

2022	1040	US	Client Information	1
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Tax Return Appointment

Date:
 Time:
 Location:

This tax organizer will assist you in gathering information necessary for the preparation of your 2022 tax return. Please add, change, or delete information as appropriate.

CLIENT INFORMATION

Filing Status	Filing status (table)	
	1=married filing separate and lived with spouse	
	Year spouse died, if qualifying surviving spouse (2020 or 2021)	
Taxpayer	First name and initial	
	Last name	
	Title/suffix	
	Social security number	
	Occupation	
	Date of birth (m/d/y)	
	Date of death (m/d/y)	
	1=blind	
Spouse	First name and initial	
	Last name	
	Title/suffix	
	Social security number	
	Occupation	
	Date of birth (m/d/y)	
	Date of death (m/d/y)	
1=blind		
Address	In care of	
	Street address	
	Apartment number	
	City	
	State	
	ZIP code	
Foreign Address	Region	
	Postal code	
	Country	

Filing Status

- 1 = Single
- 2 = Married filing joint
- 3 = Married filing separate
- 4 = Head of household
- 5 = Qualifying surviving spouse (QSS)

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2022	1040	US/CA	Client Information (continued)	1 p2
Please add, change or delete information for 2022.				
CLIENT INFORMATION				
Taxpayer Contact Information	Home phone			<p style="text-align:center;">Daytime Phone</p> <p style="text-align:center;">1 = Work 2 = Home 3 = Mobile</p> <p style="text-align:center;">RDP Filing Status</p> <p style="text-align:center;">1 = Not applicable 2 = Joint 3 = Separate</p>
	Work phone			
	Work extension			
	Daytime phone (table)			
	Mobile phone			
	Fax number			
	E-mail address			
Spouse Contact Information	Home phone			
	Work phone			
	Work extension			
	Daytime phone (table)			
	Mobile phone			
	Fax number			
	E-mail address			
Taxpayer Authentication	Driver's license no.			
	Driver's license state			
	Issue date (m/d/y)			
	Expiration date (m/d/y)			
	Theft protection PIN			
Spouse Authentication	Driver's license no.			
	Driver's license state			
	Issue date (m/d/y)			
	Expiration date (m/d/y)			
	Theft protection PIN			
CA State Information	Registered domestic partner filing status (see table)			
	1=PMB no. in address			
	NOTE: If the taxpayer's mailing address includes a private mail box number (PMB), indicate this below and enter the PMB number in the "Apartment Number" field in the Address area of Client Information.			
				1 p2

2022	1040	US	Dependents	2
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Please add, change or delete information for 2022.

DEPENDENTS

	Dependent	Dependent	
First name.....			<p style="text-align:center;">Type of Dependent</p> <p>1 = Child living w/taxpayer 2 = Child not living w/taxpayer 3 = Dependent other than child 4 = Head of household or qualifying surviving spouse (QSS) only, not a dependent 5 = Earned income credit only, not a dependent</p> <p style="text-align:center;">Earned Income Credit</p> <p>1 = When applicable (default) 2 = Student age 19 to 23 3 = Disabled 4 = Force 5 = Suppress</p> <p>NOTE: If you claim the earned income credit, please provide proof that your child is a resident of the U.S. This proof is typically in the form of:</p> <ol style="list-style-type: none"> 1. School records or statement 2. Landlord or property management statement 3. Health care provider statement 4. Medical records 5. Child care provider records 6. Placement agency statement 7. Social service records or statement 8. Place of worship statement 9. Indian tribe office statement 10. Employer statement <p>NOTE: If your child is disabled, please provide one of the following forms of proof of disability:</p> <ol style="list-style-type: none"> 1. Doctor statement 2. Other health care provider statement 3. Social services agency or program statement
Last name.....			
Title/suffix.....			
Date of birth (m/d/y).....			
Date of death.....			
Date of adoption.....			
Social security number.....			
Relationship.....			
Months lived at home.....			
Type of dependent (see table).....			
Earned income credit (see table).....			
Claimed by: 1=taxpayer, 2=spouse.....			
IRS theft protection PIN.....			
	Dependent	Dependent	
First name.....			
Last name.....			
Title/suffix.....			
Date of birth (m/d/y).....			
Date of death.....			
Date of adoption.....			
Social security number.....			
Relationship.....			
Months lived at home.....			
Type of dependent (see table).....			
Earned income credit (see table).....			
Claimed by: 1=taxpayer, 2=spouse.....			
IRS theft protection PIN.....			
	Dependent	Dependent	
First name.....			
Last name.....			
Title/suffix.....			
Date of birth (m/d/y).....			
Date of death.....			
Date of adoption.....			
Social security number.....			
Relationship.....			
Months lived at home.....			
Type of dependent (see table).....			
Earned income credit (see table).....			
Claimed by: 1=taxpayer, 2=spouse.....			
IRS theft protection PIN.....			

2022	1040	US	Miscellaneous Questions
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If any of the following items pertain to you or your spouse for 2022, please check the appropriate box and provide additional information if necessary.

YES

NO

PERSONAL INFORMATION

- Did your marital status change during the year?
- Did your address change during the year?
- Could you be claimed as a dependent on another person's tax return for 2022?

DEPENDENTS

- Were there any changes in dependents?
- Were any of your unmarried children who might be claimed as dependents 19 years of age or older (or 24 years or older if student) at the end of 2022?
- Did you have any children under age 19 or full-time students under age 24 at the end of 2022, with interest and dividend income in excess of \$1,100, or total investment income in excess of \$2,200?

HEALTH CARE COVERAGE

- Did you receive IRS document Form 1095-A (Health Insurance Marketplace Statement), if so, please attach.

INCOME

- Did you receive unreported tip income of \$20 or more in any month?
- Did you cash any Series EE U.S. savings bonds issued after 1989 and pay qualified higher education expenses for yourself, your spouse, or your dependents?
- Did you receive any disability income?
- Did you have any foreign income or pay any foreign taxes?

PURCHASES, SALES AND DEBT

- Did you start a business or farm, purchase rental or royalty property, or acquire an interest in a partnership, S corporation, trust, or REMIC?
- Did you purchase or dispose of any business assets (furniture, equipment, vehicles, real estate, etc.), or convert any personal assets to business use?
- Did you buy or sell any stocks, bonds or other investment property in 2022?
- Did you purchase, sell, or refinance your principal home or second home, or did you take a home equity loan?
- Did you make any residential energy-efficient improvements or purchases involving solar, wind, geothermal or fuel cell energy sources?
- Did you have any debts cancelled or forgiven?
- Does anyone owe you money which has become uncollectible?

2022	1040	US	Miscellaneous Questions (continued)
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If any of the following items pertain to you or your spouse for 2022, please check the appropriate box and provide additional information if necessary.

YES

NO

RETIREMENT PLANS

- Did you receive a distribution from a retirement plan (401(k), IRA, SEP, SIMPLE, Qualified Plan, etc.)?
- Did you make a contribution to a retirement plan (401(k), IRA, SEP, SIMPLE, Qualified Plan, etc.)?
- Did you transfer or rollover any amount from one retirement plan to another retirement plan?

EDUCATION

- Did you receive a distribution from an Education Savings Account or a Qualified Tuition Program?
- Did you, your spouse, or a dependent incur any tuition expenses that are required to attend a college, university, or vocational school?

ITEMIZED DEDUCTIONS

- Did you incur a loss because of damaged or stolen property?
- Did you work out of town for part of the year?
- Did you use your car on the job (other than to and from work)?

ESTIMATED TAXES

- Did you apply an overpayment of 2021 taxes to your 2022 estimated tax (instead of being refunded)?
- If you have an overpayment of 2022 taxes, do you want the excess applied to your 2023 estimated tax (instead of being refunded)?
- Do you expect your 2023 taxable income and withholdings to be different from 2022?

MISCELLANEOUS

- Do you want to allocate \$3 to the Presidential Election Campaign Fund?
- Does your spouse want to allocate \$3 to the Presidential Election Campaign Fund?
- May the IRS discuss your tax return with your preparer?
- Did you have an interest in or signature or other authority over a financial account in a foreign country, such as a bank account, securities account, or other financial account?

2022	1040	US	Miscellaneous Questions (continued)
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If any of the following items pertain to you or your spouse for 2022, please check the appropriate box and provide additional information if necessary.

YES

NO

MISCELLANEOUS (continued)

Did you receive a distribution from, or were you the grantor of, or transferor to, a foreign trust?

Was your home rented out or used for business?

Did you have a medical savings account (MSA), a Medicare Advantage MSA, or acquire an interest in an MSA or a Medicare Advantage MSA because of the death of the account holder? Or, were you a policyholder who received payments under a long-term care (LTC) insurance contract or received any accelerated death benefits from a life insurance policy?

