



# George Goldstein Co.

**Certified Public Accountants**

Tax Organizer  
**2019**

When was the last Year we did your taxes. For tax years 2018  2017  2016

Taxpayer/Primary Name \_\_\_\_\_ SSN \_\_\_\_\_ - - - - - DOB \_\_\_\_/\_\_\_\_/\_\_\_\_

Spouse Name \_\_\_\_\_ SSN \_\_\_\_\_ - - - - - DOB \_\_\_\_/\_\_\_\_/\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

\_\_\_\_\_ e.mail \_\_\_\_\_

Tax Payer Occupation \_\_\_\_\_ Spouse Occupation \_\_\_\_\_

If you are a repeat client, please **fill in only changes**. New Clients please complete all sections.

- Single  Married Filing Separately
- Married Filing Joint  Unmarried Head of Household

| Dependent Name | SSN | DOB | Relationship | Full-Time Student |    |     |    |
|----------------|-----|-----|--------------|-------------------|----|-----|----|
|                |     |     |              | Yes               | No | Yes | No |
|                | - - | / / |              |                   |    |     |    |
|                | - - | / / |              |                   |    |     |    |
|                | - - | / / |              |                   |    |     |    |
|                | - - | / / |              |                   |    |     |    |

### For Direct Deposit and Direct Withdrawals

| Name of Bank | Routing # | Account # |
|--------------|-----------|-----------|
|              |           |           |

| DAYCARE | EIN# | ADDRESS | AMOUNT PAID |
|---------|------|---------|-------------|
|         |      |         |             |

### Income (Please do check all that apply and submit the corresponding documents):

- W2'S  1099 In  1099 Dividend  1099 Misc. Income  K1's  Social Security
- 1099-C (Cancellation)  IRA/ Pension/ 1099R  Unemployment  Rental Income

- Stud. Loan Interest  Tuition Fees paid  Mortgage Interest  Home Equity Loan Interest
- PMI Donation (Details)  Uniforms  Tools  Union Dues  Safe Dep.Box  Professional Dues

• **Did you have Full Health Care in 2019 ?** Yes / No. **Did you receive Form 1095-A (if yes attach)**

I/We certify that we have enclosed above marked source documents for tax preparation for the tax year 2019.

Other Remarks:

\_\_\_\_\_  
Signature Date

### For Office use only:



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**Exhibit A Business Income And Expenses**  
**For Schedule - C, LLC's, Corp's, Partnership's**

| RECEIPTS & INVENTORY             |    |
|----------------------------------|----|
| Gross Receipts                   | \$ |
|                                  |    |
|                                  |    |
| Opening Inventory                | \$ |
| Purchases                        | \$ |
| Ending Inventory                 | \$ |
|                                  |    |
| Other Income                     | \$ |
|                                  |    |
| EXPENSES                         |    |
| 1099 Issued                      | \$ |
| Wages paid                       | \$ |
| Advertising                      | \$ |
| Car & Truck Expenses             | \$ |
| Commissions & Fees               | \$ |
| Contract Labor                   | \$ |
| Development costs                | \$ |
| Insurance                        | \$ |
| Meals & Entertainment            | \$ |
| Loan Interest - Business Related | \$ |
| Legal/Professional Fees          | \$ |
| Office Expense                   | \$ |
| Postage & shipping               | \$ |
| Pension & Profit-Sharing Plan    | \$ |
| Rent/Lease                       | \$ |
| Repairs & Maintenance            | \$ |
| Supplies                         | \$ |
| Taxes & License                  | \$ |
| Telephone                        | \$ |
| Education & Training             | \$ |
| Travel                           | \$ |
| Utilities                        | \$ |
|                                  |    |
| OTHER EXPENSES                   |    |
|                                  |    |
|                                  |    |
|                                  |    |
| ASSETS PURCHASE                  |    |
| Description                      | \$ |
|                                  |    |
|                                  |    |
| Date of purchase                 |    |
|                                  |    |
|                                  |    |



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2019

\_\_\_\_\_

Name

SSN

EIN

**Exhibit B  
Schedule - E**

**Rental Property**

| Property Address                    | 01 | 02 | 03 | 04 |
|-------------------------------------|----|----|----|----|
| Prop. Type: Single/Duplex/Condo     |    |    |    |    |
| Rental Income                       |    |    |    |    |
| Expense                             |    |    |    |    |
| Advertisement                       |    |    |    |    |
| Auto & Travel                       |    |    |    |    |
| Cleaning & Maintenance              |    |    |    |    |
| Commission                          |    |    |    |    |
| Insurance                           |    |    |    |    |
| Professional Fee (Legal)            |    |    |    |    |
| Mortgage Interest                   |    |    |    |    |
| Other Interest                      |    |    |    |    |
| Repairs                             |    |    |    |    |
| Supplies                            |    |    |    |    |
| Taxes                               |    |    |    |    |
| Utilities                           |    |    |    |    |
| Commissions                         |    |    |    |    |
| Other (Attach details)              |    |    |    |    |
| Association Dues                    |    |    |    |    |
| License                             |    |    |    |    |
| Grass Cutting                       |    |    |    |    |
| Snow removal                        |    |    |    |    |
| Cost of Building & Date of Purchase |    |    |    |    |
| Improvements                        |    |    |    |    |
| Settlement sheet enclosed Y/N       |    |    |    |    |