2023 TAX ORGANIZER

T O

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

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

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

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

REMOVE THIS SHEET PRIOR TO RETURNING THE COMPLETED ORGANIZER

SCHLENNER WENNER & CO. CPAs, PA

PRIVACY POLICY

CPAs, like all providers of personal financial services, are now required by law to inform their clients of their policies regarding privacy of client information. CPAs have been and continue to be bound by professional standards of confidentiality that are even more stringent than those required by law. Therefore, we have always protected your right to privacy.

TYPES OF NONPUBLIC PERSONAL INFORMATION WE COLLECT

We collect nonpublic personal information about you that is either provided to us by you or obtained by us with your authorization.

PARTIES TO WHOM WE DISCLOSE INFORMATION

For current and former clients, we do not disclose any nonpublic personal information obtained in the course of our practice except as required or permitted by law. Permitted disclosures include, for instance, providing information to our employees and, in limited situations, to unrelated third parties who need to know that information to assist us in providing services to you. In all such situations, we stress the confidential nature of information being shared.

PROTECTING THE CONFIDENTIALITY AND SECURITY OF CURRENT AND FORMER CLIENTS' INFORMATION

We retain records relating to professional services that we provide so that we are better able to assist you with your professional needs and, in some cases, to comply with professional guidelines. In order to guard your nonpublic personal information, we maintain physical, electronic, and procedural safeguards that comply with our professional standards.

Please call if you have any questions, because your privacy, our professional ethics, and the ability to provide you with quality financial services are very important to us.

320-251-0286

SCHLENNER WENNER & CO. CPAs, PA

TAX ARRANGEMENT LETTER

Dear Client,

This letter is to confirm and specify the terms of our arrangement with you and to clarify the nature and extent of the services we will provide. In order to ensure an understanding of our mutual responsibilities, we ask all clients for whom returns are prepared to confirm the following arrangements.

Scope of Engagement

We will prepare your Federal and requested state income tax returns from information that you will furnish us. We will not audit or otherwise verify the data you submit, although it may be necessary to ask you for clarification of some of the information. We will not file any Federal, state, and/or local tax extensions without your specific request and permission. You have the final responsibility for the income tax returns and, therefore, you should review them carefully before you sign them.

Record Retention

It is our policy to keep records related to this engagement for seven years. Schlenner Wenner & Co. does not keep any original client records, so we will return those to you at the completion of the services rendered under this agreement. It is your responsibility to retain and protect your records for possible future use, including potential examination by any government or regulatory agencies. By signing below, you acknowledge and agree that upon the expiration of the seven year period, Schlenner Wenner & Co. shall be free to destroy our records related to this engagement.

Limitation on Scope of Engagement

Our work in connection with the preparation of your income tax returns does not include any procedures designed to discover defalcations or other irregularities, should any exist. We will render such accounting and bookkeeping assistance as determined to be necessary for preparation of the income tax returns. We will use professional judgment in resolving questions where the tax law is unclear, or where there may be conflicts between the taxing authorities' interpretations of the law and other supportable positions. Unless otherwise instructed by you, we will resolve such questions in your favor whenever possible. It is our policy to put all tax advice in writing, and any unwritten advice cannot be relied upon because it may be tentative, incomplete, or not fully reviewed.

Penalties

The law provides various penalties that may be imposed when taxpayers understate their tax liability. If you would like information on the amount or the circumstances of these penalties, please contact us. Your returns may be selected for review by the taxing authorities. Any proposed adjustments by the examining agent are subject to certain rights of appeal. In the event of such government tax examination, we will be available upon request to represent you and will render additional invoices for the time and expenses incurred.

1099 Reporting Requirements

You should also know that IRS forms include questions on whether the business has complied with Form 1099 reporting requirements. In preparing your return, we rely on your representations that you understand and have complied with these requirements. Contact us regarding 1099 preparation assistance.

Financial Terms

This arrangement letter pertains only to the preparation of your personal tax returns. It does not include additional services such as tax planning, tax audits and consultation. Our fee for these services will be based upon the amount of time required at standard billing rates plus out-of-pocket expenses. All invoices are due and payable upon presentation.

Other

ID:

If the foregoing fairly sets forth your understanding, please sign below. However, if there are other tax returns you expect us to prepare, such as gift and/or property, please inform us by noting below.

We want to express our appreciation for this opportunity to work with you.

Accepted by (signature):	Date:	
Printed name:		

Questions (Page 1 of 5)

The following questions pertain to the 2023 tax year. For any question answered Yes, include supporting detail or documents.

