tax organizer

2023

foundation tax

Foundation Tax LLC 9 West Parish Rd., Westport CT 06880 203.981.3112 | www.foundtax.com

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INSTRUCT	IONS					
	nake tax prep as painless and efficient as possib					
	ntify any events during 2023 that could result in your unique tax situation, assists me in legally r					
	d organizer. Thanks!	gg				
Clients without Self-Employment Income please complete only Parts 1.10. Leave Parts 11.19 blank						
 □ Clients without Self-Employment Income, please complete only Parts 1-10. Leave Parts 11-18 blank. □ Clients with Self-Employment Income, please complete ALL Parts. 						
LIDI OAD VO	NUD COMPLETED ODGANIZED TO C	NI INE BORT	A.			
UPLOAD YO	OUR COMPLETED ORGANIZER TO O	NLINE PORT	AL			
	ASE SUBMIT THIS ODG ANIZED & TAY DOG	NUMENTO NO L	ATER THAN MONDAY MAR 40, 2024			
	ASE SUBMIT THIS ORGANIZER & TAX DOO completed, save this organizer with your name (i.					
□ Uploa	d this organizer and your tax documents to the Sh	areFile secure clie	ent portal at www.foundtax.com/portal/			
	on "ShareFile Login" enter your email and passw					
	NAD documents: click on the circular blue button or NLOAD documents, click check box to left of file n					
	SEND ME AN EMAIL WHEN UPLOADS ARE CO					
VOLID COMMENTO O CUESTIONS						
YOUR COM	MENTS & QUESTIONS					

20**23**personal

personal tax organizer	My Full Name	Today's Date					
tax digailizei							
This organizer is for: ☐ Me on	ly	se	ganizer				
RETURNING CLIENTS: Look for the symbol, it allows you to skip re-entering info already on file.							
Part 1: PERSONAL DATA							
◆ RETURNING CLIENTS: Changes fro If no, go to Part 2. If yes, provide any		◆ RETURNING CLIENTS: Changes from last year? ☐ If no, go to Part 2. If yes, provide any changes below					
Taxpayer Last Name		Spouse Last Name					
Taxpayer First Name		Spouse First Name					
Taxpayer Address		Spouse Address					
Taxpayer City/State/Zip		Spouse City/State/Zip					
Taxpayer SSN		Spouse SSN					
Taxpayer Date of Birth		Spouse Date of Birth					
Taxpayer email		Spouse email					
Taxpayer phone		Spouse phone					
Taxpayer occupation		Spouse occupation					
O New CLIENTS: Please provide current driver's license (front an		O New CLIENTS: Please provide a copy of your current driver's license (front and back)					
Part 2: TAX REFUNDS & PAYMENT METHODS							
If you are due a REFUND , how would you prefer to receive it? ☐ Direct Deposit ☐ Paper Check ☐ Apply as needed to next year's estimates							
If you OWE TAXES , how would you prefer to pay? □ Direct Debit □ IRS or state online payment □ Paper Check □ Credit Card (fees vary)							

NAVIGATION TIP: Clicking this icon to return to the table of contents

If you **OWE QUARTERLY ESTIMATES**, how would you prefer to pay?

For your TAX PREPARATION INVOICE, how would you prefer to pay?

☐ Direct Debit ☐ IRS or state online payment ☐ Paper Check ☐ Credit Card (fees vary)

☐ Stripe (pay from checking: \$0 fee) ☐ *Stripe (pay w/ credit card/digital wallet: 2.9% +\$0.30 fee applies)

Part 3: DIRECT DEPOSIT / DIRECT DEBIT BANK INFO

I recommend direct deposit to your bank for refunds & direct debit for taxes owed and quarterly estimates (if available in your state). It's safe, quick, and convenient! For debits, enter amounts in your calendar to ensure funds are there on the appropriate date. The more things you can automate, the less taxing your financial life will be!

