BROWN, ELLS & COMPANY
17000 S Golden Rd
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brownellscompany.comFor Tax Year 2021 - Make sure to provide
Letter 6475 from IRS showing amount of stimulus
and Advance Child Tax Credit you received!!

It is a pleasure for us to assist you with your taxes. We have prepared this organizer as a checklist to help gather the information needed to properly prepare your tax returns. Per IRS regulations, it is necessary that you provide us with all tax documents you have received. Please include them when you return this organizer to us.

Name and address: Taxpayer	Check if being claimed as a dependent on another return	Cell Ph Work P			
Spouse	Occupation - Taxpayer				
Address		Occupation - Spouse E-mail address			
Additional Info For You & Dependents: Check if Same as last year Name Soc. Sec. #		Birth Date	Relationship	U.S. Citizen Y/N	Disabled or Blind D/B
Taxpayer		Date			
Spouse					
Dep. 1					
Dep. 2					
Dep. 3					

IMPORTANT INFORMATION: (FILL OUT ALL BELOW INFORMATION EVERY YEAR)

1.IRS Due Diligence Requirements: (check all of the following that apply, and see instructions)

You were single, **and** had a dependent living with you during the tax year (fill out page 4 HOH) You, your spouse, or your dependent attended college during the tax year (fill out page 4 AOTC) You're claiming a child (under age 17 at end of the tax year) as a dependent (fill out page 4 CTC) You're claiming someone other than a child under age 17 as a dependent (fill out page 4 ODC)

2.Deductions: (do not include contributions made through employers or your own business)

 Were contributions 	made to a Colorado 529 plan? (Enter Total)	\$	
 Was an HSA contri 	ibution made? Taxpayer, Spouse, or Both? (T, S, or B)	\$	
 Was a Traditional II 	RA contribution made? (Attach Form 5498) (T, S, or B)	\$	
 Was a Roth IRA co 	ontribution made? (Attach Form 5498) (T, S, or B)	\$	
 Was any student lo 	oan interest paid? (Attach Form(s) 1098-E) (T, S, or B)	\$	
3.Annual Questions	<u>.</u>	Yes	<u>No</u>
•Did your name or m	narital status change during the tax year?		
•Did you receive Adv	vance Child Tax Credit payments from July - Dec. in 2021?	?	
 Did you have finance 	cial interest or signature authority over a foreign financial		
account, or have an	ny involvement with a foreign trust during the tax year?		
 Did you have any ir 	nvolvement with a virtual currency (Bitcoin, Ethereum, Ripp	ole,	
Bitcoin Cash, EOS,	etc.) during the tax year?		
 What was the total a 	amount of your 3rd Economic Impact stimulus Payment?		
(Should have been	\$1,400 per person if you qualified for full amount)	\$	
 Do you want any re 	funds directly deposited into your bank account?		
If yes- Bank Name	Account Type		
Account No	Routing No		

INCOME: (you do not need to fill out information for which you've provided tax forms)

WAGE, PENSION & UNEMPLOYMENT INCOME (Attach All Forms W-2, 1099R & 1099G):

	Gross	Federal	State	City
Employer's Name	Income	Withholding	Withholding	W/F
INTEREST INCOME (Attac Name of Payer	,	DIVIDENDS (Atta Name of Payer/A		IV): 1b 2a
SALE OF REAL-ESTATE,	Date		ttach Forms 1099- Sales	В)
Description	Purchased	Sold	Price	Cost
		<u> </u>		

OTHER INCOME OR RECEIPTS:

State Income Tax Refund: (attach 1099-G) State Alimony Received: \$ Alimony Paid \$ Health Savings Account Distributions: \$ Alimony Paid \$ Social Security received by: Taxpayer \$ Gambling income: (attach W-2G) \$ G			Date of Divorce All used for medical expenses? Spouse \$		
Rental Pro S-Corps or	perties (attach Re	ental Property So tach Forms K-1)	chedules)		
	D TAX & EXTENS		•	dates & amounts) State \$	
-	Federal Amt.				
Any payme	nts made with exte	nsions? Federal	 Amt \$	State Amt \$ _	

ITEMIZED DEDUCTIONS: (only applies if more than the standard deduction below)

- Married Filing Jointly standard deduction of \$25,100
- Head of Household standard deduction of \$18,800
- Single / Married Filing Separately standard deduction of \$12,550

MEDICAL EXPENSES: (Sum up on amount categories below. Do Not Provide Receipts)

deduction limited by 7.5% of Adjusted Gross Income - (For Example: if your AGI is \$100,000, then the first \$7,500 of medical expenses will not be deductible).

