2022 Income Tax Organizer

FOR

CLIENT ORGANIZER

PREPARED BY

RJ CARUSO TAX & ACCOUNTING PO Box 2066 - 364 East Avenue OSWEGO, NY 13126 Phone: (315) 342-4900 Fax: (315) 342-5100 E-Mail: contact@rjcarusotax.com Websites: www.rjcarusotax.com

Appointment Date and Time ____ / ____ / ____ : ____ : ____



Dear Tax Client:

This letter is designed to help you gather information to prepare your 2022 income tax returns.

After much deliberation and analysis, we have determined that it is necessary to change our business model to better serve our clients in a more efficient manner. As a result, there will be very limited inperson meetings during tax season. However, you can schedule an in-person appointment with your tax advisor, for any questions or concerns you may have, from May 1 thru December 30 by calling the office weekdays from 8 AM to 4 PM.

As R J Caruso Tax & Accounting continues to grow, we have increased the number of tax professionals on our staff to try and meet the demand. They, along with Jason and Chad, will also assume Romey's workload as he transitions into retirement. We thank you for your patience while we work through this transition.

NYS SECURITY REQUIREMENT - TAXPAYER and SPOUSE (if filing jointly) MUST BRING IN THEIR **CURRENT DRIVER'S LICENSE** OR A CLEAR COPY (Front and Back).

PAYMENT FOR SERVICE – As a matter of transparency, we want to make our clients aware that, due to the ever-increasing costs of doing business, we have aligned our fees closer to the national average for personal income tax preparation. As such, most returns will result in a modest fee increase, but returns that generate several schedules or tax returns that are more complex could result in a substantial fee increase. However, to ease the burden of payment upon completion of the tax returns, we will now **accept payment by credit card** along with cash, check, E-Check or Venmo **@rjtax**).

DELIVERY OF TAX INFORMATION: You can submit your tax information to us by using: **U. S. Mail** (P.O. Box 2066, Oswego, NY 13126), **Private Carrier** (UPS, FedEx, DHL – 364 East Ave, Oswego, NY 13126), **Fax** (315-342-5100), **Email** (Each preparer has a separate Email address), **Upload from Website Portal** (rjcarusotax.com) *or* you can drop off.

Drop Off at The Office - The drop off window in the office lobby will be accessible Mon-Thurs: 8am to 7pm; Fri: 8am to 5pm; and Sat: 9am to 2pm, beginning Monday, January 30th. There is also a secure drop box located outside at the west end of the building behind the yellow guard posts next to the portable generator accessible 24 hours a day, 7 days per week.

PICK-UP AND APPOINTMENTS - Once your tax return(s) are finished, someone from our front office will contact you for pick-up. Please review the return(s) at home immediately upon receipt and if you have specific questions or concerns, a phone appointment can be scheduled. Your preparer or one of our staff members will contact you directly if there appears to be tax information missing or if there is a question, after an initial review of your tax documents.

INCOME DOCUMENTS - W-2 (Wages), W-2G (Gambling), 1099-NEC (Non-Employee Compensation), 1099-MISC (Rental, Prize Money, Other), 1099-R (Retirement), 1099-SSA (Social Security Benefits), 1099-INT (Interest Income) 1099-DIV (Dividend Income), 1099-B (Stock/Mutual Fund Sales – Also include date purchased and purchase amount for each sale), 1099-S (Real Estate Sales), 1099-A & 1099-C (Debt Cancellation), 1099-G (State Refunds & Unemployment Insurance – For NYS Unemployment Benefits you must download 1099-G from your Online Account).

DEDUCTION DOCUMENTS - 1098 (Mortgage Interest), 1098-E (Education Loan Interest), 1098-T (Tuition Payments), 1095-A (Marketplace Health Insurance Premiums - NYS Must Download 1095-A from your Online Account).

MISC. DOCUMENTS – K-1 Schedule (From S-Corp, Partnership, Trust or Estate), Closing Statement (Purchase or Sale of Real Estate), Property Tax Bills (County, School, City, Village, Town), Donations (Receipts, Cancelled Checks, Credit Card Statements), Private Mortgage (Name, Address, SS#, Amortization Schedule), Boat or RV as Second Residence (Bank Name, Address, Federal ID#, Interest Paid – No 1098 will be issued by Bank), Gross Revenue and Breakdown of Expenses (Self-Employed Business, Rental Activities, Farm).

DEPENDENT TAX RETURNS – No Charge, *except* there will be a **\$60.00** minimum fee for: **1**) non-New York State tax returns, **2**) stock or crypto sales requiring Schedule D to be filed, and/or **3**) a small business requiring Schedule C to be filed. Once your child is no longer a dependent, the normal tax preparation fee will be charged.

AMENDED RETURN - **\$75.00 minimum,** if due to additional information being presented or changes required after original return was E-filed.

