ORGANIZER

2023	1040	US	Tax Organizer

Bunner CPA PLLC 305 S Green St Suite 300 Morganton NC 28655

Telephone number: **828-219-3401**

Fax number: E-mail address:

Tax Return Appointment

Date: Time: Location:

This tax organizer will assist you in gathering information necessary for the preparation of your 2023 tax return. Please enter all pertinent 2023 information.

NOTE: If you claim the earned income credit, please provide proof that your child is a resident of the United States. This proof is typically in the form of: school records or statement, landlord or property management statement, health care provider statement, medical records, child care provider records, placement agency statement, social service records or statement, place of worship, Indian tribal office statement, or employer statement.

NOTE: If your child is disabled, please provide one of the following forms of proof of disability: doctor statement, other health care provider statement, or social services agency or program statement.

or social services agency or program statement.					
CLIENT INFORMA	TION	Taxpayer	Spouse		
First name and initial		· J. ·			
Last name					
Title/suffix					
Social security number					
Occupation					
Date of birth (m/d/y)					
Date of death (m/d/y)					
1=blind					
Home phone					
Work phone					
Work extension					
Cell phone					
E-mail address					
	In care of				
	Street address				
Address	Apartment number.				
Address	City				
	State				
	ZIP code				
DEPENDENTS					
DEI LINDLINIS		Dependent No.	Dependent No.		
First name					
Last name					
Title/suffix					
Date of birth (m/d/y)					
Date of death (m/d/y)					
Date of adoption (m/d/y)					
Social security number					
Relationship					
Months lived at home					
		Dependent No.	Dependent No.		
First name					
Last name					
Title/suffix					
Date of birth (m/d/y)					
Date of death (m/d/y)					
Date of adoption (m/d/y)					
Social security number					
Relationship					
Months lived at home					

ORGANIZER 2023 1040 US Tax Organizer Please enter all pertinent 2023 information. If you have attached a government form for an item, check the box and do not enter a 2023 amount. WAGES, SALARIES AND TIPS 2023 Amount Employer name: 2022 Amount Attach Forms W-2 INTEREST INCOME Payer name: Attach Forms 1099-INT **DIVIDEND INCOME** Payer name: Attach Forms 1099-DIV PENSIONS, IRA AND GAMBLING INCOME Payer name: Attach Forms 1099-R & W-2G Winnings not reported on W-2G..... Total gambling losses..... OTHER GOVERNMENT FORMS - INCOME Form 1099-B - Sales of stock (also include transaction history) Attach Forms 1099 Form 1099-K - Merchant card and third party network payments Form 1099-S - Sales of real estate (also include closing statements) . Attach Forms 1099 Taxpayer: Attach Forms 1099 Form 1099-Q (529 Plan) Form 1099-QA/5498-QA (ABLE Accounts) Spouse: Attach Forms 1099 Form 1099-Q (529 Plan) Form 1099-QA/5498-QA (ABLE Accounts)

23	1040	US	Tax Organizer		
MISC	ELLANEOU	S INCOME			
	Taxpayer: Alir	mony received			
	Spouse: Alimo	ony received			
Other:					
DETI	DEMENT D		TRIBUTIONS	2002 A	2022 A
			utions (1=maximum)	2023 Amount	2022 Amount
талра	_		(1=maximum)		
			., & qualified plan contributions (1=maximum)		
Spous			utions (1=maximum)		
•			(1=maximum)		
	Self-employe	ed, SEP, SIMPLE	., & qualified plan contributions (1=maximum)		
—			ORMS - DEDUCTIONS		
_			nterest	Attach Forms 1098	
∐ Fo	rm 1098-1 - 1	uition and re	lated expenses		
ΔFFC	ORDABLE C	ARF ACT			
			e Marketplace Statement	Attach Forms 1095	
Ш					
ADJU	JSTMENTS	TO INCO	ME		
Taxpay	yer:				
Se	elf-employed h	ealth insuran	ce premiums		
	•				
Ot	her adjustmen	its to income	: •		
	luca a constata de la	\	o CON		
Ali	imony paid - R	recipient nam	ne & SSN		
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Spous	e:				
Se	elf-employed h	ealth insuran	ce premiums [
Ed	lucator expens	ses			
Ot	her adjustmen	its to income	: •		
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<u>Λ Ii</u>	imony paid E	Occipiont nam	ne & SSN		
All	imony paid - N	recibient nan	ie & 33N		
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			EXPENSES		
	•	_	5		
-		-			
			ayer		
			se		
			ortation expenses		
			Untation expenses		
Other:					
				L	
TAXE	ES PAID		_		
State i	income taxes -	- 1/23 pavme	nt on 2022 state estimate		

