

TaxSmart Business Services – 2022 Income Tax Organizer

Call (770)704-7777 to schedule an appointment. Please complete as much as possible prior to your appointment.

<p>Personal Information ~ Provide SS Cards & Driver's Licenses:</p> <p>Your Full Name: _____</p> <p>Occupation: _____ <input type="checkbox"/> Blind? <input type="checkbox"/> Disabled?</p> <p>Phone: _____</p> <p>Email: _____</p> <p>Spouse's Full Name: _____</p> <p>Occupation: _____ <input type="checkbox"/> Blind? <input type="checkbox"/> Disabled?</p> <p>Phone: _____</p> <p>Email: _____</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Sure: Do you want to file a joint return?</p>	<p>Dependent Information (Children, Parents, others):</p> <p style="text-align: center;">Provide SS Card & Proof of Residency for each dependent.</p> <p>Full Name – DOB – Relationship - College Student? - 2022 Income?</p> <p>1) _____</p> <p>_____</p> <p>2) _____</p> <p>_____</p> <p>3) _____</p> <p>_____</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Could anyone else claim any of your dependents?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Any Child Care costs? If "Yes", provide amounts paid, care provider name(s), EIN's, and address(es) for EACH dependent.</p>
<p>Regular Income: Please attach Forms W-2, 1099-Misc, 1099R, 1099-SSA, K-1, 1099G, etc. Provide details/amounts if missing forms.</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Wages, tips, etc. from job(s)? (W-2)</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Interest from banks, bonds, other? (1099-INT)</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Dividends? (1099-DIV)</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Did you receive any tax refunds in 2022?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Alimony Paid/Received? \$ _____</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Sell, buy or trade any assets, stocks, bonds, mutual funds, or other assets? (1099-B).</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Distributions from 401(k), IRA, Pension, Annuity, etc.? (1099-R)</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Spend, Receive, Sell, Exchange, Acquire, or Mine any Virtual Currency such as Bitcoin, Ethereum, etc?</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No Own any rental property including a vacation home?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Unemployment Income? (1099-G)</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Social Security Benefits? (1099-SSA)</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Gambling Income and Related Expenses? (W2G)</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Cancellation of Debt/Foreclosure? (1099-A or -C)</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Any small business income/loss from an S-Corp, Partnership, LLC, Sole Proprietor? (K-1, 1099-Misc, 1099-K)</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Did you sell anything online: Craigslist, eBay, FB Marketplace, etc. (1099K)?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Any other income, e.g. Uber/Lyft, Crowdfunding, other? Please explain:</p>
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(Continued on reverse)

Expenses/Deductions:

- Yes No IRA Contribution: Traditional Roth SEP Other
Self \$ _____ Spouse \$ _____
- Yes No Penalty on early withdrawal from CD? \$ _____
- Yes No Student Loan interest paid? _____

Medical Expenses:

- Yes No After-tax Health Insurance, including Medicare?
- Yes No Did anyone in your family receive health insurance from HealthCare.gov or other state run Marketplace? (Form 1095)
- Yes No Are you part of a Healthcare Sharing Ministry?
- Yes No Did you pay Long Term Care Insurance premiums?
- Yes No Any out of pocket medical expenses: Doctors, Dentist, Rx, Nursing Homes, Medical Mileage, etc.? Please list.

Taxes & Interest Expenses:

- Yes No Do you own your own home?
- Yes No Real Estate Taxes (Form 1098 or other)?
- Yes No Mortgage Interest/Points Paid (Form 1098)?
- Yes No Did you purchase a boat, airplane, RV, etc.?
- Yes No Annual Ad Valorem Taxes on car, boat, etc.?
- Yes No Other State, County, City or Local Taxes?
- Yes No Investment Interest paid? Other Interest Paid?

Gifts to Charity *Documentation required for all donations:*

- Yes No Cash/Checks/Money etc.
- Yes No Non-Cash Gifts i.e. Household items to Goodwill?
- Yes No Miles driven for charity?
- Yes No Payroll Deductions of Charity, Union Dues, other?
- Yes No Qualified Charitable Distribution from IRA.

Other Miscellaneous Items:

- Yes No Install an electric vehicle charger in your home?
- Yes No Rollover \$\$\$ from an IRA, 401(k), Annuity, etc.?
- Yes No Receive an inheritance (Sch K-1)?
- Yes No Make gifts totaling \geq \$16,000 to one person?
- Yes No Did you contribute to a 529 College Savings Plan?
- Yes No Unreimbursed Educator Expenses (K-12 only)?

Rental Property:

- Yes No First Placed in Service in 2022? If "Yes", please provide appraisal and settlement statements.
- Yes No Disposed/Stopped Renting during 2022?

Type of Rental: _____

Address: _____

Days Rented: _____ Days Vacant/Empty: _____

Personal use days (self, friends, family): _____

Average length of rental stay (in days): _____

Hours you & your spouse worked on rental: _____

Small Business or Farming*Request our 2022 Business Tax Organizer for more in-depth checklist*

Nature of Business: _____

Date Business Started: _____

Which of the following expenses did your business have in 2022?

- | | |
|--|--|
| <input type="checkbox"/> Inventory Purchases | <input type="checkbox"/> Interest paid on business loans |
| <input type="checkbox"/> Contract Labor | <input type="checkbox"/> Insurance (Not Health) |
| <input type="checkbox"/> Advertising | <input type="checkbox"/> Legal & Professional Services |
| <input type="checkbox"/> Office Supplies | <input type="checkbox"/> Office/Building Rent |
| <input type="checkbox"/> Equipment Rent | <input type="checkbox"/> Repairs/Maintenance/Cleaning |
| <input type="checkbox"/> Supplies | <input type="checkbox"/> Taxes & Licenses |
| <input type="checkbox"/> Out of Town Travel | <input type="checkbox"/> Meals & Entertainment |
| <input type="checkbox"/> Utilities (not home) | <input type="checkbox"/> Wages paid to Employees |
| <input type="checkbox"/> Telephone | <input type="checkbox"/> Commissions & Fees |
| <input type="checkbox"/> Postage | <input type="checkbox"/> Employee Benefits |
| <input type="checkbox"/> Auto/Truck Expenses | <input type="checkbox"/> Pension & Profit Sharing |
| <input type="checkbox"/> Other Expenses (list) | <input type="checkbox"/> Inventory W/D for Personal Use |

Did your business:

- Yes No Use an Automobile? Type: _____
Business miles 1/1-6/30: _____ 7/1-12/31: _____;
Personal miles: _____
- Yes No Have a home office? Must be Regular & Exclusive.
Sq Ft: _____ Sq Ft of entire home: _____
- Yes No Acquire or dispose of Tools/Equipment/Assets? *Please provide Invoice/Bill of Sale.*
- Yes No Pay any service providers, contractors, or casual labor?
 Yes No If "Yes", would you like us to issue 1099's?
- Yes No Have Inventory on hand December 31, 2022?
- Yes No Pay wages to W-2 type employees?
- Yes No Receive EIDL, PPP, SBA Loan, etc.?
- Yes No Make or receive any loans/leases/notes or payments?
- Yes No Engage in Bartering?
- Yes No Have more than one owner?
- Yes No Is this business an LLC? If "Yes" please provide LLC Articles of Organization and Operating Agreement.

Separate Business Address: _____

Method of Accounting: Cash Accrual Other/Not SureCould this be considered a Hobby? Yes No Not Sure

How many hours did you "participate" (work) in the business operations during 2022? 500+ annual hours may be needed: _____

*Celebrating
21 Years!
2002 - 2023*

Please attach additional sheets for any other information you need to provide.
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Personal Information ~ Provide SS Cards & Driver's Licenses:

Your Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Spouse's Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

1) _____

2) _____

3) _____

Yes No Could anyone else claim any of your dependents?

Yes No Any Child Care costs? If "Yes", provide amounts paid, care provider name(s), EIN's, and address(es) for EACH dependent.

Regular Income: Please attach Forms W-2, 1099-Misc, 1099R, 1099-SSA, K-1, 1099G, etc. Provide details/amounts if missing forms.

Yes No Wages, tips, etc. from job(s)? (W-2)

Yes No Interest from banks, bonds, other? (1099-INT)

Yes No Dividends? (1099-DIV)

Yes No Did you receive any tax refunds in 2022?

Yes No Alimony Paid/Received? \$ _____

Yes No Sell, buy or trade any assets, stocks, bonds, mutual funds, or other assets? (1099-B).

Yes No Distributions from 401(k), IRA, Pension, Annuity, etc.? (1099-R)

Yes No Spend, Receive, Sell, Exchange, Acquire, or Mine any Virtual Currency such as Bitcoin, Ethereum, etc?

Yes No Own any rental property including a vacation home?

Yes No Unemployment Income? (1099-G)

Yes No Social Security Benefits? (1099-SSA)

Yes No Gambling Income and Related Expenses? (W2G)

Yes No Cancellation of Debt/Foreclosure? (1099-A or -C)

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Yes No Any other income, e.g. Uber/Lyft, Crowdfunding, other? Please explain:

General Questions:

Yes No Direct Deposit your refund into your bank account? *Must attach a voided check.* Otherwise you will receive refund checks. Amounts due will NOT be drafted from your account.

Yes No Did you file 2021 tax return? **Provide Copy/PDF.**

Yes No Do you or your spouse owe any back taxes?

Please note, to avoid penalty, you must pay all taxes due by April 18th. An extension only grants more time to file, not to pay.

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Yes No Did you earn income in another state or country?

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Yes No Receive any hobby income?

Yes No Moving Expenses? (Only for active military)

Yes No Did your address change? Please attach.

Yes No At any time during 2022 did you have any financial interest or signature authority over a foreign financial account, including overseas gaming?

Yes No During 2022, did you receive a distribution from, were the grantor of, or transferor to a foreign trust?

How would you like to receive your copy of the completed tax return?

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| <input type="checkbox"/> Supplies | <input type="checkbox"/> Taxes & Licenses |
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Did your business:

- Yes No Use an Automobile? Type: _____
Business miles 1/1-6/30: _____ 7/1-12/31: _____;
Personal miles: _____
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Separate Business Address: _____

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Personal Information ~ Provide SS Cards & Driver's Licenses:

Your Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Spouse's Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

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Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

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Yes No Could anyone else claim any of your dependents?

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| <input type="checkbox"/> Office Supplies | <input type="checkbox"/> Office/Building Rent |
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| <input type="checkbox"/> Supplies | <input type="checkbox"/> Taxes & Licenses |
| <input type="checkbox"/> Out of Town Travel | <input type="checkbox"/> Meals & Entertainment |
| <input type="checkbox"/> Utilities (not home) | <input type="checkbox"/> Wages paid to Employees |
| <input type="checkbox"/> Telephone | <input type="checkbox"/> Commissions & Fees |
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Did your business:

- Yes No Use an Automobile? Type: _____
Business miles 1/1-6/30: _____ 7/1-12/31: _____;
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- Yes No Have a home office? Must be Regular & Exclusive.
Sq Ft: _____ Sq Ft of entire home: _____
- Yes No Acquire or dispose of Tools/Equipment/Assets? *Please provide Invoice/Bill of Sale.*
- Yes No Pay any service providers, contractors, or casual labor?
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- Yes No Have Inventory on hand December 31, 2022?
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- Yes No Have more than one owner?
- Yes No Is this business an LLC? If "Yes" please provide LLC Articles of Organization and Operating Agreement.

Separate Business Address: _____

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Personal Information ~ Provide SS Cards & Driver's Licenses:

Your Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Spouse's Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

1) _____

2) _____

3) _____

Yes No Could anyone else claim any of your dependents?

Yes No Any Child Care costs? If "Yes", provide amounts paid, care provider name(s), EIN's, and address(es) for EACH dependent.

Regular Income: Please attach Forms W-2, 1099-Misc, 1099R, 1099-SSA, K-1, 1099G, etc. Provide details/amounts if missing forms.

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Yes No Interest from banks, bonds, other? (1099-INT)

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Yes No Did you receive any tax refunds in 2022?

Yes No Alimony Paid/Received? \$ _____

Yes No Sell, buy or trade any assets, stocks, bonds, mutual funds, or other assets? (1099-B).

Yes No Distributions from 401(k), IRA, Pension, Annuity, etc.? (1099-R)

Yes No Spend, Receive, Sell, Exchange, Acquire, or Mine any Virtual Currency such as Bitcoin, Ethereum, etc?

Yes No Own any rental property including a vacation home?

Yes No Unemployment Income? (1099-G)

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General Questions:

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Yes No Pay any Estimated Tax Payments? Please list amounts, dates, and to whom paid (GA, IRS, etc.)

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Yes No Pay any Household Employees such as gardeners, housekeepers, nannies, etc.?

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Phone: _____
Email: _____
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Did your business:

- Yes No Use an Automobile? Type: _____
Business miles 1/1-6/30: _____ 7/1-12/31: _____;
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- Yes No Have a home office? Must be Regular & Exclusive.
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- Yes No Acquire or dispose of Tools/Equipment/Assets? *Please provide Invoice/Bill of Sale.*
- Yes No Pay any service providers, contractors, or casual labor?
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- Yes No Have more than one owner?
- Yes No Is this business an LLC? If "Yes" please provide LLC Articles of Organization and Operating Agreement.

Separate Business Address: _____

Method of Accounting: Cash Accrual Other/Not SureCould this be considered a Hobby? Yes No Not Sure

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Phone: 770-704-7777 - Email: info@taxsmart1040.com

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Call (770)704-7777 to schedule an appointment. Please complete as much as possible prior to your appointment.

Personal Information ~ Provide SS Cards & Driver's Licenses:

Your Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Spouse's Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

1) _____

2) _____

3) _____

Yes No Could anyone else claim any of your dependents?

Yes No Any Child Care costs? If "Yes", provide amounts paid, care provider name(s), EIN's, and address(es) for EACH dependent.

Regular Income: Please attach Forms W-2, 1099-Misc, 1099R, 1099-SSA, K-1, 1099G, etc. Provide details/amounts if missing forms.

Yes No Wages, tips, etc. from job(s)? (W-2)

Yes No Interest from banks, bonds, other? (1099-INT)

Yes No Dividends? (1099-DIV)

Yes No Did you receive any tax refunds in 2022?

Yes No Alimony Paid/Received? \$ _____

Yes No Sell, buy or trade any assets, stocks, bonds, mutual funds, or other assets? (1099-B).

Yes No Distributions from 401(k), IRA, Pension, Annuity, etc.? (1099-R)

Yes No Spend, Receive, Sell, Exchange, Acquire, or Mine any Virtual Currency such as Bitcoin, Ethereum, etc?

Yes No Own any rental property including a vacation home?

Yes No Unemployment Income? (1099-G)

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Yes No Any small business income/loss from an S-Corp, Partnership, LLC, Sole Proprietor? (K-1, 1099-Misc, 1099-K)

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General Questions:

Yes No Direct Deposit your refund into your bank account? *Must attach a voided check.* Otherwise you will receive refund checks. Amounts due will NOT be drafted from your account.

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Please note, to avoid penalty, you must pay all taxes due by April 18th. An extension only grants more time to file, not to pay.

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How would you like to receive your copy of the completed tax return?

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Other Special Situations: May require detailed documentation

Yes No Pay any Estimated Tax Payments? Please list amounts, dates, and to whom paid (GA, IRS, etc.)

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Yes No Did your marital status change during 2022?

Yes No Did you earn income in another state or country?

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Yes No Pay any Household Employees such as gardeners, housekeepers, nannies, etc.?

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Expenses/Deductions:

- Yes No IRA Contribution: Traditional Roth SEP Other
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Address: _____

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- Yes No Pay any service providers, contractors, or casual labor?
 Yes No If "Yes", would you like us to issue 1099's?
- Yes No Have Inventory on hand December 31, 2022?
- Yes No Pay wages to W-2 type employees?
- Yes No Receive EIDL, PPP, SBA Loan, etc.?
- Yes No Make or receive any loans/leases/notes or payments?
- Yes No Engage in Bartering?
- Yes No Have more than one owner?
- Yes No Is this business an LLC? If "Yes" please provide LLC Articles of Organization and Operating Agreement.

Separate Business Address: _____

Method of Accounting: Cash Accrual Other/Not SureCould this be considered a Hobby? Yes No Not Sure

How many hours did you "participate" (work) in the business operations during 2022? 500+ annual hours may be needed: _____

*Celebrating
21 Years!
2002 - 2023*

Please attach additional sheets for any other information you need to provide.
TaxSmart Business Services - (125 Barrett Road) PO Box 280, Holly Springs, GA, 30142

Phone: 770-704-7777 - Email: info@taxsmart1040.com

TaxSmart Business Services – 2022 Income Tax Organizer

Call (770)704-7777 to schedule an appointment. Please complete as much as possible prior to your appointment.

Personal Information ~ Provide SS Cards & Driver's Licenses:

Your Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Spouse's Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

1) _____

2) _____

3) _____

Yes No Could anyone else claim any of your dependents?

Yes No Any Child Care costs? If "Yes", provide amounts paid, care provider name(s), EIN's, and address(es) for EACH dependent.

Regular Income: Please attach Forms W-2, 1099-Misc, 1099R, 1099-SSA, K-1, 1099G, etc. Provide details/amounts if missing forms.

Yes No Wages, tips, etc. from job(s)? (W-2)

Yes No Interest from banks, bonds, other? (1099-INT)

Yes No Dividends? (1099-DIV)

Yes No Did you receive any tax refunds in 2022?

Yes No Alimony Paid/Received? \$ _____

Yes No Sell, buy or trade any assets, stocks, bonds, mutual funds, or other assets? (1099-B).

Yes No Distributions from 401(k), IRA, Pension, Annuity, etc.? (1099-R)

Yes No Spend, Receive, Sell, Exchange, Acquire, or Mine any Virtual Currency such as Bitcoin, Ethereum, etc?

Yes No Own any rental property including a vacation home?

Yes No Unemployment Income? (1099-G)

Yes No Social Security Benefits? (1099-SSA)

Yes No Gambling Income and Related Expenses? (W2G)

Yes No Cancellation of Debt/Foreclosure? (1099-A or -C)

Yes No Any small business income/loss from an S-Corp, Partnership, LLC, Sole Proprietor? (K-1, 1099-Misc, 1099-K)

Yes No Did you sell anything online: Craigslist, eBay, FB Marketplace, etc. (1099K)?

Yes No Any other income, e.g. Uber/Lyft, Crowdfunding, other? Please explain:

General Questions:

Yes No Direct Deposit your refund into your bank account? *Must attach a voided check.* Otherwise you will receive refund checks. Amounts due will NOT be drafted from your account.

Yes No Did you file 2021 tax return? **Provide Copy/PDF.**

Yes No Do you or your spouse owe any back taxes?

Please note, to avoid penalty, you must pay all taxes due by April 18th. An extension only grants more time to file, not to pay.

Other Special Situations: May require detailed documentation

Yes No Pay any Estimated Tax Payments? Please list amounts, dates, and to whom paid (GA, IRS, etc.)

Yes No Any births or deaths in your household? Did any children cease to be your dependents in 2022?

Yes No Did your marital status change during 2022?

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Yes No Moving Expenses? (Only for active military)

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Yes No Do you have a Health Savings Account? (1099-SA)

Yes No Pay any Household Employees such as gardeners, housekeepers, nannies, etc.?

Yes No Do you expect a substantial change in your income or deductions next year (2023)? Please attach explanation:

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Expenses/Deductions:

- Yes No IRA Contribution: Traditional Roth SEP Other
Self \$ _____ Spouse \$ _____
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- Yes No Install an electric vehicle charger in your home?
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- Yes No Unreimbursed Educator Expenses (K-12 only)?

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- Yes No First Placed in Service in 2022? If "Yes", please provide appraisal and settlement statements.
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Type of Rental: _____

Address: _____

Days Rented: _____ Days Vacant/Empty: _____

Personal use days (self, friends, family): _____

Average length of rental stay (in days): _____

Hours you & your spouse worked on rental: _____

Small Business or Farming*Request our 2022 Business Tax Organizer for more in-depth checklist*

Nature of Business: _____

Date Business Started: _____

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- | | |
|--|--|
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| <input type="checkbox"/> Contract Labor | <input type="checkbox"/> Insurance (Not Health) |
| <input type="checkbox"/> Advertising | <input type="checkbox"/> Legal & Professional Services |
| <input type="checkbox"/> Office Supplies | <input type="checkbox"/> Office/Building Rent |
| <input type="checkbox"/> Equipment Rent | <input type="checkbox"/> Repairs/Maintenance/Cleaning |
| <input type="checkbox"/> Supplies | <input type="checkbox"/> Taxes & Licenses |
| <input type="checkbox"/> Out of Town Travel | <input type="checkbox"/> Meals & Entertainment |
| <input type="checkbox"/> Utilities (not home) | <input type="checkbox"/> Wages paid to Employees |
| <input type="checkbox"/> Telephone | <input type="checkbox"/> Commissions & Fees |
| <input type="checkbox"/> Postage | <input type="checkbox"/> Employee Benefits |
| <input type="checkbox"/> Auto/Truck Expenses | <input type="checkbox"/> Pension & Profit Sharing |
| <input type="checkbox"/> Other Expenses (list) | <input type="checkbox"/> Inventory W/D for Personal Use |

Did your business:

- Yes No Use an Automobile? Type: _____
Business miles 1/1-6/30: _____ 7/1-12/31: _____;
Personal miles: _____
- Yes No Have a home office? Must be Regular & Exclusive.
Sq Ft: _____ Sq Ft of entire home: _____
- Yes No Acquire or dispose of Tools/Equipment/Assets? *Please provide Invoice/Bill of Sale.*
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<p>Personal Information ~ Provide SS Cards & Driver's Licenses:</p> <p>Your Full Name: _____</p> <p>Occupation: _____ <input type="checkbox"/> Blind? <input type="checkbox"/> Disabled?</p> <p>Phone: _____</p> <p>Email: _____</p> <p>Spouse's Full Name: _____</p> <p>Occupation: _____ <input type="checkbox"/> Blind? <input type="checkbox"/> Disabled?</p> <p>Phone: _____</p> <p>Email: _____</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Sure: Do you want to file a joint return?</p>	<p>Dependent Information (Children, Parents, others):</p> <p style="text-align: center;">Provide SS Card & Proof of Residency for each dependent.</p> <p>Full Name – DOB – Relationship - College Student? - 2022 Income?</p> <p>1) _____</p> <p>_____</p> <p>2) _____</p> <p>_____</p> <p>3) _____</p> <p>_____</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Could anyone else claim any of your dependents?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Any Child Care costs? If "Yes", provide amounts paid, care provider name(s), EIN's, and address(es) for EACH dependent.</p>
<p>Regular Income: Please attach Forms W-2, 1099-Misc, 1099R, 1099-SSA, K-1, 1099G, etc. Provide details/amounts if missing forms.</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Wages, tips, etc. from job(s)? (W-2)</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Interest from banks, bonds, other? (1099-INT)</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Dividends? (1099-DIV)</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Did you receive any tax refunds in 2022?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Alimony Paid/Received? \$ _____</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Sell, buy or trade any assets, stocks, bonds, mutual funds, or other assets? (1099-B).</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Distributions from 401(k), IRA, Pension, Annuity, etc.? (1099-R)</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Spend, Receive, Sell, Exchange, Acquire, or Mine any Virtual Currency such as Bitcoin, Ethereum, etc?</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No Own any rental property including a vacation home?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Unemployment Income? (1099-G)</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Social Security Benefits? (1099-SSA)</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Gambling Income and Related Expenses? (W2G)</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Cancellation of Debt/Foreclosure? (1099-A or -C)</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Any small business income/loss from an S-Corp, Partnership, LLC, Sole Proprietor? (K-1, 1099-Misc, 1099-K)</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Did you sell anything online: Craigslist, eBay, FB Marketplace, etc. (1099K)?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Any other income, e.g. Uber/Lyft, Crowdfunding, other? Please explain:</p>
<p>General Questions:</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Direct Deposit your refund into your bank account? <i>Must attach a voided check.</i> Otherwise you will receive refund checks. Amounts due will NOT be drafted from your account.</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Did you file 2021 tax return? Provide Copy/PDF.</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Do you or your spouse owe any back taxes?</p> <p>Please note, to avoid penalty, you must pay all taxes due by April 18th. An extension only grants more time to file, not to pay.</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No Did your address change? Please attach.</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No At any time during 2022 did you have any financial interest or signature authority over a foreign financial account, including overseas gaming?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No During 2022, did you receive a distribution from, were the grantor of, or transferor to a foreign trust?</p> <p>How would you like to receive your copy of the completed tax return?</p> <p><input type="checkbox"/> Paper Copy <input type="checkbox"/> Digital/PDF Copy</p>
<p>Other Special Situations: May require detailed documentation</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Pay any Estimated Tax Payments? Please list amounts, dates, and to whom paid (GA, IRS, etc.)</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Any births or deaths in your household? Did any children cease to be your dependents in 2022?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Did your marital status change during 2022?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Did you earn income in another state or country?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Did you buy, sell or refinance (including loan modification) property in 2022? If yes, attach closing statements.</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No During 2022, were there any changes to federal or state tax returns filed in prior years? Please attach notices.</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Did you suffer a casualty or loss in 2022 in a presidentially declared disaster area? www.fema.gov/disasters</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Receive any hobby income?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Moving Expenses? (Only for active military)</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No College expenses for self, spouse or dependent?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Have any Unreimbursed Partnership Expenses in 2022?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Have an IRS IP-PIN for self, spouse, or dependent?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Did you pay any foreign taxes in 2022?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Did you adopt a child in 2022?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Did your child (under age 24) have any investment income? Please attach 1099's and/or tax return.</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No An Armed Forces Reservist, Qualified Performing Artist, or Government Fee Basis Official?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Do you have a Health Savings Account? (1099-SA)</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Pay any Household Employees such as gardeners, housekeepers, nannies, etc.?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Do you expect a substantial change in your income or deductions next year (2023)? Please attach explanation:</p>

(Continued on reverse)

Expenses/Deductions:

- Yes No IRA Contribution: Traditional Roth SEP Other
Self \$ _____ Spouse \$ _____
- Yes No Penalty on early withdrawal from CD? \$ _____
- Yes No Student Loan interest paid? _____

Medical Expenses:

- Yes No After-tax Health Insurance, including Medicare?
- Yes No Did anyone in your family receive health insurance from HealthCare.gov or other state run Marketplace? (Form 1095)
- Yes No Are you part of a Healthcare Sharing Ministry?
- Yes No Did you pay Long Term Care Insurance premiums?
- Yes No Any out of pocket medical expenses: Doctors, Dentist, Rx, Nursing Homes, Medical Mileage, etc.? Please list.

Taxes & Interest Expenses:

- Yes No Do you own your own home?
- Yes No Real Estate Taxes (Form 1098 or other)?
- Yes No Mortgage Interest/Points Paid (Form 1098)?
- Yes No Did you purchase a boat, airplane, RV, etc.?
- Yes No Annual Ad Valorem Taxes on car, boat, etc.?
- Yes No Other State, County, City or Local Taxes?
- Yes No Investment Interest paid? Other Interest Paid?

Gifts to Charity *Documentation required for all donations:*

- Yes No Cash/Checks/Money etc.
- Yes No Non-Cash Gifts i.e. Household items to Goodwill?
- Yes No Miles driven for charity?
- Yes No Payroll Deductions of Charity, Union Dues, other?
- Yes No Qualified Charitable Distribution from IRA.

Other Miscellaneous Items:

- Yes No Install an electric vehicle charger in your home?
- Yes No Rollover \$\$\$ from an IRA, 401(k), Annuity, etc.?
- Yes No Receive an inheritance (Sch K-1)?
- Yes No Make gifts totaling ≥\$16,000 to one person?
- Yes No Did you contribute to a 529 College Savings Plan?
- Yes No Unreimbursed Educator Expenses (K-12 only)?

Rental Property:

- Yes No First Placed in Service in 2022? If "Yes", please provide appraisal and settlement statements.
- Yes No Disposed/Stopped Renting during 2022?

Type of Rental: _____

Address: _____

Days Rented: _____ Days Vacant/Empty: _____

Personal use days (self, friends, family): _____

Average length of rental stay (in days): _____

Hours you & your spouse worked on rental: _____

Small Business or Farming*Request our 2022 Business Tax Organizer for more in-depth checklist*

Nature of Business: _____

Date Business Started: _____

Which of the following expenses did your business have in 2022?

- | | |
|--|--|
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| <input type="checkbox"/> Office Supplies | <input type="checkbox"/> Office/Building Rent |
| <input type="checkbox"/> Equipment Rent | <input type="checkbox"/> Repairs/Maintenance/Cleaning |
| <input type="checkbox"/> Supplies | <input type="checkbox"/> Taxes & Licenses |
| <input type="checkbox"/> Out of Town Travel | <input type="checkbox"/> Meals & Entertainment |
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| <input type="checkbox"/> Other Expenses (list) | <input type="checkbox"/> Inventory W/D for Personal Use |

Did your business:

- Yes No Use an Automobile? Type: _____
Business miles 1/1–6/30: _____ 7/1–12/31: _____;
Personal miles: _____
- Yes No Have a home office? Must be Regular & Exclusive.
Sq Ft: _____ Sq Ft of entire home: _____
- Yes No Acquire or dispose of Tools/Equipment/Assets? *Please provide Invoice/Bill of Sale.*
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Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

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Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

1) _____

2) _____

3) _____

Yes No Could anyone else claim any of your dependents?

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Days Rented: _____ Days Vacant/Empty: _____

Personal use days (self, friends, family): _____

Average length of rental stay (in days): _____

Hours you & your spouse worked on rental: _____

Small Business or Farming

Request our 2022 Business Tax Organizer for more in-depth checklist

Nature of Business: _____

Date Business Started: _____

Which of the following expenses did your business have in 2022?

Inventory Purchases Interest paid on business loans

Contract Labor Insurance (Not Health)

Advertising Legal & Professional Services

Office Supplies Office/Building Rent

Equipment Rent Repairs/Maintenance/Cleaning

Supplies Taxes & Licenses

Out of Town Travel Meals & Entertainment

Utilities (not home) Wages paid to Employees

Telephone Commissions & Fees

Postage Employee Benefits

Auto/Truck Expenses Pension & Profit Sharing

Other Expenses (list) Inventory W/D for Personal Use

Did your business:

Yes No Use an Automobile? Type: _____
Business miles 1/1-6/30: _____ 7/1-12/31: _____;

Personal miles: _____

Yes No Have a home office? Must be Regular & Exclusive.

Sq Ft: _____ Sq Ft of entire home: _____

Yes No Acquire or dispose of Tools/Equipment/Assets? *Please provide Invoice/Bill of Sale.*

Yes No Pay any service providers, contractors, or casual labor?

Yes No If "Yes", would you like us to issue 1099's?

Yes No Have Inventory on hand December 31, 2022?

Yes No Pay wages to W-2 type employees?

Yes No Receive EIDL, PPP, SBA Loan, etc.?

Yes No Make or receive any loans/leases/notes or payments?

Yes No Engage in Bartering?

Yes No Have more than one owner?

Yes No Is this business an LLC? If "Yes" please provide LLC Articles of Organization and Operating Agreement.

Separate Business Address: _____

Method of Accounting: Cash Accrual Other/Not Sure

Could this be considered a Hobby? Yes No Not Sure

How many hours did you "participate" (work) in the business operations during 2022? 500+ annual hours may be needed: _____

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Phone: 770-704-7777 - Email: info@taxsmart1040.com



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Call (770)704-7777 to schedule an appointment. Please complete as much as possible prior to your appointment.

Personal Information ~ Provide SS Cards & Driver's Licenses:

Your Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Spouse's Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

1) _____

2) _____

3) _____

Yes No Could anyone else claim any of your dependents?

Yes No Any Child Care costs? If "Yes", provide amounts paid, care provider name(s), EIN's, and address(es) for EACH dependent.

Regular Income: Please attach Forms W-2, 1099-Misc, 1099R, 1099-SSA, K-1, 1099G, etc. Provide details/amounts if missing forms.

Yes No Wages, tips, etc. from job(s)? (W-2)

Yes No Interest from banks, bonds, other? (1099-INT)

Yes No Dividends? (1099-DIV)

Yes No Did you receive any tax refunds in 2022?

Yes No Alimony Paid/Received? \$ _____

Yes No Sell, buy or trade any assets, stocks, bonds, mutual funds, or other assets? (1099-B).

Yes No Distributions from 401(k), IRA, Pension, Annuity, etc.? (1099-R)

Yes No Spend, Receive, Sell, Exchange, Acquire, or Mine any Virtual Currency such as Bitcoin, Ethereum, etc?

Yes No Own any rental property including a vacation home?

Yes No Unemployment Income? (1099-G)

Yes No Social Security Benefits? (1099-SSA)

Yes No Gambling Income and Related Expenses? (W2G)

Yes No Cancellation of Debt/Foreclosure? (1099-A or -C)

Yes No Any small business income/loss from an S-Corp, Partnership, LLC, Sole Proprietor? (K-1, 1099-Misc, 1099-K)

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General Questions:

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Please note, to avoid penalty, you must pay all taxes due by April 18th. An extension only grants more time to file, not to pay.

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Yes No Did your child (under age 24) have any investment income? Please attach 1099's and/or tax return.

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Yes No Do you have a Health Savings Account? (1099-SA)

Yes No Pay any Household Employees such as gardeners, housekeepers, nannies, etc.?

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Expenses/Deductions:

- Yes No IRA Contribution: Traditional Roth SEP Other
Self \$ _____ Spouse \$ _____
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- Yes No After-tax Health Insurance, including Medicare?
- Yes No Did anyone in your family receive health insurance from HealthCare.gov or other state run Marketplace? (Form 1095)
- Yes No Are you part of a Healthcare Sharing Ministry?
- Yes No Did you pay Long Term Care Insurance premiums?
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| <input type="checkbox"/> Supplies | <input type="checkbox"/> Taxes & Licenses |
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Taxes & Interest Expenses:

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Sq Ft: _____ Sq Ft of entire home: _____
- Yes No Acquire or dispose of Tools/Equipment/Assets? *Please provide Invoice/Bill of Sale.*
- Yes No Pay any service providers, contractors, or casual labor?
 Yes No If "Yes", would you like us to issue 1099's?
- Yes No Have Inventory on hand December 31, 2022?
- Yes No Pay wages to W-2 type employees?
- Yes No Receive EIDL, PPP, SBA Loan, etc.?
- Yes No Make or receive any loans/leases/notes or payments?
- Yes No Engage in Bartering?
- Yes No Have more than one owner?
- Yes No Is this business an LLC? If "Yes" please provide LLC Articles of Organization and Operating Agreement.

Separate Business Address: _____

Method of Accounting: Cash Accrual Other/Not SureCould this be considered a Hobby? Yes No Not Sure

How many hours did you "participate" (work) in the business operations during 2022? 500+ annual hours may be needed: _____

*Celebrating
21 Years!
2002 - 2023*

Please attach additional sheets for any other information you need to provide.
TaxSmart Business Services - (125 Barrett Road) PO Box 280, Holly Springs, GA, 30142

Phone: 770-704-7777 - Email: info@taxsmart1040.com

TaxSmart Business Services – 2022 Income Tax Organizer

Call (770)704-7777 to schedule an appointment. Please complete as much as possible prior to your appointment.

Personal Information ~ Provide SS Cards & Driver's Licenses:

Your Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Spouse's Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

1) _____

2) _____

3) _____

Yes No Could anyone else claim any of your dependents?

Yes No Any Child Care costs? If "Yes", provide amounts paid, care provider name(s), EIN's, and address(es) for EACH dependent.

Regular Income: Please attach Forms W-2, 1099-Misc, 1099R, 1099-SSA, K-1, 1099G, etc. Provide details/amounts if missing forms.

Yes No Wages, tips, etc. from job(s)? (W-2)

Yes No Interest from banks, bonds, other? (1099-INT)

Yes No Dividends? (1099-DIV)

Yes No Did you receive any tax refunds in 2022?

Yes No Alimony Paid/Received? \$ _____

Yes No Sell, buy or trade any assets, stocks, bonds, mutual funds, or other assets? (1099-B).

Yes No Distributions from 401(k), IRA, Pension, Annuity, etc.? (1099-R)

Yes No Spend, Receive, Sell, Exchange, Acquire, or Mine any Virtual Currency such as Bitcoin, Ethereum, etc?

Yes No Own any rental property including a vacation home?

Yes No Unemployment Income? (1099-G)

Yes No Social Security Benefits? (1099-SSA)

Yes No Gambling Income and Related Expenses? (W2G)

Yes No Cancellation of Debt/Foreclosure? (1099-A or -C)

Yes No Any small business income/loss from an S-Corp, Partnership, LLC, Sole Proprietor? (K-1, 1099-Misc, 1099-K)

Yes No Did you sell anything online: Craigslist, eBay, FB Marketplace, etc. (1099K)?

Yes No Any other income, e.g. Uber/Lyft, Crowdfunding, other? Please explain:

General Questions:

Yes No Direct Deposit your refund into your bank account? *Must attach a voided check.* Otherwise you will receive refund checks. Amounts due will NOT be drafted from your account.

Yes No Did you file 2021 tax return? **Provide Copy/PDF.**

Yes No Do you or your spouse owe any back taxes?

Please note, to avoid penalty, you must pay all taxes due by April 18th. An extension only grants more time to file, not to pay.

Other Special Situations: May require detailed documentation

Yes No Pay any Estimated Tax Payments? Please list amounts, dates, and to whom paid (GA, IRS, etc.)

Yes No Any births or deaths in your household? Did any children cease to be your dependents in 2022?

Yes No Did your marital status change during 2022?

Yes No Did you earn income in another state or country?

Yes No Did you buy, sell or refinance (including loan modification) property in 2022? If yes, attach closing statements.

Yes No During 2022, were there any changes to federal or state tax returns filed in prior years? Please attach notices.

Yes No Did you suffer a casualty or loss in 2022 in a presidentially declared disaster area? www.fema.gov/disasters

Yes No Receive any hobby income?

Yes No Moving Expenses? (Only for active military)

Yes No Did your address change? Please attach.

Yes No At any time during 2022 did you have any financial interest or signature authority over a foreign financial account, including overseas gaming?

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How would you like to receive your copy of the completed tax return?

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Yes No College expenses for self, spouse or dependent?

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Yes No Did you adopt a child in 2022?

Yes No Did your child (under age 24) have any investment income? Please attach 1099's and/or tax return.

Yes No An Armed Forces Reservist, Qualified Performing Artist, or Government Fee Basis Official?

Yes No Do you have a Health Savings Account? (1099-SA)

Yes No Pay any Household Employees such as gardeners, housekeepers, nannies, etc.?

Yes No Do you expect a substantial change in your income or deductions next year (2023)? Please attach explanation:

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Expenses/Deductions:

- Yes No IRA Contribution: Traditional Roth SEP Other
Self \$ _____ Spouse \$ _____
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Medical Expenses:

- Yes No After-tax Health Insurance, including Medicare?
- Yes No Did anyone in your family receive health insurance from HealthCare.gov or other state run Marketplace? (Form 1095)
- Yes No Are you part of a Healthcare Sharing Ministry?
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Taxes & Interest Expenses:

- Yes No Do you own your own home?
- Yes No Real Estate Taxes (Form 1098 or other)?
- Yes No Mortgage Interest/Points Paid (Form 1098)?
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Gifts to Charity *Documentation required for all donations:*

- Yes No Cash/Checks/Money etc.
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- Yes No Install an electric vehicle charger in your home?
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Type of Rental: _____

Address: _____

Days Rented: _____ Days Vacant/Empty: _____

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Personal Information ~ Provide SS Cards & Driver's Licenses:

Your Full Name: _____
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 Phone: _____
 Email: _____
 Spouse's Full Name: _____
 Occupation: _____ Blind? Disabled?
 Phone: _____
 Email: _____
 Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

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| <input type="checkbox"/> Equipment Rent | <input type="checkbox"/> Repairs/Maintenance/Cleaning |
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| <input type="checkbox"/> Out of Town Travel | <input type="checkbox"/> Meals & Entertainment |
| <input type="checkbox"/> Utilities (not home) | <input type="checkbox"/> Wages paid to Employees |
| <input type="checkbox"/> Telephone | <input type="checkbox"/> Commissions & Fees |
| <input type="checkbox"/> Postage | <input type="checkbox"/> Employee Benefits |
| <input type="checkbox"/> Auto/Truck Expenses | <input type="checkbox"/> Pension & Profit Sharing |
| <input type="checkbox"/> Other Expenses (list) | <input type="checkbox"/> Inventory W/D for Personal Use |

Did your business:

- Yes No Use an Automobile? Type: _____
Business miles 1/1-6/30: _____ 7/1-12/31: _____;
Personal miles: _____
- Yes No Have a home office? Must be Regular & Exclusive.
Sq Ft: _____ Sq Ft of entire home: _____
- Yes No Acquire or dispose of Tools/Equipment/Assets? *Please provide Invoice/Bill of Sale.*
- Yes No Pay any service providers, contractors, or casual labor?
 Yes No If "Yes", would you like us to issue 1099's?
- Yes No Have Inventory on hand December 31, 2022?
- Yes No Pay wages to W-2 type employees?
- Yes No Receive EIDL, PPP, SBA Loan, etc.?
- Yes No Make or receive any loans/leases/notes or payments?
- Yes No Engage in Bartering?
- Yes No Have more than one owner?
- Yes No Is this business an LLC? If "Yes" please provide LLC Articles of Organization and Operating Agreement.

Separate Business Address: _____

Method of Accounting: Cash Accrual Other/Not SureCould this be considered a Hobby? Yes No Not Sure

How many hours did you "participate" (work) in the business operations during 2022? 500+ annual hours may be needed: _____

*Celebrating
21 Years!
2002 - 2023*

Please attach additional sheets for any other information you need to provide.
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TaxSmart Business Services – 2022 Income Tax Organizer

Call (770)704-7777 to schedule an appointment. Please complete as much as possible prior to your appointment.

<p>Personal Information ~ Provide SS Cards & Driver's Licenses:</p> <p>Your Full Name: _____</p> <p>Occupation: _____ <input type="checkbox"/> Blind? <input type="checkbox"/> Disabled?</p> <p>Phone: _____</p> <p>Email: _____</p> <p>Spouse's Full Name: _____</p> <p>Occupation: _____ <input type="checkbox"/> Blind? <input type="checkbox"/> Disabled?</p> <p>Phone: _____</p> <p>Email: _____</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Sure: Do you want to file a joint return?</p>	<p>Dependent Information (Children, Parents, others):</p> <p style="text-align: center;">Provide SS Card & Proof of Residency for each dependent.</p> <p>Full Name – DOB – Relationship - College Student? - 2022 Income?</p> <p>1) _____</p> <p>2) _____</p> <p>3) _____</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Could anyone else claim any of your dependents?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Any Child Care costs? If "Yes", provide amounts paid, care provider name(s), EIN's, and address(es) for EACH dependent.</p>
<p>Regular Income: Please attach Forms W-2, 1099-Misc, 1099R, 1099-SSA, K-1, 1099G, etc. Provide details/amounts if missing forms.</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Wages, tips, etc. from job(s)? (W-2)</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Interest from banks, bonds, other? (1099-INT)</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Dividends? (1099-DIV)</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Did you receive any tax refunds in 2022?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Alimony Paid/Received? \$ _____</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Sell, buy or trade any assets, stocks, bonds, mutual funds, or other assets? (1099-B).</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Distributions from 401(k), IRA, Pension, Annuity, etc.? (1099-R)</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Spend, Receive, Sell, Exchange, Acquire, or Mine any Virtual Currency such as Bitcoin, Ethereum, etc?</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No Own any rental property including a vacation home?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Unemployment Income? (1099-G)</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Social Security Benefits? (1099-SSA)</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Gambling Income and Related Expenses? (W2G)</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Cancellation of Debt/Foreclosure? (1099-A or -C)</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Any small business income/loss from an S-Corp, Partnership, LLC, Sole Proprietor? (K-1, 1099-Misc, 1099-K)</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Did you sell anything online: Craigslist, eBay, FB Marketplace, etc. (1099K)?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Any other income, e.g. Uber/Lyft, Crowdfunding, other? Please explain:</p>
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(Continued on reverse)

Expenses/Deductions:

Yes No IRA Contribution: Traditional Roth SEP Other
Self \$ _____ Spouse \$ _____

Yes No Penalty on early withdrawal from CD? \$ _____

Yes No Student Loan interest paid? _____

Medical Expenses:

Yes No After-tax Health Insurance, including Medicare?

Yes No Did anyone in your family receive health insurance from HealthCare.gov or other state run Marketplace? (Form 1095)

Yes No Are you part of a Healthcare Sharing Ministry?

Yes No Did you pay Long Term Care Insurance premiums?

Yes No Any out of pocket medical expenses: Doctors, Dentist, Rx, Nursing Homes, Medical Mileage, etc.? Please list.

Taxes & Interest Expenses:

Yes No Do you own your own home?

Yes No Real Estate Taxes (Form 1098 or other)?

Yes No Mortgage Interest/Points Paid (Form 1098)?

Yes No Did you purchase a boat, airplane, RV, etc.?

Yes No Annual Ad Valorem Taxes on car, boat, etc.?

Yes No Other State, County, City or Local Taxes?

Yes No Investment Interest paid? Other Interest Paid?

Gifts to Charity *Documentation required for all donations:*

Yes No Cash/Checks/Money etc.

Yes No Non-Cash Gifts i.e. Household items to Goodwill?

Yes No Miles driven for charity?

Yes No Payroll Deductions of Charity, Union Dues, other?

Yes No Qualified Charitable Distribution from IRA.

Other Miscellaneous Items:

Yes No Install an electric vehicle charger in your home?

Yes No Rollover \$\$\$ from an IRA, 401(k), Annuity, etc.?

Yes No Receive an inheritance (Sch K-1)?

Yes No Make gifts totaling \geq \$16,000 to one person?

Yes No Did you contribute to a 529 College Savings Plan?

Yes No Unreimbursed Educator Expenses (K-12 only)?

Rental Property:

Yes No First Placed in Service in 2022? If "Yes", please provide appraisal and settlement statements.

Yes No Disposed/Stopped Renting during 2022?

Type of Rental: _____

Address: _____

Days Rented: _____ Days Vacant/Empty: _____

Personal use days (self, friends, family): _____

Average length of rental stay (in days): _____

Hours you & your spouse worked on rental: _____

Small Business or Farming

Request our 2022 Business Tax Organizer for more in-depth checklist

Nature of Business: _____

Date Business Started: _____

Which of the following expenses did your business have in 2022?

Inventory Purchases Interest paid on business loans

Contract Labor Insurance (Not Health)

Advertising Legal & Professional Services

Office Supplies Office/Building Rent

Equipment Rent Repairs/Maintenance/Cleaning

Supplies Taxes & Licenses

Out of Town Travel Meals & Entertainment

Utilities (not home) Wages paid to Employees

Telephone Commissions & Fees

Postage Employee Benefits

Auto/Truck Expenses Pension & Profit Sharing

Other Expenses (list) Inventory W/D for Personal Use

Did your business:

Yes No Use an Automobile? Type: _____
Business miles 1/1-6/30: _____ 7/1-12/31: _____;

Personal miles: _____

Yes No Have a home office? Must be Regular & Exclusive.

Sq Ft: _____ Sq Ft of entire home: _____

Yes No Acquire or dispose of Tools/Equipment/Assets? *Please provide Invoice/Bill of Sale.*

Yes No Pay any service providers, contractors, or casual labor?

Yes No If "Yes", would you like us to issue 1099's?

Yes No Have Inventory on hand December 31, 2022?

Yes No Pay wages to W-2 type employees?

Yes No Receive EIDL, PPP, SBA Loan, etc.?

Yes No Make or receive any loans/leases/notes or payments?

Yes No Engage in Bartering?

Yes No Have more than one owner?

Yes No Is this business an LLC? If "Yes" please provide LLC Articles of Organization and Operating Agreement.

Separate Business Address: _____

Method of Accounting: Cash Accrual Other/Not Sure

Could this be considered a Hobby? Yes No Not Sure

How many hours did you "participate" (work) in the business operations during 2022? 500+ annual hours may be needed: _____

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Phone: 770-704-7777 - Email: info@taxsmart1040.com



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Call (770)704-7777 to schedule an appointment. Please complete as much as possible prior to your appointment.

Personal Information ~ Provide SS Cards & Driver's Licenses:

Your Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Spouse's Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

1) _____

2) _____

3) _____

Yes No Could anyone else claim any of your dependents?

Yes No Any Child Care costs? If "Yes", provide amounts paid, care provider name(s), EIN's, and address(es) for EACH dependent.

Regular Income: Please attach Forms W-2, 1099-Misc, 1099R, 1099-SSA, K-1, 1099G, etc. Provide details/amounts if missing forms.

Yes No Wages, tips, etc. from job(s)? (W-2)

Yes No Interest from banks, bonds, other? (1099-INT)

Yes No Dividends? (1099-DIV)

Yes No Did you receive any tax refunds in 2022?

Yes No Alimony Paid/Received? \$ _____

Yes No Sell, buy or trade any assets, stocks, bonds, mutual funds, or other assets? (1099-B).

Yes No Distributions from 401(k), IRA, Pension, Annuity, etc.? (1099-R)

Yes No Spend, Receive, Sell, Exchange, Acquire, or Mine any Virtual Currency such as Bitcoin, Ethereum, etc?

Yes No Own any rental property including a vacation home?

Yes No Unemployment Income? (1099-G)

Yes No Social Security Benefits? (1099-SSA)

Yes No Gambling Income and Related Expenses? (W2G)

Yes No Cancellation of Debt/Foreclosure? (1099-A or -C)

Yes No Any small business income/loss from an S-Corp, Partnership, LLC, Sole Proprietor? (K-1, 1099-Misc, 1099-K)

Yes No Did you sell anything online: Craigslist, eBay, FB Marketplace, etc. (1099K)?

Yes No Any other income, e.g. Uber/Lyft, Crowdfunding, other? Please explain:

General Questions:

Yes No Direct Deposit your refund into your bank account? *Must attach a voided check.* Otherwise you will receive refund checks. Amounts due will NOT be drafted from your account.

Yes No Did you file 2021 tax return? **Provide Copy/PDF.**

Yes No Do you or your spouse owe any back taxes?

Please note, to avoid penalty, you must pay all taxes due by April 18th. An extension only grants more time to file, not to pay.

Other Special Situations: May require detailed documentation

Yes No Pay any Estimated Tax Payments? Please list amounts, dates, and to whom paid (GA, IRS, etc.)

Yes No Any births or deaths in your household? Did any children cease to be your dependents in 2022?

Yes No Did your marital status change during 2022?

Yes No Did you earn income in another state or country?

Yes No Did you buy, sell or refinance (including loan modification) property in 2022? If yes, attach closing statements.

Yes No During 2022, were there any changes to federal or state tax returns filed in prior years? Please attach notices.

Yes No Did you suffer a casualty or loss in 2022 in a presidentially declared disaster area? www.fema.gov/disasters

Yes No Receive any hobby income?

Yes No Moving Expenses? (Only for active military)

Yes No Did your address change? Please attach.

Yes No At any time during 2022 did you have any financial interest or signature authority over a foreign financial account, including overseas gaming?

Yes No During 2022, did you receive a distribution from, were the grantor of, or transferor to a foreign trust?

How would you like to receive your copy of the completed tax return?

Paper Copy Digital/PDF Copy

Yes No College expenses for self, spouse or dependent?

Yes No Have any Unreimbursed Partnership Expenses in 2022?

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Yes No Did you adopt a child in 2022?

Yes No Did your child (under age 24) have any investment income? Please attach 1099's and/or tax return.

Yes No An Armed Forces Reservist, Qualified Performing Artist, or Government Fee Basis Official?

Yes No Do you have a Health Savings Account? (1099-SA)

Yes No Pay any Household Employees such as gardeners, housekeepers, nannies, etc.?

Yes No Do you expect a substantial change in your income or deductions next year (2023)? Please attach explanation:

(Continued on reverse)

Expenses/Deductions:

- Yes No IRA Contribution: Traditional Roth SEP Other
Self \$ _____ Spouse \$ _____
- Yes No Penalty on early withdrawal from CD? \$ _____
- Yes No Student Loan interest paid? _____

Medical Expenses:

- Yes No After-tax Health Insurance, including Medicare?
- Yes No Did anyone in your family receive health insurance from HealthCare.gov or other state run Marketplace? (Form 1095)
- Yes No Are you part of a Healthcare Sharing Ministry?
- Yes No Did you pay Long Term Care Insurance premiums?
- Yes No Any out of pocket medical expenses: Doctors, Dentist, Rx, Nursing Homes, Medical Mileage, etc.? Please list.

Taxes & Interest Expenses:

- Yes No Do you own your own home?
- Yes No Real Estate Taxes (Form 1098 or other)?
- Yes No Mortgage Interest/Points Paid (Form 1098)?
- Yes No Did you purchase a boat, airplane, RV, etc.?
- Yes No Annual Ad Valorem Taxes on car, boat, etc.?
- Yes No Other State, County, City or Local Taxes?
- Yes No Investment Interest paid? Other Interest Paid?

Gifts to Charity *Documentation required for all donations:*

- Yes No Cash/Checks/Money etc.
- Yes No Non-Cash Gifts i.e. Household items to Goodwill?
- Yes No Miles driven for charity?
- Yes No Payroll Deductions of Charity, Union Dues, other?
- Yes No Qualified Charitable Distribution from IRA.

Other Miscellaneous Items:

- Yes No Install an electric vehicle charger in your home?
- Yes No Rollover \$\$\$ from an IRA, 401(k), Annuity, etc.?
- Yes No Receive an inheritance (Sch K-1)?
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- Yes No Did you contribute to a 529 College Savings Plan?
- Yes No Unreimbursed Educator Expenses (K-12 only)?

Rental Property:

- Yes No First Placed in Service in 2022? If "Yes", please provide appraisal and settlement statements.
- Yes No Disposed/Stopped Renting during 2022?

Type of Rental: _____

Address: _____

Days Rented: _____ Days Vacant/Empty: _____

Personal use days (self, friends, family): _____

Average length of rental stay (in days): _____

Hours you & your spouse worked on rental: _____

Small Business or Farming*Request our 2022 Business Tax Organizer for more in-depth checklist*

Nature of Business: _____

Date Business Started: _____

Which of the following expenses did your business have in 2022?

- | | |
|--|--|
| <input type="checkbox"/> Inventory Purchases | <input type="checkbox"/> Interest paid on business loans |
| <input type="checkbox"/> Contract Labor | <input type="checkbox"/> Insurance (Not Health) |
| <input type="checkbox"/> Advertising | <input type="checkbox"/> Legal & Professional Services |
| <input type="checkbox"/> Office Supplies | <input type="checkbox"/> Office/Building Rent |
| <input type="checkbox"/> Equipment Rent | <input type="checkbox"/> Repairs/Maintenance/Cleaning |
| <input type="checkbox"/> Supplies | <input type="checkbox"/> Taxes & Licenses |
| <input type="checkbox"/> Out of Town Travel | <input type="checkbox"/> Meals & Entertainment |
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Did your business:

- Yes No Use an Automobile? Type: _____
Business miles 1/1-6/30: _____ 7/1-12/31: _____;
Personal miles: _____
- Yes No Have a home office? Must be Regular & Exclusive.
Sq Ft: _____ Sq Ft of entire home: _____
- Yes No Acquire or dispose of Tools/Equipment/Assets? *Please provide Invoice/Bill of Sale.*
- Yes No Pay any service providers, contractors, or casual labor?
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- Yes No Have more than one owner?
- Yes No Is this business an LLC? If "Yes" please provide LLC Articles of Organization and Operating Agreement.

Separate Business Address: _____

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Personal Information ~ Provide SS Cards & Driver's Licenses:

Your Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Spouse's Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

1) _____

2) _____

3) _____

Yes No Could anyone else claim any of your dependents?

Yes No Any Child Care costs? If "Yes", provide amounts paid, care provider name(s), EIN's, and address(es) for EACH dependent.

Regular Income: Please attach Forms W-2, 1099-Misc, 1099R, 1099-SSA, K-1, 1099G, etc. Provide details/amounts if missing forms.

Yes No Wages, tips, etc. from job(s)? (W-2)

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Yes No Did you receive any tax refunds in 2022?

Yes No Alimony Paid/Received? \$ _____

Yes No Sell, buy or trade any assets, stocks, bonds, mutual funds, or other assets? (1099-B).

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Yes No Spend, Receive, Sell, Exchange, Acquire, or Mine any Virtual Currency such as Bitcoin, Ethereum, etc?

Yes No Own any rental property including a vacation home?

Yes No Unemployment Income? (1099-G)

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Occupation: _____ Blind? Disabled?
Phone: _____
Email: _____
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| <input type="checkbox"/> Utilities (not home) | <input type="checkbox"/> Wages paid to Employees |
| <input type="checkbox"/> Telephone | <input type="checkbox"/> Commissions & Fees |
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Did your business:

- Yes No Use an Automobile? Type: _____
Business miles 1/1-6/30: _____ 7/1-12/31: _____;
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- Yes No Have more than one owner?
- Yes No Is this business an LLC? If "Yes" please provide LLC Articles of Organization and Operating Agreement.

Separate Business Address: _____

Method of Accounting: Cash Accrual Other/Not SureCould this be considered a Hobby? Yes No Not Sure

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Call (770)704-7777 to schedule an appointment. Please complete as much as possible prior to your appointment.

Personal Information ~ Provide SS Cards & Driver's Licenses:

Your Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Spouse's Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

1) _____

2) _____

3) _____

Yes No Could anyone else claim any of your dependents?

Yes No Any Child Care costs? If "Yes", provide amounts paid, care provider name(s), EIN's, and address(es) for EACH dependent.

Regular Income: Please attach Forms W-2, 1099-Misc, 1099R, 1099-SSA, K-1, 1099G, etc. Provide details/amounts if missing forms.

Yes No Wages, tips, etc. from job(s)? (W-2)

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Yes No Did you receive any tax refunds in 2022?

Yes No Alimony Paid/Received? \$ _____

Yes No Sell, buy or trade any assets, stocks, bonds, mutual funds, or other assets? (1099-B).

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Yes No Own any rental property including a vacation home?

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General Questions:

Yes No Direct Deposit your refund into your bank account? *Must attach a voided check.* Otherwise you will receive refund checks. Amounts due will NOT be drafted from your account.

Yes No Did you file 2021 tax return? **Provide Copy/PDF.**

Yes No Do you or your spouse owe any back taxes?

Please note, to avoid penalty, you must pay all taxes due by April 18th. An extension only grants more time to file, not to pay.

Other Special Situations: May require detailed documentation

Yes No Pay any Estimated Tax Payments? Please list amounts, dates, and to whom paid (GA, IRS, etc.)

Yes No Any births or deaths in your household? Did any children cease to be your dependents in 2022?

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Yes No Pay any Household Employees such as gardeners, housekeepers, nannies, etc.?

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- Yes No IRA Contribution: Traditional Roth SEP Other
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- Yes No First Placed in Service in 2022? If "Yes", please provide appraisal and settlement statements.
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Type of Rental: _____

Address: _____

Days Rented: _____ Days Vacant/Empty: _____

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Small Business or Farming

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Method of Accounting: Cash Accrual Other/Not SureCould this be considered a Hobby? Yes No Not Sure

How many hours did you "participate" (work) in the business operations during 2022? 500+ annual hours may be needed: _____

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21 Years!
2002 - 2023*

Please attach additional sheets for any other information you need to provide.
TaxSmart Business Services - (125 Barrett Road) PO Box 280, Holly Springs, GA, 30142

Phone: 770-704-7777 - Email: info@taxsmart1040.com

TaxSmart Business Services – 2022 Income Tax Organizer

Call (770)704-7777 to schedule an appointment. Please complete as much as possible prior to your appointment.

Personal Information ~ Provide SS Cards & Driver's Licenses:

Your Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Spouse's Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

1) _____

2) _____

3) _____

Yes No Could anyone else claim any of your dependents?

Yes No Any Child Care costs? If "Yes", provide amounts paid, care provider name(s), EIN's, and address(es) for EACH dependent.

Regular Income: Please attach Forms W-2, 1099-Misc, 1099R, 1099-SSA, K-1, 1099G, etc. Provide details/amounts if missing forms.

Yes No Wages, tips, etc. from job(s)? (W-2)

Yes No Interest from banks, bonds, other? (1099-INT)

Yes No Dividends? (1099-DIV)

Yes No Did you receive any tax refunds in 2022?

Yes No Alimony Paid/Received? \$ _____

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Yes No Own any rental property including a vacation home?

Yes No Unemployment Income? (1099-G)

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General Questions:

Yes No Direct Deposit your refund into your bank account? *Must attach a voided check.* Otherwise you will receive refund checks. Amounts due will NOT be drafted from your account.

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Yes No Do you or your spouse owe any back taxes?

Please note, to avoid penalty, you must pay all taxes due by April 18th. An extension only grants more time to file, not to pay.

Other Special Situations: May require detailed documentation

Yes No Pay any Estimated Tax Payments? Please list amounts, dates, and to whom paid (GA, IRS, etc.)

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Yes No After-tax Health Insurance, including Medicare?

Yes No Did anyone in your family receive health insurance from HealthCare.gov or other state run Marketplace? (Form 1095)

Yes No Are you part of a Healthcare Sharing Ministry?

Yes No Did you pay Long Term Care Insurance premiums?

Yes No Any out of pocket medical expenses: Doctors, Dentist, Rx, Nursing Homes, Medical Mileage, etc.? Please list.

Taxes & Interest Expenses:

Yes No Do you own your own home?

Yes No Real Estate Taxes (Form 1098 or other)?

Yes No Mortgage Interest/Points Paid (Form 1098)?

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Yes No Investment Interest paid? Other Interest Paid?

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Yes No First Placed in Service in 2022? If "Yes", please provide appraisal and settlement statements.

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Type of Rental: _____

Address: _____

Days Rented: _____ Days Vacant/Empty: _____

Personal use days (self, friends, family): _____

Average length of rental stay (in days): _____

Hours you & your spouse worked on rental: _____

Small Business or Farming

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Nature of Business: _____

Date Business Started: _____

Which of the following expenses did your business have in 2022?

Inventory Purchases Interest paid on business loans

Contract Labor Insurance (Not Health)

Advertising Legal & Professional Services

Office Supplies Office/Building Rent

Equipment Rent Repairs/Maintenance/Cleaning

Supplies Taxes & Licenses

Out of Town Travel Meals & Entertainment

Utilities (not home) Wages paid to Employees

Telephone Commissions & Fees

Postage Employee Benefits

Auto/Truck Expenses Pension & Profit Sharing

Other Expenses (list) Inventory W/D for Personal Use

Did your business:

Yes No Use an Automobile? Type: _____
Business miles 1/1-6/30: _____ 7/1-12/31: _____;

Personal miles: _____

Yes No Have a home office? Must be Regular & Exclusive.

Sq Ft: _____ Sq Ft of entire home: _____

Yes No Acquire or dispose of Tools/Equipment/Assets? *Please provide Invoice/Bill of Sale.*

Yes No Pay any service providers, contractors, or casual labor?
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Yes No Have Inventory on hand December 31, 2022?

Yes No Pay wages to W-2 type employees?

Yes No Receive EIDL, PPP, SBA Loan, etc.?

Yes No Make or receive any loans/leases/notes or payments?

Yes No Engage in Bartering?

Yes No Have more than one owner?

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Email: _____

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Provide SS Card & Proof of Residency for each dependent.

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Yes No Did your child (under age 24) have any investment income? Please attach 1099's and/or tax return.

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Expenses/Deductions:

- Yes No IRA Contribution: Traditional Roth SEP Other
Self \$ _____ Spouse \$ _____
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- Yes No After-tax Health Insurance, including Medicare?
- Yes No Did anyone in your family receive health insurance from HealthCare.gov or other state run Marketplace? (Form 1095)
- Yes No Are you part of a Healthcare Sharing Ministry?
- Yes No Did you pay Long Term Care Insurance premiums?
- Yes No Any out of pocket medical expenses: Doctors, Dentist, Rx, Nursing Homes, Medical Mileage, etc.? Please list.

Taxes & Interest Expenses:

- Yes No Do you own your own home?
- Yes No Real Estate Taxes (Form 1098 or other)?
- Yes No Mortgage Interest/Points Paid (Form 1098)?
- Yes No Did you purchase a boat, airplane, RV, etc.?
- Yes No Annual Ad Valorem Taxes on car, boat, etc.?
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- Yes No Investment Interest paid? Other Interest Paid?

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- Yes No Cash/Checks/Money etc.
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- Yes No Miles driven for charity?
- Yes No Payroll Deductions of Charity, Union Dues, other?
- Yes No Qualified Charitable Distribution from IRA.

Other Miscellaneous Items:

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- Yes No Rollover \$\$\$ from an IRA, 401(k), Annuity, etc.?
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Address: _____

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Which of the following expenses did your business have in 2022?

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| <input type="checkbox"/> Supplies | <input type="checkbox"/> Taxes & Licenses |
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| <input type="checkbox"/> Utilities (not home) | <input type="checkbox"/> Wages paid to Employees |
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| <input type="checkbox"/> Other Expenses (list) | <input type="checkbox"/> Inventory W/D for Personal Use |

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<p>Personal Information ~ Provide SS Cards & Driver's Licenses:</p> <p>Your Full Name: _____</p> <p>Occupation: _____ <input type="checkbox"/> Blind? <input type="checkbox"/> Disabled?</p> <p>Phone: _____</p> <p>Email: _____</p> <p>Spouse's Full Name: _____</p> <p>Occupation: _____ <input type="checkbox"/> Blind? <input type="checkbox"/> Disabled?</p> <p>Phone: _____</p> <p>Email: _____</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Sure: Do you want to file a joint return?</p>	<p>Dependent Information (Children, Parents, others):</p> <p style="text-align: center;">Provide SS Card & Proof of Residency for each dependent.</p> <p>Full Name – DOB – Relationship - College Student? - 2022 Income?</p> <p>1) _____</p> <p>_____</p> <p>2) _____</p> <p>_____</p> <p>3) _____</p> <p>_____</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Could anyone else claim any of your dependents?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Any Child Care costs? If "Yes", provide amounts paid, care provider name(s), EIN's, and address(es) for EACH dependent.</p>
<p>Regular Income: Please attach Forms W-2, 1099-Misc, 1099R, 1099-SSA, K-1, 1099G, etc. Provide details/amounts if missing forms.</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Wages, tips, etc. from job(s)? (W-2)</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Interest from banks, bonds, other? (1099-INT)</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Dividends? (1099-DIV)</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Did you receive any tax refunds in 2022?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Alimony Paid/Received? \$ _____</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Sell, buy or trade any assets, stocks, bonds, mutual funds, or other assets? (1099-B).</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Distributions from 401(k), IRA, Pension, Annuity, etc.? (1099-R)</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Spend, Receive, Sell, Exchange, Acquire, or Mine any Virtual Currency such as Bitcoin, Ethereum, etc?</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No Own any rental property including a vacation home?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Unemployment Income? (1099-G)</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Social Security Benefits? (1099-SSA)</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Gambling Income and Related Expenses? (W2G)</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Cancellation of Debt/Foreclosure? (1099-A or -C)</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Any small business income/loss from an S-Corp, Partnership, LLC, Sole Proprietor? (K-1, 1099-Misc, 1099-K)</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Did you sell anything online: Craigslist, eBay, FB Marketplace, etc. (1099K)?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Any other income, e.g. Uber/Lyft, Crowdfunding, other? Please explain:</p>
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(Continued on reverse)

Expenses/Deductions:

- Yes No IRA Contribution: Traditional Roth SEP Other
Self \$ _____ Spouse \$ _____
- Yes No Penalty on early withdrawal from CD? \$ _____
- Yes No Student Loan interest paid? _____

Medical Expenses:

- Yes No After-tax Health Insurance, including Medicare?
- Yes No Did anyone in your family receive health insurance from HealthCare.gov or other state run Marketplace? (Form 1095)
- Yes No Are you part of a Healthcare Sharing Ministry?
- Yes No Did you pay Long Term Care Insurance premiums?
- Yes No Any out of pocket medical expenses: Doctors, Dentist, Rx, Nursing Homes, Medical Mileage, etc.? Please list.

Taxes & Interest Expenses:

- Yes No Do you own your own home?
- Yes No Real Estate Taxes (Form 1098 or other)?
- Yes No Mortgage Interest/Points Paid (Form 1098)?
- Yes No Did you purchase a boat, airplane, RV, etc.?
- Yes No Annual Ad Valorem Taxes on car, boat, etc.?
- Yes No Other State, County, City or Local Taxes?
- Yes No Investment Interest paid? Other Interest Paid?

Gifts to Charity *Documentation required for all donations:*

- Yes No Cash/Checks/Money etc.
- Yes No Non-Cash Gifts i.e. Household items to Goodwill?
- Yes No Miles driven for charity?
- Yes No Payroll Deductions of Charity, Union Dues, other?
- Yes No Qualified Charitable Distribution from IRA.

Other Miscellaneous Items:

- Yes No Install an electric vehicle charger in your home?
- Yes No Rollover \$\$\$ from an IRA, 401(k), Annuity, etc.?
- Yes No Receive an inheritance (Sch K-1)?
- Yes No Make gifts totaling \geq \$16,000 to one person?
- Yes No Did you contribute to a 529 College Savings Plan?
- Yes No Unreimbursed Educator Expenses (K-12 only)?

Rental Property:

- Yes No First Placed in Service in 2022? If "Yes", please provide appraisal and settlement statements.
- Yes No Disposed/Stopped Renting during 2022?

Type of Rental: _____

Address: _____

Days Rented: _____ Days Vacant/Empty: _____

Personal use days (self, friends, family): _____

Average length of rental stay (in days): _____

Hours you & your spouse worked on rental: _____

Small Business or Farming*Request our 2022 Business Tax Organizer for more in-depth checklist*

Nature of Business: _____

Date Business Started: _____

Which of the following expenses did your business have in 2022?

- | | |
|--|--|
| <input type="checkbox"/> Inventory Purchases | <input type="checkbox"/> Interest paid on business loans |
| <input type="checkbox"/> Contract Labor | <input type="checkbox"/> Insurance (Not Health) |
| <input type="checkbox"/> Advertising | <input type="checkbox"/> Legal & Professional Services |
| <input type="checkbox"/> Office Supplies | <input type="checkbox"/> Office/Building Rent |
| <input type="checkbox"/> Equipment Rent | <input type="checkbox"/> Repairs/Maintenance/Cleaning |
| <input type="checkbox"/> Supplies | <input type="checkbox"/> Taxes & Licenses |
| <input type="checkbox"/> Out of Town Travel | <input type="checkbox"/> Meals & Entertainment |
| <input type="checkbox"/> Utilities (not home) | <input type="checkbox"/> Wages paid to Employees |
| <input type="checkbox"/> Telephone | <input type="checkbox"/> Commissions & Fees |
| <input type="checkbox"/> Postage | <input type="checkbox"/> Employee Benefits |
| <input type="checkbox"/> Auto/Truck Expenses | <input type="checkbox"/> Pension & Profit Sharing |
| <input type="checkbox"/> Other Expenses (list) | <input type="checkbox"/> Inventory W/D for Personal Use |

Did your business:

- Yes No Use an Automobile? Type: _____
Business miles 1/1-6/30: _____ 7/1-12/31: _____;
Personal miles: _____
- Yes No Have a home office? Must be Regular & Exclusive.
Sq Ft: _____ Sq Ft of entire home: _____
- Yes No Acquire or dispose of Tools/Equipment/Assets? *Please provide Invoice/Bill of Sale.*
- Yes No Pay any service providers, contractors, or casual labor?
 Yes No If "Yes", would you like us to issue 1099's?
- Yes No Have Inventory on hand December 31, 2022?
- Yes No Pay wages to W-2 type employees?
- Yes No Receive EIDL, PPP, SBA Loan, etc.?
- Yes No Make or receive any loans/leases/notes or payments?
- Yes No Engage in Bartering?
- Yes No Have more than one owner?
- Yes No Is this business an LLC? If "Yes" please provide LLC Articles of Organization and Operating Agreement.

