

Email: staff@fortuneaccounting.com

2022 Individual Taxpayer Organizer

Taxpayer						Tax ID # *				
First Name	M.I.	Last N	lame	Emai	1			IP PIN		
Occupation		Date of	birth	1		Are you new	to our f	irm? Y	es	No
Address		City				State		Zip		
County		Primary	y phone			Secondary p	none			
Driver's License No.		1		State	Issue	Date	Exp	o. Date		
Spouse						Tax ID # *				
First Name	<i>M.I.</i>	Last N	lame	Emai	1	I		IP PIN		
Occupation		Date of	birth			Are you new	to our f	irm? Y	es	No
Address (If different from Taxpayer)		City				State		Zip		
County		Primary	y phone			Secondary p	none			
Driver's License No.		I		State	Issue	Date	Exp	o. Date		
If you moved during 2022, enter your previo	us address.					Date of mov	e			
Marital status at 12/31/22: Single	Married	Separated	d Widow	(er)	Registere	d Domestic Partne	rship (R	DP) U	Jnsu	re
Were you divorced or separated during the ye	ar? Yes	No		١	Were there an	y deaths in the far	nily? Ye	es No		
Individuals who are in registered domestic p	artnerships (RD	Ps) and c	ivil unions are	not con	nsidered mar	ried for federal tax	purpose	s.		
Have you received any notice from the IRS or	state revenue d	epartmen	t within the pa	ist year	? Yes	No				
Names of dependent children <i>Child's</i> <i>full name</i>	Tax ID #	ŧ*	IP PIN		Date of birt	h Months lived home in 202		ationship to taxpayer		ollege ıdent?
Did any of the children have unearned incon a different taxpayer will seek to claim a child		-		-		en have a disabilit No	/? Yes	No Is it anti	cipat	ted that
Other dependents or people who lived wit	h you									
Name	<i>Tax ID</i> # *		IP PIN	Da	ate of birth	Months lived in home in 2022	Relati	ionship	Inco	ome
Bank information: Use for Direct d	eposit of refund	Direct d	ebit of balance	e due	Name of	bank				

