Questionnaire

			Guestionnane		/
Name:	1.5			SSN:	***_**
Oue	etion	maire			
Que	StiOi	ii iaii c			
Perso	nal i	Inform	nation		
	Yes	No			
	[]	[]	Did your marital status change during the year?		
			If "Yes," explain.		
	[]	[]	Did your name change during the tax year?		
			If "Yes," explain.		
	[]	[]	If your filing status is married, but you are filing separately from your spouse, did you and	your spo	use
			live apart for the last six months of 2023?		
	[]	[]	Can you or your spouse be claimed as a dependent by someone else?		
	[]	[]	Did your address change during the year?		
	[]	[]	Were you, your spouse, or any dependents a victim of identity theft?		
			If "Yes," explain		
	[]	[]	Were you, your spouse, or any dependents issued an Identity Protection PIN (IP PIN)?		
			If "Yes," provide Notice CP01A from the IRS.		
	Pro	vide	proof of identity to be eligible to e-file your tax return (driver's license or state-issued	photo II)
				•	
Deper	nden	t Info	rmation		
	Yes	No			
	[]	[]	Did you have any changes in dependents during the year?		
			If "Yes," explain.		
	[]	[]	Can another person qualify to claim any of your dependents?		
	[]	[]	Did you have any child or dependent care expenses during the year?		
	[]	[]	Did you have any adoption expenses during the year?		
	[]	[]	Did you have any children under age 19 or a full-time student under age 24 with more than	າ \$2,500 ເ	of
			unearned income?		
	Pro	vide (documentation for proof of dependent credits (school records, medical records, dayo	are reco	rds, etc.)
Healtr			ormation		
		No			
		[]	Did any member of your household have healthcare coverage through the Marketplace (Ol	oamacare	∍)?
			If "Yes," provide copies of Form 1095-A.		
	[]	[]	Did you receive any distributions from a Health Savings Account (HSA), Archer MSA, or M	edicare A	dvantage
			MSA during the year?		
l	- D		and Online and Billian and		
incom			ses, Sales, and Debt Information		
	Yes	_	Didward		
			Did you receive any tips not reported to your employer?		
			Did you receive any disability income during the year?		
		IJ	Did you cash in any U.S. savings bonds during the year?		
	IJ		Did you start a new business or purchase any rental property during the year?		
			Did you sell an existing business, rental property, or other property during the year?		
		L	Did you purchase any business assets or convert any assets to business use?		
			If "Yes," provide the cost of the asset, the date it was placed in service, and the busines	s use	
			percentage.		
			Did you purchase any gasoline, diesel, or special fuels for off-road business use?		
	[]	[]	Did you buy or sell any stocks, bonds, or other investments during the year?		
	[]		Did you sell a principal residence during the year?		
	_		If "Yes," provide closing documentation for the purchase and sale of the home.		
	[]	[]	Did you have a principal residence or a piece of real property foreclosed on during the year	?	
	[]	[]	Did you abandon a principal residence or a piece of real property during the year?		
	[]	[]	Did you refinance your principal home or second home or take out a home equity loan duri	ng the ye	ar?
	_		If "Yes," provide all escrow, closing, and other pertinent documentation and information		
	[]	[]	Did you receive any principal or interest during this year from property sold in prior years?		