ORGANIZER – If you would like our condensed Organizer, it can be down-loaded from our website (rjcarusotax.com) or emailed to you by calling the office during normal business hours. If you would like a complete organizer, they will be in your client portal by January 16th 2023 or you can call the office and have it emailed to you by calling the office during normal business hours. There will be a \$10.00 handling fee if mailed by USPS or private carrier.

Please fill in the information below so we can make sure your software record is up to date.

Address Change from 2021	
Taxpayer's Cell # ()	_Taxpayer's Email
Spouse's Cell # ()	_Spouse's Email
Taxpayer's Job Title	Spouse's Job Title
Thank-you for allowing us to prepare your	2022 personal income tax return(s).

Sincerely,

RJ CARUSO TAX & ACCOUNTING

ORGANIZ	ER		
2022	1040	US	Miscellaneous Questions
			If any of the following items pertain to you or your spouse for 2022, check the appropriate box and provide additional information if necessary.
	Yes	No	PERSONAL INFORMATION
			Did your marital status change during the year?
			Did your address change during the year?
			Could you be claimed as a dependent on another person's tax return for 2022?
			DEPENDENTS
			Were there any changes in dependents?
			Were any of your unmarried children who might be claimed as dependents 19 years of age or older at the end of 2022?
			Did you have any children under age 19 or full-time students under age 24 at the end of 2022, with interest and dividend income in excess of \$1,150, or total investment income in excess of \$2,300?
			HEALTH CARE COVERAGE
			Did you and your dependents have healthcare coverage for the full-year?
			Did you receive any of the following IRS Documents? Form 1095-A (Health Insurance Marketplace Statement), 1095-B (Health Coverage) or Form 1095-C (Employer Provided Health Insurance Offer and Coverage) If so, please attach.
			If you or your dependents did not have health care coverage during the year, do you fall into one of the following exemption categories: Indian tribe membership, health sharing ministry membership, religious sect membership, incarceration, exempt non-citizen or economic hardship? If you received an exemption certificate, please attach.
			INCOME
			Did you receive unreported tip income of \$20 or more in any month?
			Did you cash any Series EE U.S. savings bonds issued after 1989 and pay qualified higher education expenses for yourself, your spouse, or your dependents?
			Did you receive any disability income?

ORGANIZ	ER		
2022	1040	US	Miscellaneous Questions
			Did you have any foreign income or pay any foreign taxes?
			PURCHASES, SALES AND DEBT
			Did you start a business or farm, purchase rental or royalty property, or acquire an interest in a partnership, S corporation, trust, or REMIC?
			Did you purchase or dispose of any business assets (furniture, equipment, vehicles, real estate, etc.), or convert any personal assets to business use?
			Did you buy or sell any stocks, bonds or other investment property in 2022?
			Did you sell or do you plan to sell any dividend generating stocks or mutual funds during the first 60 days of 2023?
			Did you purchase, sell, or refinance your principal home or second home, or did you take a home equity loan?
			Did you purchase a home in 2022 and you were overseas on official extended duty?
			Did you make any residential energy-efficient improvements or purchases involving solar, wind, geothermal or fuel cell energy sources?
			Did you have any debts cancelled or forgiven?
			Does anyone owe you money which has become uncollectible?
			RETIREMENT PLANS
			Did you receive a distribution from a retirement plan (401(k), IRA, SEP, SIMPLE, Qualified Plan, etc.)?
			Did you make a contribution to a retirement plan (401(k), IRA, SEP, SIMPLE, Qualified Plan, etc.)?
			Did you transfer or rollover any amount from one retirement plan to another retirement plan?
			Did you convert part or all of your traditional, SEP, or SIMPLE IRA to a Roth IRA in 2022?
			EDUCATION
			Did you receive a distribution from an Education Savings Account or a Qualified Tuition Program?

ORGANIZ	ER		
2022	1040	US	Miscellaneous Questions
			Did you, your spouse, or a dependent incur any tuition expenses that are required to attend a college, university, or vocational school?
			ITEMIZED DEDUCTIONS
			Did you incur a loss because of damaged or stolen property?
			Did you work out of town for part of the year?
			Did you use your car on the job (other than to and from work)?
			ESTIMATED TAXES
			Did you apply an overpayment of 2021 taxes to your 2022 estimated tax (instead of being refunded)?
			If you have an overpayment of 2022 taxes, do you want the excess applied to your 2023 estimated tax (instead of being refunded)?
			Do you expect your 2023 taxable income and withholdings to be different from 2022?
			MISCELLANEOUS
			Do you want to electronically file your tax return?
			Do you want to allocate \$3 to the Presidential Election Campaign Fund?
			Does your spouse want to allocate \$3 to the Presidential Election Campaign Fund?
			May the IRS discuss your tax return with your preparer?
			Did you have an interest in or signature or other authority over a financial account in a foreign country, such as a bank account, securities account, or other financial account?
			Did you receive a distribution from, or were you the grantor of, or transferor to, a foreign trust or did you have an interest in any foreign assets or accounts?
			Was your home rented out or used for business?

