ANTHONY J. ALARIO 1941-1989
ROBERT C. ALARIO, CPA, MBA, CSEP
NANCY F. WASHINGTON, CPA, MST
MARK J. GORDON, CPA

Robert C. Alario
Certified Public Accountants, PC
75 North Main Street, Leominster, MA 01453
67 Millbrook Street, Suite 501, Worcester, MA 01606
www.robertalario.com

TELEPHONE
978-534-1999
508-755-7575

FAX
978-534-0499

To: Tax Return Client

This 2020 Client Organizer is designed to assist you in gathering your tax information. If you prefer, we also offer Personalized Electronic Organizers available at www.robertalario.com. Call our office first for your ID number and password to enable you to access your personalized organizer.

Also available on our website and upon request for **daycare providers, rental property owners** and **business owners** is a summary sheet to organize all of your income and expenses.

Tax Preparation Scheduling Options

Starting this year, we are not offering preparation appointments. Provide your tax information anytime via drop off, mail or email. **Meetings with Bob or Mark to review your final return will be available.**

Tax Season Hours begin **February 1, 2021**
TAX SEASON HOURS:
Please visit our website for hours for each location www.robertalario.com

Federal Tax Highlights

- **Please bring Form 1099-HC and 1095-C, or 1095-A for proof of health insurance**
- The maximum IRA contribution allowed for 2020 is $6,000 ($7,000 if age 50 or older). The maximum for 2021 will be the same.
- The annual elective deferral limit for 2020 for 401(k) or 403(b) plans is $19,500 ($26,000 if age 50 or older). This limit for 2021 will be same.
- The deferral limit for 2020 for SIMPLE plans is $13,500 ($16,500 if age 50 or older). This limit for 2021 will be the same.
- The standard business mileage rate for 2020 is 57.5 cents per mile. The standard rate for 2021 is 56 cents per mile.
- You can typically exclude up to $250,000 ($500,000 if married and filing joint) of the gain on the sale of a principal residence.
- Form 1099-B (Proceeds from Broker Transactions) will begin to include cost basis information on most transactions and are not required to be mailed to taxpayers until February 16, 2021.
- Unemployment income is taxable. You will receive a form from the state that paid out the unemployment.

My staff and I look forward to serving you. We wish you a peaceful, healthy and prosperous New Year.

Very Truly Yours,

Robert Alario

Robert C. Alario, CPA, MBA, CSEP

I (We) have submitted this information for the sole purpose of preparing my (our) tax return. Each item can be substantiated by receipts, cancelled checks, or other documents. This information is true, correct, and complete to the best of my (our) knowledge. If applicable, both Taxpayer and Spouse must sign.

Taxpayer Signature **Date** **Spouse Signature** **Date**

Taxpayer Name: ___________________________ **Spouse Name:** ____________________________

Best Phone Number to be Reached at: ____

Personal Information: Yes No

Did your address change during 2020? ___ ___

Did your marital status change during 2020? ___ ___

Dependents:

Were there any changes in dependents from the prior year? ___ ___

If new dependents please provide the information below.

Name:____________________ **SS#:**________________ **Date of Birth:**____________

Name:____________________ **SS#:**________________ **Date of Birth:**____________

Did any dependent have earned income greater than $12,400? ___ ___

Did any dependent have unearned income greater than $1,150? ___ ___

Did you pay for child or dependent care while you worked, looked for work or while you were a full time student? ___ ___

If yes, please provide the information below.

Name of Provider	Address	ID# of Provider	Amount Paid

Estimated Taxes Paid:

	FEDERAL			STATE	
Date Paid	Amount Paid	Check #	Date Paid	Amount Paid	Check #

Income:

Submit all applicable informational tax forms, if any, to support items of income.

Yes No

Salaries and Wages - Submit forms W-2 ___ ___

Interest Income - Submit forms 1099-INT ___ ___

Dividend Income - Submit forms 1099-DIV ___ ___

State Income Tax Refund - Submit forms 1099-G ___ ___

Gains/Losses from Stock or Property Sales - Submit form 1099-B or 1099-S ___ ___

Retirement Plan Distributions - Submit forms 1099-R ___ ___

Unemployment Compensation - Submit forms 1099-G ___ ___

Social Security Benefits - Submit forms SSA-1099 ___ ___

Gambling Winnings - Submit forms W-2G ___ ___

Miscellaneous Income - Submit forms 1099-MISC ___ ___

Rental Income and Expenses - Submit summary for each property ___ ___

Self-Employment Income & Related Expenses - Submit summary for each business ___ ___

Partnership, S-Corporation, Estate & Trust Income - Submit K-1 for each entity ___ ___

Ignore this request if we prepare the entity's tax return

Did you have any debts canceled, forgiven or refinanced? - Submit form 1099-C ___ ___

Did you receive any alimony, under a divorce or separation agreement executed before 2019? **Amount:**_________ ___ ___

Adjustments:

Have you or do you plan to make any IRA contributions for 2020? **Yes** ____**No**_____

If yes, please provide amount and type. **Traditional** ______________ **Roth** ______________

Contribution deadline is April 15, 2021.

