Pullin CPA & Associates, Inc. 1610 Cooper Foster Park Rd. Lorain, OH 44053

The 2023 Tax Organizer will assist you in collecting and reporting information necessary for us to properly prepare your 2023 income tax return. Please complete the organizer sections as appropriate and provide supporting documentation where necessary. Prior year data is included on the organizer sections for your reference. At a minimum we ask that you answer the questions asked and sign the engagement letter. Failure to provide accurate information about the economic impact payments and advance child tax credit payments will result in altered results and likely delays.

Please provide us with the following additional information:

- A copy of your 2022 tax return, if not prepared by this office
- Form(s) W-2 (wages, etc.)
- Form(s) 1099 (interest, dividends, etc.)
- Schedule(s) K-1 (income/loss from partnerships, S corporations, etc.)
- Form(s) 1098 (mortgage interest) and property tax statements
- Brokerage statements from stock, bond or other investment transactions
- Closing statements pertaining to real estate transactions
- Form(s) 1099-K (Merchant Card and Third Party Network Payments)
- All other supporting documents (schedules, checkbooks, etc.)
- Any tax notices or letters received from the IRS or other taxing authorities

Thank you for your help in the completion of the Tax Organizer. Please contact us if you need further assistance.

Sincerely,

MICHELLE PULLIN CPA

Client Information 1040 US 1 2023

Pullin CPA & Associates, Inc.

1610 Cooper Foster Park Rd.

Lorain OH 44053 Telephone number: (440) 960-2277 Fax number: (440) 960-0288

E-mail address: INFO@PULLINCPAOHIO.COM **Tax Return Appointment**

Time: Location:

Date:

This tax organizer will assist you in gathering information necessary for the preparation of your 2023 tax return. Please add, change, or delete information as appropriate.

CLIENT INFORMATION

Filing	Filing status (table)							
Status	1=married filing separate and lived with spouse							
	Year spouse died, if qualifying surviving spouse (2021 or 2022)							
	First name and initial							
	Last name							
	Title/suffix							
Taxpayer	Social security number							
ranpayor	Occupation							
	Date of birth (m/d/y)							
	Date of death (m/d/y)							
	1=blind							
	First name and initial							
	Last name							
	Title/suffix							
Spouse	Social security number							
Opouse	Occupation							
	Date of birth (m/d/y)							
	Date of death (m/d/y)							
	1=blind							
	In care of							
	Street address							
Address	Apartment number							
Address	City							
	State							
	ZIP code							
C:	Region							
Foreign Address	Postal code							
	Country							

Filing Status

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

2023 1040 US Dependents 2

Please add, change or delete information for 2023.

DEPENDENTS

	Dependent	l Dependent	
First name			
Last name			Type of Dependent
Title/suffix			1 01 11 11 11
Date of birth (m/d/y)			1 = Child living w/taxpayer 2 = Child not living w/taxpayer
Date of death			3 = Dependent other than child
Date of adoption			4 = Head of household or qualifying surviving
Social security number			spouse (QSS) only. not a dependent
Relationship			not a dependent 5 = Earned income credit only,
Months lived at home			not a dependent
Type of dependent (see table)			
Earned income credit (see table)			Earned Income Credit
Claimed by: 1=taxpayer, 2=spouse			
IRS theft protection PIN			1 = When applicable (default) 2 = Student age 19 to 23
<u> </u>	Dependent	Dependent	3 = Disabled
First name			4 = Force 5 = Suppress
Last name			5 – Suppress
Title/suffix			
Date of birth (m/d/y)			
Date of death		***************************************	NOTE: If you claim the earned income credit, please provide
Date of adoption			proof that your child is a res-
Social security number			ident of the U.S. This proof is
Relationship			typically in the form of:
Months lived at home			1. School records or statement 2. Landlord or property man-
Type of dependent (see table)			agement statement
Earned income credit (see table)			3. Health care provider statement
Claimed by: 1=taxpayer, 2=spouse			4. Medical records
IRS theft protection PIN			5. Child care provider records 6. Placement agency statement
into their protection in	Dependent	Dependent	7. Social service records or
First name	Dependent	Dependent	statement
Last name.			8. Place of worship statement 9. Indian tribe office statement
Title/suffix			10. Employer statement

