Roberta Motter

PO Box 275 Flagstaff, AZ 86002 roberta@robertamotter.com Phone: (928)853-6056 | Fax: (928)563-0605

Phone: (928)853-6056 Fax: (928)563-0605
January 03, 2024
Blank Tax Organizer for 2023
Blank:
Income tax time is just around the corner! The enclosed packet has been prepared to assist you in gathering information for your 2023 tax return. Review the entire packet and answer any questions that apply.
Bring this packet and all supporting documents, including W-2 and 1099 statements, to your tax-preparation appointment. We appreciate your trust in our business. Contact our office at (928)853-6056 if you have any questions or need additional information. We appreciated the opportunity to prepare your 2022 individual tax return and look forward to working with you again this year.
Sincerely,
Roberta Motter Roberta Motter

Roberta Motter

PO Box 275 Flagstaff, AZ 86002 roberta@robertamotter.com Phone: (928)853-6056 | Fax: (928)563-0605

	J	anuary	03.	2024
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Blank Tax Organizer for 2023

Your privacy is important to us. Read the following privacy policy.

We collect nonpublic personal information about you from various sources, including:

- * Interviews regarding your tax situation
- * Applications, organizers, or other documents that supply such information as your name, address, telephone number, Social Security Number, number of dependents, income, and other tax-related data
- * Tax-related documents you provide that are required for processing tax returns, such as Forms W-2, 1099R, 1099-INT and 1099-DIV, and stock transactions

We do not disclose any nonpublic personal information about our clients or former clients to anyone, except as requested by our clients or as required by law.

We restrict access to personal information concerning you, except to our employees who need such information in order to provide products or services to you. We maintain physical, electronic, and procedural safeguards that comply with federal regulations to guard your personal information.

If you have any questions about our privacy policy, contact our office at (928)853-6056.

Sincerely,

Roberta Motter Roberta Motter

Roberta Motter

PO Box 275 Flagstaff, AZ 86002 roberta@robertamotter.com Phone: (928)853-6056 | Fax: (928)563-0605

January 03, 2024

Blank Tax Organizer for 2023

Subject: Preparation of Your 2023 Tax Returns

Blank Tax Organizer for 2023:

Thank you for choosing Roberta Motter to assist you with your 2023 taxes. This letter confirms the terms of our engagement with you and outlines the nature and extent of the services we will provide.

We will prepare your 2023 federal and state income tax returns. We will depend on you to provide the information we need to prepare complete and accurate returns. We may ask you to clarify some items but will not audit or otherwise verify the data you submit. An Organizer is enclosed to help you collect the data required for your return. The Organizer will help you avoid overlooking important information. By using it, you will contribute to the efficient preparation of your returns and help minimize the cost of our services.

We will perform accounting services only as needed to prepare your tax returns. Our work will not include procedures to find defalcations or other irregularities. Accordingly, our engagement should not be relied upon to disclose errors, fraud, or other illegal acts, though it may be necessary for you to clarify some of the information you submit. We will inform you of any material errors, fraud, or other illegal acts we discover.

The law imposes penalties when taxpayers underestimate their tax liability. Call us if you have concerns about such penalties.

Should we encounter instances of unclear tax law, or of potential conflicts in the interpretation of the law, we will outline the reasonable courses of action and the risks and consequences of each. We will ultimately adopt, on your behalf, the alternative you select.

Our fee is based on the time required at standard billing rates plus out-of-pocket expenses. Invoices are due and payable upon presentation. All accounts not paid within thirty (30) days are subject to interest charges to the extent permitted by state law.

We will return your original records to you at the end of this engagement. Store these records, along with all supporting documents, in a secure location. We retain copies of your records and our work papers from your engagement for up to seven years, after which these documents will be destroyed.

If you have not selected to e-file your returns with our office, you will be solely responsible to file the returns with the appropriate taxing authorities. Review all tax-return documents carefully before signing them. Our engagement to prepare your 2023 tax returns will conclude with the delivery of the completed returns to you, or with e-filed returns, with your signature and our subsequent submittal of your tax return.