Did you receive a distribution from an Achieving a Better Life Experience (ABLE) savings account?

Are you a member of the Armed Forces of the United States on active duty who moved pursuant to a military order related to a permanent change of station?

Did you engage the services of any household employees?

Were you notified or audited by either the Internal Revenue Service or the State taxing agency?

Did you or your spouse make any gifts to an individual that total more than \$15,000, or any gifts to a trust?

Did your bank account information change within the last twelve months?

At any time during 2022, did you receive, sell, send, exchange, or otherwise acquire any financial interest in any virtual currency?

2022	1040	US	Miscellaneous Questions
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If any of the following items pertain to you or your spouse for 2022, please check the appropriate box and provide additional information if necessary.

- | YES | NO | |
|--------------------------|--------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> | Did your marital status change during the year? |
| <input type="checkbox"/> | <input type="checkbox"/> | Did your address change during the year? |
| <input type="checkbox"/> | <input type="checkbox"/> | Could you be claimed as a dependent on another person's tax return? |
| <input type="checkbox"/> | <input type="checkbox"/> | Were there any changes in dependents? |
| <input type="checkbox"/> | <input type="checkbox"/> | Did you and your dependents have health care coverage for the full-year? |
| <input type="checkbox"/> | <input type="checkbox"/> | Did you receive an IRS document 1095-A (Health Insurance Marketplace Statement)? If so, please attach. |
| <input type="checkbox"/> | <input type="checkbox"/> | Did you receive unreported tip income of \$20 or more in any month? |
| <input type="checkbox"/> | <input type="checkbox"/> | Did you receive any disability income? |
| <input type="checkbox"/> | <input type="checkbox"/> | Did you buy or sell any stocks, bonds or other investment property? |
| <input type="checkbox"/> | <input type="checkbox"/> | Did you purchase, sell, or refinance your principal home or second home, or did you take a home equity loan? |
| <input type="checkbox"/> | <input type="checkbox"/> | Did you make any residential energy-efficient improvements or purchases involving solar, wind, geothermal or fuel cell energy sources? |
| <input type="checkbox"/> | <input type="checkbox"/> | Did you receive a distribution from or make a contribution to a retirement plan (401(k), IRA, etc.)? |
| <input type="checkbox"/> | <input type="checkbox"/> | Did you transfer or rollover any amount from one retirement plan to another? |
| <input type="checkbox"/> | <input type="checkbox"/> | Did you convert part or all of your traditional/SEP/SIMPLE IRA to a Roth IRA? |
| <input type="checkbox"/> | <input type="checkbox"/> | Did you, your spouse, or a dependent incur any tuition expenses that are required to attend a college, university, or vocational school? |
| <input type="checkbox"/> | <input type="checkbox"/> | Did you incur a loss because of damaged or stolen property? |
| <input type="checkbox"/> | <input type="checkbox"/> | Did you use your car on the job (other than to and from work)? |
| <input type="checkbox"/> | <input type="checkbox"/> | May the IRS discuss your tax return with your preparer? |
| <input type="checkbox"/> | <input type="checkbox"/> | Was your home rented out or used for business? |
| <input type="checkbox"/> | <input type="checkbox"/> | Were you notified or audited by either the IRS or the State taxing agency? |
| <input type="checkbox"/> | <input type="checkbox"/> | Did you receive an economic impact payment? If so, how much? |

Please enter all pertinent 2022 information.

DIRECT DEPOSIT / ELECTRONIC PAYMENT (3)

1=direct deposit of federal tax refund into bank account		
1=electronic payment of balance due		
1=electronic payment of estimated tax		
1=direct deposit CA refund to one account, 2=split deposit between two accounts		
1=electronic payment of CA state tax balance due		
1=electronic payment of CA estimated tax		

BANK INFORMATION

Name of Bank	Percent to Deposit (xx.xx)	Routing Number	Account Number	Type of Account (Table 1)	Type of Invest. (Table 2)

2022 ESTIMATED TAX / 1040-ES (6)

Federal

	Amount Paid	Date Paid	TS	2022 Voucher Amount
Overpayment applied from 2021				
1st quarter payment				
2nd quarter payment				
3rd quarter payment				
4th quarter payment				
Additional Estimated Tax Payments				
Paid with extension				
Former spouse SSN if joint estimates				

State

	Amount Paid	Date Paid	TS	2022 Voucher Amount
Overpayment applied from 2021				
1st quarter payment				
2nd quarter payment				
3rd quarter payment				
4th quarter payment				
Additional Estimated Tax Payments				
Paid with extension				

1 Type of Account

1 = Savings
2 = Checking

2 Type of Investment

1 = Checking or savings (default) 6 = Coverdell savings account (ESA)
 2 = Taxpayer's IRA (next year limits) 7 = Other
 3 = Spouse's IRA (next year limits) 8 = Taxpayer's IRA (current year limits)
 4 = Health savings account (HSA) 9 = Spouse's IRA (current year limits)
 5 = Archer MSA

2022	1040	US	Direct Deposit & Estimates (Form 1040 ES) (cont.)	7.1
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Please enter all pertinent 2022 information.

APPLICATION OF 2022 OVERPAYMENT (7.1)

If you have an overpayment of 2022 taxes, do you want the excess refunded? or applied to 2023 estimate?

Other (please explain): _____

2023 ESTIMATED TAX INFORMATION

Do you expect your 2023 taxable income to be different from 2022? Yes No

If "yes" explain any differences in income, deductions, dependents, etc.: _____

Do you expect your 2023 withholding to be different from 2022? Yes No

If "yes" explain any differences: _____

2022	1040	US/CA	Wages, Pensions, Gambling Winnings	10, 13.1, 13.2
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Please enter all pertinent 2022 amounts & attach all W-2, W-2G and 1099-R forms.
Last year's amounts are provided for your reference.

WAGES, SALARIES, TIPS (10)

No.	Name of Employer (Box c)	1=retirement plan (Box 13)		Wages, Tips, Other Compensation (Box 1)	Tax Withheld					2021 Wages
		1=spouse			Federal (Box 2)	Social Security (Box 4)	Medicare (Box 6)	State (Box 17)	SDI (Box 14)	

PENSIONS, IRA DISTRIBUTIONS (13.1)

No.	Name of Payer	Distribution code #2		Gross Distribution (Box 1)	Taxable Amount (Box 2a)	Tax Withheld		Value of all IRAs at 12/31/22	2021 Distribution
		Distribution code #1				Federal (Box 4)	State (Box 14)		
		1=IRA/SEP/SIMPLE	1=spouse						

GAMBLING WINNINGS (W-2G) (13.2)

No.	Name of Payer	1=spouse	Gross Winnings (Box 1)	Tax Withheld			2021 Winnings
				Federal (Box 4)	State (Box 15)	Local (Box 17)	

GAMBLING LOSSES & WINNINGS (NON W-2G) (13.2)

Total gambling losses.....	2022 Amount	TS	2021 Amount	
Winnings not reported on Form W-2G.....				

10, 13.1, 13.2

2022	1040	US	Interest & Dividend Income	11, 12
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Please enter all pertinent 2022 amounts & attach all 1099-INT, 1099-OID and 1099-DIV forms.
Last year's amounts are provided for your reference.

INTEREST INCOME (11)

No.	Name of Payer (also enter SSN & address for seller-financed mortgage)	1=taxpayer 2=spouse	Interest Income			Tax-Exempt Interest		Early Withdrawal Penalty (Box 2)	2021 Interest
			Banks, S&Ls, C/Us, etc. (Box 1)	Seller- Financed Mtg. (Box 1)	U.S. Bonds, T-Bills (Box 3)	Total Municipal Bonds	In-state Municipal Bonds		

DIVIDEND INCOME (12)

No.	Name of Payer	1=taxpayer 2=spouse	Dividend Income					Tax-Exempt Interest		Foreign Tax Paid (Box 7)	2021 Dividends
			Total Ordinary Dividends (Box 1a)	Qualified Dividends (Box 1b)	Total Capital Gain Distrib. (Box 2a)	SubSection 199A (Box 5)	U.S. Bonds (% or amt.)	Total Municipal Bonds	In-state Muni-bonds (% or amt.)		

2022	1040	US	Miscellaneous Income	14.1
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Please enter all pertinent 2022 amounts and attach all 1099-MISC, 1099-NEC, SSA-1099, and RRB-1099 forms. Last year's amounts are provided for your reference.

