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GRIFFING & COMPANY, P.C.  
CERTIFIED PUBLIC ACCOUNTANTS & CONSULTANTS  
ONE SUGAR CREEK CENTER BLVD., SUITE 650  
SUGAR LAND, TEXAS 77478

## **2023 TAX ORGANIZER**

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**This tax organizer has been prepared for your use in gathering the information needed for your 2023 tax return.**

**To save you time, selected information from your 2022 tax return has been entered in this organizer. Please line through any information that does not apply to your 2023 tax return.**

**In some cases, 2022 amounts have been included in a separate column. These amounts are for comparison purposes only. You do not need to change these prior year amounts.**

**If we may be of further assistance, please contact us at your convenience.**

**281-491-8866**

**REMOVE THIS SHEET PRIOR TO RETURNING THE COMPLETED ORGANIZER**



**GRIFFING & COMPANY, P.C.**  
Certified Public Accountants & Consultants

**Griffing & Company, P.C. Privacy Policy**

CPAs, like all providers of personal financial services, are now required by law to inform their clients of their policies regarding privacy of client information. CPAs have been and continue to be bound by professional standards of confidentiality that are even more stringent than those required by law. Therefore, we have always protected your right to privacy.

**Types of Nonpublic Personal Information We Collect**

We collect nonpublic personal information about you that is provided to us by you or obtained by us with your authorization.

**Parties to Whom We Disclose Information**

For current and former clients, we do not disclose any nonpublic personal information obtained in the course of our practice except as required or permitted by law. Permitted disclosures include, for instance, providing information to our employees, and in limited situations, to unrelated third parties who need to know that information to assist us in providing services to you. In all such situations, we stress the confidential nature of information being shared.

**Protecting the Confidentiality and Security of Current and Former Clients' Information**

We retain records relating to professional services that we provide so that we are better able to assist you with your professional needs and, in some cases, to comply with professional guidelines. In order to guard your nonpublic personal information, we maintain physical, electronic, and procedural safeguards that comply with our professional standards.

Griffing & Company, P.C. will dispose of its business records that contain personal information by modifying the personal information to make it unreadable or undecipherable. We may make personal information unreadable by shredding, erasing, or other means. We may also dispose of personal information by contracting with a person engaged in the business of disposing of records that contain confidential information.

Please call if you have any questions, because your privacy, our professional ethics, and the ability to provide you with quality financial services are very important to us.

Very truly yours,

*Griffing & Company, P.C.*

Griffing & Company, P.C.



Griffing & Company, P.C.  
One Sugar Creek Center Blvd., Suite 650  
Sugar Land, TX 77478  
(281) 491-8866 Fax (281) 491-8998

Dear \_\_\_\_\_:

This letter is to confirm our understanding of the terms and objectives of our tax services engagement and to clarify the nature and extent of the tax services to be provided.

We will prepare the federal and requested state income tax returns for calendar year 2023 solely for filing with the Internal Revenue Service. We will also prepare, at your request, any gift tax returns that may be necessary. Our work is not intended to benefit or influence any third party, either to obtain credit or for any other purpose. You represent that the information you are supplying to us is accurate and complete to the best of your knowledge and that you have disclosed to us all relevant facts affecting the returns. We will not verify the information you give us; however, we may ask for additional clarification of some information. In addition, we rely on the accuracy of third-party records such as the gain/loss on investment transactions. You should retain all the documents, canceled checks and other data that form the basis of income and deductions. These may be necessary to prove the accuracy and completeness of the returns to a taxing authority. You have the final responsibility for the income tax returns and, therefore, you should review them carefully before you sign them. You will be required to verify and sign a completed Form 8879, *IRS e-file Signature Authorization*, and any similar state and local equivalent authorization form before your returns can be filed electronically.

Our services are not intended to determine whether you have filing requirements in other taxing jurisdictions than the one(s) you have informed us of. You are responsible for determining your tax filing obligations with any state or local tax authorities, including, but not limited to income, franchise, sales, use, property or unclaimed property taxes. Our responsibilities do not include the preparation of any returns that may be due to other taxing authorities.

If the tax returns prepared in connection with this engagement are filed using the married filing jointly filing status, both spouses are deemed to be clients of the firm under the terms of this Agreement. Both individuals acknowledge that there is no expectation of privacy from the other concerning our services in connection with this Agreement. We are at liberty to share with either of you, without prior consent of the other, documents and other information concerning the preparation of your tax returns.

It may become necessary to apply for an extension of the filing deadline if there are unresolved issues or delays in processing, or if we do not receive all of the necessary information from you on a timely basis. All taxes owed are due by the original filing due date. Failure to timely request an extension of time to file can result in penalties for failure to file tax returns, which accrue from the original due date of the returns, and can be substantial.

Our work in connection with the preparation of your income tax return does not include any procedures designed to discover defalcations or other irregularities, should any exist. If we discover information that affects your prior-year tax returns, we will make you aware of the facts. However, we cannot be responsible for identifying all items that may affect prior-year returns. If you become aware of such information during the year, please contact us to discuss the best resolution of the issue.

In connection with this engagement, we may communicate with you or others via email transmission. As emails can be intercepted and read, disclosed, or otherwise used or communicated by an unintended third party, or may not be delivered to each of the parties to whom they are directed and only to such parties, we cannot guarantee or warrant that emails from us will be properly delivered and read only by the addressee. Therefore, we specifically disclaim and waive any liability or responsibility whatsoever for interception or unintentional disclosure of emails transmitted by us in connection with the performance of this engagement. In that regard, you agree that we shall have no liability for any loss or damage to any person or entity resulting from the use of email transmissions, including any consequential, incidental, direct, indirect, or special damages, such as loss of revenues or anticipated profits, or disclosure or communication of confidential or proprietary information.

Certain nonpublic information about you may be disclosed to provide information to affiliates of the firm and nonaffiliated third parties who perform services or functions for us in conjunction with our services to you. However, we will only make such a disclosure if we have a contractual agreement with the other party which prohibits them from disclosing or using the information other than for the purposes for which it was disclosed.

We will use professional judgment in resolving questions where the tax law is unclear, or when conflicts exist between taxing authorities' interpretations of the law and other supportable positions. Unless otherwise instructed by you, we will resolve such questions in your favor whenever possible. However, any tax position taken must satisfy professional standards.

It is important for you to know that the law imposes a penalty if a taxpayer makes a substantial understatement of tax liability. For individual taxpayers, a substantial understatement is when the understatement for the year exceeds greater of 10% of the tax required to be shown on the return or \$5,000. The penalty is 20% of the tax underpayment. It may be necessary to make certain disclosures in the return to avoid exposure to penalties.

We will discuss tax positions that may increase the risk of exposure to penalties and any recommended tax return disclosures with you before completing the preparation of the returns. You should also know that IRS audit procedures will almost always include questions on bartering transactions and on deductions that require strict documentation such as travel and entertainment expenses and expenses for business usage of autos, computers, and cell phones. In preparing your returns, we rely on your representations that we have been informed of all bartering transactions and that you understand and have complied with the documentation requirements for your expenses and deductions. If you have questions about these issues, please contact us.

Certain communications involving tax advice between you and our firm may be privileged and not subject to disclosure to the IRS. By disclosing the contents of those communications to anyone, or by turning over information about those communications to the government, you may be waiving this privilege. To protect this right to privileged communication, please consult with us or your attorney prior to disclosing any information about our tax advice.

