2023 Personal Tax Organizer

IF YOUR INFORMATION IS GOING TO BE RECEIVED <u>AFTER APRIL 15TH 2024 </u>, (3/15/2024 FOR S CORPORATIONS OR PARTNERSHIPS) WE NEED TO BE NOTIFIED SO THAT A TAX EXTENSION CAN BE FILED ON YOUR BEHALF – <u>THIS IS UP TO YOU TO NOTIFY US TO ENSURE YOU DON'T GET PENALIZED</u>

This form with the Engagement Letter need to be returned to ensure we have accurate information (even existing client) If you have questions, please let me know. Thanks. – Tina (406)410-0242 - TMC BUSINESS SERVICES

We are trying to ensure our clients have a choice on how they receive their tax files $-\mathbf{do}$ you want:

B. C. D.	Client Copy to CD or USB Copy placed on the Portal Do you want to perform an	Drive for retr 1 Electr	e printed double sided to save paper? ieval – if Yes then we will ensure you are setup for the portal onic Signature – YES or NO n/updates (newsletters, changes, requests) via e-mail – if Yes ———
1.	Have any of the following cl	hanged	since last year or do we have them on file:
-	Address	-	Phone Number
-	E-mail	-	Bank Account or Routing for Direct Deposit

IF YOU ARE NEW TO TMC BUSINESS SERVICES FOR TAX PREPARATION PLEASE FILL OUT TAXPAYER INFORMATION AND DEPENDENT INFORMATION ON PAGE 2 (IF AN EXISTING CLIENT ONLY FILL OUT ANY CHANGES THAT WE NEED TO KNOW ABOUT).

2. Did you get an Identity Protection PIN, if one has been issued, we need it for filing?

- > EVERYONE SHOULD ANSWER QUESTIONS ON PAGE 3
- REVIEW PAGE 4-6 AND ANSWER IF APPLICABLE
- EVERYONE SHOULD SIGN PAGE 6

Taxpayer						Tax ID # *			
First Name	M.I.	Las	st Name	Ema	ail	'	IP PIN		
Occupation		Date	of birth			Are you nev	v to our firm	? Y	es No
Address		City				State	Zip		
County		Prim	rimary phone Secondary phone						
Driver's License No.				State	e Issue	Date	Exp. Dat	2	
Spouse						Tax ID # *			
First Name	M.I.	Las	st Name	Ema	ail	<u>'</u>	IP PIN		
Occupation		Date	of birth			Are you nev	v to our firm	? Y	es No
Address (If different from Taxpayer)		City				State	Zip		
County		Prim	ary phone			Secondary p	hone		
Driver's License No.				State	e Issue	Date	Exp. Dat	2	
If you moved during 2023, enter your	previous address	6.				Date of mov	e		
Were you divorced or separated during Note: Individuals in registered domest Notices: Have you received any notice.	stic partnerships ((RDPs) and civil union	ns are	not consider		,	No rposes	i.
Names of dependent children Child's full name	Tax ID ‡	‡ *	IP PIN		Date of birti	Months lived home in 202.		,	College student?
Did any of the children have unearne Is it anticipated that a different taxpa Other dependents or people who liv	yer will seek to cl		•		-	of the children h ent for tax year 2		ity? No	Yes No
			ID DD I			Months lived in	D.L.		T.
Name	Tax ID # *	+	IP PIN	L	Pate of birth	home in 2023	Relationshi	b	Іпсоте
Bank information: Use for Direct d	eposit of refund	Dire	ect debit of bala	nce d	ue Name of	bank			
Checking Savings Routing tra	nsit number				Account nu	mber			
Ask your tax preparer for information	n about depositing	g a ref	und into an IRA	acco	unt or splitti	ng the deposit in	o more than	one a	count.
*A Tax ID # is either a Social Security Numb	er (SSN), adoption t	ахраує	er identification n	ımber	(ATIN), or an	individual taxpaye	r identification	numb	er (ITIN).

Total rent paid \$

Includes heat?

Yes

No

YOU CAN INDICATE ON THE FOLLOWING THE VARIOUS INCOME, BUT WE WILL STILL REQUIRE ALL TAX RELATED INCOME FORMS TO BE SUBMITTED.

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.

Indicate "T" for taxpayer, "S" for spouse, "J" for joint

Provide additional statements if more room is needed

Forms W-2 – Wage and Tax Statement

If the distribution is before age 591/2, give a reason to determine if an exception to penalty applies.

Tax-Exempt Interest (such as municipal bonds — include statement)										
Payer	\$		Payer		\$					
Other Income										
State tax refund	\$		Unreported tips	\$						
Unemployment compensation	\$		Other	\$						
Social Security (taxpayer) — provide SSA-1099 or	RRB-1099	\$			\$					
Social Security (spouse) — provide SSA-1099 or RI	RB-1099	\$			\$					
Gambling income — provide Form W-2G		\$			\$					
Business income (see Sole Proprietorship Tax Organi	izer)			Stock sales See "Sales and		Sales and Exchanges				
Rental income (see Rental Property Tax Organizer)			Sale of other property	Worksheet" below.						