MISCELLANEOUS INCOME

	2022 Amount		2021 Amount	
	Taxpayer	Spouse	Taxpayer	Spouse
Social security benefits (SSA-1099, box 5)				
Medicare premiums paid (SSA-1099)				
1=treat Medicare premiums paid as SE health ins.				
Tier 1 RR retirement benefits (RRB-1099, box 5) ...				
1=lump-sum election for SS benefits				
Alimony received				
Taxable scholarships and fellowships				
Jury duty pay				
Household employee income not on W-2				
Excess minister's allowance				
Alaska permanent fund dividends				
Income from rental of personal property				
Income subject to S/E tax:				

Other income (1099-MISC, box 3, 8, 1099-NEC, box 1)				

TAX WITHHELD (not entered elsewhere)

Federal income tax withheld				
State income tax withheld				
Local income tax withheld				

2022

1040

US

State & Local Tax Refunds / Unemployment Compensation

14.2

Please add, change or delete 2022 information as appropriate. Be sure to attach all 1099-G forms.

STATE AND LOCAL TAX REFUNDS / UNEMPLOYMENT COMPENSATION (Form 1099-G)

2022 1099-G Amount

No. <input type="text"/>	Name of payer.....		
	1=spouse.....		
	Unemployment compensation:		
	Total received (Box 1).....		
	2022 Overpayment repaid.....		
	State and local refunds:		
	State and local income tax refund, credit or offsets (Box 2).....		
	1=city or local income tax refund.....		
	Tax year for box 2 if not 2021 (Box 3).....		
	Federal income tax withheld (Box 4).....		
	RTAA payments (Box 5).....		
	Taxable grants:		
	Federal taxable amount (Box 6).....		
	State taxable amount, if different.....		
	Farm amounts:		

No. <input type="text"/>	Name of payer.....		
	1=spouse.....		
	Unemployment compensation:		
	Total received (Box 1).....		
	2022 Overpayment repaid.....		
	State and local refunds:		
	State and local income tax refund, credit or offsets (Box 2).....		
	1=city or local income tax refund.....		
	Tax year for box 2 if not 2021 (Box 3).....		
	Federal income tax withheld (Box 4).....		
	RTAA payments (Box 5).....		
	Taxable grants:		
	Federal taxable amount (Box 6).....		
	State taxable amount, if different.....		
	Farm amounts:		

14.2

2022	1040	US	Education Distributions (ESA's and QTP's)	14.3
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Please enter all pertinent 2022 amounts and attach all 1099-Q forms.
Enter qualified education expenses below that are not entered elsewhere.
Last year's amounts are provided for your reference.

ESA'S AND QTP'S (Form 1099-Q)

		2022 Amount	2021 Amount
No. <input style="width: 40px;" type="text"/>	Name of payer.....		
	1=spouse.....		
	Qualified expenses:		
	Higher education (net of nontaxable benefits).....		
	Elementary & secondary education (net of nontaxable benefits).....		
	Form 1099-Q:		
	Gross distributions (Box 1).....		
	Earnings (Box 2).....		
	Basis (Box 3).....		
	Rollover: 1=nontaxable, 2=taxable (Box 4).....		
	Distribution type: 1=private 529, 2=state 529, 3=Coverdell ESA (Box 5).....		
	ESA's only:		
2022 contributions to this ESA.....			
Value of this account at 12/31/22 (plus outstanding rollovers).....			
Basis in this ESA as of 12/31/21.....			

No. <input style="width: 40px;" type="text"/>	Name of payer.....		
	1=spouse.....		
	Qualified expenses:		
	Higher education (net of nontaxable benefits).....		
	Elementary & secondary education (net of nontaxable benefits).....		
	Form 1099-Q:		
	Gross distributions (Box 1).....		
	Earnings (Box 2).....		
	Basis (Box 3).....		
	Rollover: 1=nontaxable, 2=taxable (Box 4).....		
	Distribution type: 1=private 529, 2=state 529, 3=Coverdell ESA (Box 5).....		
	ESA's only:		
2022 contributions to this ESA.....			
Value of this account at 12/31/22 (plus outstanding rollovers).....			
Basis in this ESA as of 12/31/21.....			

No. <input style="width: 40px;" type="text"/>	Name of payer.....		
	1=spouse.....		
	Qualified expenses:		
	Higher education (net of nontaxable benefits).....		
	Elementary & secondary education (net of nontaxable benefits).....		
	Form 1099-Q:		
	Gross distributions (Box 1).....		
	Earnings (Box 2).....		
	Basis (Box 3).....		
	Rollover: 1=nontaxable, 2=taxable (Box 4).....		
	Distribution type: 1=private 529, 2=state 529, 3=Coverdell ESA (Box 5).....		
	ESA's only:		
2022 contributions to this ESA.....			
Value of this account at 12/31/22 (plus outstanding rollovers).....			
Basis in this ESA as of 12/31/21.....			

2022	1040	US/CA	Business Income (Schedule C)	No. <input style="width:40px;" type="text"/>	16
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Please enter all pertinent 2022 amounts. Last year's amounts are provided for your reference.

GENERAL INFORMATION

Principal business/profession	
Principal business code	
Business name, if different from Form 1040	
Business address, if different from Form 1040	
City, if different from Form 1040	
State, if different from Form 1040	
ZIP code, if different from Form 1040	
Foreign region	
Foreign postal code	
Foreign country	
Employer identification number	
Other accounting method	

Accounting method: 1=cash, 2=accrual		
Inventory method: 1=cost, 2=lower cost/market, 3=other		
1=change of inventory method		
1=spouse, 2=joint		
1=first Schedule C filed for this business		
If required to file Form(s) 1099, did you or will you file all required Form(s) 1099: 1=yes, 2=no		
1=not subject to self-employment tax		
1=did not "materially participate"		
1=personal services is not a material income producing factor		
1=investment		
1=minister's Schedule C		
1=single member limited liability company		
1=trader in financial instruments or commodities		
CA FTB Form 3805V:		
1=eligible small business		
Qualified new business year: 1=1st, 2=2nd, 3=3rd		
Principle business code (SIC 1987)		

INCOME

	2022 Amount	2021 Amount
Gross receipts or sales (Form 1099-MISC, box 7)		
Returns and allowances		
Other income:		

COST OF GOODS SOLD

Inventory at beginning of the year		
Purchases		
Cost of items for personal use		
Cost of labor		
Materials and supplies		
Other costs:		

Inventory at end of the year		

2022	1040	US/CA	Business Income (Schedule C) (cont.)	No. <input style="width:40px;" type="text"/>	16 p2
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Please enter all pertinent 2022 amounts. Last year's amounts are provided for your reference.

EXPENSES

	2022 Amount	2021 Amount
Accounting.....		
Advertising.....		
Answering service.....		
Bad debts from sales or service.....		
Bank charges.....		
Car and truck expenses (not entered elsewhere).....		
Commissions.....		
Contract labor.....		
Delivery and freight.....		
Dues and subscriptions.....		
Employee benefit programs.....		
Insurance (other than health).....		
Mortgage interest (paid to banks, etc.).....		
Other interest (not entered elsewhere).....		
Janitorial.....		
Laundry and cleaning.....		
Legal and professional.....		
Miscellaneous.....		
Office expense.....		
Outside services.....		
Parking and tolls.....		
Pension and profit sharing plans - contributions.....		
Pension and profit sharing plans - admin. and education costs.....		
Postage.....		
Printing.....		
Rent - vehicles, machinery, & equipment (not entered elsewhere).....		
Rent - other.....		
Repairs.....		
Security.....		
Supplies.....		
Taxes - real estate.....		
Taxes - payroll.....		
Taxes - sales tax included in gross receipts.....		
Taxes - other (not entered elsewhere).....		
Telephone.....		
Tools.....		
Travel.....		
Total meals in full (50%).....		
Department of Transportation meals in full (80%).....		
Meals provided by restaurants in full (100%).....		
Entertainment expenses in full.....		
Uniforms.....		
Utilities.....		
Wages.....		
Other expenses:		

NOTE: If you purchased or disposed of any business assets, please complete Sheet 22.

2022	1040	US	Capital Gains & Losses (Schedule D)						17
<p>If you sold any stocks, bonds, or other investment property in 2022, please list the pertinent information for each sale below or provide a spreadsheet file with this information. Be sure to attach all 1099-B forms and brokerage statements.</p>									
No.	Quantity	Description of Property (Box 1a)	Date Acquired (Box 1b)	Date Sold (Box 1c)	Sales Price (gross or net) (Box 1d)	Cost or Basis (Box 1e)	Blank=basis rep. to IRS, 1=nonrec. security (Box 3, 5)	Expenses of Sale (if gross sales price entered)	Federal Income Tax Withheld (Box 4)
								17	

2022	1040	US	Sale of Home & Moving Expenses	17, 27
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If you sold your home or moved in 2022, please complete the information below.
 For the sale of home, please provide Form 1099-S and closing statements from the purchase and sale of your home.

