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For <u>secure upload of files</u> you want to email to me go to <u>RowlandTax.leapfile.net</u>, select Secure Upload, complete the screen including message and Select Files to Send

As a reminder the <u>password</u> to get into the tax returns emailed to you by this office is the first four letters of your last name and the last five numbers of your social security number (no caps and no spaces).

INCOME TAX ORGANIZER - TAX YEAR 2021

<u>Instructions</u>: Please complete this tax organizer as accurately as possible. For those items you are not sure of, insert a question mark (?). As a recommendation, you may want to segregate your receipts and canceled checks according to the following categories at the same time you fill out this questionnaire. It will then be a simper matter to prepare if and/or when you get audited.

TAXPAYER NAME Social Security Number (if not on file)					
Occupation					
Date of Birth					
Telephone Number				<u> </u>	
Email					
Blind (Y/N)	YES	or		NO	
SPOUSE					
Social Security Number (if not on file)					
Occupation					
Date of Birth					
Telephone Number					
Email					
Blind (Y/N)	YES	or		NO	
Address (if changed)			Zip		
ELECTRONIC FILING OPTIONS (check ye	s or no for each op	tion)			
1. E-File federal and state returns		YES	or		NO
2. Email to you your copy of the returns		YES	or		NO
3. Direct Deposit refund(s) to bank account		YES	or		NO
If yes, please provide a VOIDED CHECK					
If direct deposit to same bank account as last year	r, confirm last 4 d	igits on a	ccount		
VIRTUAL CURRENCY					
At any time in 2021, did you receive, sell, exchan	nge or otherwise di	ispose of a	any financia	al interest in an	у
virtual currency (i.e. Bitcoin)?		YES	or		NO
RECOVERY REBATE CREDIT					
Enter the amount, if any, of the third Economic	Stimulus Paymen	t the taxpa	ayer receive	ed. This was	
generally received in March 2021. Find this amo	unt on Notice 1444	4-C or IR	S Letter 64	75.	
The IRS Letter 6475 will be mailed out to you in	early 2022 confirm	ning total	amount of	the third payme	ent.

Amount \$

\$1,400/per adult and \$1,400/per dependent

DOCUMENTS TO BRING OR SEND

DOCUMENTS TO BRING OK SEND
Forms W-2 from your work
Forms 1099-G from Unemployment Compensation
Forms K-1 from partnership, S corporations, trusts, or estates
Forms 1099-DIV from dividends
Forms 1099 B Broker recaps of stock transactions
Social Security Earnings (Form SSA-1099)
Forms 1099R for Pension and IRA Distributions
Business Profit and Loss Statement and if avaliable, year end Balance Sheet
Closing Statement for purchase, sale, or refinance of real estate
Form 1098-T for Higher Education Tuition expenses
Form 1095-A for Health Insurance purchased through a government exchange
Copies of you and your spouse's driver license or passport
Birth Certificate and Social Security card for each child being claimed as a dependent
IRS Letter 6419 for Advanced Payment of Child Tax Credit
IRS Letter 6475 for 3rd Economic Stimuls Payment
Last year's return (if you are a new client)

CHILD TAX CREDIT CHECKS RECEIVED

Starting July 1, 2021 - December 31, 2021 (6 months) Find amount(s) on IRS - Child Tax Credit Update **Portal** to View Your Payments or **IRS Letter 6419** <u>https://www.irs.gov/credits-deductions/child-tax-credit-update-portal</u>

July	\$
August	\$
September	\$
October	\$
November	\$
December	\$

DEPENDENT CHILDREN

Please notate if they are not living at home and/or you are not the custodial parent

Name	Date of Birth	Social Security No.	Dependent	ts Other Than Children	
		(if not on file)			
If you lived a	part from your spouse for the	he whole year is your ch	ild or grande	hild	
living with yo		ie whole year, is your en	YES	or	NO

INTEREST

Attach the Forms 1099 for any dividends received Payer Amount \$

\$ \$ \$ \$ \$ \$ \$ U.S. Govt. Interest \$ Municipal Bond Interest \$

<u>OTHER INCOME</u> (i.e. alimony received, barter income, debt forgiveness (you owed), gambling, lottery winings, principal payments from prior year installment sales, tips received, and/or unemployment compensation received (attached if taxes withheld):

