	Questionnaire
Name:	SSN:
Questionnaire	
Questionnane	
Personal Inform	aation
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?
[][]	Did your address change during the year?
[][]	Were you, your spouse, or any dependents a victim of identity theft?
[][]	Were you, your spouse, or any dependents issued an Identity Protection PIN (IP PIN)? If "Yes" provide Notice CP01A from the IRS.
Dependent Info	rmation
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?
Health Care Info	ormation
[][]	Did any member of your household have healthcare coverage through the Marketplace? 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? If "Yes" provide copies of Form 1099-SA for distributions and/or Form 5498-SA for contributions.
Income Purcha	ses, Sales, and Debt Information
Yes No	ses, dales, and best information
[][]	Did you receive any disability income during the year?
(1) (1)	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 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 Form 1098.
[][]	Did you receive any principal or interest payments 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? If "Yes" provide closing statements.
[][]	Did you have any debts canceled or forgiven this year?
[][]	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.

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	Questionnaire
Name:	SSN:
Questionnaire	
Questionnaire	
[][]	Did you receive any other income you have not provided information for with this organizer?  If "Yes," explain
Itemized Deduc	etion 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 pay any real estate property taxes or personal taxes during the year?
[][]	Did you pay mortgage interest during the year? If "Yes" provide Form 1098.
[][]	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 have gambling winnings or losses during the year?
Retirement Info	ormation
Yes No	
[][]	Did you make any contributions to an IRA, Roth, Keogh, SIMPLE, SEP, 401(k), or other qualified retirement plan during the year?
[][]	Did you make any withdrawals or receive distributions from a pension or profit sharing plan, IRA, Roth, Keogh, SIMPLE, SEP, 401(k), or other qualified retirement plan during the year?
[][]	Did you execute any rollovers from an IRA, Roth, Keogh, SIMPLE, SEP, 401(k), or other qualified retirement plan during the year?
[][]	Did you receive any Social Security benefits during the year?
Education Info	rmation
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)?
[][]	year)? Did you make a contribution to or receive a distribution from an Education Savings Account or Qualified
1111	Tuition Program during the year?
[][]	Did you pay student loan interest for yourself, your spouse, or your dependents during the year?
[][]	Did you receive forgiveness on a qualifying federal student loan?
Foreign Tax Inf	formation
Yes No	
[][]	Did you have a financial interest in or signature authority over a financial account or asset located in a foreign country?
Refund, Withho	olding, and Estimated Tax Information
[][]	Did you make any estimated payments toward your 2022 taxes?
[][]	Do you want to have any refund or balance due directly deposited or withdrawn? If "Yes" provide bank
	name, routing and account number.
[][]	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 pay wages to any household employees (babysitter, nanny, housekeeper, etc.)?
[][]	Did you make any energy-efficient improvements to your main home during the year?
[][]	Would you like a copy of your tax return sent to you electronically instead of receiving a printed copy?

## 2022 Tax Organizer Personal Information

Persona	al Inform	ation									
			Name			s	SN	Has IP PIN	Dat	te of birth	
Taxpayer											
Spouse											
Name of pe	erson to who	m all inform	nation should be addressed, if not	the taxpayer							
Street add	dress, city,	state, and	d ZIP								
	1		Occupation		Daytime phone	Evening	phone		Cell p	hone	
Taxpayer											
Spouse											
Taxpayer	email										
Spouse ei	mail										
	Do you o At any ti (a) red	or your spine during ceive (as ell, exchar	pouse a full-time student? pouse want to designate \$3 to g 2022 did you: a reward, award, or paymer nge, gift, or otherwise dispos	nt for property or ser	vice) a digital asset		t)				
_	<b>'s type of</b> ⁄er's licens		State-issued photo ID		Spouse's type of photo ID  Driver's license  State-issued photo ID						
Photo ID r	number				Photo ID number						
State phot	to ID was i	ssued			State photo ID was issued						
Date photo	o ID was is	ssued			Date photo ID was issued						
Date photo	o ID expire	es			Date photo ID expires						
Accoun	nt Inform	ation fo	r Deposits and Withdra	awals							
Name of bank Bank				Bank Type of account Use this account for							
				routing number	account number	Checking	Savings	Depo	osits	Withdrawals	
	tment In										
Your 2022	? appointm	ent is sch	eduled for								

**2022** Page 4

Dependent	and	Other	Information
Dependent	alla	Clici	minomination

Dependent and Other Information								
Name:							SSN	:
Dependent Information	า							
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 fi	ile a retum							
Child and Other Deper	ndent Care Expen	ses						
Name of care provider			Address			SSN or E	EIN	Amount Paid
Estimates								
	Fede	ral	Res	sident State		F	Resident	City
Overpayment applied from 2021	Date paid	Amount	Date paid	A	mount	Date paid		Amount
First quarter			_					
Second quarter			_					
Third quarter			_					
Fourth quarter			_					
Additional payments								

## **Schedule A - Itemized Deductions**

Name:	SSN:
Medical and Dental Expenses	Charitable Contributions
Health insurance premiums (paid by you, not through work) · · · · · · · · · · · · · · · · · · ·	Donations to charity Cash Noncash Amount  Church
Amount that is for Medicare premiums	Boy or Girl Scouts
Long-term care premiums (you)	
Long-term care premiums (your spouse) · · · · · · ·	
Long-term care premiums (dependents)	Salvation Army
Mileage driven for medical purposes  Before July 1, 2022	United Way
After June 30, 2022	Veterans
Out of pocket medical & dental expenses	Hospital
Doctor, dental, etc	University
Prescription medicines	Other
Glasses & contacts	Miles driven for charitable purposes
Hearing aids	Other Miscellaneous Deductions
Medical equipment & supplies	Amortizable bond premiums
Hospital services	Tederal estate tax
Laboratory services	Gambling losses
Nursing services	Impairment-related work expenses
Other	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
Interest Paid	Protective clothing (shoes, hardhats, glasses, etc.)
Home mortgage interest paid (attach Form 1098)	Dues to professional organizations
Some of your home mortgage loan was not used to buy, build, or improve your home.	Books & subscriptions
Home mortgage interest paid to an individual	Other
Paid to:	Union dues
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

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Checklist	
Name:	SSN:
Checklist	
This check list is provided to help you gather necessary information for us to prepare your 2022 income this list, along with the supporting documentation, to our office and let us know of any significant characteristic 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	