To affirm that this letter correctly summarizes your understanding of the arrangements for this work, sign the enclosed copy of this letter in the space indicated and return it to us in the envelope provided.

Thank you for the opportunity to be of service. If you have any questions, contact our office at (928)853-6056.

Sincerely,

Roberta Motter
Roberta Motter
(Both spouses must sign for preparation of joint returns.)
Accepted By:
Taxpayer
Тихрије
Spouse
Spoul.
Date

Checklist

Name: Blank Tax Organizer for 2023 SSN: ***_***

Checkl	st	
		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.)
1	1	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)
[]	Gambling income (Form W2-G)
[]	IRA distributions, pensions, and annuities (Form 1099-R)
[]	Dividend income (Form 1099-DIV)
[]	Interest income (Form 1099-INT)
_	j	Miscellaneous income (Form 1099-MISC)
_	j	Nonemployee compensation (Form 1099-NEC)
_	j	Unemployment compensation and other government payments (Form 1099-G)
_	i	Credit card, debit card, and third-party network transactions (Form 1099-K)
Ī	j	Reportable payment transactions
_	i	Social Security benefits (Form SSA-1099)
	j	Railroad retirement benefits (Form RRB-1099)
_	j	Income from partnerships, S corporations, estates, and trusts (Schedule K-1)
•	•	[] Basis information for any partnerships and S corporations
Γ	1	Documentation of brokerage transactions and disposition of capital assets (Form 1099-B)
	i	Proceeds from real estate transactions (Form 1099-S)
	i	Self-employed business income (Schedule C)
	i	Farm income (Schedule F)
]	Farm rental income (Form 4835)
]	Income from rental real estates and royalties (Schedule E)
ı	J	moone nonventariour ostates and royalites (our totale L)
		me (provide supporting documentation for income received for the following items)
_		Sale of assets or property
[]	Cancellation of debt
[]	Other income
Paymen	ts ((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
Ī]	Real estate taxes
Ī	1	Other state and local taxes

2023	Checklist		
Name: Blanl	x Tax Organizer for 2023	SSN:	***_**_***
Checklist			
	Mortgage interest		
[]	Investment interest		
[]	Cash contributions		
[]	Noncash contributions (provide organization name) Unreimbursed employee expenses		
[]	Investment expenses		
[]	Gambling losses		
[]	Other payments		

	Questionnaire	
Name: Blank Tax	Organizer for 2023	SSN: ***_***
Questionnaire		
Personal Inform Yes No	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 you live apart for the last six months of 2023?	r spouse
[][]	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 pho	oto ID)
		•
Dependent Info	ermation	
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 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	2 500 of
[][]	unearned income?	.,500 01
Provide	documentation for proof of dependent credits (school records, medical records, daycare	records, etc.)
Health Care Inf	ormation	
Yes No		
[][]	Did any member of your household have healthcare coverage through the Marketplace (Obar If "Yes," provide copies of Form 1095-A.	,
[][]	Did you receive any distributions from a Health Savings Account (HSA), Archer MSA, or Medi MSA during the year?	care Advantage
Income, Purcha	ases, 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? If "Yes," provide the cost of the asset, the date it was placed in service, and the business upercentage.	use
[][]	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?	

Questionnaire

Name: Rlank Tay Organizar for 2023

Harrie Blank rax (organizer for 2023
Questionnaire	
[][]	Did you rent out your home or use it for business?
[][]	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?
[][]	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.
[][]	Did you receive income or incur expenses associated with a fantasy sports 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, VRBO or
	HomeAway)?
	If "Yes," provide documentation.
[][]	Did you receive income or incur expenses as an independent contractor (e.g., Shipt, Instacart, DoorDash)?
1111	If "Yes," provide documentation.
1111	Did you receive any other income you have not provided information for with this organizer?
[][]	
	If "Yes," explain
	tion 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?
[][]	Did you work out or town at any time during the year:
Datiram ant lafe	emotion
Retirement Info	IIIaliUII
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
	· · · · · · · · · · · · · · · · · · ·
	renrement plan outpourde vear?
[][]	retirement plan during the year? Did you receive any Social Security benefits during the year?

