

## 2023 Tax Organizer

**PLEASE DOWNLOAD TO YOUR COMPUTER BEFORE FILLING OUT.**

This Tax Organizer is designed to help you collect and report the information needed to prepare your 2023 income tax return. The attached worksheets cover income, deductions, and credits, and will help in the preparation of your tax return by focusing attention on your special needs.

Please enter your 2023 information in the designated areas on the worksheets. If you need to include additional information, you may use the back of a worksheet or an additional page.

Note: The General Questions and worksheets include a variety of questions designed to assist in completing your tax return. Not all questions will be applicable to your situation and can be left blank. If you answer yes to any of the questions, be sure to provide the applicable details.

Please provide the following information:

- A copy of your 2022 tax return (if not in our possession).
- Original Form(s) W-2.
- Schedule(s) K-1 showing income or loss from partnerships, S corporations or estates or trusts.
- Copies of other compensation or pension documentation, such as Form 1099-MISC, Form 1099-R, Form 1099-NEC.
- Copies of Form 1099-K used to report transactions through a third-party payment network, such as PayPal, Venmo and Zelle.
- Form(s) 1099 or statements reporting dividend and interest income.
- Brokerage statements showing transactions for stocks, bonds, etc.
- Form(s) 1098 reporting interest paid, copies of real estate tax bills and other information relating to real property holdings.
- Copies of closing statements regarding the sale or purchase of real property.
- All other information notices you received, or any items you have questions about.

Please provide all relevant documentation or applicable details for any questions below for which you have answered "Yes"

Health Insurance and Education		
	YES	NO
1. Did you or your spouse have self-employment health insurance?	<input type="checkbox"/>	<input type="checkbox"/>
2. Did you contribute to or receive distributions from a Health Savings Account (HSA)?	<input type="checkbox"/>	<input type="checkbox"/>
3. Did you have a college savings account (e.g.: 529, Educations Savings Account, etc.)? If yes, please enter total 2023 qualified amount:	<input type="checkbox"/>	<input type="checkbox"/>

Direct Deposit of Refund and Foreign Income		
	YES	NO
1. Did you have any foreign income or a foreign account? Please refer to the guidelines on the income section of this organizer.	<input type="checkbox"/>	<input type="checkbox"/>
2. The Internal Revenue Service encourages all taxpayers to opt for a direct deposit of refunds, or a direct withdrawal of taxes owed. If you would like WCPA to handle your payment options, please fill out the information in the next section.	<input type="checkbox"/>	<input type="checkbox"/>
a) If you receive a refund, would you like to choose direct deposit?	<input type="checkbox"/>	<input type="checkbox"/>
b) If you owe income taxes, would you like to choose to have the amount withdrawn from your bank account?	<input type="checkbox"/>	<input type="checkbox"/>

**NOTE: WCPA will not initiate payments or refunds until you have thoroughly reviewed and approved your return.**

**CAUTION: Review information for accuracy. PLEASE PROVIDE A VOIDED CHECK IF POSSIBLE**

1. Name of financial institution: \_\_\_\_\_
2. Routing Number: \_\_\_\_\_
3. Account Number: \_\_\_\_\_
4. Type of Account: Checking:  Savings:



Taxpayer Information		Spouse Information	
Last name.....	_____	Last name.....	_____
First name.....	_____	First name.....	_____
Middle Initial.....	Suffix..... _____	Middle Initial.....	Suffix..... _____
Social security number.....	_____	Social security number.....	_____
Occupation.....	_____	Occupation.....	_____
Work phone.....	Ext..... _____	Work phone.....	Ext... _____
Cell phone.....	_____	Cell phone.....	_____
E-mail address.....	_____	E-mail address.....	_____
Date of birth.....	_____	Date of birth.....	_____
Address .....		Apartment/Suite #...	
City.....		State....	ZIP code.....
Home phone.....		Fax number.....	

