

2022 Tax Organizer Personal Information

Personal Information

| | | | | |
|---|-------------------|----------------------|-----------------------|----------------------|
| | Name | SSN | Has IP PIN | Date of birth |
| Taxpayer | NEW CLIENT | ***_**_**** | | |
| Spouse | | | | |
| Name of person to whom all information should be addressed, if not the taxpayer | | | | |
| Street address, city, state, and ZIP | | | | |
| | Occupation | Daytime phone | Evening phone | Cell phone |
| Taxpayer | | | | |
| Spouse | | | | |
| Taxpayer email | | | | |
| Spouse email | | | | |

Filing status at the end of 2022

- Single Married Widowed - If widowed and your spouse died in 2022, enter the date of death _____
 Married filing separately - If married but filing separately, did you live apart from your spouse for the last six months of 2022? _____

Yes No

- Are you or your spouse blind?
 Are you or your spouse disabled?
 Are you or your spouse a full-time student?
 Do you or your spouse want to designate \$3 to go to the Presidential Election Campaign Fund?
 At any time during 2022 did you:
 (a) receive (as a reward, award, or payment for property or service) a digital asset
 (b) sell, exchange, gift, or otherwise dispose of a digital asset (or a financial interest in a digital asset)

Identification Information

Taxpayer's type of photo ID

- Driver's license State-issued photo ID

Photo ID number _____

State photo ID was issued _____

Date photo ID was issued _____

Date photo ID expires _____

Spouse's type of photo ID

- Driver's license State-issued photo ID

Photo ID number _____

State photo ID was issued _____

Date photo ID was issued _____

Date photo ID expires _____

Account Information for Deposits and Withdrawals

| Name of bank | Bank routing number | Bank account number | Type of account | | Use this account for | |
|--------------|------------------------|------------------------|-----------------|---------|----------------------|-------------|
| | | | Checking | Savings | Deposits | Withdrawals |
| | | | | | | |
| | | | | | | |

Appointment Information

Your 2022 appointment is scheduled for _____

Dependent and Other Information

Name: NEW CLIENT

SSN: ***_**_****

Dependent Information

| First and last name SSN | Has IP PIN | Relationship | Months in home | Date of birth | Disabled | Full- time student | Childcare Expenses |
|----------------------------|---------------|--------------|----------------------|---------------|----------|--------------------------|-----------------------|
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List dependents required to file a return _____

Child and Other Dependent Care Expenses

| Name of care provider | Address | SSN or EIN | Amount Paid |
|-----------------------|---------|------------|-------------|
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Estimates

| | Federal | | Resident State | | Resident City | |
|-------------------------------|-----------|--------|----------------|--------|---------------|--------|
| | Date paid | Amount | Date paid | Amount | Date paid | Amount |
| Overpayment applied from 2021 | _____ | _____ | _____ | _____ | _____ | _____ |
| First quarter | _____ | _____ | _____ | _____ | _____ | _____ |
| Second quarter | _____ | _____ | _____ | _____ | _____ | _____ |
| Third quarter | _____ | _____ | _____ | _____ | _____ | _____ |
| Fourth quarter | _____ | _____ | _____ | _____ | _____ | _____ |
| Additional payments | _____ | _____ | _____ | _____ | _____ | _____ |

Checklist

Name: NEW CLIENT

SSN: ***_**_****

Checklist

This check list is provided to help you gather necessary information for us to prepare your 2022 income tax return. Return this list, along with the supporting documentation, to our office and let us know of any significant changes from your 2021 tax year.

State and city refunds and other government payments (Form 1099-G)

- Unemployment compensation

Credit card, debit card, and third party network transactions (Form 1099-K)

- Reportable payment transactions

Other Income (provide supporting documentation for income received for the following items)

- Sale of assets or property
 Cancellation of debt
 Other income _____

Payments (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
 Mortgage interest
 Investment interest
 Cash contributions
 Noncash contributions
 Unreimbursed employee expenses
 Investment expenses
 Gambling losses
 Other payments _____

Questionnaire

Name: NEW CLIENT

SSN: ***_**_****

Questionnaire

Personal Information

Yes No

- Did your marital status change during the 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 2022?
- 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 Information

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 childcare 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 \$2,300 of unearned income?

Provide documentation for proof of dependent credits (school records, medical records, daycare records, etc.)

Health Care Information

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, Purchases, Sales, and Debt Information

Yes No

- 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?
If "Yes," provide the cost of the asset, the date it was placed in service, and business use percentage.
- Did you purchase any gasoline, diesel, or special fuels for off-road business use?
- 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?
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?
- Did you rent out your home or use it for business?
- Did you sell, exchange, or purchase any real estate during the year?

Questionnaire

Name: NEW CLIENT

SSN: ***-**-****

Questionnaire

- 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?
- Did you purchase a new hybrid, alternative motor, or electric motor energy-efficient vehicle during the year?
If "Yes," provide the year, make, model, VIN, and date the vehicle was placed in service.
- Did you receive income or incur expenses associated with a fantasy sport league?
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.
- Did you receive income or incur expenses associated with fashion sharing (e.g., Poshmark or thredUP)?
If "Yes," provide documentation.
- Did you receive income or incur expenses associated with crowdfunding (e.g., Kickstarter or Indiegogo)?
If "Yes," attach Form 1099-K.
- Did you receive income or incur expenses associated with a short-term rental (e.g., Airbnb 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.
- Did you receive any other income you have not provided information for with this organizer?
If "Yes," explain _____

Itemized Deduction Information

Yes No

- 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?
- Did you make noncash donations to charity (clothes, furniture, etc.) during the year?
- 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?

Retirement Information

Yes No

- Did you make any contributions to an IRA, Roth, Keogh, SIMPLE, SEP, 401(k), or other qualified retirement plan during the year?
- Did you make any withdrawals or receive distributions from a pension or profit sharing plan, IRA, Roth, Keogh, SIMPLE, SEP, 401(k), or other qualified retirement plan during the year?
- 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?

Education Information

Yes No

Questionnaire

Name: NEW CLIENT

SSN: ***-**-****

Questionnaire

- 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 Information

Yes No

- 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 own property in a foreign country?

Refund, Withholding, and Estimated Tax Information

Yes No

- If you have an overpayment of 2022 taxes, do you want the refund applied to your 2023 estimated taxes?
- Did you make any estimated payments toward your 2022 taxes?
- Did you apply an overpayment of your 2021 taxes to your 2022 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 2023?

Miscellaneous Information

Yes No

- 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, and amount of insurance reimbursements.
- Did you pay wages to any household employees (babysitter, nanny, housekeeper, etc.)?
- Did you make gifts to any one person in excess of \$16,000 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?
- Do you own interest or shares in or did you dispose of a Qualified Opportunity Fund during the year?
- 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?

Income

Name: NEW CLIENT

SSN: ***_**_****

Wages & Salaries

Provide all copies of Form W-2

| TS | Employer name | 2022 federal wages |
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Retirement

Provide all copies of Form 1099-R

| TS | Payer name | 2022 distribution |
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- Yes No Did you take a distribution from an IRA and give it to an organization eligible to receive tax-deductible contributions?
 Yes No Did you use any of the distributions for disaster relief?

Income

Name: NEW CLIENT

SSN: ***_**_****

Dividend Income

Provide all copies of Form 1099-DIV and other statements that report dividend income.

| TSJ | Account number Payer name | 2022 ordinary dividends | 2022 qualified dividends |
|-----|------------------------------|-------------------------------|--------------------------------|
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Interest Income

Provide all copies of Form 1099-INT, Form 1099-OID, and other statements that report interest income.

| TSJ | Account number Payer name | 2022 interest |
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If any interest income listed above is from a seller-financed mortgage, provide the payer's ID number and address

Other Income and Adjustments

Name: NEW CLIENT

SSN: ***-**-****

Other Income

| | 2022 Taxpayer | 2022 Spouse |
|--|------------------|----------------|
| Social Security Benefits (attach Forms 1099-SSA) | _____ | _____ |
| 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 2022 | _____ | _____ |
| Gambling winnings (attach Forms W2-G) | _____ | _____ |
| Alaska Permanent Fund | _____ | _____ |
| Jury duty pay | _____ | _____ |
| ABLE distributions | _____ | _____ |
| Scholarships or grants not reported on Form W-2 | _____ | _____ |
| Other income: _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |

Adjustments

| | 2022 Taxpayer | 2022 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: _____ | _____ | _____ |

Schedule A - Itemized Deductions

Name: NEW CLIENT

SSN: ***-**-****

Medical and Dental Expenses

Health insurance premiums (paid by you, not through work)
Amount that is for Medicare premiums
Long-term care premiums (you)
Long-term care premiums (your spouse)
Long-term care premiums (dependents)
Mileage driven for medical purposes
Before July 1, 2022
After June 30, 2022
Out of pocket medical & dental expenses
Doctor, dental, etc
Prescription medicines
Glasses & contacts
Hearing aids
Medical equipment & supplies
Hospital services
Laboratory services
Nursing services
Other

Taxes Paid

State and local income taxes
General sales tax (vehicle, boat, home, etc.)
Real estate taxes
Personal property taxes
Auto registration taxes not deductible for state
Other taxes (list)

Interest Paid

Home mortgage interest paid (attach Form 1098)
Some of your home mortgage loan was not used to buy, build, or improve your home.
Home mortgage interest paid to an individual
Paid to:
Name
Address
City, State, ZIP
SSN or EIN
Points not reported on Form 1098
Investment interest

Charitable Contributions

Donations to charity
Cash Noncash Amount
Church
Boy or Girl Scouts
Goodwill
Red Cross
Salvation Army
United Way
Veterans
Hospital
University
Other
Miles driven for charitable purposes

Other Miscellaneous Deductions

Amortizable bond premiums
Federal estate tax
Gambling losses
Impairment-related work expenses
Claim repayments
Unrecovered pension investments
Loss from other activities from Schedule K-1
Ordinary loss debt instrument
Excess deduction on termination

Job Expenses & Certain Miscellaneous Deductions

Necessary job expenses you paid that were not reimbursed by your employer
Safety equipment, tools, & supplies
Uniforms
Protective clothing (shoes, hardhats, glasses, etc.)
Dues to professional organizations
Books & subscriptions
Other
Union dues
Tax preparation fees
Other nonpersonal expenses related to taxable income
Safe deposit box fees
Investment expenses not entered elsewhere
Other
Home equity interest