Questionnaire

Name: Blank Tax (Organizer for 2023 SSN: ***_***
Questionnaire	
Questionnune	
Education Inform	mation
Yes No	
[][]	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
1111	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	rmation
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 have ownership in a foreign corporation at any time during the year?
[][]	Did you own property in a foreign country?
[][]	Did you own property in a foreign country:
Refund, Withhol	ding, 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 li	nformation
Yes No	normation
[][]	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?

2023			Page 6
	Questionnaire		
Name: Blank Tax	Organizer for 2023	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 printe	d copy	?
Preparer Notes			

2023 Tax Organizer Personal Information

Persona	al Informatio	n								
		Name			5	SSN	Has IP PIN	Date	of Birth	
Taxpayer	Blank Tax O	rganizer for 2023				***_**_***				
Spouse										
Name of pe	erson to whom all i	nformation should be addressed, i	f not the taxpayer							
Street add	dress, city, state,	and ZIP								
	1	Occupation		Daytime Phone	Evening	g Phone		Cell P	hone	
Taxpayer										
Spouse										
Taxpayer	email									
Spouse er	mail									
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 2023 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 Photo ID number										
tate phot	o ID was issued	d		State photo ID was issued	d					
ate photo	o ID was issued	·		Date photo ID was issued	d					
ate photo	o ID expires			Date photo ID expires						
Account Information for Deposits and Withdrawals										
	Nam	ne of Bank	Bank Routing Number	Bank Account Number	Type of A	Type of Account			Account for Withdrawals	
					Onecking	Savings	Бер	Joilo	withurawals	
Appointment Information										
Your 2023 appointment is scheduled for										
10ur 2023	appointment is									

Dependent and Other Information

lame: Blank Tax Organize	r for 2023						SSN:	***_**	
Dependent Information	n								
First and Last Name SSN		Has IP PIN	Relationship	Months in Home	Date of Birth	Disabled	Full- time Student	Childcare Expenses	
st dependents required to fi	· 								
Child and Other Deper	ndent Care Expe	nses				T			
Name of Care Provider			Address			SSN or E	IN	Amount Paid	
Estimates									
	Fed	deral	Reside	ent State		Resident		City	
verpayment applied om 2022	Date Paid	Amount	Date Paid		Amount	Date Paid		Amount	
rst quarter									
econd quarter									
nird quarter			_						
ourth quarter			_	_					
dditional payments			_	_					

Income					
Name: Blank Tax Organizer for 2023	SSN: ***_***				
Wages & Salaries					
Provide all copies of Form W-2	2023 Federal				
TS Employer Name	Wages				
•					
Retirement					
Provide all copies of Form 1099-R					
TS Payer Name	2023 Distribution				
Yes No Did you take a distribution from an IRA and give it to an organization eligible to re	ceive tax-deductible contributions?				
Yes No Did you use any of the distributions for disaster relief?					

orm 1099-MISC Income ovide all copies of Form 1099-MISC Payer Name Payer Na		Income	
orm 1099-MISC Income wide all copies of Form 1099-MISC Payer Name Payer Name Amou Payer Name Pay	ne: Blank Tax Organizer for 2023		SSN: ***_**_
ovide all copies of Form 1099-MISC Payer Name Payer Name Amou Payer Name			
Payer Name Amou The state of			2002
ovide all copies of Form 1099-NEC 2023		Payer Name	2023 Amour
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Payer Name Payer Name 2023 Amou	vide all copies of Form 1099-NEC		
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	Blank Tax Organizer for 2023		
	end Income		
viae	all copies of Form 1099-DIV and other statements that report dividend income. Account Number	2023 Ordinary	2023 Qualified
J	Payer Name	Dividends	Dividend
_			
_			
_			
			
