PERSONAL INCOME TAX ORGANIZER

TAX YEAR

1 START HERE

Complete the parts that apply to you. If you are unsure, check 'Not sure' or leave a note - we will follow up.

PRIMARY TAXPAYER

SPOUSE, IF FILING JOINTLY

BEST PHONE

BEST EMAIL

BEST WAY TO CONTACT YOU

☐ Email ☐ Phone ☐ Client portal

Protect your information

Upload this organizer, Social Security numbers, tax documents, and bank information only through the secure client portal. Do not send them by ordinary email, and never include portal passwords in this form.

Please send these items

☐ Your complete prior-year federal, state, and local tax returns, including all schedules

☐ Every tax form you received, including corrected forms

☐ Proof of estimated or extension tax payments

☐ Any IRS, state, or local tax notices

☐ Business, rental, deduction, and credit records that apply to you

Prior-year return status - check one

☐ Already on file with Clear Course ☐ Uploaded with this organizer

☐ Will provide ☐ First-time filer - no prior return

How to use this organizer

1. Check the boxes that apply and fill in the requested details.
2. Upload the organizer and source documents through the secure portal.
3. Keep original records. We may request clarification or additional support.

2 ABOUT YOU AND YOUR HOUSEHOLD

Taxpayer information

LEGAL NAME

SOCIAL SECURITY NUMBER

DATE OF BIRTH

OCCUPATION

IRS IDENTITY-PROTECTION PIN, IF ANY

SPOUSE LEGAL NAME

SPOUSE SOCIAL SECURITY NUMBER

DATE OF BIRTH

SPOUSE OCCUPATION

SPOUSE IRS IDENTITY-PROTECTION PIN, IF ANY

Address and filing details

HOME ADDRESS

CITY

STATE

ZIP

COUNTY / SCHOOL DISTRICT

EXPECTED FILING STATUS - CHECK ONE

- ☐ Single
- ☐ Married filing jointly
- ☐ Married filing separately
- ☐ Head of household
- ☐ Qualifying surviving spouse
- ☐ Not sure - please advise

What changed during the year?

- ☐ Marriage, divorce, separation, or spouse died
- ☐ New child, adoption, or dependent change
- ☐ Moved or lived/worked in another state
- ☐ Bought, sold, or refinanced a home
- ☐ Changed jobs, retired, or became disabled
- ☐ Started, bought, sold, or closed a business

DATES OR DETAILS WE SHOULD KNOW

Dependents or other household members

List anyone you may claim. Attach another page if needed.

Name	Relationship	DOB	SSN	Months in home	Student / disabled

3 INCOME

Upload the actual forms you received. A pay stub, bank screen, or handwritten total may not include everything needed for the return.

Income forms - check each type you are providing

- ☐ W-2 wages
- ☐ 1099-INT interest
- ☐ 1099-DIV dividends
- ☐ 1099-B brokerage sales
- ☐ 1099-R retirement distributions
- ☐ SSA-1099 Social Security
- ☐ 1099-G unemployment or state refund
- ☐ K-1 from a business, trust, or estate
- ☐ 1099-NEC / 1099-MISC
- ☐ 1099-K payment platforms
- ☐ 1099-S or home/property sale records
- ☐ Gambling, prizes, jury duty, or other income

INCOME RECEIVED WITHOUT A TAX FORM - SOURCE AND AMOUNT

Self-employment or side work

☐ No ☐ Yes ☐ Not sure

BUSINESS NAME AND WHAT YOU DO

EIN, IF ANY

Please upload:

- ☐ Profit-and-loss or income/expense summary
- ☐ Mileage / vehicle log
- ☐ Equipment or other large purchases
- ☐ Home-office details

Rental property or royalties

☐ No ☐ Yes ☐ Not sure

PROPERTY ADDRESS OR ROYALTY SOURCE

- ☐ Income and expense summary uploaded
- ☐ Purchase, sale, refinance, or improvement records uploaded

Investments, digital assets, and property sales

Check all activity that applies:

- ☐ Stocks, bonds, mutual funds, or other investments
- ☐ Digital assets, including cryptocurrency
- ☐ Sold a home or other real estate
- ☐ Sold other property or collectibles
- ☐ None of these
- ☐ Not sure - please advise

Please upload the items that apply:

- ☐ Complete brokerage tax package - all pages, including 1099-B and supplemental statements
- ☐ Transaction or gain/loss report from each digital-asset platform or wallet
- ☐ Closing statements plus purchase, basis, and improvement records for property sold
- ☐ Cost-basis records for any transaction marked 'basis not reported'

4 DEDUCTIONS AND CREDITS

Check the items that apply and upload the supporting statements or summaries. You do not need to total information already shown on an official tax form.

Common deductions and adjustments

- ☐ Mortgage interest / points (Form 1098)
- ☐ Real estate or personal property taxes
- ☐ Cash donations
- ☐ Noncash donations and receipts
- ☐ Large medical, dental, or vision expenses
- ☐ Student-loan interest (Form 1098-E)
- ☐ IRA or self-employed retirement contributions
- ☐ HSA contributions/distributions (Forms 5498-SA / 1099-SA)
- ☐ Educator expenses
- ☐ Alimony paid under a pre-2019 agreement

OTHER DEDUCTION DETAILS OR QUESTIONS

Child or dependent care

☐ No ☐ Yes

CARE PROVIDER NAME AND ADDRESS

PROVIDER TAX ID

AMOUNT PAID

DEPENDENT(S) RECEIVING CARE

W-2 DEPENDENT-CARE BENEFIT

Education

☐ No ☐ Yes List each student. Attach another page if needed.