◆ RETURNING CLIENTS: ☐ Use my bank info from last year ☐ Use my new bank info below					
Name of My Bank		□ Checking □ Sa	vings		
My Routing Number (must be 9 DIGITS) _		My Account Number			
	*:00000000: 000000 ROUTING NUMBER ACCOUNTING	INT			

(No need to attached voided check. Picture for illustration purposes only)

Part 4: TAX PAYMENTS MADE IN 2023 (and 2024 if on an extension)

Please list tax payments you made in the 2023 calendar year and the date paid (important.)

<u>Do not</u> list tax payments that were automatically withheld from your W-2, 1099-R, SSA-1099 or other tax form.

Due Date	Date Paid	Federal	State 1 CT	State 2	State 3
2022 taxes due & paid w/2022 return (DO NOT include penalties or interest)					
		I	I		I
2023 Q1 estimate due 4/18/22					
2023 Q2 estimate due 6/15/22					
2023 Q3 estimate due 9/15/22					
2023 Q4 estimate due 1/17/23					
Other (explain)					

Elients on EXTENSION, please list amounts paid with extensions and ALL 2024 estimates already paid.

Due Date	Date Paid	Federal	State 1 CT	State 2	State 3
Amounts paid with 2023 extensions					
2024 Q1 estimate due 4/15/24					
2024 Q2 estimate due 6/17/24					

Part 5: QUESTIONNAIRE

Please answer each question as it relates to the 2023 calendar year. If you (or your spouse) answer "yes" to any question, <u>provide details</u> in the Comments Box on page 1 of this organizer.

	Υ	N							
			Did your marital status or dependents change during the year? Date of change						
PERSONAL			Did you provide over 50% of support for anyone during the year, excluding your children?						
PERS			Were you involved in a bankruptcy, foreclosure, or had any loan or debt (including credit cards) forgiven?						
			Did you have foreign bank, brokerage or trust account(s)? Complete Part 8						
			Did you have children (under 19 or full-time student under 24) with investment income over \$1,250?						
MILY			Did you pay for child care while you worked or went to school? Complete Part 7.						
EDUCATION & FAMILY			Did you contribute to a 529 Plan or other education savings plan? Amount contributed						
CATIO			Did you pay for courses to improve or acquire or your job skills? (if you are self-employed, choose "no")						
Ë			Did you receive Student Loan Forgiveness in 2023? Amount Date of Forgiveness						
			Did you pay tuition for undergraduate or graduate studies for yourself, your spouse or a dependent?						
			Did you have any income from non-US sources (other than investments)?						
INCOME			"At any time during 2023, did you RECEIVE as a reward, award, or payment for property/services; or SELL, EXCHANGE, GIFT, or DISPOSE of a digital asset* (or a financial interest in a digital asset)?"						
=			Did you receive any income from hobbies, gambling, jury duty, scholarships, grants, lotteries, prizes, awards, lawsuits, inheritances, US Savings Bond sales, executor fees, alimony or any other source? Complete Part 6B						
			Did you buy, sell, or refinance a main or second home or rental property? Provide closing statement(s)						
Did you buy a new or used EV, and/or install an EV charging station? Provide credit certificate from the									
			Did you make energy-efficient upgrades to your home (i.e., insulation, windows, furnaces, etc.)? Provide details.						
DEDUCTIONS			Outside of your employer's retirement plan, did you already contribute to an IRA, Roth, SEP, Solo K or other qualified retirement plan? Amount contributed for Taxpayer Amount for Spouse						
DEDNC			If eligible, would you like to contribute to a retirement plan for 2023? Taxpayer Spouse						
			Did you make gifts of money or property of more than \$17,000 (or \$34,000 for couples) to any person last year?						
			Did you make any Qualified Charitable Distribution (QCD) from your IRA? Provide IRA statement showing QCD.						
			Did you make a contribution to and/or take a distribution from your Health Savings Account (HSA)?						
MISC.			Did you pay one person more than \$2,600/year for domestic services in your home (e.g., housekeeper, nanny)?						
2			Do you expect your income and deductions in 2024 to be about the same as 2023? If not please explain.						
			Did you receive ANY tax correspondence from the IRS or state? If yes, please provide documents.						
			Did you make any out-of-state purchases (by internet, phone, mail, or in person) where you didn't pay sales tax to your resident state/locality? Total purchases						