Sales and Exchanges Worksheet

Provide information about sales of stock, real estate, or other property, along with Forms 1099-B, 1099-S, or other supporting statements.

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

Deductions must exceed \$13,850 Single, \$27,700 MFJ/QSS, \$20,800 HOH, or \$13,850 MFS to be a tax benefit.

include cost fo	r dependents — do	17.5% of income to be not include any expe with funds from an F	enses that were		ovide details of co	r \$500 in noncash cha ntributions. Rules req all contributions.			
Dentists	\$	Hospitals	\$	Monetary (cash, c			\$		
Doctors	\$	Insurance	\$	Noncash contribu		hing or household	\$		
Equipment	\$	Prescriptions	\$	Did you transfer f	-		Φ		
Eyeglasses	\$	Other	\$	charity? Yes	No	directly to a	\$		
Medical miles:		@ 22¢		Charitable mileag		@ 14¢	1 *		
		paid for full or partia siness use of the hom		Casualty and Theft Losses					
State withhold		de de la companya de	Reported on W-2	If you suffered an	y sudden, unexpe	ected damage or loss ter area, provide deta	of property, or		
State estimated	l taxes — paid in 20)23	\$		No	ter area, provide acta	ano to your tust		
Real estate tax	— residence		\$	Miscellaneous Itemized Deductions. Miscellaneous itemized					
Real estate tax	— other		\$			mitation are not ded			
Personal prope	erty taxes		\$			enses may be deducti ige, or other job-relat			
Property tax re	fund — received in	n 2023	\$()	provide informati	ion on a separate	sheet. Were any expe	nses reimbursed		
Foreign tax pai	d		\$	by your employer					
Other			\$	Dues	\$	Subscriptions	\$		
Other			\$	Investment expenses	\$	Supplies	\$		
Other			\$	Tob education	\$	Tax prep fees	\$		
	2023 from prior ye		d.	Job seeking	\$	Tools	\$		
	e interest or penalt	,	\$, 0	\$	Uniforms	\$		
		tax paid during 2023 boat, or home in 202		Legal fees	<u>'</u>		+ '		
Sales tax paid \$				Licenses	\$	Union dues	\$		
· ·		erest paid for full or p	antial business	Safety equipment		Other	\$		
use or rental-u	se property, includ	ing business use of th tion and ID numbers.		AGI limit.		deductions are not si	ubject to the 2%		
Main home	\$	Equity loan	\$	Gambling losses	\$	Federal estate tax on IRD	\$		
Second home	\$	Equity loan	\$	Impairment-	\$	Other	\$		
Points	\$	Investment interest	\$	related expenses	<u> </u>				
Other D	eductions	or Question	<u></u>						

- 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

Educator expenses. Classroom expenses of teachers, counselors, and principals. Maximum \$300 each.	\$
Health savings account (HSA). Contributions for 2023 may be made up until April 15, 2024. (Only include contributions you made out-of-pocket).	\$
Self-employed SEP, SIMPLE, and qualified plans. Contributions for 2023 may be made up until April 15, 2024.	\$
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 2023 may be made up until April 15, 2024.	\$
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.	\$

Installment	Date paid	Federal	Date paid	State
First		\$		\$
Second		\$		\$
Third		\$		\$
Fourth		\$		\$
Amount applied from 2022 overpayment		\$		\$
Total		\$		\$

Tax Preparation Checklist

Please:	provide	the	foll	owing	docume	ntation:

	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.
\Box	Form 1095-A (for health insurance purchased through a public exchange/marketplace). Form 1095-B (for health insurance

Form	1095-A	(for	health	insurance	purchas	ed thro	ugh a	a public	exchange	e/marketplace)	, Form	1095-B	(tor	health	insurance
purch	ased ou	tside	of a pu	blic excha	nge), or F	orm 109	5-C (1	for empl	oyer-prov	rided health ins	surance	coverag	ge).		
- 4															

☐ If you are a new client, provide copies of last year's tax returns.

The completed	Individual Incom	e Tax Organizer.	<i>Note:</i> If you	choose not to	fill out the org	anizer, you m	ust at least a	answer the
"Yes" or "No"	questions under "	'Questions — All	Taxpayers."					

☐ Copy of the closing statement if you bought, sold, or refinanced real estate.

	Mileage amounts for an	. 1 .1	1 . 1 .	1 1 1 1 1 1	• 1		1.1	• • • • • • • • • • • • • • • • • • • •
1 1	Mileage amounts for an	v automobile evnens	es claimed i	ncluding total i	mileage co	mmiitino mil	eage and r	nicinace milagga

☐ Detail of estimated tax payments made, if any.

	Income and	deductions	categorized	on a se	parate sheet	t for	business	or rental	activities.
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- ☐ 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 2023.

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 returns carefully before signing to make sure the information is correct.
- Fees must be paid before your tax returns are 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 may be required for preparation of 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 duplicate 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			
	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 express written 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.