This page MUST be reviewed and signed by all tax clients PRIOR to their returns being done.

Taxpayer Responsibilities

- You agree to provide us all income and deductible expense information. If you received additional information
 after we begin working on you 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.
- 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 if needed.
- 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.
- 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:

Taxpayer	Spouse	Date
	D-: D-1:	

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 optain 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 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.

2023 Individual Taxpayer Information

	ccupation: ddress: mail river's Lic # pouse Name ccupation ddress (If different) mail river's Lic # id you move during 2023? treet tate(s) of residence during ank Name larital Status on Dec 31, 20 //ere you divorced or separ //as there a death of a spoul //as a new dependent adde //as there a death of any de id any of the children/deput o any of the children have James of Dependent Chil										
	Taxpayer Name:						SSN			Zip Zip Zip Amt. different aship to College	
	Occupation:			Date	of Birth			Are you new to our firm?		firm?	
	Address:				City			State		Zip	
Personal Information	Email				Mobile phone			Home phone			
forma	Driver' s Lic #				State		Issue date		Exp date	е	
Spouse Name						SSN					
Perso	Occupation			Date	of Birth		1				
S Marital status Bank Personal Information	Address (If different)		Date		City			State		Zip	
	Email				Mobile phone						
	Driver's Lic #				State		Issue date		Exp date	е	
	Did you move during 2	.023? If so p	olease list y	our previous	address:			•			
	Street					City		State		Zip	
	State(s) of residence of	during 2023				Rent or o	wn home?		Total	Rent	
¥		Ва	nking infori	mation for di	rect deposit of	refund or di	rect debit of l	palance due	ı		
Bar	Bank Name				Routing #			Acct #			
ns					How do yo				filing		
ıl stat	Marital Status on Dec	31, 2023							arately,		
larita	Were you divorced or s	separated d	luring 2023	?			awaiting court	date etc)		<u> </u>	
Was there a death of a spouse du		luring 2023?			Date of deat	h					
	Was a new dependent	added to d	uring 2023?	?		Name:			SSN#		
	Was there a death of a	ıny depende	ents during	2023		Name:			Date of	death	
	Did any of the childrer	n/dependen	ts have une	earned incom	e above \$1,250		Name:				
Do any of the children have a dis		bility?							different		
dents	Names of Dependent	dren SSN#		Date of	ate of birth Months liv		n home in 2023	Relationship to			
ende						<u> </u>			змар	<u>.,</u>	
//Dep											
ildrer								State Zip Home phone ue date Exp date State Zip home? Total Rent t debit of balance due Acct # ingle, married, married filing ad of household) Is (ie: still married, living separately, waiting court date etc) SSN# Date of death Name: Amt. t a child will claim themselves or that a different er will seek to claim a child for 2023? Relationship to College. Student? Adult child, elderly dependent parent) Adouths lived in home in Relationship to Adult child, elderly dependent parent)			
S											
	List any	other depe	_Il vendents who lived with you in 2023			disabled rela	tive/adult chil	d, elderly dep	endent p	parent)	
	<u>Name</u>		<u>s:</u>	SN#	Mon Date of birth			Months lived in home in 2023		-	<u>Income</u>

Questions for all Taxpayers

"You" refers to both taxpayer and spouse - ask your preparer if unsure about a question

	Yes	No	Question									
			Did you receive or pay alimony in 2023?									
				If yes, did you pay or receive?			Recipi	ent's SSN				
				Date of divorce or sep	oaration:		Amount	paid/rec'd				
(es			Did you purchase health insurance through a public exchange/marketplace (provide form 1095-A)									
Ta			Will there be any significant changes in income or deductions next year (such as retirement)									
le &			Did you purchase a new or unsed energy-efficient, hybrid or electric car, truck, van?									
Lifestyle & Taxes			Are you involved in bankruptcy, foreclosure, repossession, or had any debt (including credit cards) cancelled?									
Life			Do you own or have financial interest in a foreign bank or financial account?									
	Were any children attending college during 2023? (Provide Form 1098T & Form 1098E)											
				Tuition pd by you		Books \$		Loan interes	t			
				Tuition pd by student		Books\$		Loan interes	t			
on			Did you pay	for child or dependent car	e so you cou	ıld work or go	to school?	(Provide stater	e statement if applicable)			
Children/Education				Name of provider				EIN / SSN				
np				Address of provider								
»h/E				City			State		Zip			
ldre				Amount paid								
Chi			Do you have	children who have uneari	ned income	of \$1,250.00	or more?	•		•		
	Did you, or will you, contribute any money to an IRA for 2023? Traditional or Roth IRA?											
nts			Did you roll o	over any amounts from a r	etirement a	ccount in 202	3?	Amount		•		
Investments			Did you sell	or transfer any stock or se	ell rental or i	nvestment pr	operty?					
/esi			Did you receive or sell, exchange, or otherwide dispose of a digital asset or financial interest in a digital asset?									
П			Digital assets include cryptocurrencies, NFTs and stablecoins									
ns	Did you or do you plan to, contribute money to an HSA before April 15, 2024 for 2023?											
Deductions				If yes - please provid	e details (ie:	amount, date	(s) etc)					
edu			Did you make charitable contributions in 2023? Amount?									
		Be sure you have the documentation to support this in the event of an audit										
	Did you purchase or sell a main home during the year? If yes provide closing statement If you sold a home, did you claim the First-Time Homebuyer Credit when it was purchased? If yes provide details											
									ride details			
Did you refinance a mortgage or take a home equity loan? If yes provide closing statement							ıt					
Home			Did you use any mortgage loan proceeds for purposes other than to buy, build or substantially improve your home?									
Ĭ			Did you make any new energy-efficient improvements to your home? If yes provide details.									
Tax Preparation Checklist												
Please be sure to provide the following documentation: [All Form W. 2 (wagge), 1000 NEC (non-ampliance companyation), 1000 INT (interest), 1000 DIV (dividends), 1000B (proceeds from broker), 1000 B.												
	All Form W-2 (wages), 1099 NEC (non-employee compensation), 1099-INT (interest), 1099-DIV (dividends), 1099B (proceeds from broker), 1099-R (pensions and IRA distributions), Schedule K-1 from partnerships, S corporations, estates, trusts and other reporting statements, including copies											
	provided from the payer.											
	Form 1095-A (for health insurance purchased through a public exchange/marketplace), Form 1095-B (for health insurance purchased outside of a											
-	public exchange), or Form 1095 C (for employer provided health insurance)											
	If you are a new client, please provide copies of last year's tax returns The completed Individual Income Tax Organizar. Note: if you choose not to fill out the organizar, you must at least answer the "You facility of the complete of the											
	The completed Individual Income Tax Organizer. Note: if you choose not to fill out the organizer, you must at least answer the "Yes/no" questions above.											
	Copy of the closing statement if you bought, sold or refinanced real estate											
	Detail o	etail of estimated tax payments made, if any										
	Income and deductions categorized on a separate sheet for medical, taxes, interest, charitable and misc. deductions.											
	Income and deductions categorized on a separate sheet for business or rental activities											
No	Notes:											