^{*} The IRS defines a **digital asset** as an item created and stored digitally, has value, has established ownership, and is discoverable. Common digital assets include cryptocurrencies, convertible virtual currencies, stablecoins, and nonfungible tokens (NTFs)



Part 6A: INCOME CHECKLIST

Please indicate which tax forms you're providing and how many of each. No need to provide income amounts. For forms that come late, like K-1's, simply indicate how many you are likely receive, even if you don't have them yet.

Tax Forms You Received	Description	Please check if provided (or will provide)	How many forms?
W-2	Wages & Salary Income		
1099-NEC	Self-Employment Income	Complete	Parts 11-18
Other 1099's	 Interest Income Dividend Investment Sales (no need to provide SSG 1099's) Social Security IRA and Pension Withdrawals & Rollovers Unemployment Hobby Gambling or Other Income Tax Refunds 		
1098	Mortgage Interest and Tuition		
1095-A,B, or C	ACA/Obamacare Forms		
K-1	S-Corp, Partnership or Trust Income		
Closing Statement	Sale or Purchase of Home / Rental Property		
Other	Explain		

Part 6B: OTHER INCOME (EXCLUDING SELF EMPLOYMENT)

\square Y \square N	Did you (or your spouse) have any "other income" last year? If "no" please skip this and go to Part 7
-------------------------	---

If you received ANY OTHER INCOME not reported on a tax form, complete this part. Please note that not all income categories below are taxable. It depends on current tax law and your personal circumstances.

Go to Part 11	Self-Employment Income		Interest not reported on Form 1099-INT
	Hobby Income		Executor Fees
	Gambling Winnings		Inheritances
	Jury Duty Pay (not given to your employer)		Sales of US Savings Bonds
	Scholarships or Grants		Sales of Gold, Coins, Artwork, etc.
	Lottery Winnings, Prizes or Awards		"Gig Economy" income (from Uber,
*Form 1099-G	Unemployment		Lyft, Upwork, DoorDash, Etsy, etc.)
	Alimony Received	Go to Part 9B	Airbnb/HomeAway/VRBO, etc.
	Lawsuit or Settlement Proceeds		Other

^{*} Please get and upload Form 1099-G from your state tax dept. Try googling your state + 1099-G (e.g. google "CT 1099-G")

Tall TA. Office CARE COSTS EXTENSES	
☐ Y ☐ N Did you have child care costs? If "no" please sk	rip this and go to Part 8
For dependent children under 13. Include daycare, before and after school care, preschool, pre-K programs, day camp costs. Note: ALL INFO REQUESTED IS REQUIRED	Provider Name Provider Address Provider ID (SSN or EIN) Amount Paid Child's 1st Name
Provider Name Provider Address Provider ID (SSN or EIN) Amount Paid Child's 1st Name	Provider Name Provider Address Provider ID (SSN or EIN) Amount Paid Child's 1st Name
Part 8: FOREIGN ACCOUNTS & TRUSTS (FBAR)	
☐ Y ☐ N Did you (or your spouse) have a foreign account	nt last year? If "no" please skip this and go to Part 9
If you have a financial interest in or signature authority over a fore located in a foreign country, <u>you are required to disclose it.</u> This is is up to 50% of the account's value. If you answer 'yes" to the q	an area of IRS scrutiny. The failure to disclose penalty
☐ Y ☐ N Did the combined value of all foreign accounts exc	<u> </u>
What was maximum value of this account at any point in 202	ceed \$50,000 USD at any point in 2023? 23? (provide value in local currency)
	ceed \$50,000 USD at any point in 2023? 23? (provide value in local currency)
What was maximum value of this account at any point in 202	ceed \$50,000 USD at any point in 2023? 23? (provide value in local currency) t year
What was maximum value of this account at any point in 202 ◆ RETURNING CLIENTS: □ Use my foreign account info from last What type of account is it? □ Bank □ Brokerage □ Other	t year Use my new account info below er, explain
What was maximum value of this account at any point in 202 ◆ RETURNING CLIENTS: ☐ Use my foreign account info from last What type of account is it? ☐ Bank ☐ Brokerage ☐ Other Name of Financial Institution	23? (provide value in local currency) t year
What was maximum value of this account at any point in 202 ◆ RETURNING CLIENTS: □ Use my foreign account info from last What type of account is it? □ Bank □ Brokerage □ Other	23? (provide value in local currency) t year

