TAX ORGANIZER - PAGE 1		
FIRST NAME	MIDDLE INITIAL	LAST NAME
SCHOOL	VISA	
ADDRESS (INCLUDING CITY, COUNTY,	STATE, ZIP CODE)	
E-MAIL ADDRESSS	TE	LEPHONE NUMBER
	DATE OF BIRTH	
OCCUPATION NUMBER OF DAYS IN US IN 2024		
SPOUSE : FIRST NAME	LAST	NAME
SPOUSE SOCIAL SECURITY NUMBER	DA1	E OF BIRTH
· · · · · · · · · · · · · · · · · · ·	•	NAME, RELATIONSHIP, DATE OF BIRTH, SOCIAL U IN 2024 IN USA
•		WN ON W-2 OR 1042-S) INCLUDING DATE PAID,
TAX REFUND DIRECT DEPOSIT: ACCO	UNT TYPE (CHECKING O	R SAVINGS) ACCOUNT #
DURING 2024, DID YOU ENGAGE IN A		
	,	AVE A FINANCIAL INTEREST IN OR SIGNATURE NTRY? IF YES, TOTAL VALUE OF ALL
ELECTRONICALLY TO GARY R. ENGLER &	COMPANY IS CORRECT ANI	N THIS ORGANIZER & THE INFORMATION SUBMITTED D INCLUDES ALL INCOME, DEDUCTIONS, & OTHER TAX RETURNS FOR WHICH I HAVE ADEQUATE RECORDS.

TAXPAYER

DATE

SPOUSE

DATE