

Client Tax Organizer

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Complete this form only in Adobe Reader/Acrobat. Do not use your Mac browser or document preview mode as that will corrupt this file.

Download / Save this form to your computer. Use "save icon", "save", or "save as" command on the File menu. Do not use "save as copy/other" command. When you have completed, save file and forward along with your supporting documents through our secure portal at: <https://www.us-taxcpa.com/tax-organizer/>
This organizer only captures some common items for typical returns. You must provide additional info if your tax situation exceeds the parameters of this organizer.

This Client Tax Organizer is for Tax Return Year:				Change Year <u>and</u> your tax information below as appropriate.				
Contact Information		Use your Personal Email Address for all future contact and Maintain Discussion Thread for best service. For efficiency and related security concerns, Do Not use your company email address.						
Your Personal Email Address		Home Phone		Office Phone				
Comment / Best time to call								
Enter all Information below in Normal Text Capitalization and correct spelling as it should appear on your tax return. Do not txt msg or use ALL CAPS.								
Filing Information	First Name	MI	Last Name	Date of Birth mm/dd/yyyy	Social Security Number xxx-xx-xxxx	Occupation	Check if	
							Blind	Dis-abled
							<input type="checkbox"/> B	<input type="checkbox"/> D
Taxpayer							<input type="checkbox"/> B	<input type="checkbox"/> D
Spouse							<input type="checkbox"/> B	<input type="checkbox"/> D
If legally married in any country or state, enter spouse info above. If no SSN or ITIN, enter "None".								
Filing Status	<input type="checkbox"/> Single <input type="checkbox"/> Married Filing Joint <input type="checkbox"/> Married Filing Separate <input type="checkbox"/> Head of Household <input type="checkbox"/> Qualifying Widow(er)							
Comment								
Current Mailing Address	Apartment / Street							
	City/State/Pref Zip code Country							
More Info About Return								
Dependents	Add appropriate details for qualified dependents, such as income, disabled, college student, not living with you due to separation/divorce, etc.							
First Name	Last Name	Soc. Sec. Number xxx-xx-xxxx	Relationship (Son, etc.)	Date of Birth mm/dd/yyyy	Additional Details			
More Info for Dependents								
Other	All Taxpayers See Required Documentation and Due Diligence Questions Pages 3-4.							
U.S. Estimated Income Tax Payments Enter any payments made for US income tax for this tax organizer year.				Tax Organizer Contents				
Type of Payment	Date Paid	Amount Paid		Page 1	Contact, Filing Info, Dependents, Estimated Tax Payments			
Estimated Pymt 1				Page 2	Foreign Residency, Employment Info, Travel Dates			
Estimated Pymt 2				Page 3	Compensation, Housing Expense, Other income			
Estimated Pymt 3				Page 4	Foreign Financial Assets, Income Deductions			
Estimated Pymt 4				Page 5	Real Estate Rental Income / Schedule E -----			
4868 Extension				Page 6/7	Self-Employment Income / Vehicle Expenses			
More Info								