ORGANIZ	ER		
2022	1040	US	Miscellaneous Questions
			Did you have a medical savings account (MSA), a Medicare + Choice MSA, or acquire an interest in an MSA or a Medicare + Choice MSA because of the death of the account holder? Or, were you a policyholder who received payments under a long-term care (LTC) insurance contract or received any accelerated death benefits from a life insurance policy?
			Did you incur moving expenses due to a change of employment?
			Did you engage the services of any household employees?
			Were you notified or audited by either the Internal Revenue Service or the State taxing agency?
			Did you or your spouse make any gifts to an individual that total more than \$16,000, or any gifts to a trust?
			Did your bank account information change within the last twelve months?

ORGANIZER							
2022 10	40	US	Tax Organizer				
36 09 T€ Fa	64 EAS SWEG elepho ax nun	ST AVE SO NY 13120 one number:	X & ACCOUNTING 3 315-342-4900 315-342-5100 contact@rjcarusotax.cd	Tax Return Appointment Date: Time: Location:			
L			•••	ng information necessary for the preparation			
of your 2022 tax return. Please enter all pertinent 2022 information. NOTE: If you claim the earned income credit, please provide proof that your child is a resident of the United States. This proof is typically in the form of: school records or statement, landlord or property management statement, health care provider statement, medical records, child care provider records, placement agency statement, social service records or statement, place of worship, Indian tribal office statement, or employer statement. NOTE: If your child is disabled, please provide one of the following forms of proof of disability: doctor statement, other health care provider statement, or social services agency or program statement.							
or social services age CLIENT INFC	-			Spause			
First name and initi Last name Title/suffix Social security num Occupation Date of birth (m/d/y Date of death (m/d/ 1=blind Home phone Work phone Work extension Cell phone E-mail address	ial nber /) /y)		S	Spouse			
DEPENDENT First name Last name Title/suffix Date of birth (m/d/y Date of death (m/d/y Date of adoption (m. Social security num Relationship	/) /) /d/y) hber		Dependent No.	Dependent No.			
Months lived at hor	ne		Dependent No.	Dependent No.			
First name Last name Title/suffix Date of birth (m/d/y Date of death (m/d/y Date of adoption (m. Social security num Relationship Months lived at hor	/) /) /d/y)						

	1040	US	Tax Or	ganizer			
	_	Pleas	se enter all j	pertinent 202	22 informat	ion. If you have attach	ned
		governme RIES AND		an Item, chec	CK THE DOX	and do not enter a 202	2 amount.
	r name:		IIF3			2022 Amount	2021 Amount
						Attach Forms W-2	
	EST INCO	OME					
ayer na	me:						
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22	1040	US	Tax Organizer		
MISC	ELLANEOU	JS INCOME			
		limony received			
	Spouse: Alin	nony received			
Other:					
			TRIBUTIONS	2022 Amount	2021 Amount
Тахра	-		utions (1=maximum)		
			(1=maximum)		
Spour		-			
Spous			(1=maximum)		
			, & qualified plan contributions (1=maximum)		
	Sell ellipio	yeu, sei , shiii ei			
OTH	ER GOVEF	RNMENT F	ORMS - DEDUCTIONS		
Fo	orm 1098-E -	Student Ioan	nterest	Attach Forms 1098	
Fo	orm 1098-T - 1	Tuition and re	lated expenses	Attach Forms 1096	
	ORDABLE				
			e Marketplace Statement		
			ge	Attach Forms 1095	
		mployer-Provid	ed Health Insurance Offer and Coverage		
Taxpa		haalth insurar	ce premiums		
		nts to income			
01					
Al	imony paid -	Recipient nan	ne & SSN		
Spous		haalth incuran			
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Al	imony paid -	Recipient nan	ne & SSN		
	51				
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other:					
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NIZER					
22	1040	US	Tax Organizer		
State State State City/lo City/lo State Use ta Use ta	income taxes - income taxes - cal income tax ocal income ta ocal income ta and local sale axes paid on 2 axes paid on 2	- paid with 202 - paid with 202 - paid for prior (ses - 1/22 payn (axes - paid with (axes - paid with (ses taxes (exce)) 2022 purchase 2021 state retu	1 state extension 1 state return years and/or to other states hent on 2021 city/local estimate h 2021 city/local extension h 2021 city/local return pt autos and special items) s	2022 Amount	2021 Amount
Sales Real e Real e Foreig	taxes paid or estate taxes - estate taxes - jn income taxe	n boats, aircra principal resic property held es	bove		
INTE	REST PAIL	D	Iding automobile fees in some states)	Attach Tax Notice	
	mongage inte	erest and poin	is hain:	Attach Forms 1098	
Home n	nortgage interest	not on Form 1098	(include name, SSN, & address of payee):		
-	-	-	post 12/31/06 contracts		
CAS	H CONTRI	BUTIONS n is allowed fo	r cash or check contributions unless the do he name of the organization, contribution d		
Numb NON	er of charitabl	le miles NTRIBUTIC	NS r contributions of clothing and household ite vith minimal monetary value may be denied	ems that are not in good used cor	ndition or better, in addition,
	a deduction	for any item v	vith minimal monetary value may be denied	-	·
Union Tax re Safe o Invest Estate	and profession eturn preparat deposit box re ment expense etax, section	ion fee ntal			
Other:	:				