ILLESTYLE&TAXES	ax ID # i uest	s either	a Social Security Number	ut depositing a refund into an IRA er (SSN), adoption taxpayer identifi	-							
LIFESTYLE&TAXES no.	uest " refers	ions	-	er (SSN), adoption taxpayer identifi	ication number	r (ATIN), or an individual t	avaavan idantifia	ation nu				
LIFESTYLE&TAXES	" refers								nber (ITIN).			
LIFESTYLE&TAXES			s — All Taxpa	ayers		(Provide relate documentation	ed statements or 1.)	other				
LIFESTYLE&TAXE	Yes			- enter "?" if unsure about a ques	tion.		,					
		No	Are either you or your		,							
	Yes	No	Did you pay or receive Paid Re	e alimony in 2022? eceived \$	Recipient's	SSN	Date of divorc	e or sep	aration			
	Yes	No	Did you purchase heal	th insurance through a public exc	change?		1					
	Yes	No	Will there be any sign	ificant changes in income or dedu	actions next ye	ear, such as retirement?						
	Yes	No	Did you pay anyone for	or domestic services in your home	e?							
Ī	Yes	No	Did you purchase a ne	id you purchase a new energy-efficient car, truck, or van?								
Ī	Yes	No	Are you involved in ba	ankruptcy, foreclosure, repossess	ion, or had any	y debt (including credit ca	ards) cancelled?					
Ī	Yes	No	Are you a member of	the military?	St	tate of residency						
	Yes	No	Were you a citizen of	or lived in a foreign country?	Fo	oreign country						
Ī	Yes	No	Do you own or have fi	nancial interest in a foreign bank	or financial a	account? Maximum value	\$					
	Yes	No	Would you like to allo Designee's name	w your tax preparer or another pe Pho	erson to discus ne number	ss your return with the IR	S? PIN (any five	e digits)				
>	Yes	No	Were any children bor	n or adopted in 2022? (Provide s	tatement for o	other expenses.)						
CHILDREN&EDUCATION	Yes	No	-	ending college? (Provide Form 10		1 /						
EDUC			Year in college	Paid by you: <i>Tuition</i> \$		Student loan interest \$	1	Books \$				
REN&			0	Paid by student: <i>Tuition</i> \$		Student loan interest \$	1	Books \$				
HILDI	Yes	No	Did you pay any tuitio	Did you pay any tuition for a private school for a dependent or take classes yourself?								
			Student	1 1		, ,	Amount paid S	5				
			Name and address of s	school			1					
-	Yes	No		or dependent care so you could w	vork or go to s	school? (add statement if i	needed)					
			Name of provider	1 0	Ū		EIN or SSN					
			Address				Amount paid S	5				
-	Yes	No	Do you have any child	ren who have unearned income of	of \$1,150 or m	nore?	1					
-	Yes	No	Did you make any con	tributions to a 529 plan in 2022?								
VTS	Yes	No	Did you, or will you, c	contribute any money to an IRA f	for 2022?		Traditional	IRA	Roth IRA			
- <u>-</u>	Yes	No		amounts from a retirement accou								
INVE	Yes	No	Did you sell or transfe	r any stock or sell rental or invest	tment property	y?						
	Yes	No	Did you receive any in	come from an installment sale?								
	Yes	No	Did you have any inve	estments become worthless or we	re you a victin	m of investment theft in 2	022?					
	Yes	No	Were you granted, or o	did you exercise, any employee s	tock options d	luring 2022?						
	Yes	No		s a reward, award, or payment for ncial interest in a digital asset)?	r property or s	services); or (b) sell, exchange	ange, gift, or oth	erwise o	lispose of a			
ions	Yes	No	Did you, or do you pla	n to, contribute money before Ap	pril 18, 2023 to	to an HSA for 2022? If ye	s, provide detail	s.				
DEDUCTIONS	Yes	No	Did you pay any intere	est on a loan for a boat or RV that	t has living qu	arters? If yes, provide de	tails.					
DEI	Yes	No	Did you pay sales taxe	es on a major purchase in 2022, su	uch as a vehicl	ele, boat, or home?						
	Yes	No	Did you make any cha	ritable contributions in 2022? If	yes, provide de	letails.						
ESS	Yes	No	Did you work from a l	nome office or use your car for bu	usiness?							
BUSINESS	Yes	No	Did you receive incom	ne from a sharing/gig economy ac	ctivity (e.g. Ai	irbnb, Uber, etc.)?						
	Yes	No	Do you own a busines	s or an interest in a partnership, c	orporation, LI	LC, farming activities, or	other venture?					
номе	Yes	No	Did you purchase or se	ell a main home during the year?	If yes, provide	le closing statement.						
	Yes	No	If you sold a home, die	d you claim the First-Time Home	buyer Credit v	when it was purchased? It	f yes, provide de	tails.				
L	Yes	No	-	ortgage or take a home equity loa			, /1					
	Yes	No	-			-	improve your h	ome?				
	Yes	No		v energy-efficient improvements								
				gage loan proceeds for purposes of venergy-efficient improvements			improve your h	ome?				

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State information	Full-year resident	Part-year resident	Nonresident	School district		
States of residence dur	ing 2022 and dates			Do you rent or own your home?	Rent	Own

Total rent paid \$

Includes heat?

No

Yes

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.

Forms	W-2 — Wage and Tax Statement									
T/S	Employer name			T/S	Employe	er name				
	1)				4)					
	2)				5)					
	3)				6)					
Forms	1099-INT — Interest Income									
ſ/S/J	Name of issuer			T/S/J	Name of issuer					
	1)				4)					
	2)				5)					
	3)				6)					
orms	1099-DIV — Dividends and Distributions									
ſ/S/J	Name of issuer			T/S/J	Name of issuer					
	1)				4)	4)				
2)			5)							
	3)				6)	6)				
Forms	1099-R — Distributions From Pensions, Annu	uities, Retire	ement or	Profit-Sha	ring Plan	s, IRAs, Insure	ance Contra	cts, Etc.		
Г/S	Name of issuer			T/S	Name of	Name of issuer				
	1)				4)					
	2)			5)						
	3)				6)					
f the d	istribution is before age 59 ¹ / ₂ , give a reason to de	etermine if a	in except	ion to pena	alty applies	5.				
fax-Ex	cempt Interest (such as municipal bonds — inc	lude stateme	ent)							
Payer		\$		Payer					\$	
)ther l	ncome								1	
State ta	x refund		\$			Unreported	tips	\$		
Jnemp	loyment compensation		\$			Other		\$		
Social S	Security (taxpayer) — provide SSA-1099 or RR	B-1099	\$					\$		
social s	Security (spouse)— provide SSA-1099 or RRB-	1099	\$					\$		
Gambling income — provide W-2G			\$	\$				\$		
Busines	ss income (see Sole Proprietorship Tax Organiz	er)	· ·			Stock sales			Sales and	
Rental income (see Rental Property Tax Organizer)						Sale of other property		<i>Exchanges Worksheet"</i> below.		
Sale	s and Exchanges Worksh	neet								
	information about sales of stock, real estate, or		rty, alon	g with Forr	ns 1099-B	, 1099-S, or ot	her supporti	ng stater	ments.	
Descrit	ntion of property		Pu	rchase date	e (Cost/basis	Sale a	late	Sale price	

