



Please check the box for any statements that are TRUE.

FOR ANY ITEMS CHECKED, please provide the requested details, attach notes, and/or complete organizer section. Items are numbered for easy reference. Missing or blank responses will be treated as if answered false/zero.

- Taxpayer Name: _____
- Email: _____ Cell Phone: _____
- How do you want the CLIENT COPIES of your returns provided to you? (select one of the below):
 - Paper- Please send my copy through US Post Office Mail
 - Paper- I'll pick up my copy when ready
 - PDF- please email copy of return to me and my supporting documents (originals will be destroyed)
 - PDF- please email copy of return to me and mail original supporting documents back to me

Note- if you selected PDF, please ensure the correct email is provided above!
- Taxpayer or Spouse driver's license changed or renewed from last year (If yes, please provide a copy)

Personal Information, Electronic Filing, Refund/Payments

- 1 Marital status changed during the year (provide details)
- 2 Address changed from last year or from what we have listed on this mailing (provide updated info)
- 3 Moved between states during the year: Prior _____ Current _____ Date Moved ___/___/_____
- 4 You (or your spouse) can be claimed as a dependent by another taxpayer
- 5 Bank accounts that have been used for direct deposit / withdrawal last year have changed (attach voided check)
- 6 Would like to direct deposit any refund to a checking/savings account (annual election)
 (if you have not done this previously with us or changed accounts, attach voided check)
- 7 If you have a refund, check if you would like part/all of it applied to next year's tax (amount \$_____)
- 8 If you owe taxes, check the box if you would like it electronically withdrawn from your account (annual election)
 Withdrawal date: _____ (no later than 4/15)
 (if you have not done this previously with us or changed accounts, attach voided check)
- 9 You would like subsequent year tax projections / estimates prepared using amounts that are different from the current year (attach details of all changes)
- 10 Received an Identity Protection PIN from the Internal Revenue Service or have you been a victim of identity theft (If yes, attach the IRS letter(s) with PIN)

Quarterly Estimated Tax Remitters (if applicable) *Please attach copies of these checks*****

11 Carefully provide below information, you are responsible to list ONLY estimated payments for 2023 actually paid

Quarterly Estimates	Date Paid	Federal Amount	Rhode Island	Massachusetts	State _____
Q1 (due 4/18/23)	___/___/___	\$ _____	\$ _____	\$ _____	\$ _____
Q2 (due 6/15/23)	___/___/___	\$ _____	\$ _____	\$ _____	\$ _____
Q3 (due 9/15/23)	___/___/___	\$ _____	\$ _____	\$ _____	\$ _____
Q4 (due 1/16/24)	___/___/___	\$ _____	\$ _____	\$ _____	\$ _____

Dependent & Credit Information

- 12 There were changes in dependents from the prior year (If new, provide SSN & DOB)
- 13 Dependents ages 19-23 were full time students (or disabled)
- 14 Have children under age 19 (or a full-time student under age 24) that has unearned income greater than \$2,500
- 15 Provided over half the support for someone other than your dependent children (i.e. parents, relatives, etc.)
- 16 Paid expenses related to the adoption of a child during the year
- 17 Adopted a child during the year: (y/n) Specials need____, Foreign____, Step-Child _____
- 18 Paid for child-care while working or looking for work (Attach details, including:
 Amount per child per child-care center, provider ID#, and provider name/address)

- 19 Have a divorce decree or separation agreement which establishes custodial responsibilities for your child(ren)
- 20 Have been notified by the IRS of disallowance or reduction in credits claimed on prior returns
- 21 Have children or dependents that may qualify for education, child or other credits, or have low income that might qualify for earned income credits (If you are claiming a child tax credit, you MUST provide documentation supporting your claim to your dependents such as: i) Health Care Statements or ii) School / childcare statements
- 22 Your dependents did NOT live with you (or at college) the full year
- 23 Someone else is qualified to claim your dependents
- 24 You can NOT substantiate your claim to the credits/dependents
- 25 You did NOT provide more than half of the support for your dependents

Purchases, Sales and Debt Information

- 26 Sold any securities, bonds or other investments during the year (Provide 1099s and basis for each)
- 27 Rented property to someone else during the year (provide income and expense detail)
- 28 Sold, exchanged, or purchased real estate during the year
- 29 PURCHASED or SOLD a principal residence during the year (circle one)
If yes, did you own and occupy the house as your principal residence for at least 2 years out of the last 5 years before the sale? (Y/N) _____ Have you sold a principal residence within the last two years? (Y/N) _____
Did you ever rent this property? (Y/N) _____ Did you use any portion of the home for business? (Y/N) _____
- 30 Foreclosed or abandoned a principal residence or real property during the year
- 31 Took out a home equity loan this year. If yes, were the funds used for improvements of the home? (Y/N) _____
- 32 Refinanced a principal residence or second home this year
- 33 Sold an existing business, rental, or other property this year
- 34 Lent money to someone and this year it became totally uncollectable
- 35 Had debts canceled or forgiven this year, such as home mortgage, credit card debt or student loans
- 36 Received or exercised any stock options from your employer (If yes, attach detailed statement)
- 37 Received, sold, sent, or exchange any Virtual Currency (e.g. Bitcoin)