Questionnaire

			Questionnaire
Name:	gile.		SSN: ***_***
Ques	stion	naire	
		[]	Did you rent out your home or use it for business?
		[]	Did you sell, exchange, or purchase any real estate during the year?
	[]		Did you acquire a new or additional interest in a partnership or S corporation? Did you have any debts canceled or forgiven this year?
	[]		Does anyone owe you money that has become uncollectible?
		[]	Did you purchase a new or previously owned clean vehicle (electric vehicle, plug-in hybrid, fuel-cell
	L J	LJ	vehicle, qualified commercial clean vehicle) during the year?
			If "Yes," provide the report the dealer or seller is required to provide to you.
	[]	[]	Did you receive income or incur expenses associated with a fantasy sports league?
			If "Yes," provide documentation.
	[]	[]	Did you receive income or incur expenses associated with car sharing (e.g., Lyft or Uber)?
			If "Yes," attach Form 1099-MISC, Form 1099-NEC, or Form 1099-K.
	[]	[]	Did you receive income or incur expenses associated with freelancing (e.g., Upwork or TaskRabbit)? If "Yes," attach Form 1099-K or Form W-2.
	[]	[]	Did you receive income or incur expenses associated with fashion sharing (e.g., Poshmark or thredUP)?
			If "Yes," provide documentation.
	[]	[]	Did you receive income or incur expenses associated with crowdfunding (e.g., Kickstarter or Indiegogo)?
			If "Yes," attach Form 1099-K.
	IJ	[]	Did you receive income or incur expenses associated with a short-term rental (e.g., Airbnb, VRBO or
			HomeAway)? If "Yes," provide documentation.
	[]	[]	Did you receive income or incur expenses as an independent contractor (e.g., Shipt, Instacart, DoorDash)?
	LJ		If "Yes," provide documentation.
	[]	[]	Did you receive any other income you have not provided information for with this organizer? If "Yes," explain
Itemiz			tion Information
	Yes		Did you now out of poolset modical or dental expenses (promisms presentations will be used to be the
		[]	Did you pay out-of-pocket medical or dental expenses (premiums, prescriptions, mileage, etc.) during the year?
			Did you pay any long-term care premiums for yourself, your spouse, or a dependent during the year?
	LJ	[]	Did you receive any state or local income tax refunds from prior years? Did you make any major purchases (vehicle, boat, etc.) during the year?
	[]	[]	Did you make any major purchases (venicle, boat, etc.) during the year? Did you pay any real estate property taxes or personal taxes during the year?
	[]	[]	Did you pay mortgage interest during the year?
	ίí	ίi	Did you make cash donations to charity during the year?
	ij	[]	Did you make noncash donations to charity (clothes, furniture, etc.) during the year?
	[]	[]	Did you donate a boat or vehicle during the year?
			If "Yes," attach Form 1098-C.
	[]	[]	Did you have gambling winnings or losses during the year?
	. []	[]	Did you have any job-related expenses that were not reimbursed by your employer (uniforms, safety
	гэ	гі	equipment, etc.)?
	L J	[]	Did you use your vehicle on the job other than for commuting to work? Did you work out of town at any time during the year?
	LJ	Г	blu you work out or town at any time during the year:
Retire	men	t Info	rmation
	Yes	No	
	[]	[]	Did you make any contributions to an IRA, Roth, Keogh, SIMPLE, SEP, 401(k), or other qualified retirement
			plan during the year?
	[]	[]	Did you make any withdrawals or receive distributions from a pension or profit-sharing plan, IRA, Roth,
	r ı	r 1	Keogh, SIMPLE, SEP, 401(k), or other qualified retirement plan during the year?
	[]	[]	Did you execute any rollovers from an IRA, Roth, Keogh, SIMPLE, SEP, 401(k), or other qualified retirement plan during the year?
	[]	r 1	Did you receive any Social Security benefits during the year?
	r 1	r 1	

		Questionnaire
Name:		SSN: ***_****
Question	naire	
Education	Inforn	nation
Yes		
[]		Did you pay tuition expenses that were required for attending college, university, or vocational school for yourself, your spouse, or a dependent during the year (even if classes were attended in another
1.1		year)? Did anyone in your household attend a post-secondary school during the year?
	[]	Did you make a contribution to or receive a distribution from an Education Savings Account or Qualified Tuition Program during the year?
		Did you pay student loan interest for yourself, your spouse, or your dependents during the year? If "Yes," provide the amount of interest that was refunded.
[]	[]	Did you receive forgiveness on a qualifying federal student loan?
Foreign Ta	x Info	rmation
Yes		
[]		Did you have a financial interest in or signature authority over a financial account or asset located in a foreign country?
[]		Did you receive a distribution from, or were you a grantor of, or transferor to, a foreign trust?
[]		Did the aggregate value of your foreign accounts exceed \$10,000 at any time during the year? Did you have any income from, or pay taxes to, a foreign country?
[]		Did you receive a Schedule K-3 from a partnership or S corporation?
[]		Did you have ownership in a foreign corporation at any time during the year?
[]	[]	Did you own property in a foreign country?
Defined W	ا ما ماد:	ding and Cating stad Tay Information
Heruna, W		ding, and Estimated Tax Information
[]		If you have an overpayment of 2023 taxes, do you want the refund applied to your 2024 estimated taxes?
[]		Did you make any estimated payments toward your 2023 taxes?
[]		Did you apply an overpayment of your 2022 taxes to your 2023 estimated taxes?
[]	[]	Do you want to have any refund or balance due directly deposited or withdrawn?
		If "Yes," provide a canceled checking or savings slip.
[]	[]	Do you anticipate your income or withholdings to be different for 2024?
Miscellane	ous Ir	nformation
Yes		
[]		Did you receive, sell, exchange, gift, or otherwise dispose of any digital asset or financial interest in any digital asset?
[]		Did you incur a gain or loss due to damaged or stolen property, while living in a federally declared
		disaster area? If "Yes," provide the incident date, value of the property, amount of insurance reimbursements, and the declaration number assigned by FEMA.
[]	[]	Did you pay wages to any household employees (babysitter, nanny, housekeeper, etc.)?
[]	[]	Did you make gifts to any one person in excess of \$17,000 during the year? Yes No
r 1	гэ	[] [] If "Yes," are you splitting the gift with your spouse?
[]		Did you incur moving expenses with the military during the year? Did you make any energy-efficient improvements to your main home during the year?
[]		Are you a business owner who paid health insurance premiums for your employees during the year?
[]		Did you receive a cash payment or digital asset of more than \$10,000 in one transaction or two or more
		related transactions during the year? Yes No
		[] [] If "Yes," was Form 8300, Report of Cash Payment over \$10,000 Received in Trade or Business, filed?
[]	[]	Do you own interest or shares in or did you dispose of a Qualified Opportunity Fund during the year?