<u>FOREIGN INVESTMENT</u> (Form 8938 and FBAR): Other than a publically traded stock do you own or have signature power over a foreign bank account, a foreign investment account, or an interest in a foreign corporation, foreign partnership, or foreign trust which in total were worth more than **\$10,000** during the tax year? (Y/N) YES or NO

If so, describe and list the highest value of each account/investment during the year:

Gift or Inheritance from a foreign source or have a transaction with a foreign trust (Form 3520)?(Y/N)YESOrNO

If so, describe:

QUESTIONS

SALE OF REAL ESTATE Did you sell any real estate during the year (Y/N)?

If so, provide me the <u>sale</u> escrow statement (Closing Statement). If the property sold is <u>other</u> than your primary residence in which you lived in for more than 2 years, also make a list of improvements (including cost) made to the property and provide me the <u>purchase</u> escrow statement (Closing Statement).

SALE OF STOCKS, BONDS, AND/OR CRYPTO CURRENCY

Provide me a broker's recap including original cost. If not available itemize stock transactions below.

Number of Shares and Date Purchased	Date Sold	Total Net Sale Proces	Total Net Sale Proceeds Total Cost	
Name of Stock/Bond/Crypto		(less commission) (incl. commission		
		\$	\$	
		\$	\$	
		\$	\$	
		\$	\$	

RENTAL INCOME

Are you a real estate professional? i.e. development, construction, management, agent, or broker (Y/N)

	Property A	В	С	D
Address(es)				
Total Rents	\$	\$	\$	\$
Rental Expenses				
Advertising	\$	\$	\$	\$
Auto Mileage	mile	es	miles	miles
Cleaning and maintenance	\$	\$	\$	\$
Commissions	\$	\$	\$	\$
Insurance	\$	\$	\$	\$
Legal and professional	\$	\$	\$	\$
Management fees	\$	\$	\$	\$
Interest - mortgage	\$	\$	\$	\$
Interest - other	\$	\$	\$	\$
Repairs(*)	\$	\$	\$	\$
Improv/Major purchase(s)	\$	\$	\$	\$
Supplies	\$	\$	\$	\$
Taxes	\$	\$	\$	\$
Utilities	\$	\$	\$	\$
Homeowners Dues	\$	\$	\$	\$
	\$	\$	\$	\$

* Repairs and maintenance: itemize large items if total exceeds \$5,000.

If so, describe

ESTIMATED TAXES

	Date Paid	Federal	Arizona	State
April 15th payment		\$	\$	\$
June 15th		\$	\$	\$
September 15th		\$	\$	\$
January 15th, 2022		\$	\$	\$
UNISEUNI D UELI)			

HOUSEHOLD HELP

Babysitting, cleaning, cooking, gardening, etc. in excess of \$2,100 a year? If so, you may be liable for social security and unemployment taxes.

CHILD OR DISABLED DEPENDENT CARE

Paid for care of child(ren) under the age of 13 or a dependent who is physically unable to care for him or herself.

To Whom Paid	Social Security No. or Fed ID	Amount Paid
		\$
		\$
		\$
		\$

SOCIAL SECURITY If you are under age 66 and 4 mor	nths and receiving	Social Security	, did you have
business profits or wages in 2021 of more than \$18,240?	(Y/N)		

YES

or

ENERGY CREDIT

Energy-efficient exterior windows, doors, skylights, roofs (metal and asphalt), and roof products or insulation (maximum amount \$3,000). Costs of solar electricity system or solar water heater. https://www.energystar.gov/

Describe	
and amount	\$

GIFT TAX RETURN Did you make gifts	of more than \$15,000 to any	one individual during the year?
(Y/N)		

	YES	or	NO
IRA, SEP, OR KEOGH CONTRIBUTIONS			
2021 contributions made or to be made to (IRA, R	oth IRA, SEP, Keogh P	'lan):	
Taxpayer: <u></u> \$	Spouse:	\$	
Amounts rolled over in 2021 to a Roth IRA			

