

NC Financial Group - 2021 Tax Organizer

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Supporting Form Attachments – Estimated Tax Payments (proof of payment), W-2s, 1099s-(Misc, DIV, INT, R, NEC), Schedule K-1s, 1098s, 1095s, Real Estate tax bills, closing statements for real estate transactions, brokerage statements for stock sales.

Taxpayer Information

Name (First, Middle, Last): _____

Partner/Spouse Name: _____

Mailing Address to be **used on your return**:

Permanent home mailing address if different from your return:

Filing Status – Please check one

Single: _____ Married Filing Jointly (MFJ): _____

Married Filing Separately (MFS): _____

Did you **live separately** from your spouse at any time during 2021? Yes _____ No _____

Are you eligible to claim your spouse's exemption? Yes _____ No _____

Does your spouse itemize deductions? Yes _____ No _____

Head of Household (HoH): _____

If HoH and the qualifying person is a child but not your dependent, enter the child's

Name: _____

SSN# _____

Are you a **qualifying widow(er)**? Yes _____ No _____

A qualifying widow/widower is a taxpayer whose spouse has passed during the last two years and also has a qualifying dependent on their tax return.

Did your **marital status** change in 2021? Yes _____ No _____

If yes, please provide reason: _____

Dependent Information – Persons whom you provided 50% or more support in 2021

Did you pay **alimony** in 2021? Yes ____ No ____
If yes, please provide **SS# of recipient:** _____

Alimony Card #: _____

Date of Divorce Decree: _____

Did you/spouse receive **alimony** in 2021? Yes ____ No ____
If yes, Please provide **SS# of payer:** _____

Alimony Card #: _____

In 2021, were you or spouse

- Permanently or totally **disabled:** Yes ____ No ____
- A member of the **U.S. Armed Forces:** Yes ____ No ____
- Work for the **U.S. Government:** Yes ____ No ____

Would you like to file your tax return electronically? Yes ____ No ____

If you receive a **refund**, would you like direct deposit? Yes ____ No ____

If Yes, Account # _____

Routing # _____

If you **owe income tax**, would you like us to withdraw the funds? Yes ____ No ____

If Yes, Account # _____

Routing # _____

Electronic Filing & Bank Information - Required

Full Name: _____

Social Security #: _____ **U.S. Citizen or Resident:** Yes ____ No ____

Relationship: _____ **Date of Birth:** _____

Lives with You: Yes ____ No ____ **Months lived with taxpayer in U.S.** _____

Does not live with you due to divorce but is a person who qualifies you for the earned income credit and/or credit for child and dependent care expenses: Yes ____ No ____

Dependent #2 Full Name: _____

Social Security #: _____ **U.S. Citizen or Resident:** Yes ____ No ____

Relationship: _____ **Date of Birth:** _____

Lives with You: Yes ____ No ____ **Months lived with taxpayer in U.S.** _____

Does not live with you due to divorce but is a person who qualifies you for the earned income credit and/or credit for child and dependent care expenses: Yes ____ No ____

**If more dependents, please add onto last page*

Dependents - continued

Did you or your spouse

- Provide over half of the support for any other person? Yes ____ No ____
- Have dependents that must file a U.S. tax return? Yes ____ No ____
 If Yes, do you need us to prepare? Yes ____ No ____
- Have children who are under age 18 or are full time student(s) under age 23 WITH investment income greater than \$2,200? Yes ____ No ____
 If Yes, do you include this income on your return? Yes ____ No ____
- Incur adoption expenses during 2021? Yes ____ No ____
- Pay for any childcare or dependent care services or participate in the FSAFEDS or other flexible spending account for dependent childcare in 2021? Yes ____ No ____
- Receive a child stimulus payment – if so check which dates: Yes ____ No ____
 Jul 15 ____ Aug 13 ____ Sep 15 ____ Oct 15 ____ Dec 15 ____

Household Employee

Did you hire a household Employee?