Income Information

- 38 Had foreign income or paid foreign taxes, directly or indirectly, such as from investment accounts, partnerships, foreign assets, or a foreign employer. Or had signature authority or other control over a foreign account.
- 39 Received income from property sold PRIOR to this year
- 40 Received unemployment benefits during the year (must attach all unemployment statements)
- 41 Received disability income during the year
- 42 Had life insurance policies mature or surrendered
- 43 Received awards, prizes, hobby income, gambling or lottery winnings
- 44 Expect a large fluctuation in income/ deductions next year and want to setup an appointment after tax season to discuss and/or prepare projections and planning.
- 45 Received dividend income on any shares of stock that you did not own for at least 61 days during the 121-day period that began at least 60 days before the ex-dividend date
- 46 Have tax-exempt income, other than as provided in 1099s
- 47 Received punitive damage awards or an award from damages other than physical illness or injury
- 48 PAID or RECEIVED Alimony (Circle one) (if either, date of alimony agreement _____)
- 49 If you are a teacher, paid educator expenses in the classroom (up to \$300). Taxpayer \$ _____ Spouse \$ _____
- 50 Received 1099-K forms. If yes, what was this money received in relation to? _____

Retirement Information

- 51 You or your spouse contributed to an employer sponsored pension or retirement plan
- 52 Made contributions to a qualified retirement plan (IRA, Roth, SEP, etc) in addition to what is on your W-2
- 53 Received Social Security benefits during the year (attach 1099s)
- 54 Did NOT take required minimum distributions from all qualified accounts (If not, attach details)
- 55 Made any withdrawals from an IRA, Roth, Keogh, SIMPLE, SEP, 401(k), or other qualified retirement plan
- 56 Distributions from your IRA and/or Roth IRA were used to purchase a home or due to loss of employment
- 57 Distributions from your IRA and/or Roth IRA were distributed to charitable organizations

- 58 You or your spouse converted a traditional IRA to a Roth IRA
59 Would like to contribute to a retirement plan account, especially if it may save you taxes
60 RI Residents Only: Received military pension benefits (if so, Gross amount \$ _____)

Education Information

- 61 Paid educational expenses / tuition during the year on behalf of yourself, your spouse, or a dependent
62 You, your spouse, or dependents received a scholarship during the year
63 Made withdrawals from an education savings or 529 Plan account (If yes, not used for qualified expenses)
64 Paid student loan interest this year (total paid \$ _____)
65 Cashed in Series EE or I U.S. Savings bonds issued after 1992
66 Made contributions to an education savings or 529 Plan account (If yes, what state? _____, attach details)

Health Care Information

- 67 Health coverage/policy in 2023 changed from 2022 coverage/policy (attach details)
68 Did NOT have qualifying health care coverage, such as employer-sponsored coverage or government-sponsored coverage (i.e. Medicare/Medicaid) for every month of 2023 for your family.
69 Qualified for an exemption from the health care coverage mandate
70 Enrolled Marketplace Coverage under the Affordable Care Act. (If yes, MUST attach Form(s) 1095-A)
71 Made contributions to a Health savings account (HSA) or Archer MSA. (If yes, please provide details)
72 If yes to above, check here if you did not qualify to contribute or over-contributed
73 Received distributions from a Health savings account (HSA), Archer MSA, or Medicare Advantage MSA
74 If yes to above, the full amount of distributions were NOT used for qualified expenses
75 Received payments from a long-term care policy for yourself or your family
76 Paid long-term care premiums for yourself or your family (Taxpayer \$ _____ Spouse \$ _____)

Business Owners (skip if you do not own a business)

- 77 Had PPP loans forgiven in 2023 or received other COVID relate grants, credits, etc. (If so, attach details)
78 Did you start or dispose of a business during the past year
79 Owned a Single-Member LLC (SMLLC) (If so, what state was it created in _____?)
80 Paid health insurance premiums for you or your family through your business (If yes, total: \$ _____)
81 Utilized an area of your home EXCLUSIVELY for business purposes
(provide details: square footage of home, business area, home expenses, etc.)
82 Used your personal vehicle for business AND have appropriate mileage logs containing dates, attendees, and business purposes for all business miles (you must have this information logged to deduct)
Business Miles: _____ Commuting Miles _____ Total Miles _____