SALE OF HOME (17)

Description of property (Box 3)	
Date acquired (m/d/y)	
Date sold (m/d/y) (Box 1)	
Sales price (Box 2)	
1=sale of home	
1=owned and used property as main home for at least 2 of 5 years before sale	
1=first-time homebuyer credit was previously taken on this home	
1=business use in year of sale	
Number of days after December 31, 2008 that home was not used as principal residence	

Adjusted Basis

Original cost	
Improvements:	

Adjusted basis	

Expenses of Sale (Commissions, advertising fees, legal fees, and loan charges paid by the seller)

Total expenses of sale	

Reduced Exclusion

Please complete the following information if due to a change in health, place of employment, or unforeseen circumstances you either:
a) Did not meet the ownership and use tests *, or **b)** Excluded gain on the sale of another home after May 6, 1997.

If excl. gain from another home after May 6, 1997 & within 2 yrs. of current sale, enter date of sale (m/d/y)	
1=sale due to change in health, employment or unforeseen circumstances	
Days used as main home - taxpayer	
Days used as main home - spouse	
Days property owned - taxpayer	
Days property owned - spouse	

MOVING EXPENSES (27) (If you are a member of the Armed Forces and moved due to a permanent change in station)

1=spouse, 2=joint	
1=armed forces move due to permanent change of station	
Miles from old home to new work place	
Miles from old home to old work place	
Expenses for transportation and storage of household goods and personal effects	
Lodging and travel (excluding meals):	
Lodging and travel (excluding automobile)	
Parking fees and tolls	
Gas and oil	
Miles driven to new home	

(* owned and used property as main home for at least 2 of 5 years before sale)

2022

1040

US/CA

Rental & Royalty Income (Schedule E)

No. []

18

Please enter all pertinent 2022 amounts. Last year's amounts are provided for your reference.

GENERAL INFORMATION

	2022 Amount	2021 Amount
Description of property		Type of Property 1 = Single Family Residence 2 = Multi-Family Residence 3 = Vacation/Short-Term Rental 4 = Commercial 5 = Land 6 = Royalties 7 = Self-Rental
Street address		
City		
State		
ZIP code		
Type of property (see table)		
Other type of property		
Number of days rented	34	

Percentage of ownership if not 100% (.xxxx)	
Percentage of tenant occupancy if not 100% (.xxxx)	
1=spouse, 2=joint	
1=qualified joint venture	
1=nonpassive activity, 2=passive royalty	

1=did not actively participate	
1=real estate professional	
1=rental other than real estate	
1=investment	
1=single member limited liability company	

If required to file Form(s) 1099, did you or will you file all required Form(s) 1099: 1=yes, 2=no

CA FTB Form 3805V:

1=eligible small business	
Qualified new business year: 1, 2 or 3	
Principle business code (SIC 1987)	

INCOME

	2022 Amount	2021 Amount
Rents or royalties received		

DIRECT EXPENSES

NOTE: Direct expenses are related only to the rental activity. These include rental agency fees, advertising, and office supplies.

Advertising		
Association dues		
Auto and travel (not entered elsewhere)		
Cleaning and maintenance		
Commissions		
Gardening		
Insurance		
Legal and professional fees		
Licenses and permits		
Management fees		
Miscellaneous		
Mortgage interest (paid to banks, etc.)		
Qualified mortgage insurance premiums		
Excess mortgage interest		
Other interest (not entered elsewhere)		
Painting and decorating		
Pest control		
Plumbing and electrical		
Repairs		
Supplies		
Taxes - real estate		
Taxes - other (not entered elsewhere)		
Telephone		
Utilities		
Wages and salaries		
Other:		

NOTE: If you purchased or disposed of any business assets, please complete Sheet 22.

18

2022	1040	US	Rental & Royalty Income (Sch. E) (cont.)	No. <input style="width:40px;" type="text"/>	18 p2
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Please enter all pertinent 2022 amounts. Last year's amounts are provided for your reference. The indirect expense column should only be used for vacation homes or less than 100% tenant occupied rentals.

GENERAL INFORMATION

Foreign region.....	<input style="width:95%; height:15px;" type="text"/>
Foreign postal code.....	<input style="width:95%; height:15px;" type="text"/>
Foreign country.....	<input style="width:95%; height:15px;" type="text"/>

OIL AND GAS

	2022 Amount	2021 Amount
Production type (preparer use only)	<input style="width:95%; height:15px;" type="text"/>	<input style="width:95%; height:15px;" type="text"/>
Cost depletion.....	<input style="width:95%; height:15px;" type="text"/>	<input style="width:95%; height:15px;" type="text"/>
Percentage depletion rate or amount	<input style="width:95%; height:15px;" type="text"/>	<input style="width:95%; height:15px;" type="text"/>
State cost depletion, if different (-1 if none)	<input style="width:95%; height:15px;" type="text"/>	<input style="width:95%; height:15px;" type="text"/>
State % depletion rate or amount, if different (-1 if none)	<input style="width:95%; height:15px;" type="text"/>	<input style="width:95%; height:15px;" type="text"/>

PERSONAL USE OF DWELLING UNIT (INCLUDING VACATION HOME)

Number of days personal use	<input style="width:95%; height:15px;" type="text"/>
Number of days owned (if optional method elected)	<input style="width:95%; height:15px;" type="text"/>

INDIRECT EXPENSES

NOTE: Indirect expenses are related to operating or maintaining the dwelling unit. These include repairs, insurance, and utilities.

Advertising.....	<input style="width:95%; height:15px;" type="text"/>	<input style="width:95%; height:15px;" type="text"/>
Association dues.....	<input style="width:95%; height:15px;" type="text"/>	<input style="width:95%; height:15px;" type="text"/>
Auto and travel (not entered elsewhere).....	<input style="width:95%; height:15px;" type="text"/>	<input style="width:95%; height:15px;" type="text"/>
Cleaning and maintenance.....	<input style="width:95%; height:15px;" type="text"/>	<input style="width:95%; height:15px;" type="text"/>
Commissions.....	<input style="width:95%; height:15px;" type="text"/>	<input style="width:95%; height:15px;" type="text"/>
Gardening.....	<input style="width:95%; height:15px;" type="text"/>	<input style="width:95%; height:15px;" type="text"/>
Insurance.....	<input style="width:95%; height:15px;" type="text"/>	<input style="width:95%; height:15px;" type="text"/>
Legal and professional fees.....	<input style="width:95%; height:15px;" type="text"/>	<input style="width:95%; height:15px;" type="text"/>
Licenses and permits.....	<input style="width:95%; height:15px;" type="text"/>	<input style="width:95%; height:15px;" type="text"/>
Management fees.....	<input style="width:95%; height:15px;" type="text"/>	<input style="width:95%; height:15px;" type="text"/>
Miscellaneous.....	<input style="width:95%; height:15px;" type="text"/>	<input style="width:95%; height:15px;" type="text"/>
Mortgage interest (paid to banks, etc.).....	<input style="width:95%; height:15px;" type="text"/>	<input style="width:95%; height:15px;" type="text"/>
Qualified mortgage insurance premiums.....	<input style="width:95%; height:15px;" type="text"/>	<input style="width:95%; height:15px;" type="text"/>
Excess mortgage interest.....	<input style="width:95%; height:15px;" type="text"/>	<input style="width:95%; height:15px;" type="text"/>
Other interest (not entered elsewhere).....	<input style="width:95%; height:15px;" type="text"/>	<input style="width:95%; height:15px;" type="text"/>
Painting and decorating.....	<input style="width:95%; height:15px;" type="text"/>	<input style="width:95%; height:15px;" type="text"/>
Pest control.....	<input style="width:95%; height:15px;" type="text"/>	<input style="width:95%; height:15px;" type="text"/>
Plumbing and electrical.....	<input style="width:95%; height:15px;" type="text"/>	<input style="width:95%; height:15px;" type="text"/>
Repairs.....	<input style="width:95%; height:15px;" type="text"/>	<input style="width:95%; height:15px;" type="text"/>
Supplies.....	<input style="width:95%; height:15px;" type="text"/>	<input style="width:95%; height:15px;" type="text"/>
Taxes - real estate.....	<input style="width:95%; height:15px;" type="text"/>	<input style="width:95%; height:15px;" type="text"/>
Taxes - other (not entered elsewhere).....	<input style="width:95%; height:15px;" type="text"/>	<input style="width:95%; height:15px;" type="text"/>
Telephone.....	<input style="width:95%; height:15px;" type="text"/>	<input style="width:95%; height:15px;" type="text"/>
Utilities.....	<input style="width:95%; height:15px;" type="text"/>	<input style="width:95%; height:15px;" type="text"/>
Wages and salaries.....	<input style="width:95%; height:15px;" type="text"/>	<input style="width:95%; height:15px;" type="text"/>
Other:	<input style="width:95%; height:15px;" type="text"/>	<input style="width:95%; height:15px;" type="text"/>
<input style="width:95%; height:15px;" type="text"/>	<input style="width:95%; height:15px;" type="text"/>	<input style="width:95%; height:15px;" type="text"/>
<input style="width:95%; height:15px;" type="text"/>	<input style="width:95%; height:15px;" type="text"/>	<input style="width:95%; height:15px;" type="text"/>
<input style="width:95%; height:15px;" type="text"/>	<input style="width:95%; height:15px;" type="text"/>	<input style="width:95%; height:15px;" type="text"/>
<input style="width:95%; height:15px;" type="text"/>	<input style="width:95%; height:15px;" type="text"/>	<input style="width:95%; height:15px;" type="text"/>
<input style="width:95%; height:15px;" type="text"/>	<input style="width:95%; height:15px;" type="text"/>	<input style="width:95%; height:15px;" type="text"/>
<input style="width:95%; height:15px;" type="text"/>	<input style="width:95%; height:15px;" type="text"/>	<input style="width:95%; height:15px;" type="text"/>

