

Individual Tax Organizer 2023



BASIC INFORMATION:

Taxpayer Name _____ Spouse Name _____

Phone number _____ Phone number _____

Email _____ Email _____

Occupation _____ Occupation _____

Mailing Address _____

City, State, Zip _____

Bank information for Direct Deposit of refunds:

Bank Name _____ Checking or Savings _____

Routing # _____ Account # _____

Yes

No

Did you add/change any dependents not on the 2022 return?

If claiming children under age 17, did they live with you more than 50% of the year?

Dependent Name

SSN (only if not in prior year)

Date of Birth

daycare Y/N* tuition Y/N**

* If child has daycare, please provide Name, Address, Tax ID and amount paid to provider, per child – see page 5.

** If child has COLLEGE tuition, please attach 1098-T. Provide notes if needed – see page 5.

INCOME SOURCES: Indicate with an “X” which of the following you had and attach relevant documents. If it does not apply, leave blank.

W2

K1

1099 MISC/NEC/K/Q

1099 G (Unemployment Benefits or State Tax Refunds)

1099R/1099SSA (Retirement or Social Security)

1099 DIV/INT/B (Investment income)

Rental Property (Attach Separate Organizer for each)

Small Business (Attach Separate Organizer for each)

Foreign Income – describe _____

Other – describe _____

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HEALTH INSURANCE:

Yes No

 Was your health insurance purchased through Connect for Health? (i.e. did you get a health insurance subsidy) **Attach 1095A** if Yes.

CONTRIBUTIONS PAID PERSONALLY (not through your W2):

Indicate the amounts contributed personally, if any, to the following. DO NOT include amounts contributed through an employer on a W2 or deducted through a business.

	Taxpayer	Spouse
HSA <small>Health Savings Account</small> distributions	\$ _____	\$ _____
HSA Contributions	\$ _____	\$ _____
Indicate if you had a family or individual health plan _____		
Traditional IRA	\$ _____	\$ _____
Roth IRA	\$ _____	\$ _____
SEP/SIMPLE/401K etc.	\$ _____	\$ _____

Yes No

 Do you want help calculating any of these potential contributions? HSA and IRA can be contributed up retroactively.

ESTIMATED TAX PAYMENTS: Only include amounts paid directly by you, NOT amounts withheld through W2s or other withholding.

Yes No

 Did you make estimated payments for 2023 tax outside of payroll withholding? If so, provide dates and amounts below

Federal			State		
Date		Amount		Date	
Date		Amount		Date	
Date		Amount		Date	
Date		Amount		Date	

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OTHER THOUGHTS TO CONSIDER:

- | Yes | No | |
|--------------------------|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | I will provide digital copies of your returns to you. Do you also want a full paper copy of your 2023 return? |
| <input type="checkbox"/> | <input type="checkbox"/> | Would you prefer to use a digital signature on your efilings forms? |
| <input type="checkbox"/> | <input type="checkbox"/> | Did you change address, legal name or filing status? |
| <input type="checkbox"/> | <input type="checkbox"/> | Did you purchase an Electric or Hybrid vehicle in 2023? |
| <input type="checkbox"/> | <input type="checkbox"/> | Did you add Energy Efficient or Clean Energy Improvements to your primary home
If so, provide details. (i.e. Insulation, windows, boilers, energy audits, solar, etc.) |
| <input type="checkbox"/> | <input type="checkbox"/> | Did you contribute to a 529 College Savings Tuition plan for your residency state?
How much? \$_____ Are you the owner of the account? (yes/no) _____ |
| <input type="checkbox"/> | <input type="checkbox"/> | Did you have charitable donations?(If yes, please fill out top section on Page 4) |
| <input type="checkbox"/> | <input type="checkbox"/> | Did you buy or sell a home? Details _____ |
| <input type="checkbox"/> | <input type="checkbox"/> | Did you receive or sell/exchange/dispose of any digital assets in 2023 (i.e. Bitcoin)? |
| <input type="checkbox"/> | <input type="checkbox"/> | Do you have foreign bank accounts totaling more than \$10,000 during the year?
If yes, do you want dMCPA to prepare the required FBAR reporting? |
| <input type="checkbox"/> | <input type="checkbox"/> | Do any dependents have earned income > \$13,850
and/or investment income > \$1250? |
| <input type="checkbox"/> | <input type="checkbox"/> | If yes, do you want dMCPA to prepare this tax return? |
| <input type="checkbox"/> | <input type="checkbox"/> | Did you inherit money or property? Provide details _____ |
| <input type="checkbox"/> | <input type="checkbox"/> | Did you have any gambling winnings? _____ Losses? _____ |
| <input type="checkbox"/> | <input type="checkbox"/> | Did you pay or receive Alimony/Spousal maintenance (pre 2019 divorces)? |
| <input type="checkbox"/> | <input type="checkbox"/> | Did you pay student loan interest? If yes provide amount and lender name |
| <input type="checkbox"/> | <input type="checkbox"/> | If you are an educator by profession, did you have education expenses? \$ _____ |
| <input type="checkbox"/> | <input type="checkbox"/> | If you are to get a refund, do you want to apply it to the 2024 tax year? |

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CHARITABLE CONTRIBUTIONS: dMCPA does not need receipts, but you must keep these for your records. (EXCEPTION: If you have charitable tax credits, documentation is required)

Cash ***

Name of Charity	Dollar Amount Donated
_____	_____
_____	_____
_____	_____

Noncash***

Name and Address of Charity	Description	Thrift Store Value	Date
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

**Attach list if more than can be listed here

OTHER ITEMIZED DEDUCTIONS

Note in 2023 the standard deduction is \$13,850 Single and \$27,700 Married Filing Joint. Only complete the below if you will be close to or over that threshold.

MEDICAL: Note deductibility is limited by 7.5% of your income:

- _____ Prescriptions _____ Long term care premiums – Taxpayer
- _____ Doctors, Dentists _____ Long term care premiums– Spouse
- _____ Hospitals, Clinics _____ Medical Equipment & Supplies
- _____ Eyeglasses, Contacts _____ # miles driven for medical
- _____ Insurance premiums paid by you (not Medicare or employer paid)

TAXES:

- _____ Real estate taxes paid in 2023 for Primary Residence
- _____ Real estate taxes paid in 2023 for other homes or land (not rentals)
- _____ Car Registration OWN tax (on the receipt of your registration)

Yes No
 Did you purchase any large items such as a vehicle or RV?

MORTGAGE INTEREST: Provide copies of all 1098INT forms

- Yes No
- Do you have a Mortgage on your home? – include 1098INT
- If you have a HELOC, were the funds were used to buy/build?
- Is your total amount mortgaged greater than \$750K?

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A Whole Page for additional notes!

This is where you should include:

The details on any questions you answered “yes” to on page 3

Any questions you have

Clarifications on information provided

Changes this past year or other items not addressed above

Upcoming changes that might impact planning for 2024

This page is OPTIONAL.