### **TAX ORGANIZER**

**Basic Taxpayer Information** Suffix First Name Initial Last Name Social Security No. Taxpayer Spouse Check if Date of Presidential Occupation Dependent Birth Disabled Blind Election Contrib. of Another Taxpayer Spouse Phone Res: Street & Apt/Suite City, State & Zip Phone Work: Cell Phone: Foreign country Foreign province E-mail: Foreign postal code School District State Issue ID Number Driver's License Number Issuing State Issue Date **Expiration Date** Taxpayer Spouse Filing Status 1 - Single; 2 - Married filing joint; 3 - Married filing separate; 4 - Head of Household; 5 - Qualifying Widower **Dependent Information** Months Date of Disabled or First Name Last Name Social Sec. No. Relationship Birth full time student in home 2 3 4 5 6 Wages and Salaries Federal FICA Medicare State Local Tax **Employer Name** Wages Tax Withheld Withheld Withheld Tax Withheld Withheld 2 3 5 6 **Pensions and IRAs** Gross Distribution Taxable Distribution Federal Tax Withheld IRA Payer's Name 2 3 **Attestation and Signature:** To the best of my knowledge the enclosed information is correct and includes all income, deductions, and other information necessary for the preparation of this year's income tax returns for which I have adequate records. Sign Date

here

Date

**General Questions**Please check if "Yes" and provide documentation, if possible.

	Has your marital status changed?	
	2. Were you in a Registered Domestic Partnership, civil union or same-sex marriage during 2022?	
	3. Have you been notified by the IRS of changes to a prior year's return, or received any other tax co	rrespondence?
	4. Are you being claimed as a dependent by another person?	
	5. Are there any changes in the dependent information from the prior year?	
	6. Did you have any children under 19 (or 24 if a full time student) who received more than \$1,150 in	investment income?
	7. Do you have dependents who are neither U.S. citizens nor U.S. residents?	
	8. Did you provide over half of the support for another person (or persons) during the year?	
	9. Did you purchase or sell a principal residence?	
	10. Did you receive payments from a pension or profit sharing plan?	
	11. Did you receive any distributions from an IRA or other qualified plan?	
	12. Did you receive any disability income?	
	13. Did you receive any foreign income or pay any foreign taxes?	
	14. Did you receive interest from a bank account or other financial account based in a foreign country?	?
	15. Were you the grantor of or transferor to a foreign trust?	
	16. Were either you or your spouse enlisted in the military or National Guard?	
	17. If you or your spouse are self-employed, are either of you covered under an employer's health plan	ո at another job?
	18. Did you file Form 8839, Adoption Credit, in a previous year or incur adoption expenses in 2022?	
	19. Did you claim a First-time Homebuyer Credit for a home purchased in 2008?	
	20. Was there a disposition or change in use of your main home for which you claimed the First-time F	lomebuyer Credit?
	21. Did you receive proceeds from an installment sale?	
	22. Did you make a loan at an interest rate below market rate?	
	23. Did you make gifts of more than \$16,000 to any one person?	
	24. Were there any changes to a prior year's income, deductions, or credits?	
	25. Did your employer pay premiums on life insurance in excess of \$50,000?	
	26. Were any payments made on student loans?	
	27. Did you pay any educational tuition or fees for you or a dependent?	
	28. Did you purchase a 'clean fuel' or electric hybrid vehicle in 2022?	
	29. Did you refinance a mortgage or take out a home equity loan?	
	30. Were any contributions made to a traditional or Roth IRA for 2022?	
	31. Did you make any contributions to HSA (Health Savings Account) in 2022?	
	32. Did you receive a qualified disaster distribution in 2022?	
-	33. Did you receive an early distribution for a qualified birth or adoption distribution?	
	34. Did you or a member of your family have minimum essential coverage in 2022? (The entity that pro	=
	may have sent you a Form 1095-A, 1095-B, or 1095-C, that lists individuals in your family who were	e enrolled
	in minimum essential coverage and shows their months of coverage.)	
	35. Did you receive, sell, send, exchange, or otherwise acquire any financial interest in any virtual curr	ency?
_	Business and Investment Questions	
-	Did you receive stock from a stock bonus plan with your employer?	
-	2. Did you buy or sell any bonds?	
	3. Did you surrender any U.S. savings bonds?	
	4. Did you suffer a casualty, theft or condemnation?	
-	5. Did you start a business, purchase a rental property or farm, or acquire interests in partnerships or	S-corporations?
-	6. Did you own any investments for which you were not personally at-risk?	
-	7. Did you own any interest in a Real Estate Mortgage Investment Conduit (REMIC)?	
	8. Did you sell any property or equipment on installments?	
-	9. Did you incur any business-related educational expenses?	efficial O
-	10. Did you incur unreimbursed expenses working as a reservist, performing artist, or fee-basis gov't c	micial?
	11. Did you purchase any special fuels for non-highway use?	
	12. Did you make any contributions to a Keogh or a self-employed SEP, SIMPLE or Qualified plan?	