Note: If you have multiple foreign accounts to disclose, or additional owners, please use additional copies of this page.

\square Y \square N	Did you (or your spous	e) have any	rental inc	come last year? If	'no" please sl	kip this a	nd go to Part 10
Provide details on income and expenses for rental properties. Please fill out a separate sheet for each rental property. ◆ RETURNING CLIENTS: Is your rental address same as last year? □ Y □ N If no, fill in new address below.							
Property Des	Property Description Property Address (Street, City, State, Zip Code)						
	•	. ,					
Select Proper	rty Type: ☐ Single Family ☐	Multi-Fami	ly 🗆 Vacat	tion Home Comr	nercial		
Ownership pe	ercentage: 100% or _	%	Owner-oc	cupied rentals: what	t % of your ho	me do yo	u rent?%
Number of da	ays rented at fair market valu	e #	Number o	of days of personal u	se #		
INCOME							
	e Received:	Deposits R	Received: _		Other Incom	ie:	
EXPENSES	 }						
Advertising				Utilities			
	driven for rental business)			Condo/Homeow	ner Assoc. Du	ues	
Cleaning & M	· · · · · · · · · · · · · · · · · · ·			Electricity			
Commissions	Paid (paid to rental agencie	s)		Gas/Oil/Fuel			
Insurance (PI	MI, liability and/or umbrella)			Security System			
Legal & Accounting Fees				Trash / Hauling			
Management Fees				Water/Sewer			
Mortgage Inte	erest (provide Form 1098)			Yardwork/Snow	Removal		
Other Interes	t Paid			Wages (for emplo	yees)		
Real Estate T	axes			Other:		-	
Repairs				Other:			
Supplies				Other:		_	
CAPITAL IMPROVEMENTS & BUSINESS ASSETS (improvements are permanent upgrades like new carpeting, new roof, new appliances, etc. / business assets are new items like snow blowers, ladders, etc.)							
Description	of Improvement			Date Placed into	Service	Total C	ost
Part 9B: SHORT-TERM RENTAL (AIRBNB, HOMEAWAY, VRBO, ETC.)							
Income from a short-term rental may be taxable in certain situations. Please complete all info below.							
Income Received from Short Term Rentals:							
How many days was the property rented out last year?			Was average stay of guests 7 days or less? ☐ Yes ☐ No				

Sales tax collected and remitted: _

Fees paid to online services: ___

Part 9A: RENTAL INCOME AND DEDUCTIONS

Part 10: STANDARD OR ITEMIZED DEDUCTIONS

☐ Y ☐ N Will you itemize your deductions? If "no", you're done! Please return to Page 1.

SHOULD I ITEMIZE MY DEDUCTIONS? Nearly 90% of taxpayers now choose the standard deduction. Find your 2023 standard deduction amount below. Itemizing deductions will lower your taxes if the total of your <u>medical</u> + <u>charitable</u> + <u>mortgage interest</u> + <u>state</u> & <u>local taxes</u> equal more than your standard deduction.

