2023		Page 1
	Checklist	
Name: TES	SSN: ***	**_***
Checklist		
MORNING PARTY	Control of the Contro	ulilia kasifikik
	ist is provided to help you gather necessary information for us to prepare your 2023 income tax return. Return ng with the supporting documentation, to our office and let us know of any significant changes from your 2022	
General Inf	formation and Prior Year Documentation	
[]	Proof of identity for those claimed on the return (driver's license or state issued ID, Social Security card, birth certificates for children. etc.)	
[]	Income tax returns from the prior two years  If there were losses from business activities in prior years, include prior five years of returns instead of two	
[]	Depreciation schedules from prior years for businesses, rentals, etc.	
Current Ye	ar Income Documentation	
[]	Wage and tax statements (Form W-2)	
ii	Gambling income (Form W2-G)	
[]	IRA distributions, pensions, and annuities (Form 1099-R)	
[]	Dividend income (Form 1099-DIV)	
[]	Interest income (Form 1099-INT)	
[]	Miscellaneous income (Form 1099-MISC)	
[]	Nonemployee compensation (Form 1099-NEC)	
[]	Unemployment compensation and other government payments (Form 1099-G)	
[]	Credit card, debit card, and third-party network transactions (Form 1099-K)	
[]	Reportable payment transactions	
[]	Social Security benefits (Form SSA-1099)	
[]	Railroad retirement benefits (Form RRB-1099)	
[]	Income from partnerships, S corporations, estates, and trusts (Schedule K-1)	
	[ ] Basis information for any partnerships and S corporations	
[]	Documentation of brokerage transactions and disposition of capital assets (Form 1099-B)	
[]	Proceeds from real estate transactions (Form 1099-S)	
[]	Self-employed business income (Schedule C)	
[]	Farm income (Schedule F)	
[]	Farm rental income (Form 4835) Income from rental real estates and royalties (Schedule E)	
l J	income nom remained estates and royalities (Schedule L)	
Other Inco	me (provide supporting documentation for income received for the following items)	
	Sale of assets or property	
	Cancellation of debt	
[]	Other income	
-	(provide supporting documentation for payments made for the following items)	
	Educator classroom expenses	
	Employee business expenses	
	Contributions to a Health Savings Account	
	Expenses related to work relocation with the military	
	Alimony	
	Student loan interest	
	Refunded student loan interest payments	
	Student loan forgiveness Tuition and fees for higher education	
	Expenses related to child or dependent care	
	Contributions to a Retirement Savings Account	
	Medical and dental expenses	
	Real estate taxes	
	Other state and local taxes	

	Checklist	
Name: TES		SSN: ***_**.
Checklist		
[] [] [] [] [] []	Mortgage interest Investment interest Cash contributions Noncash contributions (provide organization name) Unreimbursed employee expenses Investment expenses Gambling losses Other payments	

	Questionnaire
Name: TEST	SSN: ***_***
Questionnaire	
Personal Inform	nation
[][]	Did your marital status change during the year?  If "Yes," explain
[][]	Did your name change during the tax year?  If "Yes," explain.
[][]	If your filing status is married, but you are filing separately from your spouse, did you and your spouse live apart for the last six months of 2023?
[][]	Can you or your spouse be claimed as a dependent by someone else?
[][]	Did your address change during the year?
[][]	Were you, your spouse, or any dependents a victim of identity theft?  If "Yes," explain.
[][]	Were you, your spouse, or any dependents issued an Identity Protection PIN (IP PIN)?  If "Yes," provide Notice CP01A from the IRS.
Provide	proof of identity to be eligible to e-file your tax return (driver's license or state-issued photo ID)
Dependent Info	rmation
Yes No	
[][]	Did you have any changes in dependents during the year?  If "Yes," explain
[][]	Can another person qualify to claim any of your dependents?
[][]	Did you have any child or dependent care expenses during the year?
[][]	Did you have any adoption expenses during the year?
[][]	Did you have any children under age 19 or a full-time student under age 24 with more than \$2,500 of
	unearned income?
Provide	documentation for proof of dependent credits (school records, medical records, daycare records, etc.)
Health Care Info	ormation
Yes No	
[][]	Did any member of your household have healthcare coverage through the Marketplace (Obamacare)?  If "Yes," provide copies of Form 1095-A.
[][]	Did you receive any distributions from a Health Savings Account (HSA), Archer MSA, or Medicare Advantage MSA during the year?
Income, Purcha Yes No	ses, Sales, and Debt Information
	Did you receive any tips not reported to your employer?
[][]	Did you receive any disability income during the year?
[][]	Did you cash in any U.S. savings bonds during the year?
[][]	Did you start a new business or purchase any rental property during the year?
	Did you sell an existing business, rental property, or other property during the year?
[][]	Did you purchase any business assets or convert any assets to business use?
1111	If "Yes," provide the cost of the asset, the date it was placed in service, and the business use
	percentage.
[][]	Did you purchase any gasoline, diesel, or special fuels for off-road business use?
iiii	Did you buy or sell any stocks, bonds, or other investments during the year?
[][]	Did you sell a principal residence during the year?
	If "Yes," provide closing documentation for the purchase and sale of the home.
[][]	Did you have a principal residence or a piece of real property foreclosed on during the year?
[][]	Did you abandon a principal residence or a piece of real property during the year?
[][]	Did you refinance your principal home or second home or take out a home equity loan during the year?
f 1 F 1	If "Yes," provide all escrow, closing, and other pertinent documentation and information.
[][]	Did you receive any principal or interest during this year from property sold in prior years?

2023				Page 4
				Questionnaire
Name:	TES	ST.		SSN: ***_***
Quest	ion	na	ire	
	[]	[	]	Did you rent out your home or use it for business?
	[]	[	1	Did you sell, exchange, or purchase any real estate during the year?
		_	-	Did you acquire a new or additional interest in a partnership or S corporation?
	[]	-	-	Did you have any debts canceled or forgiven this year?
				Does anyone owe you money that has become uncollectible?
	[]	l	1	Did you purchase a new or previously owned clean vehicle (electric vehicle, plug-in hybrid, fuel-cell
				vehicle, qualified commercial clean vehicle) during the year?  If "Yes," provide the report the dealer or seller is required to provide to you.
	[]	ſ	1	Did you receive income or incur expenses associated with a fantasy sports league?
		٠	•	If "Yes," provide documentation.
	[]	[	]	Did you receive income or incur expenses associated with car sharing (e.g., Lyft or Uber)?
				If "Yes," attach Form 1099-MISC, Form 1099-NEC, or Form 1099-K.
	[]	[	]	Did you receive income or incur expenses associated with freelancing (e.g., Upwork or TaskRabbit)?
			,	If "Yes," attach Form 1099-K or Form W-2.
	[]	l	J	Did you receive income or incur expenses associated with fashion sharing (e.g., Poshmark or thredUP)?
	[]	1	1	If "Yes," provide documentation.  Did you receive income or incur expenses associated with crowdfunding (e.g., Kickstarter or Indiegogo)?
	LJ	ι	1	If "Yes," attach Form 1099-K.
	[]	ſ	1	Did you receive income or incur expenses associated with a short-term rental (e.g., Airbnb, VRBO or
	•	•	•	HomeAway)?
				If "Yes," provide documentation.
	[]	[	]	Did you receive income or incur expenses as an independent contractor (e.g., Shipt, Instacart, DoorDash)?
				If "Yes," provide documentation.
	[]	l	j	Did you receive any other income you have not provided information for with this organizer?  If "Yes," explain.
Itemize	d E	)ec	luct	ion Information
•	Yes	1	lo	
	[]	[	]	Did you pay out-of-pocket medical or dental expenses (premiums, prescriptions, mileage, etc.) during the
		_	_	year?
	[]	-	-	Did you pay any long-term care premiums for yourself, your spouse, or a dependent during the year?
				Did you receive any state or local income tax refunds from prior years?  Did you make any major purchases (vehicle, boat, etc.) during the year?
	[]			Did you pay any real estate property taxes or personal taxes during the year?
	[]			Did you pay mortgage interest during the year?
				Did you make cash donations to charity during the year?
	ij			Did you make noncash donations to charity (clothes, furniture, etc.) during the year?
	ij			Did you donate a boat or vehicle during the year?
				If "Yes," attach Form 1098-C.
	[]			Did you have gambling winnings or losses during the year?
	[]	[	]	Did you have any job-related expenses that were not reimbursed by your employer (uniforms, safety
		,	,	equipment, etc.)?
	[]			Did you use your vehicle on the job other than for commuting to work?  Did you work out of town at any time during the year?
	LJ	ι	1	Did you work out or town at any time during the year?
Retiren				mation
	Yes			Did on make any contributions to an IDA Dath March CHADLE OFD 404//3 and the second field of the second
	[]	l	J	Did you make any contributions to an IRA, Roth, Keogh, SIMPLE, SEP, 401(k), or other qualified retirement
	[]	ſ	1	plan during the year?  Did you make any withdrawals or receive distributions from a pension or profit-sharing plan, IRA, Roth,
	ıJ	ι	1	Keogh, SIMPLE, SEP, 401(k), or other qualified retirement plan during the year?
	[]	ſ	1	Did you execute any rollovers from an IRA, Roth, Keogh, SIMPLE, SEP, 401(k), or other qualified
	_ •	•	_	retirement plan during the year?

[][]

Did you receive any Social Security benefits during the year?

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

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

## 2023 Tax Organizer Personal Information

		rersonal in				
Personal	<b>Information</b>					
	Name			SSN	Has IP PIN	Date of Birth
Taxpayer	TEST			***_**_***		
pouse						-
lame of pers	on to whom all information should be addressed, if	not the taxpayer				
Street addre	ess, city, state, and ZIP			-		
	Occupation		Daytime Phone	Evening Phone		Cell Phone
Гахрауег						
Spouse						
Taxpayer en	nali					
Spouse ema	ail					·
dentification of the photo in the photo in the photo	Are you or your spouse blind? Are you or your spouse disabled? Are you or your spouse disabled? Are you or your spouse a full-time student Do you or your spouse want to designate At any time during 2023 did you:  (a) receive (as a reward, award, or payr (b) sell, exchange, gift, or otherwise displayed of photo ID  'r's license State-issued photo  ID was issued	\$3 to go to the President nent for property or services of a digital asset (o	tial Election Campaign Fur ice) a digital asset?	nd? gital asset)?		<b>D</b>
ate photo			Date photo ID expires		/ · · · · · · · · · · · · · · · · · · ·	
Account	Information for Deposits and With	drawals				
	Name of Bank	Bank Routing Number	Bank Account Number	Type of Account  Checking Saving		e this Account for
			1			
Annointe	nent information					
	ppointment is scheduled for	HIAHU UNGGERSKUT, GUUTHAULHU	areatustus (1994), PROPERTY (1994), PROP	्राज्याक्षाम् । । । । । । । । । । । । । । । । । । ।	unamudi	angeoleantitus (22) se est

ame, teot		Dependent	and Other in	tormatio	•••		SSN	***_**_***
ame: <u>TEST</u> Dependent information			460 466				JOIN.	
First and Last Name	(e. 1941) (2 identificial earlieringen (e. 17	Has IP PIN	Relationship	Months in Home	Date of Birth	Disabled	Full- time Student	Childcare Expenses
*****								
						-		
								<del></del>
st dependents required to fil	<del></del>							
hild and Other Depen	ient Care Exp	enses						
Name of Care Provider			Address			SSN or E	IN	Amount Paid
								har against a said
Estimates	eningeneralikan di							
and the second s	eningeneralikan di	ederai Amount		sident State	mount	F Date Paid	Resident	
and the second s	Fe	ederal	Res	sident State			Resident	City
verpayment applied om 2022	Fe	ederal	Res	sident State			Resident	City
verpayment applied om 2022 rst quarter	Fe	ederal	Res	sident State			Resident	City
verpayment applied om 2022 rst quarter econd quarter	Fe	ederal	Res	sident State			Resident	City
verpayment applied om 2022 irst quarter econd quarter hird quarter ourth quarter	Fe	ederal	Res	sident State			Resident	City
overpayment applied om 2022 irst quarter econd quarter hird quarter outth quarter	Fe	ederal	Res	sident State			Resident	City
verpayment applied om 2022 irst quarter econd quarter hird quarter ourth quarter	Fe	ederal	Res	sident State			Resident	City
overpayment applied om 2022 irst quarter econd quarter hird quarter out the parter out the parter out the quarter out the quarter out the quarter out the parter out the pa	Fe	ederal	Res	sident State			Resident	City
everpayment applied om 2022 irst quarter econd quarter hird quarter ourth quarter dditional payments	Fe	ederal	Res	sident State			Resident	City
overpayment applied om 2022 irst quarter econd quarter hird quarter out the parter out the parter out the quarter out the quarter out the quarter out the parter out the pa	Fe	ederal	Res	sident State			Resident	City
overpayment applied om 2022 irst quarter econd quarter hird quarter out the parter out the parter out the quarter out the quarter out the quarter out the parter out the pa	Fe	ederal	Res	sident State			Resident	City
overpayment applied om 2022 irst quarter econd quarter hird quarter out the parter out the parter out the quarter out the quarter out the quarter out the parter out the pa	Fe	ederal	Res	sident State			Resident	City
overpayment applied om 2022 irst quarter econd quarter hird quarter out the parter out the parter out the quarter out the quarter out the quarter out the parter out the pa	Fe	ederal	Res	sident State			Resident	City
overpayment applied om 2022 irst quarter econd quarter hird quarter out the parter out the parter out the quarter out the quarter out the quarter out the parter out the pa	Fe	ederal	Res	sident State			Resident	City
overpayment applied om 2022 irst quarter econd quarter hird quarter outth quarter	Fe	ederal	Res	sident State			Resident	City
overpayment applied om 2022 irst quarter econd quarter hird quarter outth quarter	Fe	ederal	Res	sident State			Resident	City
overpayment applied om 2022 irst quarter econd quarter hird quarter outth quarter	Fe	ederal	Res	sident State			Resident	City

	Income	
Name:		SN: ***-**
Wage	is & Salarles all copies of Form W-2	
		2023 Federal
TS	Employer Name	Wages
Retire	ament	
Provide	ement all copies of Form 1099-R	
TS	Payer Name	2023 Distribution
_	es Did you take a distribution from an IRA and give it to an organization eligible to receive tax-deductible contri	butions?
⊔ ¥	es No Did you use any of the distributions for disaster relief?	

	Income		
Name:	TEST	SSN:	***_**
Divid	end Income all copies of Form 1099-DIV and other statements that report dividend income.		
TSJ	Account Number Payer Name	2023 Ordinary Dividends	2023 Qualified Dividends
130	rajei Name	Dividends	Dividends
_			
—			
	<del></del>		
inter	est income.		
	e all copies of Form 1099-INT, Form 1099-OID, and other statements that report interest income.	riter propagonom schiller (Malifell)	Califfre Calabrica, College Anno (5 8 9 8 8 8 8 8 8 9 8 8 9 7
TSJ	Account Number Payer name		2023 Interest
—			
—			

	Sale of Capital	Assets					
Name: TEST SSN: ***_**_*****							
Sale of Capital Assets (including items not reported on Form 1099-B)  Provide all brokerage statements  Date  Date  Sales							
	n of Property	Date Purchased	Date Sold	Sales Price	Cost		
	<del></del>						
					-		
					<del></del> -		
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<del></del>		<del></del> ·					
			-				
		· <del></del>	<del></del>	·	<del></del>		
		·			<del></del>		
		· <del></del>					
		·					
Installment Sale Income			686 6777 (S. <b>688)</b>				
TSJ Description of property:	GARTAN SAN SAN SAN SAN SAN SAN SAN SAN SAN S	<u>r er dereterije ing Sublik</u>	ia nolumbios col communist	iidiidadiibaaddadiidda	renguliament: Listerich		
Date acquired	Date sold			2023	Prior Years		
Selling price		<del></del>					
Mortgages assumed			· · · · · · ·				
Cost of property sold							
Depreciation allowed			<u> </u>				
Commissions and expense of sale .			· · · · · · ·				
Gross profit percentage							
Interest received			· · · · · · · <u> </u>				
Principal payments received			· · · · · · · <u> </u>				
Property was sold to a related party							

Other Income and Adjustments		
Name: TEST	SSN:	***_**_****
Other Income		
	2023 Taxpayer	2023 Spouse
Social Security Benefits (attach Forms 1099-SSA)	ranpa) er	opouto
Railroad Retirement Benefits (attach Forms 1099-RRB)		
State income tax refund (attach Forms 1099-G)		
Alimony received		
Divorce or separation date Amount		
Unemployment compensation (attach Forms 1099-G)		
Unemployment compensation repaid in 2023		
Gambling winnings (attach Forms W2-G)		
Alaska Permanent Fund		
Jury duty pay	<del></del>	
ABLE distributions		
Scholarships or grants not reported on Form W-2		
Other income:		
Adjustments		
	2023 Taxpayer	2023 Spouse
Educator expenses (If you are an educator, enter the amount you paid for classroom supplies)		
Contributions made to a Health Savings Account (HSA)		
Payments made for Self-Employed Health Insurance for you, your spouse, or dependents		
Alimony paid Name		
SSN Divorce or separation date		
Name		
SSN Divorce or separation date		
Contributions made to a Self-Employed Pension plan (SEP), SIMPLE, or Solo 401K		
Contributions made to an Individual Retirement Account (IRA)		
Contributions made to a Roth IRA		
Interest paid on a student loan		
Other adjustments:		