Date of birth (m/d/y)			
Date of death		· · · · · · · · · · · · · · · · · · ·	NOTE: If your child is disabled,
			please provide one of the fol- lowing forms of proof of disa-
Social security number			bility:
Relationship			1. Doctor statement
Months lived at home			2. Other health care provider
T (1) 10 1 (2) 10 1 (1)	l		statement 3. Social services agency or
Type of dependent (see table)			
Earned income credit (see table)			program statement

Page 5

2023	1040	US	Miscellaneous Questions (continued)
	If any	of the foll app	owing items pertain to you or your spouse for 2023, please check the ropriate box and provide additional information if necessary.
YES	NO		EMENT PLANS eceive a distribution from a retirement plan (401(k), IRA, SEP, SIMPLE, Qualified Plan, etc.)?
		Did you m	nake a contribution to a retirement plan (401(k), IRA, SEP, SIMPLE, Qualified Plan, etc.)?
		Did you tr	ansfer or rollover any amount from one retirement plan to another retirement plan?
			eceive a distribution from an Education Savings Account or a Qualified Tuition Program?
		Did you in	ZED DEDUCTIONS acur a loss because of damaged or stolen property? ork out of town for part of the year? se your car on the job (other than to and from work)?
		Did you ap If you hav refunded)	
		MISCE Do you wa Does your May the IF	ELLANEOUS ant to allocate \$3 to the Presidential Election Campaign Fund? The spouse want to allocate \$3 to the Presidential Election Campaign Fund? The spouse want to allocate \$3 to the Presidential Election Campaign Fund? The spouse want to allocate \$3 to the Presidential Election Campaign Fund? The spouse want to allocate \$3 to the Presidential Election Campaign Fund? The spouse want to allocate \$3 to the Presidential Election Campaign Fund? The spouse want to allocate \$3 to the Presidential Election Campaign Fund? The spouse want to allocate \$3 to the Presidential Election Campaign Fund? The spouse want to allocate \$3 to the Presidential Election Campaign Fund? The spouse want to allocate \$3 to the Presidential Election Campaign Fund?

ORGANIZER

Page 7 **Direct Deposit & Estimates (Form 1040 ES)** 1040 2023 US 3, 6 Please enter all pertinent 2023 information. **DIRECT DEPOSIT / ELECTRONIC PAYMENT (3)** 1=direct deposit of federal tax refund into bank account 1=electronic payment of balance due 1=electronic payment of estimated tax BANK INFORMATION Percent to Type of Deposit Routing Number **Account Number** Name of Bank (Table 1) (Table 2) (xx.xx) 2023 ESTIMATED TAX / 1040-ES (6) 2023 **Federal Amount Paid Date Paid Voucher Amount** Overpayment applied from 2022 1st quarter payment 2nd quarter payment..... 3rd quarter payment..... 4th quarter payment..... Additional Estimated Tax Payments Former spouse SSN if joint estimates 2023 Voucher Amount **State Amount Paid Date Paid** Overpayment applied from 2022 1st quarter payment 2nd quarter payment 3rd quarter payment 4th quarter payment Additional Estimated Tax Payments Paid with extension 2 Type of Account Type of Investment 1 = Checking or savings (default) 2 = Taxpayer's IRA (next year limits) 3 = Spouse's IRA (next year limits) 4 = Health savings account (HSA) 5 = Archer MSA 6 = Coverdell savings account (ESA) 7 = Other 1 = Savings 2 = Checking 7 = Other 8 = Taxpayer's IRA (current year limits) 9 = Spouse's IRA (current year limits)

3, 6

2023 1040 US Wages, Pensions, Gambling Winnings 1

10, 13.1, 13.2

Please enter all pertinent 2023 amounts & attach all W-2, W-2G and 1099-R forms. Last year's amounts are provided for your reference.