Pers	sonal Information:	Yes	No
	Did your marital status change?		
	Are you married?		
	If Yes, do you and your spouse want to file separate returns?		
	If No, are you in a domestic partnership, civil union, or other state-defined relationship?		
	Can you or your spouse be claimed as a dependent by another taxpayer?		
l	Did you or your spouse serve in the military or were you or your spouse on active duty?		
Dep	endents:		
,	Were there any changes in dependents from the prior year? Note: Include non-child dependents for whom you provided more than half the support.		
	Did you or your spouse pay for child care while you or your spouse worked or looked for work?		
	Do you have any children under age 18 with unearned income more than \$1,250?		
ı	Do you have any children age 18 or student children, aged 19 to 23, who did not provide more than half of their cost of support with earned income and that have unearned income of more than \$1,250?		
1	Did you adopt a child or begin adoption proceedings?		
	Are any of your dependents non-U.S. citizens or non-U.S. residents?		
Hea	Ithcare:		
	Did you obtain healthcare coverage through the Marketplace?		
	If Yes, include all Forms 1095-A.		
	If you received advance premium tax credit, are married, and are filing separately from your spouse, are you a victim of domestic abuse or spousal abandonment?		
١	Did you, your spouse, or a dependent have healthcare purchased through the Marketplace and for whom you did not receive Form 1095-A?		
ا	Did you receive Form 1095-A for someone claimed as a dependent on another taxpayer's return or who is filing their own return and is not claimed on another taxpayer's return?		
	Are any of your dependents required to file a tax return?		-

Questions (Page 2 of 5)

Healthcare (continued):	Yes	No
Was anyone covered on your health insurance policy also covered on another health insurance policy for any part of the year?		
Were you eligible for employer-sponsored healthcare coverage?		
Did you or your spouse have any transactions pertaining to a health savings account (HSA)? If you received a distribution from an HSA, include all Forms 1099-SA.		
Did you or your spouse have any transactions pertaining to a medical savings account (MSA)? If you received a distribution from an MSA, include all Forms 1099-SA. Did you or your spouse receive any distributions from long-term care insurance contracts? If Yes, include Forms 1099-LTC.		
If you or your spouse are self-employed, are you or your spouse eligible to be covered under an employer's health plan at another job?		
If Yes, how many months were you covered?		
If you or your spouse are self-employed, are you or your spouse eligible to be covered under an employer's long-term care plan at another job?		
If Yes, how many months were you covered?		
Education:		
Did you, your spouse, or your dependents incur any post-secondary education expenses, such as tuition?		
Did you or your spouse pay any student loan interest?		
Did you or your spouse withdraw any amounts from your IRA to pay for higher education expenses incurred by you, your spouse, your children or grandchildren?		
Did you or your spouse withdraw any amounts from a Coverdell Education Savings Account or Qualified Education Program (Section 529) plan?		
If Yes, include all Forms 1099-Q. If Yes, were the amounts withdrawn used for qualified tuition expenses?		
Deductions and Credits:		
Did you or your spouse contribute property (other than cash) with a fair market value of more than \$5,000 to a charitable organization? If Yes, provide the appraisal of property contributed. An appraisal is not required for contributions of publicly		
traded securities or contributions of non-publicly traded stock of \$10,000 or less.		
Did you or your spouse incur any casualty or theft losses?		
Did you or your spouse make any large purchases, such as motor vehicles and boats?		
Did you or your spouse incur any casualty or loss attributable to a federally declared disaster?		
Did you or your spouse purchase a new alternative technology vehicle, including a qualified plug-in electric drive motor vehicle?		
Did you or your spouse use gasoline or special fuels for business or farm purposes (other than for a highway vehicle)?		
If Yes, provide the number of gallons or special fuels used for off-highway business purposes. Gallons Type		
Did you or your spouse install any alternative energy equipment in your residence such as solar water heaters, solar electricity equipment (photovoltaic) or fuel cells?		
Did you or your spouse install any energy efficiency improvements or energy property in your residence such as exterior doors or windows, insulation, heat pumps, furnaces, central air conditioners, or water heaters?		

Questions (Page 3 of 5)

nvestments:	Yes	No
Did you or your spouse have any debts canceled, forgiven or refinanced?		
Did you or your spouse start or purchase a business, rental property, or farm, or acquire any new interest in any partnership or S corporation?		
Did you or your spouse sell an existing business, rental property, farm, or any existing interest in a partnership or S corporation?	·	
Did you or your spouse sell, exchange, or purchase any real estate?		
If Yes, include closing statements.		
Did you or your spouse receive grants of stock options from your employer, exercise any stock options granted to you or your spouse or dispose of any stock acquired under a qualified employee stock purchase plan?		
Did you or your spouse engage in any put or call transactions?		
If Yes, provide the transaction details.		
Did you or your spouse close any open short sales?		
Did you or your spouse sell any securities not reported on Form 1099-B?		
Retirement or Severance:		
Did you or your spouse contribute to a Roth IRA or convert an existing IRA into a Roth IRA?		
Did you or your spouse roll into a Roth IRA any distributions from a retirement plan, an annuity plan, tax shelter annuity or deferred compensation plan?		
Did you or your spouse turn age 73 and have money in an IRA or other retirement account without taking any distribution?		
Did you or your spouse make a qualified charitable distribution directly from an IRA?		
Did you or your spouse retire or change jobs?		
Did you or your spouse receive deferred, retirement or severance compensation?		
If Yes, enter the date received (Mo/Da/Yr)		
Personal Residence:		
Did your address change?		
If Yes, provide the new address.		
If Yes, did you move to a different home because of a change in the location of your job?		
Did you or your spouse claim a homebuyer credit for a home purchased in 2008?		
Did you or your spouse withdraw any amounts from your Individual Retirement Account (IRA) or Roth IRA to acqui a principal residence?	re	
Are your total mortgages on your first and/or second residence greater than \$750,000?		
If Yes, provide the principal balance and interest rate at the beginning and end of the year.		
Did you or your spouse take out a home equity loan?		
Did you or your spouse have an outstanding home equity loan at the end of the year?		
If Yes, provide the principal balance and interest rate at the beginning and end of the year.	_	
Are you claiming a deduction for mortgage interest paid to a financial institution and someone else received the Fo 1098?	rm 	
Did you or your mortgagee receive mortgage assistance payments? If Yes, include all Forms 1098-MA.		

