

## 2022 Tax Organizer Personal Information

### Personal Information

	Name	SSN	Has IP PIN	Date of birth
Taxpayer				
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: \_\_\_\_\_

SSN: \_\_\_\_\_

#### Dependent Information

First and last name SSN	Has IP PIN	Relationship	Months in home	Date of birth	Disabled	Full- time student	Childcare Expenses

List dependents required to file a return \_\_\_\_\_

#### Child and Other Dependent Care Expenses

Name of care provider	Address	SSN or EIN	Amount Paid

#### 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:

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:

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:

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?

### 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?
- Are you interested in contributing to a retirement plan which could possibly save taxes?
- Do you have Life Insurance?  
   Would you like a quote for Life Insurance?

### Education Information

## Questionnaire

Name:

SSN:

### Questionnaire

#### 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 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.
- Are you interested in contributing to a 529 Plan?
- 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:

SSN:

Form 1099-MISC Income

Provide all copies of Form 1099-MISC

TS	Payer name	2022 amount

Form 1099-NEC Income

Provide all copies of Form 1099-NEC

TS	Payer name	2022 amount

### Other Income and Adjustments

Name: \_\_\_\_\_

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: \_\_\_\_\_

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 . . . . .	<input type="checkbox"/>	<input type="checkbox"/>	_____
Boy or Girl Scouts . . . . .	<input type="checkbox"/>	<input type="checkbox"/>	_____
Goodwill . . . . .	<input type="checkbox"/>	<input type="checkbox"/>	_____
Red Cross . . . . .	<input type="checkbox"/>	<input type="checkbox"/>	_____
Salvation Army . . . . .	<input type="checkbox"/>	<input type="checkbox"/>	_____
United Way . . . . .	<input type="checkbox"/>	<input type="checkbox"/>	_____
Veterans . . . . .	<input type="checkbox"/>	<input type="checkbox"/>	_____
Hospital . . . . .	<input type="checkbox"/>	<input type="checkbox"/>	_____
University . . . . .	<input type="checkbox"/>	<input type="checkbox"/>	_____
Other _____	<input type="checkbox"/>	<input type="checkbox"/>	_____

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 . . . . . \_\_\_\_\_

### Schedule C - Profit or Loss from Business

Name: \_\_\_\_\_

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 2022.

This business was disposed of during 2022.

Select if this business is for:

Professional gambler

Newspaper delivery and you are under 18 years of age

Exempt Notary income

A clergy

Yes No

Payments of \$600 or more were paid to an individual, who is not your employee, for services provided for this business.

If "Yes," did you file Forms 1099 for the individuals?

You received a Paycheck Protection Program (PPP) loan for this business.

If "Yes," was any portion of the loan forgiven?

#### Income

	2022		2022
Gross receipts or sales . . . . .	_____	Other income . . . . .	_____
Returns & allowances . . . . .	_____		_____

#### Expenses

	2022		2022
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 or lease (vehicles, machinery, & equipment) . . . . .	_____		_____
Rent (other business property) . . . . .	_____		_____

#### Cost of Goods Sold

	2022		2022
Inventory at beginning of year . . . . .	_____	Materials & supplies . . . . .	_____
Purchases . . . . .	_____	Other costs . . . . .	_____
Cost of personal use items . . . . .	_____	Inventory at end of year . . . . .	_____
Cost of labor . . . . .	_____	<input type="checkbox"/> There was a change in inventory method.	

### Expenses Related to Business

Name: \_\_\_\_\_

SSN: \_\_\_\_\_

#### Auto Expense

Name of business vehicle is used for \_\_\_\_\_

Description of vehicle \_\_\_\_\_ Date vehicle was placed in service \_\_\_\_\_

- |   |   |
|---|---|
| <p>Yes    No</p> <p><input type="checkbox"/>   <input type="checkbox"/> Was this vehicle available for use during off-duty hours?</p> <p><input type="checkbox"/>   <input type="checkbox"/> Was another vehicle is available for personal use?</p> | <p>Yes    No</p> <p><input type="checkbox"/>   <input type="checkbox"/> Do you have evidence to support your deduction?</p> <p><input type="checkbox"/>   <input type="checkbox"/> If "Yes," is the evidence written?</p> |
|---|---|

#### Mileage

Number of miles the vehicle was driven during 2022

Business:	Before July 1, 2022 . . . . . _____	Commuting . . . . . _____	
	After June 30, 2022 . . . . . _____	Other . . . . . _____	

#### 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 regularly and exclusively for business? \_\_\_\_\_

What is the total square footage of your home? \_\_\_\_\_

For daycare facilities not used exclusively for business, complete the following questions

How many days during the year was the area used? \_\_\_\_\_

How many hours per day was the area used? \_\_\_\_\_

The daycare facility was in operation for the entire year

Expenses	Office expenses	Home expenses
Mortgage interest . . . . . _____	_____	_____
Real estate taxes . . . . . _____	_____	_____
Excess mortgage interest . . . . . _____	_____	_____
Excess real estate taxes . . . . . _____	_____	_____
Insurance . . . . . _____	_____	_____
Rent . . . . . _____	_____	_____
Repairs & maintenance . . . . . _____	_____	_____
Utilities . . . . . _____	_____	_____
Other expenses . . . . . _____	_____	_____

In the "Office expenses" column, enter those expenses that pertain exclusively to your office; in the "Home expenses" column, enter those expenses that pertain to the entire dwelling.