	Questionnaire										
Name:		SSN: ***_***									
Questionnaire											
[] [] Did you make any purchases subject to use tax during the year? If "Yes," provide details.											
[] [] Did you receive any notices from the IRS or state taxing authority? If "Yes," explain											
[][]	[] [] May the IRS discuss your tax return with your preparer?										
[] [] Would you like a copy of your tax return sent to you electronically instead of receiving a printed copy? Preparer Notes											
*											
	,										

2023 Tax Organizer Personal Information

	Name			SSN	Has IP PIN	Da	te of Birth
Гахрауег				***_**_	***		
Spouse							
lame of pe	rson to whom all information should be addressed, if not th	ne taxpayer					
Street add	dress, city, state, and ZIP		,			12	
	Occupation		Daytime Phone	Evening Phor	e	Cell	Phone
axpayer		,					
pouse							
axpayer	email						
pouse e	mail						
es N	ied filing separately - If married but filing separate o Are you or your spouse blind?	ly, did you live apar go to the Presiden	t from your spouse for th tial Election Campaign Fi ices) a digital asset?	e last six months of und?			
axpayer Driv hoto ID r tate phot	o ID was issued		Spouse's type of photo Driver's license Photo ID number State photo ID was issue Date photo ID was issue	State-is	sued photo	ID	
axpayer Driv hoto ID r tate photo ate photo ate photo	rer's license		Driver's license Photo ID number State photo ID was issue	State-is	sued photo	ID	
axpayer Driv hoto ID r tate photo ate photo	rer's license	awals	Driver's license Photo ID number State photo ID was issue Date photo ID was issue	State-is		7 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 -	Account For
axpayer Driv hoto ID r tate photo ate photo	rer's license		Driver's license Photo ID number State photo ID was issue Date photo ID was issue Date photo ID expires	State-is ed Type of Accoun	i L	7 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 -	Account For Withdrawa
axpayer Driv hoto ID r tate photo ate photo	rer's license	awals Bank	Driver's license Photo ID number State photo ID was issue Date photo ID was issue Date photo ID expires Bank	State-is ed Type of Accoun	i L	lse this A	T

Dependent and Other Information								
Dependent Information	ing the second	e Paragonia de Santos de Sentos				SSN:	***_**	
First and last name SSN	Has IP PIN	Relationship	Months in Home	Date of Birth	Disabled	Full- time Student	Childcare Expenses	
ist dependents required to file a return				÷				
Estimates Federal		Reside	ent State		F	Resident	Citv	
	Amount	Date Paid		Amount	Date Pa		Amount	
irst quarter								
econd quarter			_					
hird quarter								
ourth quarter		_						
additional payments								

Drake Software - Individual Organizer - Copyright 2023

Interest Income

Name:

Provide all Forms 1099-INT, 1099-OID, and statements relating to interest income

SSN: ***_***

	~					LSI
						Name of payer Account number ID and address of payer (if seller-financed mortgage)
						Interest Income
					360	Federal Income Tax Withheld
						Foreign Tax Paid
						Tax Exempt Interest
						Amount of Resident State Municipal Interest
						Nominee Interest

Name:

Dividend Income

SSN: ***_***

					TSJ Account Number	
					Ordinary Qualified	Provide all Forms 1099-DIV, 1099-PATR, and statements related to dividend income
						al Income
						Section 199A Foreign Tax