Questions (Page 4 of 5)

Sa	le of Your Home:	Yes	No
	Did you sell your home?		
	Did you receive Form 1099-S?		
	If Yes, include Form 1099-S.		
	Did you or your spouse own and occupy the home as your principal residence for at least two years of the five- year period prior to the sale?		
	Did you or your spouse ever rent out the property?		
	Did you or your spouse ever use any portion of the home for business purposes?		
	Have you or your spouse sold a principal residence within the last two years?		
	At the time of the sale, the residence was owned by the: Taxpayer Spouse Both		
Git	fts:		
	Did you or your spouse make any gifts, including birthday, holiday, anniversary, graduation, education savings, etc., with a total (aggregate) value in excess of \$17,000 to any individual?		
	Did you or your spouse make any gifts of difficult-to-value assets (such as non-publicly traded stock) to any person regardless of value?		
	Did you or your spouse make any gifts to a trust for any amount?		
	Did you or your spouse have a life insurance trust?		
	Did you or your spouse assist with the purchase of any asset (auto, home) for any individual?		
	Did you or your spouse forgive any indebtedness to any individual, trust or entity?		
Fo	reign Matters:		
	Did you or your spouse perform any work outside of the U.S. or pay any foreign taxes?		
	Were you or your spouse grantor or transferor for a foreign trust, have any interest in or a signature authority over a bank account, securities account or other financial account in a foreign country?		
	Did you or your spouse create or transfer money or property to a foreign trust?		
	Did you or your spouse own any foreign financial assets?		
	Were you or your spouse subject to the transition tax on undistributed foreign income and elect to pay the tax in installments?		
	Did you or your spouse have an interest in an S corporation that had undistributed foreign income subject to the transition tax?		
	If Yes, did the corporation cease to be an S corporation?		
	If Yes, was there a sale or liquidation of substantially all of the corporation's assets or did the corporation cease business?		
	If Yes, did you or your spouse transfer any share of stock in the corporation?		

Questions (Page 5 of 5)

Miscellaneous:	Yes	No
Did you or your spouse pay in excess of \$1,000 in any quarter or \$2,600 during the year for domestic services performed in or around your home to individuals who could be considered household employees?		
Did you or your spouse receive unreported tip income of \$20 or more in any month?		
Have you or your spouse received a punitive damage award for damages other than for physical injuries or illness?		
Did you or your spouse engage in any bartering transactions?		
Were you or your spouse notified by the IRS or other taxing authority of any changes in prior year returns?		
For any trust that you or your spouse created or are trustee, did any beneficiaries, grantors, or trustees die or move?		
In 2023, did you or your spouse: (a) receive (as a reward, award, or compensation); (b) sell, exchange, gift or otherwise dispose of a digital asset (or a financial interest in a digital asset)?		
In 2023, did you or your spouse receive Payroll Protection Program loan forgiveness or are you or your spouse seeking forgiveness?		
If No, enter the date loan forgiveness was denied or that you or your spouse decided not to seek forgiveness. Date (Mo/Da/Yr)		
If No, enter the amount of the loan for which forgiveness was denied or the amount of the loan for which you or your spouse decided not to seek forgiveness. Amount		
Do you own an interest in an LLC or similar entity that has a reporting obligation under the Corporate Transparency Act?		

Additional state pages have been included at the back of the organizer and should be reviewed.



Personal Information

Taxpayer:												
First Na	me and Initial		Last Name						So	cial Security	Numb	ber
Occupa	tion		Date of Birth	(Mo/Da/Y	<u>r) [</u>	Date of Deat	h (Mo/Da/Y	r)				
	License or State-Issued ID Nur	mber	Expiration Da	ate (Mo/Da	a/Yr) Ī	ssue Date (N	Mo/Da/Yr)	State		Doe	es not	expire
	Driver's License	State-Issued ID	No Ide	entification	n							
Spouse:												
First Na	me and Initial		Last Name						So	cial Security	Numb	ber
Occupa	tion		Date of Birth	(Mo/Da/Y	′r) [Date of Deat	h (Mo/Da/Y	r)	Г			
Driver's	License or State-Issued ID Nur	mber	Expiration Da	ate (Mo/Da	a/Yr) Ī	ssue Date (N	Mo/Da/Yr)	State		Doe	es not	expire
	Driver's License	State-Issued ID	No Ide	entification	n							
Contact Information:	Address								Ap	artment Nun	nber	
01.									715) D+-1 O	N1 -	
City				State					ZIF	or Postal C	oae	
Foreign	Province or County			_								
Foreign	Country			_								
Taxpaye	er Daytime/Work Phone	Taxpayer Evening/Home	e Phone T	axpayer F	oreign F	hone						
Тахрауч	er Cell Phone	Taxpayer Fax Number										
Spouse	Daytime/Work Phone	Spouse Evening/Home	Phone S	Spouse Fo	reign Ph	one						
Spouse	Cell Phone	Spouse Fax Number										
Тахрауч	er Email Address											
Spouse	Email Address											
Preferre	ed Method of Contact											
							•	Yes	No			
May the IRS or other taxing authority Is the taxpayer claimed as a depend												
is the taxpayer claimed as a depend	ent on someone else s	tax returns					· · ·	Тахра	ver	S	pous	se
							L [•	Yes	No	Yes	- r	No
Are you considered legally blind per	IRS regulations?							163	140	163	•	140
Do you want to contribute to the Pre] [
Are you a U.S. citizen or Green Card	I holder?						L]	
Personal Identification Numbers:	Code - 1 - Issued by	IRS 2 - Issued by	State or City	у					—			
The IRS has recommended that taxy filing security. If you would like an IP have one but do not know the IP PIN	PIN for yourself, your s	spouse, or your dep	endents or		TS	State	City	C	ode	P	IN	