Separate Business Address: _____

Method of Accounting: Cash Accrual Other/Not SureCould this be considered a Hobby? Yes No Not Sure

How many hours did you "participate" (work) in the business operations during 2022? 500+ annual hours may be needed: _____

*Celebrating
21 Years!
2002 - 2023*

Please attach additional sheets for any other information you need to provide.
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- Yes No First Placed in Service in 2022? If "Yes", please provide appraisal and settlement statements.
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Type of Rental: _____

Address: _____

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| <input type="checkbox"/> Office Supplies | <input type="checkbox"/> Office/Building Rent |
| <input type="checkbox"/> Equipment Rent | <input type="checkbox"/> Repairs/Maintenance/Cleaning |
| <input type="checkbox"/> Supplies | <input type="checkbox"/> Taxes & Licenses |
| <input type="checkbox"/> Out of Town Travel | <input type="checkbox"/> Meals & Entertainment |
| <input type="checkbox"/> Utilities (not home) | <input type="checkbox"/> Wages paid to Employees |
| <input type="checkbox"/> Telephone | <input type="checkbox"/> Commissions & Fees |
| <input type="checkbox"/> Postage | <input type="checkbox"/> Employee Benefits |
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| <input type="checkbox"/> Other Expenses (list) | <input type="checkbox"/> Inventory W/D for Personal Use |

Did your business:

- Yes No Use an Automobile? Type: _____
Business miles 1/1-6/30: _____ 7/1-12/31: _____;
Personal miles: _____
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Sq Ft: _____ Sq Ft of entire home: _____
- Yes No Acquire or dispose of Tools/Equipment/Assets? *Please provide Invoice/Bill of Sale.*
- Yes No Pay any service providers, contractors, or casual labor?
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2002 - 2023*

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Personal Information ~ Provide SS Cards & Driver's Licenses:

Your Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Spouse's Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

1) _____

2) _____

3) _____

Yes No Could anyone else claim any of your dependents?

Yes No Any Child Care costs? If "Yes", provide amounts paid, care provider name(s), EIN's, and address(es) for EACH dependent.

Regular Income: Please attach Forms W-2, 1099-Misc, 1099R, 1099-SSA, K-1, 1099G, etc. Provide details/amounts if missing forms.

Yes No Wages, tips, etc. from job(s)? (W-2)

Yes No Interest from banks, bonds, other? (1099-INT)

Yes No Dividends? (1099-DIV)

Yes No Did you receive any tax refunds in 2022?

Yes No Alimony Paid/Received? \$ _____

Yes No Sell, buy or trade any assets, stocks, bonds, mutual funds, or other assets? (1099-B).

Yes No Distributions from 401(k), IRA, Pension, Annuity, etc.? (1099-R)

Yes No Spend, Receive, Sell, Exchange, Acquire, or Mine any Virtual Currency such as Bitcoin, Ethereum, etc?

Yes No Own any rental property including a vacation home?

Yes No Unemployment Income? (1099-G)

Yes No Social Security Benefits? (1099-SSA)

Yes No Gambling Income and Related Expenses? (W2G)

Yes No Cancellation of Debt/Foreclosure? (1099-A or -C)

Yes No Any small business income/loss from an S-Corp, Partnership, LLC, Sole Proprietor? (K-1, 1099-Misc, 1099-K)

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General Questions:

Yes No Direct Deposit your refund into your bank account? *Must attach a voided check.* Otherwise you will receive refund checks. Amounts due will NOT be drafted from your account.

Yes No Did you file 2021 tax return? **Provide Copy/PDF.**

Yes No Do you or your spouse owe any back taxes?

Please note, to avoid penalty, you must pay all taxes due by April 18th. An extension only grants more time to file, not to pay.

Other Special Situations: May require detailed documentation

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Yes No Did you suffer a casualty or loss in 2022 in a presidentially declared disaster area? www.fema.gov/disasters

Yes No Receive any hobby income?

Yes No Moving Expenses? (Only for active military)

Yes No Did your address change? Please attach.

Yes No At any time during 2022 did you have any financial interest or signature authority over a foreign financial account, including overseas gaming?

Yes No During 2022, did you receive a distribution from, were the grantor of, or transferor to a foreign trust?

How would you like to receive your copy of the completed tax return?

Paper Copy Digital/PDF Copy

Yes No College expenses for self, spouse or dependent?

Yes No Have any Unreimbursed Partnership Expenses in 2022?

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- Yes No After-tax Health Insurance, including Medicare?
- Yes No Did anyone in your family receive health insurance from HealthCare.gov or other state run Marketplace? (Form 1095)
- Yes No Are you part of a Healthcare Sharing Ministry?
- Yes No Did you pay Long Term Care Insurance premiums?
- Yes No Any out of pocket medical expenses: Doctors, Dentist, Rx, Nursing Homes, Medical Mileage, etc.? Please list.

Taxes & Interest Expenses:

- Yes No Do you own your own home?
- Yes No Real Estate Taxes (Form 1098 or other)?
- Yes No Mortgage Interest/Points Paid (Form 1098)?
- Yes No Did you purchase a boat, airplane, RV, etc.?
- Yes No Annual Ad Valorem Taxes on car, boat, etc.?
- Yes No Other State, County, City or Local Taxes?
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Gifts to Charity *Documentation required for all donations:*

- Yes No Cash/Checks/Money etc.
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- Yes No Miles driven for charity?
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- Yes No Qualified Charitable Distribution from IRA.

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- Yes No Install an electric vehicle charger in your home?
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- Yes No First Placed in Service in 2022? If "Yes", please provide appraisal and settlement statements.
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Type of Rental: _____

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Days Rented: _____ Days Vacant/Empty: _____

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Average length of rental stay (in days): _____

Hours you & your spouse worked on rental: _____

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Sq Ft: _____ Sq Ft of entire home: _____
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- Yes No Pay any service providers, contractors, or casual labor?
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- Yes No Have Inventory on hand December 31, 2022?
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- Yes No Engage in Bartering?
- Yes No Have more than one owner?
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<p>Personal Information ~ Provide SS Cards & Driver's Licenses:</p> <p>Your Full Name: _____</p> <p>Occupation: _____ <input type="checkbox"/> Blind? <input type="checkbox"/> Disabled?</p> <p>Phone: _____</p> <p>Email: _____</p> <p>Spouse's Full Name: _____</p> <p>Occupation: _____ <input type="checkbox"/> Blind? <input type="checkbox"/> Disabled?</p> <p>Phone: _____</p> <p>Email: _____</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Sure: Do you want to file a joint return?</p>	<p>Dependent Information (Children, Parents, others):</p> <p style="text-align: center;">Provide SS Card & Proof of Residency for each dependent.</p> <p>Full Name – DOB – Relationship - College Student? - 2022 Income?</p> <p>1) _____</p> <p>2) _____</p> <p>3) _____</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Could anyone else claim any of your dependents?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Any Child Care costs? If "Yes", provide amounts paid, care provider name(s), EIN's, and address(es) for EACH dependent.</p>
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(Continued on reverse)

Expenses/Deductions:

- Yes No IRA Contribution: Traditional Roth SEP Other
Self \$ _____ Spouse \$ _____
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- Yes No After-tax Health Insurance, including Medicare?
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- Yes No Disposed/Stopped Renting during 2022?

Type of Rental: _____

Address: _____

Days Rented: _____ Days Vacant/Empty: _____

Personal use days (self, friends, family): _____

Average length of rental stay (in days): _____

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Did your business:

- Yes No Use an Automobile? Type: _____
Business miles 1/1-6/30: _____ 7/1-12/31: _____;
Personal miles: _____
- Yes No Have a home office? Must be Regular & Exclusive.
Sq Ft: _____ Sq Ft of entire home: _____
- Yes No Acquire or dispose of Tools/Equipment/Assets? *Please provide Invoice/Bill of Sale.*
- Yes No Pay any service providers, contractors, or casual labor?
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- Yes No Have more than one owner?
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Separate Business Address: _____

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How many hours did you "participate" (work) in the business operations during 2022? 500+ annual hours may be needed: _____

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Personal Information ~ Provide SS Cards & Driver's Licenses:

Your Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Spouse's Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

1) _____

2) _____

3) _____

Yes No Could anyone else claim any of your dependents?

Yes No Any Child Care costs? If "Yes", provide amounts paid, care provider name(s), EIN's, and address(es) for EACH dependent.

Regular Income: Please attach Forms W-2, 1099-Misc, 1099R, 1099-SSA, K-1, 1099G, etc. Provide details/amounts if missing forms.

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Yes No Interest from banks, bonds, other? (1099-INT)

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Yes No Did you receive any tax refunds in 2022?

Yes No Alimony Paid/Received? \$ _____

Yes No Sell, buy or trade any assets, stocks, bonds, mutual funds, or other assets? (1099-B).

Yes No Distributions from 401(k), IRA, Pension, Annuity, etc.? (1099-R)

Yes No Spend, Receive, Sell, Exchange, Acquire, or Mine any Virtual Currency such as Bitcoin, Ethereum, etc?

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General Questions:

Yes No Direct Deposit your refund into your bank account? *Must attach a voided check.* Otherwise you will receive refund checks. Amounts due will NOT be drafted from your account.

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Yes No Do you or your spouse owe any back taxes?

Please note, to avoid penalty, you must pay all taxes due by April 18th. An extension only grants more time to file, not to pay.

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Yes No Receive any hobby income?

Yes No Moving Expenses? (Only for active military)

Yes No Did your address change? Please attach.

Yes No At any time during 2022 did you have any financial interest or signature authority over a foreign financial account, including overseas gaming?

Yes No During 2022, did you receive a distribution from, were the grantor of, or transferor to a foreign trust?

How would you like to receive your copy of the completed tax return?

Paper Copy Digital/PDF Copy

Yes No College expenses for self, spouse or dependent?

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Address: _____

Days Rented: _____ Days Vacant/Empty: _____

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| <input type="checkbox"/> Utilities (not home) | <input type="checkbox"/> Wages paid to Employees |
| <input type="checkbox"/> Telephone | <input type="checkbox"/> Commissions & Fees |
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Did your business:

- Yes No Use an Automobile? Type: _____
Business miles 1/1-6/30: _____ 7/1-12/31: _____;
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Your Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

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Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

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Full Name – DOB – Relationship - College Student? - 2022 Income?

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Yes No Pay any Household Employees such as gardeners, housekeepers, nannies, etc.?

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- Yes No After-tax Health Insurance, including Medicare?
- Yes No Did anyone in your family receive health insurance from HealthCare.gov or other state run Marketplace? (Form 1095)
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- Yes No Do you own your own home?
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Gifts to Charity *Documentation required for all donations:*

- Yes No Cash/Checks/Money etc.
- Yes No Non-Cash Gifts i.e. Household items to Goodwill?
- Yes No Miles driven for charity?
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- Yes No Qualified Charitable Distribution from IRA.

Other Miscellaneous Items:

- Yes No Install an electric vehicle charger in your home?
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- Yes No First Placed in Service in 2022? If "Yes", please provide appraisal and settlement statements.
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Type of Rental: _____

Address: _____

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| <input type="checkbox"/> Supplies | <input type="checkbox"/> Taxes & Licenses |
| <input type="checkbox"/> Out of Town Travel | <input type="checkbox"/> Meals & Entertainment |
| <input type="checkbox"/> Utilities (not home) | <input type="checkbox"/> Wages paid to Employees |
| <input type="checkbox"/> Telephone | <input type="checkbox"/> Commissions & Fees |
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Did your business:

- Yes No Use an Automobile? Type: _____
Business miles 1/1-6/30: _____ 7/1-12/31: _____;
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Your Full Name: _____
Occupation: _____ Blind? Disabled?
Phone: _____
Email: _____
Spouse's Full Name: _____
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Phone: _____
Email: _____
 Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

1) _____

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Yes No Could anyone else claim any of your dependents?

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Regular Income: Please attach Forms W-2, 1099-Misc, 1099R, 1099-SSA, K-1, 1099G, etc. Provide details/amounts if missing forms.

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Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

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Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

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- Yes No Did anyone in your family receive health insurance from HealthCare.gov or other state run Marketplace? (Form 1095)
- Yes No Are you part of a Healthcare Sharing Ministry?
- Yes No Did you pay Long Term Care Insurance premiums?
- Yes No Any out of pocket medical expenses: Doctors, Dentist, Rx, Nursing Homes, Medical Mileage, etc.? Please list.

Taxes & Interest Expenses:

- Yes No Do you own your own home?
- Yes No Real Estate Taxes (Form 1098 or other)?
- Yes No Mortgage Interest/Points Paid (Form 1098)?
- Yes No Did you purchase a boat, airplane, RV, etc.?
- Yes No Annual Ad Valorem Taxes on car, boat, etc.?
- Yes No Other State, County, City or Local Taxes?
- Yes No Investment Interest paid? Other Interest Paid?

Gifts to Charity *Documentation required for all donations:*

- Yes No Cash/Checks/Money etc.
- Yes No Non-Cash Gifts i.e. Household items to Goodwill?
- Yes No Miles driven for charity?
- Yes No Payroll Deductions of Charity, Union Dues, other?
- Yes No Qualified Charitable Distribution from IRA.

Other Miscellaneous Items:

- Yes No Install an electric vehicle charger in your home?
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- Yes No Receive an inheritance (Sch K-1)?
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- Yes No Unreimbursed Educator Expenses (K-12 only)?

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- Yes No First Placed in Service in 2022? If "Yes", please provide appraisal and settlement statements.
- Yes No Disposed/Stopped Renting during 2022?

Type of Rental: _____

Address: _____

Days Rented: _____ Days Vacant/Empty: _____

Personal use days (self, friends, family): _____

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| <input type="checkbox"/> Supplies | <input type="checkbox"/> Taxes & Licenses |
| <input type="checkbox"/> Out of Town Travel | <input type="checkbox"/> Meals & Entertainment |
| <input type="checkbox"/> Utilities (not home) | <input type="checkbox"/> Wages paid to Employees |
| <input type="checkbox"/> Telephone | <input type="checkbox"/> Commissions & Fees |
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Did your business:

- Yes No Use an Automobile? Type: _____
Business miles 1/1-6/30: _____ 7/1-12/31: _____;
Personal miles: _____
- Yes No Have a home office? Must be Regular & Exclusive.
Sq Ft: _____ Sq Ft of entire home: _____
- Yes No Acquire or dispose of Tools/Equipment/Assets? *Please provide Invoice/Bill of Sale.*
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- Yes No Have more than one owner?
- Yes No Is this business an LLC? If "Yes" please provide LLC Articles of Organization and Operating Agreement.

Separate Business Address: _____

Method of Accounting: Cash Accrual Other/Not SureCould this be considered a Hobby? Yes No Not Sure

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Your Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Spouse's Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

1) _____

2) _____

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Yes No Could anyone else claim any of your dependents?

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Regular Income: Please attach Forms W-2, 1099-Misc, 1099R, 1099-SSA, K-1, 1099G, etc. Provide details/amounts if missing forms.

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- Yes No Install an electric vehicle charger in your home?
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Type of Rental: _____

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| <input type="checkbox"/> Out of Town Travel | <input type="checkbox"/> Meals & Entertainment |
| <input type="checkbox"/> Utilities (not home) | <input type="checkbox"/> Wages paid to Employees |
| <input type="checkbox"/> Telephone | <input type="checkbox"/> Commissions & Fees |
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- Yes No Use an Automobile? Type: _____
Business miles 1/1-6/30: _____ 7/1-12/31: _____;
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Sq Ft: _____ Sq Ft of entire home: _____
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Personal Information ~ Provide SS Cards & Driver's Licenses:

Your Full Name: _____
 Occupation: _____ Blind? Disabled?
 Phone: _____
 Email: _____
 Spouse's Full Name: _____
 Occupation: _____ Blind? Disabled?
 Phone: _____
 Email: _____
 Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?
 1) _____

 2) _____

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 Yes No Could anyone else claim any of your dependents?
 Yes No Any Child Care costs? If "Yes", provide amounts paid, care provider name(s), EIN's, and address(es) for EACH dependent.

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Address: _____

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- Yes No Use an Automobile? Type: _____
Business miles 1/1-6/30: _____ 7/1-12/31: _____;
Personal miles: _____
- Yes No Have a home office? Must be Regular & Exclusive.
Sq Ft: _____ Sq Ft of entire home: _____
- Yes No Acquire or dispose of Tools/Equipment/Assets? *Please provide Invoice/Bill of Sale.*
- Yes No Pay any service providers, contractors, or casual labor?
 Yes No If "Yes", would you like us to issue 1099's?
- Yes No Have Inventory on hand December 31, 2022?
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- Yes No Have more than one owner?
- Yes No Is this business an LLC? If "Yes" please provide LLC Articles of Organization and Operating Agreement.

Separate Business Address: _____

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How many hours did you "participate" (work) in the business operations during 2022? 500+ annual hours may be needed: _____

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Personal Information ~ Provide SS Cards & Driver's Licenses:

Your Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Spouse's Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

1) _____

2) _____

3) _____

Yes No Could anyone else claim any of your dependents?

Yes No Any Child Care costs? If "Yes", provide amounts paid, care provider name(s), EIN's, and address(es) for EACH dependent.

Regular Income: Please attach Forms W-2, 1099-Misc, 1099R, 1099-SSA, K-1, 1099G, etc. Provide details/amounts if missing forms.

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Yes No Alimony Paid/Received? \$ _____

Yes No Sell, buy or trade any assets, stocks, bonds, mutual funds, or other assets? (1099-B).

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Yes No Spend, Receive, Sell, Exchange, Acquire, or Mine any Virtual Currency such as Bitcoin, Ethereum, etc?

Yes No Own any rental property including a vacation home?

Yes No Unemployment Income? (1099-G)

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Please note, to avoid penalty, you must pay all taxes due by April 18th. An extension only grants more time to file, not to pay.

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- Yes No Did you pay Long Term Care Insurance premiums?
- Yes No Any out of pocket medical expenses: Doctors, Dentist, Rx, Nursing Homes, Medical Mileage, etc.? Please list.

Taxes & Interest Expenses:

- Yes No Do you own your own home?
- Yes No Real Estate Taxes (Form 1098 or other)?
- Yes No Mortgage Interest/Points Paid (Form 1098)?
- Yes No Did you purchase a boat, airplane, RV, etc.?
- Yes No Annual Ad Valorem Taxes on car, boat, etc.?
- Yes No Other State, County, City or Local Taxes?
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Gifts to Charity *Documentation required for all donations:*

- Yes No Cash/Checks/Money etc.
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- Yes No Qualified Charitable Distribution from IRA.

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- Yes No Install an electric vehicle charger in your home?
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- Yes No First Placed in Service in 2022? If "Yes", please provide appraisal and settlement statements.
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Type of Rental: _____

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<p>Personal Information ~ Provide SS Cards & Driver's Licenses:</p> <p>Your Full Name: _____</p> <p>Occupation: _____ <input type="checkbox"/> Blind? <input type="checkbox"/> Disabled?</p> <p>Phone: _____</p> <p>Email: _____</p> <p>Spouse's Full Name: _____</p> <p>Occupation: _____ <input type="checkbox"/> Blind? <input type="checkbox"/> Disabled?</p> <p>Phone: _____</p> <p>Email: _____</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Sure: Do you want to file a joint return?</p>	<p>Dependent Information (Children, Parents, others):</p> <p style="text-align: center;">Provide SS Card & Proof of Residency for each dependent.</p> <p>Full Name – DOB – Relationship - College Student? - 2022 Income?</p> <p>1) _____</p> <p>2) _____</p> <p>3) _____</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Could anyone else claim any of your dependents?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Any Child Care costs? If "Yes", provide amounts paid, care provider name(s), EIN's, and address(es) for EACH dependent.</p>
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(Continued on reverse)

Expenses/Deductions:

- Yes No IRA Contribution: Traditional Roth SEP Other
Self \$ _____ Spouse \$ _____
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- Yes No After-tax Health Insurance, including Medicare?
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- Yes No Disposed/Stopped Renting during 2022?

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Address: _____

Days Rented: _____ Days Vacant/Empty: _____

Personal use days (self, friends, family): _____

Average length of rental stay (in days): _____

Hours you & your spouse worked on rental: _____

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- Yes No Use an Automobile? Type: _____
Business miles 1/1-6/30: _____ 7/1-12/31: _____;
Personal miles: _____
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Sq Ft: _____ Sq Ft of entire home: _____
- Yes No Acquire or dispose of Tools/Equipment/Assets? *Please provide Invoice/Bill of Sale.*
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- Yes No Engage in Bartering?
- Yes No Have more than one owner?
- Yes No Is this business an LLC? If "Yes" please provide LLC Articles of Organization and Operating Agreement.

Separate Business Address: _____

Method of Accounting: Cash Accrual Other/Not SureCould this be considered a Hobby? Yes No Not Sure

How many hours did you "participate" (work) in the business operations during 2022? 500+ annual hours may be needed: _____

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Personal Information ~ Provide SS Cards & Driver's Licenses:

Your Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Spouse's Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

1) _____

2) _____

3) _____

Yes No Could anyone else claim any of your dependents?

Yes No Any Child Care costs? If "Yes", provide amounts paid, care provider name(s), EIN's, and address(es) for EACH dependent.

Regular Income: Please attach Forms W-2, 1099-Misc, 1099R, 1099-SSA, K-1, 1099G, etc. Provide details/amounts if missing forms.

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Yes No Interest from banks, bonds, other? (1099-INT)

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Yes No Did you receive any tax refunds in 2022?

Yes No Alimony Paid/Received? \$ _____

Yes No Sell, buy or trade any assets, stocks, bonds, mutual funds, or other assets? (1099-B).

Yes No Distributions from 401(k), IRA, Pension, Annuity, etc.? (1099-R)

Yes No Spend, Receive, Sell, Exchange, Acquire, or Mine any Virtual Currency such as Bitcoin, Ethereum, etc?

Yes No Own any rental property including a vacation home?

Yes No Unemployment Income? (1099-G)

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General Questions:

Yes No Direct Deposit your refund into your bank account? *Must attach a voided check.* Otherwise you will receive refund checks. Amounts due will NOT be drafted from your account.

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Yes No Do you or your spouse owe any back taxes?

Please note, to avoid penalty, you must pay all taxes due by April 18th. An extension only grants more time to file, not to pay.

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Yes No Pay any Estimated Tax Payments? Please list amounts, dates, and to whom paid (GA, IRS, etc.)

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Yes No Moving Expenses? (Only for active military)

Yes No Did your address change? Please attach.

Yes No At any time during 2022 did you have any financial interest or signature authority over a foreign financial account, including overseas gaming?

Yes No During 2022, did you receive a distribution from, were the grantor of, or transferor to a foreign trust?

How would you like to receive your copy of the completed tax return?

Paper Copy Digital/PDF Copy

Yes No College expenses for self, spouse or dependent?

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- Yes No Cash/Checks/Money etc.
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Address: _____

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| <input type="checkbox"/> Supplies | <input type="checkbox"/> Taxes & Licenses |
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| <input type="checkbox"/> Utilities (not home) | <input type="checkbox"/> Wages paid to Employees |
| <input type="checkbox"/> Telephone | <input type="checkbox"/> Commissions & Fees |
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Did your business:

- Yes No Use an Automobile? Type: _____
Business miles 1/1-6/30: _____ 7/1-12/31: _____;
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Occupation: _____ Blind? Disabled?

Phone: _____

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Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

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Full Name – DOB – Relationship - College Student? - 2022 Income?

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Yes No Could anyone else claim any of your dependents?

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- Yes No Mortgage Interest/Points Paid (Form 1098)?
- Yes No Did you purchase a boat, airplane, RV, etc.?
- Yes No Annual Ad Valorem Taxes on car, boat, etc.?
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Gifts to Charity *Documentation required for all donations:*

- Yes No Cash/Checks/Money etc.
- Yes No Non-Cash Gifts i.e. Household items to Goodwill?
- Yes No Miles driven for charity?
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- Yes No Qualified Charitable Distribution from IRA.

Other Miscellaneous Items:

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- Yes No First Placed in Service in 2022? If "Yes", please provide appraisal and settlement statements.
- Yes No Disposed/Stopped Renting during 2022?

Type of Rental: _____

Address: _____

Days Rented: _____ Days Vacant/Empty: _____

Personal use days (self, friends, family): _____

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| <input type="checkbox"/> Out of Town Travel | <input type="checkbox"/> Meals & Entertainment |
| <input type="checkbox"/> Utilities (not home) | <input type="checkbox"/> Wages paid to Employees |
| <input type="checkbox"/> Telephone | <input type="checkbox"/> Commissions & Fees |
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Did your business:

- Yes No Use an Automobile? Type: _____
Business miles 1/1-6/30: _____ 7/1-12/31: _____;
Personal miles: _____
- Yes No Have a home office? Must be Regular & Exclusive.
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Personal Information ~ Provide SS Cards & Driver's Licenses:

Your Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Spouse's Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

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Yes No Not Sure: Do you want to file a joint return?

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Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

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Yes No Could anyone else claim any of your dependents?

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Phone: _____

Email: _____

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Yes No Qualified Charitable Distribution from IRA.

Other Miscellaneous Items:

Yes No Install an electric vehicle charger in your home?

Yes No Rollover \$\$\$ from an IRA, 401(k), Annuity, etc.?

Yes No Receive an inheritance (Sch K-1)?

Yes No Make gifts totaling \geq \$16,000 to one person?

Yes No Did you contribute to a 529 College Savings Plan?

Yes No Unreimbursed Educator Expenses (K-12 only)?

Rental Property:

Yes No First Placed in Service in 2022? If "Yes", please provide appraisal and settlement statements.

Yes No Disposed/Stopped Renting during 2022?

Type of Rental: _____

Address: _____

Days Rented: _____ Days Vacant/Empty: _____

Personal use days (self, friends, family): _____

Average length of rental stay (in days): _____

Hours you & your spouse worked on rental: _____

Small Business or Farming

Request our 2022 Business Tax Organizer for more in-depth checklist

Nature of Business: _____

Date Business Started: _____

Which of the following expenses did your business have in 2022?

Inventory Purchases Interest paid on business loans

Contract Labor Insurance (Not Health)

Advertising Legal & Professional Services

Office Supplies Office/Building Rent

Equipment Rent Repairs/Maintenance/Cleaning

Supplies Taxes & Licenses

Out of Town Travel Meals & Entertainment

Utilities (not home) Wages paid to Employees

Telephone Commissions & Fees

Postage Employee Benefits

Auto/Truck Expenses Pension & Profit Sharing

Other Expenses (list) Inventory W/D for Personal Use

Did your business:

Yes No Use an Automobile? Type: _____
Business miles 1/1-6/30: _____ 7/1-12/31: _____;

Personal miles: _____

Yes No Have a home office? Must be Regular & Exclusive.

Sq Ft: _____ Sq Ft of entire home: _____

Yes No Acquire or dispose of Tools/Equipment/Assets? *Please provide Invoice/Bill of Sale.*

Yes No Pay any service providers, contractors, or casual labor?

Yes No If "Yes", would you like us to issue 1099's?

Yes No Have Inventory on hand December 31, 2022?

Yes No Pay wages to W-2 type employees?

Yes No Receive EIDL, PPP, SBA Loan, etc.?

Yes No Make or receive any loans/leases/notes or payments?

Yes No Engage in Bartering?

Yes No Have more than one owner?

Yes No Is this business an LLC? If "Yes" please provide LLC Articles of Organization and Operating Agreement.

Separate Business Address: _____

Method of Accounting: Cash Accrual Other/Not Sure

Could this be considered a Hobby? Yes No Not Sure

How many hours did you "participate" (work) in the business operations during 2022? 500+ annual hours may be needed: _____

*Celebrating
21 Years!
2002 - 2023*

Please attach additional sheets for any other information you need to provide.
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Phone: 770-704-7777 - Email: info@taxsmart1040.com



TaxSmart Business Services – 2022 Income Tax Organizer

Call (770)704-7777 to schedule an appointment. Please complete as much as possible prior to your appointment.

Personal Information ~ Provide SS Cards & Driver's Licenses:

Your Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Spouse's Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

1) _____

2) _____

3) _____

Yes No Could anyone else claim any of your dependents?

Yes No Any Child Care costs? If "Yes", provide amounts paid, care provider name(s), EIN's, and address(es) for EACH dependent.

Regular Income: Please attach Forms W-2, 1099-Misc, 1099R, 1099-SSA, K-1, 1099G, etc. Provide details/amounts if missing forms.

Yes No Wages, tips, etc. from job(s)? (W-2)

Yes No Interest from banks, bonds, other? (1099-INT)

Yes No Dividends? (1099-DIV)

Yes No Did you receive any tax refunds in 2022?

Yes No Alimony Paid/Received? \$ _____

Yes No Sell, buy or trade any assets, stocks, bonds, mutual funds, or other assets? (1099-B).

Yes No Distributions from 401(k), IRA, Pension, Annuity, etc.? (1099-R)

Yes No Spend, Receive, Sell, Exchange, Acquire, or Mine any Virtual Currency such as Bitcoin, Ethereum, etc?

Yes No Own any rental property including a vacation home?

Yes No Unemployment Income? (1099-G)

Yes No Social Security Benefits? (1099-SSA)

Yes No Gambling Income and Related Expenses? (W2G)

Yes No Cancellation of Debt/Foreclosure? (1099-A or -C)

Yes No Any small business income/loss from an S-Corp, Partnership, LLC, Sole Proprietor? (K-1, 1099-Misc, 1099-K)

Yes No Did you sell anything online: Craigslist, eBay, FB Marketplace, etc. (1099K)?

Yes No Any other income, e.g. Uber/Lyft, Crowdfunding, other? Please explain:

General Questions:

Yes No Direct Deposit your refund into your bank account? *Must attach a voided check.* Otherwise you will receive refund checks. Amounts due will NOT be drafted from your account.

Yes No Did you file 2021 tax return? **Provide Copy/PDF.**

Yes No Do you or your spouse owe any back taxes?

Please note, to avoid penalty, you must pay all taxes due by April 18th. An extension only grants more time to file, not to pay.

Other Special Situations: May require detailed documentation

Yes No Pay any Estimated Tax Payments? Please list amounts, dates, and to whom paid (GA, IRS, etc.)

Yes No Any births or deaths in your household? Did any children cease to be your dependents in 2022?

Yes No Did your marital status change during 2022?

Yes No Did you earn income in another state or country?

Yes No Did you buy, sell or refinance (including loan modification) property in 2022? If yes, attach closing statements.

Yes No During 2022, were there any changes to federal or state tax returns filed in prior years? Please attach notices.

Yes No Did you suffer a casualty or loss in 2022 in a presidentially declared disaster area? www.fema.gov/disasters

Yes No Receive any hobby income?

Yes No Moving Expenses? (Only for active military)

Yes No Did your address change? Please attach.

Yes No At any time during 2022 did you have any financial interest or signature authority over a foreign financial account, including overseas gaming?

Yes No During 2022, did you receive a distribution from, were the grantor of, or transferor to a foreign trust?

How would you like to receive your copy of the completed tax return?

Paper Copy Digital/PDF Copy

Yes No College expenses for self, spouse or dependent?

Yes No Have any Unreimbursed Partnership Expenses in 2022?

Yes No Have an IRS IP-PIN for self, spouse, or dependent?

Yes No Did you pay any foreign taxes in 2022?

Yes No Did you adopt a child in 2022?

Yes No Did your child (under age 24) have any investment income? Please attach 1099's and/or tax return.

Yes No An Armed Forces Reservist, Qualified Performing Artist, or Government Fee Basis Official?

Yes No Do you have a Health Savings Account? (1099-SA)

Yes No Pay any Household Employees such as gardeners, housekeepers, nannies, etc.?

Yes No Do you expect a substantial change in your income or deductions next year (2023)? Please attach explanation:

(Continued on reverse)

Expenses/Deductions:

- Yes No IRA Contribution: Traditional Roth SEP Other
Self \$ _____ Spouse \$ _____
- Yes No Penalty on early withdrawal from CD? \$ _____
- Yes No Student Loan interest paid? _____

Medical Expenses:

- Yes No After-tax Health Insurance, including Medicare?
- Yes No Did anyone in your family receive health insurance from HealthCare.gov or other state run Marketplace? (Form 1095)
- Yes No Are you part of a Healthcare Sharing Ministry?
- Yes No Did you pay Long Term Care Insurance premiums?
- Yes No Any out of pocket medical expenses: Doctors, Dentist, Rx, Nursing Homes, Medical Mileage, etc.? Please list.

Taxes & Interest Expenses:

- Yes No Do you own your own home?
- Yes No Real Estate Taxes (Form 1098 or other)?
- Yes No Mortgage Interest/Points Paid (Form 1098)?
- Yes No Did you purchase a boat, airplane, RV, etc.?
- Yes No Annual Ad Valorem Taxes on car, boat, etc.?
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- Yes No Investment Interest paid? Other Interest Paid?

Gifts to Charity *Documentation required for all donations:*

- Yes No Cash/Checks/Money etc.
- Yes No Non-Cash Gifts i.e. Household items to Goodwill?
- Yes No Miles driven for charity?
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- Yes No Install an electric vehicle charger in your home?
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Type of Rental: _____

Address: _____

Days Rented: _____ Days Vacant/Empty: _____

Personal use days (self, friends, family): _____

Average length of rental stay (in days): _____

Hours you & your spouse worked on rental: _____

Small Business or Farming*Request our 2022 Business Tax Organizer for more in-depth checklist*

Nature of Business: _____

Date Business Started: _____

Which of the following expenses did your business have in 2022?

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|--|--|
| <input type="checkbox"/> Inventory Purchases | <input type="checkbox"/> Interest paid on business loans |
| <input type="checkbox"/> Contract Labor | <input type="checkbox"/> Insurance (Not Health) |
| <input type="checkbox"/> Advertising | <input type="checkbox"/> Legal & Professional Services |
| <input type="checkbox"/> Office Supplies | <input type="checkbox"/> Office/Building Rent |
| <input type="checkbox"/> Equipment Rent | <input type="checkbox"/> Repairs/Maintenance/Cleaning |
| <input type="checkbox"/> Supplies | <input type="checkbox"/> Taxes & Licenses |
| <input type="checkbox"/> Out of Town Travel | <input type="checkbox"/> Meals & Entertainment |
| <input type="checkbox"/> Utilities (not home) | <input type="checkbox"/> Wages paid to Employees |
| <input type="checkbox"/> Telephone | <input type="checkbox"/> Commissions & Fees |
| <input type="checkbox"/> Postage | <input type="checkbox"/> Employee Benefits |
| <input type="checkbox"/> Auto/Truck Expenses | <input type="checkbox"/> Pension & Profit Sharing |
| <input type="checkbox"/> Other Expenses (list) | <input type="checkbox"/> Inventory W/D for Personal Use |

Did your business:

- Yes No Use an Automobile? Type: _____
Business miles 1/1-6/30: _____ 7/1-12/31: _____;
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- Yes No Have a home office? Must be Regular & Exclusive.
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Occupation: _____ Blind? Disabled?
Phone: _____
Email: _____
Spouse's Full Name: _____
Occupation: _____ Blind? Disabled?
Phone: _____
Email: _____
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Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

1) _____

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<p>Personal Information ~ Provide SS Cards & Driver's Licenses:</p> <p>Your Full Name: _____</p> <p>Occupation: _____ <input type="checkbox"/> Blind? <input type="checkbox"/> Disabled?</p> <p>Phone: _____</p> <p>Email: _____</p> <p>Spouse's Full Name: _____</p> <p>Occupation: _____ <input type="checkbox"/> Blind? <input type="checkbox"/> Disabled?</p> <p>Phone: _____</p> <p>Email: _____</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Sure: Do you want to file a joint return?</p>	<p>Dependent Information (Children, Parents, others):</p> <p style="text-align: center;">Provide SS Card & Proof of Residency for each dependent.</p> <p>Full Name – DOB – Relationship - College Student? - 2022 Income?</p> <p>1) _____</p> <p>_____</p> <p>2) _____</p> <p>_____</p> <p>3) _____</p> <p>_____</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Could anyone else claim any of your dependents?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Any Child Care costs? If "Yes", provide amounts paid, care provider name(s), EIN's, and address(es) for EACH dependent.</p>
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- Yes No After-tax Health Insurance, including Medicare?
- Yes No Did anyone in your family receive health insurance from HealthCare.gov or other state run Marketplace? (Form 1095)
- Yes No Are you part of a Healthcare Sharing Ministry?
- Yes No Did you pay Long Term Care Insurance premiums?
- Yes No Any out of pocket medical expenses: Doctors, Dentist, Rx, Nursing Homes, Medical Mileage, etc.? Please list.

Taxes & Interest Expenses:

- Yes No Do you own your own home?
 Yes No Real Estate Taxes (Form 1098 or other)?
 Yes No Mortgage Interest/Points Paid (Form 1098)?
- Yes No Did you purchase a boat, airplane, RV, etc.?
- Yes No Annual Ad Valorem Taxes on car, boat, etc.?
- Yes No Other State, County, City or Local Taxes?
- Yes No Investment Interest paid? Other Interest Paid?

Gifts to Charity *Documentation required for all donations:*

- Yes No Cash/Checks/Money etc.
- Yes No Non-Cash Gifts i.e. Household items to Goodwill?
- Yes No Miles driven for charity?
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- Yes No Qualified Charitable Distribution from IRA.

Other Miscellaneous Items:

- Yes No Install an electric vehicle charger in your home?
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- Yes No Receive an inheritance (Sch K-1)?
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Rental Property:

- Yes No First Placed in Service in 2022? If "Yes", please provide appraisal and settlement statements.
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Type of Rental: _____

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Days Rented: _____ Days Vacant/Empty: _____

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Did your business:

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Business miles 1/1-6/30: _____ 7/1-12/31: _____;
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Sq Ft: _____ Sq Ft of entire home: _____
- Yes No Acquire or dispose of Tools/Equipment/Assets? *Please provide Invoice/Bill of Sale.*
- Yes No Pay any service providers, contractors, or casual labor?
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- Yes No Have Inventory on hand December 31, 2022?
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<p>Personal Information ~ Provide SS Cards & Driver's Licenses:</p> <p>Your Full Name: _____</p> <p>Occupation: _____ <input type="checkbox"/> Blind? <input type="checkbox"/> Disabled?</p> <p>Phone: _____</p> <p>Email: _____</p> <p>Spouse's Full Name: _____</p> <p>Occupation: _____ <input type="checkbox"/> Blind? <input type="checkbox"/> Disabled?</p> <p>Phone: _____</p> <p>Email: _____</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Sure: Do you want to file a joint return?</p>	<p>Dependent Information (Children, Parents, others):</p> <p style="text-align: center;">Provide SS Card & Proof of Residency for each dependent.</p> <p>Full Name – DOB – Relationship - College Student? - 2022 Income?</p> <p>1) _____</p> <p>_____</p> <p>2) _____</p> <p>_____</p> <p>3) _____</p> <p>_____</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Could anyone else claim any of your dependents?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Any Child Care costs? If "Yes", provide amounts paid, care provider name(s), EIN's, and address(es) for EACH dependent.</p>
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(Continued on reverse)

Expenses/Deductions:

- Yes No IRA Contribution: Traditional Roth SEP Other
Self \$ _____ Spouse \$ _____
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- Yes No After-tax Health Insurance, including Medicare?
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- Yes No Install an electric vehicle charger in your home?
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- Yes No First Placed in Service in 2022? If "Yes", please provide appraisal and settlement statements.
- Yes No Disposed/Stopped Renting during 2022?

Type of Rental: _____

Address: _____

Days Rented: _____ Days Vacant/Empty: _____

Personal use days (self, friends, family): _____

Average length of rental stay (in days): _____

Hours you & your spouse worked on rental: _____

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Nature of Business: _____

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Did your business:

- Yes No Use an Automobile? Type: _____
Business miles 1/1-6/30: _____ 7/1-12/31: _____;
Personal miles: _____
- Yes No Have a home office? Must be Regular & Exclusive.
Sq Ft: _____ Sq Ft of entire home: _____
- Yes No Acquire or dispose of Tools/Equipment/Assets? *Please provide Invoice/Bill of Sale.*
- Yes No Pay any service providers, contractors, or casual labor?
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- Yes No Have Inventory on hand December 31, 2022?
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- Yes No Make or receive any loans/leases/notes or payments?
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- Yes No Have more than one owner?
- Yes No Is this business an LLC? If "Yes" please provide LLC Articles of Organization and Operating Agreement.

Separate Business Address: _____

Method of Accounting: Cash Accrual Other/Not SureCould this be considered a Hobby? Yes No Not Sure

How many hours did you "participate" (work) in the business operations during 2022? 500+ annual hours may be needed: _____

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Please attach additional sheets for any other information you need to provide.
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Call (770)704-7777 to schedule an appointment. Please complete as much as possible prior to your appointment.

Personal Information ~ Provide SS Cards & Driver's Licenses:

Your Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Spouse's Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

1) _____

2) _____

3) _____

Yes No Could anyone else claim any of your dependents?

Yes No Any Child Care costs? If "Yes", provide amounts paid, care provider name(s), EIN's, and address(es) for EACH dependent.

Regular Income: Please attach Forms W-2, 1099-Misc, 1099R, 1099-SSA, K-1, 1099G, etc. Provide details/amounts if missing forms.

Yes No Wages, tips, etc. from job(s)? (W-2)

Yes No Interest from banks, bonds, other? (1099-INT)

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Yes No Did you receive any tax refunds in 2022?

Yes No Alimony Paid/Received? \$ _____

Yes No Sell, buy or trade any assets, stocks, bonds, mutual funds, or other assets? (1099-B).

Yes No Distributions from 401(k), IRA, Pension, Annuity, etc.? (1099-R)

Yes No Spend, Receive, Sell, Exchange, Acquire, or Mine any Virtual Currency such as Bitcoin, Ethereum, etc?

Yes No Own any rental property including a vacation home?

Yes No Unemployment Income? (1099-G)

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Yes No Any small business income/loss from an S-Corp, Partnership, LLC, Sole Proprietor? (K-1, 1099-Misc, 1099-K)

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General Questions:

Yes No Direct Deposit your refund into your bank account? *Must attach a voided check.* Otherwise you will receive refund checks. Amounts due will NOT be drafted from your account.

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Yes No Receive any hobby income?

Yes No Moving Expenses? (Only for active military)

Yes No Did your address change? Please attach.

Yes No At any time during 2022 did you have any financial interest or signature authority over a foreign financial account, including overseas gaming?

Yes No During 2022, did you receive a distribution from, were the grantor of, or transferor to a foreign trust?

How would you like to receive your copy of the completed tax return?

Paper Copy Digital/PDF Copy

Yes No College expenses for self, spouse or dependent?

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| <input type="checkbox"/> Telephone | <input type="checkbox"/> Commissions & Fees |
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Did your business:

- Yes No Use an Automobile? Type: _____
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Full Name – DOB – Relationship - College Student? - 2022 Income?

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- Yes No Cash/Checks/Money etc.
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Type of Rental: _____

Address: _____

Days Rented: _____ Days Vacant/Empty: _____

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| <input type="checkbox"/> Supplies | <input type="checkbox"/> Taxes & Licenses |
| <input type="checkbox"/> Out of Town Travel | <input type="checkbox"/> Meals & Entertainment |
| <input type="checkbox"/> Utilities (not home) | <input type="checkbox"/> Wages paid to Employees |
| <input type="checkbox"/> Telephone | <input type="checkbox"/> Commissions & Fees |
| <input type="checkbox"/> Postage | <input type="checkbox"/> Employee Benefits |
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Did your business:

- Yes No Use an Automobile? Type: _____
Business miles 1/1-6/30: _____ 7/1-12/31: _____;
Personal miles: _____
- Yes No Have a home office? Must be Regular & Exclusive.
Sq Ft: _____ Sq Ft of entire home: _____
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- Yes No Have more than one owner?
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Your Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

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Phone: _____

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Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

1) _____

2) _____

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Yes No Could anyone else claim any of your dependents?

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Phone: _____

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(Continued on reverse)

Expenses/Deductions:

Yes No IRA Contribution: Traditional Roth SEP Other
Self \$ _____ Spouse \$ _____

Yes No Penalty on early withdrawal from CD? \$ _____

Yes No Student Loan interest paid? _____

Medical Expenses:

Yes No After-tax Health Insurance, including Medicare?

Yes No Did anyone in your family receive health insurance from HealthCare.gov or other state run Marketplace? (Form 1095)

Yes No Are you part of a Healthcare Sharing Ministry?

Yes No Did you pay Long Term Care Insurance premiums?

Yes No Any out of pocket medical expenses: Doctors, Dentist, Rx, Nursing Homes, Medical Mileage, etc.? Please list.

Taxes & Interest Expenses:

Yes No Do you own your own home?

Yes No Real Estate Taxes (Form 1098 or other)?

Yes No Mortgage Interest/Points Paid (Form 1098)?

Yes No Did you purchase a boat, airplane, RV, etc.?

Yes No Annual Ad Valorem Taxes on car, boat, etc.?

Yes No Other State, County, City or Local Taxes?

Yes No Investment Interest paid? Other Interest Paid?

Gifts to Charity *Documentation required for all donations:*

Yes No Cash/Checks/Money etc.

Yes No Non-Cash Gifts i.e. Household items to Goodwill?

Yes No Miles driven for charity?

Yes No Payroll Deductions of Charity, Union Dues, other?

Yes No Qualified Charitable Distribution from IRA.

Other Miscellaneous Items:

Yes No Install an electric vehicle charger in your home?

Yes No Rollover \$\$\$ from an IRA, 401(k), Annuity, etc.?

Yes No Receive an inheritance (Sch K-1)?

Yes No Make gifts totaling \geq \$16,000 to one person?

Yes No Did you contribute to a 529 College Savings Plan?

Yes No Unreimbursed Educator Expenses (K-12 only)?

Rental Property:

Yes No First Placed in Service in 2022? If "Yes", please provide appraisal and settlement statements.

Yes No Disposed/Stopped Renting during 2022?

Type of Rental: _____

Address: _____

Days Rented: _____ Days Vacant/Empty: _____

Personal use days (self, friends, family): _____

Average length of rental stay (in days): _____

Hours you & your spouse worked on rental: _____

Small Business or Farming

Request our 2022 Business Tax Organizer for more in-depth checklist

Nature of Business: _____

Date Business Started: _____

Which of the following expenses did your business have in 2022?

Inventory Purchases Interest paid on business loans

Contract Labor Insurance (Not Health)

Advertising Legal & Professional Services

Office Supplies Office/Building Rent

Equipment Rent Repairs/Maintenance/Cleaning

Supplies Taxes & Licenses

Out of Town Travel Meals & Entertainment

Utilities (not home) Wages paid to Employees

Telephone Commissions & Fees

Postage Employee Benefits

Auto/Truck Expenses Pension & Profit Sharing

Other Expenses (list) Inventory W/D for Personal Use

Did your business:

Yes No Use an Automobile? Type: _____
Business miles 1/1-6/30: _____ 7/1-12/31: _____;

Personal miles: _____

Yes No Have a home office? Must be Regular & Exclusive.

Sq Ft: _____ Sq Ft of entire home: _____

Yes No Acquire or dispose of Tools/Equipment/Assets? *Please provide Invoice/Bill of Sale.*

Yes No Pay any service providers, contractors, or casual labor?

Yes No If "Yes", would you like us to issue 1099's?

Yes No Have Inventory on hand December 31, 2022?

Yes No Pay wages to W-2 type employees?

Yes No Receive EIDL, PPP, SBA Loan, etc.?

Yes No Make or receive any loans/leases/notes or payments?

Yes No Engage in Bartering?

Yes No Have more than one owner?

Yes No Is this business an LLC? If "Yes" please provide LLC Articles of Organization and Operating Agreement.

Separate Business Address: _____

Method of Accounting: Cash Accrual Other/Not Sure

Could this be considered a Hobby? Yes No Not Sure

How many hours did you "participate" (work) in the business operations during 2022? 500+ annual hours may be needed: _____

*Celebrating
21 Years!
2002 - 2023*

Please attach additional sheets for any other information you need to provide.
TaxSmart Business Services - (125 Barrett Road) PO Box 280, Holly Springs, GA, 30142

Phone: 770-704-7777 - Email: info@taxsmart1040.com



TaxSmart Business Services – 2022 Income Tax Organizer

Call (770)704-7777 to schedule an appointment. Please complete as much as possible prior to your appointment.

Personal Information ~ Provide SS Cards & Driver's Licenses:

Your Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Spouse's Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

1) _____

2) _____

3) _____

Yes No Could anyone else claim any of your dependents?

Yes No Any Child Care costs? If "Yes", provide amounts paid, care provider name(s), EIN's, and address(es) for EACH dependent.

Regular Income: Please attach Forms W-2, 1099-Misc, 1099R, 1099-SSA, K-1, 1099G, etc. Provide details/amounts if missing forms.

Yes No Wages, tips, etc. from job(s)? (W-2)

Yes No Interest from banks, bonds, other? (1099-INT)

Yes No Dividends? (1099-DIV)

Yes No Did you receive any tax refunds in 2022?

Yes No Alimony Paid/Received? \$ _____

Yes No Sell, buy or trade any assets, stocks, bonds, mutual funds, or other assets? (1099-B).

Yes No Distributions from 401(k), IRA, Pension, Annuity, etc.? (1099-R)

Yes No Spend, Receive, Sell, Exchange, Acquire, or Mine any Virtual Currency such as Bitcoin, Ethereum, etc?

Yes No Own any rental property including a vacation home?

Yes No Unemployment Income? (1099-G)

Yes No Social Security Benefits? (1099-SSA)

Yes No Gambling Income and Related Expenses? (W2G)

Yes No Cancellation of Debt/Foreclosure? (1099-A or -C)

Yes No Any small business income/loss from an S-Corp, Partnership, LLC, Sole Proprietor? (K-1, 1099-Misc, 1099-K)

Yes No Did you sell anything online: Craigslist, eBay, FB Marketplace, etc. (1099K)?

Yes No Any other income, e.g. Uber/Lyft, Crowdfunding, other? Please explain:

General Questions:

Yes No Direct Deposit your refund into your bank account? *Must attach a voided check.* Otherwise you will receive refund checks. Amounts due will NOT be drafted from your account.

Yes No Did you file 2021 tax return? **Provide Copy/PDF.**

Yes No Do you or your spouse owe any back taxes?

Please note, to avoid penalty, you must pay all taxes due by April 18th. An extension only grants more time to file, not to pay.

Yes No Did your address change? Please attach.

Yes No At any time during 2022 did you have any financial interest or signature authority over a foreign financial account, including overseas gaming?

Yes No During 2022, did you receive a distribution from, were the grantor of, or transferor to a foreign trust?

How would you like to receive your copy of the completed tax return?

Paper Copy Digital/PDF Copy

Other Special Situations: May require detailed documentation

Yes No Pay any Estimated Tax Payments? Please list amounts, dates, and to whom paid (GA, IRS, etc.)

Yes No Any births or deaths in your household? Did any children cease to be your dependents in 2022?

Yes No Did your marital status change during 2022?

Yes No Did you earn income in another state or country?

Yes No Did you buy, sell or refinance (including loan modification) property in 2022? If yes, attach closing statements.

Yes No During 2022, were there any changes to federal or state tax returns filed in prior years? Please attach notices.

Yes No Did you suffer a casualty or loss in 2022 in a presidentially declared disaster area? www.fema.gov/disasters

Yes No Receive any hobby income?

Yes No Moving Expenses? (Only for active military)

Yes No College expenses for self, spouse or dependent?

Yes No Have any Unreimbursed Partnership Expenses in 2022?

Yes No Have an IRS IP-PIN for self, spouse, or dependent?

Yes No Did you pay any foreign taxes in 2022?

Yes No Did you adopt a child in 2022?

Yes No Did your child (under age 24) have any investment income? Please attach 1099's and/or tax return.

Yes No An Armed Forces Reservist, Qualified Performing Artist, or Government Fee Basis Official?

Yes No Do you have a Health Savings Account? (1099-SA)

Yes No Pay any Household Employees such as gardeners, housekeepers, nannies, etc.?

Yes No Do you expect a substantial change in your income or deductions next year (2023)? Please attach explanation:

(Continued on reverse)

Expenses/Deductions:

- Yes No IRA Contribution: Traditional Roth SEP Other
Self \$ _____ Spouse \$ _____
- Yes No Penalty on early withdrawal from CD? \$ _____
- Yes No Student Loan interest paid? _____

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- Yes No After-tax Health Insurance, including Medicare?
- Yes No Did anyone in your family receive health insurance from HealthCare.gov or other state run Marketplace? (Form 1095)
- Yes No Are you part of a Healthcare Sharing Ministry?
- Yes No Did you pay Long Term Care Insurance premiums?
- Yes No Any out of pocket medical expenses: Doctors, Dentist, Rx, Nursing Homes, Medical Mileage, etc.? Please list.

Taxes & Interest Expenses:

- Yes No Do you own your own home?
- Yes No Real Estate Taxes (Form 1098 or other)?
- Yes No Mortgage Interest/Points Paid (Form 1098)?
- Yes No Did you purchase a boat, airplane, RV, etc.?
- Yes No Annual Ad Valorem Taxes on car, boat, etc.?
- Yes No Other State, County, City or Local Taxes?
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Gifts to Charity *Documentation required for all donations:*

- Yes No Cash/Checks/Money etc.
- Yes No Non-Cash Gifts i.e. Household items to Goodwill?
- Yes No Miles driven for charity?
- Yes No Payroll Deductions of Charity, Union Dues, other?
- Yes No Qualified Charitable Distribution from IRA.

Other Miscellaneous Items:

- Yes No Install an electric vehicle charger in your home?
- Yes No Rollover \$\$\$ from an IRA, 401(k), Annuity, etc.?
- Yes No Receive an inheritance (Sch K-1)?
- Yes No Make gifts totaling \geq \$16,000 to one person?
- Yes No Did you contribute to a 529 College Savings Plan?
- Yes No Unreimbursed Educator Expenses (K-12 only)?

Rental Property:

- Yes No First Placed in Service in 2022? If "Yes", please provide appraisal and settlement statements.
- Yes No Disposed/Stopped Renting during 2022?

Type of Rental: _____

Address: _____

Days Rented: _____ Days Vacant/Empty: _____

Personal use days (self, friends, family): _____

Average length of rental stay (in days): _____

Hours you & your spouse worked on rental: _____

Small Business or Farming*Request our 2022 Business Tax Organizer for more in-depth checklist*

Nature of Business: _____

Date Business Started: _____

Which of the following expenses did your business have in 2022?

- | | |
|--|--|
| <input type="checkbox"/> Inventory Purchases | <input type="checkbox"/> Interest paid on business loans |
| <input type="checkbox"/> Contract Labor | <input type="checkbox"/> Insurance (Not Health) |
| <input type="checkbox"/> Advertising | <input type="checkbox"/> Legal & Professional Services |
| <input type="checkbox"/> Office Supplies | <input type="checkbox"/> Office/Building Rent |
| <input type="checkbox"/> Equipment Rent | <input type="checkbox"/> Repairs/Maintenance/Cleaning |
| <input type="checkbox"/> Supplies | <input type="checkbox"/> Taxes & Licenses |
| <input type="checkbox"/> Out of Town Travel | <input type="checkbox"/> Meals & Entertainment |
| <input type="checkbox"/> Utilities (not home) | <input type="checkbox"/> Wages paid to Employees |
| <input type="checkbox"/> Telephone | <input type="checkbox"/> Commissions & Fees |
| <input type="checkbox"/> Postage | <input type="checkbox"/> Employee Benefits |
| <input type="checkbox"/> Auto/Truck Expenses | <input type="checkbox"/> Pension & Profit Sharing |
| <input type="checkbox"/> Other Expenses (list) | <input type="checkbox"/> Inventory W/D for Personal Use |

Did your business:

- Yes No Use an Automobile? Type: _____
Business miles 1/1-6/30: _____ 7/1-12/31: _____;
Personal miles: _____
- Yes No Have a home office? Must be Regular & Exclusive.
Sq Ft: _____ Sq Ft of entire home: _____
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- Yes No Pay any service providers, contractors, or casual labor?
 Yes No If "Yes", would you like us to issue 1099's?
- Yes No Have Inventory on hand December 31, 2022?
- Yes No Pay wages to W-2 type employees?
- Yes No Receive EIDL, PPP, SBA Loan, etc.?
- Yes No Make or receive any loans/leases/notes or payments?
- Yes No Engage in Bartering?
- Yes No Have more than one owner?
- Yes No Is this business an LLC? If "Yes" please provide LLC Articles of Organization and Operating Agreement.

Separate Business Address: _____

Method of Accounting: Cash Accrual Other/Not SureCould this be considered a Hobby? Yes No Not Sure

How many hours did you "participate" (work) in the business operations during 2022? 500+ annual hours may be needed: _____

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Please attach additional sheets for any other information you need to provide.
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Phone: 770-704-7777 - Email: info@taxsmart1040.com

TaxSmart Business Services – 2022 Income Tax Organizer

Call (770)704-7777 to schedule an appointment. Please complete as much as possible prior to your appointment.

<p>Personal Information ~ Provide SS Cards & Driver's Licenses:</p> <p>Your Full Name: _____</p> <p>Occupation: _____ <input type="checkbox"/> Blind? <input type="checkbox"/> Disabled?</p> <p>Phone: _____</p> <p>Email: _____</p> <p>Spouse's Full Name: _____</p> <p>Occupation: _____ <input type="checkbox"/> Blind? <input type="checkbox"/> Disabled?</p> <p>Phone: _____</p> <p>Email: _____</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Sure: Do you want to file a joint return?</p>	<p>Dependent Information (Children, Parents, others):</p> <p style="text-align: center;">Provide SS Card & Proof of Residency for each dependent.</p> <p>Full Name – DOB – Relationship - College Student? - 2022 Income?</p> <p>1) _____</p> <p>_____</p> <p>2) _____</p> <p>_____</p> <p>3) _____</p> <p>_____</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Could anyone else claim any of your dependents?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Any Child Care costs? If "Yes", provide amounts paid, care provider name(s), EIN's, and address(es) for EACH dependent.</p>
<p>Regular Income: Please attach Forms W-2, 1099-Misc, 1099R, 1099-SSA, K-1, 1099G, etc. Provide details/amounts if missing forms.</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Wages, tips, etc. from job(s)? (W-2)</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Interest from banks, bonds, other? (1099-INT)</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Dividends? (1099-DIV)</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Did you receive any tax refunds in 2022?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Alimony Paid/Received? \$ _____</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Sell, buy or trade any assets, stocks, bonds, mutual funds, or other assets? (1099-B).</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Distributions from 401(k), IRA, Pension, Annuity, etc.? (1099-R)</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Spend, Receive, Sell, Exchange, Acquire, or Mine any Virtual Currency such as Bitcoin, Ethereum, etc?</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No Own any rental property including a vacation home?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Unemployment Income? (1099-G)</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Social Security Benefits? (1099-SSA)</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Gambling Income and Related Expenses? (W2G)</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Cancellation of Debt/Foreclosure? (1099-A or -C)</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Any small business income/loss from an S-Corp, Partnership, LLC, Sole Proprietor? (K-1, 1099-Misc, 1099-K)</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Did you sell anything online: Craigslist, eBay, FB Marketplace, etc. (1099K)?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Any other income, e.g. Uber/Lyft, Crowdfunding, other? Please explain:</p>
<p>General Questions:</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Direct Deposit your refund into your bank account? <i>Must attach a voided check.</i> Otherwise you will receive refund checks. Amounts due will NOT be drafted from your account.</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Did you file 2021 tax return? Provide Copy/PDF.</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Do you or your spouse owe any back taxes?</p> <p>Please note, to avoid penalty, you must pay all taxes due by April 18th. An extension only grants more time to file, not to pay.</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No Did your address change? Please attach.</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No At any time during 2022 did you have any financial interest or signature authority over a foreign financial account, including overseas gaming?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No During 2022, did you receive a distribution from, were the grantor of, or transferor to a foreign trust?</p> <p>How would you like to receive your copy of the completed tax return?</p> <p><input type="checkbox"/> Paper Copy <input type="checkbox"/> Digital/PDF Copy</p>
<p>Other Special Situations: May require detailed documentation</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Pay any Estimated Tax Payments? Please list amounts, dates, and to whom paid (GA, IRS, etc.)</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Any births or deaths in your household? Did any children cease to be your dependents in 2022?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Did your marital status change during 2022?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Did you earn income in another state or country?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Did you buy, sell or refinance (including loan modification) property in 2022? If yes, attach closing statements.</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No During 2022, were there any changes to federal or state tax returns filed in prior years? Please attach notices.</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Did you suffer a casualty or loss in 2022 in a presidentially declared disaster area? www.fema.gov/disasters</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Receive any hobby income?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Moving Expenses? (Only for active military)</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No College expenses for self, spouse or dependent?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Have any Unreimbursed Partnership Expenses in 2022?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Have an IRS IP-PIN for self, spouse, or dependent?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Did you pay any foreign taxes in 2022?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Did you adopt a child in 2022?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Did your child (under age 24) have any investment income? Please attach 1099's and/or tax return.</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No An Armed Forces Reservist, Qualified Performing Artist, or Government Fee Basis Official?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Do you have a Health Savings Account? (1099-SA)</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Pay any Household Employees such as gardeners, housekeepers, nannies, etc.?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Do you expect a substantial change in your income or deductions next year (2023)? Please attach explanation:</p>

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Self \$ _____ Spouse \$ _____
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- Yes No Are you part of a Healthcare Sharing Ministry?
- Yes No Did you pay Long Term Care Insurance premiums?
- Yes No Any out of pocket medical expenses: Doctors, Dentist, Rx, Nursing Homes, Medical Mileage, etc.? Please list.

Taxes & Interest Expenses:

- Yes No Do you own your own home?
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 Yes No Mortgage Interest/Points Paid (Form 1098)?
- Yes No Did you purchase a boat, airplane, RV, etc.?
- Yes No Annual Ad Valorem Taxes on car, boat, etc.?
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Other Miscellaneous Items:

- Yes No Install an electric vehicle charger in your home?
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- Yes No Receive an inheritance (Sch K-1)?
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- Yes No Did you contribute to a 529 College Savings Plan?
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Rental Property:

- Yes No First Placed in Service in 2022? If "Yes", please provide appraisal and settlement statements.
- Yes No Disposed/Stopped Renting during 2022?

Type of Rental: _____

Address: _____

Days Rented: _____ Days Vacant/Empty: _____

Personal use days (self, friends, family): _____

Average length of rental stay (in days): _____

Hours you & your spouse worked on rental: _____

Small Business or Farming*Request our 2022 Business Tax Organizer for more in-depth checklist*

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Date Business Started: _____

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- | | |
|--|--|
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| <input type="checkbox"/> Contract Labor | <input type="checkbox"/> Insurance (Not Health) |
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| <input type="checkbox"/> Supplies | <input type="checkbox"/> Taxes & Licenses |
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| <input type="checkbox"/> Other Expenses (list) | <input type="checkbox"/> Inventory W/D for Personal Use |

Did your business:

- Yes No Use an Automobile? Type: _____
Business miles 1/1-6/30: _____ 7/1-12/31: _____;
Personal miles: _____
- Yes No Have a home office? Must be Regular & Exclusive.
Sq Ft: _____ Sq Ft of entire home: _____
- Yes No Acquire or dispose of Tools/Equipment/Assets? *Please provide Invoice/Bill of Sale.*
- Yes No Pay any service providers, contractors, or casual labor?
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Personal Information ~ Provide SS Cards & Driver's Licenses:

Your Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Spouse's Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

1) _____

2) _____

3) _____

Yes No Could anyone else claim any of your dependents?

Yes No Any Child Care costs? If "Yes", provide amounts paid, care provider name(s), EIN's, and address(es) for EACH dependent.

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Yes No Did you receive any tax refunds in 2022?

Yes No Alimony Paid/Received? \$ _____

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Yes No Spend, Receive, Sell, Exchange, Acquire, or Mine any Virtual Currency such as Bitcoin, Ethereum, etc?

Yes No Own any rental property including a vacation home?

Yes No Unemployment Income? (1099-G)

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- Yes No After-tax Health Insurance, including Medicare?
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- Yes No Do you own your own home?
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- Yes No Mortgage Interest/Points Paid (Form 1098)?
- Yes No Did you purchase a boat, airplane, RV, etc.?
- Yes No Annual Ad Valorem Taxes on car, boat, etc.?
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Gifts to Charity *Documentation required for all donations:*

- Yes No Cash/Checks/Money etc.
- Yes No Non-Cash Gifts i.e. Household items to Goodwill?
- Yes No Miles driven for charity?
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- Yes No Qualified Charitable Distribution from IRA.

Other Miscellaneous Items:

- Yes No Install an electric vehicle charger in your home?
- Yes No Rollover \$\$\$ from an IRA, 401(k), Annuity, etc.?
- Yes No Receive an inheritance (Sch K-1)?
- Yes No Make gifts totaling \geq \$16,000 to one person?
- Yes No Did you contribute to a 529 College Savings Plan?
- Yes No Unreimbursed Educator Expenses (K-12 only)?

Rental Property:

- Yes No First Placed in Service in 2022? If "Yes", please provide appraisal and settlement statements.
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Type of Rental: _____

Address: _____

Days Rented: _____ Days Vacant/Empty: _____

Personal use days (self, friends, family): _____

Average length of rental stay (in days): _____

Hours you & your spouse worked on rental: _____

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Which of the following expenses did your business have in 2022?

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| <input type="checkbox"/> Office Supplies | <input type="checkbox"/> Office/Building Rent |
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| <input type="checkbox"/> Supplies | <input type="checkbox"/> Taxes & Licenses |
| <input type="checkbox"/> Out of Town Travel | <input type="checkbox"/> Meals & Entertainment |
| <input type="checkbox"/> Utilities (not home) | <input type="checkbox"/> Wages paid to Employees |
| <input type="checkbox"/> Telephone | <input type="checkbox"/> Commissions & Fees |
| <input type="checkbox"/> Postage | <input type="checkbox"/> Employee Benefits |
| <input type="checkbox"/> Auto/Truck Expenses | <input type="checkbox"/> Pension & Profit Sharing |
| <input type="checkbox"/> Other Expenses (list) | <input type="checkbox"/> Inventory W/D for Personal Use |

Did your business:

- Yes No Use an Automobile? Type: _____
Business miles 1/1-6/30: _____ 7/1-12/31: _____;
Personal miles: _____
- Yes No Have a home office? Must be Regular & Exclusive.
Sq Ft: _____ Sq Ft of entire home: _____
- Yes No Acquire or dispose of Tools/Equipment/Assets? *Please provide Invoice/Bill of Sale.*
- Yes No Pay any service providers, contractors, or casual labor?
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- Yes No Have Inventory on hand December 31, 2022?
- Yes No Pay wages to W-2 type employees?
- Yes No Receive EIDL, PPP, SBA Loan, etc.?
- Yes No Make or receive any loans/leases/notes or payments?
- Yes No Engage in Bartering?
- Yes No Have more than one owner?
- Yes No Is this business an LLC? If "Yes" please provide LLC Articles of Organization and Operating Agreement.

Separate Business Address: _____

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How many hours did you "participate" (work) in the business operations during 2022? 500+ annual hours may be needed: _____

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Personal Information ~ Provide SS Cards & Driver's Licenses:

Your Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Spouse's Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

1) _____

2) _____

3) _____

Yes No Could anyone else claim any of your dependents?

Yes No Any Child Care costs? If "Yes", provide amounts paid, care provider name(s), EIN's, and address(es) for EACH dependent.

Regular Income: Please attach Forms W-2, 1099-Misc, 1099R, 1099-SSA, K-1, 1099G, etc. Provide details/amounts if missing forms.

Yes No Wages, tips, etc. from job(s)? (W-2)

Yes No Interest from banks, bonds, other? (1099-INT)

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Yes No Did you receive any tax refunds in 2022?

Yes No Alimony Paid/Received? \$ _____

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Yes No Spend, Receive, Sell, Exchange, Acquire, or Mine any Virtual Currency such as Bitcoin, Ethereum, etc?

Yes No Own any rental property including a vacation home?

Yes No Unemployment Income? (1099-G)

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Please note, to avoid penalty, you must pay all taxes due by April 18th. An extension only grants more time to file, not to pay.

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<p>Personal Information ~ Provide SS Cards & Driver's Licenses:</p> <p>Your Full Name: _____</p> <p>Occupation: _____ <input type="checkbox"/> Blind? <input type="checkbox"/> Disabled?</p> <p>Phone: _____</p> <p>Email: _____</p> <p>Spouse's Full Name: _____</p> <p>Occupation: _____ <input type="checkbox"/> Blind? <input type="checkbox"/> Disabled?</p> <p>Phone: _____</p> <p>Email: _____</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Sure: Do you want to file a joint return?</p>	<p>Dependent Information (Children, Parents, others):</p> <p style="text-align: center;">Provide SS Card & Proof of Residency for each dependent.</p> <p>Full Name – DOB – Relationship - College Student? - 2022 Income?</p> <p>1) _____</p> <p>2) _____</p> <p>3) _____</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Could anyone else claim any of your dependents?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Any Child Care costs? If "Yes", provide amounts paid, care provider name(s), EIN's, and address(es) for EACH dependent.</p>
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(Continued on reverse)

Expenses/Deductions:

- Yes No IRA Contribution: Traditional Roth SEP Other
Self \$ _____ Spouse \$ _____
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- Yes No Student Loan interest paid? _____

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- Yes No After-tax Health Insurance, including Medicare?
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- Yes No Are you part of a Healthcare Sharing Ministry?
- Yes No Did you pay Long Term Care Insurance premiums?
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Taxes & Interest Expenses:

- Yes No Do you own your own home?
- Yes No Real Estate Taxes (Form 1098 or other)?
- Yes No Mortgage Interest/Points Paid (Form 1098)?
- Yes No Did you purchase a boat, airplane, RV, etc.?
- Yes No Annual Ad Valorem Taxes on car, boat, etc.?
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Gifts to Charity *Documentation required for all donations:*

- Yes No Cash/Checks/Money etc.
- Yes No Non-Cash Gifts i.e. Household items to Goodwill?
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- Yes No Qualified Charitable Distribution from IRA.

Other Miscellaneous Items:

- Yes No Install an electric vehicle charger in your home?
- Yes No Rollover \$\$\$ from an IRA, 401(k), Annuity, etc.?
- Yes No Receive an inheritance (Sch K-1)?
- Yes No Make gifts totaling \geq \$16,000 to one person?
- Yes No Did you contribute to a 529 College Savings Plan?
- Yes No Unreimbursed Educator Expenses (K-12 only)?

Rental Property:

- Yes No First Placed in Service in 2022? If "Yes", please provide appraisal and settlement statements.
- Yes No Disposed/Stopped Renting during 2022?

Type of Rental: _____

Address: _____

Days Rented: _____ Days Vacant/Empty: _____

Personal use days (self, friends, family): _____

Average length of rental stay (in days): _____

Hours you & your spouse worked on rental: _____

Small Business or Farming*Request our 2022 Business Tax Organizer for more in-depth checklist*

Nature of Business: _____

Date Business Started: _____

Which of the following expenses did your business have in 2022?

- | | |
|--|--|
| <input type="checkbox"/> Inventory Purchases | <input type="checkbox"/> Interest paid on business loans |
| <input type="checkbox"/> Contract Labor | <input type="checkbox"/> Insurance (Not Health) |
| <input type="checkbox"/> Advertising | <input type="checkbox"/> Legal & Professional Services |
| <input type="checkbox"/> Office Supplies | <input type="checkbox"/> Office/Building Rent |
| <input type="checkbox"/> Equipment Rent | <input type="checkbox"/> Repairs/Maintenance/Cleaning |
| <input type="checkbox"/> Supplies | <input type="checkbox"/> Taxes & Licenses |
| <input type="checkbox"/> Out of Town Travel | <input type="checkbox"/> Meals & Entertainment |
| <input type="checkbox"/> Utilities (not home) | <input type="checkbox"/> Wages paid to Employees |
| <input type="checkbox"/> Telephone | <input type="checkbox"/> Commissions & Fees |
| <input type="checkbox"/> Postage | <input type="checkbox"/> Employee Benefits |
| <input type="checkbox"/> Auto/Truck Expenses | <input type="checkbox"/> Pension & Profit Sharing |
| <input type="checkbox"/> Other Expenses (list) | <input type="checkbox"/> Inventory W/D for Personal Use |

Did your business:

- Yes No Use an Automobile? Type: _____
Business miles 1/1-6/30: _____ 7/1-12/31: _____;
Personal miles: _____
- Yes No Have a home office? Must be Regular & Exclusive.
Sq Ft: _____ Sq Ft of entire home: _____
- Yes No Acquire or dispose of Tools/Equipment/Assets? *Please provide Invoice/Bill of Sale.*
- Yes No Pay any service providers, contractors, or casual labor?
 Yes No If "Yes", would you like us to issue 1099's?
- Yes No Have Inventory on hand December 31, 2022?
- Yes No Pay wages to W-2 type employees?
- Yes No Receive EIDL, PPP, SBA Loan, etc.?
- Yes No Make or receive any loans/leases/notes or payments?
- Yes No Engage in Bartering?
- Yes No Have more than one owner?
- Yes No Is this business an LLC? If "Yes" please provide LLC Articles of Organization and Operating Agreement.