Your returns may be selected for examination by the taxing authorities. Any proposed adjustments by the examining agent are subject to certain rights of appeal. If an examination occurs, we will represent you if you so desire; however, these additional services are not included in our fee for preparation of your returns and will be the subject of, and governed by a separate engagement letter.

Our fees for tax services will be based upon the applicable rates, plus out-of-pocket expenses, including computer processing charges. Hourly rates vary from \$90 to \$275 per hour depending on the individual providing the services. Our bills are due when you receive them. We may bill you on an interim basis prior to completion of this engagement and are not contingent upon the completion of this engagement if caused by circumstances beyond our control.

We reserve the right to discontinue work on your tax return if payment is not received within 30 days of invoicing, for conflicts of interest, for those who provide tax information late, for those who refuse to take our advice and act unethically. If we terminate the engagement for nonpayment, or any other reason in this engagement letter, our engagement will be considered to be completed upon written notice to you and you will be responsible for all of our time and costs through the termination date.



In the case that we receive any of your original tax documentation, we will return it to you at the completion of the engagement. The remaining engagement files, other than a copy of your tax return, is our property. We will provide copies at our discretion and will require compensation for any time and costs associated with the reproduction.

In addition, should you have any Foreign investments or income, that would require the preparation and filing of the following forms, you are responsible for disclosing this information to us.

**Form 114: Report of Foreign Bank and Financial Accounts (FBAR):** If you have a financial interest in or signature authority over a foreign financial account, including a bank account, brokerage account, mutual fund, trust, or other type of foreign financial account, exceeding certain thresholds, the Bank Secrecy Act may require you to report the account yearly to the Department of Treasury by electronically filing a Financial Crimes Enforcement Network (FinCEN) 114, *Report of Foreign Bank and Financial Accounts* (FBAR).

**Form 8938: Statement of Specified Foreign Financial Assets**

Filing Requirements: U.S citizens, U.S. residents, and certain non-resident aliens that have an interest in specified foreign financial assets; and you meet the threshold reporting requirements to file a tax return.

Our liability for damages with respect to the services provided shall in no event exceed the charges paid to us for these services.

Any disputes arising as the result of this matter, engagement, or relationship shall be submitted to binding arbitration under the rules of the American Arbitration Association. Any litigation resulting from this engagement must be filed within one year of the completion of the engagement, except for our actions to collect payment for unpaid invoices.

If we are required to respond to a subpoena, court order, or other legal process to produce documents for this engagement, you agree to compensate us at our hourly rates, as referred to above, for any time expended and all costs in connection with our response.

If we are obligated to pay any cost, settlement, judgment, fine or penalty as a result of a claim by a third party, and if such claim is directly or indirectly related to inaccurate, incomplete or misleading information provided by you for this engagement, you agree to indemnify us and hold us harmless against such obligation.

In the event that it should become necessary to retain an attorney to collect any fee under this agreement, you agree to pay any attorney's fees and costs regardless of whether suit is filed. Payment of your account balance according to stated terms is a condition precedent to the performance of additional work on your account. Continued work on our part under any circumstances is not a waiver of this condition.

We appreciate this opportunity to serve you. If you have any questions or need any additional information, please do not hesitate to call.

Very truly yours,

*Griffing & Company, P.C.*

GRIFFING & COMPANY, P.C.

The foregoing is in accordance with my understanding of your engagement to provide tax services. The terms described in this letter are acceptable and are hereby agreed to.

AGREED TO AND ACCEPTED:

By: \_\_\_\_\_

**SIGN HERE**

Date: \_\_\_\_\_



Griffing & Company, P.C.  
One Sugar Creek Center Blvd., Suite 650  
Sugar Land, TX 77478  
(281) 491-8866 Fax (281) 491-8998

Dear \_\_\_\_\_:

Thank you again for being a loyal tax client of Griffing & Company, P.C.

To provide you with the best service and value possible, Griffing & Company, P.C. continuously evaluates opportunities to streamline the preparation of your individual tax returns. One such opportunity involves our use of data entry services that enable us to complete your tax returns more efficiently.

The work performed by data entry services is limited to electronically organizing your source documents and putting the data into our tax software. Once these tasks are completed, our in-house staff follows our internal procedures by completing the preparation, which includes the meticulous review of your tax returns for accuracy.

Using data entry services enables us to focus on the complex areas of your tax return preparation, provide timely service to you, and overall allows us to better serve you.

Based on regulations issued by the Internal Revenue Service, we must obtain your express written permission to use a data entry service provider where the services may be provided offshore. By signing the consent form, you are allowing us to use this service to assist in the data entry portion of your tax returns.

If you elect to allow us to use services provided offshore for the sole purpose of preparing your tax returns, we will disclose the information you provide to us. Electing to leverage these services is a choice- we look forward to serving you by preparing your taxes in either situation.

We will be using Wolters Kluwer (India) Pvt. Ltd., a third-party data entry service provider. Wolters Kluwer (India) Pvt. Ltd. is a U.S. owned service bureau with offshore employees. It is a recognized leader in the field of tax preparation. We have entered into a non-disclosure agreement with Wolters Kluwer (India) Pvt. Ltd. Which legally establishes its obligation to maintain the privacy of your information.

We will not disclose any of your information to any party for a use other than the preparation of your tax returns. If you have any questions regarding this form, please don't hesitate to contact us.

Very truly yours,

*Griffing & Company, P.C.*

Griffing & Company, P.C.

## **Consent to Disclosure of Tax Return Information**

Federal law requires this consent form be provided to you. Unless authorized by law, we cannot disclose your tax return information to third parties for purposes other than those related to the preparation and filing of your tax return without your consent. If you consent to the disclosure of your tax return information, Federal law may not protect your tax return information from further use or distribution.

You are not required to complete this form. Because our ability to disclose your tax return information to another tax return preparer affects the tax return preparation service(s) that we provide to you and its (their) cost, we may decline to provide you with tax return preparation services or change the terms (including the cost) of the tax return preparation services that we provide to you if you do not sign this form. If you agree to the disclosure of your tax return information, your consent is valid for the amount of time that you specify. If you do not specify the duration of your consent, your consent is valid for one year from the date of signature.



The consent to disclose may result in your tax return information being disclosed to a tax return preparer located outside the United States, including your personally identifiable information such as your Social Security Number ("SSN"). Both the tax return preparer in the United States that will disclose your SSN and the tax return preparer located outside the United States which will receive your SSN maintain an adequate data protection safeguard (as required by the regulations under 26 U.S.C. Section 7216) to protect privacy and prevent unauthorized access to tax return information. If you consent to the disclosure of your tax return information, federal agencies may not be able to enforce United States laws that protect the privacy of your tax return information against a tax return preparer located outside the U.S. to which the information is disclosed.

If you agree to allow our firm to disclose your tax return information, including your SSN to Wolters Kluwer (India) Private Limited (an Indian entity) for purposes of providing assistance in the preparation of your individual income tax return, please check the box below, provide the information requested below, and sign and date your consent to the disclosure of your tax return information. Wolters Kluwer (India) Private Limited is an affiliate of CCH Incorporated (a U.S. entity).