### **Interest Income**

		lease provide copies of all Form										
	* F/S/J - enter ownership (F)iler, (S)pouse, or (J)oint.  Taxable Interest Income Tax Exempt Interest Prior Year   Current Year   Prior Year   Current Year			Specifi Prior			nterest ent Year					
*F	:/S/		Amount	Amount		nount	Amoi		Amoi			nount
1		]										
2												
3		<u> </u>										
4												
-		<u> </u>										
5		<del></del>										
6												
7												
8		<del> </del>										
9												
10		J									<u> </u>	
			D	ividend Inc	ome							
	Ρle	lease provide copies of all Form	1099-DIV or o	ther statement	s repo	rting div	idend in	come.				
	* F	F/S/J - enter ownership (F)iler,	Ordinary	Dividends	Qι	ualified	Dividen	ds	C	apita	Gain	ıs
+-		(S)pouse, or (J)oint.	Prior Year	Current Year		r Year	Current		Prior \			ent Year
	151	S/J Payer	Amount	Amount	Am	ount	Amou	ınt	Amoı	unt	An	nount
1												
2												
3												
4		<b>_</b>									<u> </u>	
5												
6											<u> </u>	
7												
8												
9												
10												
		Income or Lo	oss from Pa	rtnershins	S Co	rnorat	ions a	nd T	rusts			
ı					<del>- 1</del>				Other	Doo	sive	
		Name		Income	€	Lo	ss	_	penses		/ No)	*P/S/T
1										,,,,,,	7.107	
2												
3												
4												
5												
6												
7												
				-								
8								-		-		
9												
10				-								
11												
12												
13												
14												
15												

Gains or Losses from Sales of Stocks, Securities or Other Assets

	Gains or Losses from Sales of Stocks	, Securities	or Other A	+	Cast an
	Kind of Property and Description	Date acquired	Date sold	Sales Price	Cost or other basis
1				11100	Other basis
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					
13	Other Incom	16		1	
	Other meen		Prior Year	Current Year	Current Year
			Amount	Taxpayer	Spouse
1	Taxable refunds of state and local income taxes				
2	Alimony received				
3	Business income or (loss) - Schedule C				
4	Other gains or (losses) - Form 4797				
5	Rents and royalties - Schedule E pg 1				
6	Farm income or (loss) - Schedule F				
7	Unemployment compensation				
8	Total social security benefits				
9	Tips				
10	Child care taxable benefits				
11	Prizes and awards				
12	Scholarships and fellowships				
13	Other income not provided for in this organizer				
14					
15					
16					
ĺ	Adjustments to I	ncome		1 2	
			Prior Year Amount	Current Year Taxpayer	Current Year Spouse
1	Educator expenses		Amount	ιαλράγει	Opouse
2	Business expenses of reservists, performing artists and fee-basis gov't of	fficials			
3	Health savings account deduction				
4	Moving expenses for members of the armed forces				
5	Self-employed SEP, SIMPLE, and qualified plans				
6	Penalty on early withdrawal of savings				
7	Alimony paid				
8	Your IRA contribution				
9	Spouse's IRA contribution				
10	Student loan interest				
11	Tuition and fees				
				ı	