Tax Organizer Legend:

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



Dependent Information:

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

Did dependent have income over \$4,700?

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

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

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

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



Wages

TS	Employer Name	Prior Year Amount	Information Included (X or 🖊)



Direct Deposit and Withdrawal

Direct Deposit and Electronic Funds Withdrawal Account Information:

The IRS and certain states allow refunds to be deposited to and balances due to be paid directly from your financial institution. If you would like to receive your refund or pay a balance due electronically, complete the following information. Additional space has been provided for the use of multiple accounts. If you selected direct deposit or electronic withdrawal in 2022, your account information is already included below.

Yes No

	s owed to you directly deposited			
	amount due on your <u>federal</u> retu			
	ould you like withdrawn, if not the		(Ma /Da M/)	
	withdrawal occur, if other than		(Mo/Da/Yr)	
	• —	n(s) using electronic withdrawal?		
	ould you like withdrawn, if not the		(14 /5 0/)	
	withdrawal occur, if other than		(Mo/Da/Yr)	
		electronically withdrawn on the du		
		your federal return using electroni		
would you like to pay a	ny estimated payments due for	your state return(s) using electron	ically withdrawal, if available?	
Name of bank or financ	ial inatitution			
Account number				
Type of account:	Chapking	Traditional Savings	IDA Savingo	
Type of account:	Checking	Traditional Savings	IRA Savings	
	Archer MSA Savings	Coverdell Ed. Savings	HSA Savings	
s this a business accou	int?	Yes	No	
s triis a busiriess accor	ant?	1es	NO	
			Spouse	Joint
Account owner		Lavnavor		
confirm that the bank	account information and the dire	Taxpayer ect deposit/electronic withdrawal	·	yt. Yes N
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confirm that the bank Ild you like any refunds Ild you like to pay any a If Yes, what amount wo If Yes, when should the Ild you like to pay any a If Yes, what amount wo If Yes, what amount wo If Yes, when should the IRS and some states a Vould you like to pay a	s owed to you directly deposited amount due on your federal returned you like withdrawn, if not the withdrawal occur, if other than amount due on your state returned you like withdrawn, if not the withdrawal occur, if other than allow estimated payments to be ny estimated payments due for ny estimated payments due for ial institution r (RTN)	ect deposit/electronic withdrawal I? Irn using electronic withdrawal? e entire balance due? the due date of the return? n(s) using electronic withdrawal? e entire balance due? the due date of the return? electronically withdrawn on the duyour federal return using electronic your state return(s) using electronically withdrawn on the duyour federal return using electronically withdrawn on the duyour federal return using electronic your state return(s) using electronically withdrawn on the duyour federal return using electronic your state return(s) using electronic your state you	options selected above are correct (Mo/Da/Yr) (Mo/Da/Yr) (Mo/Da/Yr) ue dates of the estimated payment withdrawal? ically withdrawal, if available?	Yes N
confirm that the bank Ild you like any refunds Ild you like to pay any a If Yes, what amount wo If Yes, when should the Ild you like to pay any a If Yes, what amount wo If Yes, what amount wo If Yes, when should the IRS and some states a Vould you like to pay a	s owed to you directly deposited amount due on your federal returned you like withdrawn, if not the withdrawal occur, if other than amount due on your state returned you like withdrawn, if not the withdrawal occur, if other than allow estimated payments to be ny estimated payments due for ny estimated payments due for its linstitution (RTN)	ect deposit/electronic withdrawal I? Irrn using electronic withdrawal? e entire balance due? the due date of the return? In(s) using electronic withdrawal? e entire balance due? the due date of the return? electronically withdrawn on the due your federal return using electronic your state return(s) using electronic your state return(s) using electronic state return(s)	options selected above are correct (Mo/Da/Yr) (Mo/Da/Yr) (Mo/Da/Yr) ue dates of the estimated payment ic withdrawal? ically withdrawal, if available?	Yes N
confirm that the bank Ild you like any refunds Ild you like to pay any a If Yes, when should the Ild you like to pay any a If Yes, when should the Ild you like to pay any a If Yes, when should the IRS and some states a If Yould you like to pay a Ill you like to pay a	s owed to you directly deposited amount due on your federal returned by the withdrawn, if not the withdrawal occur, if other than amount due on your state returned by the withdrawal occur, if other than allow estimated payments to be any estimated payments due for any estimated payments due for the injuries of the control of the withdrawal occur, if other than allow estimated payments due for any estimated payments due for the control of	ect deposit/electronic withdrawal I? Irrn using electronic withdrawal? e entire balance due? the due date of the return? n(s) using electronic withdrawal? e entire balance due? the due date of the return? electronically withdrawn on the du your federal return using electroni your state return(s) using electron Traditional Savings Coverdell Ed. Savings	options selected above are correct (Mo/Da/Yr) (Mo/Da/Yr) ue dates of the estimated payment of withdrawal? ically withdrawal, if available? IRA Savings HSA Savings	Yes N
confirm that the bank Ild you like any refunds Ild you like to pay any a If Yes, what amount wo If Yes, when should the Ild you like to pay any a If Yes, what amount wo If Yes, what amount wo If Yes, when should the IRS and some states a Vould you like to pay a	s owed to you directly deposited amount due on your federal returned by the withdrawn, if not the withdrawal occur, if other than amount due on your state returned by the withdrawal occur, if other than allow estimated payments to be any estimated payments due for any estimated payments due for the injuries of the control of the withdrawal occur, if other than allow estimated payments due for any estimated payments due for the control of	ect deposit/electronic withdrawal I? Irn using electronic withdrawal? e entire balance due? the due date of the return? n(s) using electronic withdrawal? e entire balance due? the due date of the return? electronically withdrawn on the duyour federal return using electronic your state return(s) using electronically withdrawn on the duyour federal return using electronically withdrawn on the duyour federal return using electronic your state return(s) using electronically withdrawn on the duyour federal return using electronic your state return(s) using electronic your state you	options selected above are correct (Mo/Da/Yr) (Mo/Da/Yr) (Mo/Da/Yr) ue dates of the estimated payment withdrawal? ically withdrawal, if available?	Yes N
confirm that the bank Ild you like any refunds Ild you like to pay any a If Yes, when should the Ild you like to pay any a If Yes, when should the Ild you like to pay any a If Yes, when should the IRS and some states a If Yould you like to pay a Ill you like to pay a	s owed to you directly deposited amount due on your federal returned by the withdrawn, if not the withdrawal occur, if other than amount due on your state returned by the withdrawal occur, if other than allow estimated payments to be any estimated payments due for any estimated payments due for the injuries of the control of the withdrawal occur, if other than allow estimated payments due for any estimated payments due for the control of	ect deposit/electronic withdrawal I? Irrn using electronic withdrawal? e entire balance due? the due date of the return? n(s) using electronic withdrawal? e entire balance due? the due date of the return? electronically withdrawn on the du your federal return using electroni your state return(s) using electron Traditional Savings Coverdell Ed. Savings	options selected above are correct (Mo/Da/Yr) (Mo/Da/Yr) ue dates of the estimated payment of withdrawal? ically withdrawal, if available? IRA Savings HSA Savings	Yes N