Dependent Information					
First Name Last Name	MI Suffix	Social Security Number Relationship	Date of Birth	Months Lived with Taxpayer	Child Care Expenses

Child and Dependent Care Provider Expenses			
Name	Address	ID Number	Amount Paid

**Education Tuition and Fees**  
 Provide all Form 1098-Ts and a list of your qualified expenses.

**Student Loan Interest Paid**  
 Enter total 2023 Qualified student loan interest..... \_\_\_\_\_

**Please provide if you have any of the following income or forms:**

**Form(s) W-2 - Wages, Salaries, Tips and Other Compensation**

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**Form(s) 1099-R - Distributions from Pensions, Annuities, Retirement, Profit-Sharing, IRAs, etc**

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**Form(s) SSA-1099 - Social Security/Railroad Benefits**

**Taxpayer**

**Spouse**

Social Security Benefits from Form SSA-1099 .....	_____	_____
Railroad Retirement Benefits from Form RRB-1099 .....	_____	_____
Medicare B, C or D premiums withheld.....	_____	_____

**Form(s) 1099-MISC - Miscellaneous Income and 1099-NEC**

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**Form(s) 1099-INT - Interest Income**

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**Form(s) 1099-DIV - Dividend Income**

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**Form(s) 1099-B, 1099-S - Sales of Stocks, Bonds, Real Estate, etc.**

Provide all stock sale transaction information, including initial cost information.

**Foreign Income – Foreign Accounts and Trusts (Qualification Criteria)**

- Did you have taxable interest, ordinary dividends or other income from a foreign account; or received a distribution from, or were a Grantor of, or a Transferor to a foreign trust?
- Did you have a financial interest in or signature authority over a financial account (such as a bank account, securities account, or brokerage account) located in a foreign country(s)?
- Did you receive a distribution or were the Grantor of, or Transferor to a foreign trust?

If you answered Yes to any of these questions, provide the name of the foreign country(s) where the financial account is located: \_\_\_\_\_

**Virtual Currency and Cryptocurrency**

All sale or other exchange of virtual currency and cryptocurrency, or use it to pay for goods or services, or receiving it as compensation, or holding it as an investment.

**Other Government Forms to provide:**

Form(s) 1099-G - Certain Government Payments, Schedule K-1s - Partnership, S-Corporation, Trust or Estate Income, Form(s) W-2G - Gambling or Lottery Winnings, Form(s) 1099-Q - Payments from Qualified Education Programs

**Other Income:**

Alimony, jury duty, unreported tips, disability income, etc. Business, rentals, farms: Provide income and expenses for any business, rental or farm you own. Include a list of all new equipment acquired this year, including date of purchase and cost.

**Retirement Plan Contributions**

**Taxpayer**

**Spouse**

Traditional IRA contributions made for 2023 .....	_____	_____
Roth IRA contributions made for 2023 .....	_____	_____
SEP, Keogh, Individual 401(k) or SIMPLE Contributions .....	_____	_____

**2023 Deductions**

**Medical and Dental Expenses – Please provide total amounts, DO NOT SEND RECEIPTS**

Prescriptions & Medications ..... \_\_\_\_\_

Health Insurance Premiums ..... \_\_\_\_\_

Doctors, dentists, etc..... \_\_\_\_\_

Hospitals, clinic, etc. .... \_\_\_\_\_

Eyeglasses and contact lenses..... \_\_\_\_\_

Miles driven for medical purposes..... \_\_\_\_\_

Other medical and dental expenses: \_\_\_\_\_

**Taxes**

Real estate taxes paid on principal residence ..... \_\_\_\_\_

Real estate taxes paid on additional homes or land..... \_\_\_\_\_

Auto license registration fees based on the value of the vehicle..... \_\_\_\_\_

Other personal property taxes: \_\_\_\_\_

**Interest Expenses**

Home mortgage interest paid - Provide Form(s) 1098.

<b>Lender Name</b>	<b>Amount</b>
_____	_____
_____	_____

Points paid on loan to buy, build, or improve main home

<b>Lender Name</b>	<b>Amount</b>
_____	_____
_____	_____

**Charitable Contributions** (please provide spreadsheet or receipts)

**Cash/Check/Credit Contributions**

_____	_____
_____	_____

**Noncash Charitable Contributions**

Please provide all receipts with details listing the following information: Donee, donee address, description of donation, date acquired, and date contributed, your cost, value at time of donation, and how you acquired the property.

**Miscellaneous Deductions**

Union and professional dues ..... \_\_\_\_\_

Professional subscriptions, books, supplies ..... \_\_\_\_\_

Uniforms and protective clothing (including cleaning) ..... \_\_\_\_\_

Job search costs..... \_\_\_\_\_

Taxpayer educator expenses..... \_\_\_\_\_

Spouse educator expenses ..... \_\_\_\_\_

Tax return preparation fees..... \_\_\_\_\_

Safe deposit box rental..... \_\_\_\_\_

Gambling losses (to the extent of gambling income) ..... \_\_\_\_\_

Other expenses: \_\_\_\_\_



**Additional Information**

*(Click below to enter your additional text. Press "ENTER" on your keyboard for multiple lines.)*

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