Miscellaneous Information

- 83 Made gifts of more than \$17,000 to any individual or trust in cash or other value
84 Forgave debt that someone owed you during the year
85 Engaged in any bartering transactions
86 Incurred a casualty or theft loss or any condemnation awards during the year (attach details)
87 Paid an individual as a household employee during the year
88 Purchased an electric vehicle (Must attach summary tax credit report from dealership)
89 Installed qualified solar electric, small wind energy, geothermal heat or solar water heating property
90 Made home improvements to save energy on your main home such as exterior doors/windows, insulation, energy audits, central air, gas/oil water heaters or furnaces, heat pumps, or pellet stoves.
(If yes, amount of credit received in previous years \$ _____ and attach details of current improvements)
91 Received a distribution from, or are a grantor or transferor for a foreign trust
92 Received correspondence from the State or the Internal Revenue Service (if yes, attach a copy)
93 Want to designate \$3 to the Presidential Election Campaign Fund. (Will not change your tax or refund)
94 Worked outside of the US or paid any foreign taxes (other than listed on investment statements provided)
95 Have income from a state that may require additional state/local tax returns than prepared in prior year

- 96 Your resident jurisdiction requires the filing of local Earned Income Tax/ School Tax Returns
 97 (For landlords) Circumstances have changed that impact your ability to take the QBI section 199a deduction

Itemized & Other Deduction Information

The standard deduction in 2023 is \$13,850 for single filers and \$27,700 for married filers. If you do not exceed these amounts, you typically will take the standard deduction (and not itemize). We can compute the best benefit for you; however, even if you ultimately take the standard deduction, computing the best benefit may incur additional time/fees that may not be otherwise required to file your return. If you provide (or attach) the below information, time will be incurred to analyze it. **If you do NOT want us to optimize for the best method and you want to take the standard deduction, do not provide the below and check here:** 98

Provide totals for 2023 only, do NOT attach checks, invoices or receipts unless specifically requested

AMOUNT	ITEM															
\$	Amount of Real Estate / Fire taxes YOU paid in 2023 on your primary/secondary home or land															
\$	Amount of Car / Personal taxes paid in 2023 on your vehicle (not sales tax)															
\$	Amount paid in 2023 for sales tax on major purchases during the year (cars, boats, etc.)															
\$	Amount paid for out-of-pocket medical expenses in 2023 (Co-pays, prescription drugs, etc.) <i>(if you paid more than 7.5% of your income, otherwise disregard or provide rough estimate then we will contact if more info is needed)</i>															
\$	<u>Cash</u> charitable contributions made in 2023 <i>(retain receipts or cancelled checks for your records, do NOT send to us)</i>															
\$	DOLLAR VALUE of <u>noncash</u> charitable contributions (clothes, household goods, furniture, etc.) You are required to have a receipt for these items (do not provide it to us, but retain for your records) For any donations valued <u>over \$500</u> , also provide the following detail for each donation:															
	<table border="1"> <thead> <tr> <th>\$ Amount</th> <th>Date</th> <th>Charity Name</th> <th>Charity Address</th> <th>Items Donated</th> </tr> </thead> <tbody> <tr> <td> </td> <td> </td> <td> </td> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> <td> </td> <td> </td> <td> </td> </tr> </tbody> </table>	\$ Amount	Date	Charity Name	Charity Address	Items Donated										
\$ Amount	Date	Charity Name	Charity Address	Items Donated												
<input type="checkbox"/>	Donated vehicle or boat during the year <i>(If yes, attach acknowledgement from the done organization)</i>															
<input type="checkbox"/>	Paid mortgage interest and/or primary mortgage insurance <input type="checkbox"/> Mortgage Principal was NOT used towards purchase or improvement of home <input type="checkbox"/> Total mortgage/line of credit was originally greater than \$750,000															
\$	Amount of out-of-state purchases (by phone, internet, mail or in person) for which you did not pay at least your resident state sales tax															

Common Attachments

Applicable	Form	Applicable	Form
<input type="checkbox"/>	W-2 (Employee Wages)	<input type="checkbox"/>	1099-INT (Interest Income)
<input type="checkbox"/>	1099-DIV (Dividend Income)	<input type="checkbox"/>	1099-CONS (Investment Accts)
<input type="checkbox"/>	1099-B (Proceeds from sales)	<input type="checkbox"/>	SSA-1099 (Social Security Income)
<input type="checkbox"/>	1099-R (Pension, IRA Income)	<input type="checkbox"/>	1099-K (3 rd Party Network Transactions)
<input type="checkbox"/>	1099-MISC or NEC (Other Income)	<input type="checkbox"/>	1095-A (Health Insurance purchased through exchange)
<input type="checkbox"/>	K-1 (S-Corp, Partnership, estate/trust)	<input type="checkbox"/>	Copies of Checks for quarterly Estimates

Additional Notes/Comments

Question #	Notes/Comments/Etc.