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).

Itemized Deductions Worksheet

Medical Expe	nses. Must exe	,950 Single, \$25,900 MFJ, ceed 7.5% of income to be a nclude any expenses that we	benefit — include	Charitable Contri	butions. If over \$	500 in noncash charital require that the taxpayo			
		om an FSA, HSA, or HRA.	ie remoused by	documentation for al		require that the taxpay			
Dentists	\$	Hospitals	\$	Monetary (cash, cheo	ck, credit card)		\$		
Doctors	\$	Insurance	\$			g or household items			
Equipment	\$	Prescriptions	\$	must be in good used	l condition or bette	er.	\$		
				Did you transfer fund	ds from an IRA di	rectly to a charity?	φ		
				Yes No					
Eyeglasses	\$	Other	\$						
Medical miles:	Jan. – June	July – D	Dex				\$		
				Charitable mileage					
				-					
		exes paid for full or partiousiness use of the hom	l business or 						
				Casualty and Thef					
						d damage or loss of pro ovide details to your ta			
State withholdi	ng		Reported on W-2	No					
State estimated taxes — paid in 2022			\$	-					
Real estate tax	- residence		\$	Miscellaneous Iten	nized Deduction	s. Miscellaneous itemi	zed deductions		
Real estate tax	— other		\$			o longer deductible on t till be deductible on yo			
Personal proper	ty taxes		\$	For use of home, aut	o mileage, or othe	r job-related			
Property tax ret	fund — received	d in 2022	\$()	expenses, provide in reimbursed by your e		oarate sheet. Were any o No	expenses		
Foreign tax pai	d		\$						
Other			\$	Dues	\$	Subscriptions	\$		
Other			\$	Investment expenses	\$	Supplies	\$		
Other			\$						
				Job education	\$	Tax prep fees	\$		
D.1	2022.6			_					
include interest		or year state returns (do not							
			\$	Job seeking	\$	Tools	\$		
		tax paid during 2022? boat, or home in 2022?	Yes No Yes	Legal fees	\$	Uniforms	\$		
Sales tax paid \$		rchase paid \$ Da		Licenses	\$	Union dues	\$		
				Safety equipment	\$	Other	\$		
	erty, including l	interest paid for full or or pusiness use of the h Forms	artial business me. Provide all	Other Deductions. income limit.	The following de	ductions are not subjec	t to a 2% of		
		in in indirioers.		Gambling losses	\$	Federal estate tax on IRD	\$		
Main home	\$	Equity loan	\$	1					
Second home	\$	Equity loan	\$	1					
				Impairmentrelated	\$	Other	\$		
Points	\$	Investment interest	\$	expenses					
	·								
Other D	eductio	ons or Questio	ns						

• Gambling losses are deductible only up to the amount of gambling winnings reported. A log must be kept to verify losses.
• Work clothing is not deductible if adaptable for every day wear. Exception for safety equipment, such as steel-toe boots.

• Expenses to enable individuals, who are physically or mentally impaired, to work are generally deductible.

Adjustments Worksheet

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Educator expenses. Classroom expenses of teachers, counselors, and principals. Maximum \$300 each.	\$
Health savings account (HSA). Contributions for 2022 may be made in 2023. (Only	
include contributions you made out-of-pocket).	\$
Self-employed SEP, SIMPLE, and qualified plans. Contributions for 2022 may be made in 2023.	\$
Self-employed health insurance. Sole proprietors, partners, and 2% S corporation shareholders if not eligible for employer coverage.	
	\$
Penalty on early withdrawal of savings.	\$
IRA deduction. For traditional IRAs. Roth IRAs are not deductible. Contributions for 2022 may be made in 2023.	\$
Student loan interest. Paid for taxpayers and dependents.	\$
Moving expenses. Available only to members of the Armed Forces (or their spouses or dependents) on active duty that move pursuant	
to a military order and incident to a permanent change of station.	Ask preparer
Business expenses of reservists, performing artists, and fee-based government officials.	Ask preparer
Other adjustments. Include description.	\$