Yes ____ No ____

If Yes: 1. Was this employee a Personal Assistant?

Yes ____ No ____

2. Was this employee a Nanny?

Yes ____ No ____

Did you pay this employee more than \$600 in 2021?

Yes ____ No ____

If Yes: 1. Did you have the person complete a W-9?

Yes ____ No ____

2. Was a 1099 issued?

Yes ____ No ____

3. Does a 1099 need to be issued?

Yes ____ No ____

4. Was the household employee put onto payroll?

Yes ____ No ____

Pay an individual for any non-childcare household employment services (e.g. maid, gardener, etc) ?

Yes ____ No ____

- If Yes, were the services provided as part of your spouse's official work duties?

Yes ____ No ____

Date _____

Amount \$ _____

Description _____

IRA, Pension & Education Savings Plan – Student Information

In 2021, did you or your spouse

- Contribute to a Roth IRA?

You ____ Spouse ____ Amount \$ _____

- Contribute New money (not rollover money) to a Traditional or Rollover IRA?

You ____ Spouse ____ Amount \$ _____

- Own an **inherited IRA**?

You ____ Spouse ____ Amount \$ _____

- Own a **Beneficiary IRA**?

You ____ Spouse ____ Amount \$ _____

- Receive funds from a **pension, retirement or profit-sharing** plan or any **social security** or **disability payments**?

You ____ Spouse ____ Amount \$ _____

- Are you required to take **mandatory distributions** from an IRA?

You ____ Spouse ____ Amount \$ _____

- **Convert** all or part of a **regular IRA** to a **Roth IRA**?

You ____ Spouse ____ Amount \$ _____

- **Rollover** all or part of a **qualified plan** into a **Roth IRA**?

You ____ Spouse ____ Amount \$ _____

- Contribute to a **Coverdell Education Savings Account**?

You ____ Spouse ____ Amount \$ _____

- Contribute to a **529 College Savings Plan**?

You ____ Spouse ____ Amount \$ _____

- Pay **interest** on a **student loan** for you, spouse or dependents? *Please attach 1098-E*

You ____ Spouse ____ Amount \$ _____

Did you, your spouse or dependent

- Pay for **tuition** or incur any **educational expenses**?

You ____ Spouse ____ Amount \$ _____

- Receive any **grant** or **scholarship monies**?

You ____ Spouse ____ Amount \$ _____

- Receive payments from an educational savings account?

You ____ Spouse ____ Amount \$ _____

Items related to Income & Expenses

In 2021, did you or your spouse

- Receive any interest, dividend, royalty or other investment income?
You ____ Spouse ____ Amount \$ _____
- Receive any **unemployment** compensation?
You ____ Spouse ____ Amount \$ _____
- Did you have any Federal **taxes withheld** on your **unemployment**?
You ____ Spouse ____ Amount \$ _____
- Receive any **disability** payments?
You ____ Spouse ____ Amount \$ _____
- Receive any **Tip** income?
You ____ Spouse ____ Amount \$ _____
- Have any gambling winnings or losses?
You ____ Spouse ____ Amount \$ _____
- Receive any insurance or legal settlement proceeds?
You ____ Spouse ____ Amount \$ _____
- Incur any casualty or theft losses?
You ____ Spouse ____ Amount \$ _____
- Incur any significant medical, dental or other healthcare expenses?
You ____ Spouse ____ Amount \$ _____
- Pay any dues to an organization where a portion was required to be non-deductible due to political lobbying by the association? _____

- **Move?** Yes ____ No ____
Was the move **work-related**? Yes ____ No ____
If yes, list **unreimbursed** moving **expenses** for work-related move:
Date _____
Description _____
Amount \$ _____
- Make any contributions to **U.S. Tax-exempt charities**? Yes ____ No ____
Please provide receipt for all donations; cash and non-cash.