-			
_			
_			
_			
_			
_			
	est Income		
	all copies of Form 1099-INT, Form 1099-OID, and other statements that report interest income. Account Number		2023
	all copies of Form 1099-INT, Form 1099-OID, and other statements that report interest income.		
	all copies of Form 1099-INT, Form 1099-OID, and other statements that report interest income. Account Number		
	all copies of Form 1099-INT, Form 1099-OID, and other statements that report interest income. Account Number		
	all copies of Form 1099-INT, Form 1099-OID, and other statements that report interest income. Account Number		
	all copies of Form 1099-INT, Form 1099-OID, and other statements that report interest income. Account Number		
	all copies of Form 1099-INT, Form 1099-OID, and other statements that report interest income. Account Number		
	all copies of Form 1099-INT, Form 1099-OID, and other statements that report interest income. Account Number		2023 Interes
	all copies of Form 1099-INT, Form 1099-OID, and other statements that report interest income. Account Number		
	all copies of Form 1099-INT, Form 1099-OID, and other statements that report interest income. Account Number		
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	all copies of Form 1099-INT, Form 1099-OID, and other statements that report interest income. Account Number		
	all copies of Form 1099-INT, Form 1099-OID, and other statements that report interest income. Account Number		
	all copies of Form 1099-INT, Form 1099-OID, and other statements that report interest income. Account Number		

Sale of Capital Assets

Name: Blank Tax Organizer for 2023			SSN	: ***_**_***
Sale of Capital Assets (including items not re	eported on Form 1099-B)			
Provide all brokerage statements	Date	Date	Sales	
TSJ Description of Property	Purchase	d Sold	Price	Cost
		<u> </u>		
				-
			_	
			_	-
				-
Installment Sale Income				
SJ Description of property:				
Date acquired Dat	e sold		2023	Prior Years
Selling price				
Mortgages assumed				
Cost of property sold				
Depreciation allowed				
Commissions and expense of sale		_		
Gross profit percentage		_		
nterest received		_		
		_		
Property was sold to a related party				

Other Income and Adjustments

Other Income		
	2023	2023
	Taxpayer	Spouse
ocial Security Benefits (attach Forms 1099-SSA)		
ailroad Retirement Benefits (attach Forms 1099-RRB)	·	
tate income tax refund (attach Forms 1099-G)	•	-
limony received Divorce or separation date Amount		
Inemployment compensation (attach Forms 1099-G)		
Inemployment compensation repaid in 2023	.	
ambling winnings (attach Forms W2-G)		
laska Permanent Fund		
ury duty pay	·	
BLE distributions	·	
cholarships or grants not reported on Form W-2		
		· -
cholarships or grants not reported on Form W-2	_	
	2023	2023
Other income:	2023 Taxpayer	
adjustments	2023 Taxpayer	2023 Spouse
ducator expenses (If you are an educator, enter the amount you paid for classroom supplies)	2023 Taxpayer	2023 Spous
ducator expenses (If you are an educator, enter the amount you paid for classroom supplies) contributions made to a Health Savings Account (HSA) ayments made for Self-Employed Health Insurance for you, your spouse, or dependents limony paid	2023 Taxpayer	2023 Spous
ducator expenses (If you are an educator, enter the amount you paid for classroom supplies) contributions made to a Health Savings Account (HSA) ayments made for Self-Employed Health Insurance for you, your spouse, or dependents	2023 Taxpayer	2023 Spous
ducator expenses (If you are an educator, enter the amount you paid for classroom supplies) contributions made to a Health Savings Account (HSA) ayments made for Self-Employed Health Insurance for you, your spouse, or dependents Name	2023 Taxpayer	2023 Spous
ducator expenses (If you are an educator, enter the amount you paid for classroom supplies) contributions made to a Health Savings Account (HSA) ayments made for Self-Employed Health Insurance for you, your spouse, or dependents Name SSN Divorce or separation date	2023 Taxpayer	2023 Spous
ducator expenses (If you are an educator, enter the amount you paid for classroom supplies) contributions made to a Health Savings Account (HSA) ayments made for Self-Employed Health Insurance for you, your spouse, or dependents Name SSN Divorce or separation date Name	2023 Taxpayer	2023 Spous
ducator expenses (If you are an educator, enter the amount you paid for classroom supplies) contributions made to a Health Savings Account (HSA) ayments made for Self-Employed Health Insurance for you, your spouse, or dependents limony paid Name SSN Divorce or separation date SSN Divorce or separation date	2023 Taxpayer	2023 Spous
digustments ducator expenses (If you are an educator, enter the amount you paid for classroom supplies) contributions made to a Health Savings Account (HSA) ayments made for Self-Employed Health Insurance for you, your spouse, or dependents limony paid Name SSN Divorce or separation date SSN Divorce or separation date contributions made to a Self-Employed Pension plan (SEP), SIMPLE, or Solo 401K	2023 Taxpayer	2023 Spous
ducator expenses (If you are an educator, enter the amount you paid for classroom supplies) contributions made to a Health Savings Account (HSA) ayments made for Self-Employed Health Insurance for you, your spouse, or dependents limony paid Name SSN Divorce or separation date 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)	2023 Taxpayer	2023 Spous
ducator expenses (If you are an educator, enter the amount you paid for classroom supplies) contributions made to a Health Savings Account (HSA) ayments made for Self-Employed Health Insurance for you, your spouse, or dependents limony paid Name SSN Divorce or separation date 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)	2023 Taxpayer	2023 Spous
ducator expenses (If you are an educator, enter the amount you paid for classroom supplies) contributions made to a Health Savings Account (HSA) ayments made for Self-Employed Health Insurance for you, your spouse, or dependents limony paid Name SSN Divorce or separation date 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)	2023 Taxpayer	2023 Spous