	T DEPOSIT			-		nformation.			
1_direct de	eposit of federal t				· ·				
	ic payment of ba								
1=electroni	ic payment of est	timated tax.							
BANK	INFORMAT	ION							
			Percent					Type of	Туре о
Name of Bank		Deposi (xx.xx)	Routin	g Number	Account N	umber	Account (Table 1)	Invest. (Table 2	
2022 ES	STIMATED ⁻	TAX / 104	40-ES (6)						
Federal				Amount Paid		Date Paid	TS	2022 Voucher Am	ount
Overpayme	ent applied from	2021							
1st quarter	payment								
	er payment								
	r payment								
4th quarter	r payment								
	dditional Estimat	ted							
	Tax Payments								
Paid with e	extension								
Former spo	ouse SSN if joint e	estimates							
_								2022	
State			,	Amount Paid		Date Paid	TS	Voucher Am	ount
Overpayme	ent applied from 20								
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2nd quarter 3rd quarter 4th quarter	additional Estimat Tax Payment	ted		2		Γype of Investment			
2nd quarter 3rd quarter 4th quarter	Additional Estimat Tax Payments Extension	ted e of Account = Savings		1 = Checki	ing or savings (defa	ault) 6 = Coverd	lell savings accord	unt (ESA)	
2nd quarter 3rd quarter 4th quarter	Additional Estimat Tax Payments Extension	ted e of Account		1 = Checki 2 = Taxpay 3 = Spouse	ing or savings (def yer's IRA (next yea e's IRA (next year	ault) 6 = Coverd r limits) 7 = Other limits) 8 = Taxpay	er's IRA (current	t year limits)	
2nd quarter 3rd quarter 4th quarter	Additional Estimat Tax Payments Extension	ted e of Account = Savings		1 = Checki 2 = Taxpay 3 = Spouse	ing or savings (defa yer's IRA (next yea e's IRA (next year savings account (l	ault) 6 = Coverd r limits) 7 = Other limits) 8 = Taxpay	•	t year limits)	

	1040	US	Business Income (Sche	dule C)	No	1
Princi Princi Busin Busin	NERAL IN ipal business/p ipal business c ess name, if d ess address, it	FORMA rofession ode ifferent from different from	inent 2022 amounts. Last year's ar FION	mounts are provided f	or your reference.	
State	, if different fro	m Form 1040	040			
Foreig Foreig Emple	gn country oyer identificat	ion number .	· · · · · · · · · · · · · · · · · · ·			
Inven 1=cha 1=spo 1=firs If requi 1=not 1=did 1=per 1=inv 1=mir 1=sin	tory method: ange of invento buse, 2=joint it Schedule C f ired to file Form(s) a subject to sel not "materially rsonal services estment hister's Schedu gle member lir	I = cost, 2 = low ory method iled for this b 1099, did you o f-employmen y participate" is not a mat ile C nited liability	accrual ver cost/market, 3=other usiness will you file all required Form(s) 1099: 1=yes, 2=no tax erial income producing factor company commodities			
INC	OME			2022 Amount	2021 Amoun	+
Retur	-		99-MISC, box 7)			
	ST OF GC		LD			
Purch Cost (ases. of items for pe of labor ials and suppli	rsonal use				
Mater Other						

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

Other expenses:

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

2 1040	US	Rental & Royalty Inco	ome (Schedule E)	No 1
Please er	nter all pert	inent 2022 amounts. Last year	's amounts are provided for	your reference.
GENERAL II	NFORMA	ΓΙΟΝ	2022 Amount	2021 Amount
Description of prop	perty			Tune of Dreperty
Street address	5			Type of Property
City.				1 = Single Family Residence 2 = Multi-Family Residence
State.				3 = Vacation/Short-Term Ren
ZIP code				4 = Commercial 5 = Land
Type of property (s				6 = Royalties
Other type of prope				7 = Self-Rental
	-	L	34	
Percentage of ownership if not 100% (.xxxx))		1=did not actively participate	
Percentage of tenant occ if not 100% (.xxxx)	cupancy		1=real estate professional	
1=spouse, 2=joint.			1=rental other than real estate	
1=qualified joint ve			1=investment	
1=nonpassive activity, 2=passive royalty			1=single member limited liability company.	
1 5 5		lid you or will you file all required Form(
INCOME			2022 Amount	2021 Amount
Rents or royalties	received			
Association dues Auto and travel (no Cleaning and main	ot entered else	where)	····	and office supplies.
Association dues Auto and travel (no Cleaning and main Commissions Gardening Insurance	ot entered else	where)		
Association dues Auto and travel (no Cleaning and main Commissions Gardening Insurance Legal and profession	ot entered else atenance	where)		
Association dues Auto and travel (no Cleaning and main Commissions Gardening Insurance Legal and professi Licenses and perm	ot entered else htenance	where)		
Association dues. , Auto and travel (no Cleaning and main Commissions Gardening Insurance Legal and profession Licenses and perm Management fees.	ot entered else ntenance onal fees nits	where)		
Association dues. , Auto and travel (no Cleaning and main Commissions Gardening Insurance Legal and professi Licenses and perm Management fees. Miscellaneous Mortgage interest (ot entered else ntenance onal fees nits (paid to banks,	where)		
Association dues. , Auto and travel (no Cleaning and main Commissions Gardening Insurance Legal and professi Licenses and perm Management fees. Miscellaneous Mortgage interest (Qualified mortgage	ot entered else ntenance onal fees nits (paid to banks, e insurance pre	where)		
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Association dues Auto and travel (no Cleaning and main Commissions Gardening Insurance Legal and professi Licenses and perm Management fees. Miscellaneous Mortgage interest (Qualified mortgage Excess mortgage i Other interest (not Painting and decor Pest control Plumbing and elec Repairs Supplies Taxes - real estate Taxes - other (not Telephone Wages and salarie	onal fees nitenance onal fees nits (paid to banks, e insurance pre nterest entered elsew trical	where)		
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2022	1040	US	Rental & Royalty Income (Sch. E) (cont.)	No.	18 p2
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Please enter all pertinent 2022 amounts. Last year's amounts are provided for your reference. The indirect expense column should only be used for vacation homes or less than 100% tenant occupied rentals.

GENERAL INFORMATION

Foreign region	
Foreign postal code	
Foreign country	

OIL AND GAS

	2022 Amount	2021 Amount
Production type (preparer use only)		
Cost depletion		
Percentage depletion rate or amount		
State cost depletion, if different (-1 if none)		
State % depletion rate or amount, if different (-1 if none)		

PERSONAL USE OF DWELLING UNIT (INCLUDING VACATION HOME)

Number of days personal use	
Number of days owned (if optional method elected)	

INDIRECT EXPENSES

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

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

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	n,	G.	n	1.41	~	-	n

2022

1040 US

Farm Income (Schedule F/Form 4835)

No.

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

GENERAL INFORMATION

Principal product	
Employer ID number	
Agricultural activity code	
Accounting method: 1=cash, 2=accrual	
1=spouse, 2=joint	
1=farm rental (Form 4835)	
Type of rental property (farm rental only): 1=land, 2=self-rental, 3=other	
1=crop insurance proceeds election	
If required to file Form(s) 1099, did you or will you file all required Form(s) 1099: 1=yes, 2=no	
1=did not "materially participate" (Schedule F only)	
1=did not actively participate (Farm rental only)	
1=real estate professional (farm rental only)	
1=single member limited liability company	
% of ownership if not 100% (.xxxx) (Farm rental only)	

FARM INCOME

Cash method:	2022 Amount	2021 Amount
Sales of livestock and other resale items		
Cost or basis of livestock or other resale items		
Sales of products raised		
Accrual method:		
Sales of livestock, produce, etc.		
Beginning inventory of livestock, etc.		
Cost of livestock, etc. purchased		
Ending inventory of livestock, etc.		
Other farm income:		
Total cooperative distributions		
Taxable cooperative distributions		
Total agricultural program payments (other than CRP)		
Taxable agricultural program payments (other than CRP)		
Total conservation reserve program payments		
Taxable conservation reserve program payments		
Commodity credit loans reported under election		
Total commodity credit loans forfeited or repaid		
Taxable commodity credit loans forfeited or repaid		
Total crop insurance proceeds received in 2022		
Taxable crop insurance proceeds received in 2022		
Taxable crop insurance proceeds deferred from 2021		
Custom hire (machine work) income not included above		

22	1040	US	Farm Income (Sch. F/Form	m 4835) (cont.)	No. 19
P	lease ent	er all pert	tinent 2022 amounts. Last year's amo	ounts are provided for y	our reference.
FADN		/IE (conti	inued)		
			indea)		
Other inc	come:		Г	2022 Amount	2021 Amount
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			<u> </u>		
			 		
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_			L		
FARM					
					
			ered elsewhere)		+
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-	-				
					1
Mortgage	e interest (p	aid to banks,	, etc.)		
	-		vhere)		T
	-	-	tributions		
	•		- admin. and education costs		+
		-	equipment (not entered elsewhere)		
)		-
					1
					1
			ine		
•		uctive period	expenses (also enter below)		
Other exp	penses:				
			[-		
			-		+
—			 _		<u> </u>
			<u> </u>		
—			 		1

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

2022

22 p3

No.