Real Estate: General Please provide year-end 1098 statement and property tax payment proof

Property Address _____

Description and Property Type _____

Pay any real estate, personal property or other taxes? Amount \$ _____

Was your home or business located in a **Federally Declared Disaster Zone** in 2021? Yes ____ No ____

Did you lose any property in a **Federally listed Disaster Area**? Yes ____ No ____

Did you lose any property in a **disaster area** that was listed in a **1031 exchange**? Yes ____ No ____

Any **Hospital costs** in a disaster area? Yes ____ No ____

Did you make or receive an insurance claim, such as fire, floor, etc? Yes ____ No ____

Details: _____

Real Estate: Buys and Sells - Please provide closing settlement

In 2021, did you or your spouse

- **Buy** real estate? Yes ____ No ____
Primary home? Yes ____ No ____
Second Home/Time-Share? Yes ____ No ____
Vacant Land? Yes ____ No ____
Manufactured Home? Yes ____ No ____

Property taxes \$ _____

Address _____

Lot # _____ Block# _____

- **Sell** real estate? Yes ____ No ____
Primary home? Yes ____ No ____
Second Home/Time-Share? Yes ____ No ____
Vacant Land? Yes ____ No ____
Manufactured Home? Yes ____ No ____

Property taxes \$ _____

Address _____

Lot # _____ Block# _____

- Are you a **first-time** homebuyer? Yes ____ No ____
Did you pull money out of your IRA to obtain your home? Yes ____ No ____

Real Estate: Rental Property

Rental Property Address _____

2021 Rents/royalties received \$ _____

Did you use this property as personal for 2021? Yes ____ No ____

If so, How many days as rental _____ days

How many days as personal _____ days

Does this rental have multiple living units, and **you occupy one**? Yes ____ No ____

Did you actively participate in managing this property? Yes ____ No ____

Did you incur bank fees or interest expense due to rental? Yes ____ No ____

Investments: Buys and Sells

Did you borrow from invested assets? Yes ____ No ____

Did you surrender any U.S. savings bonds? Yes ____ No ____

Did you exchange any securities for other securities
or property held as an investment? Yes ____ No ____

Did you engage in any transactions involving **Options**? Yes ____ No ____

Did you engage in transaction with commodity/future contracts? Yes ____ No ____

Did you engage in any transactions with ESPP / Employee Options? Yes ____ No ____

Did you engage in any RSU's? Yes ____ No ____

Take a retirement account distribution related to the Corona Virus
or other disaster?

Yes ____ No ____

Investments: Cryptocurrency – Please provide any documentation

In 2021, did you or your spouse engage in any cryptocurrency activity?

- Mine Cryptocurrency? *Please specify currency*

You ____ Spouse ____ Amount \$ _____

- Purchase Cryptocurrency? *Please specify currency*

You ____ Spouse ____ Amount \$ _____

- Sell Cryptocurrency? *Please specify currency*

You ____ Spouse ____ Amount \$ _____

Investments: Bank / Brokerage

Attach form 1099 INT and 1099 DIV

If Nicholas Casagrande manages your assets, we already have this information. So, no need to send our way.

Do you have any collateralized loans? Yes ____ No ____
Did you pay any interest? Yes ____ No ____
Have any loans secured against your investments? Yes ____ No ____

Did you receive a total distribution from an IRA or other qualified plan that was partially or totally rolled over from another plan within 60 days of distribution? Yes ____ No ____

Were you or your spouse a victim of a ponzi scheme? Yes ____ No ____

PPP / EIDL Loans

Did you obtain a Paycheck Protection Program (PPP) loan? Yes ____ No ____ Amount \$ _____

Was any of the loan forgiven? Yes ____ No ____ Amount \$ _____

Did you receive an EIDL loan? Yes ____ No ____ Amount \$ _____

2021 Stimulus – Attach 1099A or 1099C

Did you receive an Economic Impact (Stimulus) Payment?

You ____ Spouse ____ Amount \$ _____

Did your lender cancel any part of your debt in 2021?

