

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 possibly 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?

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?

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 gifts to any one person in excess of \$16,000 during the year?
☐ ☐ If "Yes," are you splitting the gift with your spouse?
- ☐ ☐ Did you make any energy-efficient improvements to your main home 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," include notice(s).
- ☐ ☐ May the IRS discuss your tax return with your preparer?

Health Care Information

Questionnaire

Name:

SSN:

Questionnaire

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) or 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 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 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?
- ☐ ☐ Did you acquire a new or additional interest in a partnership or S corporation?
- ☐ ☐ Did you have any debts canceled or forgiven this year?
- ☐ ☐ Did you purchase a new 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 associated with a fantasy sport league?
- ☐ ☐ Did you receive income 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 associated with freelancing (e.g., Upwork or TaskRabbit)?
If "Yes," attach Form 1099-K or Form W-2.
- ☐ ☐ Did you receive income associated with fashion sharing (e.g., Poshmark or thredUP)?
- ☐ ☐ Did you receive income associated with a short-term rental (e.g., Airbnb or HomeAway)?
- ☐ ☐ Did you receive income as an independent contractor (e.g., Shipt, Instacart, DoorDash)?
- ☐ ☐ 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 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.

Questionnaire

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Questionnaire

☐ ☐ ☐ Did you have gambling winnings or losses during the year?

Retirement Information**Yes No**

- ☐ ☐ Did you make any contributions to an IRA, Roth, Keogh, SIMPLE, SEP, 401(k), or other qualified retirement plan (other than through an employer) 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 Information**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 (529s) during the year?
- ☐ ☐ Did you pay student loan interest during the year?
- ☐ ☐ Did you receive forgiveness on a qualifying federal student loan?

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?
- ☐ ☐ 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?

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						

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	☐	☐	_____
Boy or Girl Scouts	☐	☐	_____
Goodwill	☐	☐	_____
Red Cross	☐	☐	_____
Salvation Army	☐	☐	_____
United Way	☐	☐	_____
Veterans	☐	☐	_____
Hospital	☐	☐	_____
University	☐	☐	_____
Other _____	☐	☐	_____

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. _____

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: _____		

Name: _____

SSN:

Form 1099-MISC Income

Provide all copies of Form 1099-MISC

[illegible]

Form 1099-NEC Income

Provide all copies of Form 1099-NEC

[illegible]

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	_____	☐ There was a change in inventory method.	

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
☐ Single family residence ☐ Vacation / short-term rental ☐ Land ☐ Self-rental
☐ Multi-family residence ☐ Commercial ☐ Royalties ☐ 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 _____

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

Income

	2022	2022
Rent income	_____	Royalties from oil, gas, mineral, copyright or patent _____

Expenses

	Rental unit expenses	Rental and homeowner expenses	
Advertising	_____	_____	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.
Auto & travel	_____	_____	
Cleaning & maintenance	_____	_____	
Commissions	_____	_____	
Insurance	_____	_____	
Legal & professional fees	_____	_____	
Management fees	_____	_____	
Mortgage interest	_____	_____	
Other interest	_____	_____	
Repairs	_____	_____	
Supplies	_____	_____	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.
Taxes	_____	_____	
Utilities	_____	_____	
Depletion	_____	_____	
Other expenses	_____	_____	
_____	_____	_____	
_____	_____	_____	
_____	_____	_____	
_____	_____	_____	
_____	_____	_____	
_____	_____	_____	

Expenses Related to Business

Name: SSN:

Auto Expense

Name of business vehicle is used for

Description of vehicle Date vehicle was placed in service

Yes No Yes No
Was this vehicle available for use during off-duty hours?
Was another vehicle is available for personal use?
Do you have evidence to support your deduction?
If "Yes," is the evidence written?

Mileage
Number of miles the vehicle was driven during 2022
Business: Before July 1, 2022
After June 30, 2022
Commuting
Other

Expenses
Garage rent
Gas
Insurance
Licenses
Oil
Parking fees
Rental fees
Interest
Property tax
Repairs
Tires
Tolls
Lease addback
Other expenses

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.