Schedule C - Profit or Loss from Business			
Name: Blank Tax Organizer for 2023	SSN:	***_**	
General Business Information			
TS Professional product or service	Employer ID number		
Business name			
Business address, city, state, ZIP			
Accounting Method: Cash Accrual Other (specify)			
☐ This business started or was acquired during 2023. ☐ The start of t	nis business was disposed of during 2023.		
	ewspaper delivery and you are under 18 years of age clergy		
Yes No Payments of \$600 or more were paid to an individual, who is not you If "Yes," did you file Forms 1099 for the individuals?	our employee, for services provided for this business.		
Did you receive a Paycheck Protection Program (PPP) loan for this If 'Yes," was any portion of the loan forgiven in 2023?	s business prior to June 1, 2021?		
Income			
2023 Gross receipts or sales	Other income	2023	
Returns & allowances	<u>-</u>		
Expenses			
2023		2023	
Advertising	Repairs & maintenance		
Car & truck expenses	Supplies		
Commissions & fees	Taxes & licenses		
Contract labor	Travel		
Depletion	Total meals		
Employee benefit programs	Utilities · · · · · · · · · · · · · · · · · · ·		
Insurance (other than health)	Wages		
Interest - mortgage	Family health coverage payments for taxpayer, spouse or dependents		
Interest - other	Other expenses (list)		
Legal & professional services			
Office expenses			
Pension & profit-sharing plans			
Rent (other business property)			
Cost of Goods Sold			
2023		2023	
Inventory at beginning of year	Materials & supplies		
Purchases	Other costs		
Cost of personal use items	Inventory at end of year		
Cost of labor	There was a change in inventory method.		