You ____ Spouse ____ Amount \$ _____

Gig Income – Attach 1099s, 1099-Ks

Examples: Task Rabbit, Uber, AirBnB, DoorDash, Postmates, Grubhub

If yes, please provide 1099

Foreign Earned Income and Foreign Taxes

In 2021, did you or your Spouse

- Earn any wage income while outside the U.S. or foreign business income?
You _____ Spouse _____ Amount \$ _____
- Earn any foreign investment income?
If yes, fill out below

Investment Name	Amount Earned	Type of Earnings	Date Paid

- Pay any foreign income taxes?

Amount Paid	Date Paid	Description

- Pay any foreign gross receipts, property, VAT or other taxes?
You _____ Spouse _____ Amount \$ _____
- Have any foreign tax credit carryovers into 2021?
You _____ Spouse _____ Amount \$ _____
- Party to a foreign Corporation of which you have no control?
You _____ Spouse _____ Amount \$ _____

Foreign Financial Accounts and Foreign Assets

Please provide a list of ALL foreign financial assets or accounts that you or your spouse had at any time with any balances including bank or brokerage accounts, mutual funds, pension funds, other retirement accounts, etc. Include non-U.S. accounts for which you held a beneficial interest or had signature authority at any time

Asset Type	Financial Institution	Country	Account #	Ownership Joint, Beneficiary, Signatory	Max value during year	Balance on 12/31/2019	Source currency

Were you the grantor of, or transferor to, a **foreign trust** which existed during the tax year, whether or not you have any beneficial interest in the trust? Yes _____ No _____

If a FinCen 114 (FBAR) is required for 2021, would you like us to file? Yes _____ No _____
*If you plan to prepare and file, please provide us with a complete copy.
 FBAR filing is due April 15th, 2021*

Health Plans

For *California, New Jersey, Washington DC, Massachusetts, Vermont, Rhode Island* Residents:

- Did you or your spouse participate in a health insurance plan that meets the Affordable Care Act (ACA) insurance guidelines for the entire calendar year? You ____ Spouse ____
 Please provide Form 1095-A from your health provider
- How did you obtain Health Insurance? (Employer, Open Exchange, Medicare, etc.)

- If you did not have minimum health insurance coverage at any time or only during part of the year, detail why you did not have coverage that met the ACA guidelines so that we may determine if you qualify for an ACA exception: _____

- Have you uploaded your **1095**? Yes ____ No ____

Are you or your spouse

- Self-employed? You ____ Spouse ____
- Pay for self-employed health insurance? You ____ Spouse ____
- Eligible to participate in a health plan at another job? You ____ Spouse ____
- Participate in a FSAFEDS health care account? You ____ Spouse ____

Home Office

Did you work from home in 2021? Yes ____ No ____

- Square feet of total home _____
- Square feet of Home Office _____

Direct Home Office Expenses		
Expense	Amount (100%)	Notes
Phone	\$	
Internet	\$	
Insurance	\$	
Furniture	\$	
Equipment	\$	
Bills for utilities (electric, gas)	\$	
Homeowners insurance	\$	
HOA Fees	\$	
Security	\$	
General Repairs and Maint	\$	
Mortgage Interest	\$	
Property Tax	\$	
Rent (IF you do not own)	\$	

Taxes, Credits and Other

Did you or your spouse

- Make **solar** energy-saving improvements to your **home**? Yes ____ No ____
 - Solar energy-saving improvements to your **business**? Yes ____ No ____
- Make **wind** energy-saving improvements to your **home**? Yes ____ No ____
 - Wind energy-saving improvements to your **business**? Yes ____ No ____
- Purchase a qualified cell motor vehicle?

You ____ Spouse ____ Amount \$ _____

- Purchase a motor vehicle or boat and pay any U.S. state sales tax?