Separate Business Address: _____

Method of Accounting: Cash Accrual Other/Not SureCould this be considered a Hobby? Yes No Not Sure

How many hours did you "participate" (work) in the business operations during 2022? 500+ annual hours may be needed: _____

*Celebrating
21 Years!
2002 - 2023*

Please attach additional sheets for any other information you need to provide.
TaxSmart Business Services - (125 Barrett Road) PO Box 280, Holly Springs, GA, 30142

Phone: 770-704-7777 - Email: info@taxsmart1040.com

TaxSmart Business Services – 2022 Income Tax Organizer

Call (770)704-7777 to schedule an appointment. Please complete as much as possible prior to your appointment.

Personal Information ~ Provide SS Cards & Driver's Licenses:

Your Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Spouse's Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

1) _____

2) _____

3) _____

Yes No Could anyone else claim any of your dependents?

Yes No Any Child Care costs? If "Yes", provide amounts paid, care provider name(s), EIN's, and address(es) for EACH dependent.

Regular Income: Please attach Forms W-2, 1099-Misc, 1099R, 1099-SSA, K-1, 1099G, etc. Provide details/amounts if missing forms.

Yes No Wages, tips, etc. from job(s)? (W-2)

Yes No Interest from banks, bonds, other? (1099-INT)

Yes No Dividends? (1099-DIV)

Yes No Did you receive any tax refunds in 2022?

Yes No Alimony Paid/Received? \$ _____

Yes No Sell, buy or trade any assets, stocks, bonds, mutual funds, or other assets? (1099-B).

Yes No Distributions from 401(k), IRA, Pension, Annuity, etc.? (1099-R)

Yes No Spend, Receive, Sell, Exchange, Acquire, or Mine any Virtual Currency such as Bitcoin, Ethereum, etc?

Yes No Own any rental property including a vacation home?

Yes No Unemployment Income? (1099-G)

Yes No Social Security Benefits? (1099-SSA)

Yes No Gambling Income and Related Expenses? (W2G)

Yes No Cancellation of Debt/Foreclosure? (1099-A or -C)

Yes No Any small business income/loss from an S-Corp, Partnership, LLC, Sole Proprietor? (K-1, 1099-Misc, 1099-K)

Yes No Did you sell anything online: Craigslist, eBay, FB Marketplace, etc. (1099K)?

Yes No Any other income, e.g. Uber/Lyft, Crowdfunding, other? Please explain:

General Questions:

Yes No Direct Deposit your refund into your bank account? *Must attach a voided check.* Otherwise you will receive refund checks. Amounts due will NOT be drafted from your account.

Yes No Did you file 2021 tax return? **Provide Copy/PDF.**

Yes No Do you or your spouse owe any back taxes?

Please note, to avoid penalty, you must pay all taxes due by April 18th. An extension only grants more time to file, not to pay.

Other Special Situations: May require detailed documentation

Yes No Pay any Estimated Tax Payments? Please list amounts, dates, and to whom paid (GA, IRS, etc.)

Yes No Any births or deaths in your household? Did any children cease to be your dependents in 2022?

Yes No Did your marital status change during 2022?

Yes No Did you earn income in another state or country?

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Yes No Did you suffer a casualty or loss in 2022 in a presidentially declared disaster area? www.fema.gov/disasters

Yes No Receive any hobby income?

Yes No Moving Expenses? (Only for active military)

Yes No Did your address change? Please attach.

Yes No At any time during 2022 did you have any financial interest or signature authority over a foreign financial account, including overseas gaming?

Yes No During 2022, did you receive a distribution from, were the grantor of, or transferor to a foreign trust?

How would you like to receive your copy of the completed tax return?

Paper Copy Digital/PDF Copy

Yes No College expenses for self, spouse or dependent?

Yes No Have any Unreimbursed Partnership Expenses in 2022?

Yes No Have an IRS IP-PIN for self, spouse, or dependent?

Yes No Did you pay any foreign taxes in 2022?

Yes No Did you adopt a child in 2022?

Yes No Did your child (under age 24) have any investment income? Please attach 1099's and/or tax return.

Yes No An Armed Forces Reservist, Qualified Performing Artist, or Government Fee Basis Official?

Yes No Do you have a Health Savings Account? (1099-SA)

Yes No Pay any Household Employees such as gardeners, housekeepers, nannies, etc.?

Yes No Do you expect a substantial change in your income or deductions next year (2023)? Please attach explanation:

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Expenses/Deductions:

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Self \$ _____ Spouse \$ _____

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Yes No Student Loan interest paid? _____

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Yes No After-tax Health Insurance, including Medicare?

Yes No Did anyone in your family receive health insurance from HealthCare.gov or other state run Marketplace? (Form 1095)

Yes No Are you part of a Healthcare Sharing Ministry?

Yes No Did you pay Long Term Care Insurance premiums?

Yes No Any out of pocket medical expenses: Doctors, Dentist, Rx, Nursing Homes, Medical Mileage, etc.? Please list.

Taxes & Interest Expenses:

Yes No Do you own your own home?

Yes No Real Estate Taxes (Form 1098 or other)?

Yes No Mortgage Interest/Points Paid (Form 1098)?

Yes No Did you purchase a boat, airplane, RV, etc.?

Yes No Annual Ad Valorem Taxes on car, boat, etc.?

Yes No Other State, County, City or Local Taxes?

Yes No Investment Interest paid? Other Interest Paid?

Gifts to Charity *Documentation required for all donations:*

Yes No Cash/Checks/Money etc.

Yes No Non-Cash Gifts i.e. Household items to Goodwill?

Yes No Miles driven for charity?

Yes No Payroll Deductions of Charity, Union Dues, other?

Yes No Qualified Charitable Distribution from IRA.

Other Miscellaneous Items:

Yes No Install an electric vehicle charger in your home?

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Yes No Make gifts totaling \geq \$16,000 to one person?

Yes No Did you contribute to a 529 College Savings Plan?

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Yes No First Placed in Service in 2022? If "Yes", please provide appraisal and settlement statements.

Yes No Disposed/Stopped Renting during 2022?

Type of Rental: _____

Address: _____

Days Rented: _____ Days Vacant/Empty: _____

Personal use days (self, friends, family): _____

Average length of rental stay (in days): _____

Hours you & your spouse worked on rental: _____

Small Business or Farming

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Nature of Business: _____

Date Business Started: _____

Which of the following expenses did your business have in 2022?

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Contract Labor Insurance (Not Health)

Advertising Legal & Professional Services

Office Supplies Office/Building Rent

Equipment Rent Repairs/Maintenance/Cleaning

Supplies Taxes & Licenses

Out of Town Travel Meals & Entertainment

Utilities (not home) Wages paid to Employees

Telephone Commissions & Fees

Postage Employee Benefits

Auto/Truck Expenses Pension & Profit Sharing

Other Expenses (list) Inventory W/D for Personal Use

Did your business:

Yes No Use an Automobile? Type: _____
Business miles 1/1-6/30: _____ 7/1-12/31: _____;

Personal miles: _____

Yes No Have a home office? Must be Regular & Exclusive.

Sq Ft: _____ Sq Ft of entire home: _____

Yes No Acquire or dispose of Tools/Equipment/Assets? *Please provide Invoice/Bill of Sale.*

Yes No Pay any service providers, contractors, or casual labor?

Yes No If "Yes", would you like us to issue 1099's?

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Could this be considered a Hobby? Yes No Not Sure

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- Yes No Have more than one owner?
- Yes No Is this business an LLC? If "Yes" please provide LLC Articles of Organization and Operating Agreement.

Separate Business Address: _____

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Phone: 770-704-7777 - Email: info@taxsmart1040.com

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Call (770)704-7777 to schedule an appointment. Please complete as much as possible prior to your appointment.

Personal Information ~ Provide SS Cards & Driver's Licenses:

Your Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Spouse's Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

1) _____

2) _____

3) _____

Yes No Could anyone else claim any of your dependents?

Yes No Any Child Care costs? If "Yes", provide amounts paid, care provider name(s), EIN's, and address(es) for EACH dependent.

Regular Income: Please attach Forms W-2, 1099-Misc, 1099R, 1099-SSA, K-1, 1099G, etc. Provide details/amounts if missing forms.

Yes No Wages, tips, etc. from job(s)? (W-2)

Yes No Interest from banks, bonds, other? (1099-INT)

Yes No Dividends? (1099-DIV)

Yes No Did you receive any tax refunds in 2022?

Yes No Alimony Paid/Received? \$ _____

Yes No Sell, buy or trade any assets, stocks, bonds, mutual funds, or other assets? (1099-B).

Yes No Distributions from 401(k), IRA, Pension, Annuity, etc.? (1099-R)

Yes No Spend, Receive, Sell, Exchange, Acquire, or Mine any Virtual Currency such as Bitcoin, Ethereum, etc?

Yes No Own any rental property including a vacation home?

Yes No Unemployment Income? (1099-G)

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General Questions:

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Please note, to avoid penalty, you must pay all taxes due by April 18th. An extension only grants more time to file, not to pay.

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Yes No Pay any Estimated Tax Payments? Please list amounts, dates, and to whom paid (GA, IRS, etc.)

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Personal Information ~ Provide SS Cards & Driver's Licenses:

Your Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Spouse's Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

1) _____

2) _____

3) _____

Yes No Could anyone else claim any of your dependents?

Yes No Any Child Care costs? If "Yes", provide amounts paid, care provider name(s), EIN's, and address(es) for EACH dependent.

Regular Income: Please attach Forms W-2, 1099-Misc, 1099R, 1099-SSA, K-1, 1099G, etc. Provide details/amounts if missing forms.

Yes No Wages, tips, etc. from job(s)? (W-2)

Yes No Interest from banks, bonds, other? (1099-INT)

Yes No Dividends? (1099-DIV)

Yes No Did you receive any tax refunds in 2022?

Yes No Alimony Paid/Received? \$ _____

Yes No Sell, buy or trade any assets, stocks, bonds, mutual funds, or other assets? (1099-B).

Yes No Distributions from 401(k), IRA, Pension, Annuity, etc.? (1099-R)

Yes No Spend, Receive, Sell, Exchange, Acquire, or Mine any Virtual Currency such as Bitcoin, Ethereum, etc?

Yes No Own any rental property including a vacation home?

Yes No Unemployment Income? (1099-G)

Yes No Social Security Benefits? (1099-SSA)

Yes No Gambling Income and Related Expenses? (W2G)

Yes No Cancellation of Debt/Foreclosure? (1099-A or -C)

Yes No Any small business income/loss from an S-Corp, Partnership, LLC, Sole Proprietor? (K-1, 1099-Misc, 1099-K)

Yes No Did you sell anything online: Craigslist, eBay, FB Marketplace, etc. (1099K)?

Yes No Any other income, e.g. Uber/Lyft, Crowdfunding, other? Please explain:

General Questions:

Yes No Direct Deposit your refund into your bank account? *Must attach a voided check.* Otherwise you will receive refund checks. Amounts due will NOT be drafted from your account.

Yes No Did you file 2021 tax return? **Provide Copy/PDF.**

Yes No Do you or your spouse owe any back taxes?

Please note, to avoid penalty, you must pay all taxes due by April 18th. An extension only grants more time to file, not to pay.

Yes No Did your address change? Please attach.

Yes No At any time during 2022 did you have any financial interest or signature authority over a foreign financial account, including overseas gaming?

Yes No During 2022, did you receive a distribution from, were the grantor of, or transferor to a foreign trust?

How would you like to receive your copy of the completed tax return?

Paper Copy Digital/PDF Copy

Other Special Situations: May require detailed documentation

Yes No Pay any Estimated Tax Payments? Please list amounts, dates, and to whom paid (GA, IRS, etc.)

Yes No Any births or deaths in your household? Did any children cease to be your dependents in 2022?

Yes No Did your marital status change during 2022?

Yes No Did you earn income in another state or country?

Yes No Did you buy, sell or refinance (including loan modification) property in 2022? If yes, attach closing statements.

Yes No During 2022, were there any changes to federal or state tax returns filed in prior years? Please attach notices.

Yes No Did you suffer a casualty or loss in 2022 in a presidentially declared disaster area? www.fema.gov/disasters

Yes No Receive any hobby income?

Yes No Moving Expenses? (Only for active military)

Yes No College expenses for self, spouse or dependent?

Yes No Have any Unreimbursed Partnership Expenses in 2022?

Yes No Have an IRS IP-PIN for self, spouse, or dependent?

Yes No Did you pay any foreign taxes in 2022?

Yes No Did you adopt a child in 2022?

Yes No Did your child (under age 24) have any investment income? Please attach 1099's and/or tax return.

Yes No An Armed Forces Reservist, Qualified Performing Artist, or Government Fee Basis Official?

Yes No Do you have a Health Savings Account? (1099-SA)

Yes No Pay any Household Employees such as gardeners, housekeepers, nannies, etc.?

Yes No Do you expect a substantial change in your income or deductions next year (2023)? Please attach explanation:

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Expenses/Deductions:

- Yes No IRA Contribution: Traditional Roth SEP Other
Self \$ _____ Spouse \$ _____
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- Yes No After-tax Health Insurance, including Medicare?
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Taxes & Interest Expenses:

- Yes No Do you own your own home?
- Yes No Real Estate Taxes (Form 1098 or other)?
- Yes No Mortgage Interest/Points Paid (Form 1098)?
- Yes No Did you purchase a boat, airplane, RV, etc.?
- Yes No Annual Ad Valorem Taxes on car, boat, etc.?
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Gifts to Charity *Documentation required for all donations:*

- Yes No Cash/Checks/Money etc.
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Other Miscellaneous Items:

- Yes No Install an electric vehicle charger in your home?
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- Yes No Did you contribute to a 529 College Savings Plan?
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Rental Property:

- Yes No First Placed in Service in 2022? If "Yes", please provide appraisal and settlement statements.
- Yes No Disposed/Stopped Renting during 2022?

Type of Rental: _____

Address: _____

Days Rented: _____ Days Vacant/Empty: _____

Personal use days (self, friends, family): _____

Average length of rental stay (in days): _____

Hours you & your spouse worked on rental: _____

Small Business or Farming*Request our 2022 Business Tax Organizer for more in-depth checklist*

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Date Business Started: _____

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| <input type="checkbox"/> Other Expenses (list) | <input type="checkbox"/> Inventory W/D for Personal Use |

Did your business:

- Yes No Use an Automobile? Type: _____
Business miles 1/1-6/30: _____ 7/1-12/31: _____;
Personal miles: _____
- Yes No Have a home office? Must be Regular & Exclusive.
Sq Ft: _____ Sq Ft of entire home: _____
- Yes No Acquire or dispose of Tools/Equipment/Assets? *Please provide Invoice/Bill of Sale.*
- Yes No Pay any service providers, contractors, or casual labor?
 Yes No If "Yes", would you like us to issue 1099's?
- Yes No Have Inventory on hand December 31, 2022?
- Yes No Pay wages to W-2 type employees?
- Yes No Receive EIDL, PPP, SBA Loan, etc.?
- Yes No Make or receive any loans/leases/notes or payments?
- Yes No Engage in Bartering?
- Yes No Have more than one owner?
- Yes No Is this business an LLC? If "Yes" please provide LLC Articles of Organization and Operating Agreement.

Separate Business Address: _____

Method of Accounting: Cash Accrual Other/Not SureCould this be considered a Hobby? Yes No Not Sure

How many hours did you "participate" (work) in the business operations during 2022? 500+ annual hours may be needed: _____

*Celebrating
21 Years!
2002 - 2023*

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<p>Other Special Situations: May require detailed documentation</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Pay any Estimated Tax Payments? Please list amounts, dates, and to whom paid (GA, IRS, etc.)</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Any births or deaths in your household? Did any children cease to be your dependents in 2022?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Did your marital status change during 2022?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Did you earn income in another state or country?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Did you buy, sell or refinance (including loan modification) property in 2022? If yes, attach closing statements.</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No During 2022, were there any changes to federal or state tax returns filed in prior years? Please attach notices.</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Did you suffer a casualty or loss in 2022 in a presidentially declared disaster area? www.fema.gov/disasters</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Receive any hobby income?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Moving Expenses? (Only for active military)</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No College expenses for self, spouse or dependent?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Have any Unreimbursed Partnership Expenses in 2022?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Have an IRS IP-PIN for self, spouse, or dependent?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Did you pay any foreign taxes in 2022?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Did you adopt a child in 2022?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Did your child (under age 24) have any investment income? Please attach 1099's and/or tax return.</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No An Armed Forces Reservist, Qualified Performing Artist, or Government Fee Basis Official?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Do you have a Health Savings Account? (1099-SA)</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Pay any Household Employees such as gardeners, housekeepers, nannies, etc.?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Do you expect a substantial change in your income or deductions next year (2023)? Please attach explanation:</p>

(Continued on reverse)

Expenses/Deductions:

- Yes No IRA Contribution: Traditional Roth SEP Other
Self \$ _____ Spouse \$ _____
- Yes No Penalty on early withdrawal from CD? \$ _____
- Yes No Student Loan interest paid? _____

Medical Expenses:

- Yes No After-tax Health Insurance, including Medicare?
- Yes No Did anyone in your family receive health insurance from HealthCare.gov or other state run Marketplace? (Form 1095)
- Yes No Are you part of a Healthcare Sharing Ministry?
- Yes No Did you pay Long Term Care Insurance premiums?
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Taxes & Interest Expenses:

- Yes No Do you own your own home?
- Yes No Real Estate Taxes (Form 1098 or other)?
- Yes No Mortgage Interest/Points Paid (Form 1098)?
- Yes No Did you purchase a boat, airplane, RV, etc.?
- Yes No Annual Ad Valorem Taxes on car, boat, etc.?
- Yes No Other State, County, City or Local Taxes?
- Yes No Investment Interest paid? Other Interest Paid?

Gifts to Charity *Documentation required for all donations:*

- Yes No Cash/Checks/Money etc.
- Yes No Non-Cash Gifts i.e. Household items to Goodwill?
- Yes No Miles driven for charity?
- Yes No Payroll Deductions of Charity, Union Dues, other?
- Yes No Qualified Charitable Distribution from IRA.

Other Miscellaneous Items:

- Yes No Install an electric vehicle charger in your home?
- Yes No Rollover \$\$\$ from an IRA, 401(k), Annuity, etc.?
- Yes No Receive an inheritance (Sch K-1)?
- Yes No Make gifts totaling \geq \$16,000 to one person?
- Yes No Did you contribute to a 529 College Savings Plan?
- Yes No Unreimbursed Educator Expenses (K-12 only)?

Rental Property:

- Yes No First Placed in Service in 2022? If "Yes", please provide appraisal and settlement statements.
- Yes No Disposed/Stopped Renting during 2022?

Type of Rental: _____

Address: _____

Days Rented: _____ Days Vacant/Empty: _____

Personal use days (self, friends, family): _____

Average length of rental stay (in days): _____

Hours you & your spouse worked on rental: _____

Small Business or Farming*Request our 2022 Business Tax Organizer for more in-depth checklist*

Nature of Business: _____

Date Business Started: _____

Which of the following expenses did your business have in 2022?

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Did your business:

- Yes No Use an Automobile? Type: _____
Business miles 1/1-6/30: _____ 7/1-12/31: _____;
Personal miles: _____
- Yes No Have a home office? Must be Regular & Exclusive.
Sq Ft: _____ Sq Ft of entire home: _____
- Yes No Acquire or dispose of Tools/Equipment/Assets? *Please provide Invoice/Bill of Sale.*
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| <input type="checkbox"/> Postage | <input type="checkbox"/> Employee Benefits |
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- Yes No Use an Automobile? Type: _____
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Sq Ft: _____ Sq Ft of entire home: _____
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- Yes No Pay any service providers, contractors, or casual labor?
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- Yes No Have Inventory on hand December 31, 2022?
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<p>Personal Information ~ Provide SS Cards & Driver's Licenses:</p> <p>Your Full Name: _____</p> <p>Occupation: _____ <input type="checkbox"/> Blind? <input type="checkbox"/> Disabled?</p> <p>Phone: _____</p> <p>Email: _____</p> <p>Spouse's Full Name: _____</p> <p>Occupation: _____ <input type="checkbox"/> Blind? <input type="checkbox"/> Disabled?</p> <p>Phone: _____</p> <p>Email: _____</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Sure: Do you want to file a joint return?</p>	<p>Dependent Information (Children, Parents, others):</p> <p style="text-align: center;">Provide SS Card & Proof of Residency for each dependent.</p> <p>Full Name – DOB – Relationship - College Student? - 2022 Income?</p> <p>1) _____</p> <p>2) _____</p> <p>3) _____</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Could anyone else claim any of your dependents?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Any Child Care costs? If "Yes", provide amounts paid, care provider name(s), EIN's, and address(es) for EACH dependent.</p>
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Expenses/Deductions:

- Yes No IRA Contribution: Traditional Roth SEP Other
Self \$ _____ Spouse \$ _____
- Yes No Penalty on early withdrawal from CD? \$ _____
- Yes No Student Loan interest paid? _____

Medical Expenses:

- Yes No After-tax Health Insurance, including Medicare?
- Yes No Did anyone in your family receive health insurance from HealthCare.gov or other state run Marketplace? (Form 1095)
- Yes No Are you part of a Healthcare Sharing Ministry?
- Yes No Did you pay Long Term Care Insurance premiums?
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Taxes & Interest Expenses:

- Yes No Do you own your own home?
- Yes No Real Estate Taxes (Form 1098 or other)?
- Yes No Mortgage Interest/Points Paid (Form 1098)?
- Yes No Did you purchase a boat, airplane, RV, etc.?
- Yes No Annual Ad Valorem Taxes on car, boat, etc.?
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Gifts to Charity *Documentation required for all donations:*

- Yes No Cash/Checks/Money etc.
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- Yes No Miles driven for charity?
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- Yes No Qualified Charitable Distribution from IRA.

Other Miscellaneous Items:

- Yes No Install an electric vehicle charger in your home?
- Yes No Rollover \$\$\$ from an IRA, 401(k), Annuity, etc.?
- Yes No Receive an inheritance (Sch K-1)?
- Yes No Make gifts totaling \geq \$16,000 to one person?
- Yes No Did you contribute to a 529 College Savings Plan?
- Yes No Unreimbursed Educator Expenses (K-12 only)?

Rental Property:

- Yes No First Placed in Service in 2022? If "Yes", please provide appraisal and settlement statements.
- Yes No Disposed/Stopped Renting during 2022?

Type of Rental: _____

Address: _____

Days Rented: _____ Days Vacant/Empty: _____

Personal use days (self, friends, family): _____

Average length of rental stay (in days): _____

Hours you & your spouse worked on rental: _____

Small Business or Farming*Request our 2022 Business Tax Organizer for more in-depth checklist*

Nature of Business: _____

Date Business Started: _____

Which of the following expenses did your business have in 2022?

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|--|--|
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| <input type="checkbox"/> Advertising | <input type="checkbox"/> Legal & Professional Services |
| <input type="checkbox"/> Office Supplies | <input type="checkbox"/> Office/Building Rent |
| <input type="checkbox"/> Equipment Rent | <input type="checkbox"/> Repairs/Maintenance/Cleaning |
| <input type="checkbox"/> Supplies | <input type="checkbox"/> Taxes & Licenses |
| <input type="checkbox"/> Out of Town Travel | <input type="checkbox"/> Meals & Entertainment |
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Separate Business Address: _____

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How many hours did you "participate" (work) in the business operations during 2022? 500+ annual hours may be needed: _____

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Call (770)704-7777 to schedule an appointment. Please complete as much as possible prior to your appointment.

Personal Information ~ Provide SS Cards & Driver's Licenses:

Your Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Spouse's Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

1) _____

2) _____

3) _____

Yes No Could anyone else claim any of your dependents?

Yes No Any Child Care costs? If "Yes", provide amounts paid, care provider name(s), EIN's, and address(es) for EACH dependent.

Regular Income: Please attach Forms W-2, 1099-Misc, 1099R, 1099-SSA, K-1, 1099G, etc. Provide details/amounts if missing forms.

Yes No Wages, tips, etc. from job(s)? (W-2)

Yes No Interest from banks, bonds, other? (1099-INT)

Yes No Dividends? (1099-DIV)

Yes No Did you receive any tax refunds in 2022?

Yes No Alimony Paid/Received? \$ _____

Yes No Sell, buy or trade any assets, stocks, bonds, mutual funds, or other assets? (1099-B).

Yes No Distributions from 401(k), IRA, Pension, Annuity, etc.? (1099-R)

Yes No Spend, Receive, Sell, Exchange, Acquire, or Mine any Virtual Currency such as Bitcoin, Ethereum, etc?

Yes No Own any rental property including a vacation home?

Yes No Unemployment Income? (1099-G)

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General Questions:

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Please note, to avoid penalty, you must pay all taxes due by April 18th. An extension only grants more time to file, not to pay.

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How would you like to receive your copy of the completed tax return?

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- Yes No Qualified Charitable Distribution from IRA.

Other Miscellaneous Items:

- Yes No Install an electric vehicle charger in your home?
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- Yes No Unreimbursed Educator Expenses (K-12 only)?

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- Yes No First Placed in Service in 2022? If "Yes", please provide appraisal and settlement statements.
- Yes No Disposed/Stopped Renting during 2022?

Type of Rental: _____

Address: _____

Days Rented: _____ Days Vacant/Empty: _____

Personal use days (self, friends, family): _____

Average length of rental stay (in days): _____

Hours you & your spouse worked on rental: _____

Small Business or Farming*Request our 2022 Business Tax Organizer for more in-depth checklist*

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Which of the following expenses did your business have in 2022?

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| <input type="checkbox"/> Advertising | <input type="checkbox"/> Legal & Professional Services |
| <input type="checkbox"/> Office Supplies | <input type="checkbox"/> Office/Building Rent |
| <input type="checkbox"/> Equipment Rent | <input type="checkbox"/> Repairs/Maintenance/Cleaning |
| <input type="checkbox"/> Supplies | <input type="checkbox"/> Taxes & Licenses |
| <input type="checkbox"/> Out of Town Travel | <input type="checkbox"/> Meals & Entertainment |
| <input type="checkbox"/> Utilities (not home) | <input type="checkbox"/> Wages paid to Employees |
| <input type="checkbox"/> Telephone | <input type="checkbox"/> Commissions & Fees |
| <input type="checkbox"/> Postage | <input type="checkbox"/> Employee Benefits |
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Did your business:

- Yes No Use an Automobile? Type: _____
Business miles 1/1-6/30: _____ 7/1-12/31: _____;
Personal miles: _____
- Yes No Have a home office? Must be Regular & Exclusive.
Sq Ft: _____ Sq Ft of entire home: _____
- Yes No Acquire or dispose of Tools/Equipment/Assets? *Please provide Invoice/Bill of Sale.*
- Yes No Pay any service providers, contractors, or casual labor?
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- Yes No Have more than one owner?
- Yes No Is this business an LLC? If "Yes" please provide LLC Articles of Organization and Operating Agreement.

Separate Business Address: _____

Method of Accounting: Cash Accrual Other/Not SureCould this be considered a Hobby? Yes No Not Sure

How many hours did you "participate" (work) in the business operations during 2022? 500+ annual hours may be needed: _____

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Personal Information ~ Provide SS Cards & Driver's Licenses:

Your Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Spouse's Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

1) _____

2) _____

3) _____

Yes No Could anyone else claim any of your dependents?

Yes No Any Child Care costs? If "Yes", provide amounts paid, care provider name(s), EIN's, and address(es) for EACH dependent.

Regular Income: Please attach Forms W-2, 1099-Misc, 1099R, 1099-SSA, K-1, 1099G, etc. Provide details/amounts if missing forms.

Yes No Wages, tips, etc. from job(s)? (W-2)

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Yes No Spend, Receive, Sell, Exchange, Acquire, or Mine any Virtual Currency such as Bitcoin, Ethereum, etc?

Yes No Own any rental property including a vacation home?

Yes No Unemployment Income? (1099-G)

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Phone: _____

Email: _____

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Which of the following expenses did your business have in 2022?

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Did your business:

- Yes No Use an Automobile? Type: _____
Business miles 1/1-6/30: _____ 7/1-12/31: _____;
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Sq Ft: _____ Sq Ft of entire home: _____
- Yes No Acquire or dispose of Tools/Equipment/Assets? *Please provide Invoice/Bill of Sale.*
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- Yes No Have more than one owner?
- Yes No Is this business an LLC? If "Yes" please provide LLC Articles of Organization and Operating Agreement.

Separate Business Address: _____

Method of Accounting: Cash Accrual Other/Not SureCould this be considered a Hobby? Yes No Not Sure

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Phone: 770-704-7777 - Email: info@taxsmart1040.com

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Personal Information ~ Provide SS Cards & Driver's Licenses:

Your Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Spouse's Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

1) _____

2) _____

3) _____

Yes No Could anyone else claim any of your dependents?

Yes No Any Child Care costs? If "Yes", provide amounts paid, care provider name(s), EIN's, and address(es) for EACH dependent.

Regular Income: Please attach Forms W-2, 1099-Misc, 1099R, 1099-SSA, K-1, 1099G, etc. Provide details/amounts if missing forms.

Yes No Wages, tips, etc. from job(s)? (W-2)

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Yes No Own any rental property including a vacation home?

Yes No Unemployment Income? (1099-G)

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General Questions:

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Please note, to avoid penalty, you must pay all taxes due by April 18th. An extension only grants more time to file, not to pay.

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Yes No Pay any Household Employees such as gardeners, housekeepers, nannies, etc.?

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- Yes No IRA Contribution: Traditional Roth SEP Other
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| <input type="checkbox"/> Telephone | <input type="checkbox"/> Commissions & Fees |
| <input type="checkbox"/> Postage | <input type="checkbox"/> Employee Benefits |
| <input type="checkbox"/> Auto/Truck Expenses | <input type="checkbox"/> Pension & Profit Sharing |
| <input type="checkbox"/> Other Expenses (list) | <input type="checkbox"/> Inventory W/D for Personal Use |

Did your business:

- Yes No Use an Automobile? Type: _____
Business miles 1/1-6/30: _____ 7/1-12/31: _____;
Personal miles: _____
- Yes No Have a home office? Must be Regular & Exclusive.
Sq Ft: _____ Sq Ft of entire home: _____
- Yes No Acquire or dispose of Tools/Equipment/Assets? *Please provide Invoice/Bill of Sale.*
- Yes No Pay any service providers, contractors, or casual labor?
 Yes No If "Yes", would you like us to issue 1099's?
- Yes No Have Inventory on hand December 31, 2022?
- Yes No Pay wages to W-2 type employees?
- Yes No Receive EIDL, PPP, SBA Loan, etc.?
- Yes No Make or receive any loans/leases/notes or payments?
- Yes No Engage in Bartering?
- Yes No Have more than one owner?
- Yes No Is this business an LLC? If "Yes" please provide LLC Articles of Organization and Operating Agreement.

Separate Business Address: _____

Method of Accounting: Cash Accrual Other/Not SureCould this be considered a Hobby? Yes No Not Sure

How many hours did you "participate" (work) in the business operations during 2022? 500+ annual hours may be needed: _____

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21 Years!
2002 - 2023*

Please attach additional sheets for any other information you need to provide.
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Phone: 770-704-7777 – Email: info@taxsmart1040.com

TaxSmart Business Services – 2022 Income Tax Organizer

Call (770)704-7777 to schedule an appointment. Please complete as much as possible prior to your appointment.

Personal Information ~ Provide SS Cards & Driver's Licenses:

Your Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Spouse's Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

1) _____

2) _____

3) _____

Yes No Could anyone else claim any of your dependents?

Yes No Any Child Care costs? If "Yes", provide amounts paid, care provider name(s), EIN's, and address(es) for EACH dependent.

Regular Income: Please attach Forms W-2, 1099-Misc, 1099R, 1099-SSA, K-1, 1099G, etc. Provide details/amounts if missing forms.

Yes No Wages, tips, etc. from job(s)? (W-2)

Yes No Interest from banks, bonds, other? (1099-INT)

Yes No Dividends? (1099-DIV)

Yes No Did you receive any tax refunds in 2022?

Yes No Alimony Paid/Received? \$ _____

Yes No Sell, buy or trade any assets, stocks, bonds, mutual funds, or other assets? (1099-B).

Yes No Distributions from 401(k), IRA, Pension, Annuity, etc.? (1099-R)

Yes No Spend, Receive, Sell, Exchange, Acquire, or Mine any Virtual Currency such as Bitcoin, Ethereum, etc?

Yes No Own any rental property including a vacation home?

Yes No Unemployment Income? (1099-G)

Yes No Social Security Benefits? (1099-SSA)

Yes No Gambling Income and Related Expenses? (W2G)

Yes No Cancellation of Debt/Foreclosure? (1099-A or -C)

Yes No Any small business income/loss from an S-Corp, Partnership, LLC, Sole Proprietor? (K-1, 1099-Misc, 1099-K)

Yes No Did you sell anything online: Craigslist, eBay, FB Marketplace, etc. (1099K)?

Yes No Any other income, e.g. Uber/Lyft, Crowdfunding, other? Please explain:

General Questions:

Yes No Direct Deposit your refund into your bank account? *Must attach a voided check.* Otherwise you will receive refund checks. Amounts due will NOT be drafted from your account.

Yes No Did you file 2021 tax return? **Provide Copy/PDF.**

Yes No Do you or your spouse owe any back taxes?

Please note, to avoid penalty, you must pay all taxes due by April 18th. An extension only grants more time to file, not to pay.

Other Special Situations: May require detailed documentation

Yes No Pay any Estimated Tax Payments? Please list amounts, dates, and to whom paid (GA, IRS, etc.)

Yes No Any births or deaths in your household? Did any children cease to be your dependents in 2022?

Yes No Did your marital status change during 2022?

Yes No Did you earn income in another state or country?

Yes No Did you buy, sell or refinance (including loan modification) property in 2022? If yes, attach closing statements.

Yes No During 2022, were there any changes to federal or state tax returns filed in prior years? Please attach notices.

Yes No Did you suffer a casualty or loss in 2022 in a presidentially declared disaster area? www.fema.gov/disasters

Yes No Receive any hobby income?

Yes No Moving Expenses? (Only for active military)

Yes No Did your address change? Please attach.

Yes No At any time during 2022 did you have any financial interest or signature authority over a foreign financial account, including overseas gaming?

Yes No During 2022, did you receive a distribution from, were the grantor of, or transferor to a foreign trust?

How would you like to receive your copy of the completed tax return?

Paper Copy Digital/PDF Copy

Yes No College expenses for self, spouse or dependent?

Yes No Have any Unreimbursed Partnership Expenses in 2022?

Yes No Have an IRS IP-PIN for self, spouse, or dependent?

Yes No Did you pay any foreign taxes in 2022?

Yes No Did you adopt a child in 2022?

Yes No Did your child (under age 24) have any investment income? Please attach 1099's and/or tax return.

Yes No An Armed Forces Reservist, Qualified Performing Artist, or Government Fee Basis Official?

Yes No Do you have a Health Savings Account? (1099-SA)

Yes No Pay any Household Employees such as gardeners, housekeepers, nannies, etc.?

Yes No Do you expect a substantial change in your income or deductions next year (2023)? Please attach explanation:

(Continued on reverse)

Expenses/Deductions:

- Yes No IRA Contribution: Traditional Roth SEP Other
Self \$ _____ Spouse \$ _____
- Yes No Penalty on early withdrawal from CD? \$ _____
- Yes No Student Loan interest paid? _____

Medical Expenses:

- Yes No After-tax Health Insurance, including Medicare?
- Yes No Did anyone in your family receive health insurance from HealthCare.gov or other state run Marketplace? (Form 1095)
- Yes No Are you part of a Healthcare Sharing Ministry?
- Yes No Did you pay Long Term Care Insurance premiums?
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Taxes & Interest Expenses:

- Yes No Do you own your own home?
- Yes No Real Estate Taxes (Form 1098 or other)?
- Yes No Mortgage Interest/Points Paid (Form 1098)?
- Yes No Did you purchase a boat, airplane, RV, etc.?
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Gifts to Charity *Documentation required for all donations:*

- Yes No Cash/Checks/Money etc.
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- Yes No Install an electric vehicle charger in your home?
- Yes No Rollover \$\$\$ from an IRA, 401(k), Annuity, etc.?
- Yes No Receive an inheritance (Sch K-1)?
- Yes No Make gifts totaling \geq \$16,000 to one person?
- Yes No Did you contribute to a 529 College Savings Plan?
- Yes No Unreimbursed Educator Expenses (K-12 only)?

Rental Property:

- Yes No First Placed in Service in 2022? If "Yes", please provide appraisal and settlement statements.
- Yes No Disposed/Stopped Renting during 2022?

Type of Rental: _____

Address: _____

Days Rented: _____ Days Vacant/Empty: _____

Personal use days (self, friends, family): _____

Average length of rental stay (in days): _____

Hours you & your spouse worked on rental: _____

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<p>Personal Information ~ Provide SS Cards & Driver's Licenses:</p> <p>Your Full Name: _____</p> <p>Occupation: _____ <input type="checkbox"/> Blind? <input type="checkbox"/> Disabled?</p> <p>Phone: _____</p> <p>Email: _____</p> <p>Spouse's Full Name: _____</p> <p>Occupation: _____ <input type="checkbox"/> Blind? <input type="checkbox"/> Disabled?</p> <p>Phone: _____</p> <p>Email: _____</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Sure: Do you want to file a joint return?</p>	<p>Dependent Information (Children, Parents, others):</p> <p style="text-align: center;">Provide SS Card & Proof of Residency for each dependent.</p> <p>Full Name – DOB – Relationship - College Student? - 2022 Income?</p> <p>1) _____</p> <p>2) _____</p> <p>3) _____</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Could anyone else claim any of your dependents?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Any Child Care costs? If "Yes", provide amounts paid, care provider name(s), EIN's, and address(es) for EACH dependent.</p>
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- Yes No Miles driven for charity?
- Yes No Payroll Deductions of Charity, Union Dues, other?
- Yes No Qualified Charitable Distribution from IRA.

Other Miscellaneous Items:

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- Yes No First Placed in Service in 2022? If "Yes", please provide appraisal and settlement statements.
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Type of Rental: _____

Address: _____

Days Rented: _____ Days Vacant/Empty: _____

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Average length of rental stay (in days): _____

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| <input type="checkbox"/> Supplies | <input type="checkbox"/> Taxes & Licenses |
| <input type="checkbox"/> Out of Town Travel | <input type="checkbox"/> Meals & Entertainment |
| <input type="checkbox"/> Utilities (not home) | <input type="checkbox"/> Wages paid to Employees |
| <input type="checkbox"/> Telephone | <input type="checkbox"/> Commissions & Fees |
| <input type="checkbox"/> Postage | <input type="checkbox"/> Employee Benefits |
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Did your business:

- Yes No Use an Automobile? Type: _____
Business miles 1/1-6/30: _____ 7/1-12/31: _____;
Personal miles: _____
- Yes No Have a home office? Must be Regular & Exclusive.
Sq Ft: _____ Sq Ft of entire home: _____
- Yes No Acquire or dispose of Tools/Equipment/Assets? *Please provide Invoice/Bill of Sale.*
- Yes No Pay any service providers, contractors, or casual labor?
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- Yes No Have Inventory on hand December 31, 2022?
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- Yes No Engage in Bartering?
- Yes No Have more than one owner?
- Yes No Is this business an LLC? If "Yes" please provide LLC Articles of Organization and Operating Agreement.

Separate Business Address: _____

Method of Accounting: Cash Accrual Other/Not SureCould this be considered a Hobby? Yes No Not Sure

How many hours did you "participate" (work) in the business operations during 2022? 500+ annual hours may be needed: _____

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Call (770)704-7777 to schedule an appointment. Please complete as much as possible prior to your appointment.

Personal Information ~ Provide SS Cards & Driver's Licenses:

Your Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Spouse's Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

1) _____

2) _____

3) _____

Yes No Could anyone else claim any of your dependents?

Yes No Any Child Care costs? If "Yes", provide amounts paid, care provider name(s), EIN's, and address(es) for EACH dependent.

Regular Income: Please attach Forms W-2, 1099-Misc, 1099R, 1099-SSA, K-1, 1099G, etc. Provide details/amounts if missing forms.

Yes No Wages, tips, etc. from job(s)? (W-2)

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Yes No Alimony Paid/Received? \$ _____

Yes No Sell, buy or trade any assets, stocks, bonds, mutual funds, or other assets? (1099-B).

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Yes No Spend, Receive, Sell, Exchange, Acquire, or Mine any Virtual Currency such as Bitcoin, Ethereum, etc?

Yes No Own any rental property including a vacation home?

Yes No Unemployment Income? (1099-G)

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Your Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

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Phone: _____

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Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

1) _____

2) _____

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Regular Income: Please attach Forms W-2, 1099-Misc, 1099R, 1099-SSA, K-1, 1099G, etc. Provide details/amounts if missing forms.

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Did your business:

- Yes No Use an Automobile? Type: _____
Business miles 1/1-6/30: _____ 7/1-12/31: _____;
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Sq Ft: _____ Sq Ft of entire home: _____
- Yes No Acquire or dispose of Tools/Equipment/Assets? *Please provide Invoice/Bill of Sale.*
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- Yes No Have more than one owner?
- Yes No Is this business an LLC? If "Yes" please provide LLC Articles of Organization and Operating Agreement.

Separate Business Address: _____

Method of Accounting: Cash Accrual Other/Not SureCould this be considered a Hobby? Yes No Not Sure

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Personal Information ~ Provide SS Cards & Driver's Licenses:

Your Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Spouse's Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

1) _____

2) _____

3) _____

Yes No Could anyone else claim any of your dependents?

Yes No Any Child Care costs? If "Yes", provide amounts paid, care provider name(s), EIN's, and address(es) for EACH dependent.

Regular Income: Please attach Forms W-2, 1099-Misc, 1099R, 1099-SSA, K-1, 1099G, etc. Provide details/amounts if missing forms.

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Yes No Own any rental property including a vacation home?

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- Yes No Use an Automobile? Type: _____
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- Yes No Acquire or dispose of Tools/Equipment/Assets? *Please provide Invoice/Bill of Sale.*
- Yes No Pay any service providers, contractors, or casual labor?
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- Yes No Have more than one owner?
- Yes No Is this business an LLC? If "Yes" please provide LLC Articles of Organization and Operating Agreement.

Separate Business Address: _____

Method of Accounting: Cash Accrual Other/Not SureCould this be considered a Hobby? Yes No Not Sure

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Phone: 770-704-7777 - Email: info@taxsmart1040.com

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Call (770)704-7777 to schedule an appointment. Please complete as much as possible prior to your appointment.

Personal Information ~ Provide SS Cards & Driver's Licenses:

Your Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Spouse's Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

1) _____

2) _____

3) _____

Yes No Could anyone else claim any of your dependents?

Yes No Any Child Care costs? If "Yes", provide amounts paid, care provider name(s), EIN's, and address(es) for EACH dependent.

Regular Income: Please attach Forms W-2, 1099-Misc, 1099R, 1099-SSA, K-1, 1099G, etc. Provide details/amounts if missing forms.

Yes No Wages, tips, etc. from job(s)? (W-2)

Yes No Interest from banks, bonds, other? (1099-INT)

Yes No Dividends? (1099-DIV)

Yes No Did you receive any tax refunds in 2022?

Yes No Alimony Paid/Received? \$ _____

Yes No Sell, buy or trade any assets, stocks, bonds, mutual funds, or other assets? (1099-B).

Yes No Distributions from 401(k), IRA, Pension, Annuity, etc.? (1099-R)

Yes No Spend, Receive, Sell, Exchange, Acquire, or Mine any Virtual Currency such as Bitcoin, Ethereum, etc?

Yes No Own any rental property including a vacation home?

Yes No Unemployment Income? (1099-G)

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General Questions:

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Yes No Did you file 2021 tax return? **Provide Copy/PDF.**

Yes No Do you or your spouse owe any back taxes?

Please note, to avoid penalty, you must pay all taxes due by April 18th. An extension only grants more time to file, not to pay.

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Yes No Pay any Estimated Tax Payments? Please list amounts, dates, and to whom paid (GA, IRS, etc.)

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Yes No Pay any Household Employees such as gardeners, housekeepers, nannies, etc.?

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- Yes No IRA Contribution: Traditional Roth SEP Other
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- Yes No After-tax Health Insurance, including Medicare?
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- Yes No Pay any service providers, contractors, or casual labor?
 Yes No If "Yes", would you like us to issue 1099's?
- Yes No Have Inventory on hand December 31, 2022?
- Yes No Pay wages to W-2 type employees?
- Yes No Receive EIDL, PPP, SBA Loan, etc.?
- Yes No Make or receive any loans/leases/notes or payments?
- Yes No Engage in Bartering?
- Yes No Have more than one owner?
- Yes No Is this business an LLC? If "Yes" please provide LLC Articles of Organization and Operating Agreement.

Separate Business Address: _____

Method of Accounting: Cash Accrual Other/Not SureCould this be considered a Hobby? Yes No Not Sure

How many hours did you "participate" (work) in the business operations during 2022? 500+ annual hours may be needed: _____

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21 Years!
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Phone: 770-704-7777 - Email: info@taxsmart1040.com

TaxSmart Business Services – 2022 Income Tax Organizer

Call (770)704-7777 to schedule an appointment. Please complete as much as possible prior to your appointment.

Personal Information ~ Provide SS Cards & Driver's Licenses:

Your Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Spouse's Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

1) _____

2) _____

3) _____

Yes No Could anyone else claim any of your dependents?

Yes No Any Child Care costs? If "Yes", provide amounts paid, care provider name(s), EIN's, and address(es) for EACH dependent.

Regular Income: Please attach Forms W-2, 1099-Misc, 1099R, 1099-SSA, K-1, 1099G, etc. Provide details/amounts if missing forms.

Yes No Wages, tips, etc. from job(s)? (W-2)

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Yes No Alimony Paid/Received? \$ _____

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Yes No Own any rental property including a vacation home?

Yes No Unemployment Income? (1099-G)

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- Yes No Use an Automobile? Type: _____
Business miles 1/1-6/30: _____ 7/1-12/31: _____;
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Yes No Could anyone else claim any of your dependents?

Yes No Any Child Care costs? If "Yes", provide amounts paid, care provider name(s), EIN's, and address(es) for EACH dependent.

Regular Income: Please attach Forms W-2, 1099-Misc, 1099R, 1099-SSA, K-1, 1099G, etc. Provide details/amounts if missing forms.

Yes No Wages, tips, etc. from job(s)? (W-2)

Yes No Interest from banks, bonds, other? (1099-INT)

Yes No Dividends? (1099-DIV)

Yes No Did you receive any tax refunds in 2022?

Yes No Alimony Paid/Received? \$ _____

Yes No Sell, buy or trade any assets, stocks, bonds, mutual funds, or other assets? (1099-B).

Yes No Distributions from 401(k), IRA, Pension, Annuity, etc.? (1099-R)

Yes No Spend, Receive, Sell, Exchange, Acquire, or Mine any Virtual Currency such as Bitcoin, Ethereum, etc?

Yes No Own any rental property including a vacation home?

Yes No Unemployment Income? (1099-G)

Yes No Social Security Benefits? (1099-SSA)

Yes No Gambling Income and Related Expenses? (W2G)

Yes No Cancellation of Debt/Foreclosure? (1099-A or -C)

Yes No Any small business income/loss from an S-Corp, Partnership, LLC, Sole Proprietor? (K-1, 1099-Misc, 1099-K)

Yes No Did you sell anything online: Craigslist, eBay, FB Marketplace, etc. (1099K)?

Yes No Any other income, e.g. Uber/Lyft, Crowdfunding, other? Please explain:

General Questions:

Yes No Direct Deposit your refund into your bank account? *Must attach a voided check.* Otherwise you will receive refund checks. Amounts due will NOT be drafted from your account.

Yes No Did you file 2021 tax return? **Provide Copy/PDF.**

Yes No Do you or your spouse owe any back taxes?

Please note, to avoid penalty, you must pay all taxes due by April 18th. An extension only grants more time to file, not to pay.

Other Special Situations: May require detailed documentation

Yes No Pay any Estimated Tax Payments? Please list amounts, dates, and to whom paid (GA, IRS, etc.)

Yes No Any births or deaths in your household? Did any children cease to be your dependents in 2022?

Yes No Did your marital status change during 2022?

Yes No Did you earn income in another state or country?

Yes No Did you buy, sell or refinance (including loan modification) property in 2022? If yes, attach closing statements.

Yes No During 2022, were there any changes to federal or state tax returns filed in prior years? Please attach notices.

Yes No Did you suffer a casualty or loss in 2022 in a presidentially declared disaster area? www.fema.gov/disasters

Yes No Receive any hobby income?

Yes No Moving Expenses? (Only for active military)

Yes No Did your address change? Please attach.

Yes No At any time during 2022 did you have any financial interest or signature authority over a foreign financial account, including overseas gaming?

Yes No During 2022, did you receive a distribution from, were the grantor of, or transferor to a foreign trust?

How would you like to receive your copy of the completed tax return?

Paper Copy Digital/PDF Copy

Yes No College expenses for self, spouse or dependent?

Yes No Have any Unreimbursed Partnership Expenses in 2022?

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Yes No Did you pay any foreign taxes in 2022?

Yes No Did you adopt a child in 2022?

Yes No Did your child (under age 24) have any investment income? Please attach 1099's and/or tax return.

Yes No An Armed Forces Reservist, Qualified Performing Artist, or Government Fee Basis Official?

Yes No Do you have a Health Savings Account? (1099-SA)

Yes No Pay any Household Employees such as gardeners, housekeepers, nannies, etc.?

Yes No Do you expect a substantial change in your income or deductions next year (2023)? Please attach explanation:

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Expenses/Deductions:

- Yes No IRA Contribution: Traditional Roth SEP Other
Self \$ _____ Spouse \$ _____
- Yes No Penalty on early withdrawal from CD? \$ _____
- Yes No Student Loan interest paid? _____

Medical Expenses:

- Yes No After-tax Health Insurance, including Medicare?
- Yes No Did anyone in your family receive health insurance from HealthCare.gov or other state run Marketplace? (Form 1095)
- Yes No Are you part of a Healthcare Sharing Ministry?
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Taxes & Interest Expenses:

- Yes No Do you own your own home?
- Yes No Real Estate Taxes (Form 1098 or other)?
- Yes No Mortgage Interest/Points Paid (Form 1098)?
- Yes No Did you purchase a boat, airplane, RV, etc.?
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Gifts to Charity *Documentation required for all donations:*

- Yes No Cash/Checks/Money etc.
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- Yes No Qualified Charitable Distribution from IRA.

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- Yes No Install an electric vehicle charger in your home?
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- Yes No Unreimbursed Educator Expenses (K-12 only)?

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- Yes No Disposed/Stopped Renting during 2022?

Type of Rental: _____

Address: _____

Days Rented: _____ Days Vacant/Empty: _____

Personal use days (self, friends, family): _____

Average length of rental stay (in days): _____

Hours you & your spouse worked on rental: _____

Small Business or Farming*Request our 2022 Business Tax Organizer for more in-depth checklist*

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Which of the following expenses did your business have in 2022?

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| <input type="checkbox"/> Inventory Purchases | <input type="checkbox"/> Interest paid on business loans |
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Did your business:

- Yes No Use an Automobile? Type: _____
Business miles 1/1-6/30: _____ 7/1-12/31: _____;
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Personal Information ~ Provide SS Cards & Driver's Licenses:

Your Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Spouse's Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

1) _____

2) _____

3) _____

Yes No Could anyone else claim any of your dependents?

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TaxSmart Business Services – 2022 Income Tax Organizer

Call (770)704-7777 to schedule an appointment. Please complete as much as possible prior to your appointment.

<p>Personal Information ~ Provide SS Cards & Driver's Licenses:</p> <p>Your Full Name: _____</p> <p>Occupation: _____ <input type="checkbox"/> Blind? <input type="checkbox"/> Disabled?</p> <p>Phone: _____</p> <p>Email: _____</p> <p>Spouse's Full Name: _____</p> <p>Occupation: _____ <input type="checkbox"/> Blind? <input type="checkbox"/> Disabled?</p> <p>Phone: _____</p> <p>Email: _____</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Sure: Do you want to file a joint return?</p>	<p>Dependent Information (Children, Parents, others):</p> <p style="text-align: center;">Provide SS Card & Proof of Residency for each dependent.</p> <p>Full Name – DOB – Relationship - College Student? - 2022 Income?</p> <p>1) _____</p> <p>2) _____</p> <p>3) _____</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Could anyone else claim any of your dependents?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Any Child Care costs? If "Yes", provide amounts paid, care provider name(s), EIN's, and address(es) for EACH dependent.</p>
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- Yes No Acquire or dispose of Tools/Equipment/Assets? *Please provide Invoice/Bill of Sale.*
- Yes No Pay any service providers, contractors, or casual labor?
 Yes No If "Yes", would you like us to issue 1099's?
- Yes No Have Inventory on hand December 31, 2022?
- Yes No Pay wages to W-2 type employees?
- Yes No Receive EIDL, PPP, SBA Loan, etc.?
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- Yes No Engage in Bartering?
- Yes No Have more than one owner?
- Yes No Is this business an LLC? If "Yes" please provide LLC Articles of Organization and Operating Agreement.

Separate Business Address: _____

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Phone: 770-704-7777 - Email: info@taxsmart1040.com

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Call (770)704-7777 to schedule an appointment. Please complete as much as possible prior to your appointment.

Personal Information ~ Provide SS Cards & Driver's Licenses:

Your Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Spouse's Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

1) _____

2) _____

3) _____

Yes No Could anyone else claim any of your dependents?

Yes No Any Child Care costs? If "Yes", provide amounts paid, care provider name(s), EIN's, and address(es) for EACH dependent.

Regular Income: Please attach Forms W-2, 1099-Misc, 1099R, 1099-SSA, K-1, 1099G, etc. Provide details/amounts if missing forms.

Yes No Wages, tips, etc. from job(s)? (W-2)

Yes No Interest from banks, bonds, other? (1099-INT)

Yes No Dividends? (1099-DIV)

Yes No Did you receive any tax refunds in 2022?

Yes No Alimony Paid/Received? \$ _____

Yes No Sell, buy or trade any assets, stocks, bonds, mutual funds, or other assets? (1099-B).

Yes No Distributions from 401(k), IRA, Pension, Annuity, etc.? (1099-R)

Yes No Spend, Receive, Sell, Exchange, Acquire, or Mine any Virtual Currency such as Bitcoin, Ethereum, etc?

Yes No Own any rental property including a vacation home?

Yes No Unemployment Income? (1099-G)

Yes No Social Security Benefits? (1099-SSA)

Yes No Gambling Income and Related Expenses? (W2G)

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Yes No Do you or your spouse owe any back taxes?

Please note, to avoid penalty, you must pay all taxes due by April 18th. An extension only grants more time to file, not to pay.

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Address: _____

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Please attach additional sheets for any other information you need to provide.
TaxSmart Business Services - (125 Barrett Road) PO Box 280, Holly Springs, GA, 30142

Phone: 770-704-7777 - Email: info@taxsmart1040.com

TaxSmart Business Services – 2022 Income Tax Organizer

Call (770)704-7777 to schedule an appointment. Please complete as much as possible prior to your appointment.

Personal Information ~ Provide SS Cards & Driver's Licenses:

Your Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Spouse's Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

1) _____

2) _____

3) _____

Yes No Could anyone else claim any of your dependents?

Yes No Any Child Care costs? If "Yes", provide amounts paid, care provider name(s), EIN's, and address(es) for EACH dependent.

Regular Income: Please attach Forms W-2, 1099-Misc, 1099R, 1099-SSA, K-1, 1099G, etc. Provide details/amounts if missing forms.

Yes No Wages, tips, etc. from job(s)? (W-2)

Yes No Interest from banks, bonds, other? (1099-INT)

Yes No Dividends? (1099-DIV)

Yes No Did you receive any tax refunds in 2022?

Yes No Alimony Paid/Received? \$ _____

Yes No Sell, buy or trade any assets, stocks, bonds, mutual funds, or other assets? (1099-B).

Yes No Distributions from 401(k), IRA, Pension, Annuity, etc.? (1099-R)

Yes No Spend, Receive, Sell, Exchange, Acquire, or Mine any Virtual Currency such as Bitcoin, Ethereum, etc?

Yes No Own any rental property including a vacation home?

Yes No Unemployment Income? (1099-G)

Yes No Social Security Benefits? (1099-SSA)

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Yes No Cancellation of Debt/Foreclosure? (1099-A or -C)

Yes No Any small business income/loss from an S-Corp, Partnership, LLC, Sole Proprietor? (K-1, 1099-Misc, 1099-K)

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General Questions:

Yes No Direct Deposit your refund into your bank account? *Must attach a voided check.* Otherwise you will receive refund checks. Amounts due will NOT be drafted from your account.

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- Yes No First Placed in Service in 2022? If "Yes", please provide appraisal and settlement statements.
- Yes No Disposed/Stopped Renting during 2022?

Type of Rental: _____

Address: _____

Days Rented: _____ Days Vacant/Empty: _____

Personal use days (self, friends, family): _____

Average length of rental stay (in days): _____

Hours you & your spouse worked on rental: _____

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Yes No Spend, Receive, Sell, Exchange, Acquire, or Mine any Virtual Currency such as Bitcoin, Ethereum, etc?

Yes No Own any rental property including a vacation home?

Yes No Unemployment Income? (1099-G)

Yes No Social Security Benefits? (1099-SSA)

Yes No Gambling Income and Related Expenses? (W2G)

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Address: _____

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| <input type="checkbox"/> Telephone | <input type="checkbox"/> Commissions & Fees |
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Did your business:

- Yes No Use an Automobile? Type: _____
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How would you like to receive your copy of the completed tax return?

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Address: _____

Days Rented: _____ Days Vacant/Empty: _____

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| <input type="checkbox"/> Supplies | <input type="checkbox"/> Taxes & Licenses |
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| <input type="checkbox"/> Utilities (not home) | <input type="checkbox"/> Wages paid to Employees |
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Did your business:

- Yes No Use an Automobile? Type: _____
Business miles 1/1-6/30: _____ 7/1-12/31: _____;
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- Yes No Have more than one owner?
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Occupation: _____ Blind? Disabled?

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Yes No Not Sure: Do you want to file a joint return?

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Full Name – DOB – Relationship - College Student? - 2022 Income?

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Email: _____

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How would you like to receive your copy of the completed tax return?

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Yes No Pay any Household Employees such as gardeners, housekeepers, nannies, etc.?

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Expenses/Deductions:

Yes No IRA Contribution: Traditional Roth SEP Other
Self \$ _____ Spouse \$ _____

Yes No Penalty on early withdrawal from CD? \$ _____

Yes No Student Loan interest paid? _____

Medical Expenses:

Yes No After-tax Health Insurance, including Medicare?

Yes No Did anyone in your family receive health insurance from HealthCare.gov or other state run Marketplace? (Form 1095)

Yes No Are you part of a Healthcare Sharing Ministry?

Yes No Did you pay Long Term Care Insurance premiums?

Yes No Any out of pocket medical expenses: Doctors, Dentist, Rx, Nursing Homes, Medical Mileage, etc.? Please list.

Taxes & Interest Expenses:

Yes No Do you own your own home?

Yes No Real Estate Taxes (Form 1098 or other)?

Yes No Mortgage Interest/Points Paid (Form 1098)?

Yes No Did you purchase a boat, airplane, RV, etc.?

Yes No Annual Ad Valorem Taxes on car, boat, etc.?

Yes No Other State, County, City or Local Taxes?

Yes No Investment Interest paid? Other Interest Paid?

Gifts to Charity *Documentation required for all donations:*

Yes No Cash/Checks/Money etc.

Yes No Non-Cash Gifts i.e. Household items to Goodwill?

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Yes No Qualified Charitable Distribution from IRA.

Other Miscellaneous Items:

Yes No Install an electric vehicle charger in your home?

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Yes No Did you contribute to a 529 College Savings Plan?

Yes No Unreimbursed Educator Expenses (K-12 only)?

Rental Property:

Yes No First Placed in Service in 2022? If "Yes", please provide appraisal and settlement statements.

Yes No Disposed/Stopped Renting during 2022?

Type of Rental: _____

Address: _____

Days Rented: _____ Days Vacant/Empty: _____

Personal use days (self, friends, family): _____

Average length of rental stay (in days): _____

Hours you & your spouse worked on rental: _____

Small Business or Farming

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Nature of Business: _____

Date Business Started: _____

Which of the following expenses did your business have in 2022?

Inventory Purchases Interest paid on business loans

Contract Labor Insurance (Not Health)

Advertising Legal & Professional Services

Office Supplies Office/Building Rent

Equipment Rent Repairs/Maintenance/Cleaning

Supplies Taxes & Licenses

Out of Town Travel Meals & Entertainment

Utilities (not home) Wages paid to Employees

Telephone Commissions & Fees

Postage Employee Benefits

Auto/Truck Expenses Pension & Profit Sharing

Other Expenses (list) Inventory W/D for Personal Use

Did your business:

Yes No Use an Automobile? Type: _____
Business miles 1/1-6/30: _____ 7/1-12/31: _____;

Personal miles: _____

Yes No Have a home office? Must be Regular & Exclusive.

Sq Ft: _____ Sq Ft of entire home: _____

Yes No Acquire or dispose of Tools/Equipment/Assets? *Please provide Invoice/Bill of Sale.*

Yes No Pay any service providers, contractors, or casual labor?

Yes No If "Yes", would you like us to issue 1099's?

Yes No Have Inventory on hand December 31, 2022?

Yes No Pay wages to W-2 type employees?

Yes No Receive EIDL, PPP, SBA Loan, etc.?

Yes No Make or receive any loans/leases/notes or payments?

Yes No Engage in Bartering?

Yes No Have more than one owner?

Yes No Is this business an LLC? If "Yes" please provide LLC Articles of Organization and Operating Agreement.

Separate Business Address: _____

Method of Accounting: Cash Accrual Other/Not Sure

Could this be considered a Hobby? Yes No Not Sure

How many hours did you "participate" (work) in the business operations during 2022? 500+ annual hours may be needed: _____

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Personal Information ~ Provide SS Cards & Driver's Licenses:

Your Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Spouse's Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

1) _____

2) _____

3) _____

Yes No Could anyone else claim any of your dependents?

Yes No Any Child Care costs? If "Yes", provide amounts paid, care provider name(s), EIN's, and address(es) for EACH dependent.

Regular Income: Please attach Forms W-2, 1099-Misc, 1099R, 1099-SSA, K-1, 1099G, etc. Provide details/amounts if missing forms.

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Yes No Own any rental property including a vacation home?

Yes No Unemployment Income? (1099-G)

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- Yes No After-tax Health Insurance, including Medicare?
- Yes No Did anyone in your family receive health insurance from HealthCare.gov or other state run Marketplace? (Form 1095)
- Yes No Are you part of a Healthcare Sharing Ministry?
- Yes No Did you pay Long Term Care Insurance premiums?
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Taxes & Interest Expenses:

- Yes No Do you own your own home?
- Yes No Real Estate Taxes (Form 1098 or other)?
- Yes No Mortgage Interest/Points Paid (Form 1098)?
- Yes No Did you purchase a boat, airplane, RV, etc.?
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- Yes No Cash/Checks/Money etc.
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- Yes No Miles driven for charity?
- Yes No Payroll Deductions of Charity, Union Dues, other?
- Yes No Qualified Charitable Distribution from IRA.

Other Miscellaneous Items:

- Yes No Install an electric vehicle charger in your home?
- Yes No Rollover \$\$\$ from an IRA, 401(k), Annuity, etc.?
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- Yes No Make gifts totaling \geq \$16,000 to one person?
- Yes No Did you contribute to a 529 College Savings Plan?
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- Yes No First Placed in Service in 2022? If "Yes", please provide appraisal and settlement statements.
- Yes No Disposed/Stopped Renting during 2022?

Type of Rental: _____

Address: _____

Days Rented: _____ Days Vacant/Empty: _____

Personal use days (self, friends, family): _____

Average length of rental stay (in days): _____

Hours you & your spouse worked on rental: _____

Small Business or Farming*Request our 2022 Business Tax Organizer for more in-depth checklist*

Nature of Business: _____

Date Business Started: _____

Which of the following expenses did your business have in 2022?

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|--|--|
| <input type="checkbox"/> Inventory Purchases | <input type="checkbox"/> Interest paid on business loans |
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| <input type="checkbox"/> Advertising | <input type="checkbox"/> Legal & Professional Services |
| <input type="checkbox"/> Office Supplies | <input type="checkbox"/> Office/Building Rent |
| <input type="checkbox"/> Equipment Rent | <input type="checkbox"/> Repairs/Maintenance/Cleaning |
| <input type="checkbox"/> Supplies | <input type="checkbox"/> Taxes & Licenses |
| <input type="checkbox"/> Out of Town Travel | <input type="checkbox"/> Meals & Entertainment |
| <input type="checkbox"/> Utilities (not home) | <input type="checkbox"/> Wages paid to Employees |
| <input type="checkbox"/> Telephone | <input type="checkbox"/> Commissions & Fees |
| <input type="checkbox"/> Postage | <input type="checkbox"/> Employee Benefits |
| <input type="checkbox"/> Auto/Truck Expenses | <input type="checkbox"/> Pension & Profit Sharing |
| <input type="checkbox"/> Other Expenses (list) | <input type="checkbox"/> Inventory W/D for Personal Use |

Did your business:

- Yes No Use an Automobile? Type: _____
Business miles 1/1-6/30: _____ 7/1-12/31: _____;
Personal miles: _____
- Yes No Have a home office? Must be Regular & Exclusive.
Sq Ft: _____ Sq Ft of entire home: _____
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- Yes No Engage in Bartering?
- Yes No Have more than one owner?
- Yes No Is this business an LLC? If "Yes" please provide LLC Articles of Organization and Operating Agreement.

Separate Business Address: _____

Method of Accounting: Cash Accrual Other/Not SureCould this be considered a Hobby? Yes No Not Sure

How many hours did you "participate" (work) in the business operations during 2022? 500+ annual hours may be needed: _____

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Personal Information ~ Provide SS Cards & Driver's Licenses:

Your Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Spouse's Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

1) _____

2) _____

3) _____

Yes No Could anyone else claim any of your dependents?

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Regular Income: Please attach Forms W-2, 1099-Misc, 1099R, 1099-SSA, K-1, 1099G, etc. Provide details/amounts if missing forms.

Yes No Wages, tips, etc. from job(s)? (W-2)

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- Yes No Are you part of a Healthcare Sharing Ministry?
- Yes No Did you pay Long Term Care Insurance premiums?
- Yes No Any out of pocket medical expenses: Doctors, Dentist, Rx, Nursing Homes, Medical Mileage, etc.? Please list.

Taxes & Interest Expenses:

- Yes No Do you own your own home?
- Yes No Real Estate Taxes (Form 1098 or other)?
- Yes No Mortgage Interest/Points Paid (Form 1098)?
- Yes No Did you purchase a boat, airplane, RV, etc.?
- Yes No Annual Ad Valorem Taxes on car, boat, etc.?
- Yes No Other State, County, City or Local Taxes?
- Yes No Investment Interest paid? Other Interest Paid?

Gifts to Charity *Documentation required for all donations:*

- Yes No Cash/Checks/Money etc.
- Yes No Non-Cash Gifts i.e. Household items to Goodwill?
- Yes No Miles driven for charity?
- Yes No Payroll Deductions of Charity, Union Dues, other?
- Yes No Qualified Charitable Distribution from IRA.

Other Miscellaneous Items:

- Yes No Install an electric vehicle charger in your home?
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- Yes No Unreimbursed Educator Expenses (K-12 only)?

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- Yes No First Placed in Service in 2022? If "Yes", please provide appraisal and settlement statements.
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Type of Rental: _____

Address: _____

Days Rented: _____ Days Vacant/Empty: _____

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| <input type="checkbox"/> Supplies | <input type="checkbox"/> Taxes & Licenses |
| <input type="checkbox"/> Out of Town Travel | <input type="checkbox"/> Meals & Entertainment |
| <input type="checkbox"/> Utilities (not home) | <input type="checkbox"/> Wages paid to Employees |
| <input type="checkbox"/> Telephone | <input type="checkbox"/> Commissions & Fees |
| <input type="checkbox"/> Postage | <input type="checkbox"/> Employee Benefits |
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Did your business:

- Yes No Use an Automobile? Type: _____
Business miles 1/1-6/30: _____ 7/1-12/31: _____;
Personal miles: _____
- Yes No Have a home office? Must be Regular & Exclusive.
Sq Ft: _____ Sq Ft of entire home: _____
- Yes No Acquire or dispose of Tools/Equipment/Assets? *Please provide Invoice/Bill of Sale.*
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- Yes No Have more than one owner?
- Yes No Is this business an LLC? If "Yes" please provide LLC Articles of Organization and Operating Agreement.

Separate Business Address: _____

Method of Accounting: Cash Accrual Other/Not SureCould this be considered a Hobby? Yes No Not Sure

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Personal Information ~ Provide SS Cards & Driver's Licenses:

Your Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Spouse's Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

1) _____

2) _____

3) _____

Yes No Could anyone else claim any of your dependents?

Yes No Any Child Care costs? If "Yes", provide amounts paid, care provider name(s), EIN's, and address(es) for EACH dependent.

Regular Income: Please attach Forms W-2, 1099-Misc, 1099R, 1099-SSA, K-1, 1099G, etc. Provide details/amounts if missing forms.

Yes No Wages, tips, etc. from job(s)? (W-2)

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Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

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| <input type="checkbox"/> Supplies | <input type="checkbox"/> Taxes & Licenses |
| <input type="checkbox"/> Out of Town Travel | <input type="checkbox"/> Meals & Entertainment |
| <input type="checkbox"/> Utilities (not home) | <input type="checkbox"/> Wages paid to Employees |
| <input type="checkbox"/> Telephone | <input type="checkbox"/> Commissions & Fees |
| <input type="checkbox"/> Postage | <input type="checkbox"/> Employee Benefits |
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Did your business:

- Yes No Use an Automobile? Type: _____
Business miles 1/1-6/30: _____ 7/1-12/31: _____;
Personal miles: _____
- Yes No Have a home office? Must be Regular & Exclusive.
Sq Ft: _____ Sq Ft of entire home: _____
- Yes No Acquire or dispose of Tools/Equipment/Assets? *Please provide Invoice/Bill of Sale.*
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- Yes No Have more than one owner?
- Yes No Is this business an LLC? If "Yes" please provide LLC Articles of Organization and Operating Agreement.

Separate Business Address: _____

Method of Accounting: Cash Accrual Other/Not SureCould this be considered a Hobby? Yes No Not Sure

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Personal Information ~ Provide SS Cards & Driver's Licenses:

Your Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Spouse's Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

1) _____

2) _____

3) _____

Yes No Could anyone else claim any of your dependents?

Yes No Any Child Care costs? If "Yes", provide amounts paid, care provider name(s), EIN's, and address(es) for EACH dependent.

Regular Income: Please attach Forms W-2, 1099-Misc, 1099R, 1099-SSA, K-1, 1099G, etc. Provide details/amounts if missing forms.

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Small Business or Farming*Request our 2022 Business Tax Organizer for more in-depth checklist*

Nature of Business: _____

Date Business Started: _____

Which of the following expenses did your business have in 2022?