IRA Distribution? If so, December 31, 2021 balance in all IRA Accounts:

Taxpayer: \$

Spouse

\$

NO

NO

MISCELLANEOUS DEDUCTIONS AND CREDITS

Tuition and fees (1st 4 years of post)	high school)	\$
and books		\$
Student's name		
(include Form 1098-T)		
(metude Form 1098-1)		
Other tuition and fees (post high scho	pol)	\$
and books		\$
Student's name		
School name		
(include Form 1098-T)		
	Name	Amount
Interest on student loan- 1		\$
Interest on student loan - 2		\$
Alimony paid \$	Paid to and	Social Security No.
(only for divorces prior to 2019)		·
Interest forfeiture on CD	\$	
EE Bond interest - educational	\$	
Uncollectible loans	\$	
Worthless securities	\$	
and describe		
Gambling losses	\$	
(no more than gambling income)For each gambling "session" you nee(2) name and location of the gamblin(4) the amounts you won or loss.	-	(1) the date and type of each wager, es of person(s) accompanying you, and
Raw Land or other Real Estate held f Section 266 Election to Capitalize	for investment (other than	a rental property) expenses
	\$	
529 College Savings Account In 2021, did you contribute any mon-	ey to a 529 College Savir	ngs Account. If so, how much?
	\$	
Adoption Expanse		
Adoption Expense In 2021, how much?	\$	
	Ψ	