Schedule E - Income or Loss from Rental Real Estate & Royalties					
Name: Blank Tax Organizer for 2023			SSN: ***_***		
General Property Information					
TSJ Property description					
Address, city, state, ZIP					
Select the property type Single family residence Multi-family residence Commercial Number of days property was rented If the rental is a multi-dwelling unit and you occupied part of the This property was placed in service during 2023. This property was disposed of during 2023. This property is your main home or second home. This property was owned as a qualified joint venture.	Number of days p	No Payments of \$600 or m not your employee, for s	Self-rental Other use ore were paid to an individual, who is services provided for this rental. Forms 1099 for the individuals?		
Income					
income	2023		2023		
Rent income		Royalties from oil, gas, mineral, copyright or patent	· · · · · · · · · · · · · · · · · · ·		
Expenses		. ,, ,			
	Rental Unit Expenses	Rental <u>and</u> Homeowner Expenses			
Advertising Auto & travel Cleaning & maintenance Commissions Insurance Legal & professional fees Management fees Mortgage interest			If this Schedule E is for a a multi-unit dwelling and you lived in one unit and rented out the other units, use the "Rental and homeowner expenses" column to show expenses that apply to the entire property. Use the "Rental unit expenses" column to show expenses that pertain ONLY to the rental portion of the property.		
Other interest			If the Schedule E is not for a multi-unit property in which you lived in one unit, complete just the "Rental unit expenses"		
Taxes			column.		
Utilities					
Depletion					

Income or Loss from Investments in Partnerships, S Corporations, and Fiduciaries

Name:	Blank Tax Organizer for 2023	SN:	***_**_***
Sche	dule K-1 from Partnerships, S Corporations, Estates and Trusts		
Provide	e all copies of Schedule K-1 and attachments		
TS	Entity Name		EIN
		_	
		_	
		_	
		_	

Schedule F - Profit or Loss from Farming			
Name: Blank Tax Organizer for 2023	SSN: ***_****		
General Information			
TS Principal product	Employer ID number		
Accounting method, if not cash: Accrual			
This farm was disposed of during 2023.			
Yes No Payments of \$600 or more were paid to an individual, who is not yo If "Yes," did you file Forms 1099 for the individuals? Did you receive a Paycheck Protection Program (PPP) loan for this If "Yes," was any portion of the loan forgiven in 2023?			
Income			
2023	2023		
Sale of livestock / other items	Custom hire income		
Cost of items bought for resale	Beginning inventory for accrual		
Sale of products you raised	Ending inventory for accrual		
Total cooperative distributions (Provide 1099-PATR)	You used unit-livestock-price or farm-price inventory method.		
Total agricultural payments	Other income		
CCC loans forfeited			
Expenses	2000		
2023	2023		
Car & truck expenses	Rent - other (land, animals, etc.)		
Chemicals	Repairs & maintenance		
Conservation expenses	Seeds & plants purchased		
Custom hire (machine work)	Storage & warehousing		
Employee benefit programs	Supplies purchased		
Feed purchased	Taxes		
Fertilizers & lime	Utilities		
Freight & trucking	Veterinary, breeding, & medicine • • • • • • • • Family health coverage payments		
Gasoline, fuel, & oil	for taxpayer, spouse or dependents		
Insurance (other than health)	Other expenses · · · · · · · · · · · · · · · · · ·		
Interest - mortgage (paid to banks, etc.)			
Interest - other			
Non-W-2 labor hired			
W-2 wages paid			
Pension & profit-sharing plans			
Rent - vehicles, machinery, & equipment			

Form 4835 - Farm	Rental Income and Expenses
Name: Blank Tax Organizer for 2023	SSN: ***_***
General Information	
TSJ Employer ID Number	
Description	
This farm was disposed of during 2023	
Income	
Income from production of livestock,	
produce, grains, & other crops	Crop insurance proceeds:
Total cooperative distributions	Amount received in 2023
Total agricultural payments	You elect to defer to 2024
Commodity Credit Corporation (CCC) loans:	Amount deferred from 2022
CCC loans reported	Other income
CCC loans forfeited	
Expenses 20:	2023
Car & truck expenses	Seeds & plants purchased
Conservation expenses	Storage & warehousing
•	Taxes
Custom hire (machine work)	
Employee benefit programs	Utilities
Feed purchased	Veterinary, breeding, & medicine
Fertilizers & lime	Other expenses (list)
Freight & trucking	
Gasoline, fuel, & oil	
Insurance (other than health)	
Interest - mortgage (paid to banks, etc.)	
Interest - other	
Labor hired (less jobs credit)	
Pension & profit-sharing plans	
Rent - vehicles, machinery & equipment	
Rent - other (land, animals, etc.)	
Repairs & maintenance	