<u>Ite</u>	mized De	eductions Works	sheet - ded	uctions must e	exceed \$13,850 (MFS/single) \$27,700 MF	J/QSS			
Medical Expenses	. Must exceed 7	.5% of income to be a bene	fit- include cost			500 in noncash charitable co				
-		expenses that werereimburs	sed by insurance	provide details						
or paid with funds	s from an FSA,	HSA, or HKA.		taxpayer retain	documentation for	all contributions.				
Dentists	\$	Hospitals	\$	Monetary (cash	Monetary (cash, check, credit card)					
Doctors	\$	Insurance	\$	Noncash contri	butions (FMV). Cl	othing or household items				
Equipment	\$	Prescriptions	\$	must be in good	must be in good used condition or better.					
Eyeglasses	\$	Other	\$	Did you transfe	A directly to a charity?	\$				
Medical miles @ .	22 per mile			Yes No						
_		paid for full or partial busin	ess or rental use	Charitable mile	age @ \$.14/mile					
property, including				Casualty and						
State withholding			Reported on W-2	Other Deductions. The following deductions are not subject to the 2% AGI limit.						
State estimated tax	kes-paid in2023	3	\$	Gambling losse	es		\$			
Real estate tax- re	esidence		\$	1						
Real estate tax-oth	er		\$							
Personal property	taxes		\$	Impairment- rel	lated expenses		\$			
Property tax refund	d-received in 20	23	\$()	1						
Foreign tax paid			Other de	ductions or questions:	<u> </u>					
Other										
Other			\$							
Other			\$							
Balance paid in 20)23from prior ye	ear state returns (do not		Estima	tod Tay	Payments-Ta	v Voar			
include interest or	penalties)		\$	Installment	Date paid	Federal	State			
Did you keep rece	ipts for sales tax	x paid during 2023? Die	d	First		\$	\$			
you purchase a car				Second		\$	\$			
tax paid \$	Purchase p	paid \$ Date		Third		\$	\$			
Interest Paid. Do	o not include int	terest paid for full or partia	l business-	Fourth		\$	\$			
	roperty, includi	ng business use of the home								
Main home		Equity loan	\$	Total		\$	\$			
Second home	1 7									
Points Investment interest \$										
Note	es: • Gamblii	ng losses are deductible onl	v up to the amou	nt of gambling w	rinnings reported. A	log must be kepi lo verify l	osses.			
	• Work c		adaptable for eve	ery day wear. Ex	ception for safety e	quipment, such a steel-toe b				
Educator expenses	s. Classroom ex	xpenses of teachers, counsel	ors, and principa	ıls. Maximum \$3	300 each.		\$			
Health savings account (HSA). Contributions for 2023 may be made up until April15, 2024. (Only include contributions you made out-of pocket).										
Self ernployed SEP, SIMPLE, and qualified pl.ans. Contributions for 2023 may be made up Lmtil April 15, 2024.										
Self employed health insurance. Sole proprietors, partners, and 2% S corporation shareholders if not eligible for employer coverage.										
Penalty on early withdrawa.l of savings.										
IRA deduction. For traditional IRAs. Roth IRAs are not deductible. Contributions for 2023 may be made up until April15, 2024.							\$			
Student loan interest. Paid for taxpayers and dependents.							\$			
Moving expenses.	Available only	to members of the Armed	Forces (or their sp	pouses or depend	lents) on active dut	y that move pursuant to a	Ask preparer			
Business expenses of reservists, performing artists, and fee-based govern.merit officials.										
Other adjustments. Include description.										