Foreign Residency / Employment Info		Taxpayer		Spouse if working only			
Your <u>Last</u> Foreign Home Address During the Year	Apartment / Street						
	City, State/Pref, Zip Code, Country						
Employer's Name (Enter major employer if more than one.)							
Employer's U.S. Address, if any.	Building / Street						
	City, State, Zip Code						
Employer's Foreign Address	Building / Street						
	City, State/Pref, Zip Code, Country						
Type of Employer	<input type="checkbox"/> A Foreign Entity <input type="checkbox"/> Fgn Affiliate of US Company <input type="checkbox"/> A US Company <input type="checkbox"/> Self <input type="checkbox"/> Other -- Specify Below			<input type="checkbox"/> A Foreign Entity <input type="checkbox"/> Fgn Affiliate of US Company <input type="checkbox"/> A US Company <input type="checkbox"/> Self <input type="checkbox"/> Other -- Specify Below			
Last year to file Form 2555 to exclude foreign income							
Check Box If You Ever Revoked the Exclusions		<input type="checkbox"/> Yes		<input type="checkbox"/> Yes			
What is your country of citizenship?							
Date you most recently began living outside US (mm/dd/yyyy)							
Country of Residence During Year and Date Established							
e.g., Singapore-5/12/2010 & Japan 9/2/19 for a 2019 tax return (moving from Singapore to Tokyo in 2019). Or just Japan 9/2/19 if moving from US).							
Indicate Type of Living Quarters Outside the US	<input type="checkbox"/> Purchased House <input type="checkbox"/> Rented House / Apartment <input type="checkbox"/> Quarters Furnished by Employer			<input type="checkbox"/> Purchased House <input type="checkbox"/> Rented House / Apartment <input type="checkbox"/> Quarters Furnished by Employer			
Family members that lived with and the length of period							
e.g., Spouse and Children--Entire Period -- for living with you for the full year.							
Check Box if you ever claimed to foreign authorities you are not a bone fide resident of country (e.g. Diplomat, etc.)		<input type="checkbox"/> Yes		<input type="checkbox"/> Yes			
Check Box if you are required to pay income tax in your foreign country of residence.		<input type="checkbox"/> Yes		<input type="checkbox"/> Yes			
What is your work visa type and permitted length of stay							
(e.g., Humanities -- 3 Years)							
Check Box if you maintained a home in the US		<input type="checkbox"/> Yes		<input type="checkbox"/> Yes			
Address of Home							
Name of Occupants							
Relationship to you (e.g., mother, tenant, etc.)							
Check Box if rental unit		<input type="checkbox"/> Yes		<input type="checkbox"/> Yes			
US Arrival and Departure Dates Enter dates in mm/dd/yyyy format in Chronological Order If not living in a foreign country for the whole calendar year, enter arrival and departure dates for all countries visited, including US, for the 12-month period since you moved away from the US. For countries visited other than US, enter the name of country in the "days on business box".							
Taxpayer				Spouse if working only			
Date Arrived US (mm/dd/yyyy)	Date Left (mm/dd/yyyy)	Days on Business	Income Earned	Date Arrived US (mm/dd/yyyy)	Date Left (mm/dd/yyyy)	Days on Business	Income Earned
Check Box if your US-earned income was excluded from your Foreign Country Tax Return. If checked, income will taxable in US.							
<input type="checkbox"/> Business trip income sourced to US				<input type="checkbox"/> Business trip income sourced to US			
Comment							

Compensation and Foreign Housing Expense	Taxpayer	Spouse if working only
Currency which the Compensation was Paid (ex. JPY, SGD)		
Total Wages and Compensation. Provide supporting documents.		
National Income Tax Paid to Foreign Country. Provide docs.		
Local Inhabitant Income Taxes. Provide supporting docs.		
Check Box whether Taxes were Paid during Calendar year, or Accrued for the Calendar Year.	<input type="checkbox"/> Paid during calendar year <input type="checkbox"/> Accrued for the tax year	<input type="checkbox"/> Paid during calendar year <input type="checkbox"/> Accrued for the tax year
Benefits not included in salary, e.g., Commutation, Dependent Education, etc. Indicate Amount and Type.		
Housing Benefit not Included in Salary.		
Housing Benefit not included in salary = annual market price of rent - the amount actually paid or deducted from salary. This is additional compensation for US Tax.		
For US W-2 compensation, where was your compensation earned during the tax year? Check appropriate box on the right.	<input type="checkbox"/> Earned Before/After Fgn Residency <input type="checkbox"/> Earned During Fgn Residency Only <input type="checkbox"/> Before, After & During Foreign Res.	<input type="checkbox"/> Earned Before/After Fgn Residency <input type="checkbox"/> Earned During Fgn Residency Only <input type="checkbox"/> Before, After & During Foreign Res.
Foreign Housing Rental Expense (Enter Annual Total)		
Foreign housing rental expense includes: rent, utilities (gas, water, electric only --no phone, TV, Internet), property insurance, non-refundable deposits and real estate commissions, furniture rental, residential parking and household repairs. Expenses include any amount paid by you, deducted from salary, or paid by your employer. We do not need to see your documentation, but do keep for your records. Foreign housing expense does not include expenses for owning or buying a home.		
More Info		

Supporting Documents Needed for Your Return. Check item and forward appropriate document / explain below.

Check	Item	Check	Item
<input type="checkbox"/>	Japan National Tax Return. Required, if you filed one.	<input type="checkbox"/>	IRA Retirement Plan Contribution Statements.
<input type="checkbox"/>	Salary reported on Japan Gensen or US-W2 Wage Statement.	<input type="checkbox"/>	Other:
<input type="checkbox"/>	Japan Local Inhabitant Tax assessment (ju/ kuminzei).	<input type="checkbox"/>	Other:
<input type="checkbox"/>	US-1099s for Interest, Dividends and Stock Transactions.	<input type="checkbox"/>	Other:
<input type="checkbox"/>	K1 Partnership Statements. --	<input type="checkbox"/>	Other:
<input type="checkbox"/>	1099-R for IRA and retirement plan distributions.	<input type="checkbox"/>	Other:
<input type="checkbox"/>	SSA-1099 – Social Security Income Benefit Statement.	<input type="checkbox"/>	Other Fgn income and tax documents (specify below).
<input type="checkbox"/>	Rental income. Also see Page 5. --	<input type="checkbox"/>	State returns needed. Indicate below which state(s).
<input type="checkbox"/>	Self-employment income. Also see page 6. --	<input type="checkbox"/>	Gross Foreign Bank Interest and Tax Withheld (below).
More Info			