Expenses	Related to Business
Name: Blank Tax Organizer for 2023	SSN: ***_**_*
Auto Expense	
Name of business vehicle is used for	
Description of vehicle	Date vehicle was placed in service
Yes No Was this vehicle available for use during off-duty hours' Was another vehicle available for personal use?	Yes No Do you have evidence to support your deduction? If "Yes," is the evidence written?
Mileage Number of miles the vehicle was driven during 2023	
Business	Other
Commuting · · · · · · · · · · · · · · · · · · ·	
Expenses	
Garage rent	Repairs
Gas	Tires
Insurance	Tolls
Licenses · · · · · · · · · · · · · · · · · ·	Lease addback · · · · · · · · · · · · · · · · · · ·
Oil • • • • • • • • • • • • • • • • • • •	Other expenses
Parking fees · · · · · · · · · · · · · · · · · ·	
Rental fees	
Interest	
Property tax	
Business Use of Home	
Name of business home is used for	
What is the total square footage of your home that was used regula	arly and exclusively for business?
What is the total square footage of your home?	
For daycare facilities not used exclusively for business, complete the	ue following questions
How many days during the year was the area used?	
How many hours per day was the area used?	<u>_</u>
The daycare facility was in operation for the entire year	
Expenses Office Mortgage interest	ce expenses Home expenses In the "Office expenses" column,
Real estate taxes	enter those expenses that pertain exclusively to your office;
Excess mortgage interest	pertain exclusively to your office,
Excess real estate taxes	enter those expenses that
Insurance	pertain to the entire dwelling.
Rent	
Repairs & maintenance	
Liebe	

	Household Employment		
Name: Blank	Tax Organizer for 2023	SSN:	***_**
TSJ	Employer Identification Number		
Yes No			
	Did you pay any one household employee cash wages of \$2,600 or more in 2023?		
	Did you withhold federal income tax during 2023 for any household employee?		
	Did you pay total cash wages of \$1,000 or more in any calendar quarter of 2022 or 2023 to all household employees	i?	
	Did you pay unemployment contributions to only one state?		
	Did you pay all state unemployment contributions for 2023 by April 15, 2024?		
	Were all wages that are taxable for FUTA tax also taxable for your state's unemployment tax?		2023
Total cash way	ges subject to Social Security tax		
	ges subject to Medicare tax • • • • • • • • • • • • • • • • • • •		
	ges subject to Additional Medicare tax withholding		
•	•		
	e tax withheld • • • • • • • • • • • • • • • • • • •		
	eave wages		
	y leave wages		
Qualified healt	h plan expenses	· · –	
TSJ	Employer Identification Number		
Yes No			
	Did you pay any one household employee cash wages of \$2,600 or more in 2023?		
	Did you withhold federal income tax during 2023 for any household employee?		
	Did you pay total cash wages of \$1,000 or more in any calendar quarter of 2022 or 2023 to all household employees	?	
	Did you pay unemployment contributions to only one state?		
	Did you pay all state unemployment contributions for 2023 by April 15, 2024?		
	Were all wages that are taxable for FUTA tax also taxable for your state's unemployment tax?		
			2023
	ges subject to Social Security tax		
	ges subject to Medicare tax		
	ges subject to Additional Medicare tax withholding		
	e tax withheld		
	eave wages		
	y leave wages		
Qualified healt	h plan expenses	• • –	