Interest Income

TSJ	Payer Name	Account No.	Prior Year Amount	Information Included (X or 🖊)



Dividend Income

TSJ	Payer Name	Account No.	Prior Year Amount	Information Included (X or 🖊)



Brokerage Statements

TSJ	Payer Name	Account No.	Information Included (X or 🛩)

Foreign Assets



Note: If the aggregate value of the accounts does not exceed \$10,000, then you do not need to provide details.

G	eneral	Information:											
	Title of f	iler	have foreign bank acc										
F	oreign	dentification:										V	es No
In	If not pa Number Country	TIN	description				 						110
		1 - Bank Acco			3 - Other								
	Accour Type	If Other Accou	unt Type, Describe	Maximun Account Value		Account	. Nu	mber			Financial tution Na	me	
A B													
		•	Street Address					·	City				
Α													
В										1			
			State		ZIP/	Postal Cod	le	Country			G	IIN	
A B													
Ь	or accor	ave no financial intere unt is jointly owned, p ount owner informatio	olease complete :	Type of TIN	Code: A	- Employer	Ide	ntification No. (EIN	N) B-S	SN or I	TIN C-	Foreigr	
		Last Name or	Organization Name			First	t Na	ime	Middle Initial	Suffix	/	kpayer lumbei	
A													
В													
	# of Joint Owners		Street Addre	ess						City			
A B													
_	1 - No fina	ncial interest 1B - No fina	ancial interest - US person, offi	cer or employee,	, residing out	side US 2/	4 - Jc	oint - spouse is joint own	er 2B -	Joint - otl	her joint own	er 3 - 0	Consolidated
		;	State		ZIP/Pos	stal Code		Country	,	wner- ship Code	Fi	ler's Ti	tle
A B													
ر		1 - Deposit 2 - Cu	ustodial		1						1		
	Туре	Foreign Currency	Exchange Rate			Source of	Exc	hange		Acct Open	Acct Closed	Joint	No Tax Items Reported
A B													



Asset Information:

	Descr	iption		Identii	ying Number	Date Acquired (Mo/Da/Yr)	Date Sold (Mo/Da/Yr		' Item
Value Foreign Currency Exchange Rate						Source of Exch	ange Rate		
f Asset is Stock of a	Foreign	Entity or	an Interest in a	Foreign	Entity				
					1 - Partnersh	nip 2 - Corporat	ion 3 - Tru	ust 4 - Es	state
Na	me of For	eign Entity		Type of Foreign Entity		Mailing Addres	s of Foreign	Entity	
City or Town of Foreig	n Entity		nce, County or of Foreign Entity	1	untry of ign Entity	Postal Code of Foreign Entity		GIIN	
f Asset is NOT Stock	of a Fo	reign Ent	ity or an Interest	⊥ t in a Fo	reign Entity	2 - Counterparty			. person
			Name of Issuer				Issuer Code	Type of Issuer	Residen of Issue
				Partnershi	p 3 - Corpo		5 - Estate		
M	lailing Add	ress of Issi	uer			City or Tow	n of Issuer		
	Pro	vince, Cour	nty or State of Issue	r			ountry Issuer		tal Code Issuer
									Yes
Foreign assets were acqu		-	e tax year						
oreign Bank Accoun	nts and 1	rusts:							
At any time during 2023, in a foreign country, s If Yes, enter name of fore	such as a l	oank accour	nt, securities account	or other fi	nancial accoun	_			
Were you the grantor of, any beneficial interes	or transfer	or to, a fore	eign trust that existed	during 202	23, whether or r			 	



Sales of Stocks, Securities, Capital Assets & Installment Sales

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

d you have any of the following during the year?	Yes	N
Mutual fund transactions		
Exchange of any securities or investments for something other than cash		
Sales of inherited property		
Sales of any stock or stock options at a loss and purchases of the same or substantially similar stock or options 30 days before or 30 days after the sale		
Commodity sales, short sales or straddles		
Reinvestment of the proceeds of gains in a qualified opportunity fund		
Sale of any investments in qualified opportunity funds		
Debts that became uncollectible		
Securities that became worthless		
Sale of any property where you will receive payments in future years		

	TSJ	Kind of Property and Description	Quantity	Date Acquired (Mo/Da/Yr)	Date Sold (Mo/Da/Yr)
Α					
В					
С					
D					
Ε					
F					
G					
Н					

	Gross Sales Price (Less Commissions)	Cost or Other Basis	Federal Tax Withheld	State Tax Withheld
Α				
В				
С				
D				
Е				
F				
G				
Н				

Installment Sales: Do not include interest received in principal amount

TSJ	Property Description	Date Sold (Mo/Da/Yr)	2023 Principal Received	2022 Principal Received



Individual Retirement Account (IRA): Include all copies of Forms 1099-R and 5498.		
TS		
IRA Questions for 2023:	Yes	No
Are you covered by an employer's retirement plan? If no, is your spouse covered by an employer's retirement plan? Do you want to limit your IRA contribution to the maximum amount deductible on your tax return?		
If no, do you want to contribute the maximum allowable amount to your IRA even though you may not qualify for an IRA deduction?		
Did you use any IRA as security for a loan this year? Did you have any transactions with any IRA during the year? If Yes, explain.		
IRA Values, Rollovers, and Distributions: Total value of all traditional IRAs on December 31, 2023		
Note: This information or Form 5498 is required if you received a distribution during the year. Outstanding rollovers on December 31, 2023		
Total distributions converted to Roth IRAs Total retirement plans converted to Roth IRAs		
Contributions:		
IRA: Contributions in 2023 for the 2023 tax return Contributions in 2024 for the 2023 tax return Amount for 2023 you choose to be treated as nondeductible		
Roth IRA: Contributions made for the 2023 tax year		
Distributions: Include all Forms 1099-R and any nontaxable distribution details		

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





Pensions and Annuities:	Include all Forms 1099-R and any nontaxable distribution details
-------------------------	--

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

Self-Employed Retirement Plan: Include copie	s of all Forms	1099-R			
			Taxpayer		Spouse
Have you established a self-employed retirement or SIMPLE productible contributions? Do you want to contribute the maximum amount allowed?			Yes No	Yes	No
Contributions to:			2023 Amoun	it :	2023 Amount
Simplified employee pension plan					
Defined benefit plan					
Defined contribution plan					
SIMPLE plan		L			



Partnership, S Corporation, Estate, Trust and REMIC Income

	ncome: Include all Schedules K-1		
SJ	Entity Name	Employer ID Number	Health Insurance Paid by Entity
Corporation	n Income: Include all Schedules K-1		
SJ	Entity Name	Employer ID Number	Health Insurance Paid by Entity
ate and Tr	rust Income: Include all Schedules K-1		
J	Entity Name		Employer ID Number
al Estate M	fortgage Investment Conduit (REMIC) Income:	e all Schedules Q	



Miscellaneous Income and Adjustments

TSJ	Payer Name	Account No.	Prior Year Amount	Information Included (X or ✓)