- | | |
|--|--|
| <input type="checkbox"/> Inventory Purchases | <input type="checkbox"/> Interest paid on business loans |
| <input type="checkbox"/> Contract Labor | <input type="checkbox"/> Insurance (Not Health) |
| <input type="checkbox"/> Advertising | <input type="checkbox"/> Legal & Professional Services |
| <input type="checkbox"/> Office Supplies | <input type="checkbox"/> Office/Building Rent |
| <input type="checkbox"/> Equipment Rent | <input type="checkbox"/> Repairs/Maintenance/Cleaning |
| <input type="checkbox"/> Supplies | <input type="checkbox"/> Taxes & Licenses |
| <input type="checkbox"/> Out of Town Travel | <input type="checkbox"/> Meals & Entertainment |
| <input type="checkbox"/> Utilities (not home) | <input type="checkbox"/> Wages paid to Employees |
| <input type="checkbox"/> Telephone | <input type="checkbox"/> Commissions & Fees |
| <input type="checkbox"/> Postage | <input type="checkbox"/> Employee Benefits |
| <input type="checkbox"/> Auto/Truck Expenses | <input type="checkbox"/> Pension & Profit Sharing |
| <input type="checkbox"/> Other Expenses (list) | <input type="checkbox"/> Inventory W/D for Personal Use |

Did your business:

- Yes No Use an Automobile? Type: _____
Business miles 1/1-6/30: _____ 7/1-12/31: _____;
Personal miles: _____
- Yes No Have a home office? Must be Regular & Exclusive.
Sq Ft: _____ Sq Ft of entire home: _____
- Yes No Acquire or dispose of Tools/Equipment/Assets? *Please provide Invoice/Bill of Sale.*
- Yes No Pay any service providers, contractors, or casual labor?
 Yes No If "Yes", would you like us to issue 1099's?
- Yes No Have Inventory on hand December 31, 2022?
- Yes No Pay wages to W-2 type employees?
- Yes No Receive EIDL, PPP, SBA Loan, etc.?
- Yes No Make or receive any loans/leases/notes or payments?
- Yes No Engage in Bartering?
- Yes No Have more than one owner?
- Yes No Is this business an LLC? If "Yes" please provide LLC Articles of Organization and Operating Agreement.

Separate Business Address: _____

Method of Accounting: Cash Accrual Other/Not SureCould this be considered a Hobby? Yes No Not Sure

How many hours did you "participate" (work) in the business operations during 2022? 500+ annual hours may be needed: _____

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21 Years!
2002 - 2023

Please attach additional sheets for any other information you need to provide.
TaxSmart Business Services - (125 Barrett Road) PO Box 280, Holly Springs, GA, 30142

Phone: 770-704-7777 - Email: info@taxsmart1040.com

TaxSmart Business Services – 2022 Income Tax Organizer

Call (770)704-7777 to schedule an appointment. Please complete as much as possible prior to your appointment.

Personal Information ~ Provide SS Cards & Driver's Licenses:

Your Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Spouse's Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

1) _____

2) _____

3) _____

Yes No Could anyone else claim any of your dependents?

Yes No Any Child Care costs? If "Yes", provide amounts paid, care provider name(s), EIN's, and address(es) for EACH dependent.

Regular Income: Please attach Forms W-2, 1099-Misc, 1099R, 1099-SSA, K-1, 1099G, etc. Provide details/amounts if missing forms.

Yes No Wages, tips, etc. from job(s)? (W-2)

Yes No Interest from banks, bonds, other? (1099-INT)

Yes No Dividends? (1099-DIV)

Yes No Did you receive any tax refunds in 2022?

Yes No Alimony Paid/Received? \$ _____

Yes No Sell, buy or trade any assets, stocks, bonds, mutual funds, or other assets? (1099-B).

Yes No Distributions from 401(k), IRA, Pension, Annuity, etc.? (1099-R)

Yes No Spend, Receive, Sell, Exchange, Acquire, or Mine any Virtual Currency such as Bitcoin, Ethereum, etc?

Yes No Own any rental property including a vacation home?

Yes No Unemployment Income? (1099-G)

Yes No Social Security Benefits? (1099-SSA)

Yes No Gambling Income and Related Expenses? (W2G)

Yes No Cancellation of Debt/Foreclosure? (1099-A or -C)

Yes No Any small business income/loss from an S-Corp, Partnership, LLC, Sole Proprietor? (K-1, 1099-Misc, 1099-K)

Yes No Did you sell anything online: Craigslist, eBay, FB Marketplace, etc. (1099K)?

Yes No Any other income, e.g. Uber/Lyft, Crowdfunding, other? Please explain:

General Questions:

Yes No Direct Deposit your refund into your bank account? *Must attach a voided check.* Otherwise you will receive refund checks. Amounts due will NOT be drafted from your account.

Yes No Did you file 2021 tax return? **Provide Copy/PDF.**

Yes No Do you or your spouse owe any back taxes?

Please note, to avoid penalty, you must pay all taxes due by April 18th. An extension only grants more time to file, not to pay.

Other Special Situations: May require detailed documentation

Yes No Pay any Estimated Tax Payments? Please list amounts, dates, and to whom paid (GA, IRS, etc.)

Yes No Any births or deaths in your household? Did any children cease to be your dependents in 2022?

Yes No Did your marital status change during 2022?

Yes No Did you earn income in another state or country?

Yes No Did you buy, sell or refinance (including loan modification) property in 2022? If yes, attach closing statements.

Yes No During 2022, were there any changes to federal or state tax returns filed in prior years? Please attach notices.

Yes No Did you suffer a casualty or loss in 2022 in a presidentially declared disaster area? www.fema.gov/disasters

Yes No Receive any hobby income?

Yes No Moving Expenses? (Only for active military)

Yes No Did your address change? Please attach.

Yes No At any time during 2022 did you have any financial interest or signature authority over a foreign financial account, including overseas gaming?

Yes No During 2022, did you receive a distribution from, were the grantor of, or transferor to a foreign trust?

How would you like to receive your copy of the completed tax return?

Paper Copy Digital/PDF Copy

Yes No College expenses for self, spouse or dependent?

Yes No Have any Unreimbursed Partnership Expenses in 2022?

Yes No Have an IRS IP-PIN for self, spouse, or dependent?

Yes No Did you pay any foreign taxes in 2022?

Yes No Did you adopt a child in 2022?

Yes No Did your child (under age 24) have any investment income? Please attach 1099's and/or tax return.

Yes No An Armed Forces Reservist, Qualified Performing Artist, or Government Fee Basis Official?

Yes No Do you have a Health Savings Account? (1099-SA)

Yes No Pay any Household Employees such as gardeners, housekeepers, nannies, etc.?

Yes No Do you expect a substantial change in your income or deductions next year (2023)? Please attach explanation:

(Continued on reverse)

Expenses/Deductions:

Yes No IRA Contribution: Traditional Roth SEP Other
Self \$ _____ Spouse \$ _____

Yes No Penalty on early withdrawal from CD? \$ _____

Yes No Student Loan interest paid? _____

Medical Expenses:

Yes No After-tax Health Insurance, including Medicare?

Yes No Did anyone in your family receive health insurance from HealthCare.gov or other state run Marketplace? (Form 1095)

Yes No Are you part of a Healthcare Sharing Ministry?

Yes No Did you pay Long Term Care Insurance premiums?

Yes No Any out of pocket medical expenses: Doctors, Dentist, Rx, Nursing Homes, Medical Mileage, etc.? Please list.

Taxes & Interest Expenses:

Yes No Do you own your own home?

Yes No Real Estate Taxes (Form 1098 or other)?

Yes No Mortgage Interest/Points Paid (Form 1098)?

Yes No Did you purchase a boat, airplane, RV, etc.?

Yes No Annual Ad Valorem Taxes on car, boat, etc.?

Yes No Other State, County, City or Local Taxes?

Yes No Investment Interest paid? Other Interest Paid?

Gifts to Charity *Documentation required for all donations:*

Yes No Cash/Checks/Money etc.

Yes No Non-Cash Gifts i.e. Household items to Goodwill?

Yes No Miles driven for charity?

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Yes No Qualified Charitable Distribution from IRA.

Other Miscellaneous Items:

Yes No Install an electric vehicle charger in your home?

Yes No Rollover \$\$\$ from an IRA, 401(k), Annuity, etc.?

Yes No Receive an inheritance (Sch K-1)?

Yes No Make gifts totaling \geq \$16,000 to one person?

Yes No Did you contribute to a 529 College Savings Plan?

Yes No Unreimbursed Educator Expenses (K-12 only)?

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Yes No First Placed in Service in 2022? If "Yes", please provide appraisal and settlement statements.

Yes No Disposed/Stopped Renting during 2022?

Type of Rental: _____

Address: _____

Days Rented: _____ Days Vacant/Empty: _____

Personal use days (self, friends, family): _____

Average length of rental stay (in days): _____

Hours you & your spouse worked on rental: _____

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Utilities (not home) Wages paid to Employees

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Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

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<p>Personal Information ~ Provide SS Cards & Driver's Licenses:</p> <p>Your Full Name: _____</p> <p>Occupation: _____ <input type="checkbox"/> Blind? <input type="checkbox"/> Disabled?</p> <p>Phone: _____</p> <p>Email: _____</p> <p>Spouse's Full Name: _____</p> <p>Occupation: _____ <input type="checkbox"/> Blind? <input type="checkbox"/> Disabled?</p> <p>Phone: _____</p> <p>Email: _____</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Sure: Do you want to file a joint return?</p>	<p>Dependent Information (Children, Parents, others):</p> <p style="text-align: center;">Provide SS Card & Proof of Residency for each dependent.</p> <p>Full Name – DOB – Relationship - College Student? - 2022 Income?</p> <p>1) _____</p> <p>2) _____</p> <p>3) _____</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Could anyone else claim any of your dependents?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Any Child Care costs? If "Yes", provide amounts paid, care provider name(s), EIN's, and address(es) for EACH dependent.</p>
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- Yes No Non-Cash Gifts i.e. Household items to Goodwill?
- Yes No Miles driven for charity?
- Yes No Payroll Deductions of Charity, Union Dues, other?
- Yes No Qualified Charitable Distribution from IRA.

Other Miscellaneous Items:

- Yes No Install an electric vehicle charger in your home?
- Yes No Rollover \$\$\$ from an IRA, 401(k), Annuity, etc.?
- Yes No Receive an inheritance (Sch K-1)?
- Yes No Make gifts totaling \geq \$16,000 to one person?
- Yes No Did you contribute to a 529 College Savings Plan?
- Yes No Unreimbursed Educator Expenses (K-12 only)?

Rental Property:

- Yes No First Placed in Service in 2022? If "Yes", please provide appraisal and settlement statements.
- Yes No Disposed/Stopped Renting during 2022?

Type of Rental: _____

Address: _____

Days Rented: _____ Days Vacant/Empty: _____

Personal use days (self, friends, family): _____

Average length of rental stay (in days): _____

Hours you & your spouse worked on rental: _____

Small Business or Farming*Request our 2022 Business Tax Organizer for more in-depth checklist*

Nature of Business: _____

Date Business Started: _____

Which of the following expenses did your business have in 2022?

- | | |
|--|--|
| <input type="checkbox"/> Inventory Purchases | <input type="checkbox"/> Interest paid on business loans |
| <input type="checkbox"/> Contract Labor | <input type="checkbox"/> Insurance (Not Health) |
| <input type="checkbox"/> Advertising | <input type="checkbox"/> Legal & Professional Services |
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Did your business:

- Yes No Use an Automobile? Type: _____
Business miles 1/1-6/30: _____ 7/1-12/31: _____;
Personal miles: _____
- Yes No Have a home office? Must be Regular & Exclusive.
Sq Ft: _____ Sq Ft of entire home: _____
- Yes No Acquire or dispose of Tools/Equipment/Assets? *Please provide Invoice/Bill of Sale.*
- Yes No Pay any service providers, contractors, or casual labor?
 Yes No If "Yes", would you like us to issue 1099's?
- Yes No Have Inventory on hand December 31, 2022?
- Yes No Pay wages to W-2 type employees?
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- Yes No Make or receive any loans/leases/notes or payments?
- Yes No Engage in Bartering?
- Yes No Have more than one owner?
- Yes No Is this business an LLC? If "Yes" please provide LLC Articles of Organization and Operating Agreement.

Separate Business Address: _____

Method of Accounting: Cash Accrual Other/Not SureCould this be considered a Hobby? Yes No Not Sure

How many hours did you "participate" (work) in the business operations during 2022? 500+ annual hours may be needed: _____

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Please attach additional sheets for any other information you need to provide.
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Phone: 770-704-7777 - Email: info@taxsmart1040.com

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Call (770)704-7777 to schedule an appointment. Please complete as much as possible prior to your appointment.

Personal Information ~ Provide SS Cards & Driver's Licenses:

Your Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Spouse's Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

1) _____

2) _____

3) _____

Yes No Could anyone else claim any of your dependents?

Yes No Any Child Care costs? If "Yes", provide amounts paid, care provider name(s), EIN's, and address(es) for EACH dependent.

Regular Income: Please attach Forms W-2, 1099-Misc, 1099R, 1099-SSA, K-1, 1099G, etc. Provide details/amounts if missing forms.

Yes No Wages, tips, etc. from job(s)? (W-2)

Yes No Interest from banks, bonds, other? (1099-INT)

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General Questions:

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Yes No Did you file 2021 tax return? **Provide Copy/PDF.**

Yes No Do you or your spouse owe any back taxes?

Please note, to avoid penalty, you must pay all taxes due by April 18th. An extension only grants more time to file, not to pay.

Other Special Situations: May require detailed documentation

Yes No Pay any Estimated Tax Payments? Please list amounts, dates, and to whom paid (GA, IRS, etc.)

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Sq Ft: _____ Sq Ft of entire home: _____

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Yes No Engage in Bartering?

Yes No Have more than one owner?

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Separate Business Address: _____

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Could this be considered a Hobby? Yes No Not Sure

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Personal Information ~ Provide SS Cards & Driver's Licenses:

Your Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Spouse's Full Name: _____

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Phone: _____

Email: _____

Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

1) _____

2) _____

3) _____

Yes No Could anyone else claim any of your dependents?

Yes No Any Child Care costs? If "Yes", provide amounts paid, care provider name(s), EIN's, and address(es) for EACH dependent.

Regular Income: Please attach Forms W-2, 1099-Misc, 1099R, 1099-SSA, K-1, 1099G, etc. Provide details/amounts if missing forms.

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Yes No Do you or your spouse owe any back taxes?

Please note, to avoid penalty, you must pay all taxes due by April 18th. An extension only grants more time to file, not to pay.

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Expenses/Deductions:

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Yes No Have a home office? Must be Regular & Exclusive.

Sq Ft: _____ Sq Ft of entire home: _____

Yes No Acquire or dispose of Tools/Equipment/Assets? *Please provide Invoice/Bill of Sale.*

Yes No Pay any service providers, contractors, or casual labor?

Yes No If "Yes", would you like us to issue 1099's?

Yes No Have Inventory on hand December 31, 2022?

Yes No Pay wages to W-2 type employees?

Yes No Receive EIDL, PPP, SBA Loan, etc.?

Yes No Make or receive any loans/leases/notes or payments?

Yes No Engage in Bartering?

Yes No Have more than one owner?

Yes No Is this business an LLC? If "Yes" please provide LLC Articles of Organization and Operating Agreement.

Separate Business Address: _____

Method of Accounting: Cash Accrual Other/Not Sure

Could this be considered a Hobby? Yes No Not Sure

How many hours did you "participate" (work) in the business operations during 2022? 500+ annual hours may be needed: _____

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Phone: 770-704-7777 - Email: info@taxsmart1040.com



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Call (770)704-7777 to schedule an appointment. Please complete as much as possible prior to your appointment.

Personal Information ~ Provide SS Cards & Driver's Licenses:

Your Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Spouse's Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

1) _____

2) _____

3) _____

Yes No Could anyone else claim any of your dependents?

Yes No Any Child Care costs? If "Yes", provide amounts paid, care provider name(s), EIN's, and address(es) for EACH dependent.

Regular Income: Please attach Forms W-2, 1099-Misc, 1099R, 1099-SSA, K-1, 1099G, etc. Provide details/amounts if missing forms.

Yes No Wages, tips, etc. from job(s)? (W-2)

Yes No Interest from banks, bonds, other? (1099-INT)

Yes No Dividends? (1099-DIV)

Yes No Did you receive any tax refunds in 2022?

Yes No Alimony Paid/Received? \$ _____

Yes No Sell, buy or trade any assets, stocks, bonds, mutual funds, or other assets? (1099-B).

Yes No Distributions from 401(k), IRA, Pension, Annuity, etc.? (1099-R)

Yes No Spend, Receive, Sell, Exchange, Acquire, or Mine any Virtual Currency such as Bitcoin, Ethereum, etc?

Yes No Own any rental property including a vacation home?

Yes No Unemployment Income? (1099-G)

Yes No Social Security Benefits? (1099-SSA)

Yes No Gambling Income and Related Expenses? (W2G)

Yes No Cancellation of Debt/Foreclosure? (1099-A or -C)

Yes No Any small business income/loss from an S-Corp, Partnership, LLC, Sole Proprietor? (K-1, 1099-Misc, 1099-K)

Yes No Did you sell anything online: Craigslist, eBay, FB Marketplace, etc. (1099K)?

Yes No Any other income, e.g. Uber/Lyft, Crowdfunding, other? Please explain:

General Questions:

Yes No Direct Deposit your refund into your bank account? *Must attach a voided check.* Otherwise you will receive refund checks. Amounts due will NOT be drafted from your account.

Yes No Did you file 2021 tax return? **Provide Copy/PDF.**

Yes No Do you or your spouse owe any back taxes?

Please note, to avoid penalty, you must pay all taxes due by April 18th. An extension only grants more time to file, not to pay.

Yes No Did your address change? Please attach.

Yes No At any time during 2022 did you have any financial interest or signature authority over a foreign financial account, including overseas gaming?

Yes No During 2022, did you receive a distribution from, were the grantor of, or transferor to a foreign trust?

How would you like to receive your copy of the completed tax return?

Paper Copy Digital/PDF Copy

Other Special Situations: May require detailed documentation

Yes No Pay any Estimated Tax Payments? Please list amounts, dates, and to whom paid (GA, IRS, etc.)

Yes No Any births or deaths in your household? Did any children cease to be your dependents in 2022?

Yes No Did your marital status change during 2022?

Yes No Did you earn income in another state or country?

Yes No Did you buy, sell or refinance (including loan modification) property in 2022? If yes, attach closing statements.

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Yes No Did your child (under age 24) have any investment income? Please attach 1099's and/or tax return.

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Yes No Do you have a Health Savings Account? (1099-SA)

Yes No Pay any Household Employees such as gardeners, housekeepers, nannies, etc.?

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Expenses/Deductions:

- Yes No IRA Contribution: Traditional Roth SEP Other
Self \$ _____ Spouse \$ _____
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- Yes No After-tax Health Insurance, including Medicare?
- Yes No Did anyone in your family receive health insurance from HealthCare.gov or other state run Marketplace? (Form 1095)
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- Yes No Cash/Checks/Money etc.
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- Yes No Did you contribute to a 529 College Savings Plan?
- Yes No Unreimbursed Educator Expenses (K-12 only)?

Rental Property:

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- Yes No Disposed/Stopped Renting during 2022?

Type of Rental: _____

Address: _____

Days Rented: _____ Days Vacant/Empty: _____

Personal use days (self, friends, family): _____

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21 Years!
2002 - 2023

Please attach additional sheets for any other information you need to provide.
TaxSmart Business Services - (125 Barrett Road) PO Box 280, Holly Springs, GA, 30142

Phone: 770-704-7777 - Email: info@taxsmart1040.com

TaxSmart Business Services – 2022 Income Tax Organizer

Call (770)704-7777 to schedule an appointment. Please complete as much as possible prior to your appointment.

Personal Information ~ Provide SS Cards & Driver's Licenses:

Your Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Spouse's Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

1) _____

2) _____

3) _____

Yes No Could anyone else claim any of your dependents?

Yes No Any Child Care costs? If "Yes", provide amounts paid, care provider name(s), EIN's, and address(es) for EACH dependent.

Regular Income: Please attach Forms W-2, 1099-Misc, 1099R, 1099-SSA, K-1, 1099G, etc. Provide details/amounts if missing forms.

Yes No Wages, tips, etc. from job(s)? (W-2)

Yes No Interest from banks, bonds, other? (1099-INT)

Yes No Dividends? (1099-DIV)

Yes No Did you receive any tax refunds in 2022?

Yes No Alimony Paid/Received? \$ _____

Yes No Sell, buy or trade any assets, stocks, bonds, mutual funds, or other assets? (1099-B).

Yes No Distributions from 401(k), IRA, Pension, Annuity, etc.? (1099-R)

Yes No Spend, Receive, Sell, Exchange, Acquire, or Mine any Virtual Currency such as Bitcoin, Ethereum, etc?

Yes No Own any rental property including a vacation home?

Yes No Unemployment Income? (1099-G)

Yes No Social Security Benefits? (1099-SSA)

Yes No Gambling Income and Related Expenses? (W2G)

Yes No Cancellation of Debt/Foreclosure? (1099-A or -C)

Yes No Any small business income/loss from an S-Corp, Partnership, LLC, Sole Proprietor? (K-1, 1099-Misc, 1099-K)

Yes No Did you sell anything online: Craigslist, eBay, FB Marketplace, etc. (1099K)?

Yes No Any other income, e.g. Uber/Lyft, Crowdfunding, other? Please explain:

General Questions:

Yes No Direct Deposit your refund into your bank account? *Must attach a voided check.* Otherwise you will receive refund checks. Amounts due will NOT be drafted from your account.

Yes No Did you file 2021 tax return? **Provide Copy/PDF.**

Yes No Do you or your spouse owe any back taxes?

Please note, to avoid penalty, you must pay all taxes due by April 18th. An extension only grants more time to file, not to pay.

Other Special Situations: May require detailed documentation

Yes No Pay any Estimated Tax Payments? Please list amounts, dates, and to whom paid (GA, IRS, etc.)

Yes No Any births or deaths in your household? Did any children cease to be your dependents in 2022?

Yes No Did your marital status change during 2022?

Yes No Did you earn income in another state or country?

Yes No Did you buy, sell or refinance (including loan modification) property in 2022? If yes, attach closing statements.

Yes No During 2022, were there any changes to federal or state tax returns filed in prior years? Please attach notices.

Yes No Did you suffer a casualty or loss in 2022 in a presidentially declared disaster area? www.fema.gov/disasters

Yes No Receive any hobby income?

Yes No Moving Expenses? (Only for active military)

Yes No Did your address change? Please attach.

Yes No At any time during 2022 did you have any financial interest or signature authority over a foreign financial account, including overseas gaming?

Yes No During 2022, did you receive a distribution from, were the grantor of, or transferor to a foreign trust?

How would you like to receive your copy of the completed tax return?

Paper Copy Digital/PDF Copy

Yes No College expenses for self, spouse or dependent?

Yes No Have any Unreimbursed Partnership Expenses in 2022?

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Yes No Did you pay any foreign taxes in 2022?

Yes No Did you adopt a child in 2022?

Yes No Did your child (under age 24) have any investment income? Please attach 1099's and/or tax return.

Yes No An Armed Forces Reservist, Qualified Performing Artist, or Government Fee Basis Official?

Yes No Do you have a Health Savings Account? (1099-SA)

Yes No Pay any Household Employees such as gardeners, housekeepers, nannies, etc.?

Yes No Do you expect a substantial change in your income or deductions next year (2023)? Please attach explanation:

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Expenses/Deductions:

- Yes No IRA Contribution: Traditional Roth SEP Other
Self \$ _____ Spouse \$ _____
- Yes No Penalty on early withdrawal from CD? \$ _____
- Yes No Student Loan interest paid? _____

Medical Expenses:

- Yes No After-tax Health Insurance, including Medicare?
- Yes No Did anyone in your family receive health insurance from HealthCare.gov or other state run Marketplace? (Form 1095)
- Yes No Are you part of a Healthcare Sharing Ministry?
- Yes No Did you pay Long Term Care Insurance premiums?
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Taxes & Interest Expenses:

- Yes No Do you own your own home?
 Yes No Real Estate Taxes (Form 1098 or other)?
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- Yes No Did you purchase a boat, airplane, RV, etc.?
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Gifts to Charity *Documentation required for all donations:*

- Yes No Cash/Checks/Money etc.
- Yes No Non-Cash Gifts i.e. Household items to Goodwill?
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- Yes No Qualified Charitable Distribution from IRA.

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- Yes No Install an electric vehicle charger in your home?
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- Yes No Did you contribute to a 529 College Savings Plan?
- Yes No Unreimbursed Educator Expenses (K-12 only)?

Rental Property:

- Yes No First Placed in Service in 2022? If "Yes", please provide appraisal and settlement statements.
- Yes No Disposed/Stopped Renting during 2022?

Type of Rental: _____

Address: _____

Days Rented: _____ Days Vacant/Empty: _____

Personal use days (self, friends, family): _____

Average length of rental stay (in days): _____

Hours you & your spouse worked on rental: _____

Small Business or Farming*Request our 2022 Business Tax Organizer for more in-depth checklist*

Nature of Business: _____

Date Business Started: _____

Which of the following expenses did your business have in 2022?

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|--|--|
| <input type="checkbox"/> Inventory Purchases | <input type="checkbox"/> Interest paid on business loans |
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Business miles 1/1-6/30: _____ 7/1-12/31: _____;
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Business miles 1/1-6/30: _____ 7/1-12/31: _____;

Personal miles: _____

Yes No Have a home office? Must be Regular & Exclusive.

Sq Ft: _____ Sq Ft of entire home: _____

Yes No Acquire or dispose of Tools/Equipment/Assets? *Please provide Invoice/Bill of Sale.*

Yes No Pay any service providers, contractors, or casual labor?

Yes No If "Yes", would you like us to issue 1099's?

Yes No Have Inventory on hand December 31, 2022?

Yes No Pay wages to W-2 type employees?

Yes No Receive EIDL, PPP, SBA Loan, etc.?

Yes No Make or receive any loans/leases/notes or payments?

Yes No Engage in Bartering?

Yes No Have more than one owner?

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Separate Business Address: _____

Method of Accounting: Cash Accrual Other/Not Sure

Could this be considered a Hobby? Yes No Not Sure

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Please attach additional sheets for any other information you need to provide.
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Phone: 770-704-7777 - Email: info@taxsmart1040.com



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Call (770)704-7777 to schedule an appointment. Please complete as much as possible prior to your appointment.

Personal Information ~ Provide SS Cards & Driver's Licenses:

Your Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Spouse's Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

1) _____

2) _____

3) _____

Yes No Could anyone else claim any of your dependents?

Yes No Any Child Care costs? If "Yes", provide amounts paid, care provider name(s), EIN's, and address(es) for EACH dependent.

Regular Income: Please attach Forms W-2, 1099-Misc, 1099R, 1099-SSA, K-1, 1099G, etc. Provide details/amounts if missing forms.

Yes No Wages, tips, etc. from job(s)? (W-2)

Yes No Interest from banks, bonds, other? (1099-INT)

Yes No Dividends? (1099-DIV)

Yes No Did you receive any tax refunds in 2022?

Yes No Alimony Paid/Received? \$ _____

Yes No Sell, buy or trade any assets, stocks, bonds, mutual funds, or other assets? (1099-B).

Yes No Distributions from 401(k), IRA, Pension, Annuity, etc.? (1099-R)

Yes No Spend, Receive, Sell, Exchange, Acquire, or Mine any Virtual Currency such as Bitcoin, Ethereum, etc?

Yes No Own any rental property including a vacation home?

Yes No Unemployment Income? (1099-G)

Yes No Social Security Benefits? (1099-SSA)

Yes No Gambling Income and Related Expenses? (W2G)

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Yes No Any small business income/loss from an S-Corp, Partnership, LLC, Sole Proprietor? (K-1, 1099-Misc, 1099-K)

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Yes No Any other income, e.g. Uber/Lyft, Crowdfunding, other? Please explain:

General Questions:

Yes No Direct Deposit your refund into your bank account? *Must attach a voided check.* Otherwise you will receive refund checks. Amounts due will NOT be drafted from your account.

Yes No Did you file 2021 tax return? **Provide Copy/PDF.**

Yes No Do you or your spouse owe any back taxes?

Please note, to avoid penalty, you must pay all taxes due by April 18th. An extension only grants more time to file, not to pay.

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Yes No Pay any Estimated Tax Payments? Please list amounts, dates, and to whom paid (GA, IRS, etc.)

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Yes No Do you have a Health Savings Account? (1099-SA)

Yes No Pay any Household Employees such as gardeners, housekeepers, nannies, etc.?

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Expenses/Deductions:

- Yes No IRA Contribution: Traditional Roth SEP Other
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- Yes No After-tax Health Insurance, including Medicare?
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Address: _____

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21 Years!
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Phone: 770-704-7777 - Email: info@taxsmart1040.com

TaxSmart Business Services – 2022 Income Tax Organizer

Call (770)704-7777 to schedule an appointment. Please complete as much as possible prior to your appointment.

Personal Information ~ Provide SS Cards & Driver's Licenses:

Your Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Spouse's Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

1) _____

2) _____

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Yes No Could anyone else claim any of your dependents?

Yes No Any Child Care costs? If "Yes", provide amounts paid, care provider name(s), EIN's, and address(es) for EACH dependent.

Regular Income: Please attach Forms W-2, 1099-Misc, 1099R, 1099-SSA, K-1, 1099G, etc. Provide details/amounts if missing forms.

Yes No Wages, tips, etc. from job(s)? (W-2)

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Yes No Alimony Paid/Received? \$ _____

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Yes No Unemployment Income? (1099-G)

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Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

1) _____

2) _____

3) _____

Yes No Could anyone else claim any of your dependents?

Yes No Any Child Care costs? If "Yes", provide amounts paid, care provider name(s), EIN's, and address(es) for EACH dependent.

Regular Income: Please attach Forms W-2, 1099-Misc, 1099R, 1099-SSA, K-1, 1099G, etc. Provide details/amounts if missing forms.

Yes No Wages, tips, etc. from job(s)? (W-2)

Yes No Interest from banks, bonds, other? (1099-INT)

Yes No Dividends? (1099-DIV)

Yes No Did you receive any tax refunds in 2022?

Yes No Alimony Paid/Received? \$ _____

Yes No Sell, buy or trade any assets, stocks, bonds, mutual funds, or other assets? (1099-B).

Yes No Distributions from 401(k), IRA, Pension, Annuity, etc.? (1099-R)

Yes No Spend, Receive, Sell, Exchange, Acquire, or Mine any Virtual Currency such as Bitcoin, Ethereum, etc?

Yes No Own any rental property including a vacation home?

Yes No Unemployment Income? (1099-G)

Yes No Social Security Benefits? (1099-SSA)

Yes No Gambling Income and Related Expenses? (W2G)

Yes No Cancellation of Debt/Foreclosure? (1099-A or -C)

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General Questions:

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Expenses/Deductions:

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- Yes No After-tax Health Insurance, including Medicare?
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Address: _____

Days Rented: _____ Days Vacant/Empty: _____

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Yes No Distributions from 401(k), IRA, Pension, Annuity, etc.? (1099-R)

Yes No Spend, Receive, Sell, Exchange, Acquire, or Mine any Virtual Currency such as Bitcoin, Ethereum, etc?

Yes No Own any rental property including a vacation home?

Yes No Unemployment Income? (1099-G)

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Please note, to avoid penalty, you must pay all taxes due by April 18th. An extension only grants more time to file, not to pay.

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| <input type="checkbox"/> Telephone | <input type="checkbox"/> Commissions & Fees |
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Did your business:

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Phone: _____
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 Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

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Full Name – DOB – Relationship - College Student? - 2022 Income?

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Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

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How would you like to receive your copy of the completed tax return?

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- Yes No Disposed/Stopped Renting during 2022?

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Address: _____

Days Rented: _____ Days Vacant/Empty: _____

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| <input type="checkbox"/> Supplies | <input type="checkbox"/> Taxes & Licenses |
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| <input type="checkbox"/> Utilities (not home) | <input type="checkbox"/> Wages paid to Employees |
| <input type="checkbox"/> Telephone | <input type="checkbox"/> Commissions & Fees |
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Did your business:

- Yes No Use an Automobile? Type: _____
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- Yes No Have more than one owner?
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Your Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

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Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

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Full Name – DOB – Relationship - College Student? - 2022 Income?

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Yes No Could anyone else claim any of your dependents?

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Email: _____

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Type of Rental: _____

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Did your business:

- Yes No Use an Automobile? Type: _____
Business miles 1/1-6/30: _____ 7/1-12/31: _____;
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Your Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Spouse's Full Name: _____

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Yes No Not Sure: Do you want to file a joint return?

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Occupation: _____ Blind? Disabled?
Phone: _____
Email: _____
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Provide SS Card & Proof of Residency for each dependent.

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- Yes No Do you own your own home?
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- Yes No Cash/Checks/Money etc.
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- Yes No Qualified Charitable Distribution from IRA.

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Type of Rental: _____

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| <input type="checkbox"/> Supplies | <input type="checkbox"/> Taxes & Licenses |
| <input type="checkbox"/> Out of Town Travel | <input type="checkbox"/> Meals & Entertainment |
| <input type="checkbox"/> Utilities (not home) | <input type="checkbox"/> Wages paid to Employees |
| <input type="checkbox"/> Telephone | <input type="checkbox"/> Commissions & Fees |
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Did your business:

- Yes No Use an Automobile? Type: _____
Business miles 1/1-6/30: _____ 7/1-12/31: _____;
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Separate Business Address: _____

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Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

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Phone: _____

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Full Name – DOB – Relationship - College Student? - 2022 Income?

1) _____

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Yes No Could anyone else claim any of your dependents?

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Other Miscellaneous Items:

- Yes No Install an electric vehicle charger in your home?
- Yes No Rollover \$\$\$ from an IRA, 401(k), Annuity, etc.?
- Yes No Receive an inheritance (Sch K-1)?
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Type of Rental: _____

Address: _____

Days Rented: _____ Days Vacant/Empty: _____

Personal use days (self, friends, family): _____

Average length of rental stay (in days): _____

Hours you & your spouse worked on rental: _____

Small Business or Farming*Request our 2022 Business Tax Organizer for more in-depth checklist*

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Which of the following expenses did your business have in 2022?

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| <input type="checkbox"/> Advertising | <input type="checkbox"/> Legal & Professional Services |
| <input type="checkbox"/> Office Supplies | <input type="checkbox"/> Office/Building Rent |
| <input type="checkbox"/> Equipment Rent | <input type="checkbox"/> Repairs/Maintenance/Cleaning |
| <input type="checkbox"/> Supplies | <input type="checkbox"/> Taxes & Licenses |
| <input type="checkbox"/> Out of Town Travel | <input type="checkbox"/> Meals & Entertainment |
| <input type="checkbox"/> Utilities (not home) | <input type="checkbox"/> Wages paid to Employees |
| <input type="checkbox"/> Telephone | <input type="checkbox"/> Commissions & Fees |
| <input type="checkbox"/> Postage | <input type="checkbox"/> Employee Benefits |
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Did your business:

- Yes No Use an Automobile? Type: _____
Business miles 1/1-6/30: _____ 7/1-12/31: _____;
Personal miles: _____
- Yes No Have a home office? Must be Regular & Exclusive.
Sq Ft: _____ Sq Ft of entire home: _____
- Yes No Acquire or dispose of Tools/Equipment/Assets? *Please provide Invoice/Bill of Sale.*
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- Yes No Engage in Bartering?
- Yes No Have more than one owner?
- Yes No Is this business an LLC? If "Yes" please provide LLC Articles of Organization and Operating Agreement.

Separate Business Address: _____

Method of Accounting: Cash Accrual Other/Not Sure
Could this be considered a Hobby? Yes No Not Sure

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Personal Information ~ Provide SS Cards & Driver's Licenses:

Your Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Spouse's Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

1) _____

2) _____

3) _____

Yes No Could anyone else claim any of your dependents?

Yes No Any Child Care costs? If "Yes", provide amounts paid, care provider name(s), EIN's, and address(es) for EACH dependent.

Regular Income: Please attach Forms W-2, 1099-Misc, 1099R, 1099-SSA, K-1, 1099G, etc. Provide details/amounts if missing forms.

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Yes No Own any rental property including a vacation home?

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| <input type="checkbox"/> Advertising | <input type="checkbox"/> Legal & Professional Services |
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| <input type="checkbox"/> Supplies | <input type="checkbox"/> Taxes & Licenses |
| <input type="checkbox"/> Out of Town Travel | <input type="checkbox"/> Meals & Entertainment |
| <input type="checkbox"/> Utilities (not home) | <input type="checkbox"/> Wages paid to Employees |
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Did your business:

- Yes No Use an Automobile? Type: _____
Business miles 1/1-6/30: _____ 7/1-12/31: _____;
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- Yes No Have a home office? Must be Regular & Exclusive.
Sq Ft: _____ Sq Ft of entire home: _____
- Yes No Acquire or dispose of Tools/Equipment/Assets? *Please provide Invoice/Bill of Sale.*
- Yes No Pay any service providers, contractors, or casual labor?
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- Yes No Have Inventory on hand December 31, 2022?
- Yes No Pay wages to W-2 type employees?
- Yes No Receive EIDL, PPP, SBA Loan, etc.?
- Yes No Make or receive any loans/leases/notes or payments?
- Yes No Engage in Bartering?
- Yes No Have more than one owner?
- Yes No Is this business an LLC? If "Yes" please provide LLC Articles of Organization and Operating Agreement.

Separate Business Address: _____

Method of Accounting: Cash Accrual Other/Not SureCould this be considered a Hobby? Yes No Not Sure

How many hours did you "participate" (work) in the business operations during 2022? 500+ annual hours may be needed: _____

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Phone: 770-704-7777 - Email: info@taxsmart1040.com

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Call (770)704-7777 to schedule an appointment. Please complete as much as possible prior to your appointment.

Personal Information ~ Provide SS Cards & Driver's Licenses:

Your Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Spouse's Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

1) _____

2) _____

3) _____

Yes No Could anyone else claim any of your dependents?

Yes No Any Child Care costs? If "Yes", provide amounts paid, care provider name(s), EIN's, and address(es) for EACH dependent.

Regular Income: Please attach Forms W-2, 1099-Misc, 1099R, 1099-SSA, K-1, 1099G, etc. Provide details/amounts if missing forms.

Yes No Wages, tips, etc. from job(s)? (W-2)

Yes No Interest from banks, bonds, other? (1099-INT)

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Yes No Did you receive any tax refunds in 2022?

Yes No Alimony Paid/Received? \$ _____

Yes No Sell, buy or trade any assets, stocks, bonds, mutual funds, or other assets? (1099-B).

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Yes No Spend, Receive, Sell, Exchange, Acquire, or Mine any Virtual Currency such as Bitcoin, Ethereum, etc?

Yes No Own any rental property including a vacation home?

Yes No Unemployment Income? (1099-G)

Yes No Social Security Benefits? (1099-SSA)

Yes No Gambling Income and Related Expenses? (W2G)

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Yes No Any small business income/loss from an S-Corp, Partnership, LLC, Sole Proprietor? (K-1, 1099-Misc, 1099-K)

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General Questions:

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Yes No Did you file 2021 tax return? **Provide Copy/PDF.**

Yes No Do you or your spouse owe any back taxes?

Please note, to avoid penalty, you must pay all taxes due by April 18th. An extension only grants more time to file, not to pay.

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Yes No Pay any Estimated Tax Payments? Please list amounts, dates, and to whom paid (GA, IRS, etc.)

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Yes No Moving Expenses? (Only for active military)

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Yes No Did your child (under age 24) have any investment income? Please attach 1099's and/or tax return.

Yes No An Armed Forces Reservist, Qualified Performing Artist, or Government Fee Basis Official?

Yes No Do you have a Health Savings Account? (1099-SA)

Yes No Pay any Household Employees such as gardeners, housekeepers, nannies, etc.?

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- Yes No IRA Contribution: Traditional Roth SEP Other
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Did your business:

- Yes No Use an Automobile? Type: _____
Business miles 1/1-6/30: _____ 7/1-12/31: _____;
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- Yes No Have more than one owner?
- Yes No Is this business an LLC? If "Yes" please provide LLC Articles of Organization and Operating Agreement.

Separate Business Address: _____

Method of Accounting: Cash Accrual Other/Not SureCould this be considered a Hobby? Yes No Not Sure

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Call (770)704-7777 to schedule an appointment. Please complete as much as possible prior to your appointment.

Personal Information ~ Provide SS Cards & Driver's Licenses:

Your Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Spouse's Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

1) _____

2) _____

3) _____

Yes No Could anyone else claim any of your dependents?

Yes No Any Child Care costs? If "Yes", provide amounts paid, care provider name(s), EIN's, and address(es) for EACH dependent.

Regular Income: Please attach Forms W-2, 1099-Misc, 1099R, 1099-SSA, K-1, 1099G, etc. Provide details/amounts if missing forms.

Yes No Wages, tips, etc. from job(s)? (W-2)

Yes No Interest from banks, bonds, other? (1099-INT)

Yes No Dividends? (1099-DIV)

Yes No Did you receive any tax refunds in 2022?

Yes No Alimony Paid/Received? \$ _____

Yes No Sell, buy or trade any assets, stocks, bonds, mutual funds, or other assets? (1099-B).

Yes No Distributions from 401(k), IRA, Pension, Annuity, etc.? (1099-R)

Yes No Spend, Receive, Sell, Exchange, Acquire, or Mine any Virtual Currency such as Bitcoin, Ethereum, etc?

Yes No Own any rental property including a vacation home?

Yes No Unemployment Income? (1099-G)

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General Questions:

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Yes No Do you or your spouse owe any back taxes?

Please note, to avoid penalty, you must pay all taxes due by April 18th. An extension only grants more time to file, not to pay.

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Yes No Pay any Estimated Tax Payments? Please list amounts, dates, and to whom paid (GA, IRS, etc.)

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Yes No Pay any Household Employees such as gardeners, housekeepers, nannies, etc.?

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- Yes No IRA Contribution: Traditional Roth SEP Other
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- Yes No After-tax Health Insurance, including Medicare?
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- Yes No Make or receive any loans/leases/notes or payments?
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- Yes No Have more than one owner?
- Yes No Is this business an LLC? If "Yes" please provide LLC Articles of Organization and Operating Agreement.

Separate Business Address: _____

Method of Accounting: Cash Accrual Other/Not SureCould this be considered a Hobby? Yes No Not Sure

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Phone: 770-704-7777 - Email: info@taxsmart1040.com

TaxSmart Business Services – 2022 Income Tax Organizer

Call (770)704-7777 to schedule an appointment. Please complete as much as possible prior to your appointment.

Personal Information ~ Provide SS Cards & Driver's Licenses:

Your Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Spouse's Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

1) _____

2) _____

3) _____

Yes No Could anyone else claim any of your dependents?

Yes No Any Child Care costs? If "Yes", provide amounts paid, care provider name(s), EIN's, and address(es) for EACH dependent.

Regular Income: Please attach Forms W-2, 1099-Misc, 1099R, 1099-SSA, K-1, 1099G, etc. Provide details/amounts if missing forms.

Yes No Wages, tips, etc. from job(s)? (W-2)

Yes No Interest from banks, bonds, other? (1099-INT)

Yes No Dividends? (1099-DIV)

Yes No Did you receive any tax refunds in 2022?

Yes No Alimony Paid/Received? \$ _____

Yes No Sell, buy or trade any assets, stocks, bonds, mutual funds, or other assets? (1099-B).

Yes No Distributions from 401(k), IRA, Pension, Annuity, etc.? (1099-R)

Yes No Spend, Receive, Sell, Exchange, Acquire, or Mine any Virtual Currency such as Bitcoin, Ethereum, etc?

Yes No Own any rental property including a vacation home?

Yes No Unemployment Income? (1099-G)

Yes No Social Security Benefits? (1099-SSA)

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General Questions:

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Please note, to avoid penalty, you must pay all taxes due by April 18th. An extension only grants more time to file, not to pay.

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Yes No Pay any Estimated Tax Payments? Please list amounts, dates, and to whom paid (GA, IRS, etc.)

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Expenses/Deductions:

- Yes No IRA Contribution: Traditional Roth SEP Other
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Address: _____

Days Rented: _____ Days Vacant/Empty: _____

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Did your business:

- Yes No Use an Automobile? Type: _____
Business miles 1/1-6/30: _____ 7/1-12/31: _____;
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Your Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Spouse's Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

1) _____

2) _____

3) _____

Yes No Could anyone else claim any of your dependents?

Yes No Any Child Care costs? If "Yes", provide amounts paid, care provider name(s), EIN's, and address(es) for EACH dependent.

Regular Income: Please attach Forms W-2, 1099-Misc, 1099R, 1099-SSA, K-1, 1099G, etc. Provide details/amounts if missing forms.

Yes No Wages, tips, etc. from job(s)? (W-2)

Yes No Interest from banks, bonds, other? (1099-INT)

Yes No Dividends? (1099-DIV)

Yes No Did you receive any tax refunds in 2022?

Yes No Alimony Paid/Received? \$ _____

Yes No Sell, buy or trade any assets, stocks, bonds, mutual funds, or other assets? (1099-B).

Yes No Distributions from 401(k), IRA, Pension, Annuity, etc.? (1099-R)

Yes No Spend, Receive, Sell, Exchange, Acquire, or Mine any Virtual Currency such as Bitcoin, Ethereum, etc?

Yes No Own any rental property including a vacation home?

Yes No Unemployment Income? (1099-G)

Yes No Social Security Benefits? (1099-SSA)

Yes No Gambling Income and Related Expenses? (W2G)

Yes No Cancellation of Debt/Foreclosure? (1099-A or -C)

Yes No Any small business income/loss from an S-Corp, Partnership, LLC, Sole Proprietor? (K-1, 1099-Misc, 1099-K)

Yes No Did you sell anything online: Craigslist, eBay, FB Marketplace, etc. (1099K)?

Yes No Any other income, e.g. Uber/Lyft, Crowdfunding, other? Please explain:

General Questions:

Yes No Direct Deposit your refund into your bank account? *Must attach a voided check.* Otherwise you will receive refund checks. Amounts due will NOT be drafted from your account.

Yes No Did you file 2021 tax return? **Provide Copy/PDF.**

Yes No Do you or your spouse owe any back taxes?

Please note, to avoid penalty, you must pay all taxes due by April 18th. An extension only grants more time to file, not to pay.

Yes No Did your address change? Please attach.

Yes No At any time during 2022 did you have any financial interest or signature authority over a foreign financial account, including overseas gaming?

Yes No During 2022, did you receive a distribution from, were the grantor of, or transferor to a foreign trust?

How would you like to receive your copy of the completed tax return?

Paper Copy Digital/PDF Copy

Other Special Situations: May require detailed documentation

Yes No Pay any Estimated Tax Payments? Please list amounts, dates, and to whom paid (GA, IRS, etc.)

Yes No Any births or deaths in your household? Did any children cease to be your dependents in 2022?

Yes No Did your marital status change during 2022?

Yes No Did you earn income in another state or country?

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Yes No Did you suffer a casualty or loss in 2022 in a presidentially declared disaster area? www.fema.gov/disasters

Yes No Receive any hobby income?

Yes No Moving Expenses? (Only for active military)

Yes No College expenses for self, spouse or dependent?

Yes No Have any Unreimbursed Partnership Expenses in 2022?

Yes No Have an IRS IP-PIN for self, spouse, or dependent?

Yes No Did you pay any foreign taxes in 2022?

Yes No Did you adopt a child in 2022?

Yes No Did your child (under age 24) have any investment income? Please attach 1099's and/or tax return.

Yes No An Armed Forces Reservist, Qualified Performing Artist, or Government Fee Basis Official?

Yes No Do you have a Health Savings Account? (1099-SA)

Yes No Pay any Household Employees such as gardeners, housekeepers, nannies, etc.?

Yes No Do you expect a substantial change in your income or deductions next year (2023)? Please attach explanation:

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Expenses/Deductions:

- Yes No IRA Contribution: Traditional Roth SEP Other
Self \$ _____ Spouse \$ _____
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Medical Expenses:

- Yes No After-tax Health Insurance, including Medicare?
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Taxes & Interest Expenses:

- Yes No Do you own your own home?
- Yes No Real Estate Taxes (Form 1098 or other)?
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- Yes No Annual Ad Valorem Taxes on car, boat, etc.?
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- Yes No Cash/Checks/Money etc.
- Yes No Non-Cash Gifts i.e. Household items to Goodwill?
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- Yes No Qualified Charitable Distribution from IRA.

Other Miscellaneous Items:

- Yes No Install an electric vehicle charger in your home?
- Yes No Rollover \$\$\$ from an IRA, 401(k), Annuity, etc.?
- Yes No Receive an inheritance (Sch K-1)?
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- Yes No Did you contribute to a 529 College Savings Plan?
- Yes No Unreimbursed Educator Expenses (K-12 only)?

Rental Property:

- Yes No First Placed in Service in 2022? If "Yes", please provide appraisal and settlement statements.
- Yes No Disposed/Stopped Renting during 2022?

Type of Rental: _____

Address: _____

Days Rented: _____ Days Vacant/Empty: _____

Personal use days (self, friends, family): _____

Average length of rental stay (in days): _____

Hours you & your spouse worked on rental: _____

Small Business or Farming*Request our 2022 Business Tax Organizer for more in-depth checklist*

Nature of Business: _____

Date Business Started: _____

Which of the following expenses did your business have in 2022?

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|--|--|
| <input type="checkbox"/> Inventory Purchases | <input type="checkbox"/> Interest paid on business loans |
| <input type="checkbox"/> Contract Labor | <input type="checkbox"/> Insurance (Not Health) |
| <input type="checkbox"/> Advertising | <input type="checkbox"/> Legal & Professional Services |
| <input type="checkbox"/> Office Supplies | <input type="checkbox"/> Office/Building Rent |
| <input type="checkbox"/> Equipment Rent | <input type="checkbox"/> Repairs/Maintenance/Cleaning |
| <input type="checkbox"/> Supplies | <input type="checkbox"/> Taxes & Licenses |
| <input type="checkbox"/> Out of Town Travel | <input type="checkbox"/> Meals & Entertainment |
| <input type="checkbox"/> Utilities (not home) | <input type="checkbox"/> Wages paid to Employees |
| <input type="checkbox"/> Telephone | <input type="checkbox"/> Commissions & Fees |
| <input type="checkbox"/> Postage | <input type="checkbox"/> Employee Benefits |
| <input type="checkbox"/> Auto/Truck Expenses | <input type="checkbox"/> Pension & Profit Sharing |
| <input type="checkbox"/> Other Expenses (list) | <input type="checkbox"/> Inventory W/D for Personal Use |

Did your business:

- Yes No Use an Automobile? Type: _____
Business miles 1/1-6/30: _____ 7/1-12/31: _____;
Personal miles: _____
- Yes No Have a home office? Must be Regular & Exclusive.
Sq Ft: _____ Sq Ft of entire home: _____
- Yes No Acquire or dispose of Tools/Equipment/Assets? *Please provide Invoice/Bill of Sale.*
- Yes No Pay any service providers, contractors, or casual labor?
 Yes No If "Yes", would you like us to issue 1099's?
- Yes No Have Inventory on hand December 31, 2022?
- Yes No Pay wages to W-2 type employees?
- Yes No Receive EIDL, PPP, SBA Loan, etc.?
- Yes No Make or receive any loans/leases/notes or payments?
- Yes No Engage in Bartering?
- Yes No Have more than one owner?
- Yes No Is this business an LLC? If "Yes" please provide LLC Articles of Organization and Operating Agreement.

Separate Business Address: _____

Method of Accounting: Cash Accrual Other/Not SureCould this be considered a Hobby? Yes No Not Sure

How many hours did you "participate" (work) in the business operations during 2022? 500+ annual hours may be needed: _____

*Celebrating
21 Years!
2002 - 2023*

Please attach additional sheets for any other information you need to provide.
TaxSmart Business Services - (125 Barrett Road) PO Box 280, Holly Springs, GA, 30142

Phone: 770-704-7777 - Email: info@taxsmart1040.com

TaxSmart Business Services – 2022 Income Tax Organizer

Call (770)704-7777 to schedule an appointment. Please complete as much as possible prior to your appointment.

<p>Personal Information ~ Provide SS Cards & Driver's Licenses:</p> <p>Your Full Name: _____</p> <p>Occupation: _____ <input type="checkbox"/> Blind? <input type="checkbox"/> Disabled?</p> <p>Phone: _____</p> <p>Email: _____</p> <p>Spouse's Full Name: _____</p> <p>Occupation: _____ <input type="checkbox"/> Blind? <input type="checkbox"/> Disabled?</p> <p>Phone: _____</p> <p>Email: _____</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Sure: Do you want to file a joint return?</p>	<p>Dependent Information (Children, Parents, others):</p> <p style="text-align: center;">Provide SS Card & Proof of Residency for each dependent.</p> <p>Full Name – DOB – Relationship - College Student? - 2022 Income?</p> <p>1) _____</p> <p>_____</p> <p>2) _____</p> <p>_____</p> <p>3) _____</p> <p>_____</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Could anyone else claim any of your dependents?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Any Child Care costs? If "Yes", provide amounts paid, care provider name(s), EIN's, and address(es) for EACH dependent.</p>
<p>Regular Income: Please attach Forms W-2, 1099-Misc, 1099R, 1099-SSA, K-1, 1099G, etc. Provide details/amounts if missing forms.</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Wages, tips, etc. from job(s)? (W-2)</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Interest from banks, bonds, other? (1099-INT)</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Dividends? (1099-DIV)</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Did you receive any tax refunds in 2022?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Alimony Paid/Received? \$ _____</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Sell, buy or trade any assets, stocks, bonds, mutual funds, or other assets? (1099-B).</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Distributions from 401(k), IRA, Pension, Annuity, etc.? (1099-R)</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Spend, Receive, Sell, Exchange, Acquire, or Mine any Virtual Currency such as Bitcoin, Ethereum, etc?</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No Own any rental property including a vacation home?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Unemployment Income? (1099-G)</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Social Security Benefits? (1099-SSA)</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Gambling Income and Related Expenses? (W2G)</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Cancellation of Debt/Foreclosure? (1099-A or -C)</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Any small business income/loss from an S-Corp, Partnership, LLC, Sole Proprietor? (K-1, 1099-Misc, 1099-K)</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Did you sell anything online: Craigslist, eBay, FB Marketplace, etc. (1099K)?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Any other income, e.g. Uber/Lyft, Crowdfunding, other? Please explain:</p>
<p>General Questions:</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Direct Deposit your refund into your bank account? <i>Must attach a voided check.</i> Otherwise you will receive refund checks. Amounts due will NOT be drafted from your account.</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Did you file 2021 tax return? Provide Copy/PDF.</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Do you or your spouse owe any back taxes?</p> <p>Please note, to avoid penalty, you must pay all taxes due by April 18th. An extension only grants more time to file, not to pay.</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No Did your address change? Please attach.</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No At any time during 2022 did you have any financial interest or signature authority over a foreign financial account, including overseas gaming?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No During 2022, did you receive a distribution from, were the grantor of, or transferor to a foreign trust?</p> <p>How would you like to receive your copy of the completed tax return?</p> <p><input type="checkbox"/> Paper Copy <input type="checkbox"/> Digital/PDF Copy</p>
<p>Other Special Situations: May require detailed documentation</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Pay any Estimated Tax Payments? Please list amounts, dates, and to whom paid (GA, IRS, etc.)</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Any births or deaths in your household? Did any children cease to be your dependents in 2022?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Did your marital status change during 2022?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Did you earn income in another state or country?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Did you buy, sell or refinance (including loan modification) property in 2022? If yes, attach closing statements.</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No During 2022, were there any changes to federal or state tax returns filed in prior years? Please attach notices.</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Did you suffer a casualty or loss in 2022 in a presidentially declared disaster area? www.fema.gov/disasters</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Receive any hobby income?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Moving Expenses? (Only for active military)</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No College expenses for self, spouse or dependent?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Have any Unreimbursed Partnership Expenses in 2022?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Have an IRS IP-PIN for self, spouse, or dependent?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Did you pay any foreign taxes in 2022?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Did you adopt a child in 2022?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Did your child (under age 24) have any investment income? Please attach 1099's and/or tax return.</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No An Armed Forces Reservist, Qualified Performing Artist, or Government Fee Basis Official?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Do you have a Health Savings Account? (1099-SA)</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Pay any Household Employees such as gardeners, housekeepers, nannies, etc.?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Do you expect a substantial change in your income or deductions next year (2023)? Please attach explanation:</p>

(Continued on reverse)

Expenses/Deductions:

Yes No IRA Contribution: Traditional Roth SEP Other
Self \$ _____ Spouse \$ _____

Yes No Penalty on early withdrawal from CD? \$ _____

Yes No Student Loan interest paid? _____

Medical Expenses:

Yes No After-tax Health Insurance, including Medicare?

Yes No Did anyone in your family receive health insurance from HealthCare.gov or other state run Marketplace? (Form 1095)

Yes No Are you part of a Healthcare Sharing Ministry?

Yes No Did you pay Long Term Care Insurance premiums?

Yes No Any out of pocket medical expenses: Doctors, Dentist, Rx, Nursing Homes, Medical Mileage, etc.? Please list.

Taxes & Interest Expenses:

Yes No Do you own your own home?

Yes No Real Estate Taxes (Form 1098 or other)?

Yes No Mortgage Interest/Points Paid (Form 1098)?

Yes No Did you purchase a boat, airplane, RV, etc.?

Yes No Annual Ad Valorem Taxes on car, boat, etc.?

Yes No Other State, County, City or Local Taxes?

Yes No Investment Interest paid? Other Interest Paid?

Gifts to Charity *Documentation required for all donations:*

Yes No Cash/Checks/Money etc.

Yes No Non-Cash Gifts i.e. Household items to Goodwill?

Yes No Miles driven for charity?

Yes No Payroll Deductions of Charity, Union Dues, other?

Yes No Qualified Charitable Distribution from IRA.

Other Miscellaneous Items:

Yes No Install an electric vehicle charger in your home?

Yes No Rollover \$\$\$ from an IRA, 401(k), Annuity, etc.?

Yes No Receive an inheritance (Sch K-1)?

Yes No Make gifts totaling \geq \$16,000 to one person?

Yes No Did you contribute to a 529 College Savings Plan?

Yes No Unreimbursed Educator Expenses (K-12 only)?

Rental Property:

Yes No First Placed in Service in 2022? If "Yes", please provide appraisal and settlement statements.

Yes No Disposed/Stopped Renting during 2022?

Type of Rental: _____

Address: _____

Days Rented: _____ Days Vacant/Empty: _____

Personal use days (self, friends, family): _____

Average length of rental stay (in days): _____

Hours you & your spouse worked on rental: _____

Small Business or Farming

Request our 2022 Business Tax Organizer for more in-depth checklist

Nature of Business: _____

Date Business Started: _____

Which of the following expenses did your business have in 2022?

Inventory Purchases Interest paid on business loans

Contract Labor Insurance (Not Health)

Advertising Legal & Professional Services

Office Supplies Office/Building Rent

Equipment Rent Repairs/Maintenance/Cleaning

Supplies Taxes & Licenses

Out of Town Travel Meals & Entertainment

Utilities (not home) Wages paid to Employees

Telephone Commissions & Fees

Postage Employee Benefits

Auto/Truck Expenses Pension & Profit Sharing

Other Expenses (list) Inventory W/D for Personal Use

Did your business:

Yes No Use an Automobile? Type: _____
Business miles 1/1-6/30: _____ 7/1-12/31: _____;

Personal miles: _____

Yes No Have a home office? Must be Regular & Exclusive.

Sq Ft: _____ Sq Ft of entire home: _____

Yes No Acquire or dispose of Tools/Equipment/Assets? *Please provide Invoice/Bill of Sale.*

Yes No Pay any service providers, contractors, or casual labor?

Yes No If "Yes", would you like us to issue 1099's?

Yes No Have Inventory on hand December 31, 2022?

Yes No Pay wages to W-2 type employees?

Yes No Receive EIDL, PPP, SBA Loan, etc.?

Yes No Make or receive any loans/leases/notes or payments?

Yes No Engage in Bartering?

Yes No Have more than one owner?

Yes No Is this business an LLC? If "Yes" please provide LLC Articles of Organization and Operating Agreement.

Separate Business Address: _____

Method of Accounting: Cash Accrual Other/Not Sure

Could this be considered a Hobby? Yes No Not Sure

How many hours did you "participate" (work) in the business operations during 2022? 500+ annual hours may be needed: _____

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TaxSmart Business Services – 2022 Income Tax Organizer

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Personal Information ~ Provide SS Cards & Driver's Licenses:

Your Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

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Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

1) _____

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| <input type="checkbox"/> Advertising | <input type="checkbox"/> Legal & Professional Services |
| <input type="checkbox"/> Office Supplies | <input type="checkbox"/> Office/Building Rent |
| <input type="checkbox"/> Equipment Rent | <input type="checkbox"/> Repairs/Maintenance/Cleaning |
| <input type="checkbox"/> Supplies | <input type="checkbox"/> Taxes & Licenses |
| <input type="checkbox"/> Out of Town Travel | <input type="checkbox"/> Meals & Entertainment |
| <input type="checkbox"/> Utilities (not home) | <input type="checkbox"/> Wages paid to Employees |
| <input type="checkbox"/> Telephone | <input type="checkbox"/> Commissions & Fees |
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Did your business:

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Sq Ft: _____ Sq Ft of entire home: _____
- Yes No Acquire or dispose of Tools/Equipment/Assets? *Please provide Invoice/Bill of Sale.*
- Yes No Pay any service providers, contractors, or casual labor?
 Yes No If "Yes", would you like us to issue 1099's?
- Yes No Have Inventory on hand December 31, 2022?
- Yes No Pay wages to W-2 type employees?
- Yes No Receive EIDL, PPP, SBA Loan, etc.?
- Yes No Make or receive any loans/leases/notes or payments?
- Yes No Engage in Bartering?
- Yes No Have more than one owner?
- Yes No Is this business an LLC? If "Yes" please provide LLC Articles of Organization and Operating Agreement.

Separate Business Address: _____

Method of Accounting: Cash Accrual Other/Not SureCould this be considered a Hobby? Yes No Not Sure

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21 Years!
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Phone: 770-704-7777 - Email: info@taxsmart1040.com

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Call (770)704-7777 to schedule an appointment. Please complete as much as possible prior to your appointment.

Personal Information ~ Provide SS Cards & Driver's Licenses:

Your Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Spouse's Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

1) _____

2) _____

3) _____

Yes No Could anyone else claim any of your dependents?

Yes No Any Child Care costs? If "Yes", provide amounts paid, care provider name(s), EIN's, and address(es) for EACH dependent.

Regular Income: Please attach Forms W-2, 1099-Misc, 1099R, 1099-SSA, K-1, 1099G, etc. Provide details/amounts if missing forms.

Yes No Wages, tips, etc. from job(s)? (W-2)

Yes No Interest from banks, bonds, other? (1099-INT)

Yes No Dividends? (1099-DIV)

Yes No Did you receive any tax refunds in 2022?

Yes No Alimony Paid/Received? \$ _____

Yes No Sell, buy or trade any assets, stocks, bonds, mutual funds, or other assets? (1099-B).

Yes No Distributions from 401(k), IRA, Pension, Annuity, etc.? (1099-R)

Yes No Spend, Receive, Sell, Exchange, Acquire, or Mine any Virtual Currency such as Bitcoin, Ethereum, etc?

Yes No Own any rental property including a vacation home?

Yes No Unemployment Income? (1099-G)

Yes No Social Security Benefits? (1099-SSA)

Yes No Gambling Income and Related Expenses? (W2G)

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Yes No Any small business income/loss from an S-Corp, Partnership, LLC, Sole Proprietor? (K-1, 1099-Misc, 1099-K)

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General Questions:

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Yes No Do you or your spouse owe any back taxes?

Please note, to avoid penalty, you must pay all taxes due by April 18th. An extension only grants more time to file, not to pay.

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Yes No Pay any Estimated Tax Payments? Please list amounts, dates, and to whom paid (GA, IRS, etc.)

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Yes No Pay any Household Employees such as gardeners, housekeepers, nannies, etc.?

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Expenses/Deductions:

- Yes No IRA Contribution: Traditional Roth SEP Other
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- Yes No After-tax Health Insurance, including Medicare?
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- Yes No Cash/Checks/Money etc.
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Address: _____

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Business miles 1/1-6/30: _____ 7/1-12/31: _____;
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Phone: 770-704-7777 - Email: info@taxsmart1040.com

TaxSmart Business Services – 2022 Income Tax Organizer

Call (770)704-7777 to schedule an appointment. Please complete as much as possible prior to your appointment.

Personal Information ~ Provide SS Cards & Driver's Licenses:

Your Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Spouse's Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

1) _____

2) _____

3) _____

Yes No Could anyone else claim any of your dependents?

Yes No Any Child Care costs? If "Yes", provide amounts paid, care provider name(s), EIN's, and address(es) for EACH dependent.

Regular Income: Please attach Forms W-2, 1099-Misc, 1099R, 1099-SSA, K-1, 1099G, etc. Provide details/amounts if missing forms.

Yes No Wages, tips, etc. from job(s)? (W-2)

Yes No Interest from banks, bonds, other? (1099-INT)

Yes No Dividends? (1099-DIV)

Yes No Did you receive any tax refunds in 2022?

Yes No Alimony Paid/Received? \$ _____

Yes No Sell, buy or trade any assets, stocks, bonds, mutual funds, or other assets? (1099-B).

Yes No Distributions from 401(k), IRA, Pension, Annuity, etc.? (1099-R)

Yes No Spend, Receive, Sell, Exchange, Acquire, or Mine any Virtual Currency such as Bitcoin, Ethereum, etc?

Yes No Own any rental property including a vacation home?

Yes No Unemployment Income? (1099-G)

Yes No Social Security Benefits? (1099-SSA)

Yes No Gambling Income and Related Expenses? (W2G)

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General Questions:

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- Yes No Disposed/Stopped Renting during 2022?

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Address: _____

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Yes No Own any rental property including a vacation home?

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Address: _____

Days Rented: _____ Days Vacant/Empty: _____

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| <input type="checkbox"/> Telephone | <input type="checkbox"/> Commissions & Fees |
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Did your business:

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Occupation: _____ Blind? Disabled?

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Full Name – DOB – Relationship - College Student? - 2022 Income?

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How would you like to receive your copy of the completed tax return?

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Address: _____

Days Rented: _____ Days Vacant/Empty: _____

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| <input type="checkbox"/> Supplies | <input type="checkbox"/> Taxes & Licenses |
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| <input type="checkbox"/> Utilities (not home) | <input type="checkbox"/> Wages paid to Employees |
| <input type="checkbox"/> Telephone | <input type="checkbox"/> Commissions & Fees |
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Did your business:

- Yes No Use an Automobile? Type: _____
Business miles 1/1-6/30: _____ 7/1-12/31: _____;
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- Yes No Have a home office? Must be Regular & Exclusive.
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- Yes No Have more than one owner?
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Your Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

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Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

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Full Name – DOB – Relationship - College Student? - 2022 Income?

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Yes No Could anyone else claim any of your dependents?

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Phone: _____

Email: _____

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Yes No Moving Expenses? (Only for active military)

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Self \$ _____ Spouse \$ _____
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- Yes No After-tax Health Insurance, including Medicare?
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- Yes No Do you own your own home?
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- Yes No Cash/Checks/Money etc.
- Yes No Non-Cash Gifts i.e. Household items to Goodwill?
- Yes No Miles driven for charity?
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- Yes No Qualified Charitable Distribution from IRA.

Other Miscellaneous Items:

- Yes No Install an electric vehicle charger in your home?
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- Yes No Disposed/Stopped Renting during 2022?

Type of Rental: _____

Address: _____

Days Rented: _____ Days Vacant/Empty: _____

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| <input type="checkbox"/> Supplies | <input type="checkbox"/> Taxes & Licenses |
| <input type="checkbox"/> Out of Town Travel | <input type="checkbox"/> Meals & Entertainment |
| <input type="checkbox"/> Utilities (not home) | <input type="checkbox"/> Wages paid to Employees |
| <input type="checkbox"/> Telephone | <input type="checkbox"/> Commissions & Fees |
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Did your business:

- Yes No Use an Automobile? Type: _____
Business miles 1/1-6/30: _____ 7/1-12/31: _____;
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Separate Business Address: _____

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Your Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Spouse's Full Name: _____

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Phone: _____

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Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

1) _____

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Yes No Could anyone else claim any of your dependents?

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Regular Income: Please attach Forms W-2, 1099-Misc, 1099R, 1099-SSA, K-1, 1099G, etc. Provide details/amounts if missing forms.

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Phone: _____

Email: _____

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- Yes No Do you own your own home?
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- Yes No Cash/Checks/Money etc.
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Address: _____

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| <input type="checkbox"/> Supplies | <input type="checkbox"/> Taxes & Licenses |
| <input type="checkbox"/> Out of Town Travel | <input type="checkbox"/> Meals & Entertainment |
| <input type="checkbox"/> Utilities (not home) | <input type="checkbox"/> Wages paid to Employees |
| <input type="checkbox"/> Telephone | <input type="checkbox"/> Commissions & Fees |
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Did your business:

- Yes No Use an Automobile? Type: _____
Business miles 1/1-6/30: _____ 7/1-12/31: _____;
Personal miles: _____
- Yes No Have a home office? Must be Regular & Exclusive.
Sq Ft: _____ Sq Ft of entire home: _____
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Personal Information ~ Provide SS Cards & Driver's Licenses:

Your Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Spouse's Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

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Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

1) _____

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Yes No Could anyone else claim any of your dependents?

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- Yes No Mortgage Interest/Points Paid (Form 1098)?
- Yes No Did you purchase a boat, airplane, RV, etc.?
- Yes No Annual Ad Valorem Taxes on car, boat, etc.?
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- Yes No Investment Interest paid? Other Interest Paid?

Gifts to Charity *Documentation required for all donations:*

- Yes No Cash/Checks/Money etc.
- Yes No Non-Cash Gifts i.e. Household items to Goodwill?
- Yes No Miles driven for charity?
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- Yes No Qualified Charitable Distribution from IRA.

Other Miscellaneous Items:

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- Yes No First Placed in Service in 2022? If "Yes", please provide appraisal and settlement statements.
- Yes No Disposed/Stopped Renting during 2022?

Type of Rental: _____

Address: _____

Days Rented: _____ Days Vacant/Empty: _____

Personal use days (self, friends, family): _____

Average length of rental stay (in days): _____

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| <input type="checkbox"/> Supplies | <input type="checkbox"/> Taxes & Licenses |
| <input type="checkbox"/> Out of Town Travel | <input type="checkbox"/> Meals & Entertainment |
| <input type="checkbox"/> Utilities (not home) | <input type="checkbox"/> Wages paid to Employees |
| <input type="checkbox"/> Telephone | <input type="checkbox"/> Commissions & Fees |
| <input type="checkbox"/> Postage | <input type="checkbox"/> Employee Benefits |
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Did your business:

- Yes No Use an Automobile? Type: _____
Business miles 1/1-6/30: _____ 7/1-12/31: _____;
Personal miles: _____
- Yes No Have a home office? Must be Regular & Exclusive.
Sq Ft: _____ Sq Ft of entire home: _____
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- Yes No Is this business an LLC? If "Yes" please provide LLC Articles of Organization and Operating Agreement.

Separate Business Address: _____

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Personal Information ~ Provide SS Cards & Driver's Licenses:

Your Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Spouse's Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

1) _____

2) _____

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Yes No Could anyone else claim any of your dependents?

Yes No Any Child Care costs? If "Yes", provide amounts paid, care provider name(s), EIN's, and address(es) for EACH dependent.

Regular Income: Please attach Forms W-2, 1099-Misc, 1099R, 1099-SSA, K-1, 1099G, etc. Provide details/amounts if missing forms.

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Rental Property:

Yes No First Placed in Service in 2022? If "Yes", please provide appraisal and settlement statements.

Yes No Disposed/Stopped Renting during 2022?

Type of Rental: _____

Address: _____

Days Rented: _____ Days Vacant/Empty: _____

Personal use days (self, friends, family): _____

Average length of rental stay (in days): _____

Hours you & your spouse worked on rental: _____

Small Business or Farming

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Nature of Business: _____

Date Business Started: _____

Which of the following expenses did your business have in 2022?