STANDARD DEDUCTION (under age 65)						
2023 2022						
Single	\$13,850	\$12,950				
Head of Household	\$20,800	\$19,400				
Married Filing Jointly (MFJ)	\$27,700	\$25,900				

STANDARD DEDUCTION (age 65 and over)								
2023 2022								
Single (65 or older)	\$15,700	\$14,700						
MFJ (one 65 or older)	\$29,200	\$27,300						
MFJ (both 65 or older)	\$30,700	\$28,700						

MEDICAL (includes dental, vision, etc.) Total expenses must exceed 7.5% of AGI to be deductible. To verify your expense is deductible, go to: IRS list of deductible medical expenses							
Medical out-of-pocket costs							
	Prescriptions						
Medical insurance premiums							
	Medicare premiums (paid out-of-pocket, not via monthly Social Security deduction)						
	Medigap/Supplemental premiums						
	Miles driven for medical purposes						
	MORTGAGE INTEREST PAID If your total mortgage loan(s) is more than \$750,000, please check this box □						
	Mortgage Interest						
Do not fill in. Just provide Form 1098(s) Home Equity interest (loan proceeds must have been used to "buy, build, or substantially improve" the home.)							
CHARITABLE GIVING • Enter only small donations below •							
If your analy denotions avoid COEO (or property denotions avoid							

sure amounts entered were actually paid between Jan 1 – Dec 31)							
State & local income taxes (exclude estimates & amounts withheld on a W-2 or 1099)							
	Real Estate Taxes Paid (residence)						
Real Estate Taxes Paid (2nd home)							
	Personal property taxes (car, boat, etc)						
	Sales tax paid (on purchase of a home, car, truck, boat, RV or other big purchase)						

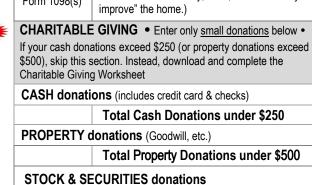
STATE 9 LOCAL TAVES DAID (1:--:4 - \$40,000) Male

MISCELLANEOUS STATE DEDUCTIONS

OPTIONAL for tax filers in CA, IA, ME, MA, MN, NY, or NJ. These are no longer deductible on Federal returns, but still deductible on some state returns. Providing info may reduce your state taxes.

EMPLOYEE Expenses (Ignore this section if you are self-employed, instead list all business expenses in Part 12)

seit-employed	, instead list all business expenses in Part 12)					
	Educator Expenses (Grades K-12 only)					
	Union & Professional Dues					
	Job Search Costs					
	Uniforms					
	Unreimbursed employee expenses					
	Miles driven for job (unreimbursed)					
	Education to improve job skills					
	Other					
Miscellane	eous Deductions					
	Tax Return Prep Fees					
	Investment Advisory Fees					
	Safe Deposit Box					



For all donations of stocks or securities, please download and complete the <u>2023 Charitable Giving Worksheet</u>

☐ Y ☐ N Do you have Self-Employment Income/Expenses? If "no", you're done! Please return to Page 1

self-employed tax organizer

2023

foundation tax

Foundation Tax LLC 9 West Parish Rd., Westport CT 06880 203.981.3112 | www.foundtax.com

Please fill out this organizer as completely as possible. Use a separate organizer for each business.

My Full Name	Today's Date		
Business Name (if different from your name)_			
◆ RETURNING CLIENTS: Is your business add ○ New CLIENTS: List business address Type of Business: □ Sole Proprietor/Single N		Date of first use	
Part 11: SELF-EMPLOYED INCOM	1E		
YOUR GROSS (or PRE-TAX) INCOME		HOW MANY TAX FORMS DID YOU R	ECEIVE?
Income Reported on Form 1099-NEC		Number of 1099-NEC's received	
Income Reported on Form 1099-K		Number of 1099-K's received	
Income Received without an IRS Form		Total # Tax Forms Received	
Total Gross Business Income			
Was sales tax included in income above? ☐ Were reimbursed expenses included in income Did you earn this income physically working in Did you start this business in 2023? ☐ Y ☐ YOUR COMMENTS & QUESTIONS	ne above? □ Y □ N n different states? □	N If yes, total was	

Part 12: MULTI-STATE (& NON-U.S.) SELF-EMPLOYED INCOME

☐ Y ☐ N I earned all self-employment income in my home state. If "yes" plea	se skip this and go to Part 13
---	--------------------------------

If you <u>physically performed work in a state where you don't live</u>, you may be required to file tax returns in multiple states. Paying taxes to a non-resident state is generally credited on your home state return. You probably don't have to file a tax return where your out-of-state customer is located unless you also work there. What matters is where YOU earned the income, not where your customer is based.