2022	1040	US	Partnership and S corporation Information	20.1,20.2
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Please add, change or delete 2022 information as appropriate. Be sure to attach all Schedule K-1s.

PARTNERSHIP INFORMATION (20.1)

No.	Name of Partnership	Employer Identification Number	Tax Shelter Registration Number	Additional Amounts Invested in Partnership

S CORPORATION INFORMATION (20.2)

No.	Name of S corporation	Employer Identification Number	Tax Shelter Registration Number	Additional Amounts Invested in S corporation

20.1,20.2

2022	1040	US	Estate or Trust and REMIC Information	20.3,20.4
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Please add, change or delete 2022 information as appropriate.
 Be sure to attach all Schedule K-1s and Schedule Qs.

ESTATE OR TRUST INFORMATION (20.3)

No.	Name of Estate or Trust	Employer Identification Number	Tax Shelter Registration Number

REMIC INFORMATION (20.4)

No.	Name of REMIC	Employer Identification Number

2022	1040	US	Asset Acquisition List	22 p2
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If you purchased any business assets (furniture, equipment, vehicles, real estate, etc.) or converted any personal assets to business use in 2022, please enter all pertinent information below.

No.	Description of Property	Related Business or Activity	Preparer Use Only			Date Placed in Service	Cost or Basis	Preparer Use Only	
			Form	No. of Form	Category			Current Section 179	Method

2022	1040	US	Vehicle Expenses	No. <input style="width:40px;" type="text"/>	22 p3
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Please enter all pertinent 2022 amounts. Last year's amounts are provided for your reference.

GENERAL INFORMATION

	2022 Amount	2021 Amount
Description of vehicle		
1=no evidence to support your deduction		
1=no written evidence to support your deduction		
1=vehicle is available for off-duty personal use		
1=no other vehicle is available for personal use		
1=vehicle used primarily by more than 5% owner		
Number of months of business use if changed from 100% personal use		

AUTOMOBILE MILEAGE

Total mileage (for the tax year)		
Business mileage		
Commuting mileage (for the tax year)		
Average daily round-trip commute		

ACTUAL EXPENSES

Parking fees and tolls (business portion only)		
Gasoline, lube, oil		
Repairs		
Tires		
Insurance		
Miscellaneous		
Auto license (other than personal property taxes)		
Personal property taxes (based on car's value)		
Interest (car loan) (for Schedule C, E & F)		
Vehicle rent or lease payments		
Inclusion amount (enter as positive)		
Value of employer-provided vehicle on Form W-2 (2106)		

Please enter all pertinent 2022 information. Last year's amounts are provided for your reference.

TRADITIONAL IRA CONTRIBUTIONS

	2022 Amount		2021 Amount	
	Taxpayer	Spouse	Taxpayer	Spouse
IRA contributions you made or expect to make (1=maximum) (\$6,000/\$7,000 if 50 or older)				
Contributions made to date				
1=covered by plan, 2=not covered				
2022 payments from 1/1/23 to 4/15/23				

ROTH IRA CONTRIBUTIONS

	2022 Amount		2021 Amount	
	Taxpayer	Spouse	Taxpayer	Spouse
Roth IRA contributions you made or expect to make (1=maximum) (\$6,000/\$7,000 if 50 or older) ..				
Contributions made to date				

SEP, SIMPLE AND QUALIFIED PLANS (KEOGH)

	2022 Amount		2021 Amount	
	Taxpayer	Spouse	Taxpayer	Spouse
Profit-sharing (25%/1.25) contributions you made or expect to make (1=maximum)				
Money purchase (25%/1.25) contributions you made or expect to make (1=maximum)				
Defined benefit contributions you expect to make				
Self-employed SEP (25%/1.25) contributions you made or expect to make (1=maximum)				
Plan contribution rate if not .25 (.xxxx)				
Individual 401k: SE elective deferrals (except Roth) (1=max.)				
Individual 401k: SE designated Roth contributions (1=max.)				
SIMPLE contributions:				
Self-employed SIMPLE contributions you made or expect to make (1=maximum)				
Employer matching rate if not .03 (.xxxx)				
1=nonelective contributions (2%)				
Contributions made to date				

ADJUSTMENTS TO INCOME

	2022 Amount		2021 Amount	
	Taxpayer	Spouse	Taxpayer	Spouse
Self-employed health insurance:				
Total premiums (excluding long-term care)				
Long-term care premiums				
Student loan interest paid (1098-E, box 1)				
Educator expenses (kindergarten thru grade 12)				
Jury duty pay given to employer				
Expenses from rental of personal property				
Other adjustments to income:				

	2022 Amount		2021 Amount	
	Taxpayer	Spouse	Taxpayer	Spouse
Alimony paid:				
Date of divorce or sep. agreement				
Recipient's first name				
Recipient's last name				
Recipient's SSN				
Amount paid	2021 amt:		2021 amt:	

**Please enter all pertinent 2022 amounts and attach all 1098 forms.
Last year's amounts are provided for your reference.**

MEDICAL AND DENTAL EXPENSES

NOTE: Enter self-employed health insurance premiums on Sheet 24 and Medicare insurance premiums on Sheet 14.

	2022 Amount	TS	2021 Amount
Prescription medicines and drugs			
Doctors, dentists and nurses			
Hospitals and nursing homes			
Insurance premiums not entered elsewhere (excl. LT care & amts. paid w/pre-tax dollars) ..			
Long-term care premiums - taxpayer			
Long-term care premiums - spouse			
Insurance reimbursement (enter as a positive number)			
Lodging and transportation:			
Out-of-pocket expenses			
Medical miles driven (1/1/22 - 6/30/22)			
Medical miles driven (7/1/22 - 12/31/22)			
Other medical and dental expenses:			

TAXES PAID (State and local withholding and 2022 estimates are automatic.)

State income taxes - 1/22 payment on 2021 state estimate			
State income taxes - paid with 2021 state return extension			
State income taxes - paid with 2021 state return			
State income taxes - paid for prior years and/or to other state			
City/local income taxes - 1/22 payment on 2021 city/local estimate			
City/local income taxes - paid with 2021 city/local extension			
City/local income taxes - paid with 2021 city/local return			

SALES AND USE TAXES PAID

State and local sales taxes (except autos and special items)			
Use taxes paid on 2022 purchases			
Use taxes paid with 2021 state return			
Sales tax on autos not included above			
Sales tax on boats, aircraft, other special items			

OTHER TAXES PAID

Real estate taxes - principal residence:			

Real estate taxes - held for investment :			

Personal property taxes (including auto fees in some states. Provide a copy of tax notice) . . .			
Foreign income taxes			
Other taxes:			

Please enter all pertinent 2022 amounts. Last year's amounts are provided for your reference.

INTEREST PAID

Home mortgage int. (Box 1) and points (Box 2) reported on Form 1098:

2022 Amount	TS	2021 Amount

Home mortgage interest not reported on Form 1098:

Payee's name.....	
Payee's SSN or FEIN....	
Payee's street address..	
Payee's city.....	
Payee's state.....	
Payee's ZIP code.....	
Payee's region.....	
Payee's postal code....	
Payee's country.....	

