

# 2021 INDIVIDUAL ORGANIZER



## PERSONAL INFORMATION

Taxpayer Name \_\_\_\_\_ Spouse's Name \_\_\_\_\_

## TAXPAYER QUESTIONNAIRE

**Please answer all the questions below.**

Did any of your personal information change during 2021 (e.g., address, filing status, email, phone, etc.)? \_\_\_ Yes \_\_\_ No  
 If yes, please detail: \_\_\_\_\_

Would you like to contribute \$3 to the Presidential Election Campaign Fund? Taxpayer: \_\_\_ Yes \_\_\_ No Spouse: \_\_\_ Yes \_\_\_ No

Did you have a change in dependents you can claim for 2021? If yes, detail below... \_\_\_ Yes \_\_\_ No

Add or Remove	Dependent's Names (First, Initial, Last)	Birth Date	Soc. Sec. #	Relationship

Have you, or will you by 4/15/2022, make an IRA Contribution? If yes, please provide detail below. \_\_\_ Yes \_\_\_ No

Traditional (taxpayer) \$ \_\_\_\_\_ Roth (taxpayer) \$ \_\_\_\_\_ Traditional (spouse) \$ \_\_\_\_\_ Roth (spouse) \$ \_\_\_\_\_

Did you purchase, sell, or refinance any real estate in 2021? If yes, please provide Closing Statement. \_\_\_ Yes \_\_\_ No

Did any of your children have "unearned income" (interest/dividends/capital gains) over \$1,050? \_\_\_ Yes \_\_\_ No

Did you make any energy efficient improvements to your home in 2021? If yes, please send invoices. \_\_\_ Yes \_\_\_ No

Did you receive, sell, send, exchange, or otherwise acquire any financial interest in any virtual currencies? \_\_\_ Yes \_\_\_ No

Did you have a financial interest in or signature authority over a financial account or asset located in a foreign country? \_\_\_ Yes \_\_\_ No

## PERSONAL ESTIMATED INCOME TAXES PAID **(PLEASE PROVIDE PROOF OF PAYMENT/CHECK COPY)**

<u>Estimated taxes paid:</u>	<u>Date Paid</u>	<u>Federal</u>	<u>Date Paid</u>	<u>State</u>
Balance of 2020 tax <b>Paid in 2021</b>	_____	\$ _____	_____	\$ _____
4th Quarter 2020 tax <b>(due 1/17/21)</b>	_____	\$ _____	_____	\$ _____
1st Quarter 2021 <b>(due 4-15-21)</b>	_____	\$ _____	_____	\$ _____
2nd Quarter 2021 <b>(due 6-15-21)</b>	_____	\$ _____	_____	\$ _____
3rd Quarter 2021 <b>(due 9-15-21)</b>	_____	\$ _____	_____	\$ _____
4th Quarter 2021 <b>(due 1-15-22)</b>	_____	\$ _____	_____	\$ _____

## FORMS OF INCOME

**If you received ANY of these forms, or had ANY of these types of income, please check box, and provide form if-applicable.**

- |   |  |   |
|---|--|---|
| _____ W-2 (Wage & Salary)<br>_____ 1099-INT (Interest)<br>_____ 1099-DIV (Dividends)<br>_____ 1099-B (Brokerage Proceeds)<br>_____ 1099-G (State Refunds & Payments)<br>_____ 1099-R (Pension, IRA & Annuity Distributions/Conversions/Rollovers) | _____ SSA-1099 (Social Security Benefits)<br>_____ 1099-S (Real Estate Proceeds)<br>_____ 1099-C (Cancellation of Debt)<br>_____ K-1 (Partnership, S-Corp or Trust Income)<br>_____ W-2G (Gambling (lottery/prizes/awards/raffles))<br>_____ ANY Other 1099 or Income Tax Form<br>_____ Alimony Income | _____ Business Income (Please fill out BBD Business Organizer or Business Questionnaire)<br>_____ Rental Income (Please fill out BBD Rental Organizer and/or Rental Questionnaire)<br>_____ Do you have ANY other form of income not indicated elsewhere? Please describe...<br>Other Income Described: _____ |
|---|--|---|

## FORMS OF ADJUSTMENTS, DEDUCTIONS AND CREDITS

**If you received ANY of these forms, or had ANY of these expenses, please check box, and provide form if-applicable.**

- |  |  |  |
|--|--|--|
| _____ 1098 (Mortgage Interest)<br>_____ 1098-E (Student Loan Interest)<br>_____ 1098-T (Tuition for household mbr)<br>_____ Penalty on CD withdrawal<br>_____ Other Interest Paid on Investments | _____ 1095-A,B or C (Health Insurance)<br>_____ 5498-SA (HSA or MSA Contribution)<br>_____ 5498 (Retirement Contribution)<br>_____ Gambling Losses<br>_____ Property Tax Statement (other than personal residence) | _____ Alimony Expense<br>_____ Child Care Paid (Need detail split by provider (including SSN/EIN) and by dependent)<br>_____ Adoption Expenses were Incurred |
|--|--|--|

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## FORMS OF ADJUSTMENTS, DEDUCTIONS AND CREDITS (continued)

**If any of the following were paid in 2020, please fill in applicable amounts below.**

### MEDICAL EXPENSE DEDUCTION - LIMITED

Medical Deductions are subject to significant limitations. What was your total Medical Expense for 2021, **not including** Self-Employed Health Insurance nor expenses reimbursed by HSA/MSA Accounts:  
\$ \_\_\_\_\_

We may ask for detail if we think you may benefit.