TAX	ES PAID (c	ontinued)		2023 Amount	2022 Amount
State i	income taxes -	paid with 202	2 state extension		
State i	income taxes -	paid with 202	2 state return		
State i	income taxes -	paid for prior	years and/or to other states		
City/lo	cal income tax	es - 1/23 payr	ment on 2022 city/local estimate		
City/lo	ocal income tax	xes - paid wit	th 2022 city/local extension		
City/local income taxes - paid with 2022 city/local return					
State	and local sale	s taxes (exce	ept autos and special items)		
Use ta	axes paid on 2	023 purchase	es		
Use ta	axes paid on 2	022 state reti	urn		
Sales	tax on autos r	not included a	above		
Sales	taxes paid on	boats, aircra	ft, and other special items		
Real e	estate taxes - p	orincipal resid	dence		
Real e	estate taxes - ı	oroperty held	for investment		
Pe		ty taxes (incl	uding automobile fees in some states)	Attach Tax Notice	
Home	mortgage inte	erest and poir	nts paid:		
\square _				Attach Forms 1098	
\sqcup				71110111101111011010	
Home m	nortgage interest n	ot on Form 1098	(include name, SSN, & address of payee):		
Points	s not reported	on Form 1098	8:		
iiivest	ment interest	(interest on n	nargin accounts):		
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Passiv			nargin accounts):		
Passiv CAS	ve interest H CONTRIE : No deduction	BUTIONS is allowed for			
Passiv	ve interest H CONTRIE : No deduction	BUTIONS is allowed for	or cash or check contributions unless the do		
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Passiv CAS NOTE	ve interest H CONTRIE : No deduction from the don teer expenses er of charitable	BUTIONS is allowed for ee, showing to the control of the control	or cash or check contributions unless the do the name of the organization, contribution d	ate(s), and contribution amount(s	5).
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2023	1040	US	Miscellaneous Questions			
If any of the following items pertain to you or your spouse for 2023, please check the appropriate box and provide additional information if necessary.						
YES	NO	Did your marital status change during the year?				
		Did your address change during the year?				
		Could you be claimed as a dependent on another person's tax return?				
		Were there any changes in dependents?				
		Did you and your dependents have health care coverage for the full-year?				
		Did you receive an IRS document 1095-A (Health Insurance Marketplace Statement)? If so, please attach.				
		Did you receive unreported tip income of \$20 or more in any month?				
		Did you re	eceive any disability income?			
		Did you b	uy or sell any stocks, bonds or other investment property?			
		Did you purchase, sell, or refinance your principal home or second home, or did you take a home equity loan?				
		Did you make any residential energy-efficient improvements or purchases involving solar, wind, geothermal or fuel cell energy sources?				
		Did you receive a distribution from or make a contribution to a retirement plan (401(k), IRA, etc.)?				
		Did you tr	ransfer or rollover any amount from one retirement plan to another?			
		Did you co	onvert part or all of your traditional/SEP/SIMPLE IRA to a Roth IRA?			
		Did you, y vocationa	your spouse, or a dependent incur any tuition expenses that are required to attend a college, university, or I school?			
		Did you ir	ncur a loss because of damaged or stolen property?			
		Did you u	se your car on the job (other than to and from work)?			
		May the II	RS discuss your tax return with your preparer?			
		Was your	home rented out or used for business?			
		Were you	notified or audited by either the IRS or the State taxing agency?			
		At any tim	ne during the tax year, did you: receive or sell, exchange, gift, or otherwise dispose of digital asset?			