Employee use of a home office is no longer deductible by an employee and instead employee should seek reimbursement from their employer for the office portion of their expenses. Square Footage of your home Square Footage of the room used for business HOA Dues \$ Rent \$ BUSINESS MILEAGE Do you have a mileage log for the business miles \$ BUSINESS MILEAGE Do you have a mileage log for the business miles (Y/N) YES or NO Employee use of a vehicle for work is no longer deductible by an employee and instead get reimbursed by your employer. NO (do not include to and from work) and total business miles NO Car #1: total miles and total business miles Image: Second	Did you use a space in yo	our home regularly and ex	YES	(Y/N) or		NO
Square Footage of the room used for business Repairs \$ HOA Dues \$ Repairs \$ Insurance \$ Utilities \$ Rent \$ Other \$ BUSINESS MILEAGE Do you have a mileage log for the business miles (V/N) YES NO Employee use of a vehicle for work is no longer deductible by an employee and instead get reimbursed by your employer. NO (do not include to and from work) and total business miles	should seek reimbursen	nent from their employe				
Insurance § Utilities § Rent \$ Other \$ BUSINESS MILEAGE Do you have a mileage log for the business miles (Y/N) YES or NO Employee use of a vehicle for work is no longer deductible by an employee and instead get reimbursed by your employer. (do not include to and from work) and total business miles NO Car #1: total miles and total business miles						
Rent \$ Other \$ BUSINESS MILEAGE Do you have a mileage log for the business miles (Y/N) YES or NO For provide the second of the second o	HOA Dues	\$	Repairs		\$	
BUSINESS MILEAGE Do you have a mileage log for the business miles YES orNO YES orNO YES orNO Employee use of a vehicle for work is no longer deductible by an employee and instead get reimbursed by your employer. NO (do not include to and from work) and total business miles	Insurance	\$	Utilities		\$	
YES orNO Employee use of a vehicle for work is no longer deductible by an employee and instead get reimbursed by your employer. (do not include to and from work) and total business miles	Rent	\$	Other		\$	
YES orNO Employee use of a vehicle for work is no longer deductible by an employee and instead get reimbursed by your employer. (do not include to and from work) and total business miles	BUSINESS MILEAGE	Do you have a mileage lo	g for the business miles	(Y/N)		
Employee use of a vehicle for work is no longer deductible by an employee and instead get reimbursed by your employer. (do not include to and from work) Car #1: total miles and total business miles Car #2: total miles and total business miles BUSINESS VEHICLE EXPENSES (optional) and total business miles If not completed we will use 56 cents per mile Car #1 Gas, oil, lubrication \$ \$ Repairs \$ \$ Insurance \$ \$ Lease payments \$ \$ Interest on vehicle \$ \$ Cost of new car \$ \$ Date purchased and year and model (need even if taking 56 cents per mile)		, .	-			NO
reimbursed by your employer. (do not include to and from work) Car #1: total miles and total business miles Car #2: total miles and total business miles BUSINESS VEHICLE EXPENSES (optional) If not completed we will use 56 cents per mile Gas, oil, lubrication \$ \$ \$ Insurance \$ \$ \$ Tires, supplies, etc. \$ Lease payments \$ Interest on vehicle \$ Cost of new car \$ Date purchased and year and model (need even if taking 56 cents per mile)	Employee use of a vehic	le for work is no longer	deductible by an empl	ovee and i	nstead get	
(do not include to and from work) Car #1: total miles and total business miles Car #2: total miles and total business miles BUSINESS VEHICLE EXPENSES (optional) If not completed we will use 56 cents per mile Gas, oil, lubrication \$ \$ \$ Insurance \$ \$ \$ Tires, supplies, etc. \$ Lease payments \$ Interest on vehicle \$ Cost of new car \$ Date purchased and year and model (need even if taking 56 cents per mile)		8	, r		8	
Car #1: total miles and total business miles Car #2: total miles and total business miles BUSINESS VEHICLE EXPENSES (optional) If not completed we will use 56 cents per mile Gas, oil, lubrication \$ \$ \$ Repairs \$ \$ \$ Insurance \$ \$ \$ Lease payments \$ Interest on vehicle \$ Cost of new car \$ Date purchased and year and model (need even if taking 56 cents per mile)						
Car #2: total miles and total business miles BUSINESS VEHICLE EXPENSES (optional) If not completed we will use 56 cents per mile Gas, oil, lubrication \$ Repairs \$ Insurance \$ Tires, supplies, etc. \$ Lease payments \$ Interest on vehicle \$ Cost of new car \$ Date purchased and year and model (need even if taking 56 cents per mile)		,				
BUSINESS VEHICLE EXPENSES (optional) If not completed we will use 56 cents per mile Gas, oil, lubrication \$ Repairs \$ Insurance \$ S \$ Tires, supplies, etc. \$ Lease payments \$ Interest on vehicle \$ Cost of new car \$ Date purchased and year and model (need even if taking 56 cents per mile)	Car #1: total miles	æ	and total business miles			
If not completed we will use 56 cents per mile Gas, oil, lubrication \$ Repairs \$ Insurance \$ S \$ Tires, supplies, etc. \$ Lease payments \$ Interest on vehicle \$ Cost of new car \$ Date purchased and year and model (need even if taking 56 cents per mile)	Car #2: total miles	a	and total business miles			
Gas, oil, lubrication\$\$Repairs\$\$Repairs\$\$Insurance\$\$Tires, supplies, etc.\$\$Lease payments\$\$Interest on vehicle\$\$Cost of new car\$\$Date purchased and year and model (need even if taking 56 cents per mile)						
Gas, oil, lubrication\$\$Repairs\$\$Repairs\$\$Insurance\$\$Supplies, etc.\$\$Lease payments\$\$Interest on vehicle\$\$Cost of new car\$\$Date purchased and year and model (need even if taking 56 cents per mile)		Cor #1	Cor #2			
Repairs\$\$Insurance\$\$Supplies, etc.\$Lease payments\$Lease payments\$Interest on vehicle\$Supplies of new car\$Cost of new car\$Date purchased and year and model (need even if taking 56 cents per mile)	Gas oil lubrication					
Insurance \$ \$ Tires, supplies, etc. \$ \$ Lease payments \$ \$ Lease payments \$ \$ Interest on vehicle \$ \$ Cost of new car \$ \$ Date purchased and year and model (need even if taking 56 cents per mile) \$					_	
Tires, supplies, etc. \$ \$ Lease payments \$ \$ Interest on vehicle \$ \$ Cost of new car \$ \$ Date purchased and year and model (need even if taking 56 cents per mile)					_	
Lease payments \$ \$ Interest on vehicle \$ \$ Cost of new car \$ \$ Date purchased and year and model (need even if taking 56 cents per mile) •					_	
Interest on vehicle \$ Sost of new car Date purchased and year and model (need even if taking 56 cents per mile)					_	
Date purchased and year and model (need even if taking 56 cents per mile)					_	
Date purchased and year and model (need even if taking 56 cents per mile)	Cost of new cor					
(need even if taking 56 cents per mile)		and model				
	· ·					
	(need even it taking 50 c	ents per nine)				
MOVING EXPENSES	MOVING EVDENCES					
Tax laws TCJA suspends moving expense deduction except for members of the Armed Forces of the	LOV LOWE LL'IA CUEDONA	s moving expense deduction	on excent for members	of the Arm	ea Forces of the	<u>,</u>