Student name	School	Level / program	1098-T	Tuition stmt.
			☐	☐
			☐	☐
			☐	☐

OTHER EDUCATION RECORDS UPLOADED

- ☐ Scholarship / grant statements
- ☐ 1099-Q / 529 plan records
- ☐ Books and required supplies summary
- ☐ Other education records

Other possible credits continue on the next page.

5 OTHER TAX DETAILS

Other possible credits

- ☐ Marketplace health insurance - Form 1095-A
- ☐ Home energy improvements or solar / clean energy
- ☐ New or used clean vehicle purchase
- ☐ Adoption expenses
- ☐ Foreign tax paid
- ☐ Not sure - please advise

Health coverage

- ☐ No Marketplace coverage
- ☐ Marketplace coverage - upload every Form 1095-A
- ☐ Someone was covered on a Marketplace policy with another tax household
- ☐ Not sure

State and local information

STATE AT YEAR-END

CITY / COUNTY / SCHOOL DISTRICT

OTHER STATES LIVED OR WORKED IN

IF YOU MOVED, LIST OLD STATE, NEW STATE, MOVE DATE, AND REASON

Foreign accounts, income, or assets

- ☐ No foreign financial accounts
- ☐ Yes - total value of all foreign accounts exceeded $10,000 at any time
- ☐ Foreign income or tax paid
- ☐ Foreign trust, gift, corporation, partnership, or other asset

COUNTRY, INSTITUTION / ASSET, ACCOUNT TYPE, AND DETAILS

If any answer is uncertain

Check 'Not sure' and briefly describe what happened. Your preparer can determine which forms or follow-up questions apply.

5 OTHER TAX DETAILS - CONTINUED

Tax payments made

Enter payments not already shown on an official tax form. Attach proof if available.

Payment	Date	Federal	State / local	Confirmation / notes
Q1 estimate				
Q2 estimate				
Q3 estimate				
Q4 estimate				
Extension				
Other				

Notices and special situations

- ☐ No tax notices
- ☐ IRS notice uploaded
- ☐ State/local notice uploaded
- ☐ Audit or exam in progress
- ☐ Received a large gift or inheritance
- ☐ Debt was canceled or forgiven
- ☐ Disaster, casualty, or theft loss
- ☐ A return is being amended

DETAILS OR QUESTIONS

6 REFUND, DIRECT DEPOSIT, AND AMOUNT DUE

Bank information is sensitive

Enter it only in this organizer and upload through the secure client portal. Confirm the routing and account numbers with your bank. Do not enter a debit-card number.

Refund preference - check one

☐ Direct deposit ☐ Paper check ☐ Apply refund to next year ☐ Discuss options

Direct deposit account information

Complete this box if you selected direct deposit or want us to confirm an account already on file.

BANK NAME

NAME(S) ON ACCOUNT

ROUTING NUMBER - 9 DIGITS

ACCOUNT NUMBER

ACCOUNT TYPE - CHECK ONE

☐ Checking ☐ Savings ☐ Other

USE THIS ACCOUNT FOR

☐ Federal refund ☐ State/local refund ☐ Both

☐ Bank information is already on file and unchanged

☐ This account is owned by the taxpayer and/or spouse listed on this organizer

☐ Voided check or bank verification uploaded, if requested

If you expect to owe

☐ Direct debit from the account above ☐ Pay online ☐ Check / voucher

REQUESTED WITHDRAWAL DATE

MAXIMUM AMOUNT AUTHORIZED, IF APPLICABLE

☐ I may need payment-plan information ☐ Do not schedule a debit until I approve the final amount

Next-year estimated taxes

☐ Prepare federal/state estimates ☐ No estimates requested ☐ Discuss with me

OTHER REFUND OR PAYMENT INSTRUCTIONS

7 FINAL REVIEW AND CONFIRMATION

Final document checklist

- [ ] Completed organizer
- [ ] Complete prior-year federal, state, and local tax returns, including all schedules
- [ ] All W-2, 1099, SSA-1099, and K-1 forms
- [ ] Brokerage, digital-asset, and property-sale records
- [ ] Business and rental income/expense summaries
- [ ] Deduction, childcare, education, health-insurance, and credit records
- [ ] Estimated-tax and extension-payment confirmations
- [ ] IRS, state, and local notices
- [ ] Bank verification, if requested for direct deposit or debit

DOCUMENTS STILL EXPECTED

EXPECTED DATE

QUESTIONS OR ANYTHING ELSE WE SHOULD KNOW

Taxpayer confirmation

I reviewed this organizer and provided complete and accurate information to the best of my knowledge. I understand that Clear Course Advisors will rely on the information and documents I provide and may request clarification or additional support.

- [ ] I agree

TAXPAYER SIGNATURE / TYPED NAME

DATE

SPOUSE SIGNATURE / TYPED NAME, IF APPLICABLE

DATE