Client Name: **ORGANIZER** 2022 US **Miscellaneous Questions** 1040 If any of the following items pertain to you or your spouse for 2022, please check the appropriate box and if "YES" provide additional information where necessary. (For Example: Escrow statements for purchase or refinancing, foreign account statements, new dependents, social security number, 1099's, k-1's) TAX PAYMENTS AND REFUNDS No Yes Did your bank account information change within the last twelve months? If so, please provide the updated account information (voided check) for direct deposit and electronic payment purposes. If you have a balance due do you want to pay electronically or, if you have an overpayment, do you want it directly deposited into your bank? CORONAVIRUS AID, RELIEF AND ECONOMIC SECURITY ACT (CARES ACT) Yes No Did you and/or your spouse receive advance payments of the child tax credit? If so, please provide amounts and dates of each payment receipt. Did you claim the Employee Retention Credit? If so, please provide copies of the amended quarterly payroll tax returns that were filed (Forms 941 and 940) for your business if not already provided to us. Did you receive unemployment compensation during the year? If so, please provide Form 1099-G.  $\,$ **FOREIGN TRANSACTIONS** Yes No 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? If yes, please provide details about all such accounts including bank name and account number, highest balance in the account during the year, and your interest in the account (i.e. account owner, trustee, signature authority, etc) signature authority, etc). Do you own any part of a foreign company? If yes, please provide details. Did you have any foreign income or pay any foreign taxes? If yes, please describe. Did you receive over \$100,000 during 2022 from foreign sources (for example: gift, or inheritance, or sale of property or investment)? If yes, please provide all details. Did you receive a distribution from, or were you the grantor of, or transferor to, a foreign trust? If yes, please provide details including amounts and dates of distributions and where distributions were received from. PERSONAL INFORMATION Yes No Did your marital status change during the year? If so, please provide details of this change plus the last 3 years of Tax Returns for the new spouse, where appropriate. Did your address change during the year? If so, please provide details of this change. Could you be claimed as a dependent on another person's tax return for 2022? If yes, please explain.

Were there any changes in dependents? If so, please provide details of this change (First and Last Name, SSN, Birthdate, Relationship).

**DEPENDENTS** 

Yes

No

ORGANIZ	ER		
2022	1040	US	Miscellaneous Questions
			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? If so, please consult with us prior to those returns being prepared so that we may make sure that the appropriate tax rate is applied to your child's income tax return.
	Yes	No	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? If yes, please provide information on source, amount, etc.
			Did you have gross gambling income? If yes, please provide all the tax forms received, as well as a summary of your overall gains/losses.
	Yes	No	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? If yes, please provide details, or a K-1 statement.
			Did you purchase or dispose of any business assets (furniture, equipment, vehicles, real estate, etc.), or convert any personal assets to business use? If yes, please identify.
			Did you buy or sell any stocks, bonds or other investment property in 2022? If yes, please provide information regarding these transactions. Such as complete 1099 forms from the brokerage, if applicable.
			Did you invest/trade in digital assets (e.g. Bitcoin, Litecoin, Etherium, etc) during the year? If so, please provide gain / loss reports covering the entire year.
			Did you sell or do you plan to sell any dividend generating stocks or mutual funds during the first 60 days of 2023? If yes, wash sale rules might apply. Please provide details regarding these transactions.
			Did you receive employer stock including restricted stock, stock options, exercise stock options or participate in an employee stock purchase program? Please provide copies of applicable