



142 Linkwood Rd, NW
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Thank you for allowing Aa Services & Consulting, Inc. to continue to service you.

WHATS NEW:

- **Due to COVID-19, appointment times are reduced (more details when we speak/email)**
- **First date available to prepare your tax return is February 2nd**
- **No fee increases this year**
- **Last date to mail in, email or drop off your tax documents is March 31st**
- **Last appointment date is April 13th**
- **Any economic impact payments you received are not taxable for federal income tax purposes, but they reduce your recovery rebate credit.**
- **You can take a charitable deduction for cash contributions, even if you don't itemize**
- **Office will close for the Holidays.....November 15, 2021 – January 10, 2022**

The tax organizer contains a checklist and worksheets that are attached and are available on our website in pdf and excel. There are separate worksheets for your Self-employed business, Rental property, unreimbursed job expenses or Clergy activity. Fields in the "TAXPAYER INFORMATION" section can be completed using "SALY" same as last year. **We must have a signed checklist before we file your income tax return.** Please take a moment to print it now and use it as a checklist for your tax documents as they come in.

Make certain to review your receipts, canceled checks, credit card statements and bank statements for possible tax deductions. Include all documents received in envelopes marked "IMPORTANT TAX INFORMATION". We encourage you to use the tax organizer to ensure complete documents are provided to us to prepare your tax return and to reduce the time your data is in our office.

Remember payment is due at time of service. A \$150 deposit may be required when delivering tax information to us, call our office for more details. We will continue to enforce the 10% late payment account service fees and additional fees for multiple requests to get missing tax information, duplicate copies of prior year tax returns, summarizing tax data not on organizer, etc.

Your business is always appreciated. It is our pleasure to continue to provide exceptional services to you. Please tell a friend and receive a **\$25.00 discount** on next year's tax preparation fees.

If mailing your tax documents, please use our home office located at **142 Linkwood Rd NW, Atlanta, GA 30311**. For drop offs use our secured mailbox at the street.

The IRS recommends that you should keep copies of your prior-year tax returns for at least three years.

We are ready to serve you!

The Answer to your Accounting, Administrative and Tax Questions.



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TAXPAYER INFORMATION (Information must match Social Security Card)

		Birth Date	Student Class (form 1098T)	Edu: Books & Supplies	Healthcare Coverage
Name:	Occupation:		/	\$	
Spouse:	Occupation:		/	\$	
Phone Numbers: (Day)	(Evening)	(Cell)			
Mailing Address:				County:	
Contact's email address:				Date Moved:	
Marital Status on 12/31: (S, HH, MJF, MFS, QW)		# of Months lived with spouse this year (12 or less):			

DEPENDENTS (Information must match Social Security Card)

*** Provide proof of residence for each***

	Name: (first and last)	Social Security #	Birth Date:	Months lived with you (1-12) **	Income	Dependent / Child Care	College classification (form 1098T)	Education: Books and Supplies
1					\$	\$	/	\$
2					\$	\$	/	\$
3					\$	\$	/	\$
4					\$	\$	/	\$
5					\$	\$	/	\$

Form 8332 for noncustodial parent, signed by custodial parent
 Virtual Currency (receive, sell, send, exchange, or otherwise acquire) (Circle One) YES / NO
 **Relationship: (S) Son, (D) Daughter, (R) Relative, (O) Other

INCOME √ If received - Must include documentation

<input type="checkbox"/> W-2 (Housing Allowance - see worksheet) DCB	<input type="checkbox"/> Business / rental activity 1099 MISC, K (see worksheet)
<input type="checkbox"/> Interest / Dividend (1099 INT / 1099 DIV) Foreign taxes	<input type="checkbox"/> Stock Sales (1099 B) Provide purchase date and cost amount
<input type="checkbox"/> IRA / Pension Distribution (1099R) Used for _____	<input type="checkbox"/> Schedule K-1
<input type="checkbox"/> Social Security Benefits (1099 SSA)	<input type="checkbox"/> Unemployment Compensation (1099 G)
<input type="checkbox"/> State Refund (1099G)	<input type="checkbox"/> Gambling / Lottery Winnings (W-2 G)
<input type="checkbox"/> Alimony Received	<input type="checkbox"/> Other: Jury Duty Pay / Prizes / Barter / 1099 A,C,Q

ADJUSTMENTS TO INCOME √ If paid - Must include documentation

<input type="checkbox"/> Educator Expenses (include PPE, disinfectants & other supplies to prevent COVID)	<input type="checkbox"/> Alimony Paid to: SS# _____ \$ _____
<input type="checkbox"/> Self Employed Health Insurance Premiums / HSA (1099 SA)	<input type="checkbox"/> IRA / ROTH / SEP / Simple Contributions
<input type="checkbox"/> Moving Expenses (Military only)	<input type="checkbox"/> Student Loan Interest (1098 E)

ITEMIZED DEDUCTIONS √ If paid - Must include documentation

<input type="checkbox"/> Medical & Dental (paid out of pocket only)	<input type="checkbox"/> Charitable Contributions (Cash / check)
<input type="checkbox"/> Real Estate Taxes (1098 or Tax statement)	<input type="checkbox"/> Charitable Contributions (Non Cash)
<input type="checkbox"/> Vehicle Registration (taxes only)	<input type="checkbox"/> Gambling (Lottery) losses / Casualty (theft) Losses
<input type="checkbox"/> Mortgage Interest / Points / MIP (1098)	<input type="checkbox"/> Purchase, Refi or Sold home (Provide settlement statement)
<input type="checkbox"/> Investment Interest	Miles Driven: Medical <input type="text"/> Charitable <input type="text"/>

OTHER TAXES AND CREDITS

First Time Homebuyer Repayment Program (@ \$500/yr)
 Economic Impact Payments Received (Stimulus) 1st- 2nd-
Direct Deposit Information: Routing Transit #: Depositor Account #:
 Type of Account (Circle one): Checking / Savings

Do you owe IRS, State Govt, Student Loans, Child Support? (Circle One) YES / NO Payments for prior taxes: IRS \$ State \$
 Did you receive any letters/notices? (Circle One) YES / NO Refunds received: Federal? (Circle One) YES / NO State? (Circle One) YES / NO
 Copy of last 2 tax return filed (new clients only) Referred By: (new clients only)

QUESTIONS / CONCERNS YOU HAVE: _____

SPECIAL CIRCUMSTANCE: _____

By signature below, I acknowledge that the enclosed information is correct and includes all income and expenditures necessary for preparing my tax return. I authorize my practitioner at Aa Services & Consulting to generate my PIN as my electronic signature for e-filing my tax return.

Taxpayer: _____ **Date:** _____ **Spouse:** _____ **Date:** _____

OFFICE USE ONLY *PBC documentation EF WP/DOCs (DISC/PYMT) Date In / Via

ID % of AGI _____ Plans for next year: Recommendations: Missing items/ Questionable items (?)

Compare prior ITR: