2023 Individual Taxpayer Organizer

Sieve Accounting & Tax Service LLC 7603 Gresham Street Springfield, Va., 22151 703-283-6091 joann@sieveaccountingandtax.com

Taxpayer						Tax ID #*				
First Name	M.I.	Las	t Name	Em	ail	I,		IP PIN		
Occupation		Date	of birth	<u> </u>		Are you ne	w to ou		Yes	No
Address			City			State		Zip		
County			Primary phone			Secondary	Secondary phone			
Driver's License No.				Stat	te Issue	Date	Exp	o. Date		
Spouse				-		Tax ID#*				
First Name	M.I.	Las	t Name	Em	ail			IP PIN		
Occupation		Date	of birth			Are you ne	w to ou	r firm?	Yes	No
Address (If different from Taxpayer)		City				State		Zip		
County		Prim	ary phone			Secondary	phone			
Driver's License No.				Stal	te Issuc	Date	Exp	o. Date		
If you moved during 2023, enter your	previous addres	s.	.'			Date of mo	ve			
Were you divorced or separated durin Note: Individuals in registered domes Notices: Have you received any notice	stic partnerships	(RDPs		ns are	e not consider		•	Yes N ax purpos		
Names of dependent children Child's full name	Tax ID ‡		IP PIN		Date of birti	Months lived		lationship i taxpayer		College udent?
Did any of the children have unearned	l in some about the	1 250 6	for the year?	Yes	No Do any	of the children h	ave a di	eahility?	Yes	s No
Is it anticipated that a different taxpa					-			Yes N		
Other dependents or people who liv										
Name	Tax ID # *		IP PIN	1	Date of birth	Months lived in home in 2023	Relat	ionship	Inc	come
		\dashv								
Bank information: Use for Direct d	eposit of refund	Dir	ect debit of bala	nce d	lue Name of	bank				
	nsit number				Account nu	ımber				
Ask your tax preparer for information										
*A Tax ID # is either a Social Security Numb	per (SSN), adoption	taxpay	er identification i	numb	er (ATIN), or a	n individual taxpa	yer iden	tification n	umbe	(ITIN)

"You" refers to both taxpayer and spouse—ask your preparer if unsure about a question. Are either you or your spouse legally blind? Yes No Did you pay or receive alimony in 2023? Recipient's SSN Date of divorce or separation Paid Received \$ Did you purchase health insurance through a public exchange/marketplace? (Provide Form 1095-A.) Yes No Will there be any significant changes in income or deductions next year, such as retirement? Yes No HESTYLE & TAXES Did you pay anyone for domestic services (e.g., nanny, housekeeper, cook, caretaker) in your home? Yes No Yes No Did you purchase a new or used energy-efficient, hybrid, or electric car, truck, or van? Are you involved in bankruptcy, foreclosure, repossession, or had any debt (including credit cards) cancelled? Yes No State of residency Yes No Are you a member of the military? Yes Were you a citizen of or lived in a foreign country? Foreign country No Do you own or have financial interest in a foreign bank or financial account? Maximum value \$ Yes Would you like to allow your tax preparer or another person to discuss your return with the IRS? Yes No PIN (any five digits) Designee's name Were any children born or adopted in 2023? (Provide statement for other expenses.) Yes No Were any children attending college? (Provide Form 1098-T and Form 1098-E.) No Yes Books \$ Student loan interest \$ Year in college Paid by you: Tuition \$ Paid by student: Tuition \$ Student loan interest \$ Books \$ CHILDREN & EDUCATION Did you pay any tuition for a private school for a dependent or take classes yourself? No Yes Amount paid \$ Student Name and address of school Did you pay for child or dependent care so you could work or go to school? (Provide statement if applicable) No Yes EIN or SSN Name of provider Address Amount paid \$ Do you have any children who have unearned income of \$1,250 or more? Yes No Did you make any contributions to a 529 plan in 2023? Yes No Traditional IRA Roth IRA No Did you, or will you, contribute any money to an IRA for 2023? Yes Yes No Did you roll over any amounts from a retirement account in 2023? Did you sell or transfer any stock or sell rental or investment property? Yes No INVESTMENTS Did you receive any income from an installment sale? No Yes Did you have any investments become worthless or were you a victim of investment theft in 2023? No Yes Were you granted, or did you exercise, any employee stock options during 2023? Yes No Did you (a) receive (as a reward, award, or payment for property or services); or (b) sell, exchange, or otherwise dispose Yes No of a digital asset (or a financial interest in a digital asset)? (Digital assets include cryptocurrencies, NFTs, and stablecoins) Did you, or do you plan to, contribute money before April 15, 2024 to an HSA for 2023? If yes, provide details. Yes No DEDUCTIONS Yes No Did you pay any interest on a loan for a boat or RV that has living quarters? If yes, provide details. Did you pay sales taxes on a major purchase in 2023, such as a vehicle, boat, or home? Yes No Did you make any charitable contributions in 2023? If yes, provide details Yes No Did you work from a home office or use your car for your business? Yes No BUSINESS Did you receive income from a sharing/gig economy activity (e.g. Airbnb, Uber, etc.)? Yes No Do you own a business or an interest in a partnership, corporation, LLC, farming activities, or other venture? Yes Did you purchase or sell a main home during the year? If yes, provide closing statement. Yes No If you sold a home, did you claim the First-Time Homebuyer Credit when it was purchased? If yes, provide details. Yes No Did you refinance a mortgage or take a home equity loan? If yes, provide closing statement. Yes No Did you use any mortgage loan proceeds for purposes other than to buy, build, or substantially improve your home? Yes No Did you make any new energy-efficient improvements to your home? If yes, provide details. Yes No School district State information Full-year resident Part-year resident Nonresident Do you rent or own your home? Rent Own States of residence during 2023 and dates Includes heat? Total rent paid \$ Yes No

Income Worksheet

Provide to your preparer all Forms W-2, 1099-INT, 1099-DIV, 1099-R, 1099-MISC, 1099-NEC, 1099-K, and other income reporting statements. Do not list dollar amounts for the following forms. Your preparer will report the appropriate amounts.

Indicate	e "T" for taxpayer, "S" for spouse, "J" for joi	int			Pro	vide additional stateme	ents if more roo	om is needed
Forms '	W-2—Wage and Tax Statement							
T/S	Employer name			T/S	Employ	er name		
	1)				4)			
	2)				5)			
	3)				6)			
Forms:	1099-INT — Interest Income							
T/S/J	Name of issuer			T/S/J	Name o	f issuer		
	1)				4)			
	2)				5)			
	3)				6)			
Forms :	1099-DIV — Dividends and Distributions							
T/S/J	Name of issuer			T/S/J	Name o	f issuer		
	1)				4)			
	2)			Ī	5)			
	3)				6)			
Forms:	1099-R—Distributions From Pensions, Ann	uities, Ret	irement	or Profit	-Sharing l	Plans, IRAs, Insurance	Contracts, Etc.	
T/S	Name of issuer			T/S	Name o	f issuer		
	1)				4)			
-	2)				5)			
	3)				6)			
If the d	istribution is before age 59½, give a reason t	o determin	e if an	exception	to penalty	y applies.		
Tax-Exe	empt Interest (such as municipal bonds—ir	nclude state	ement)					
Payer		\$		Payer			\$	
Other I	ncome	- ·:	-				. ***	
	x refund		\$			Unreported tips	\$	
	loyment compensation		\$			Other	\$	
	Security (taxpayer)—provide SSA-1099 or R	RB-1099	\$				\$	
	Security (spouse)—provide SSA-1099 or RRI		\$				\$	
	ng income—provide Form W-2G		\$				\$	
	ss income (see Sole Proprietorship Tax Organiz	zer)	•			Stock sales	See "Sales a	nd Exchanges
	income (see Rental Property Tax Organizer)					Sale of other property	See "Sales and Exchanges Worksheet" below.	

Sales and Exchanges Worksheet

Provide information about sales of stock, real estate, or other property, along with Forms 1099-B, 1099-S, or other supporting statements.

Description of property	Purchase date	Cost/basis	Sale date	Sale price
		\$		\$
		\$		\$
		\$		\$

Notes:

- When stock is sold, you will usually receive Form 1099-B, Proceeds From Broker and Barter Exchange Transactions, reporting the proceeds from the sale. However, your statement will not always provide the cost/basis information necessary to compute gain or loss. If the statement does not contain the cost/basis information, you must provide it. You may need to contact your broker for questions about cost/basis and purchase dates of your stock accounts.
- Often, "transfers" of stock or mutual funds within a brokerage account are actually sales of one type of stock and purchase of another. Even if you did not receive any cash from the transaction, you may have taxable gain or loss.
- If your stock dividends are automatically reinvested, the dividends will be taxable even though you did not receive any cash. The transaction is treated as if you had received cash and purchased additional stock. When the stock is sold, the amount reinvested over the years is taken into account. You may need to contact your broker for questions about the amount of reinvested dividends.
- If you sold property other than stock, your taxable gain or loss will be determined by your cost/basis. The cost/basis is usually the original purchase price plus improvements (the cost of repairs and maintenance are not taken into account for cost/basis).

Deductions n	nust exceed \$13,850	Single, \$27,700 MF	J/QSS, \$20,800 H	OH, or \$13,850 MF	S to be a tax b	enefit.	
Medical Expe	enses. Must exceed or dependents—do	7.5% of income to be not include any expe with funds from an F	a benefit— nses that were	Charitable Contr	ibutions. If ov	ver \$500 in noncash char contributions. Rules req or all contributions.	
Dentists	\$	Hospitals	s	Monetary (cash, cl			\$
Doctors	\$	Insurance	\$			othing or household	<u> </u>
Equipment	\$	Prescriptions	\$	items must be in g			\$
	\$	Other	\$	Did you transfer fo	unds from an I	RA directly to a	
Eyeglasses Medical miles		@ 22¢	L *	charity? Yes	No		\$
			1 husings on	Charitable mileage	•	@ 14¢	
		paid for full or partia iness use of the hom		Casualty and The	eft Losses		
State withhold			Reported on W-2			pected damage or loss	
	d taxes—paid in 20	23	\$	a theft in a federall preparer. Yes	ly-declared dis No	aster area, provide deta	ils to your tax
Real estate tax			\$		· · ·	ations Missellanessa	المستسما
Real estate tax			\$			ctions. Miscellaneous i I limitation are not dedu	
Personal prop			\$	federal return. Ĥo	wever, these ex	penses may be deducti	ole on your st
	efund—received in	2023	\$()	return. For use of l	nome, auto mil	eage, or other job-relate e sheet. Were any exper	d expenses,
		4040	\$	by your employer			wes remibuly
Foreign tax pa Other	iiu		\$	Dues	\$	Subscriptions	\$
Other Other			\$	Investment	\$	Supplies	\$
Other			\$	expenses			
	- 2022 from mrior se	nov state vetuvns	.	Job education	\$	Tax prep fees	\$
Balance paid in 2023 from prior year state returns (do not include interest or penalties) \$				Job seeking	\$	Tools	\$
·	receipts for sales tax		Yes No	Legal fees	\$	Uniforms	\$
	nase a car, plane, boa	at, or home in 2023?	Yes No	Licenses	\$	Union dues	\$
Sales tax paid S	\$ Purchase	paid \$ Date	?	Safety equipment	\$	Other	\$
use or rental-u	ise property, includi	erest paid for full or p ing business use of th ion and ID numbers.	partial business- le home. Provide	Other Deduction AGI limit.	s. The following	ng deductions are not si	bject to the 2
all Forms 1095	of ichact intornati		s	Gambling losses	\$	Federal estate tax	\$
	\$	raunty roan			L		Ť
Main home		Equity loan		Tt		on IRD	
Main home Second home Points	\$	Equity loan Investment interest	\$ \$	Impairment- related expenses	\$	Other	\$
Main home Second home Points Other D Notes: • G • W	\$ eductions ambling losses are fork clothing is not	Equity loan Investment interest Or Question deductible only up deductible if adapt	\$ \$ to the amount of able for every day	related expenses gambling winnings wear. Exception fo	reported. A lor safety equip	Other og must be kept to verement, such as steel-to	\$ ify losses.
Main home Second home Points Other D Notes: • G • W • Es	\$ eductions ambling losses are fork clothing is not expenses to enable in	Equity loan Investment interest Or Question deductible only up deductible if adapt andividuals, who are	\$ \$ to the amount of able for every day	related expenses gambling winnings wear. Exception fo	reported. A lor safety equip	Other og must be kept to verement, such as steel-to	\$ ify losses.
Main home Second home Points Other D Notes: • G • W • E Adjustn	s eductions ambling losses are fork clothing is not expenses to enable in	Equity loan Investment interest Or Question deductible only up deductible if adapt ndividuals, who are	\$ to the amount of able for every day physically or me	related expenses gambling winnings wear. Exception fontally impaired, to	reported. A lor safety equip work are gene	Other og must be kept to verement, such as steel-to	\$ ify losses.e boots.
Main home Second home Points Other D Notes: • G • W • E Adjustn Educator exper	s eductions ambling losses are fork clothing is not expenses to enable in nents Work mses. Classroom ex	Equity loan Investment interest Or Question deductible only up deductible if adapt ndividuals, who are sheet penses of teachers,	\$ to the amount of able for every day physically or me	gambling winnings wear. Exception fontally impaired, to	s reported. A lor safety equip work are gene	Other og must be kept to verement, such as steel-to	\$ ify losses.
Main home Second home Points Other D Notes: • G • W • E Adjustn Educator experiments Conly include	s eductions of the state of the	deductible only up deductible if adapt adividuals, who are senses of teachers, outributions for 2023 ande out-of-pocket).	to the amount of able for every day physically or me	gambling winnings wear. Exception for ntally impaired, to rincipals. Maximum until April 15, 202	s reported. A lear safety equip work are gene in \$300 each.	Other og must be kept to ver oment, such as steel-to- erally deductible.	ify losses. boots.
Main home Second home Points Other D Notes: • G • W • E Adjustn Educator experiments Conly include	s eductions of the state of the	Equity loan Investment interest Or Question deductible only up deductible if adapt ndividuals, who are sheet penses of teachers, ontributions for 2022	to the amount of able for every day physically or me	gambling winnings wear. Exception for ntally impaired, to rincipals. Maximum until April 15, 202	s reported. A lear safety equip work are gene in \$300 each.	Other og must be kept to ver oment, such as steel-to- erally deductible.	\$ ify losses. e boots.
Main home Second home Points Other D Notes: • G • W • E> Adjustn Educator experiments Health savings (Only include Self-employed Self-employed	s eductions ambling losses are fork clothing is not expenses to enable in nents Work uses. Classroom expenses. Classroom expenses to enable in ents Work uses. Classroom expenses. Expenses of the contributions you muse. SEP, SIMPLE, and the contributions is account to the contributions of the contributions you muse.	deductible only up deductible if adapt adividuals, who are senses of teachers, outributions for 2023 ande out-of-pocket).	to the amount of able for every day physically or merounselors, and programme and programme because of the counselors of	gambling winnings wear. Exception fontally impaired, to rincipals. Maximum until April 15, 202	reported. A lor safety equipwork are general samples as \$300 each.	Other Og must be kept to ver ment, such as steel-to-crally deductible.	ify losses. boots.
Main home Second home Points Other D Notes: • G • W • E> Adjustn Educator experiments Health savings (Only include Self-employed Self-employed coverage.	s eductions ambling losses are fork clothing is not expenses to enable in ents Work mses. Classroom expenses. Classroom expenses to enable in ents Work mses. Classroom expenses. Classro	deductible only up deductible if adapt addividuals, who are sense of teachers, ontributions for 2023 and out-of-pocket). Qualified plans. Contributions, particular persessions, particular persessions, particular plans.	to the amount of able for every day physically or merounselors, and programme and programme because of the counselors of	gambling winnings wear. Exception fontally impaired, to rincipals. Maximum until April 15, 202	reported. A lor safety equipwork are general samples as \$300 each.	Other Og must be kept to ver ment, such as steel-to-crally deductible.	\$ ify losses.e boots. \$
Main home Second home Points Other D Notes: • G • W • E Adjustn Educator expe Health savings (Only include Self-employed Coverage. Penalty on ear	s eductions ambling losses are fork clothing is not expenses to enable in ents Work uses. Classroom expenses. Classroom expenses to enable in ents Work uses. Classroom expenses. Classroom expenses to enable in ents Work uses. Classroom expenses.	deductible only up deductible if adapt adividuals, who are sent penses of teachers, outributions for 2023 and out-of-pocket). Qualified plans. Continuings.	to the amount of able for every day physically or metounselors, and proposed and the physically or metounselors, and proposed and the physically or metounselors, and proposed and the physically or metous for 2023 may be made upon the physical proposed and the physical phys	gambling winnings wear. Exception for the control of the control o	s reported. A less safety equipwork are general same safety. A safety equipwork are general safety. A safety safet	Other Ot	\$ ify losses.e boots. \$ \$ \$
Main home Second home Points Other D Notes: • G • W • E Adjustn Educator expe. Health savings (Only include Self-employed Self-employed coverage. Penalty on ear	s eductions ambling losses are fork clothing is not kepenses to enable in nents Work nses. Classroom ex s account (HSA). Co contributions you m SEP, SIMPLE, and a health insurance. So ly withdrawal of sav . For traditional IRA	deductible only up deductible if adapt ndividuals, who are sheet penses of teachers, ande out-of-pocket). qualified plans. Contributions for 2022 and proprietors, partings. As. Roth IRAs are not an investment of the proprietors of the propr	to the amount of able for every day physically or merounselors, and properties and properties and 2% S control deductible. Control of deductible.	gambling winnings wear. Exception for the control of the control o	s reported. A less safety equipwork are general same safety. A safety equipwork are general safety. A safety safet	Other Og must be kept to ver ment, such as steel-to-crally deductible.	\$ ify losses. boots. \$ \$ \$ \$
Main home Second home Points Other D Notes: • G • W • E Adjustn Educator experiments Health savings (Only include Self-employed Coverage. Penalty on ear IRA deduction Student loan i Moving expen	s eductions ambling losses are fork clothing is not kpenses to enable in nents Work nses. Classroom exp s account (HSA). Co contributions you m SEP, SIMPLE, and a health insurance. So ly withdrawal of sav . For traditional IRA nterest. Paid for tax ses. Available only	deductible only up deductible if adapt adividuals, who are sent penses of teachers, outributions for 2023 and out-of-pocket). Qualified plans. Continuings.	to the amount of able for every day physically or metabolishments, and properties and 2% S control deductible. Contents. Armed Forces (or	gambling winnings wear. Exception for tally impaired, to may be made up unporation sharehold ributions for 2023 retheir spouses or de	reported. A lor safety equipwork are general same safety and safety equipwork are general safety are general safety and safety are safety and safety are safety and safety are safety are safety and safety are s	Other Og must be kept to veroment, such as steel-to- erally deductible. 2024. ible for employer up until April 15, 2024.	\$ ify losses.e boots. \$ \$ \$ \$ \$ \$ \$

Ask preparer

\$

Business expenses of reservists, performing artists, and fee-based government officials.

Other adjustments. Include description.

Estimated Tax Payments — Ta	Date paid	Federal	Date paid	State
First	<u> </u>	\$		\$
Second		\$		\$
Third		\$		\$
Fourth		\$		\$
Amount applied from 2022 overpayment		\$		\$
Total		\$		\$
Tax Preparation Checklist			į	
Please provide the following documentation: All Forms W-2 (wages), 1099-INT (interest), (pensions and IRA distributions), Schedules I statements, including all copies provided from Form 1095-A (for health insurance purchase purchased outside of a public exchange), or	K-1 from partnerships m the payer. sed through a public	s, S corporations, estates exchange/marketplace	e), Form 1095-B	other income report 3 (for health insura

•
If you are a new client, provide copies of last year's tax returns.
The completed Individual Income Tax Organizer. Note: If you choose not to fill out the organizer, you must at least answer the
"Yes" or "No" questions under "Questions—All Taxpayers."

☐ Copy of the closing statement if you bought, sold, or refinanced real estate.

Mileage amounts for any automobile expenses claimed, including total mileage, commuting mileage, and business mileage.

☐ Detail of estimated tax payments made, if any.

- ☐ Income and deductions categorized on a separate sheet for business or rental activities.
- ☐ List of itemized deductions categorized on a separate sheet for medical, taxes, interest, charitable, and miscellaneous deductions.
- ☐ Copy of all acknowledgement letters received from charitable organizations for contributions made in 2023.

Taxpayer Responsibilities

- You agree to provide us all income and deductible expense information. If you receive additional information after we begin
 working on your return, you will contact us immediately to ensure your completed tax returns contain all relevant information.
- You affirm that all expenses or other deduction amounts are accurate and that you have all required supporting written records. In some cases, we will ask to review your documentation.
- You must be able to provide written records of all items included on your return if audited by either the IRS or state tax authority. We can provide guidance concerning what evidence is acceptable.
- You must review the returns carefully before signing to make sure the information is correct.
- Fees must be paid before your tax returns are delivered to you or filed for you. If you terminate this engagement before completion,
 you agree to pay a fee for work completed. A retainer may be required for preparation of returns.
- You should keep a copy of your tax return and any related tax documents. You may be assessed a fee if you request a duplicate copy in the future.

Signatures. By signing below, you acknowledge that you have read, understand, and accept your obligations and responsibilities. For a joint return, both taxpayers must sign.

Taxpayer	Spouse	Date	
D			

Privacy Policy

The nature of our work requires us to collect certain nonpublic information. We collect financial and personal information from applications, worksheets, reporting statements, and other forms, as well as interviews and conversations with our clients and affiliates. We may also review banking and credit card information about our clients in the performance of receipt of payment. Under our policy, all information we obtain about you will be provided by you or obtained with your permission.

Our firm has procedures and policies in place to protect your confidential information. We restrict access to your confidential information to those within our firm who need to know in order to provide you with services. We will not disclose your personal information to a third party without your express written permission, except where required by law. We maintain physical, electronic, and procedural safeguards in compliance with federal regulations that protect your personal information from unauthorized access.

Rental Property Tax Organizer

Rental Income and Expenses

Indicate type of property as 1-Single Family Residence, 2-Multi-Family Residence, 3-Vacation/Short-Term Rental, 4-Commercial, 5-Land, 6-Self-Rental, or 7-Other (describe).

	Prope	erty A	Prope	erty B	Prope	rty C
	Address o	f property:	Address o	f property:	Address of	property:
	Туре		Туре		Туре	
	Any personal us	se? Yes No	Any personal us	se? Yes No	Any personal us	e? Yes No
	Fair Rental Days	Personal Use Days	Fair Rental Days	Personal Use Days	Fair Rental Days	Personal Use Days
Date placed in service						
Rents received	\$		\$		\$	
Expenses						
Advertising	\$		\$		\$	
Auto and travel	\$		\$		\$	
Cleaning and maintenance	\$		\$		\$	
Commissions	\$		\$		\$	
Insurance	\$		\$		\$	
Legal and professional fees	\$		\$		\$	
Management fees	\$		\$		\$	
Mortgage interest paid to banks	\$		\$		\$	
Other interest	\$		\$		\$	
Repairs	\$		\$		\$	
Supplies	\$		\$		\$	
Taxes	\$		\$		\$	
Utilities	\$		\$		\$	
Other (list)	\$		\$		\$	
	\$		\$		\$	
	\$		\$		\$	
	\$		\$		\$	
	\$		\$		\$	

Property Information

If this is your first year with our firm, please provide a depreciation schedule for all property placed in service before 2023.

Property Purchased. Treat the cost of i	mprovements made to real property as the purchase of a ne	ew asset.	
Asset	Date purchased	Cost	Date placed in service
		\$	
		\$	
		\$	
		\$	
		\$	
Property Sold or Taken Out of Service	2		
Asset	Date sold or taken out of service	Selling price	Trade in?
		\$	
		\$	
		\$	
		\$	
		\$	

Sole Proprietorship Tax Organizer

	etor General Informati	on			<u> </u>	The state
Name of sole	e proprietor					
Business nar	me (if different)				EIN (if applicable)	
Business add	dress (if different from hor	ne address)				
rincipal bu	siness activity		Date business started		Date business closed	i
rincipal pro	oduct or service					
			siness activity to realize a profit?			
Yes No	Did you materially pa	articipate (inv	olved in a regular, continuous, and substantia	al basis) in	the operation of this b	ousiness?
Yes No	Has the business repo	orted any losse	es in prior years?			
ccounting	method: Cash Ad	crual Oth	er (specify)			
Yes No	Does the business file	under a caler	ndar year? (If no, list the fiscal year.)			
ole Propri	etor Specific Question	IS .				
Yes No			or business services?			
Yes No			00 or more to subcontractors, attorneys, accou	ıntants, dir	ectors, etc.?	
			C? List name and social security number (SSN) f			600 or more.
	Name				SSN	
	Name				SSN	
Yes No	Did you make, or do	you plan to m	ake, any contributions to a self-employed ret	irement pl	an?	
	Type of plan				Amount contributed	\$
Yes No		own health/o	dental insurance? If Yes, provide amount of pren	iiums paid	during the year.	\$
Yes No						
Yes No			ctions in 2023?			
Yes No			n Program (PPP) loan that was forgiven in 20	23?		
ole Propri	etor Business Income					
		Forms 1099-N	IEC or 1099-K, list name of payer and amount sep	arately fron	n gross receipts or sales)	\$
Form 1099		\$			\$	
	forms 1099-NEC and 109	99-K received				\$
otal of all F	Forms 1099-NEC and 109		liscounts or reductions in selling price)			\$ \$(
Total of all F Returns (cas	h or credit refunds) and	allowances (c	liscounts or reductions in selling price)			\$ \$(\$
Total of all F Returns (cas Other incom	th or credit refunds) and ne (not included in gross re NEC. You may receive F	allowances (c eceipts above) Form 1099-NE	C (instead of Form W-2) if you are not classi	fied as an	employee. If you rece	\$ (\$ eive Form 109
Total of all F Returns (cas Other incom Form 1099-N NEC, you ar	th or credit refunds) and ne (not included in gross re NEC. You may receive F	allowances (c eceipts above) Form 1099-NE file Schedule	C (instead of Form W-2) if you are not classi C, Profit or Loss From Business, claim any exp	fied as an enses asso	employee. If you rece	\$ (\$ eive Form 109
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Depreciation. Depreciation is the annual deduction that allows you to recover the cost or other basis of your business property over a certain number of years. Depreciation starts when you first use the property in your business. It ends when you either take the property out of service, deduct all your depreciable cost or basis, or no longer use the property in your business. The IRS has outlined a useful life (a set number of years) for most assets.

Equipment Sold or Disposed of During	Year		ure de Arel <u>e de Colon</u> Al colonia de L <u>uis de Colonia de</u>	
Asset	Date out of service	Date sold	Selling price/FMV	Trade-in?
			\$	
			\$	
			\$	
			\$	

Disposition of Property. A disposition of property occurs when you sell property for cash or other property, you exchange property for other property, you transfer property to satisfy a debt, you abandon property, your bank forecloses or repossesses your property, or your property is damaged, destroyed, or stolen and you receive property or money in payment.

Business Use of the Home

Area of home must be used regularly and exclusively for business except for storage or daycare.

Note: Managing rental activities or investments does not qualify for business use of the home.

All Taxpayers	For Daycare Only	
A) Business use area (square footage)	1) Hours used for daycare	
B) Total area of home (square footage)	2) Total hours in year	8,760 hrs.

Enter below only the expenses paid during the period the home was used for business.

Direct expenses benefit only the business use portion of the home. This includes painting or repairs exclusively for the business area.

Indirect expenses are for keeping up and running the entire home, such as mortgage interest and property taxes.

If you bought or sold your home during 2023, copy this worksheet and fill out one for each home.

	Direct	Indirect		Direct	Indirect
Mortgage interest	\$	\$	Repairs and maintenance	\$	\$
Property taxes	\$	\$	Utilities	\$	\$
Insurance	\$	\$	Other	\$	\$
Rent	\$	\$	Other	\$	\$
Depreciation of the Home					
Lower of cost or fair market	value of home	\$	Improvements?	Yes No)
Value of land		\$	Casualty losses in 2023?	Yes No)

1) Exclusive Use Test—Business Use of Home

The exclusive use test is met if an area of the home is used only for business. The area can be a room or other separately identifiable space. The space does not need to be marked off by a permanent partition. This test is not met if you use the area both for business and for personal purposes, such as a den used for business during the day and TV viewing during the evening.

The exclusive use test is not required for:

- An area used on a regular basis for storage of inventory or product samples.
- A home used as a daycare facility.

Storage of inventory or product samples—exception to exclusive use test. If you use part of a home for business to store inventory or product samples, you are not required to meet the exclusive use test. However, you must meet all the following tests.

- You are in the business of selling products at wholesale or retail.
- The inventory or product samples are kept in the home for use in the business.
- You home is the only fixed location of the business.
- The storage space is used on a regular basis.
- The storage space is a separately identifiable space suitable for storage.

2) Regular Use Test—Business Use of Home

The regular use test means you must use a specific area of the home for business on a regular basis. Incidental or occasional business use is not regular use. All facts and circumstances are considered in determining whether the business use is regular.

3) Trade or Business Use Test—Business Use of Home

To satisfy the trade or business use test, the portion of the home used for business must be used in connection with a trade or business. If the business use is for a profit-seeking activity that is not a trade or business, the deduction is not allowed.

4) Principal Place of Business Test—Business Use of Home

A trade or business can have more than one location. To qualify for a business use of home deduction, the home must be the principal place of business for that trade or business. To make this determination, the following are considered.

- The relative importance of the activities performed at each place where business is conducted, and
- The amount of time spent at each place where business is conducted.

A home office qualifies under this test if:

- The home office is used exclusively and regularly for administrative or management activities of the trade or business.
- There is no other fixed location where substantial administrative or management activities are conducted.

Self-Employment (SE) Tax

- SE tax is a Social Security and Medicare tax primarily for individuals who are self-employed. It is similar to the Social Security and Medicare tax withheld from the pay of most wage earners. Your payments of SE tax contribute to your coverage under the Social Security system. Social Security coverage provides you with retirement benefits, disability benefits, survivor benefits, and hospital insurance (Medicare) benefits.
- You must pay SE tax if your net earnings from self-employment were \$400
 or more, or you had church employee income of \$108.28 or more. The SE
 tax rules apply no matter how old you are and even if you are already
 receiving Social Security or Medicare benefits.
- The SE tax rate on net earnings is 15.3% (12.4% for Social Security plus 2.9% for Medicare). Only the first \$160,200 (2023) of combined wages, tips, and net earnings is subject to the 12.4% Social Security part of SE tax.

contractors, provide copies of Form 1099-NEC issued.

requirements.

· If any shareholders live in a different state or outside the United

States, provide details. The corporation may be subject to withholding

Provide a copy of the depreciation schedules for book, tax, and AMT.

• Provide copies of returns for the last two years, including state returns.

• Enclose a copy of IRS Form 2553, Election by a Small Business Corporation,

and IRS acceptance.

S Corporation Balance Sheet Corporation assets at year	end		Cornoration del	nts and equity at year	end	
Bank account end of year balance	\$	Accou	ints payable at year end	with copiety at year	\$	
Accounts receivable at end of year	\$		les less than one year		\$	
Inventories	\$		les more than one year		\$	
Loans to shareholders	\$		ages, notes payable		s	
Mortgages and loans held by corporation	\$		from shareholders		\$	
Stocks, bonds, and securities	\$		al stock (common)	· · · ·	\$	
Other current assets (include list)	\$		ned earnings		\$	
S Corporation Income (include all Forms 1099		Netaix	ica carrintgo			
Gross receipts or sales	\$	Divid	end income (include all 10	00 DIV Forms	s	
Returns and allowances	\$(\$	
Interest income (include all 1099-INT Forms)	\$) Capital gain/loss (include all 1099-B Forms) Other income (loss) (include a statement)			
					\$	
S Corporation Cost of Goods Sold (for manu				goods)		
Inventory at beginning of the year	\$		ials and supplies		\$	
Purchases	\$	Invent	tory at the end of the year	· · ·	\$	
Cost of labor	\$					
S Corporation Expenses					<u> </u>	
Advertising	\$		- business		\$	
Annual corporation fees	\$		supplies		\$	
Bad debts	\$		ization costs		\$	
Bank charges	\$		on and profit sharing plar		\$	
Business licenses	\$		on and profit sharing plar		\$ \$	
Cleaning/janitorial	\$		Professional education and training			
Commissions and fees	\$	Rent or lease - car, machinery, equipment			\$	
Compensation of officers	\$	Rent or lease – other business property			\$	
Contract labor (include Forms 1099-NEC)	\$	Rent paid			\$	
Employee benefit programs	\$		rs and maintenance		\$	
Entertainment (not deductible)	\$		es and wages (include For	ns W-2)	\$	
Health care plans – employee	\$		– payroll		\$	
Health care plans – shareholder	\$		property		\$	
Insurance (other than health insurance)	\$		– sales		\$	
Interest – business credit cards	\$	Teleph			\$	
Interest – business loans/credit lines	\$	Utilitie	• • • •		\$	
Interest – mortgage	\$	Other	expense		\$	
Internet service	\$		expense		\$	
Legal and professional services	\$	Other	expense		\$	
Car Expenses (use a separate form for each ve	hicle)				A SANT	
Make/Model			Date car placed in serv	ice		
Yes "No Car available for personal use	during off-duty ho	ours?				
Yes No Do you (or your spouse) have	any other cars for	personal use?	Did you trade in your	car this year? Yes	No	
Yes No Do you have evidence?			Cost of trade-in	Trade-in value	2	
Yes No Is your evidence written?			\$	\$		
Mileage				Actual Expenses		
Beginning of year odometer			Gas/oil	\$		
End of year odometer			Insurance	\$		
Business mileage			Parking fees/tolls	\$		
Commuting mileage			Registration/fees	\$		
Community mileage					\$	

then choose between either the standard mileage rate method or actual expenses.

Equipment Purchases — Enter the following information for depreciable assets purchased that have a useful the greater than one year					
Asset	Date purchased	Cost	Date placed in service	New or used?	
		\$			
		\$			
		\$		•	
		\$			

Asset					Date out of service	Date sold	Selling price/FMV	Trade-in	
10001							\$		
							\$		
							\$		
							\$		
S Corp	oratio	n Business Credits	(if answered Yes fo	r any of the below,	please provide a state	ment with details,)		
Yes	No								
Yes	No	Did the corporation							
Yes	No	Did the corporation	own any residen	tial rental buildin	gs providing qualifi	ed low-income he	ousing?		
Yes	No	Did the corporation	incur any researc	ir any research and experimental expenditures during the tax year?					
Yes	No	Did the corporation	have employer p	ension plan start-					
Yes	No	Did the corporation	pay health insura	ance premiums fo	r employees?	Total number of	employees		
Yes	No	Did the corporation	purchase and pla	ice in service any	electric vehicles or e	nergy efficient co	mmercial building pro	perty?	
State E	stima	ted or Pass-Throug	h Entity (PTE) Ta	x Payments—Ta	x Year 2023			•	
State			Amount	Date Paid	State		Amount	Date Paid	
			\$				\$		
			\$				\$		
			\$			·	\$		
			\$				\$,	

iax keturn Preparation

We will prepare the corporation's tax return based on information provided. In the event the return is audited, you will be responsible for verifying the items reported. It is important that you review the return carefully before signing to make sure the information is correct. Unless otherwise stated, the services for preparation of the corporation's return do not include auditing, review, or any other verification or assurance.

Taxpayer Responsibilities

- · You agree to provide us all income and deductible expense information. If additional information is received after we begin working on the return, you will contact us immediately to ensure the completed tax returns contain all relevant information.
- You affirm that all expenses or other deduction amounts are accurate and that you have all required supporting written records. In some cases, we will ask to review documentation.
- You must be able to provide written records of all items included on the return if audited by either the IRS or state tax authority. We can provide guidance concerning what evidence is acceptable.
- You must review the return carefully before signing to make sure the information is correct.
- · Fees must be paid before the tax return is delivered to you or filed for you. If you terminate this engagement before completion, you agree to pay a fee for work completed. A retainer may be required for preparation of returns.
- Keep a copy of the tax return and any related tax documents. You may be assessed a fee if you request a duplicate copy in the future.

Signatures. By signing below, you acknowledge that you have read, understand, and accept your obligations and responsibilities.

Taxpayer	Title	Date	
	San Control of the Co		

Privacy Policy

The nature of our work requires us to collect certain nonpublic information. We collect financial and personal information from applications, worksheets, reporting statements, and other forms, as well as interviews and conversations with our clients and affiliates. We may also review banking and credit card information about our clients in the performance of receipt of payment. Under our policy, all information we obtain about you will be provided by you or obtained with your permission.

Our firm has procedures and policies in place to protect your confidential information. We restrict access to your confidential information to those within our firm who need to know in order to provide you with services. We will not disclose your personal information to a third party without your express written permission, except where required by law. We maintain physical, electronic, and procedural safeguards in compliance with federal regulations that protect your personal information from unauthorized access.

2023 Paid Preparer Due Diligence Checklist

- Earned Income Credit (EIC)
 American Opportunity Credit (AOC)
 Child Tax Credit (CTC)
- Additional Child Tax Credit (ACTC)Credit for Other Dependents (ODC)
- Head of Household (HOH)

	EIC	AOC	CTC/ACTC/ODC	нон
Can you provide documentation, if required, to substantiate your eligibility for each credit and/or HOH filing status and the amount of each credit being claimed? (See below for examples of documentation.)	□Yes □No □n/a	☐ Yes ☐ No ☐ n/a	□Yes □No □n/a	☐ Yes ☐ No ☐ n/a
	EIC	AOC	CTC/ACTC/ODC	НОН
Were any of these credits disallowed or reduced in a prior year?	□Yes □No □n/a	□Yes □No □n/a	□Yes □No □n/a	□n/a
	EIC	AOC	CTC/ACTC/ODC	НОН
Is each qualifying person for whom you are claiming the Child Tax Credit, Additional Child Tax Credit, and Credit for Other Dependents a citizen, national, or resident of the United States?	□n/a	□n/a	☐Yes ☐ No ☐n/a	□n/a
Did all children for whom you are claiming the Child Tax Credit and/or Additional Child Tax Credit reside with you for more than half the year?	□n/a	□ n/a	□Yes □No □n/a	□n/a
Is there an active Form 8332, Release/Revocation of Release of Claim to Exemption for Child by Custodial Parent, or a similar statement in place?	□n/a	□n/a	□Yes □No □n/a	□n/a
Did you release the claim for exemption (dependent) to another person?	□n/a	□ n/a	☐Yes ☐ No ☐n/a	n/a
	EIC	AOC	CTC/ACTC/ODC	нон
Have you provided documentation for the American	□n/a	☐Yes ☐ No	□n/a	□n/a
Opportunity Credit, including Form 1098-T and/or receipts for qualified tuition and related expenses?		□n/a		
Opportunity Credit, including Form 1098-1 and/or receipts for qualified tuition and related expenses?	EIC	□ n/a AOC	CTC/ACTC/ODC	НОН
Opportunity Credit, including Form 1098-1 and/or receipts for qualified tuition and related expenses? Were you unmarried or considered unmarried on the last day of the tax year and provided more than half of the cost of keeping up a home for the year for a qualifying person?	EIC		CTC/ACTC/ODC	HOH ☐ Yes ☐ No ☐ n/a
Were you unmarried or considered unmarried on the last day of the tax year and provided more than half of the cost of keeping up a home for the year for		AOC	 	☐Yes ☐No
Were you unmarried or considered unmarried on the last day of the tax year and provided more than half of the cost of keeping up a home for the year for a qualifying person?		AOC n/a ualifying r's statement. are provider's agency or nent.	 	Yes No n/a n/a s receipts. come. comes. comeses. comeses.
Were you unmarried or considered unmarried on the last day of the tax year and provided more than half of the cost of keeping up a home for the year for a qualifying person? Documentation Examples (list not all-inclusive) Residency of a Qualifying Child School records or statement. Landlord or a property management statement. Health care provider statement. Medical records. Child care provider records. Placement agency statement. Social service records or statement. Place of worship statement.	Disability of Q Child • Medical doctor • Other health constatement. • Social services program states	AOC n/a ualifying r's statement. are provider's agency or ment.	Schedule C Business license Forms 1099. Records of gross Summary of inc Records of expe Summary of expe Summary of expe	Yes No n/a n/a s receipts. come. comes. comeses. comeses.
Were you unmarried or considered unmarried on the last day of the tax year and provided more than half of the cost of keeping up a home for the year for a qualifying person? Documentation Examples (list not all-inclusive) Residency of a Qualifying Child School records or statement. Landlord or a property management statement. Health care provider statement. Medical records. Child care provider records. Placement agency statement. Social service records or statement. Place of worship statement. Indian tribal official statement. Due Diligence: Additional Questions and Information is false.	Disability of Q Child Medical doctor Other health constatement. Social services program states tion (list not all-income) Do not ignore the client and mincorrect.	AOC n/a n/a ualifying r's statement. are provider's agency or ment. lusive te implications of ake additional in ubmit Form 8867	Schedule C Business license Forms 1099. Records of gross Summary of inc Records of expe Summary of expe Summary of expe	Yes No n/a 's receipts. Tome. The series of the series