Inventory Purchases Interest paid on business loans

Contract Labor Insurance (Not Health)

Advertising Legal & Professional Services

Office Supplies Office/Building Rent

Equipment Rent Repairs/Maintenance/Cleaning

Supplies Taxes & Licenses

Out of Town Travel Meals & Entertainment

Utilities (not home) Wages paid to Employees

Telephone Commissions & Fees

Postage Employee Benefits

Auto/Truck Expenses Pension & Profit Sharing

Other Expenses (list) Inventory W/D for Personal Use

Did your business:

Yes No Use an Automobile? Type: _____
Business miles 1/1-6/30: _____ 7/1-12/31: _____;

Personal miles: _____

Yes No Have a home office? Must be Regular & Exclusive.

Sq Ft: _____ Sq Ft of entire home: _____

Yes No Acquire or dispose of Tools/Equipment/Assets? *Please provide Invoice/Bill of Sale.*

Yes No Pay any service providers, contractors, or casual labor?

Yes No If "Yes", would you like us to issue 1099's?

Yes No Have Inventory on hand December 31, 2022?

Yes No Pay wages to W-2 type employees?

Yes No Receive EIDL, PPP, SBA Loan, etc.?

Yes No Make or receive any loans/leases/notes or payments?

Yes No Engage in Bartering?

Yes No Have more than one owner?

Yes No Is this business an LLC? If "Yes" please provide LLC Articles of Organization and Operating Agreement.

Separate Business Address: _____

Method of Accounting: Cash Accrual Other/Not Sure

Could this be considered a Hobby? Yes No Not Sure

How many hours did you "participate" (work) in the business operations during 2022? 500+ annual hours may be needed: _____

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Personal Information ~ Provide SS Cards & Driver's Licenses:

Your Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Spouse's Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

1) _____

2) _____

3) _____

Yes No Could anyone else claim any of your dependents?

Yes No Any Child Care costs? If "Yes", provide amounts paid, care provider name(s), EIN's, and address(es) for EACH dependent.

Regular Income: Please attach Forms W-2, 1099-Misc, 1099R, 1099-SSA, K-1, 1099G, etc. Provide details/amounts if missing forms.

Yes No Wages, tips, etc. from job(s)? (W-2)

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Yes No Alimony Paid/Received? \$ _____

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Yes No Spend, Receive, Sell, Exchange, Acquire, or Mine any Virtual Currency such as Bitcoin, Ethereum, etc?

Yes No Own any rental property including a vacation home?

Yes No Unemployment Income? (1099-G)

Yes No Social Security Benefits? (1099-SSA)

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Yes No Any small business income/loss from an S-Corp, Partnership, LLC, Sole Proprietor? (K-1, 1099-Misc, 1099-K)

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Yes No Pay any Household Employees such as gardeners, housekeepers, nannies, etc.?

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Expenses/Deductions:

- Yes No IRA Contribution: Traditional Roth SEP Other
Self \$ _____ Spouse \$ _____
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- Yes No After-tax Health Insurance, including Medicare?
- Yes No Did anyone in your family receive health insurance from HealthCare.gov or other state run Marketplace? (Form 1095)
- Yes No Are you part of a Healthcare Sharing Ministry?
- Yes No Did you pay Long Term Care Insurance premiums?
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Taxes & Interest Expenses:

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| <input type="checkbox"/> Supplies | <input type="checkbox"/> Taxes & Licenses |
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Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

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Dependent Information (Children, Parents, others):

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Did your business:

- Yes No Use an Automobile? Type: _____
Business miles 1/1-6/30: _____ 7/1-12/31: _____;
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- Yes No Have more than one owner?
- Yes No Is this business an LLC? If "Yes" please provide LLC Articles of Organization and Operating Agreement.

Separate Business Address: _____

Method of Accounting: Cash Accrual Other/Not SureCould this be considered a Hobby? Yes No Not Sure

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Call (770)704-7777 to schedule an appointment. Please complete as much as possible prior to your appointment.

Personal Information ~ Provide SS Cards & Driver's Licenses:

Your Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Spouse's Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

1) _____

2) _____

3) _____

Yes No Could anyone else claim any of your dependents?

Yes No Any Child Care costs? If "Yes", provide amounts paid, care provider name(s), EIN's, and address(es) for EACH dependent.

Regular Income: Please attach Forms W-2, 1099-Misc, 1099R, 1099-SSA, K-1, 1099G, etc. Provide details/amounts if missing forms.

Yes No Wages, tips, etc. from job(s)? (W-2)

Yes No Interest from banks, bonds, other? (1099-INT)

Yes No Dividends? (1099-DIV)

Yes No Did you receive any tax refunds in 2022?

Yes No Alimony Paid/Received? \$ _____

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General Questions:

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Please note, to avoid penalty, you must pay all taxes due by April 18th. An extension only grants more time to file, not to pay.

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Yes No Pay any Household Employees such as gardeners, housekeepers, nannies, etc.?

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Personal Information ~ Provide SS Cards & Driver's Licenses:

Your Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Spouse's Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

1) _____

2) _____

3) _____

Yes No Could anyone else claim any of your dependents?

Yes No Any Child Care costs? If "Yes", provide amounts paid, care provider name(s), EIN's, and address(es) for EACH dependent.

Regular Income: Please attach Forms W-2, 1099-Misc, 1099R, 1099-SSA, K-1, 1099G, etc. Provide details/amounts if missing forms.

Yes No Wages, tips, etc. from job(s)? (W-2)

Yes No Interest from banks, bonds, other? (1099-INT)

Yes No Dividends? (1099-DIV)

Yes No Did you receive any tax refunds in 2022?

Yes No Alimony Paid/Received? \$ _____

Yes No Sell, buy or trade any assets, stocks, bonds, mutual funds, or other assets? (1099-B).

Yes No Distributions from 401(k), IRA, Pension, Annuity, etc.? (1099-R)

Yes No Spend, Receive, Sell, Exchange, Acquire, or Mine any Virtual Currency such as Bitcoin, Ethereum, etc?

Yes No Own any rental property including a vacation home?

Yes No Unemployment Income? (1099-G)

Yes No Social Security Benefits? (1099-SSA)

Yes No Gambling Income and Related Expenses? (W2G)

Yes No Cancellation of Debt/Foreclosure? (1099-A or -C)

Yes No Any small business income/loss from an S-Corp, Partnership, LLC, Sole Proprietor? (K-1, 1099-Misc, 1099-K)

Yes No Did you sell anything online: Craigslist, eBay, FB Marketplace, etc. (1099K)?

Yes No Any other income, e.g. Uber/Lyft, Crowdfunding, other? Please explain:

General Questions:

Yes No Direct Deposit your refund into your bank account? *Must attach a voided check.* Otherwise you will receive refund checks. Amounts due will NOT be drafted from your account.

Yes No Did you file 2021 tax return? **Provide Copy/PDF.**

Yes No Do you or your spouse owe any back taxes?

Please note, to avoid penalty, you must pay all taxes due by April 18th. An extension only grants more time to file, not to pay.

Other Special Situations: May require detailed documentation

Yes No Pay any Estimated Tax Payments? Please list amounts, dates, and to whom paid (GA, IRS, etc.)

Yes No Any births or deaths in your household? Did any children cease to be your dependents in 2022?

Yes No Did your marital status change during 2022?

Yes No Did you earn income in another state or country?

Yes No Did you buy, sell or refinance (including loan modification) property in 2022? If yes, attach closing statements.

Yes No During 2022, were there any changes to federal or state tax returns filed in prior years? Please attach notices.

Yes No Did you suffer a casualty or loss in 2022 in a presidentially declared disaster area? www.fema.gov/disasters

Yes No Receive any hobby income?

Yes No Moving Expenses? (Only for active military)

Yes No Did your address change? Please attach.

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Yes No Did your child (under age 24) have any investment income? Please attach 1099's and/or tax return.

Yes No An Armed Forces Reservist, Qualified Performing Artist, or Government Fee Basis Official?

Yes No Do you have a Health Savings Account? (1099-SA)

Yes No Pay any Household Employees such as gardeners, housekeepers, nannies, etc.?

Yes No Do you expect a substantial change in your income or deductions next year (2023)? Please attach explanation:

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Expenses/Deductions:

- Yes No IRA Contribution: Traditional Roth SEP Other
Self \$ _____ Spouse \$ _____
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- Yes No After-tax Health Insurance, including Medicare?
- Yes No Did anyone in your family receive health insurance from HealthCare.gov or other state run Marketplace? (Form 1095)
- Yes No Are you part of a Healthcare Sharing Ministry?
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- Yes No Real Estate Taxes (Form 1098 or other)?
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- Yes No Did you purchase a boat, airplane, RV, etc.?
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Gifts to Charity *Documentation required for all donations:*

- Yes No Cash/Checks/Money etc.
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Other Miscellaneous Items:

- Yes No Install an electric vehicle charger in your home?
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- Yes No Make gifts totaling \geq \$16,000 to one person?
- Yes No Did you contribute to a 529 College Savings Plan?
- Yes No Unreimbursed Educator Expenses (K-12 only)?

Rental Property:

- Yes No First Placed in Service in 2022? If "Yes", please provide appraisal and settlement statements.
- Yes No Disposed/Stopped Renting during 2022?

Type of Rental: _____

Address: _____

Days Rented: _____ Days Vacant/Empty: _____

Personal use days (self, friends, family): _____

Average length of rental stay (in days): _____

Hours you & your spouse worked on rental: _____

Small Business or Farming*Request our 2022 Business Tax Organizer for more in-depth checklist*

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Yes No Wages, tips, etc. from job(s)? (W-2)

Yes No Interest from banks, bonds, other? (1099-INT)

Yes No Dividends? (1099-DIV)

Yes No Did you receive any tax refunds in 2022?

Yes No Alimony Paid/Received? \$ _____

Yes No Sell, buy or trade any assets, stocks, bonds, mutual funds, or other assets? (1099-B).

Yes No Distributions from 401(k), IRA, Pension, Annuity, etc.? (1099-R)

Yes No Spend, Receive, Sell, Exchange, Acquire, or Mine any Virtual Currency such as Bitcoin, Ethereum, etc?

Yes No Own any rental property including a vacation home?

Yes No Unemployment Income? (1099-G)

Yes No Social Security Benefits? (1099-SSA)

Yes No Gambling Income and Related Expenses? (W2G)

Yes No Cancellation of Debt/Foreclosure? (1099-A or -C)

Yes No Any small business income/loss from an S-Corp, Partnership, LLC, Sole Proprietor? (K-1, 1099-Misc, 1099-K)

Yes No Did you sell anything online: Craigslist, eBay, FB Marketplace, etc. (1099K)?

Yes No Any other income, e.g. Uber/Lyft, Crowdfunding, other? Please explain:

General Questions:

Yes No Direct Deposit your refund into your bank account? *Must attach a voided check.* Otherwise you will receive refund checks. Amounts due will NOT be drafted from your account.

Yes No Did you file 2021 tax return? **Provide Copy/PDF.**

Yes No Do you or your spouse owe any back taxes?

Please note, to avoid penalty, you must pay all taxes due by April 18th. An extension only grants more time to file, not to pay.

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Yes No Pay any Estimated Tax Payments? Please list amounts, dates, and to whom paid (GA, IRS, etc.)

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Expenses/Deductions:

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Self \$ _____ Spouse \$ _____
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- Yes No After-tax Health Insurance, including Medicare?
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- Yes No Cash/Checks/Money etc.
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- Yes No Install an electric vehicle charger in your home?
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Address: _____

Days Rented: _____ Days Vacant/Empty: _____

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| <input type="checkbox"/> Utilities (not home) | <input type="checkbox"/> Wages paid to Employees |
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Did your business:

- Yes No Use an Automobile? Type: _____
Business miles 1/1-6/30: _____ 7/1-12/31: _____;
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Occupation: _____ Blind? Disabled?

Phone: _____

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Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

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Full Name – DOB – Relationship - College Student? - 2022 Income?

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How many hours did you "participate" (work) in the business operations during 2022? 500+ annual hours may be needed: _____

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Personal Information ~ Provide SS Cards & Driver's Licenses:

Your Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Spouse's Full Name: _____

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Yes No Pay any Household Employees such as gardeners, housekeepers, nannies, etc.?

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Expenses/Deductions:

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Address: _____

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Did your business:

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Business miles 1/1-6/30: _____ 7/1-12/31: _____;
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Your Full Name: _____
Occupation: _____ Blind? Disabled?
Phone: _____
Email: _____
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 Yes No Not Sure: Do you want to file a joint return?

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Provide SS Card & Proof of Residency for each dependent.

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Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

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Yes No Did you adopt a child in 2022?

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Yes No Pay any Household Employees such as gardeners, housekeepers, nannies, etc.?

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- Yes No After-tax Health Insurance, including Medicare?
- Yes No Did anyone in your family receive health insurance from HealthCare.gov or other state run Marketplace? (Form 1095)
- Yes No Are you part of a Healthcare Sharing Ministry?
- Yes No Did you pay Long Term Care Insurance premiums?
- Yes No Any out of pocket medical expenses: Doctors, Dentist, Rx, Nursing Homes, Medical Mileage, etc.? Please list.

Taxes & Interest Expenses:

- Yes No Do you own your own home?
- Yes No Real Estate Taxes (Form 1098 or other)?
- Yes No Mortgage Interest/Points Paid (Form 1098)?
- Yes No Did you purchase a boat, airplane, RV, etc.?
- Yes No Annual Ad Valorem Taxes on car, boat, etc.?
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- Yes No Investment Interest paid? Other Interest Paid?

Gifts to Charity *Documentation required for all donations:*

- Yes No Cash/Checks/Money etc.
- Yes No Non-Cash Gifts i.e. Household items to Goodwill?
- Yes No Miles driven for charity?
- Yes No Payroll Deductions of Charity, Union Dues, other?
- Yes No Qualified Charitable Distribution from IRA.

Other Miscellaneous Items:

- Yes No Install an electric vehicle charger in your home?
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- Yes No Receive an inheritance (Sch K-1)?
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- Yes No Unreimbursed Educator Expenses (K-12 only)?

Rental Property:

- Yes No First Placed in Service in 2022? If "Yes", please provide appraisal and settlement statements.
- Yes No Disposed/Stopped Renting during 2022?

Type of Rental: _____

Address: _____

Days Rented: _____ Days Vacant/Empty: _____

Personal use days (self, friends, family): _____

Average length of rental stay (in days): _____

Hours you & your spouse worked on rental: _____

Small Business or Farming*Request our 2022 Business Tax Organizer for more in-depth checklist*

Nature of Business: _____

Date Business Started: _____

Which of the following expenses did your business have in 2022?

- | | |
|--|--|
| <input type="checkbox"/> Inventory Purchases | <input type="checkbox"/> Interest paid on business loans |
| <input type="checkbox"/> Contract Labor | <input type="checkbox"/> Insurance (Not Health) |
| <input type="checkbox"/> Advertising | <input type="checkbox"/> Legal & Professional Services |
| <input type="checkbox"/> Office Supplies | <input type="checkbox"/> Office/Building Rent |
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| <input type="checkbox"/> Utilities (not home) | <input type="checkbox"/> Wages paid to Employees |
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| <input type="checkbox"/> Other Expenses (list) | <input type="checkbox"/> Inventory W/D for Personal Use |

Did your business:

- Yes No Use an Automobile? Type: _____
Business miles 1/1-6/30: _____ 7/1-12/31: _____;
Personal miles: _____
- Yes No Have a home office? Must be Regular & Exclusive.
Sq Ft: _____ Sq Ft of entire home: _____
- Yes No Acquire or dispose of Tools/Equipment/Assets? *Please provide Invoice/Bill of Sale.*
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- Yes No Engage in Bartering?
- Yes No Have more than one owner?
- Yes No Is this business an LLC? If "Yes" please provide LLC Articles of Organization and Operating Agreement.

Separate Business Address: _____

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How many hours did you "participate" (work) in the business operations during 2022? 500+ annual hours may be needed: _____

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Phone: 770-704-7777 - Email: info@taxsmart1040.com

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Call (770)704-7777 to schedule an appointment. Please complete as much as possible prior to your appointment.

Personal Information ~ Provide SS Cards & Driver's Licenses:

Your Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Spouse's Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

1) _____

2) _____

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Yes No Could anyone else claim any of your dependents?

Yes No Any Child Care costs? If "Yes", provide amounts paid, care provider name(s), EIN's, and address(es) for EACH dependent.

Regular Income: Please attach Forms W-2, 1099-Misc, 1099R, 1099-SSA, K-1, 1099G, etc. Provide details/amounts if missing forms.

Yes No Wages, tips, etc. from job(s)? (W-2)

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Yes No Qualified Charitable Distribution from IRA.

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Yes No Install an electric vehicle charger in your home?

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Address: _____

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Average length of rental stay (in days): _____

Hours you & your spouse worked on rental: _____

Small Business or Farming

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Nature of Business: _____

Date Business Started: _____

Which of the following expenses did your business have in 2022?

Inventory Purchases Interest paid on business loans

Contract Labor Insurance (Not Health)

Advertising Legal & Professional Services

Office Supplies Office/Building Rent

Equipment Rent Repairs/Maintenance/Cleaning

Supplies Taxes & Licenses

Out of Town Travel Meals & Entertainment

Utilities (not home) Wages paid to Employees

Telephone Commissions & Fees

Postage Employee Benefits

Auto/Truck Expenses Pension & Profit Sharing

Other Expenses (list) Inventory W/D for Personal Use

Did your business:

Yes No Use an Automobile? Type: _____
Business miles 1/1-6/30: _____ 7/1-12/31: _____;

Personal miles: _____

Yes No Have a home office? Must be Regular & Exclusive.

Sq Ft: _____ Sq Ft of entire home: _____

Yes No Acquire or dispose of Tools/Equipment/Assets? *Please provide Invoice/Bill of Sale.*

Yes No Pay any service providers, contractors, or casual labor?

Yes No If "Yes", would you like us to issue 1099's?

Yes No Have Inventory on hand December 31, 2022?

Yes No Pay wages to W-2 type employees?

Yes No Receive EIDL, PPP, SBA Loan, etc.?

Yes No Make or receive any loans/leases/notes or payments?

Yes No Engage in Bartering?

Yes No Have more than one owner?

Yes No Is this business an LLC? If "Yes" please provide LLC Articles of Organization and Operating Agreement.

Separate Business Address: _____

Method of Accounting: Cash Accrual Other/Not Sure

Could this be considered a Hobby? Yes No Not Sure

How many hours did you "participate" (work) in the business operations during 2022? 500+ annual hours may be needed: _____

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Personal Information ~ Provide SS Cards & Driver's Licenses:

Your Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Spouse's Full Name: _____

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Phone: _____

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Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

1) _____

2) _____

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Yes No Could anyone else claim any of your dependents?

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Regular Income: Please attach Forms W-2, 1099-Misc, 1099R, 1099-SSA, K-1, 1099G, etc. Provide details/amounts if missing forms.

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- Yes No Did you purchase a boat, airplane, RV, etc.?
- Yes No Annual Ad Valorem Taxes on car, boat, etc.?
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- Yes No Cash/Checks/Money etc.
- Yes No Non-Cash Gifts i.e. Household items to Goodwill?
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- Yes No Qualified Charitable Distribution from IRA.

Other Miscellaneous Items:

- Yes No Install an electric vehicle charger in your home?
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- Yes No Unreimbursed Educator Expenses (K-12 only)?

Rental Property:

- Yes No First Placed in Service in 2022? If "Yes", please provide appraisal and settlement statements.
- Yes No Disposed/Stopped Renting during 2022?

Type of Rental: _____

Address: _____

Days Rented: _____ Days Vacant/Empty: _____

Personal use days (self, friends, family): _____

Average length of rental stay (in days): _____

Hours you & your spouse worked on rental: _____

Small Business or Farming*Request our 2022 Business Tax Organizer for more in-depth checklist*

Nature of Business: _____

Date Business Started: _____

Which of the following expenses did your business have in 2022?

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|--|--|
| <input type="checkbox"/> Inventory Purchases | <input type="checkbox"/> Interest paid on business loans |
| <input type="checkbox"/> Contract Labor | <input type="checkbox"/> Insurance (Not Health) |
| <input type="checkbox"/> Advertising | <input type="checkbox"/> Legal & Professional Services |
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Did your business:

- Yes No Use an Automobile? Type: _____
Business miles 1/1-6/30: _____ 7/1-12/31: _____;
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- Yes No Have a home office? Must be Regular & Exclusive.
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Separate Business Address: _____

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How many hours did you "participate" (work) in the business operations during 2022? 500+ annual hours may be needed: _____

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Call (770)704-7777 to schedule an appointment. Please complete as much as possible prior to your appointment.

Personal Information ~ Provide SS Cards & Driver's Licenses:

Your Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Spouse's Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

1) _____

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Yes No Could anyone else claim any of your dependents?

Yes No Any Child Care costs? If "Yes", provide amounts paid, care provider name(s), EIN's, and address(es) for EACH dependent.

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Office Supplies Office/Building Rent

Equipment Rent Repairs/Maintenance/Cleaning

Supplies Taxes & Licenses

Out of Town Travel Meals & Entertainment

Utilities (not home) Wages paid to Employees

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Other Expenses (list) Inventory W/D for Personal Use

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Yes No Use an Automobile? Type: _____
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Personal Information ~ Provide SS Cards & Driver's Licenses:

Your Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Spouse's Full Name: _____

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Phone: _____

Email: _____

Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

1) _____

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Yes No Could anyone else claim any of your dependents?

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| <input type="checkbox"/> Advertising | <input type="checkbox"/> Legal & Professional Services |
| <input type="checkbox"/> Office Supplies | <input type="checkbox"/> Office/Building Rent |
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| <input type="checkbox"/> Supplies | <input type="checkbox"/> Taxes & Licenses |
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Did your business:

- Yes No Use an Automobile? Type: _____
Business miles 1/1-6/30: _____ 7/1-12/31: _____;
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- Yes No Have more than one owner?
- Yes No Is this business an LLC? If "Yes" please provide LLC Articles of Organization and Operating Agreement.

Separate Business Address: _____

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Call (770)704-7777 to schedule an appointment. Please complete as much as possible prior to your appointment.

Personal Information ~ Provide SS Cards & Driver's Licenses:

Your Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Spouse's Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

1) _____

2) _____

3) _____

Yes No Could anyone else claim any of your dependents?

Yes No Any Child Care costs? If "Yes", provide amounts paid, care provider name(s), EIN's, and address(es) for EACH dependent.

Regular Income: Please attach Forms W-2, 1099-Misc, 1099R, 1099-SSA, K-1, 1099G, etc. Provide details/amounts if missing forms.

Yes No Wages, tips, etc. from job(s)? (W-2)

Yes No Interest from banks, bonds, other? (1099-INT)

Yes No Dividends? (1099-DIV)

Yes No Did you receive any tax refunds in 2022?

Yes No Alimony Paid/Received? \$ _____

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Yes No Own any rental property including a vacation home?

Yes No Unemployment Income? (1099-G)

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General Questions:

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Yes No Moving Expenses? (Only for active military)

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Yes No Do you have a Health Savings Account? (1099-SA)

Yes No Pay any Household Employees such as gardeners, housekeepers, nannies, etc.?

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Address: _____

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Did your business:

- Yes No Use an Automobile? Type: _____
Business miles 1/1-6/30: _____ 7/1-12/31: _____;
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Sq Ft: _____ Sq Ft of entire home: _____
- Yes No Acquire or dispose of Tools/Equipment/Assets? *Please provide Invoice/Bill of Sale.*
- Yes No Pay any service providers, contractors, or casual labor?
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- Yes No Have more than one owner?
- Yes No Is this business an LLC? If "Yes" please provide LLC Articles of Organization and Operating Agreement.

Separate Business Address: _____

Method of Accounting: Cash Accrual Other/Not SureCould this be considered a Hobby? Yes No Not Sure

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Phone: 770-704-7777 - Email: info@taxsmart1040.com

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Call (770)704-7777 to schedule an appointment. Please complete as much as possible prior to your appointment.

Personal Information ~ Provide SS Cards & Driver's Licenses:

Your Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Spouse's Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

1) _____

2) _____

3) _____

Yes No Could anyone else claim any of your dependents?

Yes No Any Child Care costs? If "Yes", provide amounts paid, care provider name(s), EIN's, and address(es) for EACH dependent.

Regular Income: Please attach Forms W-2, 1099-Misc, 1099R, 1099-SSA, K-1, 1099G, etc. Provide details/amounts if missing forms.

Yes No Wages, tips, etc. from job(s)? (W-2)

Yes No Interest from banks, bonds, other? (1099-INT)

Yes No Dividends? (1099-DIV)

Yes No Did you receive any tax refunds in 2022?

Yes No Alimony Paid/Received? \$ _____

Yes No Sell, buy or trade any assets, stocks, bonds, mutual funds, or other assets? (1099-B).

Yes No Distributions from 401(k), IRA, Pension, Annuity, etc.? (1099-R)

Yes No Spend, Receive, Sell, Exchange, Acquire, or Mine any Virtual Currency such as Bitcoin, Ethereum, etc?

Yes No Own any rental property including a vacation home?

Yes No Unemployment Income? (1099-G)

Yes No Social Security Benefits? (1099-SSA)

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Yes No Any small business income/loss from an S-Corp, Partnership, LLC, Sole Proprietor? (K-1, 1099-Misc, 1099-K)

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General Questions:

Yes No Direct Deposit your refund into your bank account? *Must attach a voided check.* Otherwise you will receive refund checks. Amounts due will NOT be drafted from your account.

Yes No Did you file 2021 tax return? **Provide Copy/PDF.**

Yes No Do you or your spouse owe any back taxes?

Please note, to avoid penalty, you must pay all taxes due by April 18th. An extension only grants more time to file, not to pay.

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Yes No Pay any Estimated Tax Payments? Please list amounts, dates, and to whom paid (GA, IRS, etc.)

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Yes No Pay any Household Employees such as gardeners, housekeepers, nannies, etc.?

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- Yes No IRA Contribution: Traditional Roth SEP Other
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- Yes No Is this business an LLC? If "Yes" please provide LLC Articles of Organization and Operating Agreement.

Separate Business Address: _____

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21 Years!
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Phone: 770-704-7777 - Email: info@taxsmart1040.com

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Call (770)704-7777 to schedule an appointment. Please complete as much as possible prior to your appointment.

Personal Information ~ Provide SS Cards & Driver's Licenses:

Your Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Spouse's Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

1) _____

2) _____

3) _____

Yes No Could anyone else claim any of your dependents?

Yes No Any Child Care costs? If "Yes", provide amounts paid, care provider name(s), EIN's, and address(es) for EACH dependent.

Regular Income: Please attach Forms W-2, 1099-Misc, 1099R, 1099-SSA, K-1, 1099G, etc. Provide details/amounts if missing forms.

Yes No Wages, tips, etc. from job(s)? (W-2)

Yes No Interest from banks, bonds, other? (1099-INT)

Yes No Dividends? (1099-DIV)

Yes No Did you receive any tax refunds in 2022?

Yes No Alimony Paid/Received? \$ _____

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Yes No Spend, Receive, Sell, Exchange, Acquire, or Mine any Virtual Currency such as Bitcoin, Ethereum, etc?

Yes No Own any rental property including a vacation home?

Yes No Unemployment Income? (1099-G)

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Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

1) _____

2) _____

3) _____

Yes No Could anyone else claim any of your dependents?

Yes No Any Child Care costs? If "Yes", provide amounts paid, care provider name(s), EIN's, and address(es) for EACH dependent.

Regular Income: Please attach Forms W-2, 1099-Misc, 1099R, 1099-SSA, K-1, 1099G, etc. Provide details/amounts if missing forms.

Yes No Wages, tips, etc. from job(s)? (W-2)

Yes No Interest from banks, bonds, other? (1099-INT)

Yes No Dividends? (1099-DIV)

Yes No Did you receive any tax refunds in 2022?

Yes No Alimony Paid/Received? \$ _____

Yes No Sell, buy or trade any assets, stocks, bonds, mutual funds, or other assets? (1099-B).

Yes No Distributions from 401(k), IRA, Pension, Annuity, etc.? (1099-R)

Yes No Spend, Receive, Sell, Exchange, Acquire, or Mine any Virtual Currency such as Bitcoin, Ethereum, etc?

Yes No Own any rental property including a vacation home?

Yes No Unemployment Income? (1099-G)

Yes No Social Security Benefits? (1099-SSA)

Yes No Gambling Income and Related Expenses? (W2G)

Yes No Cancellation of Debt/Foreclosure? (1099-A or -C)

Yes No Any small business income/loss from an S-Corp, Partnership, LLC, Sole Proprietor? (K-1, 1099-Misc, 1099-K)

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Address: _____

Days Rented: _____ Days Vacant/Empty: _____

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| <input type="checkbox"/> Supplies | <input type="checkbox"/> Taxes & Licenses |
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Did your business:

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Yes No Sell, buy or trade any assets, stocks, bonds, mutual funds, or other assets? (1099-B).

Yes No Distributions from 401(k), IRA, Pension, Annuity, etc.? (1099-R)

Yes No Spend, Receive, Sell, Exchange, Acquire, or Mine any Virtual Currency such as Bitcoin, Ethereum, etc?

Yes No Own any rental property including a vacation home?

Yes No Unemployment Income? (1099-G)

Yes No Social Security Benefits? (1099-SSA)

Yes No Gambling Income and Related Expenses? (W2G)

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Please note, to avoid penalty, you must pay all taxes due by April 18th. An extension only grants more time to file, not to pay.

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How would you like to receive your copy of the completed tax return?

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- Yes No Disposed/Stopped Renting during 2022?

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Address: _____

Days Rented: _____ Days Vacant/Empty: _____

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Did your business:

- Yes No Use an Automobile? Type: _____
Business miles 1/1-6/30: _____ 7/1-12/31: _____;
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- Yes No Have a home office? Must be Regular & Exclusive.
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Occupation: _____ Blind? Disabled?

Phone: _____

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Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

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Full Name – DOB – Relationship - College Student? - 2022 Income?

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Yes No Could anyone else claim any of your dependents?

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Personal Information ~ Provide SS Cards & Driver's Licenses:

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Occupation: _____ Blind? Disabled?
Phone: _____
Email: _____
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Occupation: _____ Blind? Disabled?
Phone: _____
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Dependent Information (Children, Parents, others):

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Full Name – DOB – Relationship - College Student? - 2022 Income?

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Address: _____

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| <input type="checkbox"/> Supplies | <input type="checkbox"/> Taxes & Licenses |
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Did your business:

- Yes No Use an Automobile? Type: _____
Business miles 1/1-6/30: _____ 7/1-12/31: _____;
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Full Name – DOB – Relationship - College Student? - 2022 Income?

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Yes No Did your child (under age 24) have any investment income? Please attach 1099's and/or tax return.

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| <input type="checkbox"/> Telephone | <input type="checkbox"/> Commissions & Fees |
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Did your business:

- Yes No Use an Automobile? Type: _____
Business miles 1/1-6/30: _____ 7/1-12/31: _____;
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Your Full Name: _____
Occupation: _____ Blind? Disabled?
Phone: _____
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 Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

1) _____

2) _____

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Yes No Could anyone else claim any of your dependents?

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Regular Income: Please attach Forms W-2, 1099-Misc, 1099R, 1099-SSA, K-1, 1099G, etc. Provide details/amounts if missing forms.

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Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

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- Yes No After-tax Health Insurance, including Medicare?
- Yes No Did anyone in your family receive health insurance from HealthCare.gov or other state run Marketplace? (Form 1095)
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- Yes No Cash/Checks/Money etc.
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Address: _____

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| <input type="checkbox"/> Supplies | <input type="checkbox"/> Taxes & Licenses |
| <input type="checkbox"/> Out of Town Travel | <input type="checkbox"/> Meals & Entertainment |
| <input type="checkbox"/> Utilities (not home) | <input type="checkbox"/> Wages paid to Employees |
| <input type="checkbox"/> Telephone | <input type="checkbox"/> Commissions & Fees |
| <input type="checkbox"/> Postage | <input type="checkbox"/> Employee Benefits |
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| <input type="checkbox"/> Other Expenses (list) | <input type="checkbox"/> Inventory W/D for Personal Use |

Did your business:

- Yes No Use an Automobile? Type: _____
Business miles 1/1-6/30: _____ 7/1-12/31: _____;
Personal miles: _____
- Yes No Have a home office? Must be Regular & Exclusive.
Sq Ft: _____ Sq Ft of entire home: _____
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Separate Business Address: _____

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Personal Information ~ Provide SS Cards & Driver's Licenses:

Your Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Spouse's Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

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Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

1) _____

2) _____

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Yes No Could anyone else claim any of your dependents?

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Regular Income: Please attach Forms W-2, 1099-Misc, 1099R, 1099-SSA, K-1, 1099G, etc. Provide details/amounts if missing forms.

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Phone: _____

Email: _____

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- Yes No Do you own your own home?
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- Yes No Qualified Charitable Distribution from IRA.

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| <input type="checkbox"/> Supplies | <input type="checkbox"/> Taxes & Licenses |
| <input type="checkbox"/> Out of Town Travel | <input type="checkbox"/> Meals & Entertainment |
| <input type="checkbox"/> Utilities (not home) | <input type="checkbox"/> Wages paid to Employees |
| <input type="checkbox"/> Telephone | <input type="checkbox"/> Commissions & Fees |
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Did your business:

- Yes No Use an Automobile? Type: _____
Business miles 1/1-6/30: _____ 7/1-12/31: _____ ;
Personal miles: _____
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Sq Ft: _____ Sq Ft of entire home: _____
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Separate Business Address: _____

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Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

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Phone: _____

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Full Name – DOB – Relationship - College Student? - 2022 Income?

1) _____

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Yes No Could anyone else claim any of your dependents?

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- Yes No First Placed in Service in 2022? If "Yes", please provide appraisal and settlement statements.
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Type of Rental: _____

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Which of the following expenses did your business have in 2022?

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| <input type="checkbox"/> Office Supplies | <input type="checkbox"/> Office/Building Rent |
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| <input type="checkbox"/> Supplies | <input type="checkbox"/> Taxes & Licenses |
| <input type="checkbox"/> Out of Town Travel | <input type="checkbox"/> Meals & Entertainment |
| <input type="checkbox"/> Utilities (not home) | <input type="checkbox"/> Wages paid to Employees |
| <input type="checkbox"/> Telephone | <input type="checkbox"/> Commissions & Fees |
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Did your business:

- Yes No Use an Automobile? Type: _____
Business miles 1/1-6/30: _____ 7/1-12/31: _____;
Personal miles: _____
- Yes No Have a home office? Must be Regular & Exclusive.
Sq Ft: _____ Sq Ft of entire home: _____
- Yes No Acquire or dispose of Tools/Equipment/Assets? *Please provide Invoice/Bill of Sale.*
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- Yes No Have more than one owner?
- Yes No Is this business an LLC? If "Yes" please provide LLC Articles of Organization and Operating Agreement.

Separate Business Address: _____

Method of Accounting: Cash Accrual Other/Not SureCould this be considered a Hobby? Yes No Not Sure

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Personal Information ~ Provide SS Cards & Driver's Licenses:

Your Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Spouse's Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

1) _____

2) _____

3) _____

Yes No Could anyone else claim any of your dependents?

Yes No Any Child Care costs? If "Yes", provide amounts paid, care provider name(s), EIN's, and address(es) for EACH dependent.

Regular Income: Please attach Forms W-2, 1099-Misc, 1099R, 1099-SSA, K-1, 1099G, etc. Provide details/amounts if missing forms.

Yes No Wages, tips, etc. from job(s)? (W-2)

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Yes No Own any rental property including a vacation home?

Yes No Unemployment Income? (1099-G)

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General Questions:

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How would you like to receive your copy of the completed tax return?

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Yes No Did you earn income in another state or country?

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| <input type="checkbox"/> Advertising | <input type="checkbox"/> Legal & Professional Services |
| <input type="checkbox"/> Office Supplies | <input type="checkbox"/> Office/Building Rent |
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- Yes No Use an Automobile? Type: _____
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Separate Business Address: _____

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Call (770)704-7777 to schedule an appointment. Please complete as much as possible prior to your appointment.

Personal Information ~ Provide SS Cards & Driver's Licenses:

Your Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Spouse's Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

1) _____

2) _____

3) _____

Yes No Could anyone else claim any of your dependents?

Yes No Any Child Care costs? If "Yes", provide amounts paid, care provider name(s), EIN's, and address(es) for EACH dependent.

Regular Income: Please attach Forms W-2, 1099-Misc, 1099R, 1099-SSA, K-1, 1099G, etc. Provide details/amounts if missing forms.

Yes No Wages, tips, etc. from job(s)? (W-2)

Yes No Interest from banks, bonds, other? (1099-INT)

Yes No Dividends? (1099-DIV)

Yes No Did you receive any tax refunds in 2022?

Yes No Alimony Paid/Received? \$ _____

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Yes No Own any rental property including a vacation home?

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General Questions:

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Please note, to avoid penalty, you must pay all taxes due by April 18th. An extension only grants more time to file, not to pay.

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Address: _____

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TaxSmart Business Services – 2022 Income Tax Organizer

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<p>Personal Information ~ Provide SS Cards & Driver's Licenses:</p> <p>Your Full Name: _____</p> <p>Occupation: _____ <input type="checkbox"/> Blind? <input type="checkbox"/> Disabled?</p> <p>Phone: _____</p> <p>Email: _____</p> <p>Spouse's Full Name: _____</p> <p>Occupation: _____ <input type="checkbox"/> Blind? <input type="checkbox"/> Disabled?</p> <p>Phone: _____</p> <p>Email: _____</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Sure: Do you want to file a joint return?</p>	<p>Dependent Information (Children, Parents, others):</p> <p style="text-align: center;">Provide SS Card & Proof of Residency for each dependent.</p> <p>Full Name – DOB – Relationship - College Student? - 2022 Income?</p> <p>1) _____</p> <p>2) _____</p> <p>3) _____</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Could anyone else claim any of your dependents?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Any Child Care costs? If "Yes", provide amounts paid, care provider name(s), EIN's, and address(es) for EACH dependent.</p>
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Expenses/Deductions:

- Yes No IRA Contribution: Traditional Roth SEP Other
Self \$ _____ Spouse \$ _____
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Medical Expenses:

- Yes No After-tax Health Insurance, including Medicare?
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- Yes No Do you own your own home?
- Yes No Real Estate Taxes (Form 1098 or other)?
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- Yes No Install an electric vehicle charger in your home?
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- Yes No First Placed in Service in 2022? If "Yes", please provide appraisal and settlement statements.
- Yes No Disposed/Stopped Renting during 2022?

Type of Rental: _____

Address: _____

Days Rented: _____ Days Vacant/Empty: _____

Personal use days (self, friends, family): _____

Average length of rental stay (in days): _____

Hours you & your spouse worked on rental: _____

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Personal Information ~ Provide SS Cards & Driver's Licenses:

Your Full Name: _____
Occupation: _____ Blind? Disabled?
Phone: _____
Email: _____
Spouse's Full Name: _____
Occupation: _____ Blind? Disabled?
Phone: _____
Email: _____
 Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

1) _____

2) _____

3) _____

Yes No Could anyone else claim any of your dependents?

Yes No Any Child Care costs? If "Yes", provide amounts paid, care provider name(s), EIN's, and address(es) for EACH dependent.

Regular Income: Please attach Forms W-2, 1099-Misc, 1099R, 1099-SSA, K-1, 1099G, etc. Provide details/amounts if missing forms.

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Please note, to avoid penalty, you must pay all taxes due by April 18th. An extension only grants more time to file, not to pay.

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- Yes No First Placed in Service in 2022? If "Yes", please provide appraisal and settlement statements.
- Yes No Disposed/Stopped Renting during 2022?

Type of Rental: _____

Address: _____

Days Rented: _____ Days Vacant/Empty: _____

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Which of the following expenses did your business have in 2022?

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| <input type="checkbox"/> Supplies | <input type="checkbox"/> Taxes & Licenses |
| <input type="checkbox"/> Out of Town Travel | <input type="checkbox"/> Meals & Entertainment |
| <input type="checkbox"/> Utilities (not home) | <input type="checkbox"/> Wages paid to Employees |
| <input type="checkbox"/> Telephone | <input type="checkbox"/> Commissions & Fees |
| <input type="checkbox"/> Postage | <input type="checkbox"/> Employee Benefits |
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Did your business:

- Yes No Use an Automobile? Type: _____
Business miles 1/1-6/30: _____ 7/1-12/31: _____;
Personal miles: _____
- Yes No Have a home office? Must be Regular & Exclusive.
Sq Ft: _____ Sq Ft of entire home: _____
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- Yes No Have more than one owner?
- Yes No Is this business an LLC? If "Yes" please provide LLC Articles of Organization and Operating Agreement.

Separate Business Address: _____

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Personal Information ~ Provide SS Cards & Driver's Licenses:

Your Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Spouse's Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

1) _____

2) _____

3) _____

Yes No Could anyone else claim any of your dependents?

Yes No Any Child Care costs? If "Yes", provide amounts paid, care provider name(s), EIN's, and address(es) for EACH dependent.

Regular Income: Please attach Forms W-2, 1099-Misc, 1099R, 1099-SSA, K-1, 1099G, etc. Provide details/amounts if missing forms.

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Equipment Rent Repairs/Maintenance/Cleaning

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Other Expenses (list) Inventory W/D for Personal Use

Did your business:

Yes No Use an Automobile? Type: _____
Business miles 1/1-6/30: _____ 7/1-12/31: _____;

Personal miles: _____

Yes No Have a home office? Must be Regular & Exclusive.

Sq Ft: _____ Sq Ft of entire home: _____

Yes No Acquire or dispose of Tools/Equipment/Assets? *Please provide Invoice/Bill of Sale.*

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Separate Business Address: _____

Method of Accounting: Cash Accrual Other/Not Sure

Could this be considered a Hobby? Yes No Not Sure

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Call (770)704-7777 to schedule an appointment. Please complete as much as possible prior to your appointment.

Personal Information ~ Provide SS Cards & Driver's Licenses:

Your Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Spouse's Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

1) _____

2) _____

3) _____

Yes No Could anyone else claim any of your dependents?

Yes No Any Child Care costs? If "Yes", provide amounts paid, care provider name(s), EIN's, and address(es) for EACH dependent.

Regular Income: Please attach Forms W-2, 1099-Misc, 1099R, 1099-SSA, K-1, 1099G, etc. Provide details/amounts if missing forms.

Yes No Wages, tips, etc. from job(s)? (W-2)

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Yes No Pay any Estimated Tax Payments? Please list amounts, dates, and to whom paid (GA, IRS, etc.)

Yes No Any births or deaths in your household? Did any children cease to be your dependents in 2022?

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- Yes No First Placed in Service in 2022? If "Yes", please provide appraisal and settlement statements.
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Type of Rental: _____

Address: _____

Days Rented: _____ Days Vacant/Empty: _____

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| <input type="checkbox"/> Equipment Rent | <input type="checkbox"/> Repairs/Maintenance/Cleaning |
| <input type="checkbox"/> Supplies | <input type="checkbox"/> Taxes & Licenses |
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| <input type="checkbox"/> Utilities (not home) | <input type="checkbox"/> Wages paid to Employees |
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Regular Income: Please attach Forms W-2, 1099-Misc, 1099R, 1099-SSA, K-1, 1099G, etc. Provide details/amounts if missing forms.

Yes No Wages, tips, etc. from job(s)? (W-2)

Yes No Interest from banks, bonds, other? (1099-INT)

Yes No Dividends? (1099-DIV)

Yes No Did you receive any tax refunds in 2022?

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Yes No Sell, buy or trade any assets, stocks, bonds, mutual funds, or other assets? (1099-B).

Yes No Distributions from 401(k), IRA, Pension, Annuity, etc.? (1099-R)

Yes No Spend, Receive, Sell, Exchange, Acquire, or Mine any Virtual Currency such as Bitcoin, Ethereum, etc?

Yes No Own any rental property including a vacation home?

Yes No Unemployment Income? (1099-G)

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General Questions:

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Please note, to avoid penalty, you must pay all taxes due by April 18th. An extension only grants more time to file, not to pay.

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Yes No Pay any Estimated Tax Payments? Please list amounts, dates, and to whom paid (GA, IRS, etc.)

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Expenses/Deductions:

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- Yes No After-tax Health Insurance, including Medicare?
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- Yes No Cash/Checks/Money etc.
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- Yes No Install an electric vehicle charger in your home?
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Type of Rental: _____

Address: _____

Days Rented: _____ Days Vacant/Empty: _____

Personal use days (self, friends, family): _____

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| <input type="checkbox"/> Supplies | <input type="checkbox"/> Taxes & Licenses |
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Did your business:

- Yes No Use an Automobile? Type: _____
Business miles 1/1-6/30: _____ 7/1-12/31: _____;
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Personal Information ~ Provide SS Cards & Driver's Licenses:

Your Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

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Spouse's Full Name: _____

Occupation: _____ Blind? Disabled?

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Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

1) _____

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Expenses/Deductions:

- Yes No IRA Contribution: Traditional Roth SEP Other
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- Yes No After-tax Health Insurance, including Medicare?
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Taxes & Interest Expenses:

- Yes No Do you own your own home?
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- Yes No Mortgage Interest/Points Paid (Form 1098)?
- Yes No Did you purchase a boat, airplane, RV, etc.?
- Yes No Annual Ad Valorem Taxes on car, boat, etc.?
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Gifts to Charity *Documentation required for all donations:*

- Yes No Cash/Checks/Money etc.
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Other Miscellaneous Items:

- Yes No Install an electric vehicle charger in your home?
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- Yes No Unreimbursed Educator Expenses (K-12 only)?

Rental Property:

- Yes No First Placed in Service in 2022? If "Yes", please provide appraisal and settlement statements.
- Yes No Disposed/Stopped Renting during 2022?

Type of Rental: _____

Address: _____

Days Rented: _____ Days Vacant/Empty: _____

Personal use days (self, friends, family): _____

Average length of rental stay (in days): _____

Hours you & your spouse worked on rental: _____

Small Business or Farming*Request our 2022 Business Tax Organizer for more in-depth checklist*

Nature of Business: _____

Date Business Started: _____

Which of the following expenses did your business have in 2022?

- | | |
|--|--|
| <input type="checkbox"/> Inventory Purchases | <input type="checkbox"/> Interest paid on business loans |
| <input type="checkbox"/> Contract Labor | <input type="checkbox"/> Insurance (Not Health) |
| <input type="checkbox"/> Advertising | <input type="checkbox"/> Legal & Professional Services |
| <input type="checkbox"/> Office Supplies | <input type="checkbox"/> Office/Building Rent |
| <input type="checkbox"/> Equipment Rent | <input type="checkbox"/> Repairs/Maintenance/Cleaning |
| <input type="checkbox"/> Supplies | <input type="checkbox"/> Taxes & Licenses |
| <input type="checkbox"/> Out of Town Travel | <input type="checkbox"/> Meals & Entertainment |
| <input type="checkbox"/> Utilities (not home) | <input type="checkbox"/> Wages paid to Employees |
| <input type="checkbox"/> Telephone | <input type="checkbox"/> Commissions & Fees |
| <input type="checkbox"/> Postage | <input type="checkbox"/> Employee Benefits |
| <input type="checkbox"/> Auto/Truck Expenses | <input type="checkbox"/> Pension & Profit Sharing |
| <input type="checkbox"/> Other Expenses (list) | <input type="checkbox"/> Inventory W/D for Personal Use |

Did your business:

- Yes No Use an Automobile? Type: _____
Business miles 1/1-6/30: _____ 7/1-12/31: _____;
Personal miles: _____
- Yes No Have a home office? Must be Regular & Exclusive.
Sq Ft: _____ Sq Ft of entire home: _____
- Yes No Acquire or dispose of Tools/Equipment/Assets? *Please provide Invoice/Bill of Sale.*
- Yes No Pay any service providers, contractors, or casual labor?
 Yes No If "Yes", would you like us to issue 1099's?
- Yes No Have Inventory on hand December 31, 2022?
- Yes No Pay wages to W-2 type employees?
- Yes No Receive EIDL, PPP, SBA Loan, etc.?
- Yes No Make or receive any loans/leases/notes or payments?
- Yes No Engage in Bartering?
- Yes No Have more than one owner?
- Yes No Is this business an LLC? If "Yes" please provide LLC Articles of Organization and Operating Agreement.

Separate Business Address: _____

Method of Accounting: Cash Accrual Other/Not SureCould this be considered a Hobby? Yes No Not Sure

How many hours did you "participate" (work) in the business operations during 2022? 500+ annual hours may be needed: _____

*Celebrating
21 Years!
2002 - 2023*

Please attach additional sheets for any other information you need to provide.
TaxSmart Business Services - (125 Barrett Road) PO Box 280, Holly Springs, GA, 30142

Phone: 770-704-7777 - Email: info@taxsmart1040.com

TaxSmart Business Services – 2022 Income Tax Organizer

Call (770)704-7777 to schedule an appointment. Please complete as much as possible prior to your appointment.

Personal Information ~ Provide SS Cards & Driver's Licenses:

Your Full Name: _____
Occupation: _____ Blind? Disabled?
Phone: _____
Email: _____
Spouse's Full Name: _____
Occupation: _____ Blind? Disabled?
Phone: _____
Email: _____
 Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

1) _____

2) _____

3) _____

Yes No Could anyone else claim any of your dependents?

Yes No Any Child Care costs? If "Yes", provide amounts paid, care provider name(s), EIN's, and address(es) for EACH dependent.

Regular Income: Please attach Forms W-2, 1099-Misc, 1099R, 1099-SSA, K-1, 1099G, etc. Provide details/amounts if missing forms.

Yes No Wages, tips, etc. from job(s)? (W-2)
 Yes No Interest from banks, bonds, other? (1099-INT)
 Yes No Dividends? (1099-DIV)
 Yes No Did you receive any tax refunds in 2022?
 Yes No Alimony Paid/Received? \$ _____
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Yes No Own any rental property including a vacation home?
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Please note, to avoid penalty, you must pay all taxes due by April 18th. An extension only grants more time to file, not to pay.

Yes No Did your address change? Please attach.
 Yes No At any time during 2022 did you have any financial interest or signature authority over a foreign financial account, including overseas gaming?
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Self \$ _____ Spouse \$ _____

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Taxes & Interest Expenses:

Yes No Do you own your own home?

Yes No Real Estate Taxes (Form 1098 or other)?

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Yes No Miles driven for charity?

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Yes No Qualified Charitable Distribution from IRA.

Other Miscellaneous Items:

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Yes No Disposed/Stopped Renting during 2022?

Type of Rental: _____

Address: _____

Days Rented: _____ Days Vacant/Empty: _____

Personal use days (self, friends, family): _____

Average length of rental stay (in days): _____

Hours you & your spouse worked on rental: _____

Small Business or Farming

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Nature of Business: _____

Date Business Started: _____

Which of the following expenses did your business have in 2022?

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Contract Labor Insurance (Not Health)

Advertising Legal & Professional Services

Office Supplies Office/Building Rent

Equipment Rent Repairs/Maintenance/Cleaning

Supplies Taxes & Licenses

Out of Town Travel Meals & Entertainment

Utilities (not home) Wages paid to Employees

Telephone Commissions & Fees

Postage Employee Benefits

Auto/Truck Expenses Pension & Profit Sharing

Other Expenses (list) Inventory W/D for Personal Use

Did your business:

Yes No Use an Automobile? Type: _____
Business miles 1/1-6/30: _____ 7/1-12/31: _____;

Personal miles: _____

Yes No Have a home office? Must be Regular & Exclusive.

Sq Ft: _____ Sq Ft of entire home: _____

Yes No Acquire or dispose of Tools/Equipment/Assets? *Please provide Invoice/Bill of Sale.*

Yes No Pay any service providers, contractors, or casual labor?

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Phone: _____

Email: _____

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- Yes No Have more than one owner?
- Yes No Is this business an LLC? If "Yes" please provide LLC Articles of Organization and Operating Agreement.

Separate Business Address: _____

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21 Years!
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Phone: 770-704-7777 - Email: info@taxsmart1040.com

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Call (770)704-7777 to schedule an appointment. Please complete as much as possible prior to your appointment.

Personal Information ~ Provide SS Cards & Driver's Licenses:

Your Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Spouse's Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

1) _____

2) _____

3) _____

Yes No Could anyone else claim any of your dependents?

Yes No Any Child Care costs? If "Yes", provide amounts paid, care provider name(s), EIN's, and address(es) for EACH dependent.

Regular Income: Please attach Forms W-2, 1099-Misc, 1099R, 1099-SSA, K-1, 1099G, etc. Provide details/amounts if missing forms.

Yes No Wages, tips, etc. from job(s)? (W-2)

Yes No Interest from banks, bonds, other? (1099-INT)

Yes No Dividends? (1099-DIV)

Yes No Did you receive any tax refunds in 2022?

Yes No Alimony Paid/Received? \$ _____

Yes No Sell, buy or trade any assets, stocks, bonds, mutual funds, or other assets? (1099-B).

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Yes No Spend, Receive, Sell, Exchange, Acquire, or Mine any Virtual Currency such as Bitcoin, Ethereum, etc?

Yes No Own any rental property including a vacation home?

Yes No Unemployment Income? (1099-G)

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General Questions:

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Yes No Pay any Estimated Tax Payments? Please list amounts, dates, and to whom paid (GA, IRS, etc.)

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- Yes No After-tax Health Insurance, including Medicare?
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Address: _____

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Business miles 1/1-6/30: _____ 7/1-12/31: _____;
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Call (770)704-7777 to schedule an appointment. Please complete as much as possible prior to your appointment.

Personal Information ~ Provide SS Cards & Driver's Licenses:

Your Full Name: _____
Occupation: _____ Blind? Disabled?
Phone: _____
Email: _____
Spouse's Full Name: _____
Occupation: _____ Blind? Disabled?
Phone: _____
Email: _____
 Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

1) _____

2) _____

3) _____

Yes No Could anyone else claim any of your dependents?

Yes No Any Child Care costs? If "Yes", provide amounts paid, care provider name(s), EIN's, and address(es) for EACH dependent.

Regular Income: Please attach Forms W-2, 1099-Misc, 1099R, 1099-SSA, K-1, 1099G, etc. Provide details/amounts if missing forms.

Yes No Wages, tips, etc. from job(s)? (W-2)
 Yes No Interest from banks, bonds, other? (1099-INT)
 Yes No Dividends? (1099-DIV)
 Yes No Did you receive any tax refunds in 2022?
 Yes No Alimony Paid/Received? \$ _____
 Yes No Sell, buy or trade any assets, stocks, bonds, mutual funds, or other assets? (1099-B).
 Yes No Distributions from 401(k), IRA, Pension, Annuity, etc.? (1099-R)
 Yes No Spend, Receive, Sell, Exchange, Acquire, or Mine any Virtual Currency such as Bitcoin, Ethereum, etc?

Yes No Own any rental property including a vacation home?
 Yes No Unemployment Income? (1099-G)
 Yes No Social Security Benefits? (1099-SSA)
 Yes No Gambling Income and Related Expenses? (W2G)
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General Questions:

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Please note, to avoid penalty, you must pay all taxes due by April 18th. An extension only grants more time to file, not to pay.

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Expenses/Deductions:

- Yes No IRA Contribution: Traditional Roth SEP Other
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- Yes No Cash/Checks/Money etc.
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- Yes No Make gifts totaling \geq \$16,000 to one person?
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- Yes No Unreimbursed Educator Expenses (K-12 only)?

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- Yes No First Placed in Service in 2022? If "Yes", please provide appraisal and settlement statements.
- Yes No Disposed/Stopped Renting during 2022?

Type of Rental: _____

Address: _____

Days Rented: _____ Days Vacant/Empty: _____

Personal use days (self, friends, family): _____

Average length of rental stay (in days): _____

Hours you & your spouse worked on rental: _____

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Regular Income: Please attach Forms W-2, 1099-Misc, 1099R, 1099-SSA, K-1, 1099G, etc. Provide details/amounts if missing forms.

Yes No Wages, tips, etc. from job(s)? (W-2)

Yes No Interest from banks, bonds, other? (1099-INT)

Yes No Dividends? (1099-DIV)

Yes No Did you receive any tax refunds in 2022?

Yes No Alimony Paid/Received? \$ _____

Yes No Sell, buy or trade any assets, stocks, bonds, mutual funds, or other assets? (1099-B).

Yes No Distributions from 401(k), IRA, Pension, Annuity, etc.? (1099-R)

Yes No Spend, Receive, Sell, Exchange, Acquire, or Mine any Virtual Currency such as Bitcoin, Ethereum, etc?

Yes No Own any rental property including a vacation home?

Yes No Unemployment Income? (1099-G)

Yes No Social Security Benefits? (1099-SSA)

Yes No Gambling Income and Related Expenses? (W2G)

Yes No Cancellation of Debt/Foreclosure? (1099-A or -C)

Yes No Any small business income/loss from an S-Corp, Partnership, LLC, Sole Proprietor? (K-1, 1099-Misc, 1099-K)

Yes No Did you sell anything online: Craigslist, eBay, FB Marketplace, etc. (1099K)?

Yes No Any other income, e.g. Uber/Lyft, Crowdfunding, other? Please explain:

General Questions:

Yes No Direct Deposit your refund into your bank account? *Must attach a voided check.* Otherwise you will receive refund checks. Amounts due will NOT be drafted from your account.

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Yes No Do you or your spouse owe any back taxes?

Please note, to avoid penalty, you must pay all taxes due by April 18th. An extension only grants more time to file, not to pay.

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Yes No Pay any Estimated Tax Payments? Please list amounts, dates, and to whom paid (GA, IRS, etc.)

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Expenses/Deductions:

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Self \$ _____ Spouse \$ _____
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- Yes No After-tax Health Insurance, including Medicare?
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- Yes No Install an electric vehicle charger in your home?
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Type of Rental: _____

Address: _____

Days Rented: _____ Days Vacant/Empty: _____

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| <input type="checkbox"/> Supplies | <input type="checkbox"/> Taxes & Licenses |
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| <input type="checkbox"/> Utilities (not home) | <input type="checkbox"/> Wages paid to Employees |
| <input type="checkbox"/> Telephone | <input type="checkbox"/> Commissions & Fees |
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Did your business:

- Yes No Use an Automobile? Type: _____
Business miles 1/1-6/30: _____ 7/1-12/31: _____;
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Occupation: _____ Blind? Disabled?

Phone: _____

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Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

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Full Name – DOB – Relationship - College Student? - 2022 Income?

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Separate Business Address: _____

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Personal Information ~ Provide SS Cards & Driver's Licenses:

Your Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

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Yes No Any small business income/loss from an S-Corp, Partnership, LLC, Sole Proprietor? (K-1, 1099-Misc, 1099-K)

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Yes No Any other income, e.g. Uber/Lyft, Crowdfunding, other? Please explain:

General Questions:

Yes No Direct Deposit your refund into your bank account? *Must attach a voided check.* Otherwise you will receive refund checks. Amounts due will NOT be drafted from your account.

Yes No Did you file 2021 tax return? **Provide Copy/PDF.**

Yes No Do you or your spouse owe any back taxes?

Please note, to avoid penalty, you must pay all taxes due by April 18th. An extension only grants more time to file, not to pay.

Yes No Did your address change? Please attach.

Yes No At any time during 2022 did you have any financial interest or signature authority over a foreign financial account, including overseas gaming?

Yes No During 2022, did you receive a distribution from, were the grantor of, or transferor to a foreign trust?

How would you like to receive your copy of the completed tax return?

Paper Copy Digital/PDF Copy

Other Special Situations: May require detailed documentation

Yes No Pay any Estimated Tax Payments? Please list amounts, dates, and to whom paid (GA, IRS, etc.)

Yes No Any births or deaths in your household? Did any children cease to be your dependents in 2022?

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Expenses/Deductions:

- Yes No IRA Contribution: Traditional Roth SEP Other
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- Yes No After-tax Health Insurance, including Medicare?
- Yes No Did anyone in your family receive health insurance from HealthCare.gov or other state run Marketplace? (Form 1095)
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- Yes No Any out of pocket medical expenses: Doctors, Dentist, Rx, Nursing Homes, Medical Mileage, etc.? Please list.

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- Yes No Mortgage Interest/Points Paid (Form 1098)?
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Gifts to Charity *Documentation required for all donations:*

- Yes No Cash/Checks/Money etc.
- Yes No Non-Cash Gifts i.e. Household items to Goodwill?
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- Yes No Unreimbursed Educator Expenses (K-12 only)?

Rental Property:

- Yes No First Placed in Service in 2022? If "Yes", please provide appraisal and settlement statements.
- Yes No Disposed/Stopped Renting during 2022?

Type of Rental: _____

Address: _____

Days Rented: _____ Days Vacant/Empty: _____

Personal use days (self, friends, family): _____

Average length of rental stay (in days): _____

Hours you & your spouse worked on rental: _____

Small Business or Farming*Request our 2022 Business Tax Organizer for more in-depth checklist*

Nature of Business: _____

Date Business Started: _____

Which of the following expenses did your business have in 2022?

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|--|--|
| <input type="checkbox"/> Inventory Purchases | <input type="checkbox"/> Interest paid on business loans |
| <input type="checkbox"/> Contract Labor | <input type="checkbox"/> Insurance (Not Health) |
| <input type="checkbox"/> Advertising | <input type="checkbox"/> Legal & Professional Services |
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| <input type="checkbox"/> Utilities (not home) | <input type="checkbox"/> Wages paid to Employees |
| <input type="checkbox"/> Telephone | <input type="checkbox"/> Commissions & Fees |
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| <input type="checkbox"/> Other Expenses (list) | <input type="checkbox"/> Inventory W/D for Personal Use |

Did your business:

- Yes No Use an Automobile? Type: _____
Business miles 1/1-6/30: _____ 7/1-12/31: _____;
Personal miles: _____
- Yes No Have a home office? Must be Regular & Exclusive.
Sq Ft: _____ Sq Ft of entire home: _____
- Yes No Acquire or dispose of Tools/Equipment/Assets? *Please provide Invoice/Bill of Sale.*
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- Yes No Engage in Bartering?
- Yes No Have more than one owner?
- Yes No Is this business an LLC? If "Yes" please provide LLC Articles of Organization and Operating Agreement.

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Phone: 770-704-7777 - Email: info@taxsmart1040.com

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Personal Information ~ Provide SS Cards & Driver's Licenses:

Your Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Spouse's Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

1) _____

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Yes No Could anyone else claim any of your dependents?

Yes No Any Child Care costs? If "Yes", provide amounts paid, care provider name(s), EIN's, and address(es) for EACH dependent.

Regular Income: Please attach Forms W-2, 1099-Misc, 1099R, 1099-SSA, K-1, 1099G, etc. Provide details/amounts if missing forms.

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Yes No Do you own your own home?

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Yes No Miles driven for charity?

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Yes No Qualified Charitable Distribution from IRA.

Other Miscellaneous Items:

Yes No Install an electric vehicle charger in your home?

Yes No Rollover \$\$\$ from an IRA, 401(k), Annuity, etc.?

Yes No Receive an inheritance (Sch K-1)?

Yes No Make gifts totaling \geq \$16,000 to one person?

Yes No Did you contribute to a 529 College Savings Plan?

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Rental Property:

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Type of Rental: _____

Address: _____

Days Rented: _____ Days Vacant/Empty: _____

Personal use days (self, friends, family): _____

Average length of rental stay (in days): _____

Hours you & your spouse worked on rental: _____

Small Business or Farming

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Nature of Business: _____

Date Business Started: _____

Which of the following expenses did your business have in 2022?

Inventory Purchases Interest paid on business loans

Contract Labor Insurance (Not Health)

Advertising Legal & Professional Services

Office Supplies Office/Building Rent

Equipment Rent Repairs/Maintenance/Cleaning

Supplies Taxes & Licenses

Out of Town Travel Meals & Entertainment

Utilities (not home) Wages paid to Employees

Telephone Commissions & Fees

Postage Employee Benefits

Auto/Truck Expenses Pension & Profit Sharing

Other Expenses (list) Inventory W/D for Personal Use

Did your business:

Yes No Use an Automobile? Type: _____
Business miles 1/1-6/30: _____ 7/1-12/31: _____;

Personal miles: _____

Yes No Have a home office? Must be Regular & Exclusive.

Sq Ft: _____ Sq Ft of entire home: _____

Yes No Acquire or dispose of Tools/Equipment/Assets? *Please provide Invoice/Bill of Sale.*

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Yes No If "Yes", would you like us to issue 1099's?

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Yes No Pay wages to W-2 type employees?

Yes No Receive EIDL, PPP, SBA Loan, etc.?

Yes No Make or receive any loans/leases/notes or payments?

Yes No Engage in Bartering?

Yes No Have more than one owner?

Yes No Is this business an LLC? If "Yes" please provide LLC Articles of Organization and Operating Agreement.

Separate Business Address: _____

Method of Accounting: Cash Accrual Other/Not Sure

Could this be considered a Hobby? Yes No Not Sure

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Personal Information ~ Provide SS Cards & Driver's Licenses:

Your Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Spouse's Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

1) _____

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Yes No Could anyone else claim any of your dependents?

Yes No Any Child Care costs? If "Yes", provide amounts paid, care provider name(s), EIN's, and address(es) for EACH dependent.

Regular Income: Please attach Forms W-2, 1099-Misc, 1099R, 1099-SSA, K-1, 1099G, etc. Provide details/amounts if missing forms.

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Yes No At any time during 2022 did you have any financial interest or signature authority over a foreign financial account, including overseas gaming?

Yes No During 2022, did you receive a distribution from, were the grantor of, or transferor to a foreign trust?

How would you like to receive your copy of the completed tax return?

Paper Copy Digital/PDF Copy

Yes No College expenses for self, spouse or dependent?

Yes No Have any Unreimbursed Partnership Expenses in 2022?

Yes No Have an IRS IP-PIN for self, spouse, or dependent?

Yes No Did you pay any foreign taxes in 2022?

Yes No Did you adopt a child in 2022?

Yes No Did your child (under age 24) have any investment income? Please attach 1099's and/or tax return.

Yes No An Armed Forces Reservist, Qualified Performing Artist, or Government Fee Basis Official?

Yes No Do you have a Health Savings Account? (1099-SA)

Yes No Pay any Household Employees such as gardeners, housekeepers, nannies, etc.?

Yes No Do you expect a substantial change in your income or deductions next year (2023)? Please attach explanation:

(Continued on reverse)

Expenses/Deductions:

Yes No IRA Contribution: Traditional Roth SEP Other
Self \$ _____ Spouse \$ _____

Yes No Penalty on early withdrawal from CD? \$ _____

Yes No Student Loan interest paid? _____

Medical Expenses:

Yes No After-tax Health Insurance, including Medicare?

Yes No Did anyone in your family receive health insurance from HealthCare.gov or other state run Marketplace? (Form 1095)

Yes No Are you part of a Healthcare Sharing Ministry?

Yes No Did you pay Long Term Care Insurance premiums?

Yes No Any out of pocket medical expenses: Doctors, Dentist, Rx, Nursing Homes, Medical Mileage, etc.? Please list.

Taxes & Interest Expenses:

Yes No Do you own your own home?

Yes No Real Estate Taxes (Form 1098 or other)?

Yes No Mortgage Interest/Points Paid (Form 1098)?

Yes No Did you purchase a boat, airplane, RV, etc.?

Yes No Annual Ad Valorem Taxes on car, boat, etc.?

Yes No Other State, County, City or Local Taxes?

Yes No Investment Interest paid? Other Interest Paid?

Gifts to Charity *Documentation required for all donations:*

Yes No Cash/Checks/Money etc.

Yes No Non-Cash Gifts i.e. Household items to Goodwill?

Yes No Miles driven for charity?

Yes No Payroll Deductions of Charity, Union Dues, other?

Yes No Qualified Charitable Distribution from IRA.

Other Miscellaneous Items:

Yes No Install an electric vehicle charger in your home?

Yes No Rollover \$\$\$ from an IRA, 401(k), Annuity, etc.?

Yes No Receive an inheritance (Sch K-1)?

Yes No Make gifts totaling \geq \$16,000 to one person?

Yes No Did you contribute to a 529 College Savings Plan?

Yes No Unreimbursed Educator Expenses (K-12 only)?

Rental Property:

Yes No First Placed in Service in 2022? If "Yes", please provide appraisal and settlement statements.

Yes No Disposed/Stopped Renting during 2022?

Type of Rental: _____

Address: _____

Days Rented: _____ Days Vacant/Empty: _____

Personal use days (self, friends, family): _____

Average length of rental stay (in days): _____

Hours you & your spouse worked on rental: _____

Small Business or Farming

Request our 2022 Business Tax Organizer for more in-depth checklist

Nature of Business: _____

Date Business Started: _____

Which of the following expenses did your business have in 2022?

Inventory Purchases Interest paid on business loans

Contract Labor Insurance (Not Health)

Advertising Legal & Professional Services

Office Supplies Office/Building Rent

Equipment Rent Repairs/Maintenance/Cleaning

Supplies Taxes & Licenses

Out of Town Travel Meals & Entertainment

Utilities (not home) Wages paid to Employees

Telephone Commissions & Fees

Postage Employee Benefits

Auto/Truck Expenses Pension & Profit Sharing

Other Expenses (list) Inventory W/D for Personal Use

Did your business:

Yes No Use an Automobile? Type: _____
Business miles 1/1-6/30: _____ 7/1-12/31: _____;

Personal miles: _____

Yes No Have a home office? Must be Regular & Exclusive.

Sq Ft: _____ Sq Ft of entire home: _____

Yes No Acquire or dispose of Tools/Equipment/Assets? *Please provide Invoice/Bill of Sale.*

Yes No Pay any service providers, contractors, or casual labor?

Yes No If "Yes", would you like us to issue 1099's?

Yes No Have Inventory on hand December 31, 2022?

Yes No Pay wages to W-2 type employees?

Yes No Receive EIDL, PPP, SBA Loan, etc.?

Yes No Make or receive any loans/leases/notes or payments?

Yes No Engage in Bartering?

Yes No Have more than one owner?

Yes No Is this business an LLC? If "Yes" please provide LLC Articles of Organization and Operating Agreement.

Separate Business Address: _____

Method of Accounting: Cash Accrual Other/Not Sure

Could this be considered a Hobby? Yes No Not Sure

How many hours did you "participate" (work) in the business operations during 2022? 500+ annual hours may be needed: _____

*Celebrating
21 Years!
2002 - 2023*

Please attach additional sheets for any other information you need to provide.
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Phone: 770-704-7777 - Email: info@taxsmart1040.com



TaxSmart Business Services – 2022 Income Tax Organizer

Call (770)704-7777 to schedule an appointment. Please complete as much as possible prior to your appointment.

Personal Information ~ Provide SS Cards & Driver's Licenses:

Your Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Spouse's Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

1) _____

2) _____

3) _____

Yes No Could anyone else claim any of your dependents?

Yes No Any Child Care costs? If "Yes", provide amounts paid, care provider name(s), EIN's, and address(es) for EACH dependent.

Regular Income: Please attach Forms W-2, 1099-Misc, 1099R, 1099-SSA, K-1, 1099G, etc. Provide details/amounts if missing forms.

Yes No Wages, tips, etc. from job(s)? (W-2)

Yes No Interest from banks, bonds, other? (1099-INT)

Yes No Dividends? (1099-DIV)

Yes No Did you receive any tax refunds in 2022?

Yes No Alimony Paid/Received? \$ _____

Yes No Sell, buy or trade any assets, stocks, bonds, mutual funds, or other assets? (1099-B).

Yes No Distributions from 401(k), IRA, Pension, Annuity, etc.? (1099-R)

Yes No Spend, Receive, Sell, Exchange, Acquire, or Mine any Virtual Currency such as Bitcoin, Ethereum, etc?

Yes No Own any rental property including a vacation home?

Yes No Unemployment Income? (1099-G)

Yes No Social Security Benefits? (1099-SSA)

Yes No Gambling Income and Related Expenses? (W2G)

Yes No Cancellation of Debt/Foreclosure? (1099-A or -C)

Yes No Any small business income/loss from an S-Corp, Partnership, LLC, Sole Proprietor? (K-1, 1099-Misc, 1099-K)

Yes No Did you sell anything online: Craigslist, eBay, FB Marketplace, etc. (1099K)?