United States on active duty that move due to military order for permanent station change.

Cost of moving household goods	\$
Motels in route	\$
Cost of air travel	\$

MEDICAL, DENTAL, AND HOSPITAL EXPENSES

If itemizing, fully deductible on Arizona (or other State) return.

Obamacare health insurance subsidy re	ceived(see Form 1095-A	L) <u>\$</u>
Medicare paid out of Social Security ch	necks	\$
Medical, Vision, and/or Dental Insuran	ce	\$
Amount paid into HSA (Health Savings Amount paid into HSA thru payroll Amount paid into HSA outside of work Medical bills paid from the HSA		\$ \$ \$ \$
Nursing Home (LTC) Insurance Premit Nursing Home (LTC) Insurance Premit		T <u>\$</u> S <u>\$</u>
Travel for medical care		miles
Air conditioning (medically req.) \$ Ambulance \$ Chiropractor \$ Doctor and dental \$ Eyeglasses/contacts/supplies \$ Hearing aids/batteries \$ Hospital \$ \$ \$ Medical insurance reimbusement on an * Therapy Pool - medically required ** Weight Loss Program - no food and	N P T V V v v v v v v v v	· · · · · · · · · · · · · · · · · · ·
TAXES PAID BY YOU Vehicle license fees (total paid) Real estate taxes on your home Real estate taxes on 2nd home Real estate taxes on other property Trailer or boat tax Foreign tax paid Sales taxes on major purchases Describe	\$ \$ \$ \$ \$ \$	Home Office (Y/N)? not rental property not rental property if not reported on Form 1099

(i.e. vehicle, boat, aircraft, or home improvement)

INTEREST PAID BY YOU

Attach all Forms 1098		
	To Whom Paid	Amount
Home - 1st mortgage		\$
Home - 2nd mortgage		\$
2nd Home		\$
Mortgage insurance paid (mortgage insurance paid in 2021 or	mortgage that began a	\$ fter 2006)
Points paid on a new mortgage		\$
Points paid on a Refinance		\$
Investment loan interest		\$
CONTRIBUTIONS DONATION	JC	

CONTRIBUTIONS - DONATIONS

May qualify for Federal and State	s) deduction even if not	itemizing deductions .
Checks or cash with receipts (cash d	onations without receipts	are not dedutible). Make sure you have
written receipts for any single gift ov	ver \$250 .	
Religious	\$	
United Way	\$	-
AZ Working Poor Org.	\$	Name of Org.
AZ Foster Care Org.	\$	Name of Org.
https://azdor.gov/tax-credits/contribu	<u>itions-qcos-and-qfcos</u>	
AZ Scholarship Org.	\$	Name of Org.
https://azdor.gov/tax-credits/certifica	ation-school-tuition-organ	nizations
AZ Public School	\$	Name of School
https://azdor.gov/tax-credits/public-s	school-tax-credit	
Total of all OTHER contributions	with checks and/or receip	ts <u></u> \$
Clothing, furniture, etc. with a good	or better condition	
https://satruck.org/Home/DonationV	alueGuide	
Goodwill	\$ and	\$
Salvation Army	\$ and	\$
	\$ and	\$
Miles put on your car to help a chari	table organization	
Miles	and	Organization
Charitable travel costs	\$	i.e. airfare, hotels, etc.