# **Itemized Deductions**

					Prior Year	Current Year	
			. ,		Amount	Amount	
1a	Medical and dental expenses (other		·				
1b	Long-term care premiums	Taxpayer	Spouse				
2	Other state and local taxes paid not	reported elsewhere i	n this Organizer				
3	State and local income taxes paid						
4	Real estate taxes						
5	Personal property taxes						
6	Other taxes						
7	Home mortgage interest and points		98				
8							
_	Name:	Address:		SSN:			
9	Home mortgage points not reported on Form 1098						
10	Qualified mortgage insurance premi	ums					
11	Investment interest paid						
12	Gifts to charity by cash or check						
13	Gifts to charity other than by cash o						
14	Mileage driven to charitable activities						
15	Casualty and theft loss(es) from a fe	•	ster				
16	Unreimbursed employee expenses (State use only)						
	Travel expenses (exclude m	eals)					
	Meals						
	Parking and tolls (enter othe	r vehicle information	on Page 7)				
	Telephone used for employe	r's business (allocate	e cost)				
	Professional organization or	union dues					
	Educational expenses requir	ed to maintain your j	ob				
	Office in home required by e	mployer					
	Tools and equipment						
	Uniform and protective clothi	ng					
	Professional journals subscriptions						
	Job seeking costs						
•	Other						
17	Tax preparation fees (State use only	/)					
18	Other expenses (State use only)						
	Investment expenses (State	use only)					
•	Safe deposit box rental (State use only)						
ŀ	Other (State use only)						
19	Other itemized deductions						
L		Edu	cation Expenses			<u> </u>	
	Student's Name		of Expense	Year of School	Amo	ount	
1							
2							

Student's Name Type of Expense Year of School Amount

2
3
4
5
6

Child or Dependent Care Expenses

	Persons or Organizations	s Who Provided the Care	Social Security	Amount
	Name	Address	or ID Number	Paid
1				
2				
3				
4				

# Federal, State and Local or Other Estimated Taxes Paid

# **Federal Estimates**

	Futto Boron and buforms atten-			Filer and	or Joint	Payments	Spouse Only Payments			
	Enter Payment Inf	ormation		Date Pai	aid Amount		Date Paid		Amount	
1	Overpayment from last year									
2	First quarter payment									
3	Second quarter payment									
4	Third quarter payment									
5	Fourth quarter payment									
6										
7										
	State Estimates									
	Enter two-letter state abbreviation	State		State		State		State		
	Enter Payment Information	Date Paid	Amount	Date Paid	Amount	Date Paid	Amount	Date Paid	Amount	
1	Overpayment from last year									
2	First quarter payment									
3	Second quarter payment									
4	Third quarter payment									
5	Fourth quarter payment									
6										
7										
8										
			Local o	r Other Est	imates					
	Enter description	Desc 1		Desc 2		Desc 3		Desc 4		
	Enter Payment Information	Date Paid	Amount	Date Paid	Amount	Date Paid	Amount	Date Paid	Amount	
1	Overpayment from last year									
2	First quarter payment									
3	Second quarter payment									
4	Third quarter payment									
5	Fourth quarter payment									
6										
7										

8

# **Vehicle Information and Expenses**

_		Vehicle One	Vehicle Two
1	Description of vehicle		
2	Is the vehicle used in a business or by an employee?		
3	Cost (including sales tax)		
4	Date placed in service		
5	Business miles driven during the year		
	January 1 to June 30		
	July 1 to December 31		
3	Commuting miles (daily commuting miles times the number of trips to work)		
7	Other personal use miles		
3	Total miles driven		
9	Gas and oil expenses		
)	Repairs and maintenance		
1	Auto insurance		
2	Registration, licenses, and fees		
3	Other auto expenses (identify)		
4	Auto rentals		
	Auto rentals  Auto Mileage Documentati	ion	

		Yes	NO
1	Is another car available for personal use?		
2	Do you have evidence to support your mileage information reported above?		
3	If "Yes," is the evidence written in a log or other place?		