Yes No Any other income, e.g. Uber/Lyft, Crowdfunding, other? Please explain:

General Questions:

Yes No Direct Deposit your refund into your bank account? *Must attach a voided check.* Otherwise you will receive refund checks. Amounts due will NOT be drafted from your account.

Yes No Did you file 2021 tax return? **Provide Copy/PDF.**

Yes No Do you or your spouse owe any back taxes?

Please note, to avoid penalty, you must pay all taxes due by April 18th. An extension only grants more time to file, not to pay.

Other Special Situations: May require detailed documentation

Yes No Pay any Estimated Tax Payments? Please list amounts, dates, and to whom paid (GA, IRS, etc.)

Yes No Any births or deaths in your household? Did any children cease to be your dependents in 2022?

Yes No Did your marital status change during 2022?

Yes No Did you earn income in another state or country?

Yes No Did you buy, sell or refinance (including loan modification) property in 2022? If yes, attach closing statements.

Yes No During 2022, were there any changes to federal or state tax returns filed in prior years? Please attach notices.

Yes No Did you suffer a casualty or loss in 2022 in a presidentially declared disaster area? www.fema.gov/disasters

Yes No Receive any hobby income?

Yes No Moving Expenses? (Only for active military)

Yes No Did your address change? Please attach.

Yes No At any time during 2022 did you have any financial interest or signature authority over a foreign financial account, including overseas gaming?

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Yes No Did your child (under age 24) have any investment income? Please attach 1099's and/or tax return.

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Expenses/Deductions:

- Yes No IRA Contribution: Traditional Roth SEP Other
Self \$ _____ Spouse \$ _____
- Yes No Penalty on early withdrawal from CD? \$ _____
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- Yes No After-tax Health Insurance, including Medicare?
- Yes No Did anyone in your family receive health insurance from HealthCare.gov or other state run Marketplace? (Form 1095)
- Yes No Are you part of a Healthcare Sharing Ministry?
- Yes No Did you pay Long Term Care Insurance premiums?
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Taxes & Interest Expenses:

- Yes No Do you own your own home?
- Yes No Real Estate Taxes (Form 1098 or other)?
- Yes No Mortgage Interest/Points Paid (Form 1098)?
- Yes No Did you purchase a boat, airplane, RV, etc.?
- Yes No Annual Ad Valorem Taxes on car, boat, etc.?
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- Yes No Cash/Checks/Money etc.
- Yes No Non-Cash Gifts i.e. Household items to Goodwill?
- Yes No Miles driven for charity?
- Yes No Payroll Deductions of Charity, Union Dues, other?
- Yes No Qualified Charitable Distribution from IRA.

Other Miscellaneous Items:

- Yes No Install an electric vehicle charger in your home?
- Yes No Rollover \$\$\$ from an IRA, 401(k), Annuity, etc.?
- Yes No Receive an inheritance (Sch K-1)?
- Yes No Make gifts totaling \geq \$16,000 to one person?
- Yes No Did you contribute to a 529 College Savings Plan?
- Yes No Unreimbursed Educator Expenses (K-12 only)?

Rental Property:

- Yes No First Placed in Service in 2022? If "Yes", please provide appraisal and settlement statements.
- Yes No Disposed/Stopped Renting during 2022?

Type of Rental: _____

Address: _____

Days Rented: _____ Days Vacant/Empty: _____

Personal use days (self, friends, family): _____

Average length of rental stay (in days): _____

Hours you & your spouse worked on rental: _____

Small Business or Farming*Request our 2022 Business Tax Organizer for more in-depth checklist*

Nature of Business: _____

Date Business Started: _____

Which of the following expenses did your business have in 2022?

- | | |
|--|--|
| <input type="checkbox"/> Inventory Purchases | <input type="checkbox"/> Interest paid on business loans |
| <input type="checkbox"/> Contract Labor | <input type="checkbox"/> Insurance (Not Health) |
| <input type="checkbox"/> Advertising | <input type="checkbox"/> Legal & Professional Services |
| <input type="checkbox"/> Office Supplies | <input type="checkbox"/> Office/Building Rent |
| <input type="checkbox"/> Equipment Rent | <input type="checkbox"/> Repairs/Maintenance/Cleaning |
| <input type="checkbox"/> Supplies | <input type="checkbox"/> Taxes & Licenses |
| <input type="checkbox"/> Out of Town Travel | <input type="checkbox"/> Meals & Entertainment |
| <input type="checkbox"/> Utilities (not home) | <input type="checkbox"/> Wages paid to Employees |
| <input type="checkbox"/> Telephone | <input type="checkbox"/> Commissions & Fees |
| <input type="checkbox"/> Postage | <input type="checkbox"/> Employee Benefits |
| <input type="checkbox"/> Auto/Truck Expenses | <input type="checkbox"/> Pension & Profit Sharing |
| <input type="checkbox"/> Other Expenses (list) | <input type="checkbox"/> Inventory W/D for Personal Use |

Did your business:

- Yes No Use an Automobile? Type: _____
Business miles 1/1-6/30: _____ 7/1-12/31: _____;
Personal miles: _____
- Yes No Have a home office? Must be Regular & Exclusive.
Sq Ft: _____ Sq Ft of entire home: _____
- Yes No Acquire or dispose of Tools/Equipment/Assets? *Please provide Invoice/Bill of Sale.*
- Yes No Pay any service providers, contractors, or casual labor?
 Yes No If "Yes", would you like us to issue 1099's?
- Yes No Have Inventory on hand December 31, 2022?
- Yes No Pay wages to W-2 type employees?
- Yes No Receive EIDL, PPP, SBA Loan, etc.?
- Yes No Make or receive any loans/leases/notes or payments?
- Yes No Engage in Bartering?
- Yes No Have more than one owner?
- Yes No Is this business an LLC? If "Yes" please provide LLC Articles of Organization and Operating Agreement.

Separate Business Address: _____

Method of Accounting: Cash Accrual Other/Not SureCould this be considered a Hobby? Yes No Not Sure

How many hours did you "participate" (work) in the business operations during 2022? 500+ annual hours may be needed: _____

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2002 - 2023*

Please attach additional sheets for any other information you need to provide.
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Phone: 770-704-7777 - Email: info@taxsmart1040.com

TaxSmart Business Services – 2022 Income Tax Organizer

Call (770)704-7777 to schedule an appointment. Please complete as much as possible prior to your appointment.

<p>Personal Information ~ Provide SS Cards & Driver's Licenses:</p> <p>Your Full Name: _____</p> <p>Occupation: _____ <input type="checkbox"/> Blind? <input type="checkbox"/> Disabled?</p> <p>Phone: _____</p> <p>Email: _____</p> <p>Spouse's Full Name: _____</p> <p>Occupation: _____ <input type="checkbox"/> Blind? <input type="checkbox"/> Disabled?</p> <p>Phone: _____</p> <p>Email: _____</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Sure: Do you want to file a joint return?</p>	<p>Dependent Information (Children, Parents, others):</p> <p style="text-align: center;">Provide SS Card & Proof of Residency for each dependent.</p> <p>Full Name – DOB – Relationship - College Student? - 2022 Income?</p> <p>1) _____</p> <p>2) _____</p> <p>3) _____</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Could anyone else claim any of your dependents?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Any Child Care costs? If "Yes", provide amounts paid, care provider name(s), EIN's, and address(es) for EACH dependent.</p>
<p>Regular Income: Please attach Forms W-2, 1099-Misc, 1099R, 1099-SSA, K-1, 1099G, etc. Provide details/amounts if missing forms.</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Wages, tips, etc. from job(s)? (W-2)</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Interest from banks, bonds, other? (1099-INT)</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Dividends? (1099-DIV)</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Did you receive any tax refunds in 2022?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Alimony Paid/Received? \$ _____</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Sell, buy or trade any assets, stocks, bonds, mutual funds, or other assets? (1099-B).</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Distributions from 401(k), IRA, Pension, Annuity, etc.? (1099-R)</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Spend, Receive, Sell, Exchange, Acquire, or Mine any Virtual Currency such as Bitcoin, Ethereum, etc?</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No Own any rental property including a vacation home?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Unemployment Income? (1099-G)</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Social Security Benefits? (1099-SSA)</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Gambling Income and Related Expenses? (W2G)</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Cancellation of Debt/Foreclosure? (1099-A or -C)</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Any small business income/loss from an S-Corp, Partnership, LLC, Sole Proprietor? (K-1, 1099-Misc, 1099-K)</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Did you sell anything online: Craigslist, eBay, FB Marketplace, etc. (1099K)?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Any other income, e.g. Uber/Lyft, Crowdfunding, other? Please explain:</p>
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<p>Other Special Situations: May require detailed documentation</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Pay any Estimated Tax Payments? Please list amounts, dates, and to whom paid (GA, IRS, etc.)</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Any births or deaths in your household? Did any children cease to be your dependents in 2022?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Did your marital status change during 2022?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Did you earn income in another state or country?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Did you buy, sell or refinance (including loan modification) property in 2022? If yes, attach closing statements.</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No During 2022, were there any changes to federal or state tax returns filed in prior years? Please attach notices.</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Did you suffer a casualty or loss in 2022 in a presidentially declared disaster area? www.fema.gov/disasters</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Receive any hobby income?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Moving Expenses? (Only for active military)</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No College expenses for self, spouse or dependent?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Have any Unreimbursed Partnership Expenses in 2022?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Have an IRS IP-PIN for self, spouse, or dependent?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Did you pay any foreign taxes in 2022?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Did you adopt a child in 2022?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Did your child (under age 24) have any investment income? Please attach 1099's and/or tax return.</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No An Armed Forces Reservist, Qualified Performing Artist, or Government Fee Basis Official?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Do you have a Health Savings Account? (1099-SA)</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Pay any Household Employees such as gardeners, housekeepers, nannies, etc.?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Do you expect a substantial change in your income or deductions next year (2023)? Please attach explanation:</p>

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- Yes No Are you part of a Healthcare Sharing Ministry?
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Taxes & Interest Expenses:

- Yes No Do you own your own home?
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- Yes No Mortgage Interest/Points Paid (Form 1098)?
- Yes No Did you purchase a boat, airplane, RV, etc.?
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- Yes No Receive an inheritance (Sch K-1)?
- Yes No Make gifts totaling \geq \$16,000 to one person?
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Rental Property:

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Personal Information ~ Provide SS Cards & Driver's Licenses:

Your Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Spouse's Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

1) _____

2) _____

3) _____

Yes No Could anyone else claim any of your dependents?

Yes No Any Child Care costs? If "Yes", provide amounts paid, care provider name(s), EIN's, and address(es) for EACH dependent.

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- Yes No Cash/Checks/Money etc.
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Other Miscellaneous Items:

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- Yes No Unreimbursed Educator Expenses (K-12 only)?

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- Yes No First Placed in Service in 2022? If "Yes", please provide appraisal and settlement statements.
- Yes No Disposed/Stopped Renting during 2022?

Type of Rental: _____

Address: _____

Days Rented: _____ Days Vacant/Empty: _____

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| <input type="checkbox"/> Out of Town Travel | <input type="checkbox"/> Meals & Entertainment |
| <input type="checkbox"/> Utilities (not home) | <input type="checkbox"/> Wages paid to Employees |
| <input type="checkbox"/> Telephone | <input type="checkbox"/> Commissions & Fees |
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Did your business:

- Yes No Use an Automobile? Type: _____
Business miles 1/1-6/30: _____ 7/1-12/31: _____;
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- Yes No Have a home office? Must be Regular & Exclusive.
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Occupation: _____ Blind? Disabled?

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Full Name – DOB – Relationship - College Student? - 2022 Income?

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Yes No Could anyone else claim any of your dependents?

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- Yes No Cash/Checks/Money etc.
- Yes No Non-Cash Gifts i.e. Household items to Goodwill?
- Yes No Miles driven for charity?
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- Yes No Qualified Charitable Distribution from IRA.

Other Miscellaneous Items:

- Yes No Install an electric vehicle charger in your home?
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- Yes No Unreimbursed Educator Expenses (K-12 only)?

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Type of Rental: _____

Address: _____

Days Rented: _____ Days Vacant/Empty: _____

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| <input type="checkbox"/> Supplies | <input type="checkbox"/> Taxes & Licenses |
| <input type="checkbox"/> Out of Town Travel | <input type="checkbox"/> Meals & Entertainment |
| <input type="checkbox"/> Utilities (not home) | <input type="checkbox"/> Wages paid to Employees |
| <input type="checkbox"/> Telephone | <input type="checkbox"/> Commissions & Fees |
| <input type="checkbox"/> Postage | <input type="checkbox"/> Employee Benefits |
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Did your business:

- Yes No Use an Automobile? Type: _____
Business miles 1/1-6/30: _____ 7/1-12/31: _____;
Personal miles: _____
- Yes No Have a home office? Must be Regular & Exclusive.
Sq Ft: _____ Sq Ft of entire home: _____
- Yes No Acquire or dispose of Tools/Equipment/Assets? *Please provide Invoice/Bill of Sale.*
- Yes No Pay any service providers, contractors, or casual labor?
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- Yes No Engage in Bartering?
- Yes No Have more than one owner?
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Separate Business Address: _____

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Personal Information ~ Provide SS Cards & Driver's Licenses:

Your Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Spouse's Full Name: _____

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Phone: _____

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Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

1) _____

2) _____

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Yes No Could anyone else claim any of your dependents?

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Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

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- Yes No After-tax Health Insurance, including Medicare?
- Yes No Did anyone in your family receive health insurance from HealthCare.gov or other state run Marketplace? (Form 1095)
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- Yes No Did you pay Long Term Care Insurance premiums?
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Taxes & Interest Expenses:

- Yes No Do you own your own home?
- Yes No Real Estate Taxes (Form 1098 or other)?
- Yes No Mortgage Interest/Points Paid (Form 1098)?
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Gifts to Charity *Documentation required for all donations:*

- Yes No Cash/Checks/Money etc.
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- Yes No Miles driven for charity?
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- Yes No Qualified Charitable Distribution from IRA.

Other Miscellaneous Items:

- Yes No Install an electric vehicle charger in your home?
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Type of Rental: _____

Address: _____

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| <input type="checkbox"/> Out of Town Travel | <input type="checkbox"/> Meals & Entertainment |
| <input type="checkbox"/> Utilities (not home) | <input type="checkbox"/> Wages paid to Employees |
| <input type="checkbox"/> Telephone | <input type="checkbox"/> Commissions & Fees |
| <input type="checkbox"/> Postage | <input type="checkbox"/> Employee Benefits |
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Did your business:

- Yes No Use an Automobile? Type: _____
Business miles 1/1-6/30: _____ 7/1-12/31: _____;
Personal miles: _____
- Yes No Have a home office? Must be Regular & Exclusive.
Sq Ft: _____ Sq Ft of entire home: _____
- Yes No Acquire or dispose of Tools/Equipment/Assets? *Please provide Invoice/Bill of Sale.*
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Separate Business Address: _____

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Personal Information ~ Provide SS Cards & Driver's Licenses:

Your Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Spouse's Full Name: _____

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Phone: _____

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Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

1) _____

2) _____

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Yes No Could anyone else claim any of your dependents?

Yes No Any Child Care costs? If "Yes", provide amounts paid, care provider name(s), EIN's, and address(es) for EACH dependent.

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Phone: _____

Email: _____

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- Yes No Cash/Checks/Money etc.
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- Yes No First Placed in Service in 2022? If "Yes", please provide appraisal and settlement statements.
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Type of Rental: _____

Address: _____

Days Rented: _____ Days Vacant/Empty: _____

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| <input type="checkbox"/> Supplies | <input type="checkbox"/> Taxes & Licenses |
| <input type="checkbox"/> Out of Town Travel | <input type="checkbox"/> Meals & Entertainment |
| <input type="checkbox"/> Utilities (not home) | <input type="checkbox"/> Wages paid to Employees |
| <input type="checkbox"/> Telephone | <input type="checkbox"/> Commissions & Fees |
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Did your business:

- Yes No Use an Automobile? Type: _____
Business miles 1/1-6/30: _____ 7/1-12/31: _____;
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- Yes No Have more than one owner?
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Separate Business Address: _____

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Personal Information ~ Provide SS Cards & Driver's Licenses:

Your Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Spouse's Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

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Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

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Full Name – DOB – Relationship - College Student? - 2022 Income?

1) _____

2) _____

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Yes No Could anyone else claim any of your dependents?

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Regular Income: Please attach Forms W-2, 1099-Misc, 1099R, 1099-SSA, K-1, 1099G, etc. Provide details/amounts if missing forms.

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Type of Rental: _____

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Personal use days (self, friends, family): _____

Average length of rental stay (in days): _____

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Small Business or Farming

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Which of the following expenses did your business have in 2022?

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Office Supplies Office/Building Rent

Equipment Rent Repairs/Maintenance/Cleaning

Supplies Taxes & Licenses

Out of Town Travel Meals & Entertainment

Utilities (not home) Wages paid to Employees

Telephone Commissions & Fees

Postage Employee Benefits

Auto/Truck Expenses Pension & Profit Sharing

Other Expenses (list) Inventory W/D for Personal Use

Did your business:

Yes No Use an Automobile? Type: _____
Business miles 1/1-6/30: _____ 7/1-12/31: _____;

Personal miles: _____

Yes No Have a home office? Must be Regular & Exclusive.

Sq Ft: _____ Sq Ft of entire home: _____

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Yes No Pay any service providers, contractors, or casual labor?

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Yes No Have Inventory on hand December 31, 2022?

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Yes No Have more than one owner?

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<p>Personal Information ~ Provide SS Cards & Driver's Licenses:</p> <p>Your Full Name: _____</p> <p>Occupation: _____ <input type="checkbox"/> Blind? <input type="checkbox"/> Disabled?</p> <p>Phone: _____</p> <p>Email: _____</p> <p>Spouse's Full Name: _____</p> <p>Occupation: _____ <input type="checkbox"/> Blind? <input type="checkbox"/> Disabled?</p> <p>Phone: _____</p> <p>Email: _____</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Sure: Do you want to file a joint return?</p>	<p>Dependent Information (Children, Parents, others):</p> <p style="text-align: center;">Provide SS Card & Proof of Residency for each dependent.</p> <p>Full Name – DOB – Relationship - College Student? - 2022 Income?</p> <p>1) _____</p> <p>2) _____</p> <p>3) _____</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Could anyone else claim any of your dependents?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Any Child Care costs? If "Yes", provide amounts paid, care provider name(s), EIN's, and address(es) for EACH dependent.</p>
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(Continued on reverse)

Expenses/Deductions:

- Yes No IRA Contribution: Traditional Roth SEP Other
Self \$ _____ Spouse \$ _____
- Yes No Penalty on early withdrawal from CD? \$ _____
- Yes No Student Loan interest paid? _____

Medical Expenses:

- Yes No After-tax Health Insurance, including Medicare?
- Yes No Did anyone in your family receive health insurance from HealthCare.gov or other state run Marketplace? (Form 1095)
- Yes No Are you part of a Healthcare Sharing Ministry?
- Yes No Did you pay Long Term Care Insurance premiums?
- Yes No Any out of pocket medical expenses: Doctors, Dentist, Rx, Nursing Homes, Medical Mileage, etc.? Please list.

Taxes & Interest Expenses:

- Yes No Do you own your own home?
- Yes No Real Estate Taxes (Form 1098 or other)?
- Yes No Mortgage Interest/Points Paid (Form 1098)?
- Yes No Did you purchase a boat, airplane, RV, etc.?
- Yes No Annual Ad Valorem Taxes on car, boat, etc.?
- Yes No Other State, County, City or Local Taxes?
- Yes No Investment Interest paid? Other Interest Paid?

Gifts to Charity *Documentation required for all donations:*

- Yes No Cash/Checks/Money etc.
- Yes No Non-Cash Gifts i.e. Household items to Goodwill?
- Yes No Miles driven for charity?
- Yes No Payroll Deductions of Charity, Union Dues, other?
- Yes No Qualified Charitable Distribution from IRA.

Other Miscellaneous Items:

- Yes No Install an electric vehicle charger in your home?
- Yes No Rollover \$\$\$ from an IRA, 401(k), Annuity, etc.?
- Yes No Receive an inheritance (Sch K-1)?
- Yes No Make gifts totaling \geq \$16,000 to one person?
- Yes No Did you contribute to a 529 College Savings Plan?
- Yes No Unreimbursed Educator Expenses (K-12 only)?

Rental Property:

- Yes No First Placed in Service in 2022? If "Yes", please provide appraisal and settlement statements.
- Yes No Disposed/Stopped Renting during 2022?

Type of Rental: _____

Address: _____

Days Rented: _____ Days Vacant/Empty: _____

Personal use days (self, friends, family): _____

Average length of rental stay (in days): _____

Hours you & your spouse worked on rental: _____

Small Business or Farming*Request our 2022 Business Tax Organizer for more in-depth checklist*

Nature of Business: _____

Date Business Started: _____

Which of the following expenses did your business have in 2022?

- | | |
|--|--|
| <input type="checkbox"/> Inventory Purchases | <input type="checkbox"/> Interest paid on business loans |
| <input type="checkbox"/> Contract Labor | <input type="checkbox"/> Insurance (Not Health) |
| <input type="checkbox"/> Advertising | <input type="checkbox"/> Legal & Professional Services |
| <input type="checkbox"/> Office Supplies | <input type="checkbox"/> Office/Building Rent |
| <input type="checkbox"/> Equipment Rent | <input type="checkbox"/> Repairs/Maintenance/Cleaning |
| <input type="checkbox"/> Supplies | <input type="checkbox"/> Taxes & Licenses |
| <input type="checkbox"/> Out of Town Travel | <input type="checkbox"/> Meals & Entertainment |
| <input type="checkbox"/> Utilities (not home) | <input type="checkbox"/> Wages paid to Employees |
| <input type="checkbox"/> Telephone | <input type="checkbox"/> Commissions & Fees |
| <input type="checkbox"/> Postage | <input type="checkbox"/> Employee Benefits |
| <input type="checkbox"/> Auto/Truck Expenses | <input type="checkbox"/> Pension & Profit Sharing |
| <input type="checkbox"/> Other Expenses (list) | <input type="checkbox"/> Inventory W/D for Personal Use |

Did your business:

- Yes No Use an Automobile? Type: _____
Business miles 1/1-6/30: _____ 7/1-12/31: _____;
Personal miles: _____
- Yes No Have a home office? Must be Regular & Exclusive.
Sq Ft: _____ Sq Ft of entire home: _____
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Separate Business Address: _____

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How many hours did you "participate" (work) in the business operations during 2022? 500+ annual hours may be needed: _____

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Personal Information ~ Provide SS Cards & Driver's Licenses:

Your Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Spouse's Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

1) _____

2) _____

3) _____

Yes No Could anyone else claim any of your dependents?

Yes No Any Child Care costs? If "Yes", provide amounts paid, care provider name(s), EIN's, and address(es) for EACH dependent.

Regular Income: Please attach Forms W-2, 1099-Misc, 1099R, 1099-SSA, K-1, 1099G, etc. Provide details/amounts if missing forms.

Yes No Wages, tips, etc. from job(s)? (W-2)

Yes No Interest from banks, bonds, other? (1099-INT)

Yes No Dividends? (1099-DIV)

Yes No Did you receive any tax refunds in 2022?

Yes No Alimony Paid/Received? \$ _____

Yes No Sell, buy or trade any assets, stocks, bonds, mutual funds, or other assets? (1099-B).

Yes No Distributions from 401(k), IRA, Pension, Annuity, etc.? (1099-R)

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Yes No Own any rental property including a vacation home?

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General Questions:

Yes No Direct Deposit your refund into your bank account? *Must attach a voided check.* Otherwise you will receive refund checks. Amounts due will NOT be drafted from your account.

Yes No Did you file 2021 tax return? **Provide Copy/PDF.**

Yes No Do you or your spouse owe any back taxes?

Please note, to avoid penalty, you must pay all taxes due by April 18th. An extension only grants more time to file, not to pay.

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Yes No Pay any Estimated Tax Payments? Please list amounts, dates, and to whom paid (GA, IRS, etc.)

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| <input type="checkbox"/> Out of Town Travel | <input type="checkbox"/> Meals & Entertainment |
| <input type="checkbox"/> Utilities (not home) | <input type="checkbox"/> Wages paid to Employees |
| <input type="checkbox"/> Telephone | <input type="checkbox"/> Commissions & Fees |
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Did your business:

- Yes No Use an Automobile? Type: _____
Business miles 1/1-6/30: _____ 7/1-12/31: _____;
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Separate Business Address: _____

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Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

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Phone: _____

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Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

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Full Name – DOB – Relationship - College Student? - 2022 Income?

1) _____

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Yes No Could anyone else claim any of your dependents?

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| <input type="checkbox"/> Advertising | <input type="checkbox"/> Legal & Professional Services |
| <input type="checkbox"/> Office Supplies | <input type="checkbox"/> Office/Building Rent |
| <input type="checkbox"/> Equipment Rent | <input type="checkbox"/> Repairs/Maintenance/Cleaning |
| <input type="checkbox"/> Supplies | <input type="checkbox"/> Taxes & Licenses |
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Did your business:

- Yes No Use an Automobile? Type: _____
Business miles 1/1-6/30: _____ 7/1-12/31: _____;
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- Yes No Have a home office? Must be Regular & Exclusive.
Sq Ft: _____ Sq Ft of entire home: _____
- Yes No Acquire or dispose of Tools/Equipment/Assets? *Please provide Invoice/Bill of Sale.*
- Yes No Pay any service providers, contractors, or casual labor?
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- Yes No Have more than one owner?
- Yes No Is this business an LLC? If "Yes" please provide LLC Articles of Organization and Operating Agreement.

Separate Business Address: _____

Method of Accounting: Cash Accrual Other/Not SureCould this be considered a Hobby? Yes No Not Sure

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Personal Information ~ Provide SS Cards & Driver's Licenses:

Your Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Spouse's Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

1) _____

2) _____

3) _____

Yes No Could anyone else claim any of your dependents?

Yes No Any Child Care costs? If "Yes", provide amounts paid, care provider name(s), EIN's, and address(es) for EACH dependent.

Regular Income: Please attach Forms W-2, 1099-Misc, 1099R, 1099-SSA, K-1, 1099G, etc. Provide details/amounts if missing forms.

Yes No Wages, tips, etc. from job(s)? (W-2)

Yes No Interest from banks, bonds, other? (1099-INT)

Yes No Dividends? (1099-DIV)

Yes No Did you receive any tax refunds in 2022?

Yes No Alimony Paid/Received? \$ _____

Yes No Sell, buy or trade any assets, stocks, bonds, mutual funds, or other assets? (1099-B).

Yes No Distributions from 401(k), IRA, Pension, Annuity, etc.? (1099-R)

Yes No Spend, Receive, Sell, Exchange, Acquire, or Mine any Virtual Currency such as Bitcoin, Ethereum, etc?

Yes No Own any rental property including a vacation home?

Yes No Unemployment Income? (1099-G)

Yes No Social Security Benefits? (1099-SSA)

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Yes No Any small business income/loss from an S-Corp, Partnership, LLC, Sole Proprietor? (K-1, 1099-Misc, 1099-K)

Yes No Did you sell anything online: Craigslist, eBay, FB Marketplace, etc. (1099K)?

Yes No Any other income, e.g. Uber/Lyft, Crowdfunding, other? Please explain:

General Questions:

Yes No Direct Deposit your refund into your bank account? *Must attach a voided check.* Otherwise you will receive refund checks. Amounts due will NOT be drafted from your account.

Yes No Did you file 2021 tax return? **Provide Copy/PDF.**

Yes No Do you or your spouse owe any back taxes?

Please note, to avoid penalty, you must pay all taxes due by April 18th. An extension only grants more time to file, not to pay.

Yes No Did your address change? Please attach.

Yes No At any time during 2022 did you have any financial interest or signature authority over a foreign financial account, including overseas gaming?

Yes No During 2022, did you receive a distribution from, were the grantor of, or transferor to a foreign trust?

How would you like to receive your copy of the completed tax return?

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Other Special Situations: May require detailed documentation

Yes No Pay any Estimated Tax Payments? Please list amounts, dates, and to whom paid (GA, IRS, etc.)

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Yes No Did your marital status change during 2022?

Yes No Did you earn income in another state or country?

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Yes No Do you have a Health Savings Account? (1099-SA)

Yes No Pay any Household Employees such as gardeners, housekeepers, nannies, etc.?

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Expenses/Deductions:

- Yes No IRA Contribution: Traditional Roth SEP Other
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- Yes No Unreimbursed Educator Expenses (K-12 only)?

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Address: _____

Days Rented: _____ Days Vacant/Empty: _____

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Phone: _____

Email: _____

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Did your business:

- Yes No Use an Automobile? Type: _____
Business miles 1/1-6/30: _____ 7/1-12/31: _____;
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- Yes No Have a home office? Must be Regular & Exclusive.
Sq Ft: _____ Sq Ft of entire home: _____
- Yes No Acquire or dispose of Tools/Equipment/Assets? *Please provide Invoice/Bill of Sale.*
- Yes No Pay any service providers, contractors, or casual labor?
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- Yes No Engage in Bartering?
- Yes No Have more than one owner?
- Yes No Is this business an LLC? If "Yes" please provide LLC Articles of Organization and Operating Agreement.

Separate Business Address: _____

Method of Accounting: Cash Accrual Other/Not SureCould this be considered a Hobby? Yes No Not Sure

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Phone: 770-704-7777 - Email: info@taxsmart1040.com

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Call (770)704-7777 to schedule an appointment. Please complete as much as possible prior to your appointment.

Personal Information ~ Provide SS Cards & Driver's Licenses:

Your Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Spouse's Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

1) _____

2) _____

3) _____

Yes No Could anyone else claim any of your dependents?

Yes No Any Child Care costs? If "Yes", provide amounts paid, care provider name(s), EIN's, and address(es) for EACH dependent.

Regular Income: Please attach Forms W-2, 1099-Misc, 1099R, 1099-SSA, K-1, 1099G, etc. Provide details/amounts if missing forms.

Yes No Wages, tips, etc. from job(s)? (W-2)

Yes No Interest from banks, bonds, other? (1099-INT)

Yes No Dividends? (1099-DIV)

Yes No Did you receive any tax refunds in 2022?

Yes No Alimony Paid/Received? \$ _____

Yes No Sell, buy or trade any assets, stocks, bonds, mutual funds, or other assets? (1099-B).

Yes No Distributions from 401(k), IRA, Pension, Annuity, etc.? (1099-R)

Yes No Spend, Receive, Sell, Exchange, Acquire, or Mine any Virtual Currency such as Bitcoin, Ethereum, etc?

Yes No Own any rental property including a vacation home?

Yes No Unemployment Income? (1099-G)

Yes No Social Security Benefits? (1099-SSA)

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Yes No Cancellation of Debt/Foreclosure? (1099-A or -C)

Yes No Any small business income/loss from an S-Corp, Partnership, LLC, Sole Proprietor? (K-1, 1099-Misc, 1099-K)

Yes No Did you sell anything online: Craigslist, eBay, FB Marketplace, etc. (1099K)?

Yes No Any other income, e.g. Uber/Lyft, Crowdfunding, other? Please explain:

General Questions:

Yes No Direct Deposit your refund into your bank account? *Must attach a voided check.* Otherwise you will receive refund checks. Amounts due will NOT be drafted from your account.

Yes No Did you file 2021 tax return? **Provide Copy/PDF.**

Yes No Do you or your spouse owe any back taxes?

Please note, to avoid penalty, you must pay all taxes due by April 18th. An extension only grants more time to file, not to pay.

Yes No Did your address change? Please attach.

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Yes No During 2022, did you receive a distribution from, were the grantor of, or transferor to a foreign trust?

How would you like to receive your copy of the completed tax return?

Paper Copy Digital/PDF Copy

Other Special Situations: May require detailed documentation

Yes No Pay any Estimated Tax Payments? Please list amounts, dates, and to whom paid (GA, IRS, etc.)

Yes No Any births or deaths in your household? Did any children cease to be your dependents in 2022?

Yes No Did your marital status change during 2022?

Yes No Did you earn income in another state or country?

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Yes No Pay any Household Employees such as gardeners, housekeepers, nannies, etc.?

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Expenses/Deductions:

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Address: _____

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Email: _____

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- Yes No Have more than one owner?
- Yes No Is this business an LLC? If "Yes" please provide LLC Articles of Organization and Operating Agreement.

Separate Business Address: _____

Method of Accounting: Cash Accrual Other/Not SureCould this be considered a Hobby? Yes No Not Sure

How many hours did you "participate" (work) in the business operations during 2022? 500+ annual hours may be needed: _____

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21 Years!
2002 - 2023*

Please attach additional sheets for any other information you need to provide.
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Phone: 770-704-7777 - Email: info@taxsmart1040.com

TaxSmart Business Services – 2022 Income Tax Organizer

Call (770)704-7777 to schedule an appointment. Please complete as much as possible prior to your appointment.

Personal Information ~ Provide SS Cards & Driver's Licenses:

Your Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Spouse's Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

1) _____

2) _____

3) _____

Yes No Could anyone else claim any of your dependents?

Yes No Any Child Care costs? If "Yes", provide amounts paid, care provider name(s), EIN's, and address(es) for EACH dependent.

Regular Income: Please attach Forms W-2, 1099-Misc, 1099R, 1099-SSA, K-1, 1099G, etc. Provide details/amounts if missing forms.

Yes No Wages, tips, etc. from job(s)? (W-2)

Yes No Interest from banks, bonds, other? (1099-INT)

Yes No Dividends? (1099-DIV)

Yes No Did you receive any tax refunds in 2022?

Yes No Alimony Paid/Received? \$ _____

Yes No Sell, buy or trade any assets, stocks, bonds, mutual funds, or other assets? (1099-B).

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Yes No Own any rental property including a vacation home?

Yes No Unemployment Income? (1099-G)

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General Questions:

Yes No Direct Deposit your refund into your bank account? *Must attach a voided check.* Otherwise you will receive refund checks. Amounts due will NOT be drafted from your account.

Yes No Did you file 2021 tax return? **Provide Copy/PDF.**

Yes No Do you or your spouse owe any back taxes?

Please note, to avoid penalty, you must pay all taxes due by April 18th. An extension only grants more time to file, not to pay.

Other Special Situations: May require detailed documentation

Yes No Pay any Estimated Tax Payments? Please list amounts, dates, and to whom paid (GA, IRS, etc.)

Yes No Any births or deaths in your household? Did any children cease to be your dependents in 2022?

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Yes No After-tax Health Insurance, including Medicare?

Yes No Did anyone in your family receive health insurance from HealthCare.gov or other state run Marketplace? (Form 1095)

Yes No Are you part of a Healthcare Sharing Ministry?

Yes No Did you pay Long Term Care Insurance premiums?

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Taxes & Interest Expenses:

Yes No Do you own your own home?

Yes No Real Estate Taxes (Form 1098 or other)?

Yes No Mortgage Interest/Points Paid (Form 1098)?

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Yes No Investment Interest paid? Other Interest Paid?

Gifts to Charity *Documentation required for all donations:*

Yes No Cash/Checks/Money etc.

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Type of Rental: _____

Address: _____

Days Rented: _____ Days Vacant/Empty: _____

Personal use days (self, friends, family): _____

Average length of rental stay (in days): _____

Hours you & your spouse worked on rental: _____

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Nature of Business: _____

Date Business Started: _____

Which of the following expenses did your business have in 2022?

Inventory Purchases Interest paid on business loans

Contract Labor Insurance (Not Health)

Advertising Legal & Professional Services

Office Supplies Office/Building Rent

Equipment Rent Repairs/Maintenance/Cleaning

Supplies Taxes & Licenses

Out of Town Travel Meals & Entertainment

Utilities (not home) Wages paid to Employees

Telephone Commissions & Fees

Postage Employee Benefits

Auto/Truck Expenses Pension & Profit Sharing

Other Expenses (list) Inventory W/D for Personal Use

Did your business:

Yes No Use an Automobile? Type: _____
Business miles 1/1-6/30: _____ 7/1-12/31: _____;

Personal miles: _____

Yes No Have a home office? Must be Regular & Exclusive.

Sq Ft: _____ Sq Ft of entire home: _____

Yes No Acquire or dispose of Tools/Equipment/Assets? *Please provide Invoice/Bill of Sale.*

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Yes No Have Inventory on hand December 31, 2022?

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Yes No Receive EIDL, PPP, SBA Loan, etc.?

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Phone: _____

Email: _____

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Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

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Yes No Did your child (under age 24) have any investment income? Please attach 1099's and/or tax return.

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Yes No Pay any Household Employees such as gardeners, housekeepers, nannies, etc.?

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Expenses/Deductions:

- Yes No IRA Contribution: Traditional Roth SEP Other
Self \$ _____ Spouse \$ _____
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- Yes No After-tax Health Insurance, including Medicare?
- Yes No Did anyone in your family receive health insurance from HealthCare.gov or other state run Marketplace? (Form 1095)
- Yes No Are you part of a Healthcare Sharing Ministry?
- Yes No Did you pay Long Term Care Insurance premiums?
- Yes No Any out of pocket medical expenses: Doctors, Dentist, Rx, Nursing Homes, Medical Mileage, etc.? Please list.

Taxes & Interest Expenses:

- Yes No Do you own your own home?
- Yes No Real Estate Taxes (Form 1098 or other)?
- Yes No Mortgage Interest/Points Paid (Form 1098)?
- Yes No Did you purchase a boat, airplane, RV, etc.?
- Yes No Annual Ad Valorem Taxes on car, boat, etc.?
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- Yes No Investment Interest paid? Other Interest Paid?

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- Yes No Cash/Checks/Money etc.
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- Yes No Miles driven for charity?
- Yes No Payroll Deductions of Charity, Union Dues, other?
- Yes No Qualified Charitable Distribution from IRA.

Other Miscellaneous Items:

- Yes No Install an electric vehicle charger in your home?
- Yes No Rollover \$\$\$ from an IRA, 401(k), Annuity, etc.?
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- Yes No First Placed in Service in 2022? If "Yes", please provide appraisal and settlement statements.
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Address: _____

Days Rented: _____ Days Vacant/Empty: _____

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Small Business or Farming*Request our 2022 Business Tax Organizer for more in-depth checklist*

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Which of the following expenses did your business have in 2022?

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|--|--|
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| <input type="checkbox"/> Supplies | <input type="checkbox"/> Taxes & Licenses |
| <input type="checkbox"/> Out of Town Travel | <input type="checkbox"/> Meals & Entertainment |
| <input type="checkbox"/> Utilities (not home) | <input type="checkbox"/> Wages paid to Employees |
| <input type="checkbox"/> Telephone | <input type="checkbox"/> Commissions & Fees |
| <input type="checkbox"/> Postage | <input type="checkbox"/> Employee Benefits |
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| <input type="checkbox"/> Other Expenses (list) | <input type="checkbox"/> Inventory W/D for Personal Use |

Did your business:

- Yes No Use an Automobile? Type: _____
Business miles 1/1-6/30: _____ 7/1-12/31: _____;
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- Yes No Have a home office? Must be Regular & Exclusive.
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Phone: _____

Email: _____

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Phone: _____

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<p>Personal Information ~ Provide SS Cards & Driver's Licenses:</p> <p>Your Full Name: _____</p> <p>Occupation: _____ <input type="checkbox"/> Blind? <input type="checkbox"/> Disabled?</p> <p>Phone: _____</p> <p>Email: _____</p> <p>Spouse's Full Name: _____</p> <p>Occupation: _____ <input type="checkbox"/> Blind? <input type="checkbox"/> Disabled?</p> <p>Phone: _____</p> <p>Email: _____</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Sure: Do you want to file a joint return?</p>	<p>Dependent Information (Children, Parents, others):</p> <p style="text-align: center;">Provide SS Card & Proof of Residency for each dependent.</p> <p>Full Name – DOB – Relationship - College Student? - 2022 Income?</p> <p>1) _____</p> <p>2) _____</p> <p>3) _____</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Could anyone else claim any of your dependents?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Any Child Care costs? If "Yes", provide amounts paid, care provider name(s), EIN's, and address(es) for EACH dependent.</p>
<p>Regular Income: Please attach Forms W-2, 1099-Misc, 1099R, 1099-SSA, K-1, 1099G, etc. Provide details/amounts if missing forms.</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Wages, tips, etc. from job(s)? (W-2)</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Interest from banks, bonds, other? (1099-INT)</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Dividends? (1099-DIV)</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Did you receive any tax refunds in 2022?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Alimony Paid/Received? \$ _____</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Sell, buy or trade any assets, stocks, bonds, mutual funds, or other assets? (1099-B).</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Distributions from 401(k), IRA, Pension, Annuity, etc.? (1099-R)</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Spend, Receive, Sell, Exchange, Acquire, or Mine any Virtual Currency such as Bitcoin, Ethereum, etc?</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No Own any rental property including a vacation home?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Unemployment Income? (1099-G)</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Social Security Benefits? (1099-SSA)</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Gambling Income and Related Expenses? (W2G)</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Cancellation of Debt/Foreclosure? (1099-A or -C)</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Any small business income/loss from an S-Corp, Partnership, LLC, Sole Proprietor? (K-1, 1099-Misc, 1099-K)</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Did you sell anything online: Craigslist, eBay, FB Marketplace, etc. (1099K)?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Any other income, e.g. Uber/Lyft, Crowdfunding, other? Please explain:</p>
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Expenses/Deductions:

- Yes No IRA Contribution: Traditional Roth SEP Other
Self \$ _____ Spouse \$ _____
- Yes No Penalty on early withdrawal from CD? \$ _____
- Yes No Student Loan interest paid? _____

Medical Expenses:

- Yes No After-tax Health Insurance, including Medicare?
- Yes No Did anyone in your family receive health insurance from HealthCare.gov or other state run Marketplace? (Form 1095)
- Yes No Are you part of a Healthcare Sharing Ministry?
- Yes No Did you pay Long Term Care Insurance premiums?
- Yes No Any out of pocket medical expenses: Doctors, Dentist, Rx, Nursing Homes, Medical Mileage, etc.? Please list.

Taxes & Interest Expenses:

- Yes No Do you own your own home?
- Yes No Real Estate Taxes (Form 1098 or other)?
- Yes No Mortgage Interest/Points Paid (Form 1098)?
- Yes No Did you purchase a boat, airplane, RV, etc.?
- Yes No Annual Ad Valorem Taxes on car, boat, etc.?
- Yes No Other State, County, City or Local Taxes?
- Yes No Investment Interest paid? Other Interest Paid?

Gifts to Charity *Documentation required for all donations:*

- Yes No Cash/Checks/Money etc.
- Yes No Non-Cash Gifts i.e. Household items to Goodwill?
- Yes No Miles driven for charity?
- Yes No Payroll Deductions of Charity, Union Dues, other?
- Yes No Qualified Charitable Distribution from IRA.

Other Miscellaneous Items:

- Yes No Install an electric vehicle charger in your home?
- Yes No Rollover \$\$\$ from an IRA, 401(k), Annuity, etc.?
- Yes No Receive an inheritance (Sch K-1)?
- Yes No Make gifts totaling \geq \$16,000 to one person?
- Yes No Did you contribute to a 529 College Savings Plan?
- Yes No Unreimbursed Educator Expenses (K-12 only)?

Rental Property:

- Yes No First Placed in Service in 2022? If "Yes", please provide appraisal and settlement statements.
- Yes No Disposed/Stopped Renting during 2022?

Type of Rental: _____

Address: _____

Days Rented: _____ Days Vacant/Empty: _____

Personal use days (self, friends, family): _____

Average length of rental stay (in days): _____

Hours you & your spouse worked on rental: _____

Small Business or Farming*Request our 2022 Business Tax Organizer for more in-depth checklist*

Nature of Business: _____

Date Business Started: _____

Which of the following expenses did your business have in 2022?

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| <input type="checkbox"/> Contract Labor | <input type="checkbox"/> Insurance (Not Health) |
| <input type="checkbox"/> Advertising | <input type="checkbox"/> Legal & Professional Services |
| <input type="checkbox"/> Office Supplies | <input type="checkbox"/> Office/Building Rent |
| <input type="checkbox"/> Equipment Rent | <input type="checkbox"/> Repairs/Maintenance/Cleaning |
| <input type="checkbox"/> Supplies | <input type="checkbox"/> Taxes & Licenses |
| <input type="checkbox"/> Out of Town Travel | <input type="checkbox"/> Meals & Entertainment |
| <input type="checkbox"/> Utilities (not home) | <input type="checkbox"/> Wages paid to Employees |
| <input type="checkbox"/> Telephone | <input type="checkbox"/> Commissions & Fees |
| <input type="checkbox"/> Postage | <input type="checkbox"/> Employee Benefits |
| <input type="checkbox"/> Auto/Truck Expenses | <input type="checkbox"/> Pension & Profit Sharing |
| <input type="checkbox"/> Other Expenses (list) | <input type="checkbox"/> Inventory W/D for Personal Use |

Did your business:

- Yes No Use an Automobile? Type: _____
Business miles 1/1-6/30: _____ 7/1-12/31: _____;
Personal miles: _____
- Yes No Have a home office? Must be Regular & Exclusive.
Sq Ft: _____ Sq Ft of entire home: _____
- Yes No Acquire or dispose of Tools/Equipment/Assets? *Please provide Invoice/Bill of Sale.*
- Yes No Pay any service providers, contractors, or casual labor?
 Yes No If "Yes", would you like us to issue 1099's?
- Yes No Have Inventory on hand December 31, 2022?
- Yes No Pay wages to W-2 type employees?
- Yes No Receive EIDL, PPP, SBA Loan, etc.?
- Yes No Make or receive any loans/leases/notes or payments?
- Yes No Engage in Bartering?
- Yes No Have more than one owner?
- Yes No Is this business an LLC? If "Yes" please provide LLC Articles of Organization and Operating Agreement.

Separate Business Address: _____

Method of Accounting: Cash Accrual Other/Not SureCould this be considered a Hobby? Yes No Not Sure

How many hours did you "participate" (work) in the business operations during 2022? 500+ annual hours may be needed: _____

*Celebrating
21 Years!
2002 - 2023*

Please attach additional sheets for any other information you need to provide.
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Personal Information ~ Provide SS Cards & Driver's Licenses:

Your Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Spouse's Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

1) _____

2) _____

3) _____

Yes No Could anyone else claim any of your dependents?

Yes No Any Child Care costs? If "Yes", provide amounts paid, care provider name(s), EIN's, and address(es) for EACH dependent.

Regular Income: Please attach Forms W-2, 1099-Misc, 1099R, 1099-SSA, K-1, 1099G, etc. Provide details/amounts if missing forms.

Yes No Wages, tips, etc. from job(s)? (W-2)

Yes No Interest from banks, bonds, other? (1099-INT)

Yes No Dividends? (1099-DIV)

Yes No Did you receive any tax refunds in 2022?

Yes No Alimony Paid/Received? \$ _____

Yes No Sell, buy or trade any assets, stocks, bonds, mutual funds, or other assets? (1099-B).

Yes No Distributions from 401(k), IRA, Pension, Annuity, etc.? (1099-R)

Yes No Spend, Receive, Sell, Exchange, Acquire, or Mine any Virtual Currency such as Bitcoin, Ethereum, etc?

Yes No Own any rental property including a vacation home?

Yes No Unemployment Income? (1099-G)

Yes No Social Security Benefits? (1099-SSA)

Yes No Gambling Income and Related Expenses? (W2G)

Yes No Cancellation of Debt/Foreclosure? (1099-A or -C)

Yes No Any small business income/loss from an S-Corp, Partnership, LLC, Sole Proprietor? (K-1, 1099-Misc, 1099-K)

Yes No Did you sell anything online: Craigslist, eBay, FB Marketplace, etc. (1099K)?

Yes No Any other income, e.g. Uber/Lyft, Crowdfunding, other? Please explain:

General Questions:

Yes No Direct Deposit your refund into your bank account? *Must attach a voided check.* Otherwise you will receive refund checks. Amounts due will NOT be drafted from your account.

Yes No Did you file 2021 tax return? **Provide Copy/PDF.**

Yes No Do you or your spouse owe any back taxes?

Please note, to avoid penalty, you must pay all taxes due by April 18th. An extension only grants more time to file, not to pay.

Other Special Situations: May require detailed documentation

Yes No Pay any Estimated Tax Payments? Please list amounts, dates, and to whom paid (GA, IRS, etc.)

Yes No Any births or deaths in your household? Did any children cease to be your dependents in 2022?

Yes No Did your marital status change during 2022?

Yes No Did you earn income in another state or country?

Yes No Did you buy, sell or refinance (including loan modification) property in 2022? If yes, attach closing statements.

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Yes No Receive any hobby income?

Yes No Moving Expenses? (Only for active military)

Yes No Did your address change? Please attach.

Yes No At any time during 2022 did you have any financial interest or signature authority over a foreign financial account, including overseas gaming?

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How would you like to receive your copy of the completed tax return?

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Did your business:

- Yes No Use an Automobile? Type: _____
Business miles 1/1-6/30: _____ 7/1-12/31: _____;
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Personal Information ~ Provide SS Cards & Driver's Licenses:

Your Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Spouse's Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

1) _____

2) _____

3) _____

Yes No Could anyone else claim any of your dependents?

Yes No Any Child Care costs? If "Yes", provide amounts paid, care provider name(s), EIN's, and address(es) for EACH dependent.

Regular Income: Please attach Forms W-2, 1099-Misc, 1099R, 1099-SSA, K-1, 1099G, etc. Provide details/amounts if missing forms.

Yes No Wages, tips, etc. from job(s)? (W-2)

Yes No Interest from banks, bonds, other? (1099-INT)

Yes No Dividends? (1099-DIV)

Yes No Did you receive any tax refunds in 2022?

Yes No Alimony Paid/Received? \$ _____

Yes No Sell, buy or trade any assets, stocks, bonds, mutual funds, or other assets? (1099-B).

Yes No Distributions from 401(k), IRA, Pension, Annuity, etc.? (1099-R)

Yes No Spend, Receive, Sell, Exchange, Acquire, or Mine any Virtual Currency such as Bitcoin, Ethereum, etc?

Yes No Own any rental property including a vacation home?

Yes No Unemployment Income? (1099-G)

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General Questions:

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Please note, to avoid penalty, you must pay all taxes due by April 18th. An extension only grants more time to file, not to pay.

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Yes No Pay any Household Employees such as gardeners, housekeepers, nannies, etc.?

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- Yes No IRA Contribution: Traditional Roth SEP Other
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Phone: _____
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- Yes No Have more than one owner?
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Separate Business Address: _____

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Phone: 770-704-7777 - Email: info@taxsmart1040.com

TaxSmart Business Services – 2022 Income Tax Organizer

Call (770)704-7777 to schedule an appointment. Please complete as much as possible prior to your appointment.

Personal Information ~ Provide SS Cards & Driver's Licenses:

Your Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Spouse's Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

1) _____

2) _____

3) _____

Yes No Could anyone else claim any of your dependents?

Yes No Any Child Care costs? If "Yes", provide amounts paid, care provider name(s), EIN's, and address(es) for EACH dependent.

Regular Income: Please attach Forms W-2, 1099-Misc, 1099R, 1099-SSA, K-1, 1099G, etc. Provide details/amounts if missing forms.

Yes No Wages, tips, etc. from job(s)? (W-2)

Yes No Interest from banks, bonds, other? (1099-INT)

Yes No Dividends? (1099-DIV)

Yes No Did you receive any tax refunds in 2022?

Yes No Alimony Paid/Received? \$ _____

Yes No Sell, buy or trade any assets, stocks, bonds, mutual funds, or other assets? (1099-B).

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Yes No Spend, Receive, Sell, Exchange, Acquire, or Mine any Virtual Currency such as Bitcoin, Ethereum, etc?

Yes No Own any rental property including a vacation home?

Yes No Unemployment Income? (1099-G)

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- Yes No IRA Contribution: Traditional Roth SEP Other
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- Yes No After-tax Health Insurance, including Medicare?
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- Yes No Cash/Checks/Money etc.
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- Yes No Use an Automobile? Type: _____
Business miles 1/1-6/30: _____ 7/1-12/31: _____;
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Call (770)704-7777 to schedule an appointment. Please complete as much as possible prior to your appointment.

Personal Information ~ Provide SS Cards & Driver's Licenses:

Your Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Spouse's Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

1) _____

2) _____

3) _____

Yes No Could anyone else claim any of your dependents?

Yes No Any Child Care costs? If "Yes", provide amounts paid, care provider name(s), EIN's, and address(es) for EACH dependent.

Regular Income: Please attach Forms W-2, 1099-Misc, 1099R, 1099-SSA, K-1, 1099G, etc. Provide details/amounts if missing forms.

Yes No Wages, tips, etc. from job(s)? (W-2)

Yes No Interest from banks, bonds, other? (1099-INT)

Yes No Dividends? (1099-DIV)

Yes No Did you receive any tax refunds in 2022?

Yes No Alimony Paid/Received? \$ _____

Yes No Sell, buy or trade any assets, stocks, bonds, mutual funds, or other assets? (1099-B).

Yes No Distributions from 401(k), IRA, Pension, Annuity, etc.? (1099-R)

Yes No Spend, Receive, Sell, Exchange, Acquire, or Mine any Virtual Currency such as Bitcoin, Ethereum, etc?

Yes No Own any rental property including a vacation home?

Yes No Unemployment Income? (1099-G)

Yes No Social Security Benefits? (1099-SSA)

Yes No Gambling Income and Related Expenses? (W2G)

Yes No Cancellation of Debt/Foreclosure? (1099-A or -C)

Yes No Any small business income/loss from an S-Corp, Partnership, LLC, Sole Proprietor? (K-1, 1099-Misc, 1099-K)

Yes No Did you sell anything online: Craigslist, eBay, FB Marketplace, etc. (1099K)?

Yes No Any other income, e.g. Uber/Lyft, Crowdfunding, other? Please explain:

General Questions:

Yes No Direct Deposit your refund into your bank account? *Must attach a voided check.* Otherwise you will receive refund checks. Amounts due will NOT be drafted from your account.

Yes No Did you file 2021 tax return? **Provide Copy/PDF.**

Yes No Do you or your spouse owe any back taxes?

Please note, to avoid penalty, you must pay all taxes due by April 18th. An extension only grants more time to file, not to pay.

Other Special Situations: May require detailed documentation

Yes No Pay any Estimated Tax Payments? Please list amounts, dates, and to whom paid (GA, IRS, etc.)

Yes No Any births or deaths in your household? Did any children cease to be your dependents in 2022?

Yes No Did your marital status change during 2022?

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Expenses/Deductions:

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Self \$ _____ Spouse \$ _____

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Yes No After-tax Health Insurance, including Medicare?

Yes No Did anyone in your family receive health insurance from HealthCare.gov or other state run Marketplace? (Form 1095)

Yes No Are you part of a Healthcare Sharing Ministry?

Yes No Did you pay Long Term Care Insurance premiums?

Yes No Any out of pocket medical expenses: Doctors, Dentist, Rx, Nursing Homes, Medical Mileage, etc.? Please list.

Taxes & Interest Expenses:

Yes No Do you own your own home?

Yes No Real Estate Taxes (Form 1098 or other)?

Yes No Mortgage Interest/Points Paid (Form 1098)?

Yes No Did you purchase a boat, airplane, RV, etc.?

Yes No Annual Ad Valorem Taxes on car, boat, etc.?

Yes No Other State, County, City or Local Taxes?

Yes No Investment Interest paid? Other Interest Paid?

Gifts to Charity *Documentation required for all donations:*

Yes No Cash/Checks/Money etc.

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Other Miscellaneous Items:

Yes No Install an electric vehicle charger in your home?

Yes No Rollover \$\$\$ from an IRA, 401(k), Annuity, etc.?

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Yes No Make gifts totaling \geq \$16,000 to one person?

Yes No Did you contribute to a 529 College Savings Plan?

Yes No Unreimbursed Educator Expenses (K-12 only)?

Rental Property:

Yes No First Placed in Service in 2022? If "Yes", please provide appraisal and settlement statements.

Yes No Disposed/Stopped Renting during 2022?

Type of Rental: _____

Address: _____

Days Rented: _____ Days Vacant/Empty: _____

Personal use days (self, friends, family): _____

Average length of rental stay (in days): _____

Hours you & your spouse worked on rental: _____

Small Business or Farming

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Nature of Business: _____

Date Business Started: _____

Which of the following expenses did your business have in 2022?

Inventory Purchases Interest paid on business loans

Contract Labor Insurance (Not Health)

Advertising Legal & Professional Services

Office Supplies Office/Building Rent

Equipment Rent Repairs/Maintenance/Cleaning

Supplies Taxes & Licenses

Out of Town Travel Meals & Entertainment

Utilities (not home) Wages paid to Employees

Telephone Commissions & Fees

Postage Employee Benefits

Auto/Truck Expenses Pension & Profit Sharing

Other Expenses (list) Inventory W/D for Personal Use

Did your business:

Yes No Use an Automobile? Type: _____
Business miles 1/1-6/30: _____ 7/1-12/31: _____;

Personal miles: _____

Yes No Have a home office? Must be Regular & Exclusive.

Sq Ft: _____ Sq Ft of entire home: _____

Yes No Acquire or dispose of Tools/Equipment/Assets? *Please provide Invoice/Bill of Sale.*

Yes No Pay any service providers, contractors, or casual labor?

Yes No If "Yes", would you like us to issue 1099's?

Yes No Have Inventory on hand December 31, 2022?

Yes No Pay wages to W-2 type employees?

Yes No Receive EIDL, PPP, SBA Loan, etc.?

Yes No Make or receive any loans/leases/notes or payments?

Yes No Engage in Bartering?

Yes No Have more than one owner?

Yes No Is this business an LLC? If "Yes" please provide LLC Articles of Organization and Operating Agreement.

Separate Business Address: _____

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Could this be considered a Hobby? Yes No Not Sure

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Self \$ _____ Spouse \$ _____
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- Yes No After-tax Health Insurance, including Medicare?
- Yes No Did anyone in your family receive health insurance from HealthCare.gov or other state run Marketplace? (Form 1095)
- Yes No Are you part of a Healthcare Sharing Ministry?
- Yes No Did you pay Long Term Care Insurance premiums?
- Yes No Any out of pocket medical expenses: Doctors, Dentist, Rx, Nursing Homes, Medical Mileage, etc.? Please list.

Taxes & Interest Expenses:

- Yes No Do you own your own home?
- Yes No Real Estate Taxes (Form 1098 or other)?
- Yes No Mortgage Interest/Points Paid (Form 1098)?
- Yes No Did you purchase a boat, airplane, RV, etc.?
- Yes No Annual Ad Valorem Taxes on car, boat, etc.?
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- Yes No Investment Interest paid? Other Interest Paid?

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- Yes No Cash/Checks/Money etc.
- Yes No Non-Cash Gifts i.e. Household items to Goodwill?
- Yes No Miles driven for charity?
- Yes No Payroll Deductions of Charity, Union Dues, other?
- Yes No Qualified Charitable Distribution from IRA.

Other Miscellaneous Items:

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- Yes No Disposed/Stopped Renting during 2022?

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Personal use days (self, friends, family): _____

Average length of rental stay (in days): _____

Hours you & your spouse worked on rental: _____

Small Business or Farming*Request our 2022 Business Tax Organizer for more in-depth checklist*

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Which of the following expenses did your business have in 2022?

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| <input type="checkbox"/> Inventory Purchases | <input type="checkbox"/> Interest paid on business loans |
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| <input type="checkbox"/> Supplies | <input type="checkbox"/> Taxes & Licenses |
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| <input type="checkbox"/> Utilities (not home) | <input type="checkbox"/> Wages paid to Employees |
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Expenses/Deductions:

- Yes No IRA Contribution: Traditional Roth SEP Other
Self \$ _____ Spouse \$ _____
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- Yes No After-tax Health Insurance, including Medicare?
- Yes No Did anyone in your family receive health insurance from HealthCare.gov or other state run Marketplace? (Form 1095)
- Yes No Are you part of a Healthcare Sharing Ministry?
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Taxes & Interest Expenses:

- Yes No Do you own your own home?
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- Yes No Mortgage Interest/Points Paid (Form 1098)?
- Yes No Did you purchase a boat, airplane, RV, etc.?
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- Yes No Investment Interest paid? Other Interest Paid?

Gifts to Charity *Documentation required for all donations:*

- Yes No Cash/Checks/Money etc.
- Yes No Non-Cash Gifts i.e. Household items to Goodwill?
- Yes No Miles driven for charity?
- Yes No Payroll Deductions of Charity, Union Dues, other?
- Yes No Qualified Charitable Distribution from IRA.

Other Miscellaneous Items:

- Yes No Install an electric vehicle charger in your home?
- Yes No Rollover \$\$\$ from an IRA, 401(k), Annuity, etc.?
- Yes No Receive an inheritance (Sch K-1)?
- Yes No Make gifts totaling \geq \$16,000 to one person?
- Yes No Did you contribute to a 529 College Savings Plan?
- Yes No Unreimbursed Educator Expenses (K-12 only)?

Rental Property:

- Yes No First Placed in Service in 2022? If "Yes", please provide appraisal and settlement statements.
- Yes No Disposed/Stopped Renting during 2022?

Type of Rental: _____

Address: _____

Days Rented: _____ Days Vacant/Empty: _____

Personal use days (self, friends, family): _____

Average length of rental stay (in days): _____

Hours you & your spouse worked on rental: _____

Small Business or Farming*Request our 2022 Business Tax Organizer for more in-depth checklist*

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Which of the following expenses did your business have in 2022?

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| <input type="checkbox"/> Advertising | <input type="checkbox"/> Legal & Professional Services |
| <input type="checkbox"/> Office Supplies | <input type="checkbox"/> Office/Building Rent |
| <input type="checkbox"/> Equipment Rent | <input type="checkbox"/> Repairs/Maintenance/Cleaning |
| <input type="checkbox"/> Supplies | <input type="checkbox"/> Taxes & Licenses |
| <input type="checkbox"/> Out of Town Travel | <input type="checkbox"/> Meals & Entertainment |
| <input type="checkbox"/> Utilities (not home) | <input type="checkbox"/> Wages paid to Employees |
| <input type="checkbox"/> Telephone | <input type="checkbox"/> Commissions & Fees |
| <input type="checkbox"/> Postage | <input type="checkbox"/> Employee Benefits |
| <input type="checkbox"/> Auto/Truck Expenses | <input type="checkbox"/> Pension & Profit Sharing |
| <input type="checkbox"/> Other Expenses (list) | <input type="checkbox"/> Inventory W/D for Personal Use |

Did your business:

- Yes No Use an Automobile? Type: _____
Business miles 1/1-6/30: _____ 7/1-12/31: _____;
Personal miles: _____
- Yes No Have a home office? Must be Regular & Exclusive.
Sq Ft: _____ Sq Ft of entire home: _____
- Yes No Acquire or dispose of Tools/Equipment/Assets? *Please provide Invoice/Bill of Sale.*
- Yes No Pay any service providers, contractors, or casual labor?
 Yes No If "Yes", would you like us to issue 1099's?
- Yes No Have Inventory on hand December 31, 2022?
- Yes No Pay wages to W-2 type employees?
- Yes No Receive EIDL, PPP, SBA Loan, etc.?
- Yes No Make or receive any loans/leases/notes or payments?
- Yes No Engage in Bartering?
- Yes No Have more than one owner?
- Yes No Is this business an LLC? If "Yes" please provide LLC Articles of Organization and Operating Agreement.

Separate Business Address: _____

Method of Accounting: Cash Accrual Other/Not SureCould this be considered a Hobby? Yes No Not Sure

How many hours did you "participate" (work) in the business operations during 2022? 500+ annual hours may be needed: _____

*Celebrating
21 Years!
2002 - 2023*

Please attach additional sheets for any other information you need to provide.
TaxSmart Business Services - (125 Barrett Road) PO Box 280, Holly Springs, GA, 30142

Phone: 770-704-7777 - Email: info@taxsmart1040.com

TaxSmart Business Services – 2022 Income Tax Organizer

Call (770)704-7777 to schedule an appointment. Please complete as much as possible prior to your appointment.

Personal Information ~ Provide SS Cards & Driver's Licenses:

Your Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Spouse's Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

1) _____

2) _____

3) _____

Yes No Could anyone else claim any of your dependents?

Yes No Any Child Care costs? If "Yes", provide amounts paid, care provider name(s), EIN's, and address(es) for EACH dependent.

Regular Income: Please attach Forms W-2, 1099-Misc, 1099R, 1099-SSA, K-1, 1099G, etc. Provide details/amounts if missing forms.

Yes No Wages, tips, etc. from job(s)? (W-2)

Yes No Interest from banks, bonds, other? (1099-INT)

Yes No Dividends? (1099-DIV)

Yes No Did you receive any tax refunds in 2022?

Yes No Alimony Paid/Received? \$ _____

Yes No Sell, buy or trade any assets, stocks, bonds, mutual funds, or other assets? (1099-B).

Yes No Distributions from 401(k), IRA, Pension, Annuity, etc.? (1099-R)

Yes No Spend, Receive, Sell, Exchange, Acquire, or Mine any Virtual Currency such as Bitcoin, Ethereum, etc?

Yes No Own any rental property including a vacation home?

Yes No Unemployment Income? (1099-G)

Yes No Social Security Benefits? (1099-SSA)

Yes No Gambling Income and Related Expenses? (W2G)

Yes No Cancellation of Debt/Foreclosure? (1099-A or -C)

Yes No Any small business income/loss from an S-Corp, Partnership, LLC, Sole Proprietor? (K-1, 1099-Misc, 1099-K)

Yes No Did you sell anything online: Craigslist, eBay, FB Marketplace, etc. (1099K)?

Yes No Any other income, e.g. Uber/Lyft, Crowdfunding, other? Please explain:

General Questions:

Yes No Direct Deposit your refund into your bank account? *Must attach a voided check.* Otherwise you will receive refund checks. Amounts due will NOT be drafted from your account.

Yes No Did you file 2021 tax return? **Provide Copy/PDF.**

Yes No Do you or your spouse owe any back taxes?

Please note, to avoid penalty, you must pay all taxes due by April 18th. An extension only grants more time to file, not to pay.

Other Special Situations: May require detailed documentation

Yes No Pay any Estimated Tax Payments? Please list amounts, dates, and to whom paid (GA, IRS, etc.)

Yes No Any births or deaths in your household? Did any children cease to be your dependents in 2022?

Yes No Did your marital status change during 2022?

Yes No Did you earn income in another state or country?

Yes No Did you buy, sell or refinance (including loan modification) property in 2022? If yes, attach closing statements.

Yes No During 2022, were there any changes to federal or state tax returns filed in prior years? Please attach notices.

Yes No Did you suffer a casualty or loss in 2022 in a presidentially declared disaster area? www.fema.gov/disasters

Yes No Receive any hobby income?

Yes No Moving Expenses? (Only for active military)

Yes No Did your address change? Please attach.

Yes No At any time during 2022 did you have any financial interest or signature authority over a foreign financial account, including overseas gaming?

Yes No During 2022, did you receive a distribution from, were the grantor of, or transferor to a foreign trust?

How would you like to receive your copy of the completed tax return?

Paper Copy Digital/PDF Copy

Yes No College expenses for self, spouse or dependent?

Yes No Have any Unreimbursed Partnership Expenses in 2022?

Yes No Have an IRS IP-PIN for self, spouse, or dependent?

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Yes No Did you adopt a child in 2022?

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Yes No Do you have a Health Savings Account? (1099-SA)

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- Yes No Do you own your own home?
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- Yes No Qualified Charitable Distribution from IRA.

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- Yes No Use an Automobile? Type: _____
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- Yes No Is this business an LLC? If "Yes" please provide LLC Articles of Organization and Operating Agreement.

Separate Business Address: _____

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Call (770)704-7777 to schedule an appointment. Please complete as much as possible prior to your appointment.

Personal Information ~ Provide SS Cards & Driver's Licenses:

Your Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Spouse's Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

1) _____

2) _____

3) _____

Yes No Could anyone else claim any of your dependents?

Yes No Any Child Care costs? If "Yes", provide amounts paid, care provider name(s), EIN's, and address(es) for EACH dependent.

Regular Income: Please attach Forms W-2, 1099-Misc, 1099R, 1099-SSA, K-1, 1099G, etc. Provide details/amounts if missing forms.

Yes No Wages, tips, etc. from job(s)? (W-2)

Yes No Interest from banks, bonds, other? (1099-INT)

Yes No Dividends? (1099-DIV)

Yes No Did you receive any tax refunds in 2022?

Yes No Alimony Paid/Received? \$ _____

Yes No Sell, buy or trade any assets, stocks, bonds, mutual funds, or other assets? (1099-B).

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Yes No Own any rental property including a vacation home?

Yes No Unemployment Income? (1099-G)

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General Questions:

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Please note, to avoid penalty, you must pay all taxes due by April 18th. An extension only grants more time to file, not to pay.

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TaxSmart Business Services – 2022 Income Tax Organizer

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<p>Personal Information ~ Provide SS Cards & Driver's Licenses:</p> <p>Your Full Name: _____</p> <p>Occupation: _____ <input type="checkbox"/> Blind? <input type="checkbox"/> Disabled?</p> <p>Phone: _____</p> <p>Email: _____</p> <p>Spouse's Full Name: _____</p> <p>Occupation: _____ <input type="checkbox"/> Blind? <input type="checkbox"/> Disabled?</p> <p>Phone: _____</p> <p>Email: _____</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Sure: Do you want to file a joint return?</p>	<p>Dependent Information (Children, Parents, others):</p> <p style="text-align: center;">Provide SS Card & Proof of Residency for each dependent.</p> <p>Full Name – DOB – Relationship - College Student? - 2022 Income?</p> <p>1) _____</p> <p>_____</p> <p>2) _____</p> <p>_____</p> <p>3) _____</p> <p>_____</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Could anyone else claim any of your dependents?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Any Child Care costs? If "Yes", provide amounts paid, care provider name(s), EIN's, and address(es) for EACH dependent.</p>
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Expenses/Deductions:

- Yes No IRA Contribution: Traditional Roth SEP Other
Self \$ _____ Spouse \$ _____
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- Yes No After-tax Health Insurance, including Medicare?
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- Yes No Do you own your own home?
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- Yes No Mortgage Interest/Points Paid (Form 1098)?
- Yes No Did you purchase a boat, airplane, RV, etc.?
- Yes No Annual Ad Valorem Taxes on car, boat, etc.?
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Gifts to Charity *Documentation required for all donations:*

- Yes No Cash/Checks/Money etc.
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- Yes No Qualified Charitable Distribution from IRA.

Other Miscellaneous Items:

- Yes No Install an electric vehicle charger in your home?
- Yes No Rollover \$\$\$ from an IRA, 401(k), Annuity, etc.?
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- Yes No First Placed in Service in 2022? If "Yes", please provide appraisal and settlement statements.
- Yes No Disposed/Stopped Renting during 2022?

Type of Rental: _____

Address: _____

Days Rented: _____ Days Vacant/Empty: _____

Personal use days (self, friends, family): _____

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| <input type="checkbox"/> Supplies | <input type="checkbox"/> Taxes & Licenses |
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| <input type="checkbox"/> Utilities (not home) | <input type="checkbox"/> Wages paid to Employees |
| <input type="checkbox"/> Telephone | <input type="checkbox"/> Commissions & Fees |
| <input type="checkbox"/> Postage | <input type="checkbox"/> Employee Benefits |
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| <input type="checkbox"/> Other Expenses (list) | <input type="checkbox"/> Inventory W/D for Personal Use |

Did your business:

- Yes No Use an Automobile? Type: _____
Business miles 1/1-6/30: _____ 7/1-12/31: _____;
Personal miles: _____
- Yes No Have a home office? Must be Regular & Exclusive.
Sq Ft: _____ Sq Ft of entire home: _____
- Yes No Acquire or dispose of Tools/Equipment/Assets? *Please provide Invoice/Bill of Sale.*
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Your Full Name: _____
Occupation: _____ Blind? Disabled?
Phone: _____
Email: _____
Spouse's Full Name: _____
Occupation: _____ Blind? Disabled?
Phone: _____
Email: _____
 Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

1) _____

2) _____

3) _____

Yes No Could anyone else claim any of your dependents?

Yes No Any Child Care costs? If "Yes", provide amounts paid, care provider name(s), EIN's, and address(es) for EACH dependent.