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

GENERAL INFORMATION

1040

US

AUTOMOBILE MILEAGE

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

ACTUAL EXPENSES

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

2022	1040	US	Noncash Contributions (Form 8283)	20			
lf your each c	r total non donee usin	cash cor Ig the fol	ntributions are in excess of \$500 in 2022, please complete the information belo lowing guidelines:	ow for			
* If yo ackr	ou contributed	a motor ve t received f	whicle, boat, or airplane with a claimed value of more than \$500, attach Form 1098-C or other written from the donee organization.				
* A de dedu whic	eduction for co uction for any ch a deductior	ontributions item with r n of more th	s of clothing or other household items that are not in <i>good</i> used condition or better is not allowed. In minimal monetary value may be denied. However, these rules do not apply to any contribution of a sinan \$500 is claimed, if a qualified appraisal for the donated property is provided.	additio			
DON	NATED P	ROPER					
	Na	me of chari	itable organization (donee)				
	Str	eet address	S				
	Cit	City					
	Sta	ate					
	ZIF	code					
	1=5	spouse, 2=	joint				
	Pro	operty desc	ription (other than vehicle)				
			Identification number (VIN)				
No.		Vehicle Year (yyyy)					
	`		Make and model				
			Condition and mileage	-			
	Da		bution (m/d/y)				
			by donor (m/y)				
			by donor (Table 1 or describe)				
		-	pr basis				
	Fai	ir market va	alue				
	Me	thod used t	to determine FMV (Table 2 or describe)				
			· · ·				
	Nai	me of charit	able organization (donee)				
	Str	Street address					
	City	City					
	Sta	State					
	ZIP	ZIP code					
	1=5	spouse, 2=j	pint				
	Pro	operty descr	iption (other than vehicle)				
			Identification number (VIN)				
No.		Vehicle	Year (yyyy)				
	_		Make and model				
			Condition and mileage				
	Dat	te of contrib	ution (m/d/y)				

Date acquired by donor (m/y) How acquired by donor (Table 1 or describe) Donor's cost or basis Fair market value Method used to determine FMV (Table 2 or describe) 2 How Property was Acquired

1

1 = Purchase

2 = Gift

3 = Inheritance 4 = Exchange

Method Used to Determine FMV

1 = Appraisal

3 = Catalog 4 = Comparable sales

2 = Thrift shop value

For other methods, see IRS Pub. 561.

2022	1040	US	Business Use of Home (F	orm 8829)	No.	29
	Please	enter 2022 Bu	indirect expenses in full. Nonbusine siness percentage will be applied to	ss portion will carry t indirect expenses on	to Schedule A. ly.	
BU	SINESS U	ISE OF H	OME	2022 Amount	2021 Amount	
Form						
Numb	per of form (e.g	g., enter 2 for	Schedule C number 2)			
		• •	ge)		_	
			ge)			
Total hours facility used (for daycare facilities only)						
Total hours available (if not 8,760) Area of home included above used exclusively for daycare business, if any (sq ft)						
			ne from home if not 100% (-1 if none)			
	-	•	rom home if not 100% (-1 if none)			
	IRECT EX	·				
NOTE	: Indirect expe They benefit	enses are for both the bus	keeping up and running your entire home. iness and personal parts of your home.			
Mortg	age interest.					
Real	estate taxes					
Casualty losses						
			· · · · · · · · · · · · · · · · · · ·			
Repa	irs and mainte	nance	·····			

DIRECT EXPENSES

Other indirect expenses:

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

Utilities. Excess mortgage interest. Excess real estate taxes.