### **Business Use of Home**

	Yes	No
Do you use any part of your home regularly and exclusively for business?		
Total area of home (in square feet)		
Total area used for business		
House Insurance		
Repairs and Maintenance		
Utilities		
Rent		
Property Taxes		
Mortgage Interest		
Real Estate Taxes		
Home Equity Loan Interest		
Internet		
Phone		

Comments

		Name 55N
		Questions
Yes	No	Personal Information  Did any births, adoptions, marriages, divorces, or deaths occur in your family since last year?  Did you purchase or sell your principal residence or did your address change?  Are either you or your spouse being claimed (or are eligible to be claimed) as a dependent on anyone else's return?  Were you in a Registered Domestic Partnership, civil union or same-sex marriage during 2022?  Were either you or your spouse in the military or National Guard?  Have you been notified by the IRS or state of changes to a prior year's return, or received any other tax correspondence. Have you or your spouse been an identity theft victim and given an identity theft protection six digit PIN by the IRS?
Yes	No	Dependents  Are there any changes in your dependents from last year?  Did you have any children under 19 (or 24 if a full time student) who received more than \$1,150 in investment income?  Did you pay education expenses for your dependent children?  Did anyone in your family receive a scholarship of any kind during 2022?  Did you pay any dependent care expenses for a child or a parent?  Did you pay over half of the support for a parent or someone else you aren't claiming as a dependent?  Are all of your dependents either US residents or citizens?
Yes	No 1	Health Care Coverage  Did you or a member of your family have minimum essential coverage in 2022? (The entity that provided the coverage may have sent you a Form 1095-A, 1095-B, or 1095-C, that lists individuals in your family who were enrolled in minimum essential coverage and shows their months of coverage.)
Yes	No 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23	Income (In 2022, did you or your spouse have any of the following?)  Wages? (include form(s) W-2)  Non-employee compensation? (include form(s) 1099-NEC)  Miscellaneous Income? (include form(s) 1099-NISC)  Interest income? (include form(s) 1099-NISC)  Interest income? (include form(s) 1099-NISC)  Dividend income? (include form(s) 1099-DIV)  Did you receive any tax-exempt income, such as interest or dividends from municipal bonds or a mutual fund account? Gambling income? (include form(s) W-2G). Be sure to include any gambling expenses.  Social security or Railroad Retirement benefits? (include form(s) SSA-1099 & RRB-1099)  Did you receive a state or local refund, or a refund of any other deduction you itemized in a prior year? (attach 1099-G)  Disability income? (include form(s) W-2 or 1099)  Unemployment compensation? (include form(s) 1099-G)  Alimony?  Did you receive tip income NOT reported to your employer?  Did you receive payments from a Long-Term Care insurance contract?  Did you receive, or expect to receive, a Schedule K-1 (or substitute K-1) from a trust, estate, partnership, or S corp?  Did you cash in any U.S. savings bonds?  Did you cash in any U.S. savings bonds?  Did you make a loan to someone at an interest rate below market rate?  Did you receive any income not reported in this Organizer?  Did you own an interest in a Real Estate Mortgage Investment Conduit (REMIC)?  Did you receive, sell, send, exchange, or otherwise acquire any financial interest in any virtual currency?
Yes	No 1 2 3	Foreign Reporting Did you have an interest in or signature authority over a financial account in a foreign country? Were you the grantor of or transferor to a foreign trust? Did you receive income from a foreign source or pay taxes to a foreign government?
Yes	No 1 2 3 4 5 6 7 8 9 9	Retirement & Other Plans  Did you receive any distributions from a retirement plan? (Include form(s) 1099-R)  Did you rollover a retirement plan distribution into another plan?  Did you convert a traditional IRA to a Roth IRA?  Did you make a contribution to a retirement plan? (401(k), IRA, SEP, SIMPLE, Qualified Plan, etc.)?  Did you receive a distribution from an Achieving a Better Life Experience (ABLE) savings account?  Did you receive a distribution from an HSA, Archer MSA or Medicare Advantage MSA (Include form(s) 1099-SA)  Did you make any contributions to an HSA (Health Savings Account) in 2022?  Did you receive a qualified disaster distribution in 2022?  Did you receive an early distribution for a qualified birth or adoption distribution?