Schedule A - Itemized Deductions

Name: Blank Tax Organizer for 2023	SSN: ***_**	
Medical and Dental Expenses	Charitable Contributions	
Health insurance premiums (paid by you, not through work)	Donations to charity Cash Noncash Amount Church	
Amount above that is for Medicare premiums · · · · ·	Boy or Girl Scouts	_
Long-term care premiums (you)	Goodwill	_
Long-term care premiums (your spouse) · · · · · · · ·	Red Cross	
Long-term care premiums (dependents)	Salvation Army	
Mileage driven for medical purposes	United Way	
Out of pocket medical & dental expenses Doctor, dental, etc	Veterans	
Prescription medicines	Hospital	_
Glasses & contacts	University	_
Hearing aids	Other	_
Medical equipment & supplies	Miles driven for charitable purposes	_
Hospital services	Other Miscellaneous Deductions	
Laboratory services · · · · · · · · · · · · · · · · · · ·	Amortizable bond premiums	_
Nursing services · · · · · · · · · · · · · · · · · · ·	Federal estate tax	_
Other	Gambling losses · · · · · · · · · · · · · · · · · ·	_
Other	Impairment-related work expenses	_
	Claim repayments	_
Taxes Paid	Unrecovered pension investments	
State and local income taxes	Loss from other activities from Schedule K-1	_
General sales tax (vehicle, boat, home, etc.) • • • • • • • • • • • • • • • • • • •	Ordinary loss debt instrument	_
Real estate taxes	Excess deduction on termination	_
Personal property taxes	Job Expenses & Certain Miscellaneous Deductions Necessary job expenses you paid that were not reimbursed by your	
Other taxes (list)	employer Safety equipment, tools, & supplies	
·	Uniforms	_
	Protective clothing (shoes, hardhats, glasses, etc.)	_
Interest Paid	Dues to professional organizations	_
Home mortgage interest paid (attach Form 1098)	Books & subscriptions	_
Some of your home mortgage loan was not used to buy, build, or improve your home.	Other	_
Home mortgage interest paid to an individual	Union dues	_
Paid to: Name	Tax preparation fees	_
Address	Other nonpersonal expenses related to taxable income	_
City, State, ZIP	Safe deposit box fees	
SSN or EIN	Investment expenses not entered elsewhere	_
Points not reported on Form 1098	Other	_
Investment interest	Home equity interest	_

		_
Other	Inform	ation
(////		41 IO I

Other Information					
Name: Blank Tax Organizer for 2023			SSN: ***_***		
Mortgage Interest Provide all copies of Form 1098					
TSJ Lender's Name	Mortgage Interest Received	Mortgage Insurance Premiums	Real Estate Taxes Paid		
Employee Business Expenses					
TS					
Select if you are: A qualified performing artist A fee-based state or local government official A disabled employee with impairment-related work expenses An Armed Forces reservist You are a member of the clergy	Select if you: Used your perso	nal vehicle for your job	during 2023		
	by your employer		box 1 of your W-2		
Parking fees, tolls, local transportation Meals Overnight business travel expenses (Do not include meals & entertainment) Other business expenses					
Casualties and Thefts					
TSJ FEMA code	TSJ FEMA code)			
Property description	Property description				
Property location	Duamanto la satian				
Date property was acquired	Date property was acquired				
Date property was damaged or stolen	Date property was damaged	or stolen			
Cost of property damaged or stolen	Cost of property damaged o	r stolen			
Fair market value before incident	Fair market value before inc	ident			
Fair market value after incident	Fair market value after incid	ent			

Other Information				
Name: Blank Tax Organizer for 2023		SSN:	***_**	
Health Savings Account				
TS				
The taxpayer's coverage is under a high-deductible hea Taxpayer only Family HSA contributions made for 2023			2023	
Total distributions from all HSAs during 2023				
Distributions included above that were rolled over into a	nother account			
Qualified medical expenses paid using HSA distributions	8			
Education Expenses Provide all copies of Form	1098-T			
Student name		Student name		
Type of Expense	Amount	Type of Expense	Amount	
				
				
		·		
Student name		Student name		
Type of Expense	Amount	Type of Expense	Amount	
Type of Expense	Amount	Type of Expense	Amount	
Job-related Moving Expenses				
TSJ				
Select this box and complete the fields below if you and moved due to a military order for a permanent of		ne Armed Forces on active duty,	2023	
Number of miles from old home to old workplace				
Number of miles from old home to new workplace •				
Expenses to transport and store household goods and p	personal effects			
Travel and lodging expenses while traveling to your new	home			