Estimated Tax Payments — Tax Year 2022

Installment	Date paid	Federal	Date paid	State
First		\$		\$
Second		\$		\$
Third		\$		\$
Fourth		\$		\$
Amount applied from 2021 overpayment?		\$		\$
Total		\$		\$

Tax Preparation Checklist

Please provide the following documentation:

All Forms W-2 (wages), 1099-INT (interest), 1099-DIV (dividends), 1099-B (proceeds from broker or barter transactions), 1099-R (pensions and IRA distributions), Schedules K-1 from partnerships, S corporations, estates and trusts, and other income reporting statements, including all copies provided from the payer.

Form 1095-A (for health insurance purchased through a public exchange), Form 1095-B (for health insurance purchased outside of a public exchange), or Form 1095-C (for employer-provided health insurance coverage).

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 figures 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 2022.

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 return carefully before signing to make sure the information is correct.
- Fees must be paid before your 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 is required for preparation of late 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 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

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 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.

Sole Proprietorship Tax Organizer

Use a separate organizer for each business

Sole Proprietor General Information

Name of sole proprietor

		(if different)					EIN (if applicable)		
		(if different)					EIN (if applicable)		
Busine	ess addre	ss (if different from hon	ie address)						
Princij	pal busin	ess activity			Date business started		Date business closed	1	
		ct or service							
Yes	No			ness activity to realize a					
Yes	No		-	operation of this busines	ss?				
Yes	No	Has the business repor	-	1 1					
Accou Yes	nting me No			ther <i>(specify)</i> lar year? <i>(If no, list the f</i>	iscal ware)				
				iai yeai: (ij no, iisi ine ji	scui yeur.)				
Yes	No	tor Specific Questio Did you pay any famil		r correioac?					
			-			1	0		
Yes	No				ors, attorneys, accountants,				
Yes	No	_	orm 1099-NE	C? List name and social	security number (SSN) for	-		10 or more.	
		Name							
		Name					SN		
Yes	No	Did you make, or do y	ou plan to mal	ke, any contributions to a	a self-employed retirement	plan?			
		Type of plan				A	mount contributed	\$	
Yes	No	Did you pay for your o	Did you pay for your own health/dental insurance? If Yes, provide amount of premiums paid during the year.						
Yes	No	Did you have any employees?							
Yes	No	Did you have any barte	ering transaction	ons in 2022?					
Yes	No	Did you have a Payche	ck Protection	Program (PPP) loan that	t was forgiven in 2022?				
Sole I	Proprie	tor Business Income	2						
	-			NEC, list name of payer	and amount separately from	n gross receij	ots or sales)	\$	
For	rm 1099-	NEC		\$ Form	1099-К		\$		
Fotal o	of all Fo	ms 1099-NEC and 1099	9-K received					\$	
Return	ns and al	owances						\$(
2.1		not included in gross re							
Jther	income (noi included in gross re	ceipts above)					\$	
F orm genera SE) ta	1099-NI ally requi	CC. You may receive For red to file Schedule C, <i>I</i> income.	orm 1099-NEC	From Business, claim an	if you are not classified as a y expenses associated with	the income re	eceived, and must pay	\$ 1099NEC, you a	
Form genera (SE) ta ole P	1099-NI ally requi ax on the ropriet	CC. You may receive For red to file Schedule C, <i>I</i> income.	orm 1099-NEC	From Business, claim an		the income re	eceived, and must pay	\$ 1099NEC, you a	
Form genera SE) ta ole P	1099-NI ally requi ax on the ropriet ory at the	CC. You may receive For red to file Schedule C, <i>I</i> income. or Cost of Goods So beginning of the year	orm 1099-NEC Profit or Loss I	From Business, claim an facturers, wholesalers, c	y expenses associated with	the income re	eceived, and must pay	\$ 1099NEC, you a	
F orm genera (SE) ta ole P ivento	1099-NI ally requi ax on the ropriet ory at the	CC. You may receive For red to file Schedule C, <i>I</i> income.	orm 1099-NEC Profit or Loss I	From Business, claim an facturers, wholesalers, c	y expenses associated with	the income re	eceived, and must pay	\$ 1099NEC, you a	