### PERSONAL PROPERTY TAXES PAID

#### VEHICLE TABS PAID IN 2021

\*\*Send actual auto tab receipts **OR** List plate number of each vehicle\*\*

Plate Number: Vehicle 1 \_\_\_\_\_  
 Plate Number: Vehicle 2 \_\_\_\_\_  
 Plate Number: Vehicle 3 \_\_\_\_\_

### MORTGAGE INTEREST (send all 1098 forms you received. If you paid to an Individual-provide name, address and Soc. Sec. #.)

There are IRS Limitations on Mortgage, Home Equity, and Line of Credit Interest. Please confirm if any of the following apply

- 1) Is any of your mortgage debt secured by a second home, other than your primary residence? \_\_\_ Yes \_\_\_ No
- 2) Is your total personal mortgage debt over \$750,000 at the end of 2021? \_\_\_ Yes \_\_\_ No
- 3) Were any mortgage debt proceeds used for anything other than to buy, build or improve your home? \_\_\_ Yes \_\_\_ No

### REAL ESTATE TAXES (Primary Residence & Secondary Residence – Also Send Property Tax Statements)

\$ \_\_\_\_\_ Primary Residence      \$ \_\_\_\_\_ Secondary Residence ... Secondary Address: \_\_\_\_\_

### CONTRIBUTIONS to IRS approved charities (receipt is required on donations of \$250 or more to each charity)

\$ \_\_\_\_\_ Contributions of money – **written verification required**

\$ \_\_\_\_\_ Gifts other than cash (i.e. Goodwill, Vehicle, etc.) (If total of **ALL** non-cash contributions exceed \$500 in 2021 then itemize and **provide name, address, date and cost.** (Items in good or better condition.)

### OTHER ADJUSTMENTS

\$ \_\_\_\_\_ School Supplies purchased by Teachers

\*\*\*\*\* MINNESOTA RESIDENTS ONLY \*\*\*\*\*

### STATE ELECTIONS FUNDS & DEDUCTIONS

Designate \$5.00 to **State Elections** Campaign Fund? (Indicating a party will not increase or decrease your refund/payment)

\_\_\_ Independent      \_\_\_ Republican      \_\_\_ Democratic Farmer-Labor      \_\_\_ Green      \_\_\_ General Campaign Fund

\$ \_\_\_\_\_ Amount for **Non-Game Wildlife Fund** (Reduces Refund or Increases Amount Due)

### Miscellaneous Employee Expenses (W-2 employees only) - **DO NOT LIST EXPENSES FOR BUSINESS**

\$ \_\_\_\_\_ Un-reimbursed employee business expenses (W2)

### LONG TERM CARE INSURANCE CREDIT

Policy Number \_\_\_\_\_ Insurance Company \_\_\_\_\_ Premiums Paid \_\_\_\_\_ (**Taxpayer**)

Policy Number \_\_\_\_\_ Insurance Company \_\_\_\_\_ Premiums Paid \_\_\_\_\_ (**Spouse**)

### EDUCATION EXPENSES - (K-12 Subtraction or Credit) – List separately for each child, complete Instructor Name & Address for Ind. Fees lessons

Child Name and Grade at End of Year				
Class Fees (field trips)				
Individual Fees (Tutoring, music/dance lessons)				
<b>Name of Institution / Instructor</b>			<b>Address:</b>	
Textbooks & School/Project Supplies				
Musical Instruments (Purchase or rental fees)				
List instrument purchased				
Computer Hardware/Software (Educational programs)				
Private School Tuition (K-12 only)				

### Did you contribute to a 529 plan in 2021 (as owner or established for the benefit of any individual)?

\_\_\_ Yes \_\_\_ No. If yes, List (Do this for each account you made a 529 contribution to):

Trustee name: \_\_\_\_\_ Account number: \_\_\_\_\_ Amount contributed: \$ \_\_\_\_\_

Trustee name: \_\_\_\_\_ Account number: \_\_\_\_\_ Amount contributed: \$ \_\_\_\_\_

Trustee name: \_\_\_\_\_ Account number: \_\_\_\_\_ Amount contributed: \$ \_\_\_\_\_

**Total Amounts Distributed in 2021, from all accounts:** \$ \_\_\_\_\_