Amount paid.....		
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Points not reported on Form 1098:

Mortgage insurance premiums on post 12/31/06 contracts (Box 4)

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Investment interest (interest on margin accounts):

Passive interest.....

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NOTE: Points paid on loans other than to buy, build, or improve your main home are deductible over the life of the mortgage. For these types of loans also provide the dates and lives of the loans.

CASH CONTRIBUTIONS

NOTE: No deduction is allowed for cash or check contributions unless the donor maintains a bank record, or a written communication from the donee, showing the name of the organization, contribution date(s), and contribution amount(s).

Churches, schools, hospitals, and other charitable organizations (60% limitation):

Contributions by cash or check:

Volunteer expenses (out-of-pocket)

Number of charitable miles.....

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Veterans' organizations, fraternal societies, nonprofit cemeteries, and certain private nonoperating foundations (30% limitation):

Contributions by cash or check:

Volunteer expenses (out-of-pocket)

Number of charitable miles.....

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Please enter all pertinent 2022 amounts. Last year's amounts are provided for your reference.

NONCASH CONTRIBUTIONS

NOTE: Use Sheet 26 if total noncash contributions are over \$500. No deduction is allowed for contributions of clothing and household items that are not in *good* used condition or better. In addition, a deduction for any item with minimal monetary value may be denied.

50% limitation (see above):

	2022 Amount	TS	2021 Amount

30% limitation (see above):

30% capital gain property (gifts of capital gain property to 50% limit orgs.):

20% capital gain property (gifts of capital gain property to non-50% limit orgs.):

STATE MISC. DEDS. IF NON-CONFORMING TO TAX CUTS & JOBS ACT (subject to 2% AGI limit)

Union and professional dues

Other unreimbursed employee expenses (uniforms and protective clothing, professional subscriptions, employment agency fees, and certain edu. expenses):

Investment expense:

Tax return preparation fee

Safe deposit box rental

Miscellaneous deductions (2% AGI) (certain legal and accounting fees, and custodial fees):

Federal only:

State only:

2022

1040

US

Noncash Contributions (Form 8283)

26

If your total noncash contributions are in excess of \$500 in 2022, please complete the information below for each donee using the following guidelines:

* If you contributed a motor vehicle, boat, or airplane with a claimed value of more than \$500, attach Form 1098-C or other written acknowledgement received from the donee organization.

* A deduction for contributions of clothing or other household items that are not in *good* used condition or better is not allowed. In addition, a deduction for any item with minimal monetary value may be denied. However, these rules do not apply to any contribution of a single item for which a deduction of more than \$500 is claimed, if a qualified appraisal for the donated property is provided.

DONATED PROPERTY INFORMATION

No. <input type="text"/>	Name of charitable organization (donee)		
	Street address		
	City		
	State		
	ZIP code		
	1=spouse, 2=joint		
	Property description (other than vehicle)		
	Vehicle	Identification number (VIN)	
		Year (yyyy)	
		Make and model	
		Condition and mileage	
	Date of contribution (m/d/y)		
Date acquired by donor (m/y)			
How acquired by donor (Table 1 or describe)			
Donor's cost or basis			
Fair market value			
Method used to determine FMV (Table 2 or describe)			

No. <input type="text"/>	Name of charitable organization (donee)		
	Street address		
	City		
	State		
	ZIP code		
	1=spouse, 2=joint		
	Property description (other than vehicle)		
	Vehicle	Identification number (VIN)	
		Year (yyyy)	
		Make and model	
		Condition and mileage	
	Date of contribution (m/d/y)		
Date acquired by donor (m/y)			
How acquired by donor (Table 1 or describe)			
Donor's cost or basis			
Fair market value			
Method used to determine FMV (Table 2 or describe)			

<p>1 How Property was Acquired</p> <p>1 = Purchase 3 = Inheritance 2 = Gift 4 = Exchange</p>	<p>2 Method Used to Determine FMV</p> <p>1 = Appraisal 3 = Catalog 2 = Thrift shop value 4 = Comparable sales</p> <p style="text-align: center;">For other methods, see IRS Pub. 561.</p>
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26

2022	1040	US	Business Use of Home (Form 8829)	No. <input style="width:40px;" type="text"/>	29
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**Please enter 2022 indirect expenses in full. Nonbusiness portion will carry to Schedule A.
Business percentage will be applied to indirect expenses only.**

BUSINESS USE OF HOME

	2022 Amount	2021 Amount
Form		
Number of form (e.g., enter 2 for Schedule C number 2)		
Business use area (square footage)		
Total area of home (square footage)		
Total hours facility used (for daycare facilities only)		
Total hours available (if not 8,760)		
Area of home included above used exclusively for daycare business, if any (sq ft)		
% (.xx) or amount of gross income from home if not 100% (-1 if none)		
% (.xx) or amount of expenses from home if not 100% (-1 if none)		

INDIRECT EXPENSES

NOTE: Indirect expenses are for keeping up and running your entire home. They benefit both the business and personal parts of your home.

Mortgage interest		
Real estate taxes		
Casualty losses		
Insurance		
Miscellaneous		
Rent		
Repairs and maintenance		
Utilities		
Excess mortgage interest		
Excess real estate taxes		
Other indirect expenses:		

DIRECT EXPENSES

NOTE: Direct expenses benefit only the business part of your home. They include painting or repairs made to specific areas or rooms used for business.

Mortgage interest		
Real estate taxes		
Casualty losses		
Insurance		
Miscellaneous		
Rent		
Repairs and maintenance		
Utilities		
Excess mortgage interest		
Excess real estate taxes		
Excess casualty losses		
Allowable casualty losses		
Other direct expenses:		

2022	1040	US	Employee/Vehicle Bus. Exp. (Form 2106)	No. <input style="width:40px;" type="text"/>	30
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Please enter all pertinent 2022 amounts. Last year's amounts are provided for your reference.

GENERAL INFORMATION

Occupation, if different from Form 1040.....

Form.....	
Number of form (1=first Schedule C, 2=second, etc.).....	
1=spouse.....	
1=performance artist, 2=handicapped, 3=fee-basis government official.....	
1=minister's expenses.....	

EMPLOYEE BUSINESS EXPENSES

	2022 Amount	2021 Amount
Meal expenses from restaurants in full.....		
Meal expenses from sources other than restaurants.....		
Reimbursements for meals not on W-2, box 1.....		
1=Department of Transportation (80% meal allowance).....		
Local transportation (bus, taxi, train, etc.).....		
Travel expenses while away from home overnight.....		
Reimbursements not included on Form W-2, box 1.....		

Other business expenses:

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2022

1040

US

Vehicle Expenses (Form 2106) (cont.)

No.

30 p2

Please enter all pertinent 2022 amounts. Last year's amounts are provided for your reference.

VEHICLE INFORMATION

- 1=vehicle used primarily by more than 5% owner
- 1=vehicle is available for off-duty personal use
- 1=no other vehicle is available for personal use
- 1=no evidence to support your deduction
- 1=no written evidence to support your deduction

2022 Amount	2021 Amount

VEHICLE 1

- Description of vehicle
- Date placed in service (m/d/y)
- Total mileage (for the tax year)
- Business mileage (1/1/22 - 6/30/22)
- Business mileage (7/1/22 - 12/31/22)
- Commuting mileage (for the tax year)
- Average daily round-trip commute
- Number of months of business use if changed from 100% personal use
- Parking fees and tolls (business portion only)

Actual expenses:

- Gasoline, lube, oil
- Repairs
- Tires
- Insurance
- Miscellaneous
- Auto license (other than personal property taxes)
- Personal property taxes (based on car's value)
- Interest (car loan) (for Schedule C, E & F)
- Vehicle rent or lease payments
- Inclusion amount (enter as positive)
- Value of employer-provided vehicle on Form W-2 (2106)

VEHICLE 2

- Description of vehicle
- Date placed in service (m/d/y)
- Total mileage (for the tax year)
- Business mileage (1/1/22 - 6/30/22)
- Business mileage (7/1/22 - 12/31/22)
- Commuting mileage (for the tax year)
- Average daily round-trip commute
- Number of months of business use if changed from 100% personal use
- Parking fees and tolls (business portion only)

Actual expenses:

- Gasoline, lube, oil
- Repairs
- Tires
- Insurance
- Miscellaneous
- Auto license (other than personal property taxes)
- Personal property taxes (based on car's value)
- Interest (car loan) (for Schedule C, E and F)
- Vehicle rent or lease payments
- Inclusion amount (enter as positive)
- Value of employer-provided vehicle on Form W-2 (2106)

30 p2

2022	1040	US	Health Savings Accounts (8889)	32.1
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Please enter all pertinent 2022 amounts & attach all 1099-SA forms.
Last year's amounts are provided for your reference.