Medic	cal and Dental Expenses:	TSJ	2023 Amount	2022 Amount
Total Long Total Num Pers Lodg Doc Hos	scription medicines and drugs al medical insurance premiums paid * g-term care expenses al insurance reimbursement her of miles traveled for medical care sonal protective equipment ging tors, dentists, etc. pitals fees			
Eye	glasses and contacts			
Ta			2023 Amount	2022 Amount
	payer long-term care insurance premiums paid			
	not include Medicare premiums or premiums deducted in computing taxable wages reported in the Medical Expenses:	orted on	a W-2.	
TSJ	Description		2023 Amount	2022 Amount
			2023 Amount	2022 Amount
Гахеѕ	Paid: Include copies of your tax bills	TSJ	2023 Amount 2023 Amount	2022 Amount 2022 Amount
Faxes	s Paid: Include copies of your tax bills sonal property taxes paid (include vehicle taxes)	TSJ		
Pers Gen	S Paid: Include copies of your tax bills Sonal property taxes paid (include vehicle taxes) eral sales taxes paid on specified items	TSJ		
Pers Gen	s Paid: Include copies of your tax bills sonal property taxes paid (include vehicle taxes)	TSJ		
Pers Gen	s Paid: Include copies of your tax bills sonal property taxes paid (include vehicle taxes) eral sales taxes paid on specified items nize real estate taxes by state.	TSJ	2023 Amount	2022 Amount
Pers Gen Item	s Paid: Include copies of your tax bills sonal property taxes paid (include vehicle taxes) eral sales taxes paid on specified items nize real estate taxes by state.	TSJ	2023 Amount	2022 Amount
Pers Gen Item	S Paid: Include copies of your tax bills Sonal property taxes paid (include vehicle taxes) eral sales taxes paid on specified items size real estate taxes by state. Real Estate Taxes	TSJ	2023 Amount	2022 Amount
Pers Gen Item	s Paid: Include copies of your tax bills sonal property taxes paid (include vehicle taxes) eral sales taxes paid on specified items ize real estate taxes by state. Real Estate Taxes Taxes Paid:	TSJ	2023 Amount 2023 Amount	2022 Amount 2022 Amount



Itemized Deductions - Mortgage Interest and Points

ortg	age Questions for 2023:					Yes No
Did y If Did y If	you refinance your home? (If Yes, early Yes, how many years is your new you purchase a new home or sell years, enclose the closing statement Yes, also, did you (or your spoused during the 3 year period prior to the Yes, did you (and your spouse, if the Yes, did your spouse,	d you include any mortgage interest from yenclose the closing statement.) mortgage loan? our former home during the year? nts from the purchase and sale of your neve, if married) have an ownership interest in the purchase of this home? married at the time of purchase) own and uyear period during the 8 year period ending	v and former a principal re	homes. esidence in	the US	🔲 🗀
ome	Mortgage Interest Paid To	Financial Institutions:	Did You	Receive		
TSJ		Paid To		1098? No	2023 Amount	2022 Amount
						_
TSJ-	Paid To Name Address		ID Number		2023 Amount	2022 Amount
						-
educ	tible Points:		Did You	Receive		
TSJ		Paid To		1098? No	2023 Amount	2022 Amount
						-
	ment Interest Expense: est paid on money you borrowed t	hat is allocable to property held for investn	nent.		2023 Amount	2022 Amount
						-



A B

ance comm contri	eled check, a ba nunication from bution. Clothes	cash contribution, rank copy of a cancele the charity. The writt and household item	ed check, or a bank sta en communication mus s donated must be in	nt, unless you keep as a record atement containing the name of ust include the name of the char good, used condition or better in Attach a copy of the appraisal.	the charity, the ity, date of the n order to be de	date, and the contribution, a ductible unles	amount) ond amour s the item	or a written at of the a donated is
TSJ		Organizatio	on or Description of C	Contribution	2023	Amount	2022	Amount
TSJ		Co	nservation Real Prop	erty	2023	Amount	2022	Amount
	100% limit 50% limit							
TSJ			Description		202	3 Miles	202	2 Miles
	Number of mil	es traveled performir	na volunteer work for a	qualified charitable organizations				
TSJ	sh Contribu	tions Totaling \$	iption of Donated Pr	clude all documentation.	2023	Amount	2022	Amount
nca	sh Contribu	tions Totaling M	lore Than \$500:	Include all Forms 1098-C or ot	her documenta	tion.		
TSJ		P	roperty Description		Date Acquired	Date of Donation	Cos	t or Basis
	Fair Market Value (FMV)	Method Used to Determine FMV		Other Method Descr	ription			Method of Acquisition
		A -						
		1 - A 2 - C	ppraisal 3 - Comparabl atalog 4 - Other (Des			- Gift 3 - Inheritance 4	- Exchang - Purchas	e e



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

Miscellaneous Itemized Deductions:	TSJ	2023 Amount	2022 Amount	
Union and professional dues *				
Tax preparation fee *				
Professional subscriptions *				_
Hobby expense (To extent of income) *				-
Safe deposit box *				
Work tools *				
0 1 11 1				
Estate taxes				
Other Itemized Deductions:				
Examples:				
Certain legal and accounting fees *	● Employment agency fees * ● Im	pairm	ent-related work expens	se of a disabled person
Investment expenses *			ent of amounts under a	
Custodial fees *	 Amortizable bond premium 			
TSJ	Description		2023 Amount	2022 Amount
				-
				-
Casualty or Theft Loss:				
TSJ				
Property description				
Which of the following describes the type of pro	perty that sustained the casualty or theft loss?			
Demonstrue Duriness	Income mustication F		Person	al use attributable to
Personal use Business u	se Income producing E	mpioy		nt or bankrupt financial
Was the loss due to a federally declared disaster	? Yes No		mstitut	on losses on deposits
Date acquired	(Mo/Da/Yr)			
Date acquired				
Date damaged of look				
Original cost or other basis				
Fair market value before casualty				
Fair market value after casualty				
Cost of replacement				
Insurance reimbursement				