Check	Due Diligence Questions for return. Check and forward supporting documents as appropriate. Also see next Page.
<input type="checkbox"/>	Virtual Currency. Check box if: At any time during the tax year, did you receive, sell, send, exchange, or otherwise acquire/dispose any financial interest in any virtual currency (e.g., Bitcoin, etc.)? If so, provide details separately. See link below. https://www.irs.gov/businesses/small-businesses-self-employed/virtual-currencies
<input type="checkbox"/>	Tax Credit for Child / Dependent and Proof of Residency. Also needed for Head of Household filing status. Check box to claim a tax credit for your dependent (excluding spouse if filing a joint or separate return). Each dependent must be a US citizen/resident/national, you provided at least 50% support, lived with you at least half of the year (not counting absence due to school, etc.). For child of divorced or separated parents, Form 8332 should be attached to the return of the non-custodial parent. To claim the tax credit, you must provide third-party Proof of Residency documentation such as a health insurance card, school / church statement, family registry, etc., where the address and name on the document matches the address on your tax return. Provide a basic translation of document, including type of document and name of dependent. Address must match address on your return.
<input type="checkbox"/>	Check if IRS ever disallowed or reduced a child tax credit in a previous year and provide explanation.
<input type="checkbox"/>	Have 10% or more ownership / voting rights in a foreign corporation. ---
<input type="checkbox"/>	----- Reserved -----
<input type="checkbox"/>	----- Reserved -----
<input type="checkbox"/>	----- Reserved -----
<input type="checkbox"/>	----- Reserved -----
More Info	

Foreign Financial Accounts and Foreign Financial Assets -- Additional Due Diligence Questions for Your Return--

☐ Check Box if you had an interest or signature authority over a foreign bank/financial account located outside the United States.

Enter Country names where foreign accounts are located:

☐ Check box if the total aggregate maximum value/sum of all accounts exceeded \$10,000 at any time during the tax year.

Example: 5 foreign bank accounts (including Citibank Japan), each with max \$2,001 value. Total max value is \$10,005. Must report all foreign accounts on Form FinCEN 114. Include foreign brokerage accounts, exclude US banks on military establishments.

☐ Check Box if you received a distribution from, were grantor, or transferor to a foreign trust.

FBAR Filing ☐ Check Box if you want us to file your FBAR on your behalf, as described below. Do Not check if filing yourself.

If you had more than \$10,000 in foreign bank or financial accounts, you need to file Form FinCEN 114 online by the October 15 extended due date.

Almost all clients file this form on their own at the following link: <http://bsaefiling.fincen.treas.gov/NoRegFBARFiler.html>

Should you need assistance, we can file this form on your behalf for an additional fee of Y20,000, plus Y3,000 per account. To file on your behalf, enter your foreign account details below and download and provide the linked [Authorization Form](#)

Do not enter any info below if filing the FBAR FinCEN 114 yourself.

[illegible]

*Other. For corporate accounts, specify the account number above and list in the following order: Number of account holders / Name of Major Joint Holder or Organization / their tax identification number, if known / and their full address. Additional fee applies.

Statement of Specified Foreign Financial Assets (FATCA -- Form 8938) New Since 2011 Tax Year

☐ Check box if you are required to file Form 8938 to report foreign financial assets and forward your 8938 Organizer linked below.

Filing Thresholds for Taxpayers Outside US-- End of Year/During the Year: Single Filer \$200,000/\$300,000; Joint Filer \$400,000/\$600,000.

[Click to see who must file Form 8938](#)

[Click to download Form 8938 Excel Organizer](#)

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Other / Deduction Items for return Indicate other items for your return, including appropriate country currency (e.g., Yen, US\$, etc.)