Yes	No	Purchases, Sales, Gains and Losses
	<u> </u>	Did you exchange any securities or investments for something other than cash?
	2	Do you have any short sales, commodity sales, or straddles?
	-   3	Did you receive Form 2439?
	<b>4</b>	Did you buy or sell any bonds?
	5	Did you receive stock from a stock bonus plan with your employer?
	6	Did you sell any other personal assets at a gain?
	7	Did you sell any real estate (other than your home) during the year?
	8	Did you sell any assets using the installment method?
	9	Did you receive proceeds from a prior year installment sale?
	10	Did you purchase a rental property?
	11	Did you exchange any property for other property?
	12	Did you incur a loss because of damaged or stolen property?
	13	Did you purchase a new vehicle, aircraft or boat?
	14	Did any security become worthless during 2022?
	15	Did any debts become uncollectible during 2022?
	16	Did you puchase any items acquired out of state, online or by mail order that did not include sales tax?
V	NI -	Business and Bustal Busy arts busy as 0 Budgeting
Yes	No	Business and Rental Property Income & Deductions
$\vdash$	$H^{1}$	If you own rental property, do you qualify as a Real Estate Professional?
$\vdash$	<b>⊢</b>	Did you start or acquire a new business?
$\vdash$	] 3	Did you sell any part of an existing business, or sell business assets?
$\vdash$	<b>⊢</b>	Did you cease operating any business or rental property?
$\vdash$	5	Did you remove any of your business assets for personal use?
$\vdash$	<b>⊢</b>	Did you use part of your home for business purposes?
$\vdash$	<b> </b>	Did you make any contributions to a Keogh or a self-employed SEP plan for 2022?
	8	Do you pay for any health or long term care insurance through your business?
$\vdash$	9	If you or your spouse are self-employed, are either of you covered under an employer's health plan?
	10	Did you purchase any furniture or equipment for your business?
$\vdash$	11	Did you make any improvements to your rental properties?
	12	Did you receive income from raising animals or crops?
Yes	No	Other Deductions
	Ш¹	Did you use your car on the job (other than to and from work)?
	2	Did you work out of town for part of the year?
	3	Did you incur unreimbursed expenses working as a reservist, performing artist, or fee-basis gov't official?
	4	Did you incur any travel and entertainment expenses for business purposes?
	<b>□</b> 5	Did you pay expenses for the care of your child or other dependent so you could work?
	<b>⊢</b>	Did you purchase a 'clean fuel' or electric hybrid vehicle in 2022?
	7	Did you make energy efficient improvements to your home or purchase any energy-saving property during 2022?
	8	Did you contribute less than an entire interest in any property to charity?
$\vdash$	9	Did you refinance a mortgage or take out a home equity loan during 2022?
$\vdash$	10	Did you incur moving expenses during the year due to a military order and incident to a permanent change in station?
$\vdash$		Did you or your spouse pay any educational expenses for yourselves?
$\vdash$	12	Did you pay any student loan interest?
$\vdash$	13	Did you make any federal or state estimated payments?
H	14	Did you pay alimony?
$\vdash$	15	Did you donate non-cash donations?
Ш	16	Did you donate a vehicle?
		···
Yes	No	Miscellaneous  Site of the state of the stat
$\vdash$	$H^{1}$	Did you make gifts of more than \$16,000 to any one person?
$\vdash$	<b>⊢</b>   <sup>2</sup>	Did you engage the service of any household employees?
$\vdash$	] 3	Did your bank account information change within the last twelve months?
$\vdash$	<b>⊢</b>	Do you want to allocate \$3 to the Presidential Election Campaign Fund?
$\vdash$	<b>⊢</b> 5	Does your spouse want to allocate \$3 to the Presidential Election Campaign Fund?
H		Did you file Form 8839, Adoption Credit, in a previous year or incur adoption expenses in 2022?
1 1	7	Did you claim a First-time Homebuyer Credit for a home purchased in 2008?
$\overline{}$	8	Was there a disposition or change in use of your main home for which you claimed the First-time Homebuyer Credit?

Yes	No Return preparation and filing  1 Do you want to e-file your return? 2 If you are due a refund, how do you want to receive it?						
		Check sent to you in the mail	Check sent to you in the mail		Other quick refund via a bank product		
		Apply to next year's estimates					
		Direct deposit (please provide voided bla	ank check)	Type of account:	Checking	Savings	
		If you owe taxes, how do you want to pay them?					
		Paper check sent with my return	Credit card	Installment Ag	reement		
		Direct debit (please provide a voided bla	nk check)	Type of account:	Checking	Savings	
	3	Do you want to allow your tax preparer to discuss this year's return with the IRS? If no, enter another person (if desired) to be allowed to discuss this return with the IRS:					
		Designee's name	Phone Number		Personal identific Number (5 digit l		

Name	SSN
Comments	