Δ Δ Δ Δ Δ Δ Δ Δ Δ Δ Δ Δ Δ Δ Δ Δ Δ Δ Δ	mount		Amount	
Drugs/Prescriptions		Dental		
Doctors' Services		Vision		
Chiropractic Services		Long-Term Care		
Medical Insurance Premiums _		Medicare Premiums	;	
Use of auto for medical purpos	es (Number of	[:] miles):		
TAXES PAID: (\$10,000 maximur	n deduction for	this category, \$5,000 if Ma	rried Filing Separately)	
State Tax Withheld (on W-2's/1099 Real Estate Taxes: Auto Ownership Tax ("OWN TAX" Sales Tax Paid on Major Purch	'):			
INTEREST PAID ON PERSONA (provide form 1098)	L RESIDENCE	(or 2nd HOME or FOR INVE	STMENT PURPOSES):	
Mortgage Interest Paid to:	Amount	Mortgage Insurance F	Paid Points Paid	
		- <u> </u>		
CHARITABLE CONTRIBUTION	S: (Record eve	n if not itemizina - deductib	le for state)	
To Whom:	Amount	To Whom:	Amount	
		TOTAL ITEMIZE	:D:	
	CRE	DITS:		
Electric Vehicle Credit (attach IRS Year, Make & Model of Vehicle		vehicle from dealer): VIN #		
Residential Energy Credit: Ty Complete Address of Installation	pe of Improvemer		Cost \$ Cost \$ Ever received this credit before?	
Child Care Credit: If you incurred c	hild care expense	s which enabled you to be emplo	oyed or a full time	
student, list the following:				

DUE DILIGENCE WORKSHEET: Answer all questions applicable to the boxes checked on page 1 HOH (HEAD OF HOUSEHOLD) FILING STATUS:

- What is the name of your qualifying dependent(s)?
- Did you provide more than half of his/her/their total support for the tax year?
- Did he/she/they live with you for more than half of the tax year?
- Did you pay more than half of the expenses to keep up your household during the tax year?
- Did you receive any non-taxable support during the tax year? (explain):
- Have you ever been married? _____ Are you currently married? ______
- If divorced, could you supply a divorce decree or separation agreement showing legal separation, dissolution, or termination of marriage as of the end of the tax year if requested by the IRS?
- Has your Head Of Household status ever been disallowed? (you would have been contacted by the IRS)

AOTC (AMERICAN OPPORTUNITY TAX CREDIT): Attach Form 1098T (can be found in the student portal)

- Student's name U.S. citizen? Full time student?
- Is the student claiming him/herself, or being claimed as a dependent on another tax return?
- Were all education expenses incurred during the tax year actually paid in the tax year?
- Were any education expenses paid with tax free scholarship, grant, employer provided education assistance, or VA benefits? _____ How much?
- If the student withdrew from classes, did the taxpayer receive a refund for education expenses?
- Did the student provide more than half of his/her support for the year? (rent, car payments, school, etc.)?
- Has the student ever been convicted of a felony for possessing or distributing a controlled substance?
- In how many prior years has the American Opportunity Tax Credit been claimed for this student?
- Has your AOTC ever been reduced or disallowed? (you would have been contacted by the IRS)

<u>CTC (CHILD TAX CREDIT)</u>: Eligible children are U.S. citizens with social security numbers; under the age of 17 (at the end of the tax year); that lived with the taxpayer more than half of the tax year; did not provide more than half of their own support; are not filing their own joint returns; and for whom you could provide birth certificates for.

- Has your Child Tax Credit ever been reduced or disallowed? (you would have been contacted by the IRS) _____
- 1. Child's name
 Blood related to both taxpayer and spouse?

 If not, explain:
 Blood related to both taxpayer and spouse?

Can this child be claimed as dependent by any other person?

2. Child's name Blood related to both taxpayer and spouse? If not, explain:

Can this child be claimed as dependent by any other person?_____

ODC (Other Dependent Credit): Eligible dependents are U.S. citizens with social security numbers; for which you provided more than half of their support for the tax year; and who could not be dependents of any other person for the tax year. (includes your children, who at the end of the tax year were age 17; or under age 24 and a full time student for 5 or more months during the tax year; or any other person that lived as a member of your household if the relationship didn't violate local law).

- Has your ODC ever been reduced or disallowed? (you would have been contacted by the IRS)
- 2. Other dependent's name ______ Relationship ______ Did he/she have income less that \$4,150 for the tax year (*don't count welfare or non-taxable Soc. Sec. benefits*)? _____ Is he/she filing a joint return for tax year? _____