Child/Dependent Care Expenses & Education Expenses

Child/Dependent Care Expenses:

TSJ							
Were you or your spouse a full time stud	dent or disabled?					Yes	\neg
Did you pay an individual for services pe						Yes	
	efits that were forfeited in	2023					
nild/Dependent Care Providers	•						
Provider 1:							
Name							
Street address							
City, state, ZIP or postal code, and	country						
Social security number OR							
Employer identification number	er						
Telephone number (California only	<i>"</i>)						
Provider was a household employ	ee	Yes	No				
		2023 A	mount	2022 A	lmount		
Expenses incurred and paid in 202	3						
Expenses incurred and not paid in	2023						
							_
Provider 2:							
Name							
Street address							
City, state, ZIP or postal code, and	country						
Social security number OR							
Employer identification number							
Telephone number (California only	·)						
Provider was a household employ	ee	Yes	No				
		2023 A	mount	2022 A	Mount		
Expenses incurred and paid in 202	3						
Expenses incurred and not paid in	2023						
ualifying Persons for Child/Dep		2001			<u> </u>		
	endent Oare Expen		-1-10	D:-	0000	2000	_
First Name and Initial	Last Name	50	ocial Security Number	Dis- abled	2023 Expenses Incurred	2022 Expenses Ir	
		1		1	1	1	

Include copies of all Forms 1098-T

First Name and Initial	Last Name	Social Security Number	2023 Qualified Expenses





Federal Tax Payments

Refund Application:				
If you have an overpayment of 2023 taxes, do you want the excess:				
Refunded Yes No Applied to your 2024 estimated tax liability Yes No				
Federal Estimated Tax Payments:	Amount Due	Date Paid if Not Date Due (Mo/Da/Yr)	Amount P	Paid
2023 1st Quarter Estimate (Due 04-18-2023) 2023 2nd Quarter Estimate (Due 06-15-2023) 2023 3rd Quarter Estimate (Due 09-15-2023) 2023 4th Quarter Estimate (Due 01-16-2024)				
2022 overpayment applied to 2023 estimate				
Tax Planning Information for Tax Year 2024:				
Do you expect any of the following to occur in 2024?			Yes	No
A change in your marital status				
A change in the number of your dependents				
A substantial change in your income				
A substantial change in your withholding				
A substantial change in deductions				
If you answered Yes to any of the above questions, provide details.				



State and City Tax Payments

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



Minnesota Information (Page 1 of 3)

Residency Information:				From (Mo/Da/Yr)	To (Mo/Da/Yr)
If you did not live in Minnesota	for all of 2023, enter the dates you did	d live in Minnesota			
Enter the state names other th	an Minnesota where you had income				
Education Savings:				Yes No	
	ny contributions to a qualified education	on savings account?			
If Yes, enter the following:	sainmated Danafisians	Social Security	A - a - comb Norma	2	023 Amount
TS Name of De	esignated Beneficiary	Number	Account Num	nber (Contributed
Voluntary Contributions:					
Enter the amount you wish to	contribute on your 2023 tax return to t	he Nongame Wildlife	Fund		
If you or your spouse wish to o	contribute \$5.00 to a political party, sel	lect one party:			
. ,	ublican Democratic/Farmer-L tarian Legal Marijuana Now		sroots - Legalize Cann eral Campaign Fund	nabis	
	ublican Democratic/Farmer-L tarian Legal Marijuana Now		sroots - Legalize Cann eral Campaign Fund	abis	
Qualified School Expense	s for Dependents:				
	Depende	ent 1		Dependent 2	
Dependent's name					
Dependent's grade					
Qualified expenses					
Type of school (public, private, home)			_		
Type of expense (Classes, Individual instruction Textbooks, Computer, Tuition, Transportation, Musical instrument)			_		
Type of Instruction (Class or Individual)					
Instructor or organization or Transportation provider			_		
Type of class			_		
Type of musical instrument .			_		



Minnesota Information (Page 2 of 3)

Credit for Parents of Stillborn Children:			
Did you or your spouse experience a stillbirth during th	e year?		Yes No
If Yes, include the Minnesota Certificate of Birth for	each stillborn child.		
Long Term Care Insurance:			
If you had long term care insurance, list the policy own	er, policy company name and policy number l	below.	
Policy Owner	Policy Company Name		Policy Number
Taxpayer Spouse Joint			
Taxpayer Spouse Joint			
Property Tax Refund Information: Include a	all Certificates of Rent Paid and/or Stateme	nts of Property Taxes	Payable in 2024
County of residence			
Are you living in a nursing home or other health care fa Did you own AND occupy your homestead on BOTH Jack Are you a mobile home owner who paid rent for proper Enter the percent of your home that is NOT used for but Enter the amount of property tax refund received	anuary 2, 2023 and January 2, 2024?ty on which it was located?		<u>%</u>
Employer Transit Pass Credit:			Yes No
Did your business buy Transit passes to resell or give to your employees?			
If Yes, what was the original cost of the passes?			
What amount was charged to employees for the passe	s?		
What is your Minnesota ID number?			
Student Loan Credit		Taxpayer	Spouse
Enter the total amount paid toward your or your spous during the year		. ,	
Enter the amount of interest paid on your or your spouduring the year	·		
Enter the original balance of your or your spouse's qua	lified student loans		