You ____ Spouse ____ Amount \$ _____

- Pay any other significant sales tax? You ____ Spouse ____

Date	Amount	City	State	Sales Tax Rate

- Purchase a Tesla Battery? Yes ____ No ____ Size _____ kWh

Charitable Gift Giving

What is the highest amount you donated to any one person or organization in 2021?

You ____ Spouse ____ Amount \$ _____

Did you or your spouse

- Make gifts of over \$15,000 to an individual, institution or charity, including 529 plan account?

You ____ Spouse ____ Amount \$ _____

- Make a gift to a trust? (Special-Needs Trust, QPRT, QLAC)

You ____ Spouse ____ Amount \$ _____

- Pledge a Legacy gift?

You ____ Spouse ____ Amount \$ _____

- Donate an IRA?

You ____ Spouse ____ Amount \$ _____

- Donate an Annuity?

You ____ Spouse ____ Amount \$ _____

- Donate a vehicle? *Please provide 1098C from receiver*

You ____ Spouse ____ Value \$ _____

- Donate hours or drive miles?

Hours _____ Miles _____

Business – Please provide General Ledger, P&L, Balance Sheet, Payroll Records, Year-end 1099 from POS

In 2021, Did you or your spouse

- Start a business, purchase a farm, or acquire interests in partnerships, C corporations, LLCs or S corporations in the last three years? Yes ____ No ____
- Perform business under a Sole Proprietorship? Yes ____ No ____
- Incur any losses on the sale of a business or rental property since January 1st 2009? Yes ____ No ____
- Sell, dispose or abandon any business interest, property or equipment? Yes ____ No ____
- Sell property or equipment on an installment basis? Yes ____ No ____
- Have any business-related educational expenses? Yes ____ No ____
- Do a "like-kind" exchange of property? Yes ____ No ____
- Purchase special fuel for non-highway use? Yes ____ No ____
- Participate in any Domestic Production Activities during the last two years? Yes ____ No ____
- Incur any business-related expenses related to travel, lodging, meals or entertainment expenses or incur any unreimbursed expenses from your employer? *Please provide records* Yes ____ No ____

Tax law and IRS regulations allow deductions for travel and entertainment if adequate records can be presented: 1. Amount, 2. Time & Place, 3. Attendee(s), 4. Date, 5. Business purpose, 6. Description of Expense(s), gift(s), and 7. Business relationships of recipient.

REALTORS: Please send in mileage log and Real Estate log of hours.

Business: 1099 Filing

Did your business pay an individual \$600 or more? Yes ____ No ____

If Yes, then a 1099 needs to be generated, and please inform if you need help issuing a 1099

Estimated Tax Payments – Please attach your canceled checks / electronic submission

Date	Federal	State
	\$	\$
	\$	\$
	\$	\$
	\$	\$

Business Deductions – \$ totals for 2021

Accounting	\$	Parking/Tolls	\$
Advertising	\$	Pension/Profit sharing - contributions	\$
Answering Service	\$	Pension/Profit sharing - admin	\$
Bad debts from sales or service	\$	Postage	\$
Bank charges	\$	Printing	\$
Car/Truck (not entered elsewhere)	\$	Rent - vehicles, equipment	\$
Commissions	\$	Rent - other	\$
Contract Labor	\$	Repairs	\$
Delivery/Freight	\$	Security	\$
Dues/Subscriptions	\$	Supplies	\$
Employee benefit programs	\$	Taxes - real estate	\$
Insurance (other than health)	\$	Taxes - sales tax	\$
Mortgage interest	\$	Taxes - other (not entered elsewhere)	\$
Other interest (not entered elsewhere)	\$	Telephone	\$
Janitorial	\$	Tools	\$
Laundry/Cleaning	\$	Travel	\$
Legal and professional	\$	Total meals in full (50%)	\$
Miscellaneous	\$	Entertainment	\$
Office	\$	Uniforms	\$
Outside services	\$	Utilities	\$
		Wages	\$
Other	\$		
Other	\$		
Other	\$		

Notes:
