2023 TAX ORGANIZER

T O

This tax organizer has been prepared for your use in gathering the information needed for your 2023 tax return.

To save you time, selected information from your 2022 tax return has been entered in this organizer. Please line through any information that does not apply to your 2023 tax return.

In some cases, 2022 amounts have been included in a separate column. These amounts are for comparison purposes only. You do not need to change these prior year amounts.

If we may be of further assistance, please contact us at your convenience.

REMOVE THIS SHEET PRIOR TO RETURNING THE COMPLETED ORGANIZER

2023 Questionnaire (Page 1 of 4)

To prepare your return in the most efficient and cost-effective manner, please answer <u>all</u> the questions in this questionnaire. We provide our clients with an organizer each year to help them gather information so that all income and expenses can be reviewed and included on their 2023 tax return. Don't hesitate to contact our office should you need assistance while completing the organizer. For any question answered "Yes", please provide additional information on the last page of the questionnaire and include supporting detail or documents.

DEADLINE: If we do not receive your information prior to March 8, 2024, we cannot assure that your individual tax return will be completed prior to April 15th and may be extended. If your return is extended, and we do not receive your information prior to September 1, 2024, we cannot assure that your return will be completed in time for you to file by the extended deadline of October 15th. In that event, penalties and interest may apply for which we will not assume responsibility.

IMPORTANT Questions: Please provide details for any "YES" Answers	Yes	No
Did you or your spouse mine, buy, sell or exchange Bitcoin or other cryptocurrencies; use Bitcoin or other cryptocurrency to pay for goods or services or receive Bitcoin or other cryptocurrency as payment for goods or services? If so, please provide detail of each transaction.		
Were you or your spouse 1) a grantor or transferor for a foreign trust, 2) have any interest in or signature authority over a foreign bank or securities account, a foreign retirement account, or other financial account in a foreign country?		
Do you own an interest in an LLC, a corporation, or other entity registered with the Secretary of State? If so, are you aware of the new FinCen Beneficial Ownership Information (BOI) reporting requirements in 2024? Please note - noncompliance with these reporting requirements carry substantial civil penalties and possible criminal charges. See our website to learn more.		
Did you or your spouse receive any IRS notices or any notices from state taxing authorities? If so, provide copies.		
Did you make any federal estimated tax payments for 2023? If yes, complete the Federal Taxes organizer section.		
Personal Information: Please provide details for any "YES" Answers		
Did your marital status change? If so, please provide the effective date and if applicable, include a copy of the divorce decree. Effective date:		
If you are married, is there a desire to file separate returns?		
Can you or your spouse be claimed as a dependent by another taxpayer?		
Did you or your spouse serve in the military or were you or your spouse on active duty?		
If so, do you have any unreimbursed moving expenses?		
Have you or your spouse been a victim of identity theft and you contacted the IRS?		
If yes, furnish the 6-digit identity protection PIN issued to you by the IRS and if possible, provide the IRS letter providing such Taxpayer Spouse		
Do you expect a large fluctuation in your income, deductions or withholdings in 2024?		
Dependents: Please provide details for any "YES" Answers		
Were there any changes in dependents from the prior year? If so, please provide details and if needed, SSN(s). Note: Please include non-child dependents for whom you provided more than half the support.		
Did you or your spouse pay for childcare while you or your spouse worked or looked for work?		
For dependent children: Did they have unearned income (interest, dividends, capital gains) more than \$1,250? Did they have earned income (W2s or self-employed earnings)? If yes to either of the above, do you need assistance preparing their returns? Please provide tax forms.		
Did you adopt a child or begin adoption proceedings?		
Healthcare: Please provide details for any "YES" Answers		
<u>Marketplace</u>		
Did you, your spouse, or a dependent that you are claiming, have healthcare coverage purchased through the Marketplace and for whom you did not receive Form 1095-A?		

2023 Questionnaire (Page 2 of 4)

Healthcare (Continued): Please provide details for any "YES" Answers	Yes	No
<u>Marketplace (continued)</u> Did you receive Form 1095-A for someone for whom another taxpayer will claim the personal exemption return?	on their tax	
If you received the advance premium tax credit or enrolled in coverage through the Marketplace, are name filling separately from your spouse, are you a victim of domestic abuse or spousal abandonment?	narried, and	
Other Did you have health insurance (including Medicare, Medicaid, CHIP, and TRICARE) for you, your spousd dependents for the entire year?	e, and any ———	
Was anyone who was covered on your health insurance policy also covered on another health insurance any part of the year?	policy for	
Were you eligible for employer-sponsored healthcare coverage?		
Did you or your spouse have any transactions pertaining to a health savings account (HSA)? If you received a distribution from an HSA, include all Forms 1099-SA and indicate if all distributions we qualified medical expenses.	ere for	
Did you or your spouse have any transactions pertaining to a medical savings account (MSA)? If you received a distribution from an MSA, include all Forms 1099-SA and indicate if all distributions we qualified medical expenses.	vere for	
Did you or your spouse receive any distributions from long-term care insurance contracts? If yes, include Form 1099-LTC.		
If you or your spouse are self-employed, are you eligible to be covered under an employer's health plan care plan at another job? If yes, how many months were you covered? Health Plan: Long-term Care Plan:	· ·	
Education: Please provide details for any "YES" Answers		
Did you or your spouse pay any student loan interest? If yes, include Forms 1098-E.		·
Did you or your spouse withdraw any amounts from your IRA to pay for higher education expenses incur your spouse, your children or grandchildren?	red by you,	
Did you or your spouse withdraw any amounts from a Coverdell Education Savings Account or Qualified Program (Section 529) plan? If yes, include all Forms 1099-Q.	Education	
Did you, your spouse, or your dependents incur any post-secondary education expenses, such as tuition If yes, provide all Forms 1098-T (required) as well as any other out of pocket qualified educational exp		
Deductions and Credits: Please provide details for any "YES" Answers		
Did you or your spouse contribute property (other than cash) with a fair market value of more than \$5,00	0 to a	
charitable organization? If yes, provide the appraisal of property contributed. An appraisal is not required for contributions of traded securities or contributions of non-publicly traded stock of \$10,000 or less.	f publicly	
Did you or your spouse incur any casualty or theft losses in a Federally Declared Disaster Area ? If yes, provide cost to replace and the amount of any insurance reimbursements received. \$ Cost to Replace \$ Insurance Proceeds Received		
Did you or your spouse make any large purchases, such as motor vehicles and boats? If yes, provide the amount of sales tax paid on the purchase. \$		
Did you or your spouse use gasoline or special fuels for business or farm purposes (other than for a high vehicle)? If yes, provide the number of gallons or special fuels used for off-highway business purposes Gallons Type of fuel		
Did you or your spouse install any alternative energy equipment in your residence such as solar water he electricity equipment (photovoltaic) or fuel cells?	eaters, solar	
Did you or your spouse install any energy efficiency improvements or energy property in your residence exterior doors or windows, insulation, heat pumps, furnaces, central air conditioners, or water heaters'		
Did you or your spouse purchase a new alternative technology vehicle, including a qualified plug-in elect motor vehicle? If yes, please provide details of the purchase and vehicle.	ric drive	

2023 Questionnaire (Page 3 of 4)

Investments: Please provide details for any "YES" Answers	Yes	No
Did you or your spouse have any debts canceled, forgiven, or refinanced? Please describe and provide information.		
Did you or your spouse start or purchase a business, rental property, or farm, or acquire any new interest in any partnership or S corporation? If yes, please provide details and closing statements, if applicable.		
Did you or your spouse sell an existing business, rental property, farm, or any existing interest in a partnership or S corporation? If yes, please provide details and closing statements, if applicable.		
Did you or your spouse sell, exchange, or purchase any real estate not previously addressed in the questions above? If yes, include closing statements.		
Did you or your spouse receive grants of stock options from your employer, exercise any stock options granted to you or your spouse or dispose of any stock acquired under a qualified employee stock purchase plan? If yes, please provide details.		
Did you or your spouse engage in any put or call or close any open short sales transactions? If yes, provide the transaction details.		
Did you or your spouse sell any securities not reported on Form 1099-B? If yes, please provide details.		
Did you surrender any U.S. Savings Bonds, or did they mature during 2023?		
Retirement or Severance: Please provide details for any "YES" Answers		
Did you or your spouse contribute any monies to a <u>traditional</u> IRA? If yes, please provide documentation.		
Did you or your spouse contribute to a Roth IRA or convert an existing traditional IRA into a Roth IRA? If yes, please provide documentation.		
Did you or your spouse roll into a <u>Roth</u> IRA any distributions from a retirement plan, an annuity plan, tax shelter annuity or deferred compensation plan? If yes, please provide documentation.		
Did you or your spouse turn age 73 and have money in a <u>traditional</u> IRA or other retirement account without taking any distribution?		
Did you or your spouse retire or change jobs? If yes, please expound.		
Did you or your spouse receive deferred, retirement, or severance compensation? If yes, enter the source and date received (Mo/Da/Yr).		
Did you or your spouse contribute directly to a qualified charity from your IRA or other retirement account (Qualified Charitable Distribution)? If so, please include documentation from the charity and (or) your retirement account to support the charitable distribution.		
Personal Residence: Please provide details for any "YES" Answers		
·		
Did your address change? If yes, provide the new address.		
Did you or your spouse claim a homebuyer credit for a home purchased in 2008?		
Did you or your spouse withdraw any amounts from your Individual Retirement Account (IRA) or Roth IRA to acquire a principal residence?		
Are your total mortgages on your first and/or second residence greater than \$750,000? If yes, provide the origination date of each mortgage and the principal balances at the beginning and end of the year. Mortgage #1Origination DateBeginning BalanceEnding Balance		
Mortgage #2Origination DateBeginning BalanceEnding Balance		
Did you or your spouse refinance your home loan? If yes, include the closing statement.		
Did you or your spouse have an outstanding home equity or take out a new home equity loan during the year that was used for purposes other than the improvement of your home? If so, please provide details.		
Are you claiming a deduction for mortgage interest paid to a financial institution and someone else received the Form 1098?		
Was your home rented out or was a portion of it used for business as a home office during the year? If so, please identify the business.		

2023 Questionnaire (Page 4 of 4)

Sale of Your Home: Please provide details for any "YES" Answers	Yes	No
Did you sell your home? If yes, see additional questions below and provide closing statements for both the purchase and the sale of your home.		
Did you receive Form 1099-S? If yes, include Form 1099-S.		
Did you or your spouse own and occupy the home as your principal residence for at least two years of the five years period prior to the sale?		
Did you or your spouse ever rent out the property?		
Did you or your spouse ever use any portion of the home as an office for business purposes?		
Have you or your spouse sold a principal residence within the last two years?		
At the time of the sale, the residence was owned by the: Taxpayer Spouse Both		
Gifts: Please provide details for any "YES" Answers		
Did you or your spouse make any gifts, including birthday, holiday, anniversary, graduation, education savings, etc., with a total (aggregate) value in excess of \$17,000 to any individual?		
Did you or your spouse make any gifts of difficult-to-value assets (such as non-publicly traded stock) to any person regardless of value?		
Did you or your spouse make any gifts to a trust for any amount?		
Did you or your spouse have a life insurance trust?		
Did you or your spouse assist with the purchase of any asset (auto, home) for any individual?		
Did you or your spouse forgive any indebtedness to any individual, trust or entity?		
Foreign Matters: Please provide details for any "YES" Answers		
Did you or your spouse perform any work outside of the U.S. or pay any foreign taxes?		
Did you or your spouse create or transfer money or property to a foreign trust?		
Were you or your spouse subject to the transition tax on undistributed foreign income and elect to pay the tax in installments?		
Did you or your spouse have an interest in an S corporation that had undistributed foreign income subject to the transition tax?		
If yes, did the corporation cease to be an S corporation?		
If yes, was there a sale or liquidation of substantially all of the corporation's assets or did the corporation cease business?		
If yes, did you or your spouse transfer any share of stock in the corporation?		
Miscellaneous: Please provide details for any "YES" Answers		
Did you or your spouse pay in excess of \$1,000 in any quarter or \$2,600 during the year for domestic services performed in or around your home to individuals who could be considered household employees?		
Did you or your spouse receive damages or easements for which you have not received any tax forms?		
Have you or your spouse received a punitive damage award for other than physical injuries or illness?		
Did you or your spouse receive any unemployment benefits?		
Did you or your spouse receive any awards, prizes, hobby income, gambling, or lottery winnings?		

2023 Questionnaire Additional Information

Please make any additional notations that <u>are</u> relevant to your 2023 tax preparation or to clarify questions answered above.



Personal Information

Taxpayer:	Name and Initial		Last Name					Social Security Number	or.
FIISU	vame and muai		Last Name					Social Security Number	51
Occu	pation		Date of Birth (Mo	/Da/Yr)	Date of Deat	h (Mo/Da/Yr)			
Drive	r's License or State-Issued ID Nu	mber	Expiration Date (I	Mo/Da/Yr)	ssue Date (f	Mo/Da/Yr)	State	Does not e	expire
	Driver's License	State-Issued ID	No Identifi	ication					
Spouse:									
First	Name and Initial		Last Name					Social Security Number	er
Occu	pation		Date of Birth (Mo.	/Da/Yr)	Date of Deat	h (Mo/Da/Yr)			
Drive	r's License or State-Issued ID Nu	mber	Expiration Date (I	Mo/Da/Yr) İ	ssue Date (f	Mo/Da/Yr)	State	Does not e	expire
	Driver's License	State-Issued ID	No Identifi	ication					
Contact Information:	t Address							Apartment Number	
Suee	. Address							-partment Number	
City				State				ZIP or Postal Code	
Forei	gn Province or County								
Forei	gn Country								
Тахра	ayer Daytime/Work Phone	Taxpayer Evening/Home	e Phone Taxpa	ayer Foreign F	hone				
Тахра	ayer Cell Phone	Taxpayer Fax Number							
Spou	se Daytime/Work Phone	Spouse Evening/Home	Phone Spou	se Foreign Ph	one				
				J					
Spou	se Cell Phone	Spouse Fax Number							
Тахра	ayer Email Address								
Spou	se Email Address								
Prefe	rred Method of Contact								
						Ye	s No	<u>></u>	
May the IRS or other taxing author Is the taxpayer claimed as a deper	•						-	-	
is the taxpayor claimed as a deper	ident on someone else s	tax return:					axpayer	Spouse	
						Ye			No
Are you considered legally blind pe	er IRS regulations?					10.		, 103	110
Do you want to contribute to the P	*								
Are you a U.S. citizen or Green Ca	rd holder?					L			
Personal Identification Numbers	Code - 1 - Issued by	/ IRS 2 - Issued by	State or City						
The IRS has recommended that ta filing security. If you would like an				TS	State	City	Code	PIN	
have one but do not know the ID E									

Tax Organizer Legend:

Throughout the tax organizer, you will find columns with the heading "TSJ". Enter "T" for taxpayer, "S" for spouse or "J" for joint.



Dependent Information:

	First Name and Initial	Last Name	Social Security Number	Date of Birth (Mo/Da/Yr)	Date of Death (Mo/Da/Yr)	Relationship to Taxpayer
Α						
В						
С						
D						
E						
F						
G				-		
н						

Did dependent have income over \$4,700?

			\blacksquare	
	Months Lived in Your Home	X if Disabled	Yes or No	Identity Protection PIN
Α				
В				
С				
D				
Е				
F				
G				
Н				

Provide the name of any dependent who is not a U.S. citizen or Green Card holder.

Provide the name of any person living with you who is claimed as a dependent on someone else's tax return.

List the years that a release of claim to exemption is given for a dependent child not living with you.

Wages and Salaries: Include all copies of your current year Forms W-2

Note: Use this section to report any wages and/or salaries for which no Form W-2 was received.

TS	Employer's Name	Taxable Wages	Tax Withheld						
13	Employer 5 Name	Taxable Wages	Federal	FICA/TIER 1	Medicare	State	Local		





Direct Deposit and Electronic Funds Withdrawal Account Information:

The IRS and certain states allow refunds to be deposited to and balances due to be paid directly from your financial institution. If you would like to receive your refund or pay a balance due electronically, complete the following information. Additional space has been provided for the use of multiple accounts. If you selected direct deposit or electronic withdrawal in 2022, your account information is already included below. Would you like any refunds owed to you directly deposited? Would you like to pay any amount due on your federal return using electronic withdrawal? If Yes, what amount would you like withdrawn, if not the entire balance due? If Yes, when should the withdrawal occur, if other than the due date of the return? Would you like to pay any amount due on your state return(s) using electronic withdrawal? If Yes, what amount would you like withdrawn, if not the entire balance due? If Yes, when should the withdrawal occur, if other than the due date of the return? The IRS and some states allow estimated payments to be electronically withdrawn on the due dates of the estimated payments. Would you like to pay any estimated payments due for your federal return using electronic withdrawal? Would you like to pay any estimated payments due for your state return(s) using electronically withdrawal, if available? Routing Transit Number (RTN) Type of account: Checking **Traditional Savings IRA Savings** Archer MSA Savings Coverdell Ed. Savings **HSA Savings** Yes Nο Is this a business account? Spouse .loint Account owner Taxpayer I confirm that the bank account information and the direct deposit/electronic withdrawal options selected above are correct. ______ Yes No Would you like any refunds owed to you directly deposited? Would you like to pay any amount due on your federal return using electronic withdrawal? If Yes, what amount would you like withdrawn, if not the entire balance due? If Yes, when should the withdrawal occur, if other than the due date of the return? Would you like to pay any amount due on your state return(s) using electronic withdrawal? If Yes, what amount would you like withdrawn, if not the entire balance due? If Yes, when should the withdrawal occur, if other than the due date of the return? The IRS and some states allow estimated payments to be electronically withdrawn on the due dates of the estimated payments. Would you like to pay any estimated payments due for your federal return using electronic withdrawal? Would you like to pay any estimated payments due for your state return(s) using electronically withdrawal, if available? Routing Transit Number (RTN) Account number Checking **Traditional Savings IRA Savings** Type of account: Archer MSA Savings Coverdell Ed. Savings **HSA Savings** Is this a business account?

Taxpayer

I confirm that the bank account information and the direct deposit/electronic withdrawal options selected above are correct.

Account owner

Joint

Spouse



Interest Income and Foreign Information

C n	ecial Interest Cod	lo:	2 - Seller	Financed 2 Farly Withd	rough Dono	lt. F Ao.	crued Interest			7 - Amortizable	Dor
		ne. Onal Series EE Bonds				6 - Ori	ginal Issue Disc	ount Adjus	tment	Premium Adjus	
				T			110.5		▼		
TS	J	So	urce		Interes	t Income	U.S. Bond Obligati		Code	Special Inter	res
				Tax	-Exempt I	nterest Coo	le: 1 - 1099-II	NT 2-Pri	vate Act	ivity Bond 3 - E	3oth
So	cial Security No.	Address		de al franco Mila ana Manda						Tax-Exempt	
C	of Home Buyer	Addres	s of individ	dual from Whom Mortga	age inter	est was Re	ceivea	Code	•	Interest	
_											
	Federal Withholding	Star Withho		Investment Expenses		Exempt Pa		2 Interest	:		
	Withinolaing	VVIdino	lullig	Lxperises		703IF 140.		inount			
مند	ın Taxes Paid	or Accrued:									
Cig	jii raxes raid	TOT ACCITACA.				\.	Date Paid	Tay A	mount		
	S	ource		Name of Foreign Cour Imposing Tax	ntry	X if Tax Accrued	or Accrued (Mo/Da/Yr)	(in Fo	reign ency)	Tax Amor	
							(, ,		
liti	onal State Inf	ormation:									
	Payer ID			New Hampshire or I	llinois Re	ason Inter	est is Nontax	able			
eig	ın Bank Acco	unts and Trus	ts:								Г
				or a signature authority						Yes	-
II	n a foreign counti	y, such as a bank	account, se	ecurities account or othe	r financial	account?					L



Dividend Income and Foreign Information

			1	(List all iteriis	s sold during the	Form 1099-				\neg
SJ		Source	•	Box 1a Total Ordinary	Box 1b Qualified	U.S. Bond Amou	Interest	Code	Tax-Exempt	
				Dividends	Dividends	Percent in			Interest	
To	Box 2a tal Capital	Box 2b Unrecaptured	Box 2c	n 1099-DIV Box 2d	Вох		2022 Gross		Tax-Exempt Into	erest Code:
	Gain stribution	Section 1250 Gain	Section 1202 Gain	2 Collectible (28%) Gai			Dividend Amount		2 - Private Activ	rity Bonds
									3 - Both	
		Form 1	099-DIV							
	Box 4 Federal	Box 5 Section 199A	Box 6 Investment	State						
W	ithholding	Dividends	Expenses	Withholdir	ng					
W			Expenses	Withholdir	ng					
W			Expenses	Withholdir	ng					
W			Expenses	Withholdir	ng					
	ithholding			Withholdir	ng					
	n Taxes Pa	Dividends		Name of Foreign	n Country	X if Tax Accrued	or Ac	Paid crued Da/Yr)	Tax Amount (in Foreign Currency)	(in U.S
	n Taxes Pa	Dividends		Name of Foreigr	n Country		or Ac	crued	(in Foreign	(in U.S
	n Taxes Pa	Dividends		Name of Foreigr	n Country		or Ac	crued	(in Foreign	Tax Amoi (in U.S Dollars
	n Taxes Pa	Dividends		Name of Foreigr	n Country		or Ac	crued	(in Foreign	(in U.S
eigr	n Taxes Pa	Dividends		Name of Foreigr	n Country		or Ac	crued	(in Foreign	(in U.S
eigr	n Taxes Pa	Dividends aid or Accrued: Source		Name of Foreign Imposing	n Country	Accrued	or Ac (Mo/I	crued Da/Yr)	(in Foreign	(in U.S
eigr	n Taxes Pa	Dividends aid or Accrued: Source		Name of Foreign Imposing	n Country Tax	Accrued	or Ac (Mo/I	crued Da/Yr)	(in Foreign	(in U.S
eigr	n Taxes Pa	Dividends aid or Accrued: Source		Name of Foreign Imposing	n Country Tax	Accrued	or Ac (Mo/I	crued Da/Yr)	(in Foreign	(in U.S
eigr	n Taxes Pa	Dividends aid or Accrued: Source		Name of Foreign Imposing	n Country Tax	Accrued	or Ac (Mo/I	crued Da/Yr)	(in Foreign	(in U.S
eigr	n Taxes Pa	Dividends aid or Accrued: Source	ists:	Name of Foreigr Imposing	n Country Tax	Accrued	or Ac (Mo/I	crued Da/Yr)	(in Foreign	(in U.S

Foreign Assets

Note: If the aggregate value of the accounts does not exceed \$10,000, then you do not need to provide details. **General Information:** Enter all countries where you have foreign bank accounts Foreign Identification: Yes No Passport Country of issue **Information on Foreign Financial Accounts:** 1 - Bank Account 2 - Securities Account 3 - Other Maximum Account **Financial** If Other Account Type, Describe **Account Number** Account Value **Institution Name** Type В Street Address City Α В **ZIP/Postal Code** GIIN State Country Α В If you have no financial interest in the account or account is jointly owned, please complete Type of TIN Code: A - Employer Identification No. (EIN) B - SSN or ITIN C - Foreign the account owner information below Middle Taxpayer ID **Last Name or Organization Name Suffix First Name** Initial Number Α В Joint Owners **Street Address** City Α В 1B - No financial interest - US person, officer or employee, residing outside US 2B - Joint - other joint owner 3 - Consolidated 1 - No financial interest 2A - Joint - spouse is joint owner Owner-**ZIP/Postal Code** State Country Filer's Title ship Code Α В

	lacktriangle	1 - Deposit 2 - Cu	stodial					
	Туре	Foreign Currency	Exchange Rate	Source of Exchange	Acct Open	Acct Closed	Joint	No Tax Items Reported
Α								
В								

Foreign Assets



Asset	Intorm	ation:
MOOFE		auvii.

	Descri	ption		Identif	ying Number	Date Acquired (Mo/Da/Yr)	Date Sold (Mo/Da/Yr)	Jointly Owned	Itame	
Value	Value Foreign Currency Exchange		Exchange Rate			Source of Exch	ange Rate			
If Asset is Stock of a I	Foreign	Entity or	an Interest in a	Foreign	Entity					
					1 - Partnersh	ip 2 - Corporati	on 3 - Tru	st 4 - Es	state	
Nar	me of Fore	eign Entity		Type of Foreign Entity		Mailing Addres	s of Foreign	Entity		
City or Town of Foreigr	n Entity		nce, County or of Foreign Entity		untry of ign Entity	Postal Code of Foreign Entity	•	GIIN		
f Asset is NOT Stock	of a For	eign Ent	ity or an Interest	t in a For	eign Entity				person eign persor	
					1 - Issuer	2 - Counterparty				
			Name of Issuer				Issuer Code	Type of Issuer	Residence of Issuer	
			1 - Individual 2 -	Partnershi	o 3 - Corpoi	ration 4 - Trust	5 - Estate			
Ma	ailing Add	ress of Iss	uer			City or Tow	n of Issuer			
	Prov	vince, Cou	nty or State of Issuer	r		1	ountry Issuer		tal Code Issuer	
Foreign assets were acqu		_	e tax year						Yes	
Foreign Bank Accoun	ts and T	rusts:								
At any time during 2023, in a foreign country, s	such as a b	ank accou			•	10		[
If Yes, enter name of fore	•									
Were you the grantor of, of any beneficial interest			eign trust that existed					[



Business Income and Cost of Goods Sold

Name of Business:		
Principal Business or Profession:		
TSJ Employer ID number Street address City, state, ZIP or postal code, and country Method of inventory Method of accounting		
Business Questions for 2023:		Yes No
Did you dispose of this business? If Yes, what was the disposition date? Was there a change in determining quantities, costs or valuations between opening and closing inventors. Were you involved in the operations of this business on a regular, continuous and substantial basis? Have you prepared or will you prepare all required Forms 1099? Health insurance premiums paid for yourself and your dependents	(Mo/Da/Yr) ory?	
Include all Forms 1099-K		
Payment card and third party transactions: Description	2023 Amount	2022 Amount
		_
Miscellaneous income: Include all Forms 1099-MISC and 1099-NEC		-
Other Income:		
Other gross receipts or sales Less returns and allowances		
Cost of Goods Sold:	2023 Amount	2022 Amount
Beginning inventory Purchases less cost of items withdrawn for personal use Cost of labor (do not include amounts paid to yourself) Materials and supplies		
Materials and supplies Other costs of goods sold:	<u> </u>	1
Description	2023 Amount	2022 Amount
Ending inventory		



incipal Busin	ess or Profession	n:				
cpenses:					2023 Amount	2022 Amount
Advertising						
Car and truck ex						
Parking fees and	d tolls					
Commissions an	nd fees			[
Contract labor						
Employee benefi	it programs and health	insurance (other tha	n pension and profit-sh	naring plans)		
Insurance (other	than health)					
Interest - mortga	age (paid to banks, etc.)				
Interest - other						
Legal and profes	ssional fees					
Office expense						
Pension and pro	ofit-sharing plans					
Rent or lease - vo	ehicles, machinery and	l equipment				
Rent or lease - o	ther business property					
Repairs and mai						
Supplies (not inc	cluded in Cost of Good	s Sold)				
Taxes and licens	ses					
Travel						
Meals						
Meals		e state returns)				
Meals Entertainment (d	deductible only on som	e state returns)				
Meals Entertainment (d Utilities Wages Dependent care	deductible only on som	e state returns)				
Meals Entertainment (d Utilities Wages Dependent care	deductible only on som	e state returns)				
Meals Entertainment (d Utilities Wages Dependent care	deductible only on som	e state returns)			2023 Amount	2022 Amount
Meals Entertainment (d Utilities Wages Dependent care	deductible only on som	e state returns)			2023 Amount	2022 Amount
Meals Entertainment (d Utilities Wages Dependent care	deductible only on som	e state returns)			2023 Amount	2022 Amount
Meals Entertainment (d Utilities Wages Dependent care	deductible only on som	e state returns)			2023 Amount	2022 Amount
Meals Entertainment (d Utilities Wages Dependent care	deductible only on som	e state returns)			2023 Amount	2022 Amount
Meals Entertainment (d Utilities Wages Dependent care	deductible only on som	e state returns)			2023 Amount	2022 Amount
Meals Entertainment (d Utilities Wages Dependent care	deductible only on som	e state returns)			2023 Amount	2022 Amount
Meals Entertainment (d Utilities Wages Dependent care	deductible only on som	e state returns)			2023 Amount	2022 Amount
Meals Entertainment (d Utilities Wages Dependent care	deductible only on som	e state returns)			2023 Amount	2022 Amount
Meals Entertainment (d Utilities Wages Dependent care	deductible only on som	e state returns)			2023 Amount	2022 Amount
Meals Entertainment (d Utilities Wages Dependent care ther Expense	benefits	Description			2023 Amount	2022 Amount
Meals Entertainment (d Utilities Wages Dependent care ther Expense	benefits	Description				2022 Amount
Meals Entertainment (d Utilities Wages Dependent care her Expense	benefits	Description	re space is neede		Date Acquired	2022 Amount
Meals Entertainment (d Utilities Wages Dependent care her Expense:	benefits	Description Description	re space is neede			
Meals Entertainment (d Utilities Wages Dependent care her Expense	benefits	Description Description	re space is neede		Date Acquired	
Meals Entertainment (d Utilities Wages Dependent care her Expense	benefits	Description Description	re space is neede		Date Acquired	





Business Expenses - Vehicle and Other Listed Property

Name of Business:					
Principal Business or Profession:					
Listed Property Questions for 2023:				Yes	No
Do you have evidence to support your deduc	tion?				
Do you have evidence to support the busines					
If Yes, is the evidence written?					L
If you are an employer who provides vehicle	les for use by employee	s:		Yes	No
Do you maintain a written policy statemer	nt that prohibits all persor	nal use of vehicles, inclu	ding commuting, by your employees	-	NO
Do you maintain a written policy statemen	nt that prohibits personal	use of vehicles, except of	commuting, by your employees?		
Do you treat all use of vehicles by employ	ees as personal use?			🔲	
Do you provide more than five vehicles to	vour emplovees, obtain i	nformation from vour en	nplovees about the use of the		
vehicles and retain the information rec	. 10	•			
Wahiala.	Vehi	cle 1	Vehicle 2		
Vehicle:					
Description of vehicle			_ -		
Date placed in service (Mo/Da/Yr) Do you (or your spouse) have another					
vehicle available for your personal use?	Yes No		Yes No		
Was your vehicle available for use during					
off-duty hours?	Yes No		Yes No		
Mileage:	2023 Miles	2022 Miles	2023 Miles 2	2022 Miles	
Total miles					
Total business miles					
Total commuting miles for the year					
Actual Expenses:	2023 Amount	2022 Amount	2023 Amount 20	22 Amount	
Gasoline, oil, repairs, insurance, etc					
Interest					
Taxes					
Vehicle rentals/leases					

Business Expenses



usiness Expenses:				
•	Enter all expenses at 100 percent			
If not 100%, please ent	ter the percentage to apply to this business			
			2023 Amount	2022 Amount
Parking fees and tolls Local transportation				
Travel expenses				
Meals				
Entertainment (deducti Other Business Expens	ible only on some state returns)ses:			
·	Description		2023 Amount	2022 Amount
				_
eimbursements:	List only reimbursements NOT reported in Box 1 of your Form W-2		2023 Amount	2022 Amount
Amount received for of				
	eals			
	ntertainment			
•	mployee, does your employer's reimbursement plan for meals		-	
and entertainment a ehicle:	allow for offset of other reimbursements?		Yes N	0
	tow the presentage to emply to this business		0/	
Description of vehicle	ter the percentage to apply to this business		<u>%</u>	
•	ed in service	(Mo/Da/Yr)		
Bate vernele was place	a in ostrico			
Do you (or your spouse	e) have another vehicle available for personal purposes?		Yes N	0
	able for personal use during off-duty hours?		Yes N	0
•	, , , , , , , , , , , , , , , , , , , ,		2023	2022
			2023	2022
Total miles				
				-
Total business miles				
Average daily commuti	ing miles			- - -
Average daily commutity Total commuting miles	ing miles			
Average daily commutity Total commuting miles	ing miles			
Average daily commuting Total commuting miles Gasoline and oil	ing miles			
Average daily commuting Total commuting miles Gasoline and oil Repairs	ing miles for the year			
Average daily commuting Total commuting miles Gasoline and oil Repairs Insurance	ing miles for the year			
Average daily commuting miles Gasoline and oil Repairs Insurance Interest Taxes	ing miles of for the year			
Average daily commuting miles Total commuting miles Gasoline and oil Repairs Insurance Interest Taxes Value of employer provi	rided vehicle			
Average daily commuting miles Gasoline and oil Repairs Insurance Interest Taxes Value of employer providence of the prov	ring miles for the year rided vehicle tals			
Average daily commuting Total commuting miles Gasoline and oil Repairs Insurance Interest Taxes Value of employer provident of the Tair market value of lease Value of leas	ring miles I for the year Vided vehicle Stals			
Average daily commuting Total commuting miles Gasoline and oil Repairs Insurance Interest Taxes Value of employer provident of the Tair market value of lease Value of leas	ing miles if for the year vided vehicle tals ased vehicle			

Business Use of Home

6D

Name of Business:					
Principal Business or Profession:					
Partial Use of Your Home for Business:			2023	2022	
Square footage of home used exclusively for busines	s				
				1	
Total hours home was used for day care during the year					
				Yes	No
Was your home used for day care purposes for the en	ntire vear?				
Were improvements made to the home and/or home					
Expenses: Enter all expenses at 100 per	cent				
Direct expenses benefit the business part of your hor					
Example: Cost of painting or repairs made to the		ised for business.			
Indirect expenses are required for keeping up and rur	•				
Example: Real estate taxes.	ming your ontire nome.				
	Direct E	xpenses	Indirect	Expenses	
	2023 Amount	2022 Amount	2023 Amount	2022 Amoun	t
Casualty losses					
Deductible mortgage interest paid to:					
Financial institutions					
Individuals					
Real estate taxes					
Insurance					
Repairs and maintenance					
Utilities					
Rent					
		1	1	1	
Other Expenses:					
Other Expenses:					
	Direct E	vnoncoc	Indirect	Evnoncos	

Description	Direct E	xpenses	Indirect Expenses		
Description	2023 Amount	2022 Amount	2023 Amount	2022 Amount	

Seller-Financed Mortgage Interest Information:

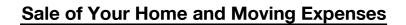
Name of Individual to Whom Mortgage Interest Was Paid	Identification Number of Individual	Address of Individual to Whom Mortgage Interest Was Paid



Sales of Stocks, Securities, Capital Assets & Installment Sales

Gains or Losses from Sales of Stocks, Securities and Other Capital Assets:

		Include all Fo	rms 1099-A, 1099-B, 1099-S and co	pie	s of mut	ual fund	d stat	ements f	or the yea	ar		
Die	d you	ı have any of the fo	ollowing during the year?								Yes	No
	Sale Sale Sale Con Reir Sale Deb	es of inherited propes of any stock or sefore or 30 days aformodity sales, shows the properties of any investment of the properties that became unurities that became unurities that became	rities or investments for something other than of erty stock options at a loss and purchases of the sale ter the sale rt sales or straddles roceeds of gains in a qualified opportunity fund as in qualified opportunity funds collectible	cash me c	or substant	ially simila	ar stock	or options	30 days			
	TSJ						Date So (Mo/Da					
Α									(,		
В												
C D												
Ε												
F												
G H												
• • •		II.										
					Gross : Price (Commis	Less		st or r Basis	Federal Ta Withheld		State Ta Withhel	
				Α								
				B C								
				D								
				Ε								
				F								
				G H								
ln	stal	lment Sales:	Do not include interest received in		incipal a	mount		1		"		
Т	SJ		Property Description			Date S (Mo/Da		20 Principal)23 Received	Princ	2022 ipal Recei	ived
						,	- ' '					





Sale or Exchange of Your Home:

Include the closing statements from the purchase and sale of your former and new hom	es
Former Home Information:	
TSJ (Mo/Da/Yr) Date acquired (Mo/Da/Yr) Date sold (Mo/Da/Yr)	
Selling price	
Original Cost and Cost of Improvements:	
Description	Amount
Sale Expenses:	
Commissions, legal fees, advertising and other expenses. Description	Amount
Did you personally own and occupy the home for at least 2 of the 5 years preceding the sale? If your spouse is deceased, did the sale occur within two years of the date of death and did your spouse live in the home for at least 2 of the 5 years preceding the sale? If you had a foreign mortgage on the above property, please provide the amount of the mortgage retired on the sale and the was acquired or the date the mortgage was most recently renegotiated	
oving Expenses:	
TSJ	
Were the moving expenses reimbursed by your employer? Enter reimbursements not included in wages on your Form W-2	Yes No
Was the move due to a permanent change of station pursuant to a military order?	Yes No
Mileage:	Miles
Number of miles from old home to new workplace (applicable only on some state returns) Number of miles from old home to old workplace (applicable only on some state returns) Number of automobile miles	
Transportation Expenses:	Amount
Costs of transportation of household goods and personal effects Costs of travel and lodging (do not include meals or automobile expenses) Automobile expenses (gasoline, oil, etc.)	



Individual Retirement Account (IRA):	Include all copies of	of Forms 10	99-R and 549	8.			
TS							
IRA Questions for 2023:						Yes	No
Are you covered by an employer's retirem	ent plan?						
If no, is your spouse covered by an em							
Do you want to limit your IRA contribution							
If no, do you want to contribute the ma		your IRA even	though you may ı	not qualify			
Did you use any IRA as security for a loan							
Did you have any transactions with any IF							
	trading the year.						
IRA Values, Rollovers, and Distributions: Total value of all traditional IRAs on Decer Note: This information or Form 5498 is Outstanding rollovers on December 31, 20 Total distributions converted to Roth IRAs Total retirement plans converted to Roth I Contributions: IRA: Contributions in 2023 for the 2023 tax Contributions in 2024 for the 2023 tax Amount for 2023 you choose to be tre Roth IRA: Contributions made for the 2023 tax you	required if you received a dis 023 RAs return return ated as nondeductible	stribution durin					
Distributions: Include a	ll Forms 1099-R and a	ny nontaxa	ble distribution	on details			
Name of Payer	2023 Gross Distributions	Taxable Amount	Federal Tax Withheld	State Tax Withheld	Is this a Rollover?	2022 G Distribu	



9A



Pensions and Annuities:

SIMPLE plan

TS	SJ Name	of Payer	2023 Gross Distributions	Taxable Amount	Federal Tax Withheld	State Tax Withheld	Is this a Rollover?	2022 Gross Distributions

Include all Forms 1099-R and any nontaxable distribution details

Self-Employed Retirement Plan: Include copies of all Forms 109	9-R Taxpayer	Spouse
Have you established a self-employed retirement or SIMPLE plan with deductible contributions?	Yes No	Yes No
Do you want to contribute the maximum amount allowed?		
Contributions to:	2023 Amount	2023 Amount
Simplified employee pension plan Defined benefit plan		



Rental and Royalty Income

ocation of Property:		
TSJ		
Type of property		
Have you prepared or will you prepare all required Forms 1099?		Yes No
	2023	2022
Ownership percentage if not 100%	%	
How many days was this property rented at fair market value? How many days was this property used personally (including use by family members)?	,,	
ncome:	2023 Amount	2022 Amount
Rents received Royalties received		
Payment card and third party transactions: Include all Forms 1099-K		
Description	2023 Amount	2022 Amount
Miscellaneous income: Include all Forms 1099-MISC		
Description	2023 Amount	2022 Amount
Other income:		
Description	2023 Amount	2022 Amount



10A



Location of Property:		
Expenses:	2023 Amount	2022 Amount
Advertising		
Auto and travel		
Cleaning and maintenance		
Commissions		
Insurance		
Legal and other professional fees		
Management fees		
Mortgage interest paid to banks, etc.		
Mortgage interest paid to individuals		
Other interest		
Repairs		
Supplies		
Taxes		
Utilities		
Dependent care benefits		
Employee benefits		
Other Expenses:		
Description	2023 Amount	2022 Amount
		_
		-
		-
		-
		-





Rental and Royalty Property and Equipment & Depletion

	d Equipment:	Include a list if	more space is needed	<u>k</u>		
cquisition X if	Description				Date Acquired (Mo/Da/Yr)	Cost
not new			Scription		(Mo/Da/Yr)	
spositi	Descrip	otion	Date Acquired (Mo/Da/Yr)	Cost	Date Sold (Mo/Da/Yr)	Selling Price

Duadication Time	Royalty Income	
Production Type	2023 Amount	2022 Amount





Rental and Royalty Vehicle and Other Listed Property

Location of Property:											
Listed Property Questions for 2023:				Yes	No						
Do you have evidence to support the busines	ss use percentage claimed	d on listed property?									
If you are an employer who provides vehic	les for use by employees	s:		Yes	No						
Do you maintain a written policy statemer	nt that prohibits all person	al use of vehicles, includ	ding commuting, by your employees								
Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? Do you treat all use of vehicles by employees as personal use? Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles and retain the information received?											
						Do you meet the requirements for qualifie use by individuals other than full-time possessions in the vehicle and limits to	vehicle salespersons, use	for personal vacation tri	ps, storage of personal		
						Vehicle:	Vehi	cle 1	Vehicle 2		
Description of vehicle Date placed in service (Mo/Da/Yr) Do you (or your spouse) have another vehicle available for your personal use? Was your vehicle available for use during off-duty hours?	Yes No		Yes No								
Mileage:	2023 Miles	2022 Miles	2023 Miles 2	2022 Miles							
Total miles Total business miles Total commuting miles for the year											
Actual Expenses:	2023 Amount	2022 Amount	2023 Amount 20	022 Amount							
Gasoline, oil, repairs, insurance, etc Interest Taxes Fair market value of leased vehicle Vehicle rentals/leases											



10D



usiness Expenses:	Enter all expenses at 100 percent			
If not 100%, enter the p	percentage to apply to this business			
]	2023 Amount	2022 Amount
Parking fees and tolls		-	2020 / 111104111	2022711104111
				_
	ble only on some state returns)			
Other Business Expens	ses:			
	Description		2023 Amount	2022 Amount
eimbursements:	List only reimbursements NOT reported in Box 1 of your Form W-2		2023 Amount	2022 Amount
Amount received for ot	her expenses			-
Amount received for many	eals			
Amount received for en	ntertainment			
Amount received for erehicle:	ntertainment		0.4	
Amount received for erehicle: If not 100%, enter the p	ntertainment	L 	%	
Amount received for erehicle: If not 100%, enter the properties to be properties of the properties of	percentage to apply to this business		<u>%</u>	
Amount received for erehicle: If not 100%, enter the properties to be properties of the properties of	ntertainment		<u>%</u>	
Amount received for ereficle: If not 100%, enter the properties of vehicle Date vehicle was place Do you (or your spouse)	ntertainment percentage to apply to this business d in service have another vehicle available for personal purposes?		Yes No	
Amount received for ereficle: If not 100%, enter the properties of vehicle Date vehicle was place Do you (or your spouse)	percentage to apply to this business d in service			
Amount received for ereficle: If not 100%, enter the properties of vehicle Date vehicle was place Do you (or your spouse)	ntertainment percentage to apply to this business d in service have another vehicle available for personal purposes?		Yes No	2022
Amount received for erehicle: If not 100%, enter the properties of vehicle Date vehicle was place. Do you (or your spouse Was your vehicle availant.)	ntertainment percentage to apply to this business d in service have another vehicle available for personal purposes?	(Mo/Da/Yr)	Yes No No No	2022
Amount received for erehicle: If not 100%, enter the properties of vehicle Date vehicle was place. Do you (or your spouse Was your vehicle availated or the properties of th	percentage to apply to this business d in service have another vehicle available for personal purposes? able for personal use during off-duty hours?	(Mo/Da/Yr)	Yes No No No	2022
Amount received for erehicle: If not 100%, enter the public pate vehicle was place Do you (or your spouse) Was your vehicle availated. Total miles	percentage to apply to this business Id in service Is have another vehicle available for personal purposes? In able for personal use during off-duty hours?	(Mo/Da/Yr)	Yes No No No	2022
Amount received for erehicle: If not 100%, enter the properties of vehicle Date vehicle was place. Do you (or your spouse Was your vehicle availated of the properties of th	ntertainment percentage to apply to this business id in service e) have another vehicle available for personal purposes? able for personal use during off-duty hours?	(Mo/Da/Yr)	Yes No No No	2022
Amount received for erehicle: If not 100%, enter the properties of vehicle Date vehicle was place. Do you (or your spouse Was your vehicle availated of the properties of th	ntertainment percentage to apply to this business id in service e) have another vehicle available for personal purposes? able for personal use during off-duty hours?	(Mo/Da/Yr)	Yes No No No	2022
Amount received for erehicle: If not 100%, enter the properties of vehicle Date vehicle was place. Do you (or your spouse Was your vehicle availated of the properties of th	ntertainment percentage to apply to this business d in service have another vehicle available for personal purposes? able for personal use during off-duty hours?	(Mo/Da/Yr)	Yes No No No	2022
Amount received for erehicle: If not 100%, enter the properties of the properties of vehicle and the properties of the	ntertainment percentage to apply to this business id in service i) have another vehicle available for personal purposes? able for personal use during off-duty hours?	(Mo/Da/Yr)	Yes No No No	2022
Amount received for erehicle: If not 100%, enter the properties of the properties of vehicle and of the properties of t	ntertainment percentage to apply to this business id in service i) have another vehicle available for personal purposes? able for personal use during off-duty hours?	(Mo/Da/Yr)	Yes No No No	2022
Amount received for erehicle: If not 100%, enter the properties of the properties of vehicle and other properties of the properties of th	ntertainment percentage to apply to this business id in service e) have another vehicle available for personal purposes? able for personal use during off-duty hours? ing miles for the year	(Mo/Da/Yr)	Yes No No No	2022
Amount received for erehicle: If not 100%, enter the properties of vehicle Date vehicle was place Do you (or your spouse Was your vehicle availated of the properties of the	percentage to apply to this business d in service e) have another vehicle available for personal purposes? able for personal use during off-duty hours?	(Mo/Da/Yr)	Yes No No No	2022
Amount received for erehicle: If not 100%, enter the properties of vehicle Date vehicle was place Do you (or your spouse Was your vehicle availated) Total miles Total business miles Average daily commutity Total commuting miles Gasoline and oil Repairs Insurance Interest Taxes Value of employer proviews and the property vehicle renterest Temporary vehicle renterest	ntertainment percentage to apply to this business id in service s) have another vehicle available for personal purposes? able for personal use during off-duty hours? ing miles for the year ided vehicle als	(Mo/Da/Yr)	Yes No No No	2022
Amount received for erehicle: If not 100%, enter the properties of vehicle Date vehicle was place Do you (or your spouse Was your vehicle availated of the properties of the	ntertainment percentage to apply to this business id in service s) have another vehicle available for personal purposes? able for personal use during off-duty hours? ing miles for the year ided vehicle als	(Mo/Da/Yr)	Yes No No No	2022
Amount received for erehicle: If not 100%, enter the properties of the properties of vehicle and of the properties of t	ntertainment percentage to apply to this business id in service e) have another vehicle available for personal purposes? able for personal use during off-duty hours? ing miles for the year ided vehicle als ased vehicle	(Mo/Da/Yr)	Yes No No No	2022
Amount received for erehicle: If not 100%, enter the properties of the properties of vehicle and of the properties of t	ntertainment percentage to apply to this business id in service e) have another vehicle available for personal purposes? able for personal use during off-duty hours? ing miles for the year ided vehicle als ased vehicle	(Mo/Da/Yr)	Yes No No No	2022



Location of Property:				
Partial Use of Your Home for Business:				2023
Square footage of home used exclusively for business. Total square footage of home Were improvements made to the home and/or home.				Yes N
Expenses: Enter all expenses at 100 per		ů ů		
Direct expenses benefit the business part of your hon Example: Cost of painting or repairs made to the s		ed for business.		
Indirect expenses are required for keeping up and rur Example: Real estate taxes.				
	Direct E	xpenses	Indirect I	Expenses
	2023 Amount	2022 Amount	2023 Amount	2022 Amount
Casualty losses Deductible mortgage interest paid to: Financial institutions Individuals Real estate taxes Insurance Repairs and maintenance Utilities Rent				
Other Expenses:	Direct F	vnoncoo	Indivest	Evnonco
Description	2023 Amount	xpenses 2022 Amount	2023 Amount	Expenses 2022 Amount
	2023 Amount	2022 Amount	2023 Amount	2022 Am

Seller-Financed Mortgage Interest Information:

Name of Individual to Whom Mortgage Interest Was Paid	Identification Number of Individual	Address of Individual to Whom Mortgage Interest Was Paid

Oil & Gas Royalty Income and Expenses (Attach all Forms 1099-Misc)

Name of Oil Company
Grace revalty income
Gross royalty income
Severance tax
Other Expenses
Net received
Property taxes paid
Name of Oil Company
Gross royalty income
Severance tax
Other Expenses
Net received
Property taxes paid
Name of Oil Company
Gross royalty income
Severance tax
Other Expenses
Net received
Property taxes paid
Name of Oil Company
Gross royalty income
Severance tax
Other Expenses
Net received
Property taxes paid
Name of Oil Company
Gross royalty income
Severance tax
Other Expenses
Net received
Property taxes paid

Attach additional pages if necessary



Partnership, S Corporation, Estate, Trust and REMIC Income

Partnership Inco	ome: Include all Schedules K-1		
TSJ	Entity Name	Employer ID Number	Health Insurance Paid by Entity
Corporation In	ncome: Include all Schedules K-1		
TSJ	Entity Name	Employer ID Number	Health Insurance Paid by Entity
state and Trus	t Income: Include all Schedules K-1		
TSJ	Entity Name		Employer ID Number
teal Estate Mor	rtgage Investment Conduit (REMIC) Income:	de all Schedules Q	
TSJ	Entity Name		Employer ID Number



Farm Income (Page 1 of 2)

Proprietor's Name:				
Principal Crop or Activity:				
TSJ Employer identification number				
Method of accounting Farm Questions for 2023:				
railii Questions for 2025.				Yes No
If Yes, what was the disposition date?		(Mo/Da/	Yr)	
Have you prepared or will you prepare all required F	orms 1099?			
			2023 Amount	2022 Amount
Health incurance premiums paid for vourself and vo	ur danandanta			
Health insurance premiums paid for yourself and you	ur dependents			
Sales of Livestock and Other Items Bough	nt for Resale (Cash	Method Only):		
	20	023	29	022
Description	Amount Received	Cost or Other Basis	Amount Received	Cost or Other Basis
Income (Accrual Method):				
Description	Beginning Inventory	Cost of Items Purchased	Sales	Ending Inventory
Income:			2023 Amount	2022 Amount
Sales of livestock, produce, grains, etc. you raised				
Total cooperative distributions (Forms 1099-PATR)				
Taxable cooperative distributions				
T 11 1 1				
Total crop insurance proceeds and certain disaster				
-				
Crop insurance proceeds deferred from prior year				
				1
				1
				1
State gasonine tax or ruer tax credit or return				1





Farm Income (Page 2 of 2)

roprietor's Name:			
rincipal Crop or Activit	y:		
ncome:			
Payment card and third part	y transactions: Include all Forms 1099-K		
	Description	2023 Amount	2022 Amount
			-
Government payments:	Include all Forms 1099-G		
	Description	2023 Amount	2022 Amount
			_
Miscellaneous income:	Include all Forms 1099-MISC and 1099-NEC		
	Description	2023 Amount	2022 Amount
Other income:			
	Description	2023 Amount	2022 Amount
1		I	1



Farm Expenses and Property & Equipment

roprietor	s Name:				
incipal C	rop or Activity:				
penses:				2023 Amount	2022 Amount
Business n	neals				
	ent (deductible only on some state returns)				
	ick expenses				
Chemicals					
	on expenses re (machine work)				
	penefit programs and health insurance (other than				
	nased	•	· ,		
Fertilizers a					
Freight and	1 1 9				
Gasoline, fo	/				
	other than health)				
	ortgage (paid to banks, etc.)				
	ther				
Labor hired					
	d profit-sharing plans				
	se - vehicles, machinery and equipment				
	se - other (land, animals, etc.)				
•	d maintenance				
	plants purchased				
	d warehousing				
Supplies po	urchased				
•	breeding and medicine				
-	preproductive period expenses				
Dependent her Expe	care benefits				
	Description			2023 Amount	2022 Amount
operty a	nd Equipment: Include a list if more	e space is need	led		
	Acquisitions - Description		Date Acquired	Cost	
X if		(Mo/Da/Yr)			
X if not new	, toquious 50				
	//oquiotions 5				
	Dispositions - Description	Date Acquired	Cost	Date Sold	Selling Price





Farm Vehicle and Other Listed Property

Proprietor's Name:					
Principal Crop or Activity:					
Listed Property Questions for 2023:				Yes	No
Do you have evidence to support the busines		d on listed property?			
If you are an employer who provides vehic	les for use by employees	: :		Yes	No
Do you maintain a written policy statemen	nt that prohibits all person	al use of vehicles, include	ding commuting, by your emplo	├	
Do you maintain a written policy statemen	nt that prohibits personal ເ	use of vehicles, except	commuting, by your employees	? [
Do you treat all use of vehicles by employ	ees as personal use?				
Do you provide more than five vehicles to vehicles and retain the information rec		•	nployees about the use of the	🔲 [
Do you meet the requirements for qualifie use by individuals other than full-time in the vehicle and limits the total miles	vehicle salespersons, use	for personal vacation tr	rips, storage of personal posses		
Vehicle:	Vehic	de 1	Vehicle	2	
Description of vehicle Date placed in service (Mo/Da/Yr) Do you (or your spouse) have another vehicle available for your personal use? Was your vehicle available for use during off-duty hours?	Yes No		Yes No		
Mileage:	2023 Miles	2022 Miles	2023 Miles	2022 Miles	
Total miles Total business miles Total commuting miles for the year					
Actual Expenses:	2023 Amount	2022 Amount	2023 Amount	2022 Amount	
Gasoline, oil, repairs, insurance, etc Interest Taxes Fair market value of leased vehicle Vehicle rentals/leases					

Farm Business Expenses



Parking fees and tolls Local transportation Travel expenses Meals Entertainment (deductible onl Other Business Expenses: List in E Amount received for other ex Amount received for meals Amount received for entertain Vehicle: If not 100%, enter the percent Description of vehicle Date vehicle was placed in se Do you (or your spouse) have Was your vehicle available for	age to apply to this business y on some state returns) Description Conly reimbursements NOT reported fox 1 of your Form W-2 Denses ment age to apply to this business	2023 Amount 2023 Amount 2023 Amount	2022 Amount 2022 Amount 2022 Amount
Parking fees and tolls Local transportation Travel expenses Meals Entertainment (deductible onl Other Business Expenses: List in E Amount received for other ex Amount received for meals Amount received for entertain /ehicle: If not 100%, enter the percent Description of vehicle Date vehicle was placed in se Do you (or your spouse) have Was your vehicle available for	age to apply to this business y on some state returns) Description conly reimbursements NOT reported fox 1 of your Form W-2 Denses ment	2023 Amount 2023 Amount 2023 Amount	2022 Amount 2022 Amount
Parking fees and tolls Local transportation Travel expenses Meals Entertainment (deductible onl Other Business Expenses: Reimbursements: List in E Amount received for other ex Amount received for meals Amount received for entertain /ehicle: If not 100%, enter the percent Description of vehicle Date vehicle was placed in set Do you (or your spouse) have Was your vehicle available for	Description Conly reimbursements NOT reported Sox 1 of your Form W-2 Denses ment	2023 Amount 2023 Amount 2023 Amount	2022 Amount 2022 Amount
Local transportation Travel expenses Meals Entertainment (deductible onl Other Business Expenses: Reimbursements: List in E Amount received for other exp Amount received for meals Amount received for entertain Description of vehicle Date vehicle was placed in see Do you (or your spouse) have Was your vehicle available for	Description Conly reimbursements NOT reported fox 1 of your Form W-2 Denses Denses	2023 Amount 2023 Amount	2022 Amount
Local transportation Travel expenses Meals Entertainment (deductible onl Other Business Expenses: Reimbursements: List in E Amount received for other exp Amount received for meals Amount received for entertain /ehicle: If not 100%, enter the percent Description of vehicle Date vehicle was placed in see Do you (or your spouse) have Was your vehicle available for	Description Conly reimbursements NOT reported fox 1 of your Form W-2 Denses Denses	2023 Amount	
Travel expenses Meals Entertainment (deductible onl Other Business Expenses: Reimbursements: List in E Amount received for other ex Amount received for meals Amount received for entertain /ehicle: If not 100%, enter the percent Description of vehicle Date vehicle was placed in se Do you (or your spouse) have Was your vehicle available for	Description Conly reimbursements NOT reported Sox 1 of your Form W-2 Denses Denses	2023 Amount	
Travel expenses Meals Entertainment (deductible onl Other Business Expenses: Reimbursements: List in E Amount received for other ex Amount received for meals Amount received for entertain /ehicle: If not 100%, enter the percent Description of vehicle Date vehicle was placed in se Do you (or your spouse) have Was your vehicle available for	Description Conly reimbursements NOT reported Sox 1 of your Form W-2 Denses Denses	2023 Amount	
Reimbursements: Amount received for other also Amount received for entertain fehicle: If not 100%, enter the percent Description of vehicle Date vehicle was placed in see Do you (or your spouse) have Was your vehicle available for Total miles	Description Conly reimbursements NOT reported Sox 1 of your Form W-2 Denses ment	2023 Amount	
Amount received for other ex Amount received for entertain /ehicle: If not 100%, enter the percent Description of vehicle Date vehicle was placed in se Do you (or your spouse) have Was your vehicle available for Total miles	Description conly reimbursements NOT reported fox 1 of your Form W-2 Denses ment	2023 Amount	
Amount received for other ex Amount received for meals Amount received for entertain /ehicle: If not 100%, enter the percent Description of vehicle Date vehicle was placed in set Do you (or your spouse) have Was your vehicle available for Total miles	conly reimbursements NOT reported sox 1 of your Form W-2 penses	2023 Amount	
Amount received for other expanding received for meals. Amount received for entertain /ehicle: If not 100%, enter the percent Description of vehicle. Date vehicle was placed in set Do you (or your spouse) have Was your vehicle available for Total miles	conly reimbursements NOT reported sox 1 of your Form W-2 penses	2023 Amount	
Amount received for other expanding received for meals. Amount received for entertain /ehicle: If not 100%, enter the percent Description of vehicle. Date vehicle was placed in set Do you (or your spouse) have Was your vehicle available for Total miles.	penses ment		2022 Amount
Amount received for other expanding received for meals. Amount received for entertain /ehicle: If not 100%, enter the percent Description of vehicle. Date vehicle was placed in set Do you (or your spouse) have Was your vehicle available for Total miles	penses ment		2022 Amount
Amount received for other extended for meals amount received for meals amount received for entertain /ehicle: If not 100%, enter the percent Description of vehicle abete Date vehicle was placed in set Do you (or your spouse) have Was your vehicle available for Total miles	penses ment		2022 Amount
Amount received for other extended for other extended for meals. Amount received for entertain /ehicle: If not 100%, enter the percent Description of vehicle. Date vehicle was placed in set to you (or your spouse) have Was your vehicle available for Total miles	pensesment	%	
Amount received for meals Amount received for entertain rehicle: If not 100%, enter the percent Description of vehicle Date vehicle was placed in set Do you (or your spouse) have Was your vehicle available for Total miles	ment	%	
Amount received for entertain /ehicle: If not 100%, enter the percent Description of vehicle Date vehicle was placed in set Do you (or your spouse) have Was your vehicle available for Total miles	ment	<u>%</u>	
/ehicle: If not 100%, enter the percent Description of vehicle Date vehicle was placed in set Do you (or your spouse) have Was your vehicle available for Total miles		<u>%</u>	
Description of vehicle Date vehicle was placed in se Do you (or your spouse) have Was your vehicle available for Total miles	age to apply to this business	<u>%</u>	
Description of vehicle Date vehicle was placed in se Do you (or your spouse) have Was your vehicle available for Total miles			
Date vehicle was placed in set of the policy pour spouse of the policy place. Do you (or your spouse) have was your vehicle available for the policy place. Total miles			
Was your vehicle available for	rvice (Mo/Da/Yr)		
Was your vehicle available for			
Total miles	another vehicle available for personal purposes?	Yes No	
	personal use during off-duty hours?	Yes No	
		2023	2022
Total business miles			
	ss		
	year		
In a comment of			
Value of employer provided ve			
Fair market value of leased ve			
Vehicle leases			
Other Vehicle Expenses:			
	Description	2023 Amount	2022 Amount



Include Forms: W-2G, 1099-MISC, 1099-NEC, 1099-RRB, 1099-SSA, 1099-SA, 1099-LTC, 1099-QA, and 1099-G

Miscellaneous Income and Adjustments:	TSJ		TSJ	
	2023 Amount	2022 Amount	2023 Amount	2022 Amount
Unemployment compensation received				
Unemployment compensation repaid in 2023				
Social security benefits received				
Social security benefits repaid in 2023				
Medicare premiums withheld				
Tier 1 railroad retirement benefits received				
Tier 1 railroad retirement benefits repaid in 2023				
Total lump sum social security received				
Lump sum taxable social security				
Other federal withholding				
Other state withholding				

State and Local Income Tax Refunds:

TOI	State	tate City Tax		City		Income Ta	ax Refund
130	State	City	Year	State	Local		

Other Income:

TSJ	Nature and Source	2023 Amount	2022 Amount

Alimony Paid or Received:

TSJ	Recipient's Name	Recipient's Social Security Number	Date of Original Divorce or Separation (Mo/Da/Yr)	Date Divorce or Separation Agreement Modified (Mo/Da/Yr)	2023 Amount	2022 Amount



Savings Accounts	s (HSAs) Include	all Forms 1099-SA		
	De	ription	2023 Amount	2022 Amount
Contributions made fo	or 2023			
Distributions received	from all HSAs in 2023			
istributions from your I r your spouse enroll in what month did you e month did your spouse	HSA for unreimbursed in Medicare?	dical expenses?		
	Nature	nd Source	2023 Amount	2022 Amount
				- - -
i	Contributions made for Distributions received of coverage applies to HSA contributions list distributions from your life your spouse enroll in what month did your spouse enroll did your spouse enroll did your spouse	Descriptions made for 2023 Distributions received from all HSAs in 2023 of coverage applies to your high deductible head HSA contributions listed above also shown on your stributions from your HSA for unreimbursed meanyour spouse enroll in Medicare? what month did you enroll? month did your spouse enroll? djustments to Income: Include all F	Description Contributions made for 2023 Distributions received from all HSAs in 2023 of coverage applies to your high deductible health plan? HSA contributions listed above also shown on your Form W-2? istributions from your HSA for unreimbursed medical expenses? your spouse enroll in Medicare? what month did you enroll? nonth did your spouse enroll?	Description Contributions made for 2023 Distributions received from all HSAs in 2023 of coverage applies to your high deductible health plan? HSA contributions listed above also shown on your Form W-2? istributions from your HSA for unreimbursed medical expenses? your spouse enroll in Medicare? what month did you enroll? nonth did your spouse enroll? djustments to Income: Include all Forms 1098-E for Student Loan Interest Paid



euic	cal and Dental Expenses:	TSJ	2023 Amount	2022 Amount
	scription medicines and drugs			
ota	al medical insurance premiums paid *			
_on	g-term care expenses			
	al insurance reimbursement			
	nber of miles traveled for medical care			
Pers	sonal protective equipment			
Lod	ging			
Doc	tors, dentists, etc.			
Hos	pitals			
Lab	fees			
Eye	glasses and contacts			
			2023 Amount	2022 Amount
Taxr	payer long-term care insurance premiums paid			
-	use long-term care insurance premiums paid			1
-				1
* Do	not include Medicare premiums or premiums deducted in computing taxable wages repo	orted on	a W-2.	
hor	Medical Expenses:			
ı iCi	Medical Expenses.			
TSJ	Description		2023 Amount	2022 Amount
TSJ	Description		2023 Amount	2022 Amount
TSJ	Description		2023 Amount	2022 Amount
TSJ	Description		2023 Amount	2022 Amount
TSJ	Description		2023 Amount	2022 Amount
	Description Paid: Include copies of your tax bills		2023 Amount	2022 Amount
		TSJ	2023 Amount 2023 Amount	2022 Amount 2022 Amount
xes	Paid: Include copies of your tax bills	TSJ		
xes Pers	s Paid: Include copies of your tax bills sonal property taxes paid (include vehicle taxes)	TSJ		
xes Pers	Paid: Include copies of your tax bills	TSJ		
xes Pers	s Paid: Include copies of your tax bills sonal property taxes paid (include vehicle taxes)	TSJ		
xes Pers Gen	S Paid: Include copies of your tax bills Sonal property taxes paid (include vehicle taxes) eral sales taxes paid on specified items	TSJ		
xes Pers Gen	s Paid: Include copies of your tax bills sonal property taxes paid (include vehicle taxes) eral sales taxes paid on specified items size real estate taxes by state.	TSJ	2023 Amount	2022 Amount
xes Pers	s Paid: Include copies of your tax bills sonal property taxes paid (include vehicle taxes) eral sales taxes paid on specified items size real estate taxes by state.	TSJ	2023 Amount	2022 Amount
xes Pers Gen	s Paid: Include copies of your tax bills sonal property taxes paid (include vehicle taxes) eral sales taxes paid on specified items size real estate taxes by state.	TSJ	2023 Amount	2022 Amount
Xes Pers Gen	s Paid: Include copies of your tax bills sonal property taxes paid (include vehicle taxes) eral sales taxes paid on specified items size real estate taxes by state.	TSJ	2023 Amount	2022 Amount
Xes Pers Gen Item	S Paid: Include copies of your tax bills Sonal property taxes paid (include vehicle taxes) eral sales taxes paid on specified items size real estate taxes by state. Real Estate Taxes	TSJ	2023 Amount	2022 Amount
Xes Pers Gen Item	s Paid: Include copies of your tax bills sonal property taxes paid (include vehicle taxes) eral sales taxes paid on specified items size real estate taxes by state.	TSJ	2023 Amount	2022 Amount
Pers Gen Item TSJ	s Paid: Include copies of your tax bills sonal property taxes paid (include vehicle taxes) eral sales taxes paid on specified items nize real estate taxes by state. Real Estate Taxes Taxes Paid:	TSJ	2023 Amount 2023 Amount	2022 Amount 2022 Amount
Pers Gen Item	S Paid: Include copies of your tax bills Sonal property taxes paid (include vehicle taxes) eral sales taxes paid on specified items size real estate taxes by state. Real Estate Taxes	TSJ	2023 Amount	2022 Amount
Pers Gen Item TSJ	s Paid: Include copies of your tax bills sonal property taxes paid (include vehicle taxes) eral sales taxes paid on specified items nize real estate taxes by state. Real Estate Taxes Taxes Paid:	TSJ	2023 Amount 2023 Amount	2022 Amount 2022 Amount
Pers Gen Iltem	s Paid: Include copies of your tax bills sonal property taxes paid (include vehicle taxes) eral sales taxes paid on specified items nize real estate taxes by state. Real Estate Taxes Taxes Paid:	TSJ	2023 Amount 2023 Amount	2022 Amount 2022 Amount



Itemized Deductions - Mortgage Interest and Points

ortg	age Questions for 2023:						Yes	No
Did y If Did y If If	Yes, how many years is your new rou purchase a new home or sell you yes, enclose the closing statement yes, also, did you (or your spouse, during the 3 year period prior to the yes, did you (and your spouse, if me in the U.S. for any 5 consecutive yes.)	ur former home during the year? Is from the purchase and sale of your n if married) have an ownership interest if the purchase of this home? It is arried at the time of purchase) own and the ear period during the 8 year period end	ew and former in a principal re	homes. esidence in	the US principal residence	• • • •		
ome	Mortgage Interest Paid To	Financial Institutions:	Did You	Receive				
TSJ		Paid To		1098? No	2023 Amount	2022	2 Amou	nt
·e ı		aid: Paid To	ID N	mbor	2022 Amount	0000) Ama	
rsj-	Name		ID Nu	mber	2023 Amount	2022	2 Amou	nt
		Paid To	ID Nu	mber	2023 Amount	2022	2 Amou	nt
educ	Name	Paid To Address	Did You	Receive 1098?				
duc	Name	Paid To	Did You	Receive	2023 Amount 2023 Amount		2 Amou 2 Amou	
duc	Name	Paid To Address	Did You Form	Receive 1098?				
duc	Name etible Points: ment Interest Expense:	Paid To Address	Did You Form Yes	Receive 1098?		2022		nt
TSJ vest	Name etible Points: ment Interest Expense:	Paid To Address Paid To at is allocable to property held for investigations.	Did You Form Yes	Receive 1098?	2023 Amount	2022	2 Amou	nt



anceled commur contribu	d check, a bar nication from t stion. Clothes	nk copy of a cancele the charity. The writt and household item	ed check, or a bank stanced communication makes donated must be in	int, unless you keep as a record atement containing the name of ust include the name of the charigood, used condition or better in. Attach a copy of the appraisal.	the charity, the ity, date of the order to be d	e date, and the a contribution, ar eductible unless	amount) ond amour and amour and the item	or a written nt of the n donated is
TSJ		Organizatio	on or Description of (Contribution	2023	3 Amount	2022	Amount
TSJ	00% limit	Со	nservation Real Prop	perty	2023	3 Amount	2022	Amount
	60% limit							
TSJ			Description		202	23 Miles	202	2 Miles
N	Jumber of mile	es traveled performin	na volunteer work for a	qualified charitable organizations				
$\overline{}$				clude all documentation.				
TSJ		Desc	ription of Donated Pr		2023	3 Amount	2022	Amount
	ı Contribut	Descritions Totaling M	· 				2022	Amount
	n Contribut	tions Totaling M	· 	roperty				Amount
ncash	n Contribut	tions Totaling M	lore Than \$500:	roperty	ner documenta	ation.		
TSJ	n Contribut air Market alue (FMV)	tions Totaling M	lore Than \$500:	roperty	Date Acquired	ation.		
TSJ	air Market	tions Totaling M	lore Than \$500:	Include all Forms 1098-C or other	Date Acquired	ation.		t or Basis
TSJ	air Market	Method Used to Determine FMV	lore Than \$500:	Include all Forms 1098-C or other Method Descr	Date Acquired	Date of Donation	Cos	Method Acquisiti
TSJ	air Market alue (FMV)	Method Used to Determine FMV	lore Than \$500: roperty Description ppraisal 3 - Comparablatalog 4 - Other (Des	Other Method Descr Sale 5 - Thrift Shop Value cribe)	Date Acquired	Date of Donation 1 - Gift 3 2 - Inheritance 4	Cos	Method Acquisition
TSJ	air Market alue (FMV)	Method Used to Determine FMV	lore Than \$500: roperty Description ppraisal 3 - Comparablatalog 4 - Other (Des	Other Method Descr Sale 5 - Thrift Shop Value cribe)	Date Acquired	Date of Donation 1 - Gift 3 2 - Inheritance 4	Cos	Method Acquisiti



Itemized Deductions - Miscellaneous

* These expenses are not deductible on the federal return but may be deductible on some state returns.

Miscellane	eous Itemized Deductions:			TSJ	2023 Amount	2022 Amount
Union and	professional dues *					
Tax prepar	ration fee *					
Profession	al subscriptions *					
	pense (To extent of income) *					-
Uniforms	sit box *			•		
	S*					
Gambling						
Estate taxe	es			. L		
Other Item	nized Deductions:					
Examples	:					
	Certain legal and accounting fees *	Employment	agency fees *	Impairme	nt-related work expen	se of a disabled person
•	Investment expenses *				nt of amounts under a	
•	Custodial fees *	 Amortizable I 	bond premium			
TSJ	De	escription			2023 Amount	2022 Amount
						_
Casualty o	r Theft Loss:					
TSJ						
	lescription					
Which of the	he following describes the type of prope	erty that sustaine	ed the casualty or theft lo	oss?		
	Barriero Barriero		and the state of	T =	Persor	al use attributable to
	Personal use Business us	e inco	ome producing	Employe	IIISOIVE	nt or bankrupt financial
Was the lo	ess due to a federally declared disaster?	•	Yes No		iristitut	ion losses on deposits
Date acqui	ired	(Mo/Da/Yr)				
Date dama	aged or lost	(Mo/Da/Yr)				
				П		
Original co	ost or other basis			_		
Fair marke	t value before casualty			Т		
i all marke			<u> </u>	_		
Fair marke	t value after casualty					
				_		
Cost of rep	placement			\rfloor		
				П		
Insurance	reimbursement			_		



Child/Dependent Care Expenses & Education Expenses

Child/Dependent Care Expenses:

eneral Information: TSJ										
Were you or your spouse a full time studer								Yes		
Did you pay an individual for services perfo	ormed in your home?						L	Yes		
Expenses incurred in 2022 but paid in 202	3						[
Employer-provided dependent care benefit	ts that were forfeited in	2023								_
2022 carryover used in grace period							L			_
hild/Dependent Care Providers:										
Provider 1:										
Name										_
Street address										
City, state, ZIP or postal code, and co	ountry									
0 11 11 00										
Employer identification number										
Telephone number (California only)										
Provider was a household employee		Yes	N	0						
Trovider was a flouserfold employee		2023 A			2022 A	mount				
Expenses incurred and paid in 2023										
Expenses incurred and not paid in 20										
		<u> </u>								_
Provider 2:										
Name										
Street address										
City, state, ZIP or postal code, and co	-									Ī
On all a constitution and OD										
Employer identification number										
Telephone number (California only)										
Provider was a household employee		Yes	N	0						
Provider was a flouseriold employee		2023 A			2022 A	mount				
Expenses incurred and paid in 2023										
Expenses incurred and not paid in 20										
ualifying Persons for Child/Deper				-						-
			-:-! C		Dia	00	200		000	_
First Name and Initial	Last Name	50	cial Sec Numbe		Dis- abled		023 s Incurred		022 s Incu	11
ner Education Expenses for Educa	ation Credits and	or Tuitio	n Fees	Dedu	ction:					
ualified expenses are for post-secondary edu	ucation tuition and rela	ted expense	s; they d	o not in	clude r	om or boa	ard. Include	e a detailed	listing	j
e expenses.	^ —									
Include copies of all Forms 1098	8-T									



General Information:						
TSJ						
Employer identification nur	mber					
						Yes No
Did you pay any one house	ehold employee cash wages of \$2,40	00 or more in 2023?				
Did you withhold any feder	ral income tax from wages paid to ar	ny household employee?				
Did you pay total cash wag	ges of \$1,000 or more in any calenda	ar quarter of 2022 or 2023?				
Casial Casswitz Madia	are and because Taylor			2023 Amount	· I	2022 Amount
Social Security, Medica	are and Income Taxes:					
Cash wages subject to so	cial security taxes					
Cash wages subject to Me	dicare taxes (if different than cash w	vages subject to social secu	rity)			
Cash wages subject to add	ditional Medicare tax withholding					
Federal income tax withhe	ld					
State disability plan payme	ents subject to social security taxes					
State disability plan payments subject to so	ents subject to Medicare taxes (if differential security)	ferent than plan				
Federal Unemploymen	t (FUTA) Tax:					Yes No
Did you pay unemploymen	t contributions to more than one sta	ate?				
Were all of the wages subj	ect to FUTA tax subject to the state	's unemployment tax?				
			State	Total Cash Wag Subject to FUT		2022 Amount
Complete the following for	all state unemployment contribution	ns made:		1	I	
		X if payment to be m	ade after	April 18, 2024 —	\downarrow	
	Name of State	Total Taxable Wage		ntribution Paid to employment Fund	x	2022 Amount



Federal Tax Payments

Refund Application:				
If you have an overpayment of 2023 taxes, do you want the excess:				
Refunded Yes No				
Applied to your 2024 estimated tax liability Yes No				
Federal Estimated Tax Payments:	Amount Due	Date Paid if Not Date Due (Mo/Da/Yr)	Amount Pa	ıid
2023 1st Quarter Estimate				
2023 2nd Quarter Estimate (Due 06-15-2023)				
2023 3rd Quarter Estimate (Due 09-15-2023)				
2023 4th Quarter Estimate (Due 01-16-2024)				
Tax Planning Information for Tax Year 2024:				
Tax Planning Information for Tax Year 2024: Do you expect any of the following to occur in 2024?			Yes	No
			Yes	No
Do you expect any of the following to occur in 2024?				No
Do you expect any of the following to occur in 2024? A change in your marital status			\square	No
Do you expect any of the following to occur in 2024? A change in your marital status A change in the number of your dependents				No
Do you expect any of the following to occur in 2024? A change in your marital status A change in the number of your dependents A substantial change in your income				No
Do you expect any of the following to occur in 2024? A change in your marital status A change in the number of your dependents A substantial change in your income A substantial change in your withholding				No
Do you expect any of the following to occur in 2024? A change in your marital status A change in the number of your dependents A substantial change in your income A substantial change in your withholding A substantial change in deductions				No
Do you expect any of the following to occur in 2024? A change in your marital status A change in the number of your dependents A substantial change in your income A substantial change in your withholding A substantial change in deductions				No



State and City Tax Payments

State and City Estimated Tax Payments:	TSJ State/City		
	Amount Due	Date Paid if Not Date Due (Mo/Da/Yr)	Amount Paid
2023 1st Quarter Estimate 2023 2nd Quarter Estimate 2023 3rd Quarter Estimate 2023 4th Quarter Estimate If you have an overpayment of 2023 taxes, do you			
			Yes No
2022 overpayment applied to 2023 estimate Balance of prior year(s)' tax paid in 2023 plus amount paid with 2022 extensions Estimated tax payments for 2022 paid in 2023			
State and City Estimated Tax Payments:	TSJ State/City		
	Amount Due	Date Paid if Not Date Due (Mo/Da/Yr)	Amount Paid
2023 1st Quarter Estimate 2023 2nd Quarter Estimate 2023 3rd Quarter Estimate 2023 4th Quarter Estimate			
If you have an overpayment of 2023 taxes, do you			Yes No
2022 overpayment applied to 2023 estimate Balance of prior year(s)' tax paid in 2023 plus amount paid with 2022 extensions Estimated tax payments for 2023 poid in 2023			
Estimated tax payments for 2022 paid in 2023 State and City Estimated Tax Payments:	TSJ	L	
State and Sity Estimated Tax Layments.	State/City		
	Amount Due	Date Paid if Not Date Due (Mo/Da/Yr)	Amount Paid
2023 1st Quarter Estimate 2023 2nd Quarter Estimate 2023 3rd Quarter Estimate 2023 4th Quarter Estimate			
If you have an overpayment of 2023 taxes, do you want the excess applied to your 2024 estimated tax liability?			Yes No
2022 overpayment applied to 2023 estimate Balance of prior year(s)' tax paid in 2023 plus amount paid with 2022 extensions Estimated tax payments for 2022 paid in 2023		Г	



Include all of your current year Forms W-2G

TO .	Name of David	Our and William in	Tax Wi	thheld	
TS	Name of Payer	Gross Winnings	Federal	State	



Gifts Made Outright to an Individual

NOTE: Only complete Forms 34 and/or 35 if in 2023:

- You made gifts of cash or marketable securities to an individual that exceeded \$17,000; or
- You made gifts of hard-to-value assets (such as closely-held stock) to an individual of any amount; or
- You made any transfers to a trust (including paying premiums on a life insurance policy that was transferred to a life insurance trust).

You should include all gifts made to each individual during the year, including gifts for his or her birthday, holiday, anniversary, graduation, etc. In addition, include any gifts you made for educational or medical expenses. You can exclude amounts paid directly to a qualifying educational organization for tuition. You can also exclude amounts paid directly to health care providers if the expenses relate to nonelective medical expenses.

If you made any loans with an interest rate below the market rate of interest, provide details below.

If your most recent gift tax return was not prepared by us, include a copy.

For gifts other than cash, include a copy of any appraisal(s) of assets.

If no appraisal is available, describe how the value was determined.

For each gift made outright to an individual during the year, provide the following information:

Gift 1:

Person giving the gift	1	axpayer		Spouse	Joint
Name of person receiving the gift					
Address of person					
Your relationship to the person					
(e.g., son, granddaughter or friend)					
Age of the person					
Date(s) of gift(s) (Mo/Da/Yr)					
Description and amount of assets gifted					
(e.g., \$17,000 in cash or 500 shares of ABC stock)					
Cost basis of coasts sifted if other than costs					
Cost basis of assets gifted if other than cash Value of assets gifted if other than cash					
	-				
't 2:					
Person giving the gift		axpayer		Spouse	Joint
Name of person receiving the gift					
Addross of person					
Address of person Your relationship to the person					
(e.g., son, granddaughter or friend)					
Age of the person					
Date(s) of gift(s) (Mo/Da/Yr)					
Description and amount of assets gifted			-		
(e.g., \$17,000 in cash or 500 shares of ABC stock)					
Coat having of accepts without it although the grant					
Cost basis of assets gifted if other than cash Value of assets gifted if other than cash					
value di assets ulleu il ullei liani casii					



Gifts Made in Trust

NOTE: Complete this form only if you have made gifts in or to a trust during the year.

For each gift made in trust during the year, provide the following information:

Name of trust receiving the gift
Name of the trustee
Address of the trustee
Trust identification number
Name of the beneficiary of the trust
Your relationship to the beneficiary
(e.g., son, granddaughter or friend)
Age of the beneficiary
7 go of the beneficiary
Date(s) of gift(s) (Mo/Da/Yr)
Description and amount of assets gifted
(e.g., \$17,000 in cash or 500 shares of ABC stock)
Cost basis of assets gifted if other than cash
Value of assets gifted if other than cash
value of according to a formation of the first train of the first trai
For gifts other than cash, include a copy of any appraisal(s) of assets. If no appraisal is available, describe how the value was
determined.

Include a copy of the following:

A copy of the trust document(s) unless previously furnished to us.

A copy of the letter(s) notifying the beneficiary of his or her right to withdraw, if the trust grants the beneficiary the right to withdraw amounts contributed to the trust.



Detail Depreciation

DP

Business or Activity:

Asset #	Description of Asset	Cost	Date Asset Was Placed in Service (Mo/Da/Yr)	If the Asset Was Sold, Indicate the Following	
#				Date (Mo/Da/Yr)	Sales Price



Additional Information