WAGES, SALARIES, TIPS (10)

		1=retirement plan (Box 13)	Wages, Tips, Other			Tax Withheld			
No.	Name of Employer (Box c)	plan (Box 13) 1=spouse	Compensation (Box 1)	Federal (Box 2)	Social Security (Box 4)	Medicare (Box 6)	State (Box 17)	Local (Box 19)	2022 Wages

PENSIONS, IRA DISTRIBUTIONS (13.1)

		Name of Payer Distribution code #2 Distribution code #1 1=IRA/SEP/SIMPLE		Gross Taxable		Tax Withheld		Value of				
No.	Name of Payer			SEP/SIMPLE			Gross Distribution (Box 1)	Amount (Box 2a)	Federal (Box 4)	State (Box 14)	Value of all IRAs at 12/31/23	2022 Distribution
		1=spous	se									

GAMBLING WINNINGS (W-2G) (13.2)

			se Gross Winnings (Box 1)				
No.	Name of Payer	1=spouse		Federal (Box 4)	State (Box 15)	Local (Box 17)	2022 Winnings

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

(13.2)	2023 Amount	TS	2022 Amount
Total gambling losses			
Winnings not reported on Form W-2G			

10, 13.1, 13.2

Business Income (Schedule C) 1040 US 16 2023 Please enter all pertinent 2023 amounts. Last year's amounts are provided for your reference. **GENERAL INFORMATION** Principal business/profession..... Principal business code..... Business name, if different from Form 1040 Business address, if different from Form 1040 ZIP code, if different from Form 1040 Foreign region Foreign postal code Foreign country Other accounting method..... Inventory method: 1=cost, 2=lower cost/market, 3=other 1=change of inventory method..... 1=spouse, 2=joint..... 1=first Schedule C filed for this business If required to file Form(s) 1099, did you or will you file all required Form(s) 1099: 1=yes, 2=no ... 1=not subject to self-employment tax 1=investment..... 1=minister's Schedule C..... 1=trader in financial instruments or commodities INCOME 2023 Amount 2022 Amount Gross receipts or sales (Form 1099-NEC)..... Returns and allowances..... Other income: **COST OF GOODS SOLD** Purchases..... Cost of items for personal use Cost of labor..... Materials and supplies..... Other costs: Inventory at end of the year.....

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	1040	US	Rental & Royalty Incom	e (Schedule E)	No.	18
	Please en	ter all pert	inent 2023 amounts. Last year's a	nounts are provided fo	or your reference.	
GEN	NERAL IN	IFORMA	TION	2023 Amount	2022 Amou	nt
Descri	ption of prop	erty			Type of Pro	nertv
Street	address				1 = Single Family R	-
City					2 = Multi-Family Re	sidence
State.					3 = Vacation/Short- 4 = Commercial	Term Rental
ZIP co	ode				5 = Land	
Type o	of property (se	ee table)			6 = Royalties 7 = Self-Rental	
Other	type of prope	rty		y	, = con nonai	
Numbe	er of days rer	ited		34		······································
Percenta	age of ownership					
if not 10	10% (.xxxx)	upancy	1=dic	not actively participate		
				l estate professional		
,	•			tal other than real estate		
1=qual	lified joint ver	nture	1=inv	estmente member limited		
				company		
If requ	ired to file Fo	rm(s) 1099, d	id you or will you file all required Form(s) 109	99: 1=yes, 2=no		
INC	OME			2023 Amount	2022 Amou	nt
Rents	or rovalties re	eceived				
			where)			
Advert	tising					
0.00				l	1	
Comm	issions					
Garder	ning					
Garder Insura	ning nce					
Garder Insurar Legal a	ningnce nce and professio	nal fees				
Garder Insurar Legal a Licens	ningnceand professions	nal fees				
Garder Insurai Legal a Licensi Manag	ningningning	nal feests				
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Garder Insurar Legal a Licens Manag Miscell Mortga	ning	nal fees ts	etc.)			
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Garder Insurar Legal a Licens Manag Miscell Mortga Excess Other i	ning	nal fees	etc.)			
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Garder Insural Legal a Licens Manag Miscell Mortga Excess Other i Paintin Pest co Plumbi Repain	ning	nal feests	etc.)			
Garder Insural Legal a Licens Manag Miscell Mortga Excess Other i Paintir Pest co Plumbi Repair Supplie	ning	nal fees ts	etc.)			
Garder Insurar Legal a Licens Manag Miscell Mortga Excess Other i Paintin Pest co Plumbi Repain Supplie Taxes	ning	nal feests	etc.)			
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Garder Insural Legal a Licens Manag Miscell Mortga Excess Other i Pest or Plumbi Repair Supplie Taxes Taxes Teleph Utilities Wages	ning	nal feests	etc.) nere)			
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Garder Insural Legal a Licens Manag Miscell Mortga Excess Other i Pest or Plumbi Repair Supplie Taxes Taxes Teleph Utilities Wages	ning	nal feests	etc.) nere)			