## Schedule E - Income or Loss from Rental Real Estate & Royalties

Name: \_\_\_\_\_

SSN: \_\_\_\_\_

### General Property Information

TSJ \_\_\_\_\_

Property description \_\_\_\_\_

Address, city, state, ZIP \_\_\_\_\_

**Select the property type**

- |  |   |                                    |                                      |
|--|---|------------------------------------|--------------------------------------|
| <input type="checkbox"/> Single family residence | <input type="checkbox"/> Vacation / short-term rental | <input type="checkbox"/> Land      | <input type="checkbox"/> Self-rental |
| <input type="checkbox"/> Multi-family residence  | <input type="checkbox"/> Commercial                   | <input type="checkbox"/> Royalties | <input type="checkbox"/> Other _____ |

Number of days property was rented \_\_\_\_\_ Number of days property was used for personal use \_\_\_\_\_

If the rental is a multi-dwelling unit and you occupied part of the unit, enter the percentage you occupied \_\_\_\_\_

- |  |                          |                          |  |
|--|--------------------------|--------------------------|--|
| <input type="checkbox"/> This property was placed in service during 2022.      | Yes                      | No                       | Payments of \$600 or more were paid to an individual, who is not your employee, for services provided for this rental.<br>If "Yes," did you file Forms 1099 for the individuals? |
| <input type="checkbox"/> This property was disposed of during 2022.            | <input type="checkbox"/> | <input type="checkbox"/> |  |
| <input type="checkbox"/> This property is your main home or second home.       | <input type="checkbox"/> | <input type="checkbox"/> |  |
| <input type="checkbox"/> This property was owned as a qualified joint venture. | <input type="checkbox"/> | <input type="checkbox"/> |  |

### Income

	<b>2022</b>		<b>2022</b>
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 . . . . .	_____	_____
Other interest . . . . .	_____	_____
Repairs . . . . .	_____	_____
Supplies . . . . .	_____	_____
Taxes . . . . .	_____	_____
Utilities . . . . .	_____	_____
Depletion . . . . .	_____	_____
Other expenses	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

If this Schedule E is for 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.

If the Schedule E is not for a multi-unit property in which you lived in one unit, complete just the "Rental unit expenses" column.

**Other Information**

Name: \_\_\_\_\_

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 personal vehicle for your job during 2022

	NOT reimbursed by your employer	Reimbursed by your employer not included in 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 \_\_\_\_\_

Property location \_\_\_\_\_

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 or stolen \_\_\_\_\_

Fair market value before incident \_\_\_\_\_

Fair market value before incident \_\_\_\_\_

Fair market value after incident \_\_\_\_\_

Fair market value after incident \_\_\_\_\_

Insurance reimbursement \_\_\_\_\_

Insurance reimbursement \_\_\_\_\_

Other Information

Name:

SSN:

Health Savings Account

TS \_\_\_\_\_

The taxpayer's coverage is under a high-deductible health plan for:

- Input boxes for Taxpayer only and Family

2022

Form for HSA contributions and distributions for 2022, including fields for total distributions and qualified medical expenses.

Education Expenses Provide all copies of Form 1098-T

Student name \_\_\_\_\_ Student name \_\_\_\_\_

Table with 4 columns: Type of expense, Amount, Type of expense, Amount. Two sets of rows for different students.

Student name \_\_\_\_\_ Student name \_\_\_\_\_

Table with 4 columns: Type of expense, Amount, Type of expense, Amount. Two sets of rows for different students.

Job-related Moving Expenses

TSJ \_\_\_\_\_

Select this box and complete the fields below if you are a member of the Armed Forces on active duty, and moved due to a military order for a permanent change of station.

2022

Form for job-related moving expenses, including fields for miles from old home to old/new workplace and travel/lodging expenses.

### Sale of Capital Assets

Name:

SSN:

#### Sale of Capital Assets (not reported on Form 1099-B)

Provide all brokerage statements

TSJ	Description of property	Date purchased	Date sold	Sales price	Cost

#### Installment Sale Income

Description of property: \_\_\_\_\_

Date acquired _____	Date sold _____	2022	Prior years
Selling price . . . . .		_____	
Mortgages assumed . . . . .		_____	
Cost of property sold . . . . .		_____	
Depreciation allowed . . . . .		_____	
Commissions and expense of sale . . . . .		_____	
Gross profit percentage . . . . .		_____	
Interest received . . . . .		_____	
Principal payments received . . . . .		_____	

Property was sold to a related party

# Western Accounting & Tax Solutions

6700 SW 105th Ave Suite 317  
Beaverton, OR 97008  
kerry@westernaccountingtax.com  
Phone: (503)716-8311 | Fax: (503)605-9306

January 05, 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 (503)716-8311.

Sincerely,

Kerry Jaquith  
Western Accounting & Tax Solutions



# Western Accounting & Tax Solutions

6700 SW 105th Ave Suite 317  
Beaverton, OR 97008  
kerry@westernaccountingtax.com  
Phone: (503)716-8311 | Fax: (503)605-9306

January 05, 2023

Subject: Preparation of Your 2022 Tax Returns

:

Thank you for choosing Western Accounting & Tax Solutions to assist you with your 2022 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 2022 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 2022 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 (503)716-8311.

Sincerely,

Kerry Jaquith  
Western Accounting & Tax Solutions

(Both spouses must sign for preparation of joint returns.)

Accepted By:

---

Taxpayer

---

Spouse

---

Date