I/We \_\_\_\_\_ authorize Griffing & Company, P.C. to disclose to Wolters Kluwer (India) Private Limited my tax return information including my SSN to allow Wolters Kluwer (India) Private Limited to assist in the preparation of my individual income tax return.

If married, both spouses must sign the consent.

Name \_\_\_\_\_ Name \_\_\_\_\_

Signature  \_\_\_\_\_ Signature  \_\_\_\_\_

Date \_\_\_\_\_ Date \_\_\_\_\_

Consent Valid thru: December 31, 2034

If you believe your tax return information has been disclosed or used improperly in a manner unauthorized by law or without your permission, you may contact the Treasury Inspector General for Tax Administration (TIGTA) by telephone at 1-800-366-4484, or by email at [complaints@tigta.treas.gov](mailto:complaints@tigta.treas.gov).



2023

## Questions (Page 1 of 5)

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The following questions pertain to the 2023 tax year. For any question answered Yes, include supporting detail or documents.

### Personal Information:

	Yes	No
Did your marital status change? .....	<input type="checkbox"/>	<input type="checkbox"/>
Are you married? .....	<input type="checkbox"/>	<input type="checkbox"/>
If Yes, do you and your spouse want to file separate returns? .....	<input type="checkbox"/>	<input type="checkbox"/>
If No, are you in a domestic partnership, civil union, or other state-defined relationship? .....	<input type="checkbox"/>	<input type="checkbox"/>
Can you or your spouse be claimed as a dependent by another taxpayer? .....	<input type="checkbox"/>	<input type="checkbox"/>
Did you or your spouse serve in the military or were you or your spouse on active duty? .....	<input type="checkbox"/>	<input type="checkbox"/>

### Dependents:

Were there any changes in dependents from the prior year? .....	<input type="checkbox"/>	<input type="checkbox"/>
Note: Include non-child dependents for whom you provided more than half the support.		
Did you or your spouse pay for child care while you or your spouse worked or looked for work? .....	<input type="checkbox"/>	<input type="checkbox"/>
Do you have any children under age 18 with unearned income more than \$1,250? .....	<input type="checkbox"/>	<input type="checkbox"/>
Do you have any children age 18 or student children, aged 19 to 23, who did not provide more than half of their cost of support with earned income and that have unearned income of more than \$1,250? .....	<input type="checkbox"/>	<input type="checkbox"/>
Did you adopt a child or begin adoption proceedings? .....	<input type="checkbox"/>	<input type="checkbox"/>
Are any of your dependents non-U.S. citizens or non-U.S. residents? .....	<input type="checkbox"/>	<input type="checkbox"/>

### Healthcare:

Did you obtain healthcare coverage through the Marketplace? .....	<input type="checkbox"/>	<input type="checkbox"/>
If Yes, include all Forms 1095-A.		
If you received advance premium tax credit, are married, and are filing separately from your spouse, are you a victim of domestic abuse or spousal abandonment? .....	<input type="checkbox"/>	<input type="checkbox"/>
Did you, your spouse, or a dependent have healthcare purchased through the Marketplace and for whom you did not receive Form 1095-A? .....	<input type="checkbox"/>	<input type="checkbox"/>
Did you receive Form 1095-A for someone claimed as a dependent on another taxpayer's return or who is filing their own return and is not claimed as a dependent on another taxpayer's return? .....	<input type="checkbox"/>	<input type="checkbox"/>
Are any of your dependents required to file a tax return? .....	<input type="checkbox"/>	<input type="checkbox"/>



Healthcare (continued):

Was anyone covered on your health insurance policy also covered on another health insurance policy for any part of the year?	<input type="checkbox"/>	<input type="checkbox"/>
Were you eligible for employer-sponsored healthcare coverage?	<input type="checkbox"/>	<input type="checkbox"/>
Did you or your spouse have any transactions pertaining to a health savings account (HSA)? If you received a distribution from an HSA, include all Forms 1099-SA.	<input type="checkbox"/>	<input type="checkbox"/>
Did you or your spouse have any transactions pertaining to a medical savings account (MSA)? If you received a distribution from an MSA, include all Forms 1099-SA.	<input type="checkbox"/>	<input type="checkbox"/>
Did you or your spouse receive any distributions from long-term care insurance contracts? If Yes, include all Forms 1099-LTC.	<input type="checkbox"/>	<input type="checkbox"/>
If you or your spouse are self-employed, are you or your spouse eligible to be covered under an employer's health plan at another job? If Yes, how many months were you covered?	<input type="checkbox"/>	<input type="checkbox"/>
If you or your spouse are self-employed, are you or your spouse eligible to be covered under an employer's long-term care plan at another job? If Yes, how many months were you covered?	<input type="checkbox"/>	<input type="checkbox"/>

Education:

Did you, your spouse, or your dependents incur any post-secondary education expenses, such as tuition?	<input type="checkbox"/>	<input type="checkbox"/>
Did you or your spouse pay any student loan interest?	<input type="checkbox"/>	<input type="checkbox"/>
Did you or your spouse withdraw any amounts from your IRA to pay for higher education expenses incurred by you, your spouse, your children or grandchildren?	<input type="checkbox"/>	<input type="checkbox"/>
Did you or your spouse withdraw any amounts from a Coverdell Education Savings Account or Qualified Education Program (Section 529 plan)? If Yes, include all Forms 1099-Q.	<input type="checkbox"/>	<input type="checkbox"/>
If Yes, were the amounts withdrawn used for qualified tuition expenses?	<input type="checkbox"/>	<input type="checkbox"/>

Deductions and Credits:

Did you or your spouse contribute property (other than cash) with a fair market value of more than \$5,000 to a charitable organization? If Yes, provide the appraisal of property contributed. An appraisal is not required for contributions of publicly traded securities or contributions of non-publicly traded stock of \$10,000 or less.	<input type="checkbox"/>	<input type="checkbox"/>
Did you or your spouse incur any casualty or theft losses?	<input type="checkbox"/>	<input type="checkbox"/>
Did you or your spouse make any large purchases, such as motor vehicles and boats?	<input type="checkbox"/>	<input type="checkbox"/>
Did you or your spouse incur any casualty or loss attributable to a federally declared disaster?	<input type="checkbox"/>	<input type="checkbox"/>
Did you or your spouse purchase a new alternative technology vehicle, including a qualified plug-in electric drive motor vehicle?	<input type="checkbox"/>	<input type="checkbox"/>
Did you or your spouse use gasoline or special fuels for business or farm purposes (other than for a highway vehicle)? If Yes, provide the number of gallons of gasoline or special fuels used for off-highway business purposes. _____ Gallons _____ Type	<input type="checkbox"/>	<input type="checkbox"/>
Did you or your spouse install any alternative energy equipment in your residence such as solar water heaters, solar electricity equipment (photovoltaic) or fuel cells?	<input type="checkbox"/>	<input type="checkbox"/>
Did you or your spouse install any energy efficiency improvements or energy property in your residence such as exterior doors or windows, insulation, heat pumps, furnaces, central air conditioners, or water heaters?	<input type="checkbox"/>	<input type="checkbox"/>





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## Questions (Page 3 of 5)

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### Investments:

	Yes	No
Did you or your spouse have any debts canceled, forgiven or refinanced? . . . . .	<input type="checkbox"/>	<input type="checkbox"/>
Did you or your spouse start or purchase a business, rental property, or farm, or acquire any new interest in any partnership or S corporation? . . . . .	<input type="checkbox"/>	<input type="checkbox"/>
Did you or your spouse sell an existing business, rental property, farm, or any existing interest in a partnership or S corporation? . . . . .	<input type="checkbox"/>	<input type="checkbox"/>
Did you or your spouse sell, exchange, or purchase any real estate? . . . . .	<input type="checkbox"/>	<input type="checkbox"/>
If Yes, include closing statements.		
Did you or your spouse receive grants of stock options from your employer, exercise any stock options granted to you or your spouse or dispose of any stock acquired under a qualified employee stock purchase plan? . . . . .	<input type="checkbox"/>	<input type="checkbox"/>
Did you or your spouse engage in any put or call transactions? . . . . .	<input type="checkbox"/>	<input type="checkbox"/>
If Yes, provide the transaction details.		
Did you or your spouse close any open short sales? . . . . .	<input type="checkbox"/>	<input type="checkbox"/>
Did you or your spouse sell any securities not reported on Form 1099-B? . . . . .	<input type="checkbox"/>	<input type="checkbox"/>

### Retirement or Severance:

Did you or your spouse contribute to a Roth IRA or convert an existing IRA into a Roth IRA? . . . . .	<input type="checkbox"/>	<input type="checkbox"/>
Did you or your spouse roll into a Roth IRA any distributions from a retirement plan, an annuity plan, tax shelter annuity or deferred compensation plan? . . . . .	<input type="checkbox"/>	<input type="checkbox"/>
Did you or your spouse turn age 73 and have money in an IRA or other retirement account without taking any distribution? . . . . .	<input type="checkbox"/>	<input type="checkbox"/>
Did you or your spouse make a qualified charitable distribution directly from an IRA? . . . . .	<input type="checkbox"/>	<input type="checkbox"/>
Did you or your spouse retire or change jobs? . . . . .	<input type="checkbox"/>	<input type="checkbox"/>
Did you or your spouse receive deferred, retirement or severance compensation? . . . . .	<input type="checkbox"/>	<input type="checkbox"/>
If Yes, enter the date received (Mo/Da/Yr). _____		

### Personal Residence:

Did your address change? . . . . .	<input type="checkbox"/>	<input type="checkbox"/>
If Yes, provide the new address.		
If Yes, did you move to a different home because of a change in the location of your job? . . . . .	<input type="checkbox"/>	<input type="checkbox"/>
Did you or your spouse claim a homebuyer credit for a home purchased in 2008? . . . . .	<input type="checkbox"/>	<input type="checkbox"/>
Did you or your spouse withdraw any amounts from your Individual Retirement Account (IRA) or Roth IRA to acquire a principal residence? . . . . .	<input type="checkbox"/>	<input type="checkbox"/>
Are your total mortgages on your first and/or second residence greater than \$750,000? . . . . .	<input type="checkbox"/>	<input type="checkbox"/>
If Yes, provide the principal balance and interest rate at the beginning and end of the year. _____		
Did you or your spouse take out a home equity loan? . . . . .	<input type="checkbox"/>	<input type="checkbox"/>
Did you or your spouse have an outstanding home equity loan at the end of the year? . . . . .	<input type="checkbox"/>	<input type="checkbox"/>
If Yes, provide the principal balance and interest rate at the beginning and end of the year. _____		
Are you claiming a deduction for mortgage interest paid to a financial institution and someone else received the Form 1098? . . . . .	<input type="checkbox"/>	<input type="checkbox"/>
Did you or your mortgagee receive mortgage assistance payments? . . . . .	<input type="checkbox"/>	<input type="checkbox"/>
If Yes, include all Forms 1098-MA.		



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## Questions (Page 4 of 5)

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### Sale of Your Home:

	Yes	No
Did you sell your home? . . . . .	<input type="checkbox"/>	<input type="checkbox"/>
Did you receive Form 1099-S? . . . . .	<input type="checkbox"/>	<input type="checkbox"/>
If Yes, include Form 1099-S.		
Did you or your spouse own and occupy the home as your principal residence for at least two years of the five-year period prior to the sale? . . . . .	<input type="checkbox"/>	<input type="checkbox"/>
Did you or your spouse ever rent out the property? . . . . .	<input type="checkbox"/>	<input type="checkbox"/>
Did you or your spouse ever use any portion of the home for business purposes? . . . . .	<input type="checkbox"/>	<input type="checkbox"/>
Have you or your spouse sold a principal residence within the last two years? . . . . .	<input type="checkbox"/>	<input type="checkbox"/>
At the time of the sale, the residence was owned by the: <input type="checkbox"/> Taxpayer <input type="checkbox"/> Spouse <input type="checkbox"/> Both		

### Gifts:

Did you or your spouse make any gifts, including birthday, holiday, anniversary, graduation, education savings, etc., with a total (aggregate) value in excess of \$17,000 to any individual? . . . . .	<input type="checkbox"/>	<input type="checkbox"/>
Did you or your spouse make any gifts of difficult-to-value assets (such as non-publicly traded stock) to any person regardless of value? . . . . .	<input type="checkbox"/>	<input type="checkbox"/>
Did you or your spouse make any gifts to a trust for any amount? . . . . .	<input type="checkbox"/>	<input type="checkbox"/>
Do you or your spouse have a life insurance trust? . . . . .	<input type="checkbox"/>	<input type="checkbox"/>
Did you or your spouse assist with the purchase of any asset (auto, home) for any individual? . . . . .	<input type="checkbox"/>	<input type="checkbox"/>
Did you or your spouse forgive any indebtedness to any individual, trust or entity? . . . . .	<input type="checkbox"/>	<input type="checkbox"/>

### Foreign Matters:

Did you or your spouse perform any work outside of the U.S. or pay any foreign taxes? . . . . .	<input type="checkbox"/>	<input type="checkbox"/>
Were you or your spouse a grantor or transferor for a foreign trust, have any interest in or a signature authority over a bank account, securities account or other financial account in a foreign country? . . . . .	<input type="checkbox"/>	<input type="checkbox"/>
Did you or your spouse create or transfer money or property to a foreign trust? . . . . .	<input type="checkbox"/>	<input type="checkbox"/>
Did you or your spouse own any foreign financial assets? . . . . .	<input type="checkbox"/>	<input type="checkbox"/>
Were you or your spouse subject to the transition tax on undistributed foreign income and elect to pay the tax in installments? . . . . .	<input type="checkbox"/>	<input type="checkbox"/>
Did you or your spouse have an interest in an S corporation that had undistributed foreign income subject to the transition tax? . . . . .	<input type="checkbox"/>	<input type="checkbox"/>
If Yes, did the corporation cease to be an S corporation? . . . . .	<input type="checkbox"/>	<input type="checkbox"/>
If Yes, was there a sale or liquidation of substantially all of the corporation's assets or did the corporation cease business? . . . . .	<input type="checkbox"/>	<input type="checkbox"/>
If Yes, did you or your spouse transfer any share of stock in the corporation? . . . . .	<input type="checkbox"/>	<input type="checkbox"/>



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Miscellaneous:

Did you or your spouse pay in excess of \$1,000 in any quarter, or \$2,600 during the year for domestic services performed in or around your home to individuals who could be considered household employees? . . . . .	<div>Yes</div>	<div>No</div>
Did you or your spouse receive unreported tip income of \$20 or more in any month? . . . . .	<div></div>	<div></div>
Have you or your spouse received a punitive damage award or an award for damages other than for physical injuries or illness? . . . . .	<div></div>	<div></div>
Did you or your spouse engage in any bartering transactions? . . . . .	<div></div>	<div></div>
Were you or your spouse notified by the IRS or other taxing authority of any changes in prior year returns? . . . . .	<div></div>	<div></div>
For any trust that you or your spouse created or are trustee, did any beneficiaries, grantors, or trustees die or move? . . . . .	<div></div>	<div></div>
In 2023, did you or your spouse: (a) receive (as a reward, award, or compensation); (b) sell, exchange, gift or otherwise dispose of a digital asset (or a financial interest in a digital asset)? . . . . .	<div></div>	<div></div>
In 2023, did you or your spouse receive Payroll Protection Program loan forgiveness or are you or your spouse seeking forgiveness? . . . . .	<div></div>	<div></div>
If No, enter the date loan forgiveness was denied or that you or your spouse decided not to seek forgiveness. Date (Mo/Da/Yr) _____		
If No, enter the amount of the loan for which forgiveness was denied or the amount of the loan for which you or your spouse decided not to seek forgiveness. Amount _____		
Do you own an interest in an LLC or similar entity that has a reporting obligation under the Corporate Transparency Act? . . . . .	<div></div>	<div></div>

Additional state pages have been included at the back of the organizer and should be reviewed.



# Personal Information

## Taxpayer:

First Name and Initial		Last Name		Social Security Number	
Occupation		Date of Birth (Mo/Da/Yr)	Date of Death (Mo/Da/Yr)		
Driver's License or State-Issued ID Number		Expiration Date (Mo/Da/Yr)	Issue Date (Mo/Da/Yr)	State	<input type="checkbox"/> Does not expire
<input type="checkbox"/> Driver's License	<input type="checkbox"/> State-Issued ID	<input type="checkbox"/> No Identification			

## Spouse:

First Name and Initial		Last Name		Social Security Number	
Occupation		Date of Birth (Mo/Da/Yr)	Date of Death (Mo/Da/Yr)		
Driver's License or State-Issued ID Number		Expiration Date (Mo/Da/Yr)	Issue Date (Mo/Da/Yr)	State	<input type="checkbox"/> Does not expire
<input type="checkbox"/> Driver's License	<input type="checkbox"/> State-Issued ID	<input type="checkbox"/> No Identification			

## Contact Information:

Street Address		Apartment Number	
City	State	ZIP or Postal Code	
Foreign Province or County			
Foreign Country			
Taxpayer Daytime/Work Phone	Taxpayer Evening/Home Phone	Taxpayer Foreign Phone	
Taxpayer Cell Phone	Taxpayer Fax Number		
Spouse Daytime/Work Phone	Spouse Evening/Home Phone	Spouse Foreign Phone	
Spouse Cell Phone	Spouse Fax Number		
Taxpayer Email Address			
Spouse Email Address			
Preferred Method of Contact			

May the IRS or other taxing authority discuss the return with the preparer? .....

Is the taxpayer claimed as a dependent on someone else's tax return? .....

Yes	No
<input type="checkbox"/>	<input type="checkbox"/>

Are you considered legally blind per IRS regulations? .....

Do you want to contribute to the Presidential Election Campaign Fund? .....

Are you a U.S. citizen or Green Card holder? .....

Taxpayer		Spouse	
Yes	No	Yes	No
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Personal Identification Numbers: Code - 1 - Issued by IRS 2 - Issued by State or City

The IRS has recommended that taxpayers have an Identity Protection (IP) PIN to increase filing security. If you would like an IP PIN for yourself, your spouse, or your dependents or have one but do not know the IP PIN assigned, visit [IRS.gov](https://www.irs.gov) to retrieve it or apply.

TS	State	City	Code	PIN
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

## Tax Organizer Legend:

Throughout the tax organizer, you will find columns with the heading "TSJ". Enter "T" for taxpayer, "S" for spouse or "J" for joint.

Worksheets: Basic Data > General and Return Options > Processing Options



Dependents and Wages

3A

Dependent Information:

	First Name and Initial	Last Name	Social Security Number	Date of Birth (Mo/Da/Yr)	Date of Death (Mo/Da/Yr)	Relationship to Taxpayer
A						
B						
C						
D						
E						
F						
G						
H						

Did dependent have income over \$4,700?

↓

	Months Lived in Your Home	X if Disabled	Yes or No	Identity Protection PIN
A				
B				
C				
D				
E				
F				
G				
H				

Provide the name of any dependent who is not a U.S. citizen or Green Card holder.

Provide the name of any person living with you who is claimed as a dependent on someone else's tax return.

List the years that a release of claim to exemption is given for a dependent child not living with you.

Wages and Salaries: Include all copies of your current year Forms W-2

Note: Use this section to report any wages and/or salaries for which no Form W-2 was received.

TS	Employer's Name	Taxable Wages	Tax Withheld				
			Federal	FICA/TIER 1	Medicare	State	Local



## Direct Deposit and Withdrawal

4A

### Direct Deposit and Electronic Funds Withdrawal Account Information:

The IRS and certain states allow refunds to be deposited to and balances due to be paid directly from your financial institution. If you would like to receive your refund or pay a balance due electronically, complete the following information. Additional space has been provided for the use of multiple accounts. If you selected direct deposit or electronic withdrawal in 2022, your account information is already included below.

	Yes	No
Would you like any refunds owed to you directly deposited? .....	<input type="checkbox"/>	<input type="checkbox"/>
Would you like to pay any amount due on your <u>federal</u> return using electronic withdrawal? .....	<input type="checkbox"/>	<input type="checkbox"/>
If Yes, what amount would you like withdrawn, if not the entire balance due? .....		
If Yes, when should the withdrawal occur, if other than the due date of the return? ..... (Mo/Da/Yr)		
Would you like to pay any amount due on your <u>state</u> return(s) using electronic withdrawal? .....	<input type="checkbox"/>	<input type="checkbox"/>
If Yes, what amount would you like withdrawn, if not the entire balance due? .....		
If Yes, when should the withdrawal occur, if other than the due date of the return? ..... (Mo/Da/Yr)		
The IRS and some states allow estimated payments to be electronically withdrawn on the due dates of the estimated payments.		
Would you like to pay any estimated payments due for your <u>federal</u> return using electronic withdrawal? .....	<input type="checkbox"/>	<input type="checkbox"/>
Would you like to pay any estimated payments due for your <u>state</u> return(s) using electronically withdrawal, if available? .....	<input type="checkbox"/>	<input type="checkbox"/>

Name of bank or financial institution .....

Routing Transit Number (RTN) .....

Account number .....

Type of account: ☐ Checking ☐ Traditional Savings ☐ IRA Savings  
☐ Archer MSA Savings ☐ Coverdell Ed. Savings ☐ HSA Savings

Is this a business account? ☐ Yes ☐ No

Account owner ☐ Taxpayer ☐ Spouse ☐ Joint

I confirm that the bank account information and the direct deposit/electronic withdrawal options selected above are correct. ☐

---

	Yes	No
Would you like any refunds owed to you directly deposited? .....	<input type="checkbox"/>	<input type="checkbox"/>
Would you like to pay any amount due on your <u>federal</u> return using electronic withdrawal? .....	<input type="checkbox"/>	<input type="checkbox"/>
If Yes, what amount would you like withdrawn, if not the entire balance due? .....		
If Yes, when should the withdrawal occur, if other than the due date of the return? ..... (Mo/Da/Yr)		
Would you like to pay any amount due on your <u>state</u> return(s) using electronic withdrawal? .....	<input type="checkbox"/>	<input type="checkbox"/>
If Yes, what amount would you like withdrawn, if not the entire balance due? .....		
If Yes, when should the withdrawal occur, if other than the due date of the return? ..... (Mo/Da/Yr)		
The IRS and some states allow estimated payments to be electronically withdrawn on the due dates of the estimated payments.		
Would you like to pay any estimated payments due for your <u>federal</u> return using electronic withdrawal? .....	<input type="checkbox"/>	<input type="checkbox"/>
Would you like to pay any estimated payments due for your <u>state</u> return(s) using electronically withdrawal, if available? .....	<input type="checkbox"/>	<input type="checkbox"/>

Name of bank or financial institution .....

Routing Transit Number (RTN) .....

Account number .....

Type of account: ☐ Checking ☐ Traditional Savings ☐ IRA Savings  
☐ Archer MSA Savings ☐ Coverdell Ed. Savings ☐ HSA Savings

Is this a business account? ☐ Yes ☐ No

Account owner ☐ Taxpayer ☐ Spouse ☐ Joint

I confirm that the bank account information and the direct deposit/electronic withdrawal options selected above are correct. ☐



## 5A

**Include copies of all Forms 1099-INT or other documents for interest received**



**Total**

Name of Individual from Whom Mortgage Interest Was Received	Identification Number of Individual	2023 Interest Amount	2022 Interest Amount

Address of Individual from Whom Mortgage Interest Was Received
--


**Worksheet: Interest  
Form IRS-1099INT**



2023

**Dividend Income**

**5B**

**Dividend Information:**

Include copies of all Forms 1099-DIV or other documents for dividends received

TSJ	Name of Payer	Box 1a Total Ordinary Dividends	Box 1b Qualified Dividends	Box 2a Total Capital Gain Distribution	U.S. Bond Interest Amount or Percent in Box 1a
A					
B					
C					
D					
E					
F					
G					
H					
I					
J					
K					
L					
M					
N					
Total					

Tax-Exempt Interest Code: 1 - 1099-DIV 2 - Private Activity Bonds 3 - Both

Code	Tax-Exempt Interest	2022 Gross Dividends Amount
A		
B		
C		
D		
E		
F		
G		
H		
I		
J		
K		
L		
M		
N		
Total		

**Enter Any Additional Information:**


**Note: List all items sold during the year on Form 7.**





## Business Income and Cost of Goods Sold

6

Name of Business: \_\_\_\_\_

Principal Business or Profession: \_\_\_\_\_

TSJ \_\_\_\_\_  
Employer ID number \_\_\_\_\_  
Street address \_\_\_\_\_  
City, state, ZIP or postal code, and country \_\_\_\_\_  
Method of inventory \_\_\_\_\_  
Method of accounting \_\_\_\_\_

### Business Questions for 2023:

	Yes	No
Did you dispose of this business? _____	<input type="checkbox"/>	<input type="checkbox"/>
If Yes, what was the disposition date? _____ (Mo/Da/Yr) _____	<input type="checkbox"/>	<input type="checkbox"/>
Was there a change in determining quantities, costs or valuations between opening and closing inventory? _____	<input type="checkbox"/>	<input type="checkbox"/>
Were you involved in the operations of this business on a regular, continuous and substantial basis? _____	<input type="checkbox"/>	<input type="checkbox"/>
Have you prepared or will you prepare all required Forms 1099? _____	<input type="checkbox"/>	<input type="checkbox"/>

	2023 Amount	2022 Amount
Health insurance premiums paid for yourself and your dependents _____		

### Income:

Include all Forms 1099-K

Payment card and third party transactions:

Description	2023 Amount	2022 Amount

Miscellaneous income: Include all Forms 1099-MISC and 1099-NEC


Other Income:


Other gross receipts or sales \_\_\_\_\_  
Less returns and allowances \_\_\_\_\_

### Cost of Goods Sold:

	2023 Amount	2022 Amount
Beginning inventory _____		
Purchases less cost of items withdrawn for personal use _____		
Cost of labor (do not include amounts paid to yourself) _____		
Materials and supplies _____		

Other costs of goods sold:

Description	2023 Amount	2022 Amount

Ending inventory \_\_\_\_\_



Business Expenses and Property & Equipment

Name of Business: \_\_\_\_\_

Principal Business or Profession: \_\_\_\_\_

Expenses:

	2023 Amount	2022 Amount
Advertising		
Car and truck expenses		
Parking fees and tolls		
Commissions and fees		
Contract labor		
Employee benefit programs and health insurance (other than pension and profit-sharing plans)		
Insurance (other than health)		
Interest - mortgage (paid to banks, etc.)		
Interest - other		
Legal and professional fees		
Office expense		
Pension and profit-sharing plans		
Rent or lease - vehicles, machinery and equipment		
Rent or lease - other business property		
Repairs and maintenance		
Supplies (not included in Cost of Goods Sold)		
Taxes and licenses		
Travel		
Meals		
Entertainment (deductible only on some state returns)		
Utilities		
Wages		
Dependent care benefits		

Other Expenses:

Description	2023 Amount	2022 Amount

Property and Equipment: Include a list if more space is needed

X if not new	Acquisitions - Description	Date Acquired (Mo/Da/Yr)	Cost

Dispositions - Description	Date Acquired (Mo/Da/Yr)	Cost	Date Sold (Mo/Da/Yr)	Selling Price



2023

**Sales of Stocks, Securities,  
Capital Assets & Installment Sales**

**Gains or Losses from Sales of Stocks, Securities and Other Capital Assets:**

**Include all Forms 1099-A, 1099-B, 1099-S and copies of mutual fund statements for the year**

Did you have any of the following during the year?

	Yes	No
Mutual fund transactions		
Exchange of any securities or investments for something other than cash		
Sales of inherited property		
Sales of any stock or stock options at a loss and purchases of the same or substantially similar stock or options 30 days before or 30 days after the sale		
Commodity sales, short sales or straddles		
Reinvestment of the proceeds of gains in a qualified opportunity fund		
Sale of any investments in qualified opportunity funds		
Debts that became uncollectible		
Securities that became worthless		
Sale of any property where you will receive payments in future years		

TSJ	Kind of Property and Description	Quantity	Date Acquired (Mo/Da/Yr)	Date Sold (Mo/Da/Yr)
A				
B				
C				
D				
E				
F				
G				
H				

	Gross Sales Price (Less Commissions)	Cost or Other Basis	Federal Tax Withheld	State Tax Withheld
A				
B				
C				
D				
E				
F				
G				
H				

**Installment Sales:** **Do not include interest received in principal amount**

TSJ	Property Description	Date Sold (Mo/Da/Yr)	2023 Principal Received	2022 Principal Received





**Sale or Exchange of Your Home:**

Include the closing statements from the purchase and sale of your former and new homes

**Former Home Information:**

TSJ \_\_\_\_\_

Date acquired \_\_\_\_\_ (Mo/Da/Yr) \_\_\_\_\_

Date sold \_\_\_\_\_ (Mo/Da/Yr) \_\_\_\_\_

Selling price \_\_\_\_\_

**Original Cost and Cost of Improvements:**

Description	Amount

**Sale Expenses:**

Commissions, legal fees, advertising and other expenses.