Form genera (SE) ta ole P nvento urchas	1099-NI ally requi ax on the ropriet ory at the ses less c	CC. You may receive For red to file Schedule C, <i>I</i> income. or Cost of Goods So beginning of the year	orm 1099-NEC Profit or Loss I	From Business, claim an facturers, wholesalers, c	y expenses associated with	the income re	eceived, and must pay	\$ 1099NEC, you a	
Form genera SE) ta ole P ovento urchas ost of	1099-NI ally requi ax on the ropriet ory at the ses less c	CC. You may receive For red to file Schedule C, <i>I</i> income. or Cost of Goods So beginning of the year osts of items withdrawn	orm 1099-NEC Profit or Loss I	From Business, claim an facturers, wholesalers, c	y expenses associated with	the income re	eceived, and must pay	\$ 1099NEC, you a	
Form genera SE) ta ole P wento urchas ost of lateria	1099-NI ally requi ax on the ropriet ory at the ses less c labor	CC. You may receive For red to file Schedule C, <i>I</i> income. or Cost of Goods So beginning of the year osts of items withdrawn	orm 1099-NEC Profit or Loss I	From Business, claim an facturers, wholesalers, c	y expenses associated with	the income re	eceived, and must pay	\$ 1099NEC, you a	
Form genera SE) ta ole P wento urchas ost of lateria	1099-NI ally requi ax on the ropriet ory at the ses less c labor als and su ory at the	C. You may receive For red to file Schedule C, <i>I</i> income. or Cost of Goods So beginning of the year osts of items withdrawn	In for personal t	From Business, claim an facturers, wholesalers, c	y expenses associated with	the income re	eceived, and must pay	\$ 1099NEC, you a	
Form genera SE) ta ole P wento urchas ost of lateria wento	1099-NI ally requi ax on the ropriet ory at the ses less c labor als and su ory at the ropriet	C. You may receive For red to file Schedule C, <i>I</i> income. or Cost of Goods So beginning of the year osts of items withdrawn upplies end of the year	In for personal t	From Business, claim an facturers, wholesalers, c	y expenses associated with	the income re	eceived, and must pay	\$ 1099NEC, you a	
Form genera (SE) ta ole P nvento urchas ost of fateria nvento ole P	1099-NI ally requises on the ropriet ory at the ses less c i labor als and su ory at the ropriet	C. You may receive For red to file Schedule C, <i>I</i> income. or Cost of Goods So beginning of the year osts of items withdrawn upplies end of the year	In for personal t	From Business, claim an	y expenses associated with	the income re	pods)	\$ 1099NEC, you a y self-employme \$ \$ \$ \$ \$ \$ \$	
Form genera (SE) ta ole P nvento urchas ost of fateria nvento ole P dverti ad deb	1099-NI ally requises on the ropriet ory at the ses less c i labor als and su ory at the ropriet	C. You may receive For red to file Schedule C, <i>I</i> income. or Cost of Goods So beginning of the year osts of items withdrawn upplies end of the year	In for personal t	From Business, claim an	y expenses associated with	the income re	cceived, and must pay	\$ 1099NEC, you a y self-employme \$ \$ \$ \$ \$ \$ \$	
Form genera (SE) ta ole P nvento urchas Cost of fateria nvento ole P adverti Bad det Bank ch	1099-NI ally requises and set of the set of	C. You may receive For red to file Schedule C, <i>I</i> income. or Cost of Goods So beginning of the year osts of items withdrawn pplies end of the year or Business Expense	In for personal t	From Business, claim an	y expenses associated with and businesses that make, in restaurants (100%	s \$	Utilities Wages ¹	\$ 1099NEC, you a y self-employme \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	
Form genera (SE) ta ole P nvento Purchas Cost of Aateria nvento Sole P Adverti Bad deb Basines	1099-NI ally requi ax on the ropriet ory at the ses less c labor als and su ory at the ropriet ising bts harges	C. You may receive For red to file Schedule C, <i>I</i> income. Or Cost of Goods So beginning of the year osts of items withdrawn upplies end of the year or Business Expense	In for personal t	From Business, claim an facturers, wholesalers, c use Management fees Meals for business deduct.) Meals – other busin	y expenses associated with and businesses that make, in restaurants (100% ess meals (50% deduct.)	s \$	Utilities Wages ¹	\$ 1099NEC, you a y self-employme \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	

¹ Provide copies of Form W-3, Form 940, Form 941, Form 1096, Form 1099-NEC, Form 1099-MISC, and any state tax forms filed. ² Entertainment is no longer deductible for taxes.

Employee bene	efit programs	\$	Rent or lease – car,	machine	ry, equipment	\$		\$
Employee heal	th care plans	\$	Rent or lease – othe	r busines	s property	\$		\$
Entertainment ²	2	\$	Repairs and mainter	nance		\$		\$
Gifts		\$	Supplies (not includ	led in inv	entory cost)	\$		\$
Insurance (othe	er than health insurance)	\$	Taxes – payroll 1			\$		\$
Interest – mortg	gage	\$	Taxes – property			\$		\$
Interest – other		\$	Taxes – sales			\$		\$
Internet service	2	\$	Taxes – state			\$		\$
Legal and profe	essional services	\$	Telephone			\$		\$
Other Busin	ness Expenses – List of	ut type and exper	ise amount				L. L	
			\$					\$
			\$					\$
			\$					\$
			\$					\$
			\$					\$
			\$					\$
			\$					\$
			\$					\$
			\$					\$
			\$					\$
Car Expense	es (use a separate form)	for each vehicle)						
Make/Model					Date car placed	l in service		
Yes No	Car available for perso	nal use during off	-duty hours?					
Yes No	Do you (or your spous	e) have any other	cars for person	l use?	Did you trade i	n your car this	year? Yes	No
Yes No	Do you have evidence?	?			Cost of trade-in	n \$	Trade-in value \$	
Yes No	Is your evidence writte	en?			1			
		Mileage			Actual Expenses			
Beginning of	vear odometer				Gas/oil		\$	

Beginning of year odometer			Gas/oil	\$
End of year odometer			Insurance	\$
Business mileage	Jan. – June	Jan. – June July – Dec.		\$
Commuting mileage			Registration/fees	\$
Other mileage			Repairs	\$

Generally, you can use either the standard mileage rate or actual expenses to calculate the deductible costs of operating your car for business purposes. However, to use the standard mileage rate, it must be used in the first year the car is available for business. In later years, you can then choose between either the standard mileage rate method or actual expenses.

Travel Expenses

• Meals. You can deduct the cost of meals while traveling away from • Travel/Lodging. You can deduct the ordinary and necessary exhome on business. You can use the actual cost of your meals or the penses of traveling away from your home for business purposes.

standard meal allowance per diem, which	can vary by location.	Included expenses are transportation, airfare, taxi, lodging, etc.			
City visited (for per diem)	# of days in city	City visited (for per diem)	# of days in city		
Travel expenses			· ·		
Airfare	\$	Other travel expenses (describe below)			
Bus, train, taxi	\$		\$		
Entertainment	¢		¢		

Bus, train, taxi	\$	\$
Entertainment	\$	\$
Lodging	\$	\$

Parking and tolls	\$	\$
Meals (actual receipts)	\$	\$

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

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						
Asset	Date out of service	e 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 exclusively used for business except for storage or day care. *Note:* Managing rental activities or investments does not qualify for business use of the home.

All Taxpayers	For Day Care Only		
A) Business use area (square footage)		1) Hours used for day care	
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 2022, 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 l	nome	\$	Improvements?	Yes No	
Value of land		\$	Casualty losses in 2022?	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 day care facility.

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	• You must pay SE tax if your net earnings from self-employment were \$400 c more, or you had church employee income of \$108.28 or more. The SE tax rule apply no matter how old you are and even if you are already receiving Soci-

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.

- 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%
- The SE tax rate on net earnings is 15.3% (12.4% for Social Security plus 2.9% for Medicare). Only the first \$147,000 (2022) of combined wages, tips, and net earnings is subject to the 12.4% Social Security part of SE tax.

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.

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).

	Prop	erty A	Prope	erty B	Prope	erty C
	Location of	of property:	berty: Location of property:		Location o	f property:
	Туре		Туре		Туре	
	Any personal use	? Yes No	Any personal use	? Yes No	Any personal use?	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 2022.

Property Purchased. Treat the cost of impro Asset	Date purchased	Cost	Date placed in service
		\$	
		\$	
		\$	
		\$	
		\$	

Property Sold or Taken Out of Service

Asset	Date sold or taken out of service	Selling price	Trade in?
		\$	
		\$	
		\$	
		\$	
		\$	