Name: TSJ Part! - Residential Energy Efficient Property Credit Qualified solar electric property costs
Part ! - Residential Energy Efficient Property Credit Qualified solar electric property costs
Part ! - Residential Energy Efficient Property Credit Qualified solar electric property costs
Qualified solar electric property costs
Qualified solar electric property costs
Qualified geothermal heat pump property costs
Qualified geothermal heat pump property costs
Qualified battery storage technology - Does the qualified battery storage technology have a capacity of at least 3 kilowatt hours?
Qualified battery storage costs
Was a qualified fuel cell property installed on or in your main home in U.S.?
Address of main home
City, state, and ZIP
Qualified fuel cell property costs
Kilowatt capacity of qualified fuel cell property entered above
Amount of unused credit from 2022 Form 5695, line 16
Part II - Energy Efficient Home Improvement Credit
Qualified Energy Efficient Improvements
Were improvements or costs made to your main home located in the US?
Were you the original user of the qualified energy efficiency improvements?
Are the components reasonably expected to remain in use for at least five years?
Were improvements or costs related to the construction of this main home?
Address of main home
City, state, and ZIP
Were improvements or costs related to the construction of this home?
Cost of insulation or air sealing material or system
Cost of the exterior doors: Most expensive exterior door All other qualifying exterior doors
Cost of exterior windows and skylights
Residential Energy Property Costs
Did you incur costs for qualified energy property installed on or in connection with a U.S. home?
Was the qualified energy property originally placed into service by you or your spouse? Address of home that you installed qualified energy property (if more than one list separately) Street address
City, state, and ZIP
Cost of central air conditioners
Cost of natural gas, propane: Water heaters Furnace or hot water boilers
Cost of improvements to or replacement of panelboards, subpanelboards, branch circuits, or feeders
Did you incur costs for a home energy audit that included an inspection of your main home located in the U.S. and a written report prepared by a certified home energy auditor? Yes No Cost of home energy audit
Cost of electric or natural gas: Heat pumps Heat pump water heaters
Cost of biomass stoves and boilers

Schedule A - Itemized Deductions

Name:		SS	N: ***_***
Medical and Dental Expenses		Charitable Contributions	
2023	2022	2023	2022
Health insurance premiums (paid by you, not through work)		Donations to charity (cash)	
Amount above that is for Medicare premiums		Disaster relief contributions • • • •	_
Long-term care premiums (you) · · · ·		Miles driven for charitable purposes	
Long-term care premiums (your spouse)		Donations to charity (noncash)	
Long-term care premiums (dependents)		If noncash donations are greater than \$500, list belo)W.
Mileage driven for medical purposes • •			_
Out of pocket medical and dental expenses (list)			_
definal expenses (list)			_
			_
		Other Miscellaneous Deductions	100
			16.50
		Amortizable bond premiums	_
		Federal estate tax	_
		Gambling losses	
Taxes Paid	1000	Impairment-related work expenses	
State and local income taxes	5.46 4.46	Claim repayments	_
General sales tax	1,444	Unrecovered pension investments	
(vehicle, boat, home, etc.)	1	Loss from other activities from Schedule K-1	
		Ordinary loss debt instrument	
Personal property taxes Auto registration taxes not		Excess deduction on termination	
deductible for state		For state purposes ONLY	
Other taxes (list)		Job Expenses & Certain Miscellaneous D	
		Necessary job expenses you paid that were not reimb employer (list)	oursed by your
Interest Paid			11000000
Home mortgage interest paid (attach Form 1098)			12671)
Some of your home mortgage loan was not			
☐ used to buy, build, or improve your home.		Union dues	
Home mortgage interest		Tax preparation fees	
Paid to: Name		Other nonpersonal expenses related to taxable incom	ne (list)
Address			
City, State, ZIP			
Points not reported on Form 1098		Investment expenses not entered elsewhere	
Investment interest		Home equity interest	

Casualties and Thefts SSN: *** ** *** Name: TSJ FEMA code Property description Property address Business Income-producing Employee income-producing Property was Personal Fair market value before incident Fair market value after incident Insurance or other reimbursement (whether Date property was damaged or stolen or not you filed a claim) Theft Loss Deduction for Ponzi-Type Investment Scheme Part I Computation of Deduction Potential insurance / SIPC recovery Income reported in prior years Withdrawals Part II Required Statements and Declarations Information about the person or entity that conducted fraudulent arrangements SSN / EIN Name Address State _____ ZIP City U.S. Only: Province / state _____ Country ____ Postal Code _____ Foreign Only: FEMA code TSJ Property description Property address Income-producing Employee income-producing Property was Personal Business Fair market value after incident Insurance or other reimbursement (whether Date property was damaged or stolen or not you filed a claim) Theft Loss Deduction for Ponzi-Type Investment Scheme Part I Computation of Deduction Percentage of qualified investment Potential insurance / SIPC recovery Income reported in prior years Withdrawals Part II Required Statements and Declarations Information about the person or entity that conducted fraudulent arrangements SSN / EIN Address ____State _____ ZIP U.S. Only: Postal Code _ Country Foreign Only: Province / state