Description	Amount

Did you personally own and occupy the home for at least 2 of the 5 years preceding the sale? ☐ Yes ☐ No

If your spouse is deceased, did the sale occur within two years of the date of death and did your spouse live in the home for at least 2 of the 5 years preceding the sale? ☐ Yes ☐ No

If you had a foreign mortgage on the above property, please provide the amount of the mortgage retired on the sale and the date the mortgage was acquired or the date the mortgage was most recently renegotiated \_\_\_\_\_

**Moving Expenses:**

TSJ \_\_\_\_\_

Were the moving expenses reimbursed by your employer? ☐ Yes ☐ No

Enter reimbursements not included in wages on your Form W-2 \_\_\_\_\_

Was the move due to a permanent change of station pursuant to a military order? ☐ Yes ☐ No

**Mileage:**

Number of miles from old home to new workplace (applicable only on some state returns) \_\_\_\_\_

Number of miles from old home to old workplace (applicable only on some state returns) \_\_\_\_\_

Number of automobile miles \_\_\_\_\_

**Transportation Expenses:**

Costs of transportation of household goods and personal effects \_\_\_\_\_

Costs of travel and lodging (do not include meals or automobile expenses) \_\_\_\_\_

Automobile expenses (gasoline, oil, etc.) \_\_\_\_\_

Meals (Pennsylvania only) \_\_\_\_\_



## 9

TS .....

Yes	No

[illegible]



2023

Pension, Annuity and Retirement Plan Information

9A

Pensions and Annuities: Include all Forms 1099-R and any nontaxable distribution details

TSJ	Name of Payer	2023 Gross Distributions	Taxable Amount	Federal Tax Withheld	State Tax Withheld	Is this a Rollover?	2022 Gross Distributions

Self-Employed Retirement Plan: Include copies of all Forms 1099-R

Have you established a self-employed retirement or SIMPLE plan with deductible contributions? . . . . .

Do you want to contribute the maximum amount allowed? . . . . .

Taxpayer		Spouse	
Yes	No	Yes	No
2023 Amount		2023 Amount	

Contributions to:

Simplified employee pension plan . . . . .

Defined benefit plan . . . . .

Defined contribution plan . . . . .

SIMPLE plan . . . . .



Rental and Royalty Income

Location of Property: \_\_\_\_\_  
TSJ \_\_\_\_\_  
Type of property \_\_\_\_\_

Have you prepared or will you prepare all required Forms 1099? 

Yes	No
<input type="checkbox"/>	<input type="checkbox"/>

Ownership percentage if not 100% \_\_\_\_\_ %  
How many days was this property rented at fair market value? \_\_\_\_\_  
How many days was this property used personally (including use by family members)? \_\_\_\_\_

2023	2022

Income:

Rents received \_\_\_\_\_  
Royalties received \_\_\_\_\_

2023 Amount	2022 Amount

Payment card and third party transactions: Include all Forms 1099-K

Description	2023 Amount	2022 Amount

Miscellaneous income: Include all Forms 1099-MISC

Description	2023 Amount	2022 Amount

Other income:

Description	2023 Amount	2022 Amount



**10A**

[illegible]



Partnership, S Corporation, Estate, Trust  
and REMIC Income

Partnership Income: Include all Schedules K-1

TSJ	Entity Name	Employer ID Number	Health Insurance Paid by Entity

S Corporation Income: Include all Schedules K-1

TSJ	Entity Name	Employer ID Number	Health Insurance Paid by Entity

Estate and Trust Income: Include all Schedules K-1

TSJ	Entity Name	Employer ID Number

Real Estate Mortgage Investment Conduit (REMIC) Income: Include all Schedules Q

TSJ	Entity Name	Employer ID Number





Miscellaneous Income, Adjustments and Alimony

Include Forms: W-2G, 1099-MISC, 1099-NEC, 1099-RRB, 1099-SSA, 1099-SA, 1099-LTC, 1099-QA, and 1099-G

Miscellaneous Income and Adjustments:

	TSJ _____		TSJ _____	
	2023 Amount	2022 Amount	2023 Amount	2022 Amount
Unemployment compensation received .....				
Unemployment compensation repaid in 2023 .....				
Social security benefits received .....				
Social security benefits repaid in 2023 .....				
Medicare premiums withheld .....				
Tier 1 railroad retirement benefits received .....				
Tier 1 railroad retirement benefits repaid in 2023 .....				
Total lump sum social security received .....				
Lump sum taxable social security .....				
Other federal withholding .....				
Other state withholding .....				

State and Local Income Tax Refunds:

TSJ	State	City	Tax Year	Income Tax Refund	
				State	Local

Other Income:

TSJ	Nature and Source	2023 Amount	2022 Amount

Alimony Paid or Received:

TSJ	Recipient's Name	Recipient's Social Security Number	Date of Original Divorce or Separation (Mo/Da/Yr)	Date Divorce or Separation Agreement Modified (Mo/Da/Yr)	Alimony Received?	2023 Amount	2022 Amount



Itemized Deductions - Medical and Taxes

Medical and Dental Expenses:

Prescription medicines and drugs  
Total medical insurance premiums paid \*  
Long-term care expenses  
Total insurance reimbursement  
Number of miles traveled for medical care  
Personal protective equipment  
Lodging  
Doctors, dentists, etc.  
Hospitals  
Lab fees  
Eyeglasses and contacts

TSJ	2023 Amount	2022 Amount

Taxpayer long-term care insurance premiums paid  
Spouse long-term care insurance premiums paid

2023 Amount	2022 Amount

\* Do not include Medicare premiums or premiums deducted in computing taxable wages reported on a W-2.

Other Medical Expenses:

TSJ	Description	2023 Amount	2022 Amount

Taxes Paid: Include copies of your tax bills

Personal property taxes paid (include vehicle taxes)  
General sales taxes paid on specified items

TSJ	2023 Amount	2022 Amount

Itemize real estate taxes by state.

TSJ	Real Estate Taxes	2023 Amount	2022 Amount

Other Taxes Paid:

TSJ	Description	2023 Amount	2022 Amount

If you purchased or sold your home in 2023, did you include any taxes from your closing statement in the amounts above? Yes No





2023

Itemized Deductions - Mortgage Interest and Points

14A

Mortgage Questions for 2023:

	Yes	No
If you purchased or sold your home, did you include any mortgage interest from your closing statement in the amount below? . . .	<input type="checkbox"/>	<input type="checkbox"/>
Did you refinance your home? (If Yes, enclose the closing statement.) . . . . .	<input type="checkbox"/>	<input type="checkbox"/>
If Yes, how many years is your new mortgage loan? . . . . .		
Did you purchase a new home or sell your former home during the year? . . . . .	<input type="checkbox"/>	<input type="checkbox"/>
If Yes, enclose the closing statements from the purchase and sale of your new and former homes.		
If Yes, also, did you (or your spouse, if married) have an ownership interest in a principal residence in the US		
during the 3 year period prior to the purchase of this home? . . . . .	<input type="checkbox"/>	<input type="checkbox"/>
If Yes, did you (and your spouse, if married at the time of purchase) own and use the same home as a principal residence		
in the U.S. for any 5 consecutive year period during the 8 year period ending on the purchase date of the new home? . . . .	<input type="checkbox"/>	<input type="checkbox"/>

Home Mortgage Interest Paid To Financial Institutions:

TSJ	Paid To	Did You Receive Form 1098?		2023 Amount	2022 Amount
		Yes	No		

Other Home Mortgage Interest Paid:

TSJ	Paid To		ID Number	2023 Amount	2022 Amount
	Name	Address			

Deductible Points:

TSJ	Paid To	Did You Receive Form 1098?		2023 Amount	2022 Amount
		Yes	No		

Investment Interest Expense:

Interest paid on money you borrowed that is allocable to property held for investment.

TSJ	Paid To	2023 Amount	2022 Amount



2023

## Itemized Deductions - Contributions

15

### Cash Contributions: Include all Forms 1098-C or other documentation.

You cannot deduct a cash contribution, regardless of the amount, unless you keep as a record of the contribution a bank record (such as a canceled check, a bank copy of a canceled check, or a bank statement containing the name of the charity, the date, and the amount) or a written communication from the charity. The written communication must include the name of the charity, date of the contribution, and amount of the contribution. Clothes and household items donated must be in good, used condition or better in order to be deductible unless the item donated is worth more than \$500 and you have the item's value appraised. Attach a copy of the appraisal. Include any vehicles donated to charity.

TSJ	Organization or Description of Contribution	2023 Amount	2022 Amount

TSJ	Conservation Real Property	2023 Amount	2022 Amount
	100% limit		
	50% limit		

TSJ	Description	2023 Miles	2022 Miles
	Number of miles traveled performing volunteer work for qualified charitable organizations		

### Noncash Contributions Totaling \$500 or Less: Include all documentation.

TSJ	Description of Donated Property	2023 Amount	2022 Amount

### Noncash Contributions Totaling More Than \$500: Include all Forms 1098-C or other documentation.

TSJ	Property Description	Date Acquired	Date of Donation	Cost or Basis
A				
B				
C				

	Fair Market Value (FMV)	Method Used to Determine FMV	Other Method Description	Method of Acquisition
A				
B				
C				

1 - Appraisal 3 - Comparable Sale 5 - Thrift Shop Value  
2 - Catalog 4 - Other (Describe)

1 - Gift 3 - Exchange  
2 - Inheritance 4 - Purchase

	Donee Organization Name	Donee Organization Address
A		
B		
C		



## Child/Dependent Care Expenses & Education Expenses

18

### Child/Dependent Care Expenses:

#### General Information:

TSJ .....

Were you or your spouse a full time student or disabled? .....

☐ Yes ☐ No  
☐ Yes ☐ No

Did you pay an individual for services performed in your home? .....

Expenses incurred in 2022 but paid in 2023 .....

Employer-provided dependent care benefits that were forfeited in 2023 .....

2022 carryover used in grace period .....


#### Child/Dependent Care Providers:

##### Provider 1:

Name .....

Street address .....

City, state, ZIP or postal code, and country, .....

Social security number OR .....

Employer identification number .....

Telephone number (California only) .....

Provider was a household employee .....

☐ Yes ☐ No

2023 Amount	2022 Amount

Expenses incurred and paid in 2023 .....

Expenses incurred and not paid in 2023 .....

##### Provider 2:

Name .....

Street address .....

City, state, ZIP or postal code, and country, .....

Social security number OR .....

Employer identification number .....

Telephone number (California only) .....

Provider was a household employee .....

☐ Yes ☐ No

2023 Amount	2022 Amount

Expenses incurred and paid in 2023 .....

Expenses incurred and not paid in 2023 .....

#### Qualifying Persons for Child/Dependent Care Expenses:

First Name and Initial	Last Name	Social Security Number	Dis-abled	2023 Expenses Incurred	2022 Expenses Incurred

#### Higher Education Expenses for Education Credits and/or Tuition Fees Deduction:

Qualified expenses are for post-secondary education tuition and related expenses; they do not include room or board. Include a detailed listing of the expenses.

**Include copies of all Forms 1098-T**

First Name and Initial	Last Name	Social Security Number	2023 Qualified Expenses



Household Employment Taxes

General Information:

TSJ \_\_\_\_\_

Employer identification number \_\_\_\_\_

Did you pay any one household employee cash wages of \$2,400 or more in 2023?	<div>Yes</div>	<div>No</div>
Did you withhold any federal income tax from wages paid to any household employee?	<div></div>	<div></div>
Did you pay total cash wages of \$1,000 or more in any calendar quarter of 2022 or 2023?	<div></div>	<div></div>

Social Security, Medicare and Income Taxes:

Cash wages subject to social security taxes \_\_\_\_\_

Cash wages subject to Medicare taxes (if different than cash wages subject to social security) \_\_\_\_\_

Cash wages subject to additional Medicare tax withholding \_\_\_\_\_

Federal income tax withheld \_\_\_\_\_

State disability plan payments subject to social security taxes \_\_\_\_\_

State disability plan payments subject to Medicare taxes (if different than plan payments subject to social security) \_\_\_\_\_

2023 Amount	2022 Amount

Federal Unemployment (FUTA) Tax:

Did you pay unemployment contributions to more than one state? \_\_\_\_\_

Were all of the wages subject to FUTA tax subject to the state's unemployment tax? \_\_\_\_\_

State	Total Cash Wages Subject to FUTA	2022 Amount

Complete the following for all state unemployment contributions made:

X if payment to be made after April 18, 2024

Name of State	Total Taxable Wages	Contribution Paid to Unemployment Fund	X	2022 Amount



2023

## Federal Tax Payments

20

### Refund Application:

If you have an overpayment of 2023 taxes, do you want the excess:

Refunded ☐ Yes ☐ No  
Applied to your 2024 estimated tax liability ☐ Yes ☐ No

### Federal Estimated Tax Payments:

2023 1st Quarter Estimate ..... (Due 04-18-2023)  
2023 2nd Quarter Estimate ..... (Due 06-15-2023)  
2023 3rd Quarter Estimate ..... (Due 09-15-2023)  
2023 4th Quarter Estimate ..... (Due 01-16-2024)

Amount Due	Date Paid if Not Date Due (Mo/Da/Yr)	Amount Paid

2022 overpayment applied to 2023 estimate .....

### Tax Planning Information for Tax Year 2024:

Do you expect any of the following to occur in 2024?

	Yes	No
A change in your marital status .....	<input type="checkbox"/>	<input type="checkbox"/>
A change in the number of your dependents .....	<input type="checkbox"/>	<input type="checkbox"/>
A substantial change in your income .....	<input type="checkbox"/>	<input type="checkbox"/>
A substantial change in your withholding .....	<input type="checkbox"/>	<input type="checkbox"/>
A substantial change in deductions .....	<input type="checkbox"/>	<input type="checkbox"/>

If you answered Yes to any of the above questions, provide details.