<u>List income earned out-of-state + in your home state</u>. The total should = your Gross Business Income in Part 11

	Customer/Client name	Did you receive a Form 1099- NEC?	(a) * <u>Gross amount</u>	(b) Reimbursed expenses (if included in gross)	(c) Sales tax paid (if included in gross)	Net amount (a) minus (b)+(c)	State or country where income was earned
	Spacely Sprockets Inc.	☐ Yes	\$ 18,813.75	\$ 1,000.00	\$ 1,513.75	\$ 16,300	CA
1		☐ Yes					
2		☐ Yes					
3		☐ Yes					
4		☐ Yes					
5		☐ Yes					
6		☐ Yes					
7		☐ Yes					
8		☐ Yes					
9		☐ Yes					
10		☐ Yes					
11		☐ Yes					
12		☐ Yes					
13		☐ Yes					
14		☐ Yes					
15		☐ Yes					
16		☐ Yes					
17		☐ Yes					
18		☐ Yes					
19		☐ Yes					
ΤO	TAL GROSS BUSINES	SINCOME					

TOTAL GROSS BUSINESS INCOME

(should EQUAL total in Part 11)

^{*}Gross amount is amount that appears on your Form 1099s or the amount you invoiced your customer.

Part 13: SELF-EMPLOYED BUSINESS EXPENSES

A deductible business expense is one that is **ordinary** (commonly accepted in your industry) and **necessary** (helpful and appropriate even if not indispensable) for a particular business. Keep bank and credit card statements, but note these are not enough to verify expenses in case of audit. You must also keep copies of ALL business receipts, bills, invoices etc.

Advertising (ads, website, etc.) Anything for business promotion	
Bank Fees & Credit Card Fees (list interest paid below)	
Business Gifts (\$25/person limit)	
Business Insurance (not auto, health or home insurance)	
Auto Expenses	Go to Part 15
Commissions/Agent Fees Paid	
Computer/Cloud Services (Constant Contact, Dropbox, etc.)	
Cost of Goods Sold (only if you made or sold products. Don't double count expenses shown elsewhere)	
■ Beginning Inventory	
■ Total Production Costs	
■ Ending Inventory	
Contract Labor (each contractor w/\$600+ /yr. requires a 1099-NEC)	
Dues & Subscriptions (trade/professional publications only)	
Education, training & research (include conference admission)	
Equipment (Computers, furniture, phones, etc.) <u>Items having a useful</u> <u>life of more than one year</u> .	Go to Part 17
Health/Dental Insurance Premiums (policy must be in your name)	
Home Office	Go to Part 16
Interest Paid (business loans or 100% business credit cards)	

niis, iiivoices etc.
Go to Part 14
Go to Part 14

Part 14: SELF-EMPLOYED TRAVEL & MEALS

You may deduct ALL business meals with others. **You may deduct SOLO business meals only for overnight business travel**. Keep records with meal location, amount (include tip), business purpose and names & biz relationship of attendees. You may no longer deduct expenses to entertain customers/clients (e.g., sports tickets, golf fees, shows.)

Travel (train, subway, cabs, Uber, airfare, car rental costs, hotels, cash tips, etc.) List parking & tolls for your car in Part 15	Meals (Include business meals w/others. Include solo business meals* only for outof-town travel. You may not deduct solo business meals while "at home."
* For out-of-town solo meals (<u>not</u> lodging or transportation) you have the option to use either actual meal costs or per diem meal costs (called M&IE), whichever is higher . Select your travel destination and use rates for 2023.	Click here for GSA info for U.S. per diem meals (M&IE) Click here for State Dept. info for foreign per diem meals

Part 15: SELF-EMPLOYED AUTO EXPENSES

Two options: the standard mileage rate usually gives a bigger deduction. You must keep a mileage log. If your car was costly to operate, actual expenses may be preferable. You must keep detailed records to claim actual expenses.