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23 1040	US	Vehicle Expenses		No 22 p3				
Please enter all pertinent 2023 amounts. Last year's amounts are provided for your reference.								
GENERAL IN	FORMA	TION	2023 Amount	2022 Amount				
1=no evidence to su 1=no written eviden 1=vehicle is availab 1=no other vehicle i 1=vehicle used prim	upport your d ice to support ile for off-duty is available fo narily by more	deduction						
AUTOMOBIL	E MILEA	AGE						
Business mileage Commuting mileage	e (for the tax	year)						
ACTUAL EXF	PENSES							
Gasoline, lube, oil		portion only)						
Insurance	than persona	al property taxes)						
Vehicle rent or lease Inclusion amount (e	e payments. Inter as positi	C, E & F)						

GANIZER 2023		IIC	Adjustments to Income		Page
U Z 5	1040	US	Adjustments to Income	;	24 p2
	Please ent	er all ned	tinent 2023 information. Last year's	s amounts are provided for your reference	a.
	r rease eme	or all per	mont be a mondation bust your	amounts are provided for your reference	
ADJI	JSTMEN [*]	TS TO IN	ICOME		
Alimon			axpayer	Spouse	
	orce or sep. aç cipient's first n				
	cipient's last n				
	cipient's SSN.				
	ount paid		2022 amt:	2022 amt:	

24 p2

ORGANIZER Itemized Deductions (continued) 2023 1040 US 25 p2 Please enter all pertinent 2023 amounts. Last year's amounts are provided for your reference. **INTEREST PAID** Home mortgage int. (Box 1) and points (Box 2) reported on Form 1098: 2022 Amount 2023 Amount Home mortgage interest not reported on Form 1098: Payee's name...... Payee's SSN or FEIN... Payee's street address... Payee's city..... Payee's state..... Payee's ZIP code Payee's region..... Payee's postal code Payee's country..... Amount paid..... Points not reported on Form 1098: Investment interest (interest on margin accounts): NOTE: Points paid on loans other than to buy, build, or improve your main home are deductible over the life of the mortgage. For these types of loans also provide the dates and lives of the loans. **CASH CONTRIBUTIONS** NOTE: No deduction is allowed for cash or check contributions unless the donor maintains a bank record, or a written communication from the donee, showing the name of the organization, contribution date(s), and contribution amount(s). Churches, schools, hospitals, and other charitable organizations (60% limitation): Contributions by cash or check: Veterans' organizations, fraternal societies, nonprofit cemeteries, and certain private nonoperating foundations (30% limitation): Contributions by cash or check:

Please enter all pertinent 2023 amounts. Last year's amounts are provided for your reference.

HER MISCELLANEOUS DEDUCTIONS	2023 Amount	TS	2022 Amount
e tax, section 691(c)			
miscellaneous deductions:			

		-++	

25 p4

2023 1040 US Itemized Deductions (continued) 25 p5 cont

Please enter all pertinent 2023 amounts and attach all 1098 forms. Last year's amounts are provided for your reference.

LOAN INFORMATION (continued)

Loan #3	2023 Amount	TS	2022 Amount
Lender's name			
Form (see table)			
Number of form			
1=taxpayer, 2=spouse, blank=joint			
Interest paid			
Points paid			
Total principal paid			
Lump sum principal payment (if paid off)			
Months outstanding (if not 12)			
1=home acquisition debt incurred after 12/15/17			
Home acquisition debt balance - beginning of year			
Home acquisition debt borrowed in 2023			
Home equity debt balance - beginning of year			
Home equity debt borrowed in 2023			
Grandfather debt balance - beginning of year			
Loan #4			
Lender's name			
Form (see table)			
Number of form			
1=taxpayer, 2=spouse, blank=joint			
Interest paid			
Points paid			
Total principal paid			
Lump sum principal payment (if paid off)			
Months outstanding (if not 12)			
1=home acquisition debt incurred after 12/15/17			
Home acquisition debt balance - beginning of year			
Home acquisition debt borrowed in 2023			
Home equity debt balance - beginning of year			
Home equity debt borrowed in 2023			
Grandfather debt balance - beginning of year			

Form

1 = Schedule A (default) 2 = Business use of home 3 = Schedule E ORGANIZER Page 25 1040 US **Additional Information** 2023 Please furnish any additional information or supporting details not provided elsewhere in this tax organizer.