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

29

Total unreimbursed qualified medical expenses

Please enter all pertinent 2022 amounts & attach all 1099-SA forms. Last year's amounts are provided for your reference. HSA CONTRIBUTIONS NOTE: Contributions to an HSA are only eligible to persons covered under a high deductible health plan is one with an annual deductible that is not less than \$1,400 for self-only coverage or \$2,800 for family coverage, and annual out-of-pocket expenses (deductibles, co-payments, and other amounts, but not premiums) do not exceed \$7,050 for self-only coverage or \$14,100 for family coverage. 1=self-only coverage, 2=family coverage 2022 Amount 1=self-only coverage, 2=family coverage 1 1=self-only coverage or \$14,100 for family coverage 1 1=self-only coverage, 2=family coverage 1 Contributions made to an employee account through a cafeteria plan (1=maximum) 1 Contributions included above that were made after you became eligible for Medicare 1 Contributions made to date 1 Total HSA distribution received (1099-SA, box 1) 1 Distributions included above that were rolled over to another HSA. 1	2022	1040	US	Health Sa	vings Accour	nts (8889)		32.1
NOTE: Contributions to an HSA are only eligible to persons covered under a high deductible health plan. For tax year 2022, a high deductible health plan is one with an annual deductible that is not less than \$1,400 for self-only coverage or \$2,800 for family coverage, and annual out-of-pocket expenses (deductibles, co-payments, and other amounts, but not premiums) do not exceed \$7,050 for self-or coverage or \$14,100 for family coverage. 1=self-only coverage, 2=family coverage 2022 Amount 1=self-only coverage, 2=family coverage 1 HSA contributions you made or expect to make, except rollovers, employer contributions, and contributions made to an employee account through a cafeteria plan (1=maximum). 2021 Amount Contributions included above that were made after you became eligible for Medicare. Image: Contributions made to date. Total HSA distribution received (1099-SA, box 1) Image: Contributions included above that were rolled over			Please	enter all pertine Last year's ar	ent 2022 amounts nounts are provide	& attach all 1099-S/ ed for your reference	A forms. ce.	
health plan is one with an annual deductible that is not less than \$1,400 for self-only coverage or \$2,800 for family coverage, and annual out-of-pocket expenses (deductibles, co-payments, and other amounts, but not premiums) do not exceed \$7,050 for self-oc coverage or \$14,100 for family coverage. 2022 Amount 2021 Amount 1=self-only coverage, 2=family coverage 2022 Amount 2021 Amount HSA contributions you made or expect to make, except rollovers, employee account through a cafeteria plan (1=maximum) Contributions made to an employee account Taxpayer Taxpayer Contributions made to date Contributions made to date Contributions made to date Contributions made to date Total HSA distribution received (1099-SA, box 1) Distributions included above that were rolled over Distributions included above that were rolled over	HSA	CONTRIE	JUTIONS					
Taxpayer Spouse Taxpayer Spouse 1=self-only coverage, 2=family coverage	h a	nealth plan is o Innual out-of-p	one with an ar pocket expens	nnual deductible that ses (deductibles, co-	ons covered under a hic t is not less than \$1,400 payments, and other an	h deductible health plan. for self-only coverage of hounts, but not premiums	For tax year 2022, a hig r \$2,800 for family cover a) do not exceed \$7,050	gh deductible age, and the for self-only
1=self-only coverage, 2=family coverage Image: Contribution of the second of the s					2022 Am	ount	2021 Amo	unt
HSA contributions you made or expect to make, except rollovers, employer contributions, and contributions made to an employee account through a cafeteria plan (1=maximum) Image: Contributions included above that were made after you became eligible for Medicare Contributions made to date Image: Contributions made to date Image: Contributions made to date HSA DISTRIBUTIONS Image: Contribution received (1099-SA, box 1) Image: Contribution received (1099-SA, box 1) Distributions included above that were rolled over Image: Contribution received (1099-SA, box 1) Image: Contribution received (1099-SA, box 1)				_	Taxpayer	Spouse	Taxpayer	Spouse
Contributions included above that were made after you became eligible for Medicare	HSA con except r contribu	ntributions you ollovers, emp itions made to	u made or exp loyer contribu an employee	bect to make, tions, and account				
HSA DISTRIBUTIONS Total HSA distribution received (1099-SA, box 1) Distributions included above that were rolled over	Contribu	utions included	d above that w	vere made after				
Total HSA distribution received (1099-SA, box 1)	Contribu	utions made to	o date					
Distributions included above that were rolled over	HSA	DISTRIB	UTIONS					
Distributions included above that were rolled over to another HSA	Total HS	SA distribution	n received (10	99-SA, box 1)] [
	to anoth	ner HSA						

ase ent paid fo	er all p or the c	ertinent 202 are of one o	22 information. Last yea or more dependents ena	r's amounts are bling you to wo	e provided for you ork or attend scho	r reference. You ol to qualify for t	must have his credit.
Depende	nt care e	xpenses incurr	EXPENSES (33.1)	2022 Aı Taxpayer	mount Spouse	2021 Amou Taxpayer	int Spouse
	ONS A			FOR DEPEN	IDENT CARE C	REDIT	
	L	ast name itle or suffix	/d/y)				
No	S C Ir 1	ocial security i ualified depen curred and pa =disabled	dent care expenses id in 2022			2021 amt:	
No.	F Li T D	irst name ast name itle or suffix ate of birth (m/	d/y)				
	Q ir 1	ualified depend curred and pai- edisabled	lent care expenses d in 2022			2021 amt:	
PERS	N	ame of provide		ING CARE (3	3.2)		
No	C S Z F	ity tate IP code oreign region . oreign postal co	nde				
	lc A	lentification nu mount paid to	mber (SSN or EIN)			2021 amt:	