RETU	RNING C	LIENTS:	Did	you ch	ange the ca	ar driven	tor bus	siness	from las	st ye	ar?	ЦY	⊔N	If yes	, list	detai	is below	
	_	_						_								_		

O New Clients: Car make & year?	Date you started driving this car for business?
---------------------------------	---

2023 STANDARD MILEAGE RATES (*= required)	
+D	Local car tax you paid (if any)
*Business Miles driven	Parking fees & tolls (biz only)
*TOTAL Miles driven in 2023	ACTUAL EXPENSES (Percentage of biz use =%)
(include biz, commuting & leisure miles)	Gas, oil, repairs, servicing, tires, etc.

Part 16: SELF-EMPLOYED HOME OFFICE EXPENSES

To claim a home office, the area must be used **exclusively** and **regularly** as **your principal place of business**. This may include meeting space for clients or to do administrative work. The area can be either a room(s) or a portion of a room.

•	RETURNING CLIENTS: Was there a cha	nge in size of office from last	vear? □ Y □ N If \	es, provide new size below.

O New CLIENTS: What's the sq. footage of	vour office? s.f.	What's the total area of	vour home?	s.f
- Itali Calantici imato ano oquiocago or	, car cinco: cin	TTHAT O THE TOTAL ALOA OF	,	

Form 1098	Mortgage & Home Equity Interest Paid
	Rent Paid
	Property Taxes (see Form 1098)
	Insurance: Homeowners/Renters/PMI
	*Repairs/Maintenance (home office only)
	*Repairs/Maintenance (for entire home)

**Utilities: Gas/oil, propane (entire hom	<u>1e</u>)
Utilities: Electricity (entire home)	
Utilities: Water (entire home)	
Utilities: Trash/cleaning (entire home)	
Utilities: Home security (for entire hom	<u>e</u>)
Utilities: Pest control & snow removal (entire home)	

^{*}Repairs/Maintenance = deductible expenses to keep home in good shape, like painting, fixing leaks, cleaning gutters, etc. Capital Improvements = permanent upgrades add to home value, like additions, new roof, etc. These are **non-deductible**, but may be added to home's cost basis upon sale of the home.

^{**}Utilities: Exclude lawn care & landscaping services. Exclude phone & internet, please enter them in Part 13 instead.



Part 17: SELF-EMPLOYED BUSINESS EQUIPMENT (computers, furniture, phones, etc.)

These are newly purchased items **expected to last more than one year**, and must be reported differently on tax returns. If any single item purchased for business costs less than \$2,500, you don't need to list it separately. Just note the total of all items costing less than \$2,500 each. If any single item purchased costs more than \$2,500, please list each separately.

EXPENSED EQUIPMENT (individua	al business purchases <u>each</u> costing les	s than \$2,500)	
Total of ALL expensed items			
· · · · · · · · · · · · · · · · · · ·	vidual business purchases each costing		
Item Description	Date Purchased	Cost	% Business Use
			□ 100% or%
			□ 100% or%
			□ 100% or%
Part 18: SELF-EMPLOYMEN	NI COMMENIS		
Part 18: SELF-EIVIPLOTIVIEN	NI COMMENIS		
Part 16: SELF-EIVIPLOTIVIER	NI COMMENIS		
Part 16: SELF-EIMPLOTMEN	NI COMMENIS		
Part 16: SELF-EIVIPLOTIVIEN	NI COMMENIS		
Part 16: SELF-EIVIPLOTIVIEN	NI COMIMENIS		
Part 16: SELF-EIMIPLOTIMEN	NI COMINENTS		
Part 16: SELF-EIWIPLOTIVIEN	NI COMIMENTS		
Part 16: SELF-EIMIPLOTMEN	NI COMIMENTS		
PART 18: SELF-EIVIPLOTIVIEN	NI COMMENTS		
Part 18: SELF-EIMIPLOTIMEN	NI COMIMENTS		

The end. You're done! Please return to Page 1 for instructions how to upload your organizer and tax docs to ShareFile