HSA CONTRIBUTIONS

NOTE: Contributions to an HSA are only eligible to persons covered under a high deductible health plan. For tax year 2022, a high deductible health plan is one with an annual deductible that is not less than \$1,400 for self-only coverage or \$2,800 for family coverage, and the annual out-of-pocket expenses (deductibles, co-payments, and other amounts, but not premiums) do not exceed \$7,050 for self-only coverage or \$14,100 for family coverage.

	2022 Amount		2021 Amount	
	Taxpayer	Spouse	Taxpayer	Spouse
1=self-only coverage, 2=family coverage				
HSA contributions you made or expect to make, except rollovers, employer contributions, and contributions made to an employee account through a cafeteria plan (1=maximum)				
Contributions included above that were made after you became eligible for Medicare				
Contributions made to date				

HSA DISTRIBUTIONS

Total HSA distribution received (1099-SA, box 1) ...				
Distributions included above that were rolled over to another HSA				
Total unreimbursed qualified medical expenses ...				

Please enter all pertinent 2022 information. Last year's amounts are provided for your reference. You must have paid for the care of one or more dependents enabling you to work or attend school to qualify for this credit.

DEPENDENT CARE EXPENSES (33.1)

	2022 Amount		2021 Amount	
	Taxpayer	Spouse	Taxpayer	Spouse
Dependent care expenses incurred but not paid in 2022				
Employer-provided benefits forfeited in 2022				

PERSONS AND EXPENSES QUALIFYING FOR DEPENDENT CARE CREDIT

No. <input style="width:40px;" type="text"/>	First name			
	Last name			
	Title or suffix			
	Date of birth (m/d/y)			
	Social security number			
	Qualified dependent care expenses incurred and paid in 2022			2021 amt:
	1=disabled			
	1=spouse, 2=joint			

No. <input style="width:40px;" type="text"/>	First name			
	Last name			
	Title or suffix			
	Date of birth (m/d/y)			
	Social security number			
	Qualified dependent care expenses incurred and paid in 2022			2021 amt:
	1=disabled			
	1=spouse, 2=joint			

PERSONS OR ORGANIZATIONS PROVIDING CARE (33.2)

No. <input style="width:40px;" type="text"/>	Name of provider			
	Street address			
	City			
	State			
	ZIP code			
	Address where care provided (if different):			
	Street address			
	City, state, ZIP code			
	Telephone number			
	Identification number (SSN or EIN)			
	1=organization is tax-exempt			
	1=care provider is a person			
	Foreign region			
	Foreign postal code			
	Foreign country			
Amount paid to care provider in 2022			2021 amt:	
1=spouse, 2=joint				

2022	1040	US	Education Credits / Tuition Deduction	No. <input style="width:40px;" type="text"/>	38
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Please complete the information below if you paid qualified education expenses in 2022 for you, your spouse, or your dependents enrolled in an accredited postsecondary institution. Last year's amounts are provided for your reference.

STUDENT INFORMATION

1=taxpayer, 2=spouse
 First name
 Last name
 Social security number
 Number of years hope credit claimed
 Number of prior years AOC claimed
1=student was NOT enrolled at least half-time for at least one academic period that began in 2022 (or the first 3 months of 2023 if the qualified expenses were made in 2022) at an eligible institution in a qualified program
 1=student completed first four years of post-secondary education before 2022
 1=student was convicted, before the end of 2022, of a felony for possession or distribution of a controlled substance

EDUCATIONAL INSTITUTION ATTENDED (#1)

Name
 Street address
 City
 State
 ZIP code
 1=2022 Form 1098-T was NOT received
 1=2022 Form 1098-T received with Box 2 & 7 completed
 1=2021 Form 1098-T received with Box 2 & 7 completed
 Federal ID number from Form 1098-T

EDUCATIONAL INSTITUTION ATTENDED (#2)

Name
 Street address
 City
 State
 ZIP code
 1=2022 Form 1098-T was NOT received
 1=2022 Form 1098-T received with Box 2 & 7 completed
 1=2021 Form 1098-T received with Box 2 & 7 completed
 Federal ID number from Form 1098-T

QUALIFIED EDUCATION EXPENSES

Qualified tuition & fees paid in 2022 (net of refund or assistance, & not entered elsewhere)
 Books & supplies required to be purchased from institution
 Books & supplies not entered above
 Amount of prior year refund or assistance *

2022 Amount	2021 Amount

* Refund of qualified expenses and tax-free educational assistance received after you file your return for the year in which the expenses were paid.

2022	1040	US	Parent's Election to Report Child's Inc.	No. <input style="width:40px;" type="text"/>	44
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Please enter all pertinent 2022 amounts & attach all 1099-INT and 1099-DIV forms.
Last year's amounts are provided for your reference.

CHILD'S INFORMATION

First name.....	<input style="width:95%;" type="text"/>
Last name.....	<input style="width:95%;" type="text"/>
Social security number.....	<input style="width:95%;" type="text"/>
Date of birth (m/d/y).....	<input style="width:95%;" type="text"/>
1=nontaxable to federal.....	<input style="width:95%;" type="text"/>
1=nontaxable to state.....	<input style="width:95%;" type="text"/>

INTEREST INCOME (Form 1099-INT)

	2022 Amount	2021 Amount
Banks, credit unions, etc. (Box 1): _____	<input style="width:95%;" type="text"/>	<input style="width:95%;" type="text"/>
U.S. bonds, T-bills, etc. (nontaxable to state) (Box 3): _____	<input style="width:95%;" type="text"/>	<input style="width:95%;" type="text"/>
Tax-exempt interest:		
Total municipal bonds.....	<input style="width:95%;" type="text"/>	<input style="width:95%;" type="text"/>
In-state municipal bonds.....	<input style="width:95%;" type="text"/>	<input style="width:95%;" type="text"/>
Adjustments:		
Nominee distribution.....	<input style="width:95%;" type="text"/>	<input style="width:95%;" type="text"/>
Accrued interest.....	<input style="width:95%;" type="text"/>	<input style="width:95%;" type="text"/>
Tax-exempt interest (1099-INT in error).....	<input style="width:95%;" type="text"/>	<input style="width:95%;" type="text"/>
OID adjustment.....	<input style="width:95%;" type="text"/>	<input style="width:95%;" type="text"/>
ABP adjustment.....	<input style="width:95%;" type="text"/>	<input style="width:95%;" type="text"/>
Foreign:		
1=interest in or authority over foreign account.....	<input style="width:95%;" type="text"/>	<input style="width:95%;" type="text"/>
Name of foreign country.....	<input style="width:95%;" type="text"/>	<input style="width:95%;" type="text"/>
1=grantor/transferor or received distribution from foreign trust.....	<input style="width:95%;" type="text"/>	<input style="width:95%;" type="text"/>
Post 8/7/86 private activity bond interest (included above) (6251).....	<input style="width:95%;" type="text"/>	<input style="width:95%;" type="text"/>

DIVIDEND INCOME (Form 1099-DIV)

Total ordinary dividends (Box 1a): _____	<input style="width:95%;" type="text"/>	<input style="width:95%;" type="text"/>
Qualified dividends (Box 1b).....	<input style="width:95%;" type="text"/>	<input style="width:95%;" type="text"/>
Total capital gain distributions (Box 2a): _____	<input style="width:95%;" type="text"/>	<input style="width:95%;" type="text"/>
Unrecaptured section 1250 gain (Box 2b).....	<input style="width:95%;" type="text"/>	<input style="width:95%;" type="text"/>
Section 1202 gain (Box 2c).....	<input style="width:95%;" type="text"/>	<input style="width:95%;" type="text"/>
Collectibles (28%) gain (Box 2d).....	<input style="width:95%;" type="text"/>	<input style="width:95%;" type="text"/>
Nontaxable distributions (Box 3).....	<input style="width:95%;" type="text"/>	<input style="width:95%;" type="text"/>
Tax-exempt interest:		
Total municipal bonds.....	<input style="width:95%;" type="text"/>	<input style="width:95%;" type="text"/>
In-state municipal bonds.....	<input style="width:95%;" type="text"/>	<input style="width:95%;" type="text"/>
Nominee distributions:		
Ordinary dividends.....	<input style="width:95%;" type="text"/>	<input style="width:95%;" type="text"/>
Qualified dividends.....	<input style="width:95%;" type="text"/>	<input style="width:95%;" type="text"/>
Capital gain distributions.....	<input style="width:95%;" type="text"/>	<input style="width:95%;" type="text"/>
Alaska permanent fund dividends included above.....	<input style="width:95%;" type="text"/>	<input style="width:95%;" type="text"/>

Please enter all pertinent 2022 amounts. Last year's amounts are provided for your reference.