22	1040) US	Qualified Adoption Expe	enses (Form 8839)	3
F	Please e	nter all pe	rtinent 2022 information. Last year's a	mounts are provided for your reference).
ELIC	GIBLE	CHILDRI	EN	2022 Amount 2021 Amour	ıt
No		Last name Identification Date of birth 1=born before 1=special ne 1=foreign ch 1=adoption v Qualified Adoption Expenses	number (m/d/y) 2005 and was disabled eds child Id yas not final in 2022 2021 for adoption not finalized by end of 2022 Prior years for adoption of foreign child finalized in 2022 2021 and 2022 for adoption finalized in 2022	···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ····	
	-	Paid in 1=spouse, 2	2022 for adoption finalized before 2022		
No. [Last name Identification Date of birth 1=born before 1=special nee 1=foreign chi 1=adoption w Qualified Adoption Expenses Paid in	number (m/d/y) 2 2005 and was disabled eds child d as not final in 2022 2021 for adoption not finalized by end of 2022 Prior years for adoption of foreign child finalized in 2022 2021 and 2022 for adoption finalized in 2022 2022 for adoption finalized before 2022 joint		
No. [Last name Identification Date of birth 1=born before 1=special nee 1=foreign chi	number (m/d/y) 2005 and was disabled eds child d as not final in 2022 2021 for adoption not finalized by end of 2022 Prior years for adoption of foreign child finalized in 2022 2021 and 2022 for adoption finalized in 2022 2022 for adoption finalized before 2022		

Detail of the set of the	22	1040	US	Education Credits / Tuition	on Deduction	No.	38
1-taxpayer, 2-spouse.		Please con you	nplete the r spouse, o	information below if you paid qual or your dependents enrolled in an Last year's amounts are provide	ified education expense accredited postseconda d for your reference.	s in 2022 for you ry institution.	1
1-taxpayer, 2-spouse.	STI		FORMAT	TION			
Last name. Social security number . Number of years hope credit claimed. Laster and the set full claimed . Laster and the set full claimed . Laster and the set full claimed . Laster and the set of a security encode set addets: period that began in a direct completed first for years of pol-scoring velocitable for a direct set of the set of a 2022. At a few years of pol-scoring velocitable well be and a 2022. At a few years of pol-scoring velocitable for a direct set of the end a 2022. At a few years of pol-scoring velocitable well be and a 2022. At a few years of pol-scoring velocitable well be and a 2022. At a few years of pol-scoring velocitable for direct set of the end a 2022. At a few years of pol-scoring velocitable well be and a 2022. At a few years of pol-scoring velocitable well and a 2022. At a few years of pol-scoring velocitable well be and a 2022. At a few years of pol-scoring velocitable well and a 2022. Fem of the end a 2022. At a few years of pol-scoring velocitable well and a 2022. Fem of the end a 2022. At a few years of pol-scoring velocitable well and a 2022. Fem of the end a 2022. At a few years of pol-scoring velocitable well and a 2022. Fem of the end a 2022. Fem of the end a 2022. At a few years of pol-scoring velocitable well and a 2022. Fem of the end a 2022. Fem of the end a 2022. At a 2022 form 1098-T received with Box 2 & 7 completed 1-2022 form 1098-T received with Box 2 & 7 completed 1-2022 form 1098-T received with Box 2 & 7 completed 1-2022 form 1098-T received with Box 2 & 7 completed 1-2022 form 1098-T received with Box 2 & 7 completed 1-2022 form 1098-T received with Box 2 & 7 completed 1-2022 form 1098-T received with Box 2 & 7 completed 1-2022 form 1098-T received with Box 2 & 7 completed 1-2022 form 1098-T received with Box 2 & 7 completed 1-2022 form 1098-T received with Box 2 & 7 completed 1-2022 form 1098-T received with Box 2 & 7 completed 1-2022 form 1098-T received with Box 2 & 7 completed 1-2022 form 1098-T received with Box 2 & 7 completed 1-2022 form 1098-T							
Social security number Image: Control of Social							
Number of years hope credit claimed							
set-address	Num	ber of years ho	pe credit clai	med			
at an eligible institution in qualified program						-	
of a controlled substance	2022 (c at an e	or the first 3 months eligible institution in	of 2023 if the qua a qualified program	n			
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22	1040	US	Additional Information
Pleas	se furnish a	any additi	onal information or supporting details not provided elsewhere in this tax organizer.
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