Were you required to make alimony payments, under a divorce or separation agreement executed before 2019?? **Yes** ____**No**_____

If yes, please provide the information below if not on last year's return.

Amount paid:______________ **Recipient's social security number:**__________________

Student Loan Interest - Submit 1098-E **Yes** ____**No**_____

Were you self-employed and paid health insurance premiums? **Yes** ____**No**_____

Amount:_________

Itemized Deductions:

Medical Expenses - Enter the amounts you paid and were not reimbursed for the following (include amounts for dependents you claim on your return)

Doctors, dentists, nurses, hospitals, prescription medicines: ____________

Insurance premiums for medical and dental care (including those paid to the Health Insurance Marketplace: ____________

Auto mileage ____________

Travel, lodging, parking, tolls: ____________

Misc. (ie - hearing aids, dentures, eyeglasses, contact lenses) ____________

Long Term Care Insurance Premiums: **Taxpayer** ______________ **Spouse** ______________

Taxes

Real Estate Taxes ____________

Excise Tax ____________

Interest Expense

Home mortgage/equity interest and points - Submit Form 1098 ____________

Home mortgage interest not reported on Form 1098 ____________

Did you refinance a mortgage or take a home equity loan during the year? **Yes** ____ **No**_____

Investment Interest ____________

Are you making any loan payments on a boat or recreational vehicle that has basic living accommodations such as a sleeping space, a toilet, and cooking facilities? **Yes** ____ **No** ____

Charitable Contributions

Donations by cash, check and credit card ____________

Property Donations (Please attach list if over $500) ____________

Volunteer work - number of miles driven for which you have written record ____________

Education Expenses:

Please submit the following information for each individual that had higher education expenses during the year, along with Form 1098-T.

Student(s) ____

Fr. ___ Soph. ___ Jr. ___ Sr. ___ Grad. ____

Full-Time or Part-Time ______________

Tuition, Fees & Required Expenses Paid ____________

Amount contributed to Section 529 plan ____________

Miscellaneous Questions	Yes	No
Did you receive an identity protection PIN from the IRS?	___	___
Did you or your spouse receive an economic impact payment?	___	___
If yes, please provide amount. _____________		
Did you move because of a job change?	___	___
Did you receive any distributions from your health savings account (HSA)?	___	___
Did you make any contribution to your health savings account (HSA)?	___	___
Did you retire or change jobs in 2020?	___	___
If you are older than 70 1/2 have you taken your annual Req. Min. Distribution?	___	___
If you are a retired public safety officer did your pension plan make a direct payment to your insurance company for health, accident or long term care insurance?	___	___
If yes, please provide amount. _____________		
Do any bank or investment accounts reported in your name belong to a dependent or other individual?	___	___
Did you receive, sell, send, exchange or acquire any financial interest in virtual currency, including Bitcoin?	___	___
Did you have any foreign bank accounts?	___	___
Did you or your spouse have financial accounts maintained by a foreign institution that totaled more than $50,000 on the last day of the year or more than $75,000 at any time during the year ($100,000 and $150,000, respectively, if married filing a joint return)?	___	___
Did you sell your personal residence in 2020?	___	___
Have you sold a principal residence within the last two years?	___	___
Did you engage in any put or call transactions or close any short sales or any other transaction not 1099-B reported?	___	___
Do you own any securities or hold any debts that became worthless during the year?	___	___
If yes, provide details.		
Did you acquire or sell a business in 2020?	___	___
Did you pay a babysitter, housekeeper, driver, yard worker, health aide or other $2,000 or more to work for you?	___	___
Were you notified by the IRS or other taxing authority of any changes in prior year returns? (Bring notices)	___	___
Did you have expenditures for renewable energy source items such as solar, wind or geothermal to heat, cool or provide hot water for your primary residence?	___	___
Did you incur casualty or theft losses during the year, related to a federally declared disaster?	___	___
Provide detail including insurance reimbursement.		

If you do NOT want to authorize Robert C. Alario, CPA PC to discuss the processing of you returns with the IRS and DOR check here. ____

	Yes	No
If receiving a refund would you like to request direct deposit?	___	___
If you have a balance due would you like electronic withdrawal?	___	___

If yes, please provide the following: Bank Name: ______________________________

Checking or Savings Routing #: ________________________ Account #: ______________________

Owner of bank account: Taxpayer ___ Spouse ____ Joint ____

	Yes	No
Do you have a will?	___	___
Would you be interested in estate planning?	___	___
Would you be interested in financial planning?	___	___
Would you be interested in retirement planning?	___	___

Any question left unanswered we will assume the response is NO.