FORM 7200

FORM 7200 Are you a self-employed taxpayer(s) whose business gross receipts compared to the corresponding
quarter in 2019 or the prior quarter business gross receipts declined by 20 percent (or more) in the first,second, or third quarter of 2021?(Y/N)YESOrNO
FORM 7202 Are you a self-employed taxpayer(s) who in January 1, 2021 through September 30, 2021 was unable to perform services for your business due to the following:
 You were subject to a federal, state, or local COVID-19 mandate. You were advised by a health care provider to self quarantine due to COVID-19. You were experiencing COVID-19 symptons and seeking medical diagnosis. You provided care for a minor or disabled son and/or daugther whose school or daycare was closed due to COVID-19.
If so, how many days in the first 9 months of 2021 did you experience that time off work
PPPDid your sole proprietorship business or any other business that you have an ownership interest receive a loan under the Payroll Protection Plan "PPP . If so, how much?\$
Note: The forgiveness of the PPP loan is not taxable income.
EIDL

EIDL Did you receive an **Economic Injury Disaster Loan - Small Business Administration "EIDL"** and if so, how much?

*** Left blank intentionally, skip to next page ***

PROFIT OR LOSS FROM BUSINESS (if self-employed)

Attach Profit and Loss Statement and a December 31, 2021 Balance Sheet OR Complete Below

Business or Profession/Product or Service Business name EIN/SSN/ID Address (if different)				
Did you make payments in 2021 that would requ	uire you to file	Forms 10993 YES	? (Y/N) or	NO
Part 1 - Income				
	Amount			
Gross Receipts/Sales	\$			
Returns and Allowances	\$			
Other Income - do not include PPP loan	\$	-		
Part 2 - Costs of Goods Sold				
Beginning Inventory	\$			
Purchases Less Personal	\$	_		
Cost of Labor	\$	_		
Materials and Supplies	\$	-		
Other Costs	\$	-		
Ending Inventory	\$	-		
Part 3 - Expenses				
Advertising	\$			
Car and Truck Expenses	\$	-		
Commissions and Fees	\$	_		
Computer	\$	x	% Business Use =	\$
Contract labor	\$		•	
Dues and Subscriptions	\$	_		
Education and Training	\$	_		
Employee Benefits	\$	_		
Equipment Rental	\$			
Health Insurance for Employees	\$			
Independent Contractors	\$			
Insurance - Liability and Casualty	\$	_		
Insurance - Worker's Compensation	\$	_		
Interest - Mortgage	\$	_		
Interest - Other	\$	_	a / m	•
Internet Fees	\$ \$ \$ \$	Х	% Business Use =	\$
Legal and Professional Eervices	\$	_		
Marketing		_		
Meals - 100% deduction in 2021	\$	_		
Meeting Expenses	\$	_		

Miscellaneous	\$ 		
Office expense	\$		
Outside Services	\$ 		
Payroll Processing Fees	\$ 		
Payroll Tax Expense	\$ 		
Pensions/Profit Share	\$ 		
Permits and Fees	\$ 		
Printing	\$		
Property Taxes	\$ 		
Rent - Vehicle, Machinery	\$ 		
Rent - Other	\$ 		
Repairs and Maintenance	\$ 		
Salaries and Wages - Owners	\$ 		
Salaries and Wages - Other	\$ 		
Security	\$		
Supplies	\$ 		
Taxes and Licenses	\$ 		
Telephone/Cell Phone	\$ X	% Business Use =	\$
Travel	\$		
Utilities	\$		
Other Expenses (list):	\$		
	\$ 		
	\$		
	\$		

BALANCE SHEET ACCOUNTS - Year end Values and if no Balance Sheet is Attached

Balance in Busines Checking Account - 1 Balance in Busines Checking Account - 2 Balance in Business Savings Account	\$ \$ \$
Sales Tax Payable Owed for 2021 but paid in following year	\$
Payroll Tax Payable Owed for 2021 but paid in following year	\$
Loan Balance - 1 Loan Balance - 2 EIDL Loan - SBA Other Other Other	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$
i.e. Notes Payable, Lines of Credit, Equipment L	loans, etc.

QUESTIONS