Regular Income: Please attach Forms W-2, 1099-Misc, 1099R, 1099-SSA, K-1, 1099G, etc. Provide details/amounts if missing forms.

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Request our 2022 Business Tax Organizer for more in-depth checklist

Nature of Business: _____

Date Business Started: _____

Which of the following expenses did your business have in 2022?

Inventory Purchases Interest paid on business loans

Contract Labor Insurance (Not Health)

Advertising Legal & Professional Services

Office Supplies Office/Building Rent

Equipment Rent Repairs/Maintenance/Cleaning

Supplies Taxes & Licenses

Out of Town Travel Meals & Entertainment

Utilities (not home) Wages paid to Employees

Telephone Commissions & Fees

Postage Employee Benefits

Auto/Truck Expenses Pension & Profit Sharing

Other Expenses (list) Inventory W/D for Personal Use

Did your business:

Yes No Use an Automobile? Type: _____
Business miles 1/1-6/30: _____ 7/1-12/31: _____ ;

Personal miles: _____

Yes No Have a home office? Must be Regular & Exclusive.

Sq Ft: _____ Sq Ft of entire home: _____

Yes No Acquire or dispose of Tools/Equipment/Assets? *Please provide Invoice/Bill of Sale.*

Yes No Pay any service providers, contractors, or casual labor?

Yes No If "Yes", would you like us to issue 1099's?

Yes No Have Inventory on hand December 31, 2022?

Yes No Pay wages to W-2 type employees?

Yes No Receive EIDL, PPP, SBA Loan, etc.?

Yes No Make or receive any loans/leases/notes or payments?

Yes No Engage in Bartering?

Yes No Have more than one owner?

Yes No Is this business an LLC? If "Yes" please provide LLC Articles of Organization and Operating Agreement.

Separate Business Address: _____

Method of Accounting: Cash Accrual Other/Not Sure

Could this be considered a Hobby? Yes No Not Sure

How many hours did you "participate" (work) in the business operations during 2022? 500+ annual hours may be needed: _____

*Celebrating
21 Years!
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Please attach additional sheets for any other information you need to provide.
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Phone: 770-704-7777 - Email: info@taxsmart1040.com



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Call (770)704-7777 to schedule an appointment. Please complete as much as possible prior to your appointment.

Personal Information ~ Provide SS Cards & Driver's Licenses:

Your Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Spouse's Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

1) _____

2) _____

3) _____

Yes No Could anyone else claim any of your dependents?

Yes No Any Child Care costs? If "Yes", provide amounts paid, care provider name(s), EIN's, and address(es) for EACH dependent.

Regular Income: Please attach Forms W-2, 1099-Misc, 1099R, 1099-SSA, K-1, 1099G, etc. Provide details/amounts if missing forms.

Yes No Wages, tips, etc. from job(s)? (W-2)

Yes No Interest from banks, bonds, other? (1099-INT)

Yes No Dividends? (1099-DIV)

Yes No Did you receive any tax refunds in 2022?

Yes No Alimony Paid/Received? \$ _____

Yes No Sell, buy or trade any assets, stocks, bonds, mutual funds, or other assets? (1099-B).

Yes No Distributions from 401(k), IRA, Pension, Annuity, etc.? (1099-R)

Yes No Spend, Receive, Sell, Exchange, Acquire, or Mine any Virtual Currency such as Bitcoin, Ethereum, etc?

Yes No Own any rental property including a vacation home?

Yes No Unemployment Income? (1099-G)

Yes No Social Security Benefits? (1099-SSA)

Yes No Gambling Income and Related Expenses? (W2G)

Yes No Cancellation of Debt/Foreclosure? (1099-A or -C)

Yes No Any small business income/loss from an S-Corp, Partnership, LLC, Sole Proprietor? (K-1, 1099-Misc, 1099-K)

Yes No Did you sell anything online: Craigslist, eBay, FB Marketplace, etc. (1099K)?

Yes No Any other income, e.g. Uber/Lyft, Crowdfunding, other? Please explain:

General Questions:

Yes No Direct Deposit your refund into your bank account? *Must attach a voided check.* Otherwise you will receive refund checks. Amounts due will NOT be drafted from your account.

Yes No Did you file 2021 tax return? **Provide Copy/PDF.**

Yes No Do you or your spouse owe any back taxes?

Please note, to avoid penalty, you must pay all taxes due by April 18th. An extension only grants more time to file, not to pay.

Other Special Situations: May require detailed documentation

Yes No Pay any Estimated Tax Payments? Please list amounts, dates, and to whom paid (GA, IRS, etc.)

Yes No Any births or deaths in your household? Did any children cease to be your dependents in 2022?

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Yes No Did your child (under age 24) have any investment income? Please attach 1099's and/or tax return.

Yes No An Armed Forces Reservist, Qualified Performing Artist, or Government Fee Basis Official?

Yes No Do you have a Health Savings Account? (1099-SA)

Yes No Pay any Household Employees such as gardeners, housekeepers, nannies, etc.?

Yes No Do you expect a substantial change in your income or deductions next year (2023)? Please attach explanation:

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Expenses/Deductions:

- Yes No IRA Contribution: Traditional Roth SEP Other
Self \$ _____ Spouse \$ _____
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- Yes No After-tax Health Insurance, including Medicare?
- Yes No Did anyone in your family receive health insurance from HealthCare.gov or other state run Marketplace? (Form 1095)
- Yes No Are you part of a Healthcare Sharing Ministry?
- Yes No Did you pay Long Term Care Insurance premiums?
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Taxes & Interest Expenses:

- Yes No Do you own your own home?
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- Yes No Mortgage Interest/Points Paid (Form 1098)?
- Yes No Did you purchase a boat, airplane, RV, etc.?
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- Yes No Cash/Checks/Money etc.
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- Yes No First Placed in Service in 2022? If "Yes", please provide appraisal and settlement statements.
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Type of Rental: _____

Address: _____

Days Rented: _____ Days Vacant/Empty: _____

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| <input type="checkbox"/> Supplies | <input type="checkbox"/> Taxes & Licenses |
| <input type="checkbox"/> Out of Town Travel | <input type="checkbox"/> Meals & Entertainment |
| <input type="checkbox"/> Utilities (not home) | <input type="checkbox"/> Wages paid to Employees |
| <input type="checkbox"/> Telephone | <input type="checkbox"/> Commissions & Fees |
| <input type="checkbox"/> Postage | <input type="checkbox"/> Employee Benefits |
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| <input type="checkbox"/> Other Expenses (list) | <input type="checkbox"/> Inventory W/D for Personal Use |

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Your Full Name: _____
Occupation: _____ Blind? Disabled?
Phone: _____
Email: _____
Spouse's Full Name: _____
Occupation: _____ Blind? Disabled?
Phone: _____
Email: _____
 Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

1) _____

2) _____

3) _____

Yes No Could anyone else claim any of your dependents?

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Regular Income: Please attach Forms W-2, 1099-Misc, 1099R, 1099-SSA, K-1, 1099G, etc. Provide details/amounts if missing forms.

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Small Business or Farming*Request our 2022 Business Tax Organizer for more in-depth checklist*

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- Yes No Pay any service providers, contractors, or casual labor?
 Yes No If "Yes", would you like us to issue 1099's?
- Yes No Have Inventory on hand December 31, 2022?
- Yes No Pay wages to W-2 type employees?
- Yes No Receive EIDL, PPP, SBA Loan, etc.?
- Yes No Make or receive any loans/leases/notes or payments?
- Yes No Engage in Bartering?
- Yes No Have more than one owner?
- Yes No Is this business an LLC? If "Yes" please provide LLC Articles of Organization and Operating Agreement.

Separate Business Address: _____

Method of Accounting: Cash Accrual Other/Not SureCould this be considered a Hobby? Yes No Not Sure

How many hours did you "participate" (work) in the business operations during 2022? 500+ annual hours may be needed: _____

*Celebrating
21 Years!
2002 - 2023*

Please attach additional sheets for any other information you need to provide.
TaxSmart Business Services - (125 Barrett Road) PO Box 280, Holly Springs, GA, 30142

Phone: 770-704-7777 - Email: info@taxsmart1040.com

TaxSmart Business Services – 2022 Income Tax Organizer

Call (770)704-7777 to schedule an appointment. Please complete as much as possible prior to your appointment.

Personal Information ~ Provide SS Cards & Driver's Licenses:

Your Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Spouse's Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

1) _____

2) _____

3) _____

Yes No Could anyone else claim any of your dependents?

Yes No Any Child Care costs? If "Yes", provide amounts paid, care provider name(s), EIN's, and address(es) for EACH dependent.

Regular Income: Please attach Forms W-2, 1099-Misc, 1099R, 1099-SSA, K-1, 1099G, etc. Provide details/amounts if missing forms.

Yes No Wages, tips, etc. from job(s)? (W-2)

Yes No Interest from banks, bonds, other? (1099-INT)

Yes No Dividends? (1099-DIV)

Yes No Did you receive any tax refunds in 2022?

Yes No Alimony Paid/Received? \$ _____

Yes No Sell, buy or trade any assets, stocks, bonds, mutual funds, or other assets? (1099-B).

Yes No Distributions from 401(k), IRA, Pension, Annuity, etc.? (1099-R)

Yes No Spend, Receive, Sell, Exchange, Acquire, or Mine any Virtual Currency such as Bitcoin, Ethereum, etc?

Yes No Own any rental property including a vacation home?

Yes No Unemployment Income? (1099-G)

Yes No Social Security Benefits? (1099-SSA)

Yes No Gambling Income and Related Expenses? (W2G)

Yes No Cancellation of Debt/Foreclosure? (1099-A or -C)

Yes No Any small business income/loss from an S-Corp, Partnership, LLC, Sole Proprietor? (K-1, 1099-Misc, 1099-K)

Yes No Did you sell anything online: Craigslist, eBay, FB Marketplace, etc. (1099K)?

Yes No Any other income, e.g. Uber/Lyft, Crowdfunding, other? Please explain:

General Questions:

Yes No Direct Deposit your refund into your bank account? *Must attach a voided check.* Otherwise you will receive refund checks. Amounts due will NOT be drafted from your account.

Yes No Did you file 2021 tax return? **Provide Copy/PDF.**

Yes No Do you or your spouse owe any back taxes?

Please note, to avoid penalty, you must pay all taxes due by April 18th. An extension only grants more time to file, not to pay.

Other Special Situations: May require detailed documentation

Yes No Pay any Estimated Tax Payments? Please list amounts, dates, and to whom paid (GA, IRS, etc.)

Yes No Any births or deaths in your household? Did any children cease to be your dependents in 2022?

Yes No Did your marital status change during 2022?

Yes No Did you earn income in another state or country?

Yes No Did you buy, sell or refinance (including loan modification) property in 2022? If yes, attach closing statements.

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Yes No Moving Expenses? (Only for active military)

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Yes No Did you adopt a child in 2022?

Yes No Did your child (under age 24) have any investment income? Please attach 1099's and/or tax return.

Yes No An Armed Forces Reservist, Qualified Performing Artist, or Government Fee Basis Official?

Yes No Do you have a Health Savings Account? (1099-SA)

Yes No Pay any Household Employees such as gardeners, housekeepers, nannies, etc.?

Yes No Do you expect a substantial change in your income or deductions next year (2023)? Please attach explanation:

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Expenses/Deductions:

- Yes No IRA Contribution: Traditional Roth SEP Other
Self \$ _____ Spouse \$ _____
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Medical Expenses:

- Yes No After-tax Health Insurance, including Medicare?
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- Yes No Do you own your own home?
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- Yes No Mortgage Interest/Points Paid (Form 1098)?
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Gifts to Charity *Documentation required for all donations:*

- Yes No Cash/Checks/Money etc.
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Other Miscellaneous Items:

- Yes No Install an electric vehicle charger in your home?
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- Yes No Unreimbursed Educator Expenses (K-12 only)?

Rental Property:

- Yes No First Placed in Service in 2022? If "Yes", please provide appraisal and settlement statements.
- Yes No Disposed/Stopped Renting during 2022?

Type of Rental: _____

Address: _____

Days Rented: _____ Days Vacant/Empty: _____

Personal use days (self, friends, family): _____

Average length of rental stay (in days): _____

Hours you & your spouse worked on rental: _____

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| <input type="checkbox"/> Contract Labor | <input type="checkbox"/> Insurance (Not Health) |
| <input type="checkbox"/> Advertising | <input type="checkbox"/> Legal & Professional Services |
| <input type="checkbox"/> Office Supplies | <input type="checkbox"/> Office/Building Rent |
| <input type="checkbox"/> Equipment Rent | <input type="checkbox"/> Repairs/Maintenance/Cleaning |
| <input type="checkbox"/> Supplies | <input type="checkbox"/> Taxes & Licenses |
| <input type="checkbox"/> Out of Town Travel | <input type="checkbox"/> Meals & Entertainment |
| <input type="checkbox"/> Utilities (not home) | <input type="checkbox"/> Wages paid to Employees |
| <input type="checkbox"/> Telephone | <input type="checkbox"/> Commissions & Fees |
| <input type="checkbox"/> Postage | <input type="checkbox"/> Employee Benefits |
| <input type="checkbox"/> Auto/Truck Expenses | <input type="checkbox"/> Pension & Profit Sharing |
| <input type="checkbox"/> Other Expenses (list) | <input type="checkbox"/> Inventory W/D for Personal Use |

Did your business:

- Yes No Use an Automobile? Type: _____
Business miles 1/1-6/30: _____ 7/1-12/31: _____;
Personal miles: _____
- Yes No Have a home office? Must be Regular & Exclusive.
Sq Ft: _____ Sq Ft of entire home: _____
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Your Full Name: _____
 Occupation: _____ Blind? Disabled?
 Phone: _____
 Email: _____
 Spouse's Full Name: _____
 Occupation: _____ Blind? Disabled?
 Phone: _____
 Email: _____
 Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?
 1) _____

 2) _____

 3) _____

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 Yes No Any Child Care costs? If "Yes", provide amounts paid, care provider name(s), EIN's, and address(es) for EACH dependent.

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<input type="checkbox"/> Yes <input type="checkbox"/> No Wages, tips, etc. from job(s)? (W-2)	<input type="checkbox"/> Yes <input type="checkbox"/> No Own any rental property including a vacation home?
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<input type="checkbox"/> Yes <input type="checkbox"/> No Dividends? (1099-DIV)	<input type="checkbox"/> Yes <input type="checkbox"/> No Social Security Benefits? (1099-SSA)
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<input type="checkbox"/> Yes <input type="checkbox"/> No Spend, Receive, Sell, Exchange, Acquire, or Mine any Virtual Currency such as Bitcoin, Ethereum, etc?	<input type="checkbox"/> Yes <input type="checkbox"/> No Any other income, e.g. Uber/Lyft, Crowdfunding, other? Please explain:

General Questions:

<input type="checkbox"/> Yes <input type="checkbox"/> No Direct Deposit your refund into your bank account? <i>Must attach a voided check.</i> Otherwise you will receive refund checks. Amounts due will NOT be drafted from your account.	<input type="checkbox"/> Yes <input type="checkbox"/> No Did your address change? Please attach.
<input type="checkbox"/> Yes <input type="checkbox"/> No Did you file 2021 tax return? Provide Copy/PDF.	<input type="checkbox"/> Yes <input type="checkbox"/> No At any time during 2022 did you have any financial interest or signature authority over a foreign financial account, including overseas gaming?
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Please note, to avoid penalty, you must pay all taxes due by April 18th. An extension only grants more time to file, not to pay.	How would you like to receive your copy of the completed tax return? <input type="checkbox"/> Paper Copy <input type="checkbox"/> Digital/PDF Copy

Other Special Situations: May require detailed documentation

<input type="checkbox"/> Yes <input type="checkbox"/> No Pay any Estimated Tax Payments? Please list amounts, dates, and to whom paid (GA, IRS, etc.)	<input type="checkbox"/> Yes <input type="checkbox"/> No College expenses for self, spouse or dependent?
<input type="checkbox"/> Yes <input type="checkbox"/> No Any births or deaths in your household? Did any children cease to be your dependents in 2022?	<input type="checkbox"/> Yes <input type="checkbox"/> No Have any Unreimbursed Partnership Expenses in 2022?
<input type="checkbox"/> Yes <input type="checkbox"/> No Did your marital status change during 2022?	<input type="checkbox"/> Yes <input type="checkbox"/> No Have an IRS IP-PIN for self, spouse, or dependent?
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(Continued on reverse)

Expenses/Deductions:

- Yes No IRA Contribution: Traditional Roth SEP Other
Self \$ _____ Spouse \$ _____
- Yes No Penalty on early withdrawal from CD? \$ _____
- Yes No Student Loan interest paid? _____

Medical Expenses:

- Yes No After-tax Health Insurance, including Medicare?
- Yes No Did anyone in your family receive health insurance from HealthCare.gov or other state run Marketplace? (Form 1095)
- Yes No Are you part of a Healthcare Sharing Ministry?
- Yes No Did you pay Long Term Care Insurance premiums?
- Yes No Any out of pocket medical expenses: Doctors, Dentist, Rx, Nursing Homes, Medical Mileage, etc.? Please list.

Taxes & Interest Expenses:

- Yes No Do you own your own home?
- Yes No Real Estate Taxes (Form 1098 or other)?
- Yes No Mortgage Interest/Points Paid (Form 1098)?
- Yes No Did you purchase a boat, airplane, RV, etc.?
- Yes No Annual Ad Valorem Taxes on car, boat, etc.?
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Gifts to Charity *Documentation required for all donations:*

- Yes No Cash/Checks/Money etc.
- Yes No Non-Cash Gifts i.e. Household items to Goodwill?
- Yes No Miles driven for charity?
- Yes No Payroll Deductions of Charity, Union Dues, other?
- Yes No Qualified Charitable Distribution from IRA.

Other Miscellaneous Items:

- Yes No Install an electric vehicle charger in your home?
- Yes No Rollover \$\$\$ from an IRA, 401(k), Annuity, etc.?
- Yes No Receive an inheritance (Sch K-1)?
- Yes No Make gifts totaling \geq \$16,000 to one person?
- Yes No Did you contribute to a 529 College Savings Plan?
- Yes No Unreimbursed Educator Expenses (K-12 only)?

Rental Property:

- Yes No First Placed in Service in 2022? If "Yes", please provide appraisal and settlement statements.
- Yes No Disposed/Stopped Renting during 2022?

Type of Rental: _____

Address: _____

Days Rented: _____ Days Vacant/Empty: _____

Personal use days (self, friends, family): _____

Average length of rental stay (in days): _____

Hours you & your spouse worked on rental: _____

Small Business or Farming*Request our 2022 Business Tax Organizer for more in-depth checklist*

Nature of Business: _____

Date Business Started: _____

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| <input type="checkbox"/> Supplies | <input type="checkbox"/> Taxes & Licenses |
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- Yes No Use an Automobile? Type: _____
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Personal miles: _____
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Phone: _____

Email: _____

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Phone: _____

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Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

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- Yes No Use an Automobile? Type: _____
Business miles 1/1-6/30: _____ 7/1-12/31: _____;
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- Yes No Acquire or dispose of Tools/Equipment/Assets? *Please provide Invoice/Bill of Sale.*
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- Yes No Is this business an LLC? If "Yes" please provide LLC Articles of Organization and Operating Agreement.

Separate Business Address: _____

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Call (770)704-7777 to schedule an appointment. Please complete as much as possible prior to your appointment.

Personal Information ~ Provide SS Cards & Driver's Licenses:

Your Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Spouse's Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

1) _____

2) _____

3) _____

Yes No Could anyone else claim any of your dependents?

Yes No Any Child Care costs? If "Yes", provide amounts paid, care provider name(s), EIN's, and address(es) for EACH dependent.

Regular Income: Please attach Forms W-2, 1099-Misc, 1099R, 1099-SSA, K-1, 1099G, etc. Provide details/amounts if missing forms.

Yes No Wages, tips, etc. from job(s)? (W-2)

Yes No Interest from banks, bonds, other? (1099-INT)

Yes No Dividends? (1099-DIV)

Yes No Did you receive any tax refunds in 2022?

Yes No Alimony Paid/Received? \$ _____

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Yes No Own any rental property including a vacation home?

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Yes No Pay any Household Employees such as gardeners, housekeepers, nannies, etc.?

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- Yes No IRA Contribution: Traditional Roth SEP Other
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- Yes No Pay any service providers, contractors, or casual labor?
 Yes No If "Yes", would you like us to issue 1099's?
- Yes No Have Inventory on hand December 31, 2022?
- Yes No Pay wages to W-2 type employees?
- Yes No Receive EIDL, PPP, SBA Loan, etc.?
- Yes No Make or receive any loans/leases/notes or payments?
- Yes No Engage in Bartering?
- Yes No Have more than one owner?
- Yes No Is this business an LLC? If "Yes" please provide LLC Articles of Organization and Operating Agreement.

Separate Business Address: _____

Method of Accounting: Cash Accrual Other/Not SureCould this be considered a Hobby? Yes No Not Sure

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Phone: 770-704-7777 - Email: info@taxsmart1040.com

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Call (770)704-7777 to schedule an appointment. Please complete as much as possible prior to your appointment.

Personal Information ~ Provide SS Cards & Driver's Licenses:

Your Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Spouse's Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

1) _____

2) _____

3) _____

Yes No Could anyone else claim any of your dependents?

Yes No Any Child Care costs? If "Yes", provide amounts paid, care provider name(s), EIN's, and address(es) for EACH dependent.

Regular Income: Please attach Forms W-2, 1099-Misc, 1099R, 1099-SSA, K-1, 1099G, etc. Provide details/amounts if missing forms.

Yes No Wages, tips, etc. from job(s)? (W-2)

Yes No Interest from banks, bonds, other? (1099-INT)

Yes No Dividends? (1099-DIV)

Yes No Did you receive any tax refunds in 2022?

Yes No Alimony Paid/Received? \$ _____

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Yes No Spend, Receive, Sell, Exchange, Acquire, or Mine any Virtual Currency such as Bitcoin, Ethereum, etc?

Yes No Own any rental property including a vacation home?

Yes No Unemployment Income? (1099-G)

Yes No Social Security Benefits? (1099-SSA)

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Yes No Pay any Household Employees such as gardeners, housekeepers, nannies, etc.?

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Expenses/Deductions:

- Yes No IRA Contribution: Traditional Roth SEP Other
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TaxSmart Business Services - (125 Barrett Road) PO Box 280, Holly Springs, GA, 30142

Phone: 770-704-7777 - Email: info@taxsmart1040.com

TaxSmart Business Services – 2022 Income Tax Organizer

Call (770)704-7777 to schedule an appointment. Please complete as much as possible prior to your appointment.

Personal Information ~ Provide SS Cards & Driver's Licenses:

Your Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Spouse's Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

1) _____

2) _____

3) _____

Yes No Could anyone else claim any of your dependents?

Yes No Any Child Care costs? If "Yes", provide amounts paid, care provider name(s), EIN's, and address(es) for EACH dependent.

Regular Income: Please attach Forms W-2, 1099-Misc, 1099R, 1099-SSA, K-1, 1099G, etc. Provide details/amounts if missing forms.

Yes No Wages, tips, etc. from job(s)? (W-2)

Yes No Interest from banks, bonds, other? (1099-INT)

Yes No Dividends? (1099-DIV)

Yes No Did you receive any tax refunds in 2022?

Yes No Alimony Paid/Received? \$ _____

Yes No Sell, buy or trade any assets, stocks, bonds, mutual funds, or other assets? (1099-B).

Yes No Distributions from 401(k), IRA, Pension, Annuity, etc.? (1099-R)

Yes No Spend, Receive, Sell, Exchange, Acquire, or Mine any Virtual Currency such as Bitcoin, Ethereum, etc?

Yes No Own any rental property including a vacation home?

Yes No Unemployment Income? (1099-G)

Yes No Social Security Benefits? (1099-SSA)

Yes No Gambling Income and Related Expenses? (W2G)

Yes No Cancellation of Debt/Foreclosure? (1099-A or -C)

Yes No Any small business income/loss from an S-Corp, Partnership, LLC, Sole Proprietor? (K-1, 1099-Misc, 1099-K)

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Yes No Any other income, e.g. Uber/Lyft, Crowdfunding, other? Please explain:

General Questions:

Yes No Direct Deposit your refund into your bank account? *Must attach a voided check.* Otherwise you will receive refund checks. Amounts due will NOT be drafted from your account.

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Yes No Do you or your spouse owe any back taxes?

Please note, to avoid penalty, you must pay all taxes due by April 18th. An extension only grants more time to file, not to pay.

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Yes No Pay any Estimated Tax Payments? Please list amounts, dates, and to whom paid (GA, IRS, etc.)

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Yes No Did your marital status change during 2022?

Yes No Did you earn income in another state or country?

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Yes No Pay any Household Employees such as gardeners, housekeepers, nannies, etc.?

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- Yes No IRA Contribution: Traditional Roth SEP Other
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- Yes No Cash/Checks/Money etc.
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- Yes No Unreimbursed Educator Expenses (K-12 only)?

Rental Property:

- Yes No First Placed in Service in 2022? If "Yes", please provide appraisal and settlement statements.
- Yes No Disposed/Stopped Renting during 2022?

Type of Rental: _____

Address: _____

Days Rented: _____ Days Vacant/Empty: _____

Personal use days (self, friends, family): _____

Average length of rental stay (in days): _____

Hours you & your spouse worked on rental: _____

Small Business or Farming*Request our 2022 Business Tax Organizer for more in-depth checklist*

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Business miles 1/1-6/30: _____ 7/1-12/31: _____;
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Yes No Any Child Care costs? If "Yes", provide amounts paid, care provider name(s), EIN's, and address(es) for EACH dependent.

Regular Income: Please attach Forms W-2, 1099-Misc, 1099R, 1099-SSA, K-1, 1099G, etc. Provide details/amounts if missing forms.

Yes No Wages, tips, etc. from job(s)? (W-2)

Yes No Interest from banks, bonds, other? (1099-INT)

Yes No Dividends? (1099-DIV)

Yes No Did you receive any tax refunds in 2022?

Yes No Alimony Paid/Received? \$ _____

Yes No Sell, buy or trade any assets, stocks, bonds, mutual funds, or other assets? (1099-B).

Yes No Distributions from 401(k), IRA, Pension, Annuity, etc.? (1099-R)

Yes No Spend, Receive, Sell, Exchange, Acquire, or Mine any Virtual Currency such as Bitcoin, Ethereum, etc?

Yes No Own any rental property including a vacation home?

Yes No Unemployment Income? (1099-G)

Yes No Social Security Benefits? (1099-SSA)

Yes No Gambling Income and Related Expenses? (W2G)

Yes No Cancellation of Debt/Foreclosure? (1099-A or -C)

Yes No Any small business income/loss from an S-Corp, Partnership, LLC, Sole Proprietor? (K-1, 1099-Misc, 1099-K)

Yes No Did you sell anything online: Craigslist, eBay, FB Marketplace, etc. (1099K)?

Yes No Any other income, e.g. Uber/Lyft, Crowdfunding, other? Please explain:

General Questions:

Yes No Direct Deposit your refund into your bank account? *Must attach a voided check.* Otherwise you will receive refund checks. Amounts due will NOT be drafted from your account.

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Yes No Do you or your spouse owe any back taxes?

Please note, to avoid penalty, you must pay all taxes due by April 18th. An extension only grants more time to file, not to pay.

Other Special Situations: May require detailed documentation

Yes No Pay any Estimated Tax Payments? Please list amounts, dates, and to whom paid (GA, IRS, etc.)

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Expenses/Deductions:

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Self \$ _____ Spouse \$ _____
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- Yes No After-tax Health Insurance, including Medicare?
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- Yes No Install an electric vehicle charger in your home?
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Type of Rental: _____

Address: _____

Days Rented: _____ Days Vacant/Empty: _____

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| <input type="checkbox"/> Supplies | <input type="checkbox"/> Taxes & Licenses |
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| <input type="checkbox"/> Utilities (not home) | <input type="checkbox"/> Wages paid to Employees |
| <input type="checkbox"/> Telephone | <input type="checkbox"/> Commissions & Fees |
| <input type="checkbox"/> Postage | <input type="checkbox"/> Employee Benefits |
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Did your business:

- Yes No Use an Automobile? Type: _____
Business miles 1/1-6/30: _____ 7/1-12/31: _____;
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Your Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Spouse's Full Name: _____

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Phone: _____

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Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

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How many hours did you "participate" (work) in the business operations during 2022? 500+ annual hours may be needed: _____

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Personal Information ~ Provide SS Cards & Driver's Licenses:

Your Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

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- Yes No Cash/Checks/Money etc.
- Yes No Non-Cash Gifts i.e. Household items to Goodwill?
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- Yes No Install an electric vehicle charger in your home?
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Address: _____

Days Rented: _____ Days Vacant/Empty: _____

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| <input type="checkbox"/> Supplies | <input type="checkbox"/> Taxes & Licenses |
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| <input type="checkbox"/> Telephone | <input type="checkbox"/> Commissions & Fees |
| <input type="checkbox"/> Postage | <input type="checkbox"/> Employee Benefits |
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| <input type="checkbox"/> Other Expenses (list) | <input type="checkbox"/> Inventory W/D for Personal Use |

Did your business:

- Yes No Use an Automobile? Type: _____
Business miles 1/1-6/30: _____ 7/1-12/31: _____;
Personal miles: _____
- Yes No Have a home office? Must be Regular & Exclusive.
Sq Ft: _____ Sq Ft of entire home: _____
- Yes No Acquire or dispose of Tools/Equipment/Assets? *Please provide Invoice/Bill of Sale.*
- Yes No Pay any service providers, contractors, or casual labor?
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- Yes No Engage in Bartering?
- Yes No Have more than one owner?
- Yes No Is this business an LLC? If "Yes" please provide LLC Articles of Organization and Operating Agreement.

Separate Business Address: _____

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How many hours did you "participate" (work) in the business operations during 2022? 500+ annual hours may be needed: _____

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Personal Information ~ Provide SS Cards & Driver's Licenses:

Your Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Spouse's Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

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Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

1) _____

2) _____

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Yes No Could anyone else claim any of your dependents?

Yes No Any Child Care costs? If "Yes", provide amounts paid, care provider name(s), EIN's, and address(es) for EACH dependent.

Regular Income: Please attach Forms W-2, 1099-Misc, 1099R, 1099-SSA, K-1, 1099G, etc. Provide details/amounts if missing forms.

Yes No Wages, tips, etc. from job(s)? (W-2)

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Expenses/Deductions:

- Yes No IRA Contribution: Traditional Roth SEP Other
Self \$ _____ Spouse \$ _____
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- Yes No After-tax Health Insurance, including Medicare?
- Yes No Did anyone in your family receive health insurance from HealthCare.gov or other state run Marketplace? (Form 1095)
- Yes No Are you part of a Healthcare Sharing Ministry?
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Taxes & Interest Expenses:

- Yes No Do you own your own home?
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- Yes No Mortgage Interest/Points Paid (Form 1098)?
- Yes No Did you purchase a boat, airplane, RV, etc.?
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- Yes No Investment Interest paid? Other Interest Paid?

Gifts to Charity *Documentation required for all donations:*

- Yes No Cash/Checks/Money etc.
- Yes No Non-Cash Gifts i.e. Household items to Goodwill?
- Yes No Miles driven for charity?
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- Yes No Qualified Charitable Distribution from IRA.

Other Miscellaneous Items:

- Yes No Install an electric vehicle charger in your home?
- Yes No Rollover \$\$\$ from an IRA, 401(k), Annuity, etc.?
- Yes No Receive an inheritance (Sch K-1)?
- Yes No Make gifts totaling \geq \$16,000 to one person?
- Yes No Did you contribute to a 529 College Savings Plan?
- Yes No Unreimbursed Educator Expenses (K-12 only)?

Rental Property:

- Yes No First Placed in Service in 2022? If "Yes", please provide appraisal and settlement statements.
- Yes No Disposed/Stopped Renting during 2022?

Type of Rental: _____

Address: _____

Days Rented: _____ Days Vacant/Empty: _____

Personal use days (self, friends, family): _____

Average length of rental stay (in days): _____

Hours you & your spouse worked on rental: _____

Small Business or Farming*Request our 2022 Business Tax Organizer for more in-depth checklist*

Nature of Business: _____

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| <input type="checkbox"/> Office Supplies | <input type="checkbox"/> Office/Building Rent |
| <input type="checkbox"/> Equipment Rent | <input type="checkbox"/> Repairs/Maintenance/Cleaning |
| <input type="checkbox"/> Supplies | <input type="checkbox"/> Taxes & Licenses |
| <input type="checkbox"/> Out of Town Travel | <input type="checkbox"/> Meals & Entertainment |
| <input type="checkbox"/> Utilities (not home) | <input type="checkbox"/> Wages paid to Employees |
| <input type="checkbox"/> Telephone | <input type="checkbox"/> Commissions & Fees |
| <input type="checkbox"/> Postage | <input type="checkbox"/> Employee Benefits |
| <input type="checkbox"/> Auto/Truck Expenses | <input type="checkbox"/> Pension & Profit Sharing |
| <input type="checkbox"/> Other Expenses (list) | <input type="checkbox"/> Inventory W/D for Personal Use |

Did your business:

- Yes No Use an Automobile? Type: _____
Business miles 1/1-6/30: _____ 7/1-12/31: _____;
Personal miles: _____
- Yes No Have a home office? Must be Regular & Exclusive.
Sq Ft: _____ Sq Ft of entire home: _____
- Yes No Acquire or dispose of Tools/Equipment/Assets? *Please provide Invoice/Bill of Sale.*
- Yes No Pay any service providers, contractors, or casual labor?
 Yes No If "Yes", would you like us to issue 1099's?
- Yes No Have Inventory on hand December 31, 2022?
- Yes No Pay wages to W-2 type employees?
- Yes No Receive EIDL, PPP, SBA Loan, etc.?
- Yes No Make or receive any loans/leases/notes or payments?
- Yes No Engage in Bartering?
- Yes No Have more than one owner?
- Yes No Is this business an LLC? If "Yes" please provide LLC Articles of Organization and Operating Agreement.

Separate Business Address: _____

Method of Accounting: Cash Accrual Other/Not SureCould this be considered a Hobby? Yes No Not Sure

How many hours did you "participate" (work) in the business operations during 2022? 500+ annual hours may be needed: _____

*Celebrating
21 Years!
2002 - 2023*

Please attach additional sheets for any other information you need to provide.
TaxSmart Business Services - (125 Barrett Road) PO Box 280, Holly Springs, GA, 30142

Phone: 770-704-7777 - Email: info@taxsmart1040.com

TaxSmart Business Services – 2022 Income Tax Organizer

Call (770)704-7777 to schedule an appointment. Please complete as much as possible prior to your appointment.

Personal Information ~ Provide SS Cards & Driver's Licenses:

Your Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Spouse's Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

1) _____

2) _____

3) _____

Yes No Could anyone else claim any of your dependents?

Yes No Any Child Care costs? If "Yes", provide amounts paid, care provider name(s), EIN's, and address(es) for EACH dependent.

Regular Income: Please attach Forms W-2, 1099-Misc, 1099R, 1099-SSA, K-1, 1099G, etc. Provide details/amounts if missing forms.

Yes No Wages, tips, etc. from job(s)? (W-2)

Yes No Interest from banks, bonds, other? (1099-INT)

Yes No Dividends? (1099-DIV)

Yes No Did you receive any tax refunds in 2022?

Yes No Alimony Paid/Received? \$ _____

Yes No Sell, buy or trade any assets, stocks, bonds, mutual funds, or other assets? (1099-B).

Yes No Distributions from 401(k), IRA, Pension, Annuity, etc.? (1099-R)

Yes No Spend, Receive, Sell, Exchange, Acquire, or Mine any Virtual Currency such as Bitcoin, Ethereum, etc?

Yes No Own any rental property including a vacation home?

Yes No Unemployment Income? (1099-G)

Yes No Social Security Benefits? (1099-SSA)

Yes No Gambling Income and Related Expenses? (W2G)

Yes No Cancellation of Debt/Foreclosure? (1099-A or -C)

Yes No Any small business income/loss from an S-Corp, Partnership, LLC, Sole Proprietor? (K-1, 1099-Misc, 1099-K)

Yes No Did you sell anything online: Craigslist, eBay, FB Marketplace, etc. (1099K)?

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General Questions:

Yes No Direct Deposit your refund into your bank account? *Must attach a voided check.* Otherwise you will receive refund checks. Amounts due will NOT be drafted from your account.

Yes No Did you file 2021 tax return? **Provide Copy/PDF.**

Yes No Do you or your spouse owe any back taxes?

Please note, to avoid penalty, you must pay all taxes due by April 18th. An extension only grants more time to file, not to pay.

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Yes No Pay any Estimated Tax Payments? Please list amounts, dates, and to whom paid (GA, IRS, etc.)

Yes No Any births or deaths in your household? Did any children cease to be your dependents in 2022?

Yes No Did your marital status change during 2022?

Yes No Did you earn income in another state or country?

Yes No Did you buy, sell or refinance (including loan modification) property in 2022? If yes, attach closing statements.

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Yes No Moving Expenses? (Only for active military)

Yes No Did your address change? Please attach.

Yes No At any time during 2022 did you have any financial interest or signature authority over a foreign financial account, including overseas gaming?

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How would you like to receive your copy of the completed tax return?

Paper Copy Digital/PDF Copy

Yes No College expenses for self, spouse or dependent?

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- Yes No Use an Automobile? Type: _____
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- Yes No Is this business an LLC? If "Yes" please provide LLC Articles of Organization and Operating Agreement.

Separate Business Address: _____

Method of Accounting: Cash Accrual Other/Not SureCould this be considered a Hobby? Yes No Not Sure

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Call (770)704-7777 to schedule an appointment. Please complete as much as possible prior to your appointment.

Personal Information ~ Provide SS Cards & Driver's Licenses:

Your Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Spouse's Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

1) _____

2) _____

3) _____

Yes No Could anyone else claim any of your dependents?

Yes No Any Child Care costs? If "Yes", provide amounts paid, care provider name(s), EIN's, and address(es) for EACH dependent.

Regular Income: Please attach Forms W-2, 1099-Misc, 1099R, 1099-SSA, K-1, 1099G, etc. Provide details/amounts if missing forms.

Yes No Wages, tips, etc. from job(s)? (W-2)

Yes No Interest from banks, bonds, other? (1099-INT)

Yes No Dividends? (1099-DIV)

Yes No Did you receive any tax refunds in 2022?

Yes No Alimony Paid/Received? \$ _____

Yes No Sell, buy or trade any assets, stocks, bonds, mutual funds, or other assets? (1099-B).

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Yes No Own any rental property including a vacation home?

Yes No Unemployment Income? (1099-G)

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General Questions:

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Please note, to avoid penalty, you must pay all taxes due by April 18th. An extension only grants more time to file, not to pay.

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Yes No Pay any Household Employees such as gardeners, housekeepers, nannies, etc.?

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- Yes No Have more than one owner?
- Yes No Is this business an LLC? If "Yes" please provide LLC Articles of Organization and Operating Agreement.

Separate Business Address: _____

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Phone: 770-704-7777 - Email: info@taxsmart1040.com

TaxSmart Business Services – 2022 Income Tax Organizer

Call (770)704-7777 to schedule an appointment. Please complete as much as possible prior to your appointment.

Personal Information ~ Provide SS Cards & Driver's Licenses:

Your Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Spouse's Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

1) _____

2) _____

3) _____

Yes No Could anyone else claim any of your dependents?

Yes No Any Child Care costs? If "Yes", provide amounts paid, care provider name(s), EIN's, and address(es) for EACH dependent.

Regular Income: Please attach Forms W-2, 1099-Misc, 1099R, 1099-SSA, K-1, 1099G, etc. Provide details/amounts if missing forms.

Yes No Wages, tips, etc. from job(s)? (W-2)

Yes No Interest from banks, bonds, other? (1099-INT)

Yes No Dividends? (1099-DIV)

Yes No Did you receive any tax refunds in 2022?

Yes No Alimony Paid/Received? \$ _____

Yes No Sell, buy or trade any assets, stocks, bonds, mutual funds, or other assets? (1099-B).

Yes No Distributions from 401(k), IRA, Pension, Annuity, etc.? (1099-R)

Yes No Spend, Receive, Sell, Exchange, Acquire, or Mine any Virtual Currency such as Bitcoin, Ethereum, etc?

Yes No Own any rental property including a vacation home?

Yes No Unemployment Income? (1099-G)

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General Questions:

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Yes No Do you or your spouse owe any back taxes?

Please note, to avoid penalty, you must pay all taxes due by April 18th. An extension only grants more time to file, not to pay.

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Yes No Pay any Estimated Tax Payments? Please list amounts, dates, and to whom paid (GA, IRS, etc.)

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Yes No Pay any Household Employees such as gardeners, housekeepers, nannies, etc.?

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Expenses/Deductions:

- Yes No IRA Contribution: Traditional Roth SEP Other
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- Yes No Cash/Checks/Money etc.
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Address: _____

Days Rented: _____ Days Vacant/Empty: _____

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Did your business:

- Yes No Use an Automobile? Type: _____
Business miles 1/1-6/30: _____ 7/1-12/31: _____;
Personal miles: _____
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Call (770)704-7777 to schedule an appointment. Please complete as much as possible prior to your appointment.

Personal Information ~ Provide SS Cards & Driver's Licenses:

Your Full Name: _____
Occupation: _____ Blind? Disabled?
Phone: _____
Email: _____
Spouse's Full Name: _____
Occupation: _____ Blind? Disabled?
Phone: _____
Email: _____
 Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

1) _____

2) _____

3) _____

Yes No Could anyone else claim any of your dependents?

Yes No Any Child Care costs? If "Yes", provide amounts paid, care provider name(s), EIN's, and address(es) for EACH dependent.

Regular Income: Please attach Forms W-2, 1099-Misc, 1099R, 1099-SSA, K-1, 1099G, etc. Provide details/amounts if missing forms.

Yes No Wages, tips, etc. from job(s)? (W-2)
 Yes No Interest from banks, bonds, other? (1099-INT)
 Yes No Dividends? (1099-DIV)
 Yes No Did you receive any tax refunds in 2022?
 Yes No Alimony Paid/Received? \$ _____
 Yes No Sell, buy or trade any assets, stocks, bonds, mutual funds, or other assets? (1099-B).
 Yes No Distributions from 401(k), IRA, Pension, Annuity, etc.? (1099-R)
 Yes No Spend, Receive, Sell, Exchange, Acquire, or Mine any Virtual Currency such as Bitcoin, Ethereum, etc?

Yes No Own any rental property including a vacation home?
 Yes No Unemployment Income? (1099-G)
 Yes No Social Security Benefits? (1099-SSA)
 Yes No Gambling Income and Related Expenses? (W2G)
 Yes No Cancellation of Debt/Foreclosure? (1099-A or -C)
 Yes No Any small business income/loss from an S-Corp, Partnership, LLC, Sole Proprietor? (K-1, 1099-Misc, 1099-K)
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General Questions:

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Please note, to avoid penalty, you must pay all taxes due by April 18th. An extension only grants more time to file, not to pay.

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 Yes No Did your marital status change during 2022?
 Yes No Did you earn income in another state or country?
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Expenses/Deductions:

- Yes No IRA Contribution: Traditional Roth SEP Other
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- Yes No Did you purchase a boat, airplane, RV, etc.?
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Gifts to Charity *Documentation required for all donations:*

- Yes No Cash/Checks/Money etc.
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- Yes No Make gifts totaling \geq \$16,000 to one person?
- Yes No Did you contribute to a 529 College Savings Plan?
- Yes No Unreimbursed Educator Expenses (K-12 only)?

Rental Property:

- Yes No First Placed in Service in 2022? If "Yes", please provide appraisal and settlement statements.
- Yes No Disposed/Stopped Renting during 2022?

Type of Rental: _____

Address: _____

Days Rented: _____ Days Vacant/Empty: _____

Personal use days (self, friends, family): _____

Average length of rental stay (in days): _____

Hours you & your spouse worked on rental: _____

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Did your business:

- Yes No Use an Automobile? Type: _____
Business miles 1/1-6/30: _____ 7/1-12/31: _____;
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<p>Personal Information ~ Provide SS Cards & Driver's Licenses:</p> <p>Your Full Name: _____</p> <p>Occupation: _____ <input type="checkbox"/> Blind? <input type="checkbox"/> Disabled?</p> <p>Phone: _____</p> <p>Email: _____</p> <p>Spouse's Full Name: _____</p> <p>Occupation: _____ <input type="checkbox"/> Blind? <input type="checkbox"/> Disabled?</p> <p>Phone: _____</p> <p>Email: _____</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Sure: Do you want to file a joint return?</p>	<p>Dependent Information (Children, Parents, others):</p> <p style="text-align: center;">Provide SS Card & Proof of Residency for each dependent.</p> <p>Full Name – DOB – Relationship - College Student? - 2022 Income?</p> <p>1) _____</p> <p>2) _____</p> <p>3) _____</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Could anyone else claim any of your dependents?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Any Child Care costs? If "Yes", provide amounts paid, care provider name(s), EIN's, and address(es) for EACH dependent.</p>
<p>Regular Income: Please attach Forms W-2, 1099-Misc, 1099R, 1099-SSA, K-1, 1099G, etc. Provide details/amounts if missing forms.</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Wages, tips, etc. from job(s)? (W-2)</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Interest from banks, bonds, other? (1099-INT)</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Dividends? (1099-DIV)</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Did you receive any tax refunds in 2022?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Alimony Paid/Received? \$ _____</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Sell, buy or trade any assets, stocks, bonds, mutual funds, or other assets? (1099-B).</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Distributions from 401(k), IRA, Pension, Annuity, etc.? (1099-R)</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Spend, Receive, Sell, Exchange, Acquire, or Mine any Virtual Currency such as Bitcoin, Ethereum, etc?</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No Own any rental property including a vacation home?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Unemployment Income? (1099-G)</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Social Security Benefits? (1099-SSA)</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Gambling Income and Related Expenses? (W2G)</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Cancellation of Debt/Foreclosure? (1099-A or -C)</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Any small business income/loss from an S-Corp, Partnership, LLC, Sole Proprietor? (K-1, 1099-Misc, 1099-K)</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Did you sell anything online: Craigslist, eBay, FB Marketplace, etc. (1099K)?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Any other income, e.g. Uber/Lyft, Crowdfunding, other? Please explain:</p>
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Expenses/Deductions:

- Yes No IRA Contribution: Traditional Roth SEP Other
Self \$ _____ Spouse \$ _____
- Yes No Penalty on early withdrawal from CD? \$ _____
- Yes No Student Loan interest paid? _____

Medical Expenses:

- Yes No After-tax Health Insurance, including Medicare?
- Yes No Did anyone in your family receive health insurance from HealthCare.gov or other state run Marketplace? (Form 1095)
- Yes No Are you part of a Healthcare Sharing Ministry?
- Yes No Did you pay Long Term Care Insurance premiums?
- Yes No Any out of pocket medical expenses: Doctors, Dentist, Rx, Nursing Homes, Medical Mileage, etc.? Please list.

Taxes & Interest Expenses:

- Yes No Do you own your own home?
- Yes No Real Estate Taxes (Form 1098 or other)?
- Yes No Mortgage Interest/Points Paid (Form 1098)?
- Yes No Did you purchase a boat, airplane, RV, etc.?
- Yes No Annual Ad Valorem Taxes on car, boat, etc.?
- Yes No Other State, County, City or Local Taxes?
- Yes No Investment Interest paid? Other Interest Paid?

Gifts to Charity *Documentation required for all donations:*

- Yes No Cash/Checks/Money etc.
- Yes No Non-Cash Gifts i.e. Household items to Goodwill?
- Yes No Miles driven for charity?
- Yes No Payroll Deductions of Charity, Union Dues, other?
- Yes No Qualified Charitable Distribution from IRA.

Other Miscellaneous Items:

- Yes No Install an electric vehicle charger in your home?
- Yes No Rollover \$\$\$ from an IRA, 401(k), Annuity, etc.?
- Yes No Receive an inheritance (Sch K-1)?
- Yes No Make gifts totaling \geq \$16,000 to one person?
- Yes No Did you contribute to a 529 College Savings Plan?
- Yes No Unreimbursed Educator Expenses (K-12 only)?

Rental Property:

- Yes No First Placed in Service in 2022? If "Yes", please provide appraisal and settlement statements.
- Yes No Disposed/Stopped Renting during 2022?

Type of Rental: _____

Address: _____

Days Rented: _____ Days Vacant/Empty: _____

Personal use days (self, friends, family): _____

Average length of rental stay (in days): _____

Hours you & your spouse worked on rental: _____

Small Business or Farming*Request our 2022 Business Tax Organizer for more in-depth checklist*

Nature of Business: _____

Date Business Started: _____

Which of the following expenses did your business have in 2022?

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| <input type="checkbox"/> Contract Labor | <input type="checkbox"/> Insurance (Not Health) |
| <input type="checkbox"/> Advertising | <input type="checkbox"/> Legal & Professional Services |
| <input type="checkbox"/> Office Supplies | <input type="checkbox"/> Office/Building Rent |
| <input type="checkbox"/> Equipment Rent | <input type="checkbox"/> Repairs/Maintenance/Cleaning |
| <input type="checkbox"/> Supplies | <input type="checkbox"/> Taxes & Licenses |
| <input type="checkbox"/> Out of Town Travel | <input type="checkbox"/> Meals & Entertainment |
| <input type="checkbox"/> Utilities (not home) | <input type="checkbox"/> Wages paid to Employees |
| <input type="checkbox"/> Telephone | <input type="checkbox"/> Commissions & Fees |
| <input type="checkbox"/> Postage | <input type="checkbox"/> Employee Benefits |
| <input type="checkbox"/> Auto/Truck Expenses | <input type="checkbox"/> Pension & Profit Sharing |
| <input type="checkbox"/> Other Expenses (list) | <input type="checkbox"/> Inventory W/D for Personal Use |

Did your business:

- Yes No Use an Automobile? Type: _____
Business miles 1/1-6/30: _____ 7/1-12/31: _____;
Personal miles: _____
- Yes No Have a home office? Must be Regular & Exclusive.
Sq Ft: _____ Sq Ft of entire home: _____
- Yes No Acquire or dispose of Tools/Equipment/Assets? *Please provide Invoice/Bill of Sale.*
- Yes No Pay any service providers, contractors, or casual labor?
 Yes No If "Yes", would you like us to issue 1099's?
- Yes No Have Inventory on hand December 31, 2022?
- Yes No Pay wages to W-2 type employees?
- Yes No Receive EIDL, PPP, SBA Loan, etc.?
- Yes No Make or receive any loans/leases/notes or payments?
- Yes No Engage in Bartering?
- Yes No Have more than one owner?
- Yes No Is this business an LLC? If "Yes" please provide LLC Articles of Organization and Operating Agreement.

Separate Business Address: _____

Method of Accounting: Cash Accrual Other/Not SureCould this be considered a Hobby? Yes No Not Sure

How many hours did you "participate" (work) in the business operations during 2022? 500+ annual hours may be needed: _____

Celebrating
21 Years!
2002 - 2023

Please attach additional sheets for any other information you need to provide.
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Personal Information ~ Provide SS Cards & Driver's Licenses:

Your Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Spouse's Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

1) _____

2) _____

3) _____

Yes No Could anyone else claim any of your dependents?

Yes No Any Child Care costs? If "Yes", provide amounts paid, care provider name(s), EIN's, and address(es) for EACH dependent.

Regular Income: Please attach Forms W-2, 1099-Misc, 1099R, 1099-SSA, K-1, 1099G, etc. Provide details/amounts if missing forms.

Yes No Wages, tips, etc. from job(s)? (W-2)

Yes No Interest from banks, bonds, other? (1099-INT)

Yes No Dividends? (1099-DIV)

Yes No Did you receive any tax refunds in 2022?

Yes No Alimony Paid/Received? \$ _____

Yes No Sell, buy or trade any assets, stocks, bonds, mutual funds, or other assets? (1099-B).

Yes No Distributions from 401(k), IRA, Pension, Annuity, etc.? (1099-R)

Yes No Spend, Receive, Sell, Exchange, Acquire, or Mine any Virtual Currency such as Bitcoin, Ethereum, etc?

Yes No Own any rental property including a vacation home?

Yes No Unemployment Income? (1099-G)

Yes No Social Security Benefits? (1099-SSA)

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Yes No Cancellation of Debt/Foreclosure? (1099-A or -C)

Yes No Any small business income/loss from an S-Corp, Partnership, LLC, Sole Proprietor? (K-1, 1099-Misc, 1099-K)

Yes No Did you sell anything online: Craigslist, eBay, FB Marketplace, etc. (1099K)?

Yes No Any other income, e.g. Uber/Lyft, Crowdfunding, other? Please explain:

General Questions:

Yes No Direct Deposit your refund into your bank account? *Must attach a voided check.* Otherwise you will receive refund checks. Amounts due will NOT be drafted from your account.

Yes No Did you file 2021 tax return? **Provide Copy/PDF.**

Yes No Do you or your spouse owe any back taxes?

Please note, to avoid penalty, you must pay all taxes due by April 18th. An extension only grants more time to file, not to pay.

Yes No Did your address change? Please attach.

Yes No At any time during 2022 did you have any financial interest or signature authority over a foreign financial account, including overseas gaming?

Yes No During 2022, did you receive a distribution from, were the grantor of, or transferor to a foreign trust?

How would you like to receive your copy of the completed tax return?

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Yes No Did your marital status change during 2022?

Yes No Did you earn income in another state or country?

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Yes No Receive any hobby income?

Yes No Moving Expenses? (Only for active military)

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- Yes No Use an Automobile? Type: _____
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Separate Business Address: _____

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Personal Information ~ Provide SS Cards & Driver's Licenses:

Your Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Spouse's Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

1) _____

2) _____

3) _____

Yes No Could anyone else claim any of your dependents?

Yes No Any Child Care costs? If "Yes", provide amounts paid, care provider name(s), EIN's, and address(es) for EACH dependent.

Regular Income: Please attach Forms W-2, 1099-Misc, 1099R, 1099-SSA, K-1, 1099G, etc. Provide details/amounts if missing forms.

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Yes No Dividends? (1099-DIV)

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Yes No Alimony Paid/Received? \$ _____

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Yes No Own any rental property including a vacation home?

Yes No Unemployment Income? (1099-G)

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Yes No Pay any Household Employees such as gardeners, housekeepers, nannies, etc.?

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- Yes No Have more than one owner?
- Yes No Is this business an LLC? If "Yes" please provide LLC Articles of Organization and Operating Agreement.

Separate Business Address: _____

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Phone: 770-704-7777 - Email: info@taxsmart1040.com

TaxSmart Business Services – 2022 Income Tax Organizer

Call (770)704-7777 to schedule an appointment. Please complete as much as possible prior to your appointment.

Personal Information ~ Provide SS Cards & Driver's Licenses:

Your Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Spouse's Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

1) _____

2) _____

3) _____

Yes No Could anyone else claim any of your dependents?

Yes No Any Child Care costs? If "Yes", provide amounts paid, care provider name(s), EIN's, and address(es) for EACH dependent.

Regular Income: Please attach Forms W-2, 1099-Misc, 1099R, 1099-SSA, K-1, 1099G, etc. Provide details/amounts if missing forms.

Yes No Wages, tips, etc. from job(s)? (W-2)

Yes No Interest from banks, bonds, other? (1099-INT)

Yes No Dividends? (1099-DIV)

Yes No Did you receive any tax refunds in 2022?

Yes No Alimony Paid/Received? \$ _____

Yes No Sell, buy or trade any assets, stocks, bonds, mutual funds, or other assets? (1099-B).

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Yes No Spend, Receive, Sell, Exchange, Acquire, or Mine any Virtual Currency such as Bitcoin, Ethereum, etc?

Yes No Own any rental property including a vacation home?

Yes No Unemployment Income? (1099-G)

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General Questions:

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Yes No Pay any Estimated Tax Payments? Please list amounts, dates, and to whom paid (GA, IRS, etc.)

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- Yes No IRA Contribution: Traditional Roth SEP Other
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- Yes No After-tax Health Insurance, including Medicare?
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- Yes No Cash/Checks/Money etc.
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- Yes No Use an Automobile? Type: _____
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Call (770)704-7777 to schedule an appointment. Please complete as much as possible prior to your appointment.

Personal Information ~ Provide SS Cards & Driver's Licenses:

Your Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Spouse's Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

1) _____

2) _____

3) _____

Yes No Could anyone else claim any of your dependents?

Yes No Any Child Care costs? If "Yes", provide amounts paid, care provider name(s), EIN's, and address(es) for EACH dependent.

Regular Income: Please attach Forms W-2, 1099-Misc, 1099R, 1099-SSA, K-1, 1099G, etc. Provide details/amounts if missing forms.

Yes No Wages, tips, etc. from job(s)? (W-2)

Yes No Interest from banks, bonds, other? (1099-INT)

Yes No Dividends? (1099-DIV)

Yes No Did you receive any tax refunds in 2022?

Yes No Alimony Paid/Received? \$ _____

Yes No Sell, buy or trade any assets, stocks, bonds, mutual funds, or other assets? (1099-B).

Yes No Distributions from 401(k), IRA, Pension, Annuity, etc.? (1099-R)

Yes No Spend, Receive, Sell, Exchange, Acquire, or Mine any Virtual Currency such as Bitcoin, Ethereum, etc?

Yes No Own any rental property including a vacation home?

Yes No Unemployment Income? (1099-G)

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Yes No Gambling Income and Related Expenses? (W2G)

Yes No Cancellation of Debt/Foreclosure? (1099-A or -C)

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- Yes No Disposed/Stopped Renting during 2022?

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Address: _____

Days Rented: _____ Days Vacant/Empty: _____

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Regular Income: Please attach Forms W-2, 1099-Misc, 1099R, 1099-SSA, K-1, 1099G, etc. Provide details/amounts if missing forms.

Yes No Wages, tips, etc. from job(s)? (W-2)

Yes No Interest from banks, bonds, other? (1099-INT)

Yes No Dividends? (1099-DIV)

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Yes No Alimony Paid/Received? \$ _____

Yes No Sell, buy or trade any assets, stocks, bonds, mutual funds, or other assets? (1099-B).

Yes No Distributions from 401(k), IRA, Pension, Annuity, etc.? (1099-R)

Yes No Spend, Receive, Sell, Exchange, Acquire, or Mine any Virtual Currency such as Bitcoin, Ethereum, etc?

Yes No Own any rental property including a vacation home?

Yes No Unemployment Income? (1099-G)

Yes No Social Security Benefits? (1099-SSA)

Yes No Gambling Income and Related Expenses? (W2G)

Yes No Cancellation of Debt/Foreclosure? (1099-A or -C)

Yes No Any small business income/loss from an S-Corp, Partnership, LLC, Sole Proprietor? (K-1, 1099-Misc, 1099-K)

Yes No Did you sell anything online: Craigslist, eBay, FB Marketplace, etc. (1099K)?

Yes No Any other income, e.g. Uber/Lyft, Crowdfunding, other? Please explain:

General Questions:

Yes No Direct Deposit your refund into your bank account? *Must attach a voided check.* Otherwise you will receive refund checks. Amounts due will NOT be drafted from your account.

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Yes No Do you or your spouse owe any back taxes?

Please note, to avoid penalty, you must pay all taxes due by April 18th. An extension only grants more time to file, not to pay.

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Expenses/Deductions:

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Self \$ _____ Spouse \$ _____
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- Yes No After-tax Health Insurance, including Medicare?
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- Yes No Install an electric vehicle charger in your home?
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Type of Rental: _____

Address: _____

Days Rented: _____ Days Vacant/Empty: _____

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| <input type="checkbox"/> Supplies | <input type="checkbox"/> Taxes & Licenses |
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| <input type="checkbox"/> Utilities (not home) | <input type="checkbox"/> Wages paid to Employees |
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Did your business:

- Yes No Use an Automobile? Type: _____
Business miles 1/1-6/30: _____ 7/1-12/31: _____;
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Occupation: _____ Blind? Disabled?

Phone: _____

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Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

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Could this be considered a Hobby? Yes No Not Sure

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Personal Information ~ Provide SS Cards & Driver's Licenses:

Your Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Spouse's Full Name: _____

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General Questions:

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Yes No Did you file 2021 tax return? **Provide Copy/PDF.**

Yes No Do you or your spouse owe any back taxes?

Please note, to avoid penalty, you must pay all taxes due by April 18th. An extension only grants more time to file, not to pay.

Other Special Situations: May require detailed documentation

Yes No Pay any Estimated Tax Payments? Please list amounts, dates, and to whom paid (GA, IRS, etc.)

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Expenses/Deductions:

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Yes No Are you part of a Healthcare Sharing Ministry?

Yes No Did you pay Long Term Care Insurance premiums?

Yes No Any out of pocket medical expenses: Doctors, Dentist, Rx, Nursing Homes, Medical Mileage, etc.? Please list.

Taxes & Interest Expenses:

Yes No Do you own your own home?

Yes No Real Estate Taxes (Form 1098 or other)?

Yes No Mortgage Interest/Points Paid (Form 1098)?

Yes No Did you purchase a boat, airplane, RV, etc.?

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Yes No Investment Interest paid? Other Interest Paid?

Gifts to Charity *Documentation required for all donations:*

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Yes No Non-Cash Gifts i.e. Household items to Goodwill?

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Yes No Qualified Charitable Distribution from IRA.

Other Miscellaneous Items:

Yes No Install an electric vehicle charger in your home?

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Yes No Disposed/Stopped Renting during 2022?

Type of Rental: _____

Address: _____

Days Rented: _____ Days Vacant/Empty: _____

Personal use days (self, friends, family): _____

Average length of rental stay (in days): _____

Hours you & your spouse worked on rental: _____

Small Business or Farming

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Nature of Business: _____

Date Business Started: _____

Which of the following expenses did your business have in 2022?

Inventory Purchases Interest paid on business loans

Contract Labor Insurance (Not Health)

Advertising Legal & Professional Services

Office Supplies Office/Building Rent

Equipment Rent Repairs/Maintenance/Cleaning

Supplies Taxes & Licenses

Out of Town Travel Meals & Entertainment

Utilities (not home) Wages paid to Employees

Telephone Commissions & Fees

Postage Employee Benefits

Auto/Truck Expenses Pension & Profit Sharing

Other Expenses (list) Inventory W/D for Personal Use

Did your business:

Yes No Use an Automobile? Type: _____
Business miles 1/1-6/30: _____ 7/1-12/31: _____;

Personal miles: _____

Yes No Have a home office? Must be Regular & Exclusive.

Sq Ft: _____ Sq Ft of entire home: _____

Yes No Acquire or dispose of Tools/Equipment/Assets? *Please provide Invoice/Bill of Sale.*

Yes No Pay any service providers, contractors, or casual labor?

Yes No If "Yes", would you like us to issue 1099's?

Yes No Have Inventory on hand December 31, 2022?

Yes No Pay wages to W-2 type employees?

Yes No Receive EIDL, PPP, SBA Loan, etc.?

Yes No Make or receive any loans/leases/notes or payments?

Yes No Engage in Bartering?

Yes No Have more than one owner?

Yes No Is this business an LLC? If "Yes" please provide LLC Articles of Organization and Operating Agreement.

Separate Business Address: _____

Method of Accounting: Cash Accrual Other/Not Sure

Could this be considered a Hobby? Yes No Not Sure

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Personal Information ~ Provide SS Cards & Driver's Licenses:

Your Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Spouse's Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

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Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

1) _____

2) _____

3) _____

Yes No Could anyone else claim any of your dependents?

Yes No Any Child Care costs? If "Yes", provide amounts paid, care provider name(s), EIN's, and address(es) for EACH dependent.

Regular Income: Please attach Forms W-2, 1099-Misc, 1099R, 1099-SSA, K-1, 1099G, etc. Provide details/amounts if missing forms.

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Yes No Pay any Household Employees such as gardeners, housekeepers, nannies, etc.?

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Expenses/Deductions:

- Yes No IRA Contribution: Traditional Roth SEP Other
Self \$ _____ Spouse \$ _____
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- Yes No Student Loan interest paid? _____

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- Yes No After-tax Health Insurance, including Medicare?
- Yes No Did anyone in your family receive health insurance from HealthCare.gov or other state run Marketplace? (Form 1095)
- Yes No Are you part of a Healthcare Sharing Ministry?
- Yes No Did you pay Long Term Care Insurance premiums?
- Yes No Any out of pocket medical expenses: Doctors, Dentist, Rx, Nursing Homes, Medical Mileage, etc.? Please list.

Taxes & Interest Expenses:

- Yes No Do you own your own home?
- Yes No Real Estate Taxes (Form 1098 or other)?
- Yes No Mortgage Interest/Points Paid (Form 1098)?
- Yes No Did you purchase a boat, airplane, RV, etc.?
- Yes No Annual Ad Valorem Taxes on car, boat, etc.?
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- Yes No Cash/Checks/Money etc.
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- Yes No Miles driven for charity?
- Yes No Payroll Deductions of Charity, Union Dues, other?
- Yes No Qualified Charitable Distribution from IRA.

Other Miscellaneous Items:

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- Yes No Rollover \$\$\$ from an IRA, 401(k), Annuity, etc.?
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- Yes No Make gifts totaling \geq \$16,000 to one person?
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- Yes No First Placed in Service in 2022? If "Yes", please provide appraisal and settlement statements.
- Yes No Disposed/Stopped Renting during 2022?

Type of Rental: _____

Address: _____

Days Rented: _____ Days Vacant/Empty: _____

Personal use days (self, friends, family): _____

Average length of rental stay (in days): _____

Hours you & your spouse worked on rental: _____

Small Business or Farming*Request our 2022 Business Tax Organizer for more in-depth checklist*

Nature of Business: _____

Date Business Started: _____

Which of the following expenses did your business have in 2022?

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|--|--|
| <input type="checkbox"/> Inventory Purchases | <input type="checkbox"/> Interest paid on business loans |
| <input type="checkbox"/> Contract Labor | <input type="checkbox"/> Insurance (Not Health) |
| <input type="checkbox"/> Advertising | <input type="checkbox"/> Legal & Professional Services |
| <input type="checkbox"/> Office Supplies | <input type="checkbox"/> Office/Building Rent |
| <input type="checkbox"/> Equipment Rent | <input type="checkbox"/> Repairs/Maintenance/Cleaning |
| <input type="checkbox"/> Supplies | <input type="checkbox"/> Taxes & Licenses |
| <input type="checkbox"/> Out of Town Travel | <input type="checkbox"/> Meals & Entertainment |
| <input type="checkbox"/> Utilities (not home) | <input type="checkbox"/> Wages paid to Employees |
| <input type="checkbox"/> Telephone | <input type="checkbox"/> Commissions & Fees |
| <input type="checkbox"/> Postage | <input type="checkbox"/> Employee Benefits |
| <input type="checkbox"/> Auto/Truck Expenses | <input type="checkbox"/> Pension & Profit Sharing |
| <input type="checkbox"/> Other Expenses (list) | <input type="checkbox"/> Inventory W/D for Personal Use |

Did your business:

- Yes No Use an Automobile? Type: _____
Business miles 1/1-6/30: _____ 7/1-12/31: _____;
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- Yes No Is this business an LLC? If "Yes" please provide LLC Articles of Organization and Operating Agreement.

Separate Business Address: _____

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How many hours did you "participate" (work) in the business operations during 2022? 500+ annual hours may be needed: _____

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Your Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

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Occupation: _____ Blind? Disabled?

Phone: _____

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Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

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Regular Income: Please attach Forms W-2, 1099-Misc, 1099R, 1099-SSA, K-1, 1099G, etc. Provide details/amounts if missing forms.

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Expenses/Deductions:

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Self \$ _____ Spouse \$ _____
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- Yes No After-tax Health Insurance, including Medicare?
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- Yes No Do you own your own home?
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- Yes No Cash/Checks/Money etc.
- Yes No Non-Cash Gifts i.e. Household items to Goodwill?
- Yes No Miles driven for charity?
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- Yes No Qualified Charitable Distribution from IRA.

Other Miscellaneous Items:

- Yes No Install an electric vehicle charger in your home?
- Yes No Rollover \$\$\$ from an IRA, 401(k), Annuity, etc.?
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- Yes No Make gifts totaling \geq \$16,000 to one person?
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- Yes No Unreimbursed Educator Expenses (K-12 only)?

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- Yes No First Placed in Service in 2022? If "Yes", please provide appraisal and settlement statements.
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Type of Rental: _____

Address: _____

Days Rented: _____ Days Vacant/Empty: _____

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| <input type="checkbox"/> Supplies | <input type="checkbox"/> Taxes & Licenses |
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| <input type="checkbox"/> Utilities (not home) | <input type="checkbox"/> Wages paid to Employees |
| <input type="checkbox"/> Telephone | <input type="checkbox"/> Commissions & Fees |
| <input type="checkbox"/> Postage | <input type="checkbox"/> Employee Benefits |
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Did your business:

- Yes No Use an Automobile? Type: _____
Business miles 1/1-6/30: _____ 7/1-12/31: _____;
Personal miles: _____
- Yes No Have a home office? Must be Regular & Exclusive.
Sq Ft: _____ Sq Ft of entire home: _____
- Yes No Acquire or dispose of Tools/Equipment/Assets? *Please provide Invoice/Bill of Sale.*
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- Yes No Have more than one owner?
- Yes No Is this business an LLC? If "Yes" please provide LLC Articles of Organization and Operating Agreement.

Separate Business Address: _____

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Personal Information ~ Provide SS Cards & Driver's Licenses:

Your Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Spouse's Full Name: _____

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Phone: _____

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Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

1) _____

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Yes No Could anyone else claim any of your dependents?

Yes No Any Child Care costs? If "Yes", provide amounts paid, care provider name(s), EIN's, and address(es) for EACH dependent.

Regular Income: Please attach Forms W-2, 1099-Misc, 1099R, 1099-SSA, K-1, 1099G, etc. Provide details/amounts if missing forms.

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Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

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- Yes No After-tax Health Insurance, including Medicare?
- Yes No Did anyone in your family receive health insurance from HealthCare.gov or other state run Marketplace? (Form 1095)
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- Yes No Did you pay Long Term Care Insurance premiums?
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Taxes & Interest Expenses:

- Yes No Do you own your own home?
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Gifts to Charity *Documentation required for all donations:*

- Yes No Cash/Checks/Money etc.
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- Yes No Miles driven for charity?
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Other Miscellaneous Items:

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Type of Rental: _____

Address: _____

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| <input type="checkbox"/> Out of Town Travel | <input type="checkbox"/> Meals & Entertainment |
| <input type="checkbox"/> Utilities (not home) | <input type="checkbox"/> Wages paid to Employees |
| <input type="checkbox"/> Telephone | <input type="checkbox"/> Commissions & Fees |
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Did your business:

- Yes No Use an Automobile? Type: _____
Business miles 1/1-6/30: _____ 7/1-12/31: _____;
Personal miles: _____
- Yes No Have a home office? Must be Regular & Exclusive.
Sq Ft: _____ Sq Ft of entire home: _____
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Your Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Spouse's Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

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Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

1) _____

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Yes No Could anyone else claim any of your dependents?

Yes No Any Child Care costs? If "Yes", provide amounts paid, care provider name(s), EIN's, and address(es) for EACH dependent.

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Yes No Own any rental property including a vacation home?

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Occupation: _____ Blind? Disabled?
Phone: _____
Email: _____
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Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

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- Yes No Did you purchase a boat, airplane, RV, etc.?
- Yes No Annual Ad Valorem Taxes on car, boat, etc.?
- Yes No Other State, County, City or Local Taxes?
- Yes No Investment Interest paid? Other Interest Paid?

Gifts to Charity *Documentation required for all donations:*

- Yes No Cash/Checks/Money etc.
- Yes No Non-Cash Gifts i.e. Household items to Goodwill?
- Yes No Miles driven for charity?
- Yes No Payroll Deductions of Charity, Union Dues, other?
- Yes No Qualified Charitable Distribution from IRA.

