublic Personal Information We Collect*

The only nonpublic personal information we collect is provided to us by you or obtained with your authorization.

#### *Parties to Whom We Disclose Information*

We do not disclose any nonpublic personal information obtained in the course of our practice except as required or permitted by law. Permitted disclosures may include providing information to our employees, or, in limited situations, to unrelated third parties who need that information to assist us in serving you. In all situations, we stress the confidential nature of the information being shared.

#### *Protecting the Confidentiality and Security of Clients’ Information*

We retain records relating to our professional services to better serve your professional needs and, in some cases, to comply with professional guidelines. In order to protect your nonpublic personal information, we maintain physical, electronic, and procedural safeguards that comply with our professional standards.

Thank you for your past patronage and we look forward to serving you in the upcoming tax season.

**Brink & Associates, CPA’s**