Amount	Item	Amount	Item
	Taxpayer IRA contribution. Indicate type -- Traditional / Roth		Investment Interest Expense
	Spouse IRA contribution. Indicate type -- Traditional / Roth		US State and Local income taxes
	Home mortgage Interest-- Interest Only (indicate currency)		
	Home real estate taxes -- (indicate currency) --		
	Medical Expenses, including medical, dental, and health insurance.		
	Charity and gifts to US-based Organizations ONLY		
	Moving expenses (Military personnel only) Cost for Storage / transportation of household items.		
	Moving Expenses (Mil. Only)-Travel and Lodging (No food)		
	Date of Move (mm/dd/yyyy) --		
	You moved from where to where (e.g., NY to Tokyo)		

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Rental Income and Expenses		Enter Rental Income and Expenses below.			<input type="checkbox"/> Statements sent separately	
Property Number	1	2	3	4	5	
Type of Property (Mult / Single Family Residential, Commercial, Land, etc.)						
Full Address						
Number of rental days during year						
Number of Days Personal Use						
Date Purchased						
Dates lived on Property, if any						
Date placed in rental service						
Country Currency						
Original Total Cost of Property						
Enter total cost of property as of date place in service as a rental unit. For later improvements made, e.g., new roof, plumbing, enter description and cost for these depreciable items in the Improvement rows at the bottom of this Page, including type, date placed in service and cost. Provide additional sheet if necessary.						
Property Number	1	2	3	4	5	
Cost of Building Only						
Date Sold						
--Gross Sales Proceeds						
-- Sales Closing Costs						
Do you need to file any 1099s?	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	
Rents Received						
Enter Expenses below:						
Advertising						
Check Auto expense and enter on Page 7	Enter Page 7	Enter Page 7	Enter Page 7	Enter Page 7	Enter Page 7	
Travel (Business portion only)						
Business Food and Entertainment						
Cleaning/Maint.						
Commissions						
Insurance						
Legal / Tax Prep and Professional Fees						
Management Fees						
Bank Mortgage Interest						
Other Interest						
Repairs						
Supplies						
Property Tax						
Other Taxes						
Utilities						
Other Expense Type / Amount						
Other Expense Type / Amount						
Other Expense Type / Amount						
Other Expense Type / Amount						
Improvement Type / Date / Cost						
Improvement Type / Date / Cost						
Improvement Type / Date / Cost						
Comment						
Comment						

Self-Employment Income --		Enter Self-Employment Business Revenue and Expense in the form below. Enter Vehicle/Auto Expense details on the following page.			
Type of Business (Indicate type and Taxpayer/Spouse)					
Business name, if any					
Address of Business					
Accounting method (indicate cash or accrual)					
Did you participate in the business activities (yes or no)	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Did you start the business in current tax year (yes or no)	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Did you make any payments that require filing a1099? Did you file a 1099?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
--	--	Business A		Business B	
Country Currency Used (Yen, GBP, etc.)					
Gross Receipts/Revenue					
Beginning inventory					
Purchases					
Ending inventory					
Cost of Goods Sold (calculation)					
Advertising Expense					
Vehicle Expense --		Enter Vehicle / Auto expenses on the following page.		Enter Vehicle / Auto expenses on the following page.	
Commissions and Fees					
Contract labor					
Employee benefits, excluding pensions, etc.					
Insurance					
Mortgage interest paid to banks, etc.					
Other interest					
Legal and professional services					
Office expense					
Pension and profit sharing plans					
Vehicle and machinery rent					
Other business property rent					
Supplies					
Taxes and licenses					
Travel expense					
Deductible meals and entertainment expense					
Utilities					
Other. Indicate type and expense amount					
Other. Indicate type and expense amount					
Other. Indicate type and expense amount					
Other. Indicate type and expense amount					
Other. Indicate type and expense amount					
Other. Indicate type and expense amount					
Enter Business Use of Your Home in the Row below in the following order: Sq. feet of home / Sq. feet of bus. use / Insurance / Rent / Repairs / Utilities / Other expenses type					
Enter Depreciated Assets Below (Computers, etc.) by Type of item / Service Date / Cost					
Type of item / Service Date / Cost					
Type of item / Service Date / Cost					
Type of item / Service Date / Cost					
Type of item / Service Date / Cost					
Comment					

Vehicle / Auto Use Information		Enter All Vehicle Use Expenses and Details in the form below. Identify which business or real estate rental property is associated with each vehicle.			
Identify Vehicle					
Which property or business used in?					
Was your vehicle used for personal use on off-duty hours? (yes or no)		<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Was it used by more than 5% owner or related person? (yes or no)		<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Do you/spouse have another vehicle for personal use? (yes or no)		<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Do you have evidence to support your deduction? (yes or no)		<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If yes, is the evidence written? (yes or no) -----		<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
-- --		Vehicle A		Vehicle B	
Total miles driven during the current tax year.					
Business mile driven.					
Commuting miles included in total miles driven					
Parking fees / tolls					
Vehicle interest expense					
Personal property tax					
Gasoline/oil/repairs					
Vehicle insurance					
Vehicle registration fees					
Vehicle lease or rental cost					
Type of Owned Vehicle (Toyota xxx 2007)					
Date Placed in service					
Cost of Vehicle					
Other					
Comment					
Comment					