Other Miscellaneous Items:

- Yes No Install an electric vehicle charger in your home?
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- Yes No Receive an inheritance (Sch K-1)?
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- Yes No First Placed in Service in 2022? If "Yes", please provide appraisal and settlement statements.
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Type of Rental: _____

Address: _____

Days Rented: _____ Days Vacant/Empty: _____

Personal use days (self, friends, family): _____

Average length of rental stay (in days): _____

Hours you & your spouse worked on rental: _____

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| <input type="checkbox"/> Contract Labor | <input type="checkbox"/> Insurance (Not Health) |
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Did your business:

- Yes No Use an Automobile? Type: _____
Business miles 1/1-6/30: _____ 7/1-12/31: _____;
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Sq Ft: _____ Sq Ft of entire home: _____
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- Yes No Pay any service providers, contractors, or casual labor?
 Yes No If "Yes", would you like us to issue 1099's?
- Yes No Have Inventory on hand December 31, 2022?
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- Yes No Receive EIDL, PPP, SBA Loan, etc.?
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- Yes No Engage in Bartering?
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<p>Personal Information ~ Provide SS Cards & Driver's Licenses:</p> <p>Your Full Name: _____</p> <p>Occupation: _____ <input type="checkbox"/> Blind? <input type="checkbox"/> Disabled?</p> <p>Phone: _____</p> <p>Email: _____</p> <p>Spouse's Full Name: _____</p> <p>Occupation: _____ <input type="checkbox"/> Blind? <input type="checkbox"/> Disabled?</p> <p>Phone: _____</p> <p>Email: _____</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Sure: Do you want to file a joint return?</p>	<p>Dependent Information (Children, Parents, others):</p> <p style="text-align: center;">Provide SS Card & Proof of Residency for each dependent.</p> <p>Full Name – DOB – Relationship - College Student? - 2022 Income?</p> <p>1) _____</p> <p>2) _____</p> <p>3) _____</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Could anyone else claim any of your dependents?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Any Child Care costs? If "Yes", provide amounts paid, care provider name(s), EIN's, and address(es) for EACH dependent.</p>
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(Continued on reverse)

Expenses/Deductions:

- Yes No IRA Contribution: Traditional Roth SEP Other
Self \$ _____ Spouse \$ _____
- Yes No Penalty on early withdrawal from CD? \$ _____
- Yes No Student Loan interest paid? _____

Medical Expenses:

- Yes No After-tax Health Insurance, including Medicare?
- Yes No Did anyone in your family receive health insurance from HealthCare.gov or other state run Marketplace? (Form 1095)
- Yes No Are you part of a Healthcare Sharing Ministry?
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- Yes No First Placed in Service in 2022? If "Yes", please provide appraisal and settlement statements.
- Yes No Disposed/Stopped Renting during 2022?

Type of Rental: _____

Address: _____

Days Rented: _____ Days Vacant/Empty: _____

Personal use days (self, friends, family): _____

Average length of rental stay (in days): _____

Hours you & your spouse worked on rental: _____

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Did your business:

- Yes No Use an Automobile? Type: _____
Business miles 1/1-6/30: _____ 7/1-12/31: _____;
Personal miles: _____
- Yes No Have a home office? Must be Regular & Exclusive.
Sq Ft: _____ Sq Ft of entire home: _____
- Yes No Acquire or dispose of Tools/Equipment/Assets? *Please provide Invoice/Bill of Sale.*
- Yes No Pay any service providers, contractors, or casual labor?
 Yes No If "Yes", would you like us to issue 1099's?
- Yes No Have Inventory on hand December 31, 2022?
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- Yes No Make or receive any loans/leases/notes or payments?
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Separate Business Address: _____

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How many hours did you "participate" (work) in the business operations during 2022? 500+ annual hours may be needed: _____

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Call (770)704-7777 to schedule an appointment. Please complete as much as possible prior to your appointment.

Personal Information ~ Provide SS Cards & Driver's Licenses:

Your Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Spouse's Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

1) _____

2) _____

3) _____

Yes No Could anyone else claim any of your dependents?

Yes No Any Child Care costs? If "Yes", provide amounts paid, care provider name(s), EIN's, and address(es) for EACH dependent.

Regular Income: Please attach Forms W-2, 1099-Misc, 1099R, 1099-SSA, K-1, 1099G, etc. Provide details/amounts if missing forms.

Yes No Wages, tips, etc. from job(s)? (W-2)

Yes No Interest from banks, bonds, other? (1099-INT)

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Yes No Did you receive any tax refunds in 2022?

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Yes No Sell, buy or trade any assets, stocks, bonds, mutual funds, or other assets? (1099-B).

Yes No Distributions from 401(k), IRA, Pension, Annuity, etc.? (1099-R)

Yes No Spend, Receive, Sell, Exchange, Acquire, or Mine any Virtual Currency such as Bitcoin, Ethereum, etc?

Yes No Own any rental property including a vacation home?

Yes No Unemployment Income? (1099-G)

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Yes No Any small business income/loss from an S-Corp, Partnership, LLC, Sole Proprietor? (K-1, 1099-Misc, 1099-K)

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General Questions:

Yes No Direct Deposit your refund into your bank account? *Must attach a voided check.* Otherwise you will receive refund checks. Amounts due will NOT be drafted from your account.

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Yes No Do you or your spouse owe any back taxes?

Please note, to avoid penalty, you must pay all taxes due by April 18th. An extension only grants more time to file, not to pay.

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Yes No Pay any Estimated Tax Payments? Please list amounts, dates, and to whom paid (GA, IRS, etc.)

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Yes No Did your marital status change during 2022?

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Yes No Receive any hobby income?

Yes No Moving Expenses? (Only for active military)

Yes No Did your address change? Please attach.

Yes No At any time during 2022 did you have any financial interest or signature authority over a foreign financial account, including overseas gaming?

Yes No During 2022, did you receive a distribution from, were the grantor of, or transferor to a foreign trust?

How would you like to receive your copy of the completed tax return?

Paper Copy Digital/PDF Copy

Yes No College expenses for self, spouse or dependent?

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Yes No Did your address change? Please attach.

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Yes No Pay any Household Employees such as gardeners, housekeepers, nannies, etc.?

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Self \$ _____ Spouse \$ _____
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- Yes No Cash/Checks/Money etc.
- Yes No Non-Cash Gifts i.e. Household items to Goodwill?
- Yes No Miles driven for charity?
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- Yes No Qualified Charitable Distribution from IRA.

Other Miscellaneous Items:

- Yes No Install an electric vehicle charger in your home?
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- Yes No Unreimbursed Educator Expenses (K-12 only)?

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- Yes No Disposed/Stopped Renting during 2022?

Type of Rental: _____

Address: _____

Days Rented: _____ Days Vacant/Empty: _____

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| <input type="checkbox"/> Supplies | <input type="checkbox"/> Taxes & Licenses |
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| <input type="checkbox"/> Utilities (not home) | <input type="checkbox"/> Wages paid to Employees |
| <input type="checkbox"/> Telephone | <input type="checkbox"/> Commissions & Fees |
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Did your business:

- Yes No Use an Automobile? Type: _____
Business miles 1/1-6/30: _____ 7/1-12/31: _____;
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- Yes No Have a home office? Must be Regular & Exclusive.
Sq Ft: _____ Sq Ft of entire home: _____
- Yes No Acquire or dispose of Tools/Equipment/Assets? *Please provide Invoice/Bill of Sale.*
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- Yes No Have more than one owner?
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Separate Business Address: _____

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Your Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Spouse's Full Name: _____

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Phone: _____

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Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

1) _____

2) _____

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Yes No Could anyone else claim any of your dependents?

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Regular Income: Please attach Forms W-2, 1099-Misc, 1099R, 1099-SSA, K-1, 1099G, etc. Provide details/amounts if missing forms.

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Phone: _____

Email: _____

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- Yes No Did anyone in your family receive health insurance from HealthCare.gov or other state run Marketplace? (Form 1095)
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- Yes No Did you pay Long Term Care Insurance premiums?
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Taxes & Interest Expenses:

- Yes No Do you own your own home?
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Gifts to Charity *Documentation required for all donations:*

- Yes No Cash/Checks/Money etc.
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Type of Rental: _____

Address: _____

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| <input type="checkbox"/> Out of Town Travel | <input type="checkbox"/> Meals & Entertainment |
| <input type="checkbox"/> Utilities (not home) | <input type="checkbox"/> Wages paid to Employees |
| <input type="checkbox"/> Telephone | <input type="checkbox"/> Commissions & Fees |
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Did your business:

- Yes No Use an Automobile? Type: _____
Business miles 1/1-6/30: _____ 7/1-12/31: _____;
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Sq Ft: _____ Sq Ft of entire home: _____
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Separate Business Address: _____

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Your Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Spouse's Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

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Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

1) _____

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Yes No Could anyone else claim any of your dependents?

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- Yes No Cash/Checks/Money etc.
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- Yes No Qualified Charitable Distribution from IRA.

Other Miscellaneous Items:

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- Yes No First Placed in Service in 2022? If "Yes", please provide appraisal and settlement statements.
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Type of Rental: _____

Address: _____

Days Rented: _____ Days Vacant/Empty: _____

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| <input type="checkbox"/> Supplies | <input type="checkbox"/> Taxes & Licenses |
| <input type="checkbox"/> Out of Town Travel | <input type="checkbox"/> Meals & Entertainment |
| <input type="checkbox"/> Utilities (not home) | <input type="checkbox"/> Wages paid to Employees |
| <input type="checkbox"/> Telephone | <input type="checkbox"/> Commissions & Fees |
| <input type="checkbox"/> Postage | <input type="checkbox"/> Employee Benefits |
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Did your business:

- Yes No Use an Automobile? Type: _____
Business miles 1/1-6/30: _____ 7/1-12/31: _____;
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Sq Ft: _____ Sq Ft of entire home: _____
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- Yes No Have more than one owner?
- Yes No Is this business an LLC? If "Yes" please provide LLC Articles of Organization and Operating Agreement.

Separate Business Address: _____

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Personal Information ~ Provide SS Cards & Driver's Licenses:

Your Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Spouse's Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

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Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

1) _____

2) _____

3) _____

Yes No Could anyone else claim any of your dependents?

Yes No Any Child Care costs? If "Yes", provide amounts paid, care provider name(s), EIN's, and address(es) for EACH dependent.

Regular Income: Please attach Forms W-2, 1099-Misc, 1099R, 1099-SSA, K-1, 1099G, etc. Provide details/amounts if missing forms.

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Type of Rental: _____

Address: _____

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Personal use days (self, friends, family): _____

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Did your business:

- Yes No Use an Automobile? Type: _____
Business miles 1/1-6/30: _____ 7/1-12/31: _____;
Personal miles: _____
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Separate Business Address: _____

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Personal Information ~ Provide SS Cards & Driver's Licenses:

Your Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Spouse's Full Name: _____

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Phone: _____

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Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

1) _____

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Yes No Could anyone else claim any of your dependents?

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General Questions:

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Please note, to avoid penalty, you must pay all taxes due by April 18th. An extension only grants more time to file, not to pay.

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Yes No Pay any Estimated Tax Payments? Please list amounts, dates, and to whom paid (GA, IRS, etc.)

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- Yes No Use an Automobile? Type: _____
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- Yes No Acquire or dispose of Tools/Equipment/Assets? *Please provide Invoice/Bill of Sale.*
- Yes No Pay any service providers, contractors, or casual labor?
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- Yes No Have more than one owner?
- Yes No Is this business an LLC? If "Yes" please provide LLC Articles of Organization and Operating Agreement.

Separate Business Address: _____

Method of Accounting: Cash Accrual Other/Not SureCould this be considered a Hobby? Yes No Not Sure

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Call (770)704-7777 to schedule an appointment. Please complete as much as possible prior to your appointment.

Personal Information ~ Provide SS Cards & Driver's Licenses:

Your Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Spouse's Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

1) _____

2) _____

3) _____

Yes No Could anyone else claim any of your dependents?

Yes No Any Child Care costs? If "Yes", provide amounts paid, care provider name(s), EIN's, and address(es) for EACH dependent.

Regular Income: Please attach Forms W-2, 1099-Misc, 1099R, 1099-SSA, K-1, 1099G, etc. Provide details/amounts if missing forms.

Yes No Wages, tips, etc. from job(s)? (W-2)

Yes No Interest from banks, bonds, other? (1099-INT)

Yes No Dividends? (1099-DIV)

Yes No Did you receive any tax refunds in 2022?

Yes No Alimony Paid/Received? \$ _____

Yes No Sell, buy or trade any assets, stocks, bonds, mutual funds, or other assets? (1099-B).

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Yes No Own any rental property including a vacation home?

Yes No Unemployment Income? (1099-G)

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General Questions:

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Please note, to avoid penalty, you must pay all taxes due by April 18th. An extension only grants more time to file, not to pay.

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Yes No Pay any Household Employees such as gardeners, housekeepers, nannies, etc.?

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- Yes No Have more than one owner?
- Yes No Is this business an LLC? If "Yes" please provide LLC Articles of Organization and Operating Agreement.

Separate Business Address: _____

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21 Years!
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Phone: 770-704-7777 - Email: info@taxsmart1040.com

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Call (770)704-7777 to schedule an appointment. Please complete as much as possible prior to your appointment.

Personal Information ~ Provide SS Cards & Driver's Licenses:

Your Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Spouse's Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

1) _____

2) _____

3) _____

Yes No Could anyone else claim any of your dependents?

Yes No Any Child Care costs? If "Yes", provide amounts paid, care provider name(s), EIN's, and address(es) for EACH dependent.

Regular Income: Please attach Forms W-2, 1099-Misc, 1099R, 1099-SSA, K-1, 1099G, etc. Provide details/amounts if missing forms.

Yes No Wages, tips, etc. from job(s)? (W-2)

Yes No Interest from banks, bonds, other? (1099-INT)

Yes No Dividends? (1099-DIV)

Yes No Did you receive any tax refunds in 2022?

Yes No Alimony Paid/Received? \$ _____

Yes No Sell, buy or trade any assets, stocks, bonds, mutual funds, or other assets? (1099-B).

Yes No Distributions from 401(k), IRA, Pension, Annuity, etc.? (1099-R)

Yes No Spend, Receive, Sell, Exchange, Acquire, or Mine any Virtual Currency such as Bitcoin, Ethereum, etc?

Yes No Own any rental property including a vacation home?

Yes No Unemployment Income? (1099-G)

Yes No Social Security Benefits? (1099-SSA)

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General Questions:

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How would you like to receive your copy of the completed tax return?

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Yes No Did your marital status change during 2022?

Yes No Did you earn income in another state or country?

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Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

1) _____

2) _____

3) _____

Yes No Could anyone else claim any of your dependents?

Yes No Any Child Care costs? If "Yes", provide amounts paid, care provider name(s), EIN's, and address(es) for EACH dependent.

Regular Income: Please attach Forms W-2, 1099-Misc, 1099R, 1099-SSA, K-1, 1099G, etc. Provide details/amounts if missing forms.

Yes No Wages, tips, etc. from job(s)? (W-2)

Yes No Interest from banks, bonds, other? (1099-INT)

Yes No Dividends? (1099-DIV)

Yes No Did you receive any tax refunds in 2022?

Yes No Alimony Paid/Received? \$ _____

Yes No Sell, buy or trade any assets, stocks, bonds, mutual funds, or other assets? (1099-B).

Yes No Distributions from 401(k), IRA, Pension, Annuity, etc.? (1099-R)

Yes No Spend, Receive, Sell, Exchange, Acquire, or Mine any Virtual Currency such as Bitcoin, Ethereum, etc?

Yes No Own any rental property including a vacation home?

Yes No Unemployment Income? (1099-G)

Yes No Social Security Benefits? (1099-SSA)

Yes No Gambling Income and Related Expenses? (W2G)

Yes No Cancellation of Debt/Foreclosure? (1099-A or -C)

Yes No Any small business income/loss from an S-Corp, Partnership, LLC, Sole Proprietor? (K-1, 1099-Misc, 1099-K)

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Address: _____

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Yes No Own any rental property including a vacation home?

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Did your business:

- Yes No Use an Automobile? Type: _____
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Did your business:

- Yes No Use an Automobile? Type: _____
Business miles 1/1-6/30: _____ 7/1-12/31: _____;
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| <input type="checkbox"/> Supplies | <input type="checkbox"/> Taxes & Licenses |
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| <input type="checkbox"/> Telephone | <input type="checkbox"/> Commissions & Fees |
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Did your business:

- Yes No Use an Automobile? Type: _____
Business miles 1/1-6/30: _____ 7/1-12/31: _____;
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Occupation: _____ Blind? Disabled?

Phone: _____

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Full Name – DOB – Relationship - College Student? - 2022 Income?

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- Yes No Cash/Checks/Money etc.
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Type of Rental: _____

Address: _____

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| <input type="checkbox"/> Supplies | <input type="checkbox"/> Taxes & Licenses |
| <input type="checkbox"/> Out of Town Travel | <input type="checkbox"/> Meals & Entertainment |
| <input type="checkbox"/> Utilities (not home) | <input type="checkbox"/> Wages paid to Employees |
| <input type="checkbox"/> Telephone | <input type="checkbox"/> Commissions & Fees |
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Did your business:

- Yes No Use an Automobile? Type: _____
Business miles 1/1–6/30: _____ 7/1–12/31: _____;
Personal miles: _____
- Yes No Have a home office? Must be Regular & Exclusive.
Sq Ft: _____ Sq Ft of entire home: _____
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Separate Business Address: _____

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Your Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Spouse's Full Name: _____

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Phone: _____

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Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

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Phone: _____

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- Yes No Do you own your own home?
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- Yes No Cash/Checks/Money etc.
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- Yes No Qualified Charitable Distribution from IRA.

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Address: _____

Days Rented: _____ Days Vacant/Empty: _____

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| <input type="checkbox"/> Supplies | <input type="checkbox"/> Taxes & Licenses |
| <input type="checkbox"/> Out of Town Travel | <input type="checkbox"/> Meals & Entertainment |
| <input type="checkbox"/> Utilities (not home) | <input type="checkbox"/> Wages paid to Employees |
| <input type="checkbox"/> Telephone | <input type="checkbox"/> Commissions & Fees |
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Did your business:

- Yes No Use an Automobile? Type: _____
Business miles 1/1-6/30: _____ 7/1-12/31: _____;
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- Yes No Have more than one owner?
- Yes No Is this business an LLC? If "Yes" please provide LLC Articles of Organization and Operating Agreement.

Separate Business Address: _____

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Your Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

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Occupation: _____ Blind? Disabled?

Phone: _____

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Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

1) _____

2) _____

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Yes No Could anyone else claim any of your dependents?

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- Yes No First Placed in Service in 2022? If "Yes", please provide appraisal and settlement statements.
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| <input type="checkbox"/> Office Supplies | <input type="checkbox"/> Office/Building Rent |
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| <input type="checkbox"/> Supplies | <input type="checkbox"/> Taxes & Licenses |
| <input type="checkbox"/> Out of Town Travel | <input type="checkbox"/> Meals & Entertainment |
| <input type="checkbox"/> Utilities (not home) | <input type="checkbox"/> Wages paid to Employees |
| <input type="checkbox"/> Telephone | <input type="checkbox"/> Commissions & Fees |
| <input type="checkbox"/> Postage | <input type="checkbox"/> Employee Benefits |
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Did your business:

- Yes No Use an Automobile? Type: _____
Business miles 1/1-6/30: _____ 7/1-12/31: _____;
Personal miles: _____
- Yes No Have a home office? Must be Regular & Exclusive.
Sq Ft: _____ Sq Ft of entire home: _____
- Yes No Acquire or dispose of Tools/Equipment/Assets? *Please provide Invoice/Bill of Sale.*
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- Yes No Make or receive any loans/leases/notes or payments?
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- Yes No Have more than one owner?
- Yes No Is this business an LLC? If "Yes" please provide LLC Articles of Organization and Operating Agreement.

Separate Business Address: _____

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Personal Information ~ Provide SS Cards & Driver's Licenses:

Your Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Spouse's Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

1) _____

2) _____

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Yes No Could anyone else claim any of your dependents?

Yes No Any Child Care costs? If "Yes", provide amounts paid, care provider name(s), EIN's, and address(es) for EACH dependent.

Regular Income: Please attach Forms W-2, 1099-Misc, 1099R, 1099-SSA, K-1, 1099G, etc. Provide details/amounts if missing forms.

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Yes No Own any rental property including a vacation home?

Yes No Unemployment Income? (1099-G)

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| <input type="checkbox"/> Advertising | <input type="checkbox"/> Legal & Professional Services |
| <input type="checkbox"/> Office Supplies | <input type="checkbox"/> Office/Building Rent |
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- Yes No Use an Automobile? Type: _____
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Separate Business Address: _____

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Call (770)704-7777 to schedule an appointment. Please complete as much as possible prior to your appointment.

Personal Information ~ Provide SS Cards & Driver's Licenses:

Your Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Spouse's Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

1) _____

2) _____

3) _____

Yes No Could anyone else claim any of your dependents?

Yes No Any Child Care costs? If "Yes", provide amounts paid, care provider name(s), EIN's, and address(es) for EACH dependent.

Regular Income: Please attach Forms W-2, 1099-Misc, 1099R, 1099-SSA, K-1, 1099G, etc. Provide details/amounts if missing forms.

Yes No Wages, tips, etc. from job(s)? (W-2)

Yes No Interest from banks, bonds, other? (1099-INT)

Yes No Dividends? (1099-DIV)

Yes No Did you receive any tax refunds in 2022?

Yes No Alimony Paid/Received? \$ _____

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Yes No Own any rental property including a vacation home?

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General Questions:

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Yes No Do you or your spouse owe any back taxes?

Please note, to avoid penalty, you must pay all taxes due by April 18th. An extension only grants more time to file, not to pay.

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Address: _____

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Did your business:

- Yes No Use an Automobile? Type: _____
Business miles 1/1-6/30: _____ 7/1-12/31: _____;
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- Yes No Acquire or dispose of Tools/Equipment/Assets? *Please provide Invoice/Bill of Sale.*
- Yes No Pay any service providers, contractors, or casual labor?
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- Yes No Have more than one owner?
- Yes No Is this business an LLC? If "Yes" please provide LLC Articles of Organization and Operating Agreement.

Separate Business Address: _____

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Personal Information ~ Provide SS Cards & Driver's Licenses:

Your Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Spouse's Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

1) _____

2) _____

3) _____

Yes No Could anyone else claim any of your dependents?

Yes No Any Child Care costs? If "Yes", provide amounts paid, care provider name(s), EIN's, and address(es) for EACH dependent.

Regular Income: Please attach Forms W-2, 1099-Misc, 1099R, 1099-SSA, K-1, 1099G, etc. Provide details/amounts if missing forms.

Yes No Wages, tips, etc. from job(s)? (W-2)

Yes No Interest from banks, bonds, other? (1099-INT)

Yes No Dividends? (1099-DIV)

Yes No Did you receive any tax refunds in 2022?

Yes No Alimony Paid/Received? \$ _____

Yes No Sell, buy or trade any assets, stocks, bonds, mutual funds, or other assets? (1099-B).

Yes No Distributions from 401(k), IRA, Pension, Annuity, etc.? (1099-R)

Yes No Spend, Receive, Sell, Exchange, Acquire, or Mine any Virtual Currency such as Bitcoin, Ethereum, etc?

Yes No Own any rental property including a vacation home?

Yes No Unemployment Income? (1099-G)

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Yes No Any small business income/loss from an S-Corp, Partnership, LLC, Sole Proprietor? (K-1, 1099-Misc, 1099-K)

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General Questions:

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Yes No Do you or your spouse owe any back taxes?

Please note, to avoid penalty, you must pay all taxes due by April 18th. An extension only grants more time to file, not to pay.

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Yes No Pay any Estimated Tax Payments? Please list amounts, dates, and to whom paid (GA, IRS, etc.)

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Yes No Pay any Household Employees such as gardeners, housekeepers, nannies, etc.?

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- Yes No IRA Contribution: Traditional Roth SEP Other
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Separate Business Address: _____

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21 Years!
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Phone: 770-704-7777 - Email: info@taxsmart1040.com

TaxSmart Business Services – 2022 Income Tax Organizer

Call (770)704-7777 to schedule an appointment. Please complete as much as possible prior to your appointment.

Personal Information ~ Provide SS Cards & Driver's Licenses:

Your Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Spouse's Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

1) _____

2) _____

3) _____

Yes No Could anyone else claim any of your dependents?

Yes No Any Child Care costs? If "Yes", provide amounts paid, care provider name(s), EIN's, and address(es) for EACH dependent.

Regular Income: Please attach Forms W-2, 1099-Misc, 1099R, 1099-SSA, K-1, 1099G, etc. Provide details/amounts if missing forms.

Yes No Wages, tips, etc. from job(s)? (W-2)

Yes No Interest from banks, bonds, other? (1099-INT)

Yes No Dividends? (1099-DIV)

Yes No Did you receive any tax refunds in 2022?

Yes No Alimony Paid/Received? \$ _____

Yes No Sell, buy or trade any assets, stocks, bonds, mutual funds, or other assets? (1099-B).

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Yes No Spend, Receive, Sell, Exchange, Acquire, or Mine any Virtual Currency such as Bitcoin, Ethereum, etc?

Yes No Own any rental property including a vacation home?

Yes No Unemployment Income? (1099-G)

Yes No Social Security Benefits? (1099-SSA)

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Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

1) _____

2) _____

3) _____

Yes No Could anyone else claim any of your dependents?

Yes No Any Child Care costs? If "Yes", provide amounts paid, care provider name(s), EIN's, and address(es) for EACH dependent.

Regular Income: Please attach Forms W-2, 1099-Misc, 1099R, 1099-SSA, K-1, 1099G, etc. Provide details/amounts if missing forms.

Yes No Wages, tips, etc. from job(s)? (W-2)

Yes No Interest from banks, bonds, other? (1099-INT)

Yes No Dividends? (1099-DIV)

Yes No Did you receive any tax refunds in 2022?

Yes No Alimony Paid/Received? \$ _____

Yes No Sell, buy or trade any assets, stocks, bonds, mutual funds, or other assets? (1099-B).

Yes No Distributions from 401(k), IRA, Pension, Annuity, etc.? (1099-R)

Yes No Spend, Receive, Sell, Exchange, Acquire, or Mine any Virtual Currency such as Bitcoin, Ethereum, etc?

Yes No Own any rental property including a vacation home?

Yes No Unemployment Income? (1099-G)

Yes No Social Security Benefits? (1099-SSA)

Yes No Gambling Income and Related Expenses? (W2G)

Yes No Cancellation of Debt/Foreclosure? (1099-A or -C)

Yes No Any small business income/loss from an S-Corp, Partnership, LLC, Sole Proprietor? (K-1, 1099-Misc, 1099-K)

Yes No Did you sell anything online: Craigslist, eBay, FB Marketplace, etc. (1099K)?

Yes No Any other income, e.g. Uber/Lyft, Crowdfunding, other? Please explain:

General Questions:

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Please note, to avoid penalty, you must pay all taxes due by April 18th. An extension only grants more time to file, not to pay.

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Yes No Pay any Estimated Tax Payments? Please list amounts, dates, and to whom paid (GA, IRS, etc.)

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Yes No Pay any Household Employees such as gardeners, housekeepers, nannies, etc.?

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Expenses/Deductions:

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- Yes No After-tax Health Insurance, including Medicare?
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Address: _____

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| <input type="checkbox"/> Supplies | <input type="checkbox"/> Taxes & Licenses |
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| <input type="checkbox"/> Utilities (not home) | <input type="checkbox"/> Wages paid to Employees |
| <input type="checkbox"/> Telephone | <input type="checkbox"/> Commissions & Fees |
| <input type="checkbox"/> Postage | <input type="checkbox"/> Employee Benefits |
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Business miles 1/1-6/30: _____ 7/1-12/31: _____;
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Address: _____

Days Rented: _____ Days Vacant/Empty: _____

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| <input type="checkbox"/> Telephone | <input type="checkbox"/> Commissions & Fees |
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Did your business:

- Yes No Use an Automobile? Type: _____
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Full Name – DOB – Relationship - College Student? - 2022 Income?

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Address: _____

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Did your business:

- Yes No Use an Automobile? Type: _____
Business miles 1/1-6/30: _____ 7/1-12/31: _____;
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- Yes No Have a home office? Must be Regular & Exclusive.
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Occupation: _____ Blind? Disabled?

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Yes No Not Sure: Do you want to file a joint return?

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Full Name – DOB – Relationship - College Student? - 2022 Income?

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- Yes No After-tax Health Insurance, including Medicare?
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- Yes No First Placed in Service in 2022? If "Yes", please provide appraisal and settlement statements.
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| <input type="checkbox"/> Supplies | <input type="checkbox"/> Taxes & Licenses |
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| <input type="checkbox"/> Utilities (not home) | <input type="checkbox"/> Wages paid to Employees |
| <input type="checkbox"/> Telephone | <input type="checkbox"/> Commissions & Fees |
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Did your business:

- Yes No Use an Automobile? Type: _____
Business miles 1/1-6/30: _____ 7/1-12/31: _____;
Personal miles: _____
- Yes No Have a home office? Must be Regular & Exclusive.
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Occupation: _____ Blind? Disabled?

Phone: _____

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Full Name – DOB – Relationship - College Student? - 2022 Income?

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Yes No Do you have a Health Savings Account? (1099-SA)

Yes No Pay any Household Employees such as gardeners, housekeepers, nannies, etc.?

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Expenses/Deductions:

- Yes No IRA Contribution: Traditional Roth SEP Other
Self \$ _____ Spouse \$ _____
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- Yes No After-tax Health Insurance, including Medicare?
- Yes No Did anyone in your family receive health insurance from HealthCare.gov or other state run Marketplace? (Form 1095)
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- Yes No Do you own your own home?
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- Yes No Cash/Checks/Money etc.
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- Yes No Miles driven for charity?
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- Yes No Qualified Charitable Distribution from IRA.

Other Miscellaneous Items:

- Yes No Install an electric vehicle charger in your home?
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- Yes No Unreimbursed Educator Expenses (K-12 only)?

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- Yes No First Placed in Service in 2022? If "Yes", please provide appraisal and settlement statements.
- Yes No Disposed/Stopped Renting during 2022?

Type of Rental: _____

Address: _____

Days Rented: _____ Days Vacant/Empty: _____

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| <input type="checkbox"/> Supplies | <input type="checkbox"/> Taxes & Licenses |
| <input type="checkbox"/> Out of Town Travel | <input type="checkbox"/> Meals & Entertainment |
| <input type="checkbox"/> Utilities (not home) | <input type="checkbox"/> Wages paid to Employees |
| <input type="checkbox"/> Telephone | <input type="checkbox"/> Commissions & Fees |
| <input type="checkbox"/> Postage | <input type="checkbox"/> Employee Benefits |
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| <input type="checkbox"/> Other Expenses (list) | <input type="checkbox"/> Inventory W/D for Personal Use |

Did your business:

- Yes No Use an Automobile? Type: _____
Business miles 1/1-6/30: _____ 7/1-12/31: _____;
Personal miles: _____
- Yes No Have a home office? Must be Regular & Exclusive.
Sq Ft: _____ Sq Ft of entire home: _____
- Yes No Acquire or dispose of Tools/Equipment/Assets? *Please provide Invoice/Bill of Sale.*
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Separate Business Address: _____

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Your Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Spouse's Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

1) _____

2) _____

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Yes No Could anyone else claim any of your dependents?

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Regular Income: Please attach Forms W-2, 1099-Misc, 1099R, 1099-SSA, K-1, 1099G, etc. Provide details/amounts if missing forms.

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Phone: _____

Email: _____

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- Yes No Do you own your own home?
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- Yes No Cash/Checks/Money etc.
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- Yes No Qualified Charitable Distribution from IRA.

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Type of Rental: _____

Address: _____

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| <input type="checkbox"/> Supplies | <input type="checkbox"/> Taxes & Licenses |
| <input type="checkbox"/> Out of Town Travel | <input type="checkbox"/> Meals & Entertainment |
| <input type="checkbox"/> Utilities (not home) | <input type="checkbox"/> Wages paid to Employees |
| <input type="checkbox"/> Telephone | <input type="checkbox"/> Commissions & Fees |
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Did your business:

- Yes No Use an Automobile? Type: _____
Business miles 1/1-6/30: _____ 7/1-12/31: _____;
Personal miles: _____
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Sq Ft: _____ Sq Ft of entire home: _____
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- Yes No Have more than one owner?
- Yes No Is this business an LLC? If "Yes" please provide LLC Articles of Organization and Operating Agreement.

Separate Business Address: _____

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Personal Information ~ Provide SS Cards & Driver's Licenses:

Your Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Spouse's Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

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Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

1) _____

2) _____

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Yes No Could anyone else claim any of your dependents?

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Address: _____

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| <input type="checkbox"/> Supplies | <input type="checkbox"/> Taxes & Licenses |
| <input type="checkbox"/> Out of Town Travel | <input type="checkbox"/> Meals & Entertainment |
| <input type="checkbox"/> Utilities (not home) | <input type="checkbox"/> Wages paid to Employees |
| <input type="checkbox"/> Telephone | <input type="checkbox"/> Commissions & Fees |
| <input type="checkbox"/> Postage | <input type="checkbox"/> Employee Benefits |
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Did your business:

- Yes No Use an Automobile? Type: _____
Business miles 1/1-6/30: _____ 7/1-12/31: _____;
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Sq Ft: _____ Sq Ft of entire home: _____
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- Yes No Have more than one owner?
- Yes No Is this business an LLC? If "Yes" please provide LLC Articles of Organization and Operating Agreement.

Separate Business Address: _____

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Your Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Spouse's Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

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Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

1) _____

2) _____

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Yes No Could anyone else claim any of your dependents?

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Regular Income: Please attach Forms W-2, 1099-Misc, 1099R, 1099-SSA, K-1, 1099G, etc. Provide details/amounts if missing forms.

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| <input type="checkbox"/> Advertising | <input type="checkbox"/> Legal & Professional Services |
| <input type="checkbox"/> Office Supplies | <input type="checkbox"/> Office/Building Rent |
| <input type="checkbox"/> Equipment Rent | <input type="checkbox"/> Repairs/Maintenance/Cleaning |
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| <input type="checkbox"/> Out of Town Travel | <input type="checkbox"/> Meals & Entertainment |
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Did your business:

- Yes No Use an Automobile? Type: _____
Business miles 1/1-6/30: _____ 7/1-12/31: _____;
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- Yes No Have a home office? Must be Regular & Exclusive.
Sq Ft: _____ Sq Ft of entire home: _____
- Yes No Acquire or dispose of Tools/Equipment/Assets? *Please provide Invoice/Bill of Sale.*
- Yes No Pay any service providers, contractors, or casual labor?
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- Yes No Have more than one owner?
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Separate Business Address: _____

Method of Accounting: Cash Accrual Other/Not SureCould this be considered a Hobby? Yes No Not Sure

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Call (770)704-7777 to schedule an appointment. Please complete as much as possible prior to your appointment.

Personal Information ~ Provide SS Cards & Driver's Licenses:

Your Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Spouse's Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

1) _____

2) _____

3) _____

Yes No Could anyone else claim any of your dependents?

Yes No Any Child Care costs? If "Yes", provide amounts paid, care provider name(s), EIN's, and address(es) for EACH dependent.

Regular Income: Please attach Forms W-2, 1099-Misc, 1099R, 1099-SSA, K-1, 1099G, etc. Provide details/amounts if missing forms.

Yes No Wages, tips, etc. from job(s)? (W-2)

Yes No Interest from banks, bonds, other? (1099-INT)

Yes No Dividends? (1099-DIV)

Yes No Did you receive any tax refunds in 2022?

Yes No Alimony Paid/Received? \$ _____

Yes No Sell, buy or trade any assets, stocks, bonds, mutual funds, or other assets? (1099-B).

Yes No Distributions from 401(k), IRA, Pension, Annuity, etc.? (1099-R)

Yes No Spend, Receive, Sell, Exchange, Acquire, or Mine any Virtual Currency such as Bitcoin, Ethereum, etc?

Yes No Own any rental property including a vacation home?

Yes No Unemployment Income? (1099-G)

Yes No Social Security Benefits? (1099-SSA)

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Yes No Any small business income/loss from an S-Corp, Partnership, LLC, Sole Proprietor? (K-1, 1099-Misc, 1099-K)

Yes No Did you sell anything online: Craigslist, eBay, FB Marketplace, etc. (1099K)?

Yes No Any other income, e.g. Uber/Lyft, Crowdfunding, other? Please explain:

General Questions:

Yes No Direct Deposit your refund into your bank account? *Must attach a voided check.* Otherwise you will receive refund checks. Amounts due will NOT be drafted from your account.

Yes No Did you file 2021 tax return? **Provide Copy/PDF.**

Yes No Do you or your spouse owe any back taxes?

Please note, to avoid penalty, you must pay all taxes due by April 18th. An extension only grants more time to file, not to pay.

Yes No Did your address change? Please attach.

Yes No At any time during 2022 did you have any financial interest or signature authority over a foreign financial account, including overseas gaming?

Yes No During 2022, did you receive a distribution from, were the grantor of, or transferor to a foreign trust?

How would you like to receive your copy of the completed tax return?

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Other Special Situations: May require detailed documentation

Yes No Pay any Estimated Tax Payments? Please list amounts, dates, and to whom paid (GA, IRS, etc.)

Yes No Any births or deaths in your household? Did any children cease to be your dependents in 2022?

Yes No Did your marital status change during 2022?

Yes No Did you earn income in another state or country?

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Yes No Do you have a Health Savings Account? (1099-SA)

Yes No Pay any Household Employees such as gardeners, housekeepers, nannies, etc.?

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Expenses/Deductions:

- Yes No IRA Contribution: Traditional Roth SEP Other
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Address: _____

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Occupation: _____ Blind? Disabled?
Phone: _____
Email: _____
Spouse's Full Name: _____
Occupation: _____ Blind? Disabled?
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| <input type="checkbox"/> Other Expenses (list) | <input type="checkbox"/> Inventory W/D for Personal Use |

Did your business:

- Yes No Use an Automobile? Type: _____
Business miles 1/1-6/30: _____ 7/1-12/31: _____;
Personal miles: _____
- Yes No Have a home office? Must be Regular & Exclusive.
Sq Ft: _____ Sq Ft of entire home: _____
- Yes No Acquire or dispose of Tools/Equipment/Assets? *Please provide Invoice/Bill of Sale.*
- Yes No Pay any service providers, contractors, or casual labor?
 Yes No If "Yes", would you like us to issue 1099's?
- Yes No Have Inventory on hand December 31, 2022?
- Yes No Pay wages to W-2 type employees?
- Yes No Receive EIDL, PPP, SBA Loan, etc.?
- Yes No Make or receive any loans/leases/notes or payments?
- Yes No Engage in Bartering?
- Yes No Have more than one owner?
- Yes No Is this business an LLC? If "Yes" please provide LLC Articles of Organization and Operating Agreement.

Separate Business Address: _____

Method of Accounting: Cash Accrual Other/Not SureCould this be considered a Hobby? Yes No Not Sure

How many hours did you "participate" (work) in the business operations during 2022? 500+ annual hours may be needed: _____

*Celebrating
21 Years!
2002 - 2023*

Please attach additional sheets for any other information you need to provide.
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Phone: 770-704-7777 - Email: info@taxsmart1040.com

TaxSmart Business Services – 2022 Income Tax Organizer

Call (770)704-7777 to schedule an appointment. Please complete as much as possible prior to your appointment.

Personal Information ~ Provide SS Cards & Driver's Licenses:

Your Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Spouse's Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

1) _____

2) _____

3) _____

Yes No Could anyone else claim any of your dependents?

Yes No Any Child Care costs? If "Yes", provide amounts paid, care provider name(s), EIN's, and address(es) for EACH dependent.

Regular Income: Please attach Forms W-2, 1099-Misc, 1099R, 1099-SSA, K-1, 1099G, etc. Provide details/amounts if missing forms.

Yes No Wages, tips, etc. from job(s)? (W-2)

Yes No Interest from banks, bonds, other? (1099-INT)

Yes No Dividends? (1099-DIV)

Yes No Did you receive any tax refunds in 2022?

Yes No Alimony Paid/Received? \$ _____

Yes No Sell, buy or trade any assets, stocks, bonds, mutual funds, or other assets? (1099-B).

Yes No Distributions from 401(k), IRA, Pension, Annuity, etc.? (1099-R)

Yes No Spend, Receive, Sell, Exchange, Acquire, or Mine any Virtual Currency such as Bitcoin, Ethereum, etc?

Yes No Own any rental property including a vacation home?

Yes No Unemployment Income? (1099-G)

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Yes No Any small business income/loss from an S-Corp, Partnership, LLC, Sole Proprietor? (K-1, 1099-Misc, 1099-K)

Yes No Did you sell anything online: Craigslist, eBay, FB Marketplace, etc. (1099K)?

Yes No Any other income, e.g. Uber/Lyft, Crowdfunding, other? Please explain:

General Questions:

Yes No Direct Deposit your refund into your bank account? *Must attach a voided check.* Otherwise you will receive refund checks. Amounts due will NOT be drafted from your account.

Yes No Did you file 2021 tax return? **Provide Copy/PDF.**

Yes No Do you or your spouse owe any back taxes?

Please note, to avoid penalty, you must pay all taxes due by April 18th. An extension only grants more time to file, not to pay.

Other Special Situations: May require detailed documentation

Yes No Pay any Estimated Tax Payments? Please list amounts, dates, and to whom paid (GA, IRS, etc.)

Yes No Any births or deaths in your household? Did any children cease to be your dependents in 2022?

Yes No Did your marital status change during 2022?

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Paper Copy Digital/PDF Copy

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Yes No Did your child (under age 24) have any investment income? Please attach 1099's and/or tax return.

Yes No An Armed Forces Reservist, Qualified Performing Artist, or Government Fee Basis Official?

Yes No Do you have a Health Savings Account? (1099-SA)

Yes No Pay any Household Employees such as gardeners, housekeepers, nannies, etc.?

Yes No Do you expect a substantial change in your income or deductions next year (2023)? Please attach explanation:

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Expenses/Deductions:

- Yes No IRA Contribution: Traditional Roth SEP Other
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- Yes No After-tax Health Insurance, including Medicare?
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- Yes No Qualified Charitable Distribution from IRA.

Other Miscellaneous Items:

- Yes No Install an electric vehicle charger in your home?
- Yes No Rollover \$\$\$ from an IRA, 401(k), Annuity, etc.?
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- Yes No Unreimbursed Educator Expenses (K-12 only)?

Rental Property:

- Yes No First Placed in Service in 2022? If "Yes", please provide appraisal and settlement statements.
- Yes No Disposed/Stopped Renting during 2022?

Type of Rental: _____

Address: _____

Days Rented: _____ Days Vacant/Empty: _____

Personal use days (self, friends, family): _____

Average length of rental stay (in days): _____

Hours you & your spouse worked on rental: _____

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Date Business Started: _____

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| <input type="checkbox"/> Office Supplies | <input type="checkbox"/> Office/Building Rent |
| <input type="checkbox"/> Equipment Rent | <input type="checkbox"/> Repairs/Maintenance/Cleaning |
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<p>Personal Information ~ Provide SS Cards & Driver's Licenses:</p> <p>Your Full Name: _____</p> <p>Occupation: _____ <input type="checkbox"/> Blind? <input type="checkbox"/> Disabled?</p> <p>Phone: _____</p> <p>Email: _____</p> <p>Spouse's Full Name: _____</p> <p>Occupation: _____ <input type="checkbox"/> Blind? <input type="checkbox"/> Disabled?</p> <p>Phone: _____</p> <p>Email: _____</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Sure: Do you want to file a joint return?</p>	<p>Dependent Information (Children, Parents, others):</p> <p style="text-align: center;">Provide SS Card & Proof of Residency for each dependent.</p> <p>Full Name – DOB – Relationship - College Student? - 2022 Income?</p> <p>1) _____</p> <p>2) _____</p> <p>3) _____</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Could anyone else claim any of your dependents?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Any Child Care costs? If "Yes", provide amounts paid, care provider name(s), EIN's, and address(es) for EACH dependent.</p>
<p>Regular Income: Please attach Forms W-2, 1099-Misc, 1099R, 1099-SSA, K-1, 1099G, etc. Provide details/amounts if missing forms.</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Wages, tips, etc. from job(s)? (W-2)</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Interest from banks, bonds, other? (1099-INT)</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Dividends? (1099-DIV)</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Did you receive any tax refunds in 2022?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Alimony Paid/Received? \$ _____</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Sell, buy or trade any assets, stocks, bonds, mutual funds, or other assets? (1099-B).</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Distributions from 401(k), IRA, Pension, Annuity, etc.? (1099-R)</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Spend, Receive, Sell, Exchange, Acquire, or Mine any Virtual Currency such as Bitcoin, Ethereum, etc?</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No Own any rental property including a vacation home?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Unemployment Income? (1099-G)</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Social Security Benefits? (1099-SSA)</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Gambling Income and Related Expenses? (W2G)</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Cancellation of Debt/Foreclosure? (1099-A or -C)</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Any small business income/loss from an S-Corp, Partnership, LLC, Sole Proprietor? (K-1, 1099-Misc, 1099-K)</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Did you sell anything online: Craigslist, eBay, FB Marketplace, etc. (1099K)?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Any other income, e.g. Uber/Lyft, Crowdfunding, other? Please explain:</p>
<p>General Questions:</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Direct Deposit your refund into your bank account? <i>Must attach a voided check.</i> Otherwise you will receive refund checks. Amounts due will NOT be drafted from your account.</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Did you file 2021 tax return? Provide Copy/PDF.</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Do you or your spouse owe any back taxes?</p> <p>Please note, to avoid penalty, you must pay all taxes due by April 18th. An extension only grants more time to file, not to pay.</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No Did your address change? Please attach.</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No At any time during 2022 did you have any financial interest or signature authority over a foreign financial account, including overseas gaming?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No During 2022, did you receive a distribution from, were the grantor of, or transferor to a foreign trust?</p> <p>How would you like to receive your copy of the completed tax return?</p> <p><input type="checkbox"/> Paper Copy <input type="checkbox"/> Digital/PDF Copy</p>
<p>Other Special Situations: May require detailed documentation</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Pay any Estimated Tax Payments? Please list amounts, dates, and to whom paid (GA, IRS, etc.)</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Any births or deaths in your household? Did any children cease to be your dependents in 2022?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Did your marital status change during 2022?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Did you earn income in another state or country?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Did you buy, sell or refinance (including loan modification) property in 2022? If yes, attach closing statements.</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No During 2022, were there any changes to federal or state tax returns filed in prior years? Please attach notices.</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Did you suffer a casualty or loss in 2022 in a presidentially declared disaster area? www.fema.gov/disasters</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Receive any hobby income?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Moving Expenses? (Only for active military)</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No College expenses for self, spouse or dependent?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Have any Unreimbursed Partnership Expenses in 2022?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Have an IRS IP-PIN for self, spouse, or dependent?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Did you pay any foreign taxes in 2022?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Did you adopt a child in 2022?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Did your child (under age 24) have any investment income? Please attach 1099's and/or tax return.</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No An Armed Forces Reservist, Qualified Performing Artist, or Government Fee Basis Official?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Do you have a Health Savings Account? (1099-SA)</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Pay any Household Employees such as gardeners, housekeepers, nannies, etc.?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Do you expect a substantial change in your income or deductions next year (2023)? Please attach explanation:</p>

(Continued on reverse)

Expenses/Deductions:

- Yes No IRA Contribution: Traditional Roth SEP Other
Self \$ _____ Spouse \$ _____
- Yes No Penalty on early withdrawal from CD? \$ _____
- Yes No Student Loan interest paid? _____

Medical Expenses:

- Yes No After-tax Health Insurance, including Medicare?
- Yes No Did anyone in your family receive health insurance from HealthCare.gov or other state run Marketplace? (Form 1095)
- Yes No Are you part of a Healthcare Sharing Ministry?
- Yes No Did you pay Long Term Care Insurance premiums?
- Yes No Any out of pocket medical expenses: Doctors, Dentist, Rx, Nursing Homes, Medical Mileage, etc.? Please list.

Taxes & Interest Expenses:

- Yes No Do you own your own home?
- Yes No Real Estate Taxes (Form 1098 or other)?
- Yes No Mortgage Interest/Points Paid (Form 1098)?
- Yes No Did you purchase a boat, airplane, RV, etc.?
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Gifts to Charity *Documentation required for all donations:*

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- Yes No Non-Cash Gifts i.e. Household items to Goodwill?
- Yes No Miles driven for charity?
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- Yes No Qualified Charitable Distribution from IRA.

Other Miscellaneous Items:

- Yes No Install an electric vehicle charger in your home?
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- Yes No Receive an inheritance (Sch K-1)?
- Yes No Make gifts totaling \geq \$16,000 to one person?
- Yes No Did you contribute to a 529 College Savings Plan?
- Yes No Unreimbursed Educator Expenses (K-12 only)?

Rental Property:

- Yes No First Placed in Service in 2022? If "Yes", please provide appraisal and settlement statements.
- Yes No Disposed/Stopped Renting during 2022?

Type of Rental: _____

Address: _____

Days Rented: _____ Days Vacant/Empty: _____

Personal use days (self, friends, family): _____

Average length of rental stay (in days): _____

Hours you & your spouse worked on rental: _____

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|--|--|
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Your Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Spouse's Full Name: _____

Occupation: _____ Blind? Disabled?

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Email: _____

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Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

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Yes No Could anyone else claim any of your dependents?

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Yes No Receive an inheritance (Sch K-1)?

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Yes No Did you contribute to a 529 College Savings Plan?

Yes No Unreimbursed Educator Expenses (K-12 only)?

Rental Property:

Yes No First Placed in Service in 2022? If "Yes", please provide appraisal and settlement statements.

Yes No Disposed/Stopped Renting during 2022?

Type of Rental: _____

Address: _____

Days Rented: _____ Days Vacant/Empty: _____

Personal use days (self, friends, family): _____

Average length of rental stay (in days): _____

Hours you & your spouse worked on rental: _____

Small Business or Farming

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Nature of Business: _____

Date Business Started: _____

Which of the following expenses did your business have in 2022?

Inventory Purchases Interest paid on business loans

Contract Labor Insurance (Not Health)

Advertising Legal & Professional Services

Office Supplies Office/Building Rent

Equipment Rent Repairs/Maintenance/Cleaning

Supplies Taxes & Licenses

Out of Town Travel Meals & Entertainment

Utilities (not home) Wages paid to Employees

Telephone Commissions & Fees

Postage Employee Benefits

Auto/Truck Expenses Pension & Profit Sharing

Other Expenses (list) Inventory W/D for Personal Use

Did your business:

Yes No Use an Automobile? Type: _____
Business miles 1/1-6/30: _____ 7/1-12/31: _____;

Personal miles: _____

Yes No Have a home office? Must be Regular & Exclusive.

Sq Ft: _____ Sq Ft of entire home: _____

Yes No Acquire or dispose of Tools/Equipment/Assets? *Please provide Invoice/Bill of Sale.*

Yes No Pay any service providers, contractors, or casual labor?

Yes No If "Yes", would you like us to issue 1099's?

Yes No Have Inventory on hand December 31, 2022?

Yes No Pay wages to W-2 type employees?

Yes No Receive EIDL, PPP, SBA Loan, etc.?

Yes No Make or receive any loans/leases/notes or payments?

Yes No Engage in Bartering?

Yes No Have more than one owner?

Yes No Is this business an LLC? If "Yes" please provide LLC Articles of Organization and Operating Agreement.

Separate Business Address: _____

Method of Accounting: Cash Accrual Other/Not Sure

Could this be considered a Hobby? Yes No Not Sure

How many hours did you "participate" (work) in the business operations during 2022? 500+ annual hours may be needed: _____

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Personal Information ~ Provide SS Cards & Driver's Licenses:

Your Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Spouse's Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

1) _____

2) _____

3) _____

Yes No Could anyone else claim any of your dependents?

Yes No Any Child Care costs? If "Yes", provide amounts paid, care provider name(s), EIN's, and address(es) for EACH dependent.

Regular Income: Please attach Forms W-2, 1099-Misc, 1099R, 1099-SSA, K-1, 1099G, etc. Provide details/amounts if missing forms.

Yes No Wages, tips, etc. from job(s)? (W-2)

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Yes No Spend, Receive, Sell, Exchange, Acquire, or Mine any Virtual Currency such as Bitcoin, Ethereum, etc?

Yes No Own any rental property including a vacation home?

Yes No Unemployment Income? (1099-G)

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| <input type="checkbox"/> Supplies | <input type="checkbox"/> Taxes & Licenses |
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| <input type="checkbox"/> Utilities (not home) | <input type="checkbox"/> Wages paid to Employees |
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- Yes No Use an Automobile? Type: _____
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Your Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

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Dependent Information (Children, Parents, others):

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Full Name – DOB – Relationship - College Student? - 2022 Income?

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Taxes & Interest Expenses:

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Did your business:

- Yes No Use an Automobile? Type: _____
Business miles 1/1-6/30: _____ 7/1-12/31: _____;
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- Yes No Have a home office? Must be Regular & Exclusive.
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- Yes No Acquire or dispose of Tools/Equipment/Assets? *Please provide Invoice/Bill of Sale.*
- Yes No Pay any service providers, contractors, or casual labor?
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- Yes No Engage in Bartering?
- Yes No Have more than one owner?
- Yes No Is this business an LLC? If "Yes" please provide LLC Articles of Organization and Operating Agreement.

Separate Business Address: _____

Method of Accounting: Cash Accrual Other/Not SureCould this be considered a Hobby? Yes No Not Sure

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Phone: 770-704-7777 - Email: info@taxsmart1040.com

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Call (770)704-7777 to schedule an appointment. Please complete as much as possible prior to your appointment.

Personal Information ~ Provide SS Cards & Driver's Licenses:

Your Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Spouse's Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

1) _____

2) _____

3) _____

Yes No Could anyone else claim any of your dependents?

Yes No Any Child Care costs? If "Yes", provide amounts paid, care provider name(s), EIN's, and address(es) for EACH dependent.

Regular Income: Please attach Forms W-2, 1099-Misc, 1099R, 1099-SSA, K-1, 1099G, etc. Provide details/amounts if missing forms.

Yes No Wages, tips, etc. from job(s)? (W-2)

Yes No Interest from banks, bonds, other? (1099-INT)

Yes No Dividends? (1099-DIV)

Yes No Did you receive any tax refunds in 2022?

Yes No Alimony Paid/Received? \$ _____

Yes No Sell, buy or trade any assets, stocks, bonds, mutual funds, or other assets? (1099-B).

Yes No Distributions from 401(k), IRA, Pension, Annuity, etc.? (1099-R)

Yes No Spend, Receive, Sell, Exchange, Acquire, or Mine any Virtual Currency such as Bitcoin, Ethereum, etc?

Yes No Own any rental property including a vacation home?

Yes No Unemployment Income? (1099-G)

Yes No Social Security Benefits? (1099-SSA)

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Yes No Any small business income/loss from an S-Corp, Partnership, LLC, Sole Proprietor? (K-1, 1099-Misc, 1099-K)

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General Questions:

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Please note, to avoid penalty, you must pay all taxes due by April 18th. An extension only grants more time to file, not to pay.

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How would you like to receive your copy of the completed tax return?

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Yes No Pay any Estimated Tax Payments? Please list amounts, dates, and to whom paid (GA, IRS, etc.)

Yes No Any births or deaths in your household? Did any children cease to be your dependents in 2022?

Yes No Did your marital status change during 2022?

Yes No Did you earn income in another state or country?

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Yes No Pay any Household Employees such as gardeners, housekeepers, nannies, etc.?

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Expenses/Deductions:

- Yes No IRA Contribution: Traditional Roth SEP Other
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- Yes No After-tax Health Insurance, including Medicare?
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- Yes No Have Inventory on hand December 31, 2022?
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- Yes No Receive EIDL, PPP, SBA Loan, etc.?
- Yes No Make or receive any loans/leases/notes or payments?
- Yes No Engage in Bartering?
- Yes No Have more than one owner?
- Yes No Is this business an LLC? If "Yes" please provide LLC Articles of Organization and Operating Agreement.

Separate Business Address: _____

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21 Years!
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Phone: 770-704-7777 - Email: info@taxsmart1040.com

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Call (770)704-7777 to schedule an appointment. Please complete as much as possible prior to your appointment.

Personal Information ~ Provide SS Cards & Driver's Licenses:

Your Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Spouse's Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

1) _____

2) _____

3) _____

Yes No Could anyone else claim any of your dependents?

Yes No Any Child Care costs? If "Yes", provide amounts paid, care provider name(s), EIN's, and address(es) for EACH dependent.

Regular Income: Please attach Forms W-2, 1099-Misc, 1099R, 1099-SSA, K-1, 1099G, etc. Provide details/amounts if missing forms.

Yes No Wages, tips, etc. from job(s)? (W-2)

Yes No Interest from banks, bonds, other? (1099-INT)

Yes No Dividends? (1099-DIV)

Yes No Did you receive any tax refunds in 2022?

Yes No Alimony Paid/Received? \$ _____

Yes No Sell, buy or trade any assets, stocks, bonds, mutual funds, or other assets? (1099-B).

Yes No Distributions from 401(k), IRA, Pension, Annuity, etc.? (1099-R)

Yes No Spend, Receive, Sell, Exchange, Acquire, or Mine any Virtual Currency such as Bitcoin, Ethereum, etc?

Yes No Own any rental property including a vacation home?

Yes No Unemployment Income? (1099-G)

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- Yes No IRA Contribution: Traditional Roth SEP Other
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- Yes No After-tax Health Insurance, including Medicare?
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- Yes No Cash/Checks/Money etc.
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Address: _____

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- Yes No Use an Automobile? Type: _____
Business miles 1/1-6/30: _____ 7/1-12/31: _____;
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Phone: 770-704-7777 - Email: info@taxsmart1040.com

TaxSmart Business Services – 2022 Income Tax Organizer

Call (770)704-7777 to schedule an appointment. Please complete as much as possible prior to your appointment.

Personal Information ~ Provide SS Cards & Driver's Licenses:

Your Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Spouse's Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

1) _____

2) _____

3) _____

Yes No Could anyone else claim any of your dependents?

Yes No Any Child Care costs? If "Yes", provide amounts paid, care provider name(s), EIN's, and address(es) for EACH dependent.

Regular Income: Please attach Forms W-2, 1099-Misc, 1099R, 1099-SSA, K-1, 1099G, etc. Provide details/amounts if missing forms.

Yes No Wages, tips, etc. from job(s)? (W-2)

Yes No Interest from banks, bonds, other? (1099-INT)

Yes No Dividends? (1099-DIV)

Yes No Did you receive any tax refunds in 2022?

Yes No Alimony Paid/Received? \$ _____

Yes No Sell, buy or trade any assets, stocks, bonds, mutual funds, or other assets? (1099-B).

Yes No Distributions from 401(k), IRA, Pension, Annuity, etc.? (1099-R)

Yes No Spend, Receive, Sell, Exchange, Acquire, or Mine any Virtual Currency such as Bitcoin, Ethereum, etc?

Yes No Own any rental property including a vacation home?

Yes No Unemployment Income? (1099-G)

Yes No Social Security Benefits? (1099-SSA)

Yes No Gambling Income and Related Expenses? (W2G)

Yes No Cancellation of Debt/Foreclosure? (1099-A or -C)

Yes No Any small business income/loss from an S-Corp, Partnership, LLC, Sole Proprietor? (K-1, 1099-Misc, 1099-K)

Yes No Did you sell anything online: Craigslist, eBay, FB Marketplace, etc. (1099K)?

Yes No Any other income, e.g. Uber/Lyft, Crowdfunding, other? Please explain:

General Questions:

Yes No Direct Deposit your refund into your bank account? *Must attach a voided check.* Otherwise you will receive refund checks. Amounts due will NOT be drafted from your account.

Yes No Did you file 2021 tax return? **Provide Copy/PDF.**

Yes No Do you or your spouse owe any back taxes?

Please note, to avoid penalty, you must pay all taxes due by April 18th. An extension only grants more time to file, not to pay.

Other Special Situations: May require detailed documentation

Yes No Pay any Estimated Tax Payments? Please list amounts, dates, and to whom paid (GA, IRS, etc.)

Yes No Any births or deaths in your household? Did any children cease to be your dependents in 2022?

Yes No Did your marital status change during 2022?

Yes No Did you earn income in another state or country?

Yes No Did you buy, sell or refinance (including loan modification) property in 2022? If yes, attach closing statements.

Yes No During 2022, were there any changes to federal or state tax returns filed in prior years? Please attach notices.

Yes No Did you suffer a casualty or loss in 2022 in a presidentially declared disaster area? www.fema.gov/disasters

Yes No Receive any hobby income?

Yes No Moving Expenses? (Only for active military)

Yes No Did your address change? Please attach.

Yes No At any time during 2022 did you have any financial interest or signature authority over a foreign financial account, including overseas gaming?

Yes No During 2022, did you receive a distribution from, were the grantor of, or transferor to a foreign trust?

How would you like to receive your copy of the completed tax return?

Paper Copy Digital/PDF Copy

Yes No College expenses for self, spouse or dependent?

Yes No Have any Unreimbursed Partnership Expenses in 2022?

Yes No Have an IRS IP-PIN for self, spouse, or dependent?

Yes No Did you pay any foreign taxes in 2022?

Yes No Did you adopt a child in 2022?

Yes No Did your child (under age 24) have any investment income? Please attach 1099's and/or tax return.

Yes No An Armed Forces Reservist, Qualified Performing Artist, or Government Fee Basis Official?

Yes No Do you have a Health Savings Account? (1099-SA)

Yes No Pay any Household Employees such as gardeners, housekeepers, nannies, etc.?

Yes No Do you expect a substantial change in your income or deductions next year (2023)? Please attach explanation:

(Continued on reverse)

Expenses/Deductions:

- Yes No IRA Contribution: Traditional Roth SEP Other
Self \$ _____ Spouse \$ _____
- Yes No Penalty on early withdrawal from CD? \$ _____
- Yes No Student Loan interest paid? _____

Medical Expenses:

- Yes No After-tax Health Insurance, including Medicare?
- Yes No Did anyone in your family receive health insurance from HealthCare.gov or other state run Marketplace? (Form 1095)
- Yes No Are you part of a Healthcare Sharing Ministry?
- Yes No Did you pay Long Term Care Insurance premiums?
- Yes No Any out of pocket medical expenses: Doctors, Dentist, Rx, Nursing Homes, Medical Mileage, etc.? Please list.

Taxes & Interest Expenses:

- Yes No Do you own your own home?
- Yes No Real Estate Taxes (Form 1098 or other)?
- Yes No Mortgage Interest/Points Paid (Form 1098)?
- Yes No Did you purchase a boat, airplane, RV, etc.?
- Yes No Annual Ad Valorem Taxes on car, boat, etc.?
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Gifts to Charity *Documentation required for all donations:*

- Yes No Cash/Checks/Money etc.
- Yes No Non-Cash Gifts i.e. Household items to Goodwill?
- Yes No Miles driven for charity?
- Yes No Payroll Deductions of Charity, Union Dues, other?
- Yes No Qualified Charitable Distribution from IRA.

Other Miscellaneous Items:

- Yes No Install an electric vehicle charger in your home?
- Yes No Rollover \$\$\$ from an IRA, 401(k), Annuity, etc.?
- Yes No Receive an inheritance (Sch K-1)?
- Yes No Make gifts totaling \geq \$16,000 to one person?
- Yes No Did you contribute to a 529 College Savings Plan?
- Yes No Unreimbursed Educator Expenses (K-12 only)?

Rental Property:

- Yes No First Placed in Service in 2022? If "Yes", please provide appraisal and settlement statements.
- Yes No Disposed/Stopped Renting during 2022?

Type of Rental: _____

Address: _____

Days Rented: _____ Days Vacant/Empty: _____

Personal use days (self, friends, family): _____

Average length of rental stay (in days): _____

Hours you & your spouse worked on rental: _____

Small Business or Farming*Request our 2022 Business Tax Organizer for more in-depth checklist*

Nature of Business: _____

Date Business Started: _____

Which of the following expenses did your business have in 2022?

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- Yes No Use an Automobile? Type: _____
Business miles 1/1-6/30: _____ 7/1-12/31: _____;
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- Yes No Acquire or dispose of Tools/Equipment/Assets? *Please provide Invoice/Bill of Sale.*
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- Yes No Have more than one owner?
- Yes No Is this business an LLC? If "Yes" please provide LLC Articles of Organization and Operating Agreement.

Separate Business Address: _____

Method of Accounting: Cash Accrual Other/Not SureCould this be considered a Hobby? Yes No Not Sure

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Personal Information ~ Provide SS Cards & Driver's Licenses:

Your Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Spouse's Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

1) _____

2) _____

3) _____

Yes No Could anyone else claim any of your dependents?

Yes No Any Child Care costs? If "Yes", provide amounts paid, care provider name(s), EIN's, and address(es) for EACH dependent.

Regular Income: Please attach Forms W-2, 1099-Misc, 1099R, 1099-SSA, K-1, 1099G, etc. Provide details/amounts if missing forms.

Yes No Wages, tips, etc. from job(s)? (W-2)

Yes No Interest from banks, bonds, other? (1099-INT)

Yes No Dividends? (1099-DIV)

Yes No Did you receive any tax refunds in 2022?

Yes No Alimony Paid/Received? \$ _____

Yes No Sell, buy or trade any assets, stocks, bonds, mutual funds, or other assets? (1099-B).

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Yes No Spend, Receive, Sell, Exchange, Acquire, or Mine any Virtual Currency such as Bitcoin, Ethereum, etc?

Yes No Own any rental property including a vacation home?

Yes No Unemployment Income? (1099-G)

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General Questions:

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Yes No Do you or your spouse owe any back taxes?

Please note, to avoid penalty, you must pay all taxes due by April 18th. An extension only grants more time to file, not to pay.

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Yes No Pay any Household Employees such as gardeners, housekeepers, nannies, etc.?

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- Yes No IRA Contribution: Traditional Roth SEP Other
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- Yes No Pay any service providers, contractors, or casual labor?
 Yes No If "Yes", would you like us to issue 1099's?
- Yes No Have Inventory on hand December 31, 2022?
- Yes No Pay wages to W-2 type employees?
- Yes No Receive EIDL, PPP, SBA Loan, etc.?
- Yes No Make or receive any loans/leases/notes or payments?
- Yes No Engage in Bartering?
- Yes No Have more than one owner?
- Yes No Is this business an LLC? If "Yes" please provide LLC Articles of Organization and Operating Agreement.

Separate Business Address: _____

Method of Accounting: Cash Accrual Other/Not SureCould this be considered a Hobby? Yes No Not Sure

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21 Years!
2002 - 2023*

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Phone: 770-704-7777 - Email: info@taxsmart1040.com

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Call (770)704-7777 to schedule an appointment. Please complete as much as possible prior to your appointment.

Personal Information ~ Provide SS Cards & Driver's Licenses:

Your Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Spouse's Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

1) _____

2) _____

3) _____

Yes No Could anyone else claim any of your dependents?

Yes No Any Child Care costs? If "Yes", provide amounts paid, care provider name(s), EIN's, and address(es) for EACH dependent.

Regular Income: Please attach Forms W-2, 1099-Misc, 1099R, 1099-SSA, K-1, 1099G, etc. Provide details/amounts if missing forms.

Yes No Wages, tips, etc. from job(s)? (W-2)

Yes No Interest from banks, bonds, other? (1099-INT)

Yes No Dividends? (1099-DIV)

Yes No Did you receive any tax refunds in 2022?

Yes No Alimony Paid/Received? \$ _____

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Yes No Distributions from 401(k), IRA, Pension, Annuity, etc.? (1099-R)

Yes No Spend, Receive, Sell, Exchange, Acquire, or Mine any Virtual Currency such as Bitcoin, Ethereum, etc?

Yes No Own any rental property including a vacation home?

Yes No Unemployment Income? (1099-G)

Yes No Social Security Benefits? (1099-SSA)

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Yes No Pay any Household Employees such as gardeners, housekeepers, nannies, etc.?

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- Yes No IRA Contribution: Traditional Roth SEP Other
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- Yes No Use an Automobile? Type: _____
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TaxSmart Business Services - (125 Barrett Road) PO Box 280, Holly Springs, GA, 30142

Phone: 770-704-7777 - Email: info@taxsmart1040.com

TaxSmart Business Services – 2022 Income Tax Organizer

Call (770)704-7777 to schedule an appointment. Please complete as much as possible prior to your appointment.

Personal Information ~ Provide SS Cards & Driver's Licenses:

Your Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Spouse's Full Name: _____

Occupation: _____ Blind? Disabled?

Phone: _____

Email: _____

Yes No Not Sure: Do you want to file a joint return?

Dependent Information (Children, Parents, others):

Provide SS Card & Proof of Residency for each dependent.

Full Name – DOB – Relationship - College Student? - 2022 Income?

1) _____

2) _____

3) _____

Yes No Could anyone else claim any of your dependents?

Yes No Any Child Care costs? If "Yes", provide amounts paid, care provider name(s), EIN's, and address(es) for EACH dependent.

Regular Income: Please attach Forms W-2, 1099-Misc, 1099R, 1099-SSA, K-1, 1099G, etc. Provide details/amounts if missing forms.

Yes No Wages, tips, etc. from job(s)? (W-2)

Yes No Interest from banks, bonds, other? (1099-INT)

Yes No Dividends? (1099-DIV)

Yes No Did you receive any tax refunds in 2022?

Yes No Alimony Paid/Received? \$ _____

Yes No Sell, buy or trade any assets, stocks, bonds, mutual funds, or other assets? (1099-B).

Yes No Distributions from 401(k), IRA, Pension, Annuity, etc.? (1099-R)

Yes No Spend, Receive, Sell, Exchange, Acquire, or Mine any Virtual Currency such as Bitcoin, Ethereum, etc?

Yes No Own any rental property including a vacation home?

Yes No Unemployment Income? (1099-G)

Yes No Social Security Benefits? (1099-SSA)

Yes No Gambling Income and Related Expenses? (W2G)

Yes No Cancellation of Debt/Foreclosure? (1099-A or -C)

Yes No Any small business income/loss from an S-Corp, Partnership, LLC, Sole Proprietor? (K-1, 1099-Misc, 1099-K)

Yes No Did you sell anything online: Craigslist, eBay, FB Marketplace, etc. (1099K)?

Yes No Any other income, e.g. Uber/Lyft, Crowdfunding, other? Please explain:

General Questions:

Yes No Direct Deposit your refund into your bank account? *Must attach a voided check.* Otherwise you will receive refund checks. Amounts due will NOT be drafted from your account.

Yes No Did you file 2021 tax return? **Provide Copy/PDF.**

Yes No Do you or your spouse owe any back taxes?

Please note, to avoid penalty, you must pay all taxes due by April 18th. An extension only grants more time to file, not to pay.

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Yes No Pay any Estimated Tax Payments? Please list amounts, dates, and to whom paid (GA, IRS, etc.)

Yes No Any births or deaths in your household? Did any children cease to be your dependents in 2022?

Yes No Did your marital status change during 2022?

Yes No Did you earn income in another state or country?

Yes No Did you buy, sell or refinance (including loan modification) property in 2022? If yes, attach closing statements.

Yes No During 2022, were there any changes to federal or state tax returns filed in prior years? Please attach notices.

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Yes No Do you have a Health Savings Account? (1099-SA)

Yes No Pay any Household Employees such as gardeners, housekeepers, nannies, etc.?

Yes No Do you expect a substantial change in your income or deductions next year (2023)? Please attach explanation:

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Expenses/Deductions:

- Yes No IRA Contribution: Traditional Roth SEP Other
Self \$ _____ Spouse \$ _____
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- Yes No After-tax Health Insurance, including Medicare?
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- Yes No Are you part of a Healthcare Sharing Ministry?
- Yes No Did you pay Long Term Care Insurance premiums?
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Gifts to Charity *Documentation required for all donations:*

- Yes No Cash/Checks/Money etc.
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- Yes No Make gifts totaling \geq \$16,000 to one person?
- Yes No Did you contribute to a 529 College Savings Plan?
- Yes No Unreimbursed Educator Expenses (K-12 only)?

Rental Property:

- Yes No First Placed in Service in 2022? If "Yes", please provide appraisal and settlement statements.
- Yes No Disposed/Stopped Renting during 2022?

Type of Rental: _____

Address: _____

Days Rented: _____ Days Vacant/Empty: _____

Personal use days (self, friends, family): _____

Average length of rental stay (in days): _____

Hours you & your spouse worked on rental: _____

Small Business or Farming*Request our 2022 Business Tax Organizer for more in-depth checklist*

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Date Business Started: _____

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