Schedule C - Profit or Loss from Business SSN: ***_**-*** Name: **General Business Information** Professional product or service Business code Employer ID number Business name Business address City State, ZIP U.S. only Province / state, Country, Postal code Foreign only Other Accounting method, if not cash Accrual This business was started or acquired during 2023. Some investment is NOT at risk. This business was disposed of during 2023. Select if this business is for: Newspaper delivery and you are under 18 years of age Professional gambler A clergy Exempt Notary income Yes Nο Payments of \$600 or more were paid to an individual, who is not your employee, for services provided for this business. If "Yes," did you file Forms 1099 for the individuals? Did you receive a Paycheck Protection Program (PPP) loan for this business prior to June 1, 2021? If "Yes," was any portion of the loan forgiven in 2023? Income 2023 2022 Cost of Goods Sold Other Lower of cost or market Inventory method, if not cost 2023 2022 Yes ☐ No Change of inventory method Inventory at beginning of year Purchases (less cost of items withdrawn for personal use) Other costs (list on detail worksheet) Inventory at end of year

Schedule C - Profit or Loss from Business

Evnances	
Expenses	
~S	
Business name	2023 2022
Profession or product	2023
Advertising	
Car and truck expenses	
Commissions and fees	
Contract labor • • • • • • • • • • • • • • • • • • •	
Depletion	
Employee benefit programs	
nsurance (other than health)	
nterest - mortgage (paid to banks, etc.)	
nterest - other	
egal and professional services	
Office expenses · · · · · · · · · · · · · · · · · ·	
Pension and profit-sharing plans	
Rent or lease (vehicles, machinery, and equipment)	
Rent (other business property)	
Repairs and maintenance	
Supplies	
Taxes and licenses (including real estate taxes)	
Fravel	
Total meals	
Jtilities	
Wages	
Family health coverage payments for taxpayer, spouse or dependents	
Other expenses (list):	

Sale of Capital Assets

Name:				SSN	***_**
Sale of Capita	Il Assets (including assets not reported	on Form 1099-B)			
Provide all brokera	ge statements	Date	Date	Sales	
TSJ	Description of Property	Purchased	Sold	Price	Cost
			-		
		×1			
					1

Schedule E - Income or Loss from Rental Real Estate & Royalties			
Name:			SSN: ***_***
General Property Information			
TSJProperty description			
Address, city, state, ZIP			,
Select the property type Single family residence	acation / short-term rental ommercial	Land Self-renta	1
Number of days property was rented Number of days property was used for personal use			
If the rental is a multi-dwelling unit and you occupied part of the unit, enter the percentage you occupied			
This property was placed in service during 2023. This property was disposed of during 2023. This property is your main home or second home. This property was owned as a qualified joint venture. Yes No Payments of \$600 or more were paid to an individual, who is not your employee, for services provided for this rental. If "Yes," did you file Forms 1099 for the individuals?			
Income	0000		2022
Rent Income	2023 2022	Royalties from oil, gas, mineral, copyright, or patent	2023 2022
Expenses Pantal and Homeowner Expenses			
	Rental Unit Expenses	Rental and Homeowner Expenses	If this Cahadula E is tag =
Advertising			If this Schedule E is for a a multi-unit dwelling and you
Auto and travel			lived in one unit and rented
Cleaning and maintenance		According to the state of the s	out the other units, use the "Rental and homeowner
Commissions			expenses" column to show
Insurance			expenses that apply to the entire property. Use the "Rental unit
Legal and professional fees			expenses" column to show
Management fees			expenses that pertain ONLY to the rental portion of the property.
Mortgage interest			
Other interest			If the Schedule E is not for a multi-unit property in which you
Repairs			lived in one unit, complete just
Supplies			the "Rental unit expenses"
Taxes			column.
Utilities · · · · · · · ·			
Depletion • • • • • • • • • • • • • • • • • • •			
Other expenses (list)			
\			