GENERAL INFORMATION

	2022 Amount	2021 Amount
Canadian province or Mexican state		
Other type of filer		
Foreign identification:		
Taxpayer:		
1=passport, 2=foreign TIN		
Other type of identification		
Number		
Country of issue		
Spouse:		
1=passport, 2=foreign TIN		
Other type of identification		
Number		
Country of issue		
Taxpayer:		
Title		
Spouse:		
Title		

2022	1040	US	Report of Foreign Bank & Fin. Accts.	No. <input style="width:40px;" type="text"/>	82.1 p2
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Please enter all pertinent 2022 amounts. Last year's amounts are provided for your reference.

INFORMATION ON FINANCIAL ACCOUNTS

	2022 Amount	2021 Amount
1=spouse.....	<input style="width:100%;" type="text"/>	<input style="width:100%;" type="text"/>
Type of account: 1=bank account, 2=securities account, or specify	<input style="width:100%;" type="text"/>	<input style="width:100%;" type="text"/>
Maximum value of account (-1 if unknown)	<input style="width:100%;" type="text"/>	<input style="width:100%;" type="text"/>
Financial institution:	<input style="width:100%;" type="text"/>	
Name of institution (Line 1) (mandatory)	<input style="width:100%;" type="text"/>	
Name of institution (Line 2)	<input style="width:100%;" type="text"/>	
Mailing address	<input style="width:100%;" type="text"/>	
Account number	<input style="width:100%;" type="text"/>	
City	<input style="width:100%;" type="text"/>	
State	<input style="width:100%;" type="text"/>	
ZIP/postal code	<input style="width:100%;" type="text"/>	
Country (if not US)	<input style="width:100%;" type="text"/>	
Accounts owned jointly:	<input style="width:100%;" type="text"/>	
Number of joint owners (Mandatory for Part III accounts) (-1 if joint owner is joint filer)	<input style="width:40%;" type="text"/>	<input style="width:40%;" type="text"/>
Principal joint owner:	<input style="width:100%;" type="text"/>	
Taxpayer identification number, if not joint filer	<input style="width:100%;" type="text"/>	
TIN type: 1=EIN, 2=SSN/ITIN, 3=foreign , 4=unknown	<input style="width:40%;" type="text"/>	<input style="width:40%;" type="text"/>
Last name	<input style="width:100%;" type="text"/>	
First name	<input style="width:100%;" type="text"/>	
Middle initial	<input style="width:100%;" type="text"/>	
Address	<input style="width:100%;" type="text"/>	
City	<input style="width:100%;" type="text"/>	
State	<input style="width:100%;" type="text"/>	
ZIP/postal code	<input style="width:100%;" type="text"/>	
Country (if not US)	<input style="width:100%;" type="text"/>	
Accounts where filer has no financial interest:	<input style="width:100%;" type="text"/>	
Last name or org. name (mandatory)	<input style="width:100%;" type="text"/>	
First name	<input style="width:100%;" type="text"/>	
Middle initial	<input style="width:100%;" type="text"/>	
Taxpayer identification number	<input style="width:100%;" type="text"/>	
TIN type: 1=EIN, 2=SSN/ITIN, 3=foreign , 4=unknown	<input style="width:40%;" type="text"/>	<input style="width:40%;" type="text"/>
Address	<input style="width:100%;" type="text"/>	
City	<input style="width:100%;" type="text"/>	
State	<input style="width:100%;" type="text"/>	
ZIP/postal code	<input style="width:100%;" type="text"/>	
Country (if not US)	<input style="width:100%;" type="text"/>	
Filer's title	<input style="width:100%;" type="text"/>	

2022	1040	US	Foreign Reporting (8938)	No. <input style="width:40px;" type="text"/>	82.2	p2
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Please enter all pertinent 2022 amounts. Last year's amounts are provided for your reference.

FOREIGN DEPOSIT AND CUSTODIAL ACCOUNTS (Part I)

	2022 Amount	2021 Amount
Description of asset		
Type of account: 1=deposit, 2=custodial		
Use financial institution information from Form 114		
Financial institution information (if not filing Form 114):		
Maximum value of account during year		
Name of institution		
Account number (mandatory for part I)		
Mailing address of institution		
City of institution		
State/province of institution		
Postal code of institution		
Country of institution		
1=account opened during year		
1=account closed during year		
1=account jointly owned with spouse		
1=no tax item in Part III with respect to this account		
1=used foreign currency exchange rate to convert value to US dollars		
Foreign currency in which account is maintained		
Foreign currency exchange rate (xxxx.xxxx)		
Source of exchange rate		

OTHER FOREIGN ASSETS (Part II)

Identifying number or other designation (mandatory for part II)		
Date asset acquired during year (m/d/y)		
Date asset disposed of during year (m/d/y)		
1=jointly owned with spouse		
1=no tax item in Part III with respect to this asset		
Maximum value of asset during year		
1=used foreign currency exchange rate to convert value to US dollars		
Foreign currency in which asset is denominated		
Foreign currency exchange rate (xxxx.xxxx)		
Source of exchange rate		
Foreign entity information (complete if stock or interest):		
Name of entity		
Type of entity		
Mailing address of entity		
City of entity		
State/province of entity		
Postal code of entity		
Country of entity		

<p>1</p> <p>Type of Entity</p> <p>1 = Partnership</p> <p>2 = Corporation</p> <p>3 = Trust</p> <p>4 = Estate</p>

2022

1040

US

Foreign Reporting (8938) (continued)

No.

82.2 p2

Please enter all pertinent 2022 amounts. Last year's amounts are provided for your reference.

OTHER FOREIGN ASSETS (Part II) (continued)

Issuer or counterparty (#1):

Name

1=issuer, 2=counterparty

Type of issuer or counterparty (see table 2)

Issuer or counterparty: 1=US person, 2=foreign person

Mailing address

City

State/province

Postal code

Country

Issuer or counterparty (#2):

Name

1=issuer, 2=counterparty

Type of issuer or counterparty (see table 2)

Issuer or counterparty: 1=US person, 2=foreign person

Mailing address

City

State/province

Postal code

Country

Issuer or counterparty (#3):

Name

1=issuer, 2=counterparty

Type of issuer or counterparty (see table 2)

Issuer or counterparty: 1=US person, 2=foreign person

Mailing address

City

State/province

Postal code

Country

Issuer or counterparty (#4):

Name

1=issuer, 2=counterparty

Type of issuer or counterparty (see table 2)

Issuer or counterparty: 1=US person, 2=foreign person

Mailing address

City

State/province

Postal code

Country

2
Type of Issuer or Counterparty
1 = Individual
2 = Partnership
3 = Corporation
4 = Trust
5 = Estate

Prescott Tax & Wealth Management Checkup

Please complete checklist so that we can identify areas where we can help you.

Yes No Not Sure

- Do you feel that your finances are adequately organized? _____
- Do you have any financial problems that require immediate attention? _____
- Do you have any credit card debt? _____
- Do you expect any major expenditures within the next 2 years? _____
- Expecting any cash inflows (bonus, inheritance, rollover) over next 2 years? _____

Retirement Planning

- Are you saving for retirement? _____
If yes, how much? _____
- Do you know what rate of return you need to safely retire? _____
- Have you ever had your "Retirement Needs" professionally analyzed? _____
- Do you have a 401(k) or retirement plan? _____
Is it professionally allocated? _____
- Location of Plan? (circle one) Current Employer Former Employer _____

Estate Planning

- Do you have a Will or Trust? _____
- Do your parents have a Will or Trust? _____

Risk Management/Protection?

- Health - Do you currently have health insurance? What type? _____
Circle one *PPO HMO Individual Group CPBRA*
- Have you considered a Health Savings Account w/ a high-deductible PPO? _____
- Life Insurance - Do you have an adequate coverage? _____
Individual or Group? _____
- Amount of Coverage You \$ _____ Spouse \$ _____
- Disability - Do you have an adequate coverage? _____
Individual or Group? _____
- Amount of Coverage You \$ _____ Spouse \$ _____
- Long Term Care
Do you have coverage? Yes ___ No ___ Monthly Amount \$ _____

Education Planning

- Have you made plans for your Children or Grandchildren? _____
- Circle any of these you are using? *529 Plan UTMA Coverdell-ESA*

Investment Planning

Do you use professional diversification to reduce risk?

Have you had your portfolio analyzed recently?

Would you like to establish an online/phone application which reports your Net Worth and can generate a retirement plan along with tracking towards your goals? _____

Business Planning

Which group or employee benefits do you offer (circle all that apply)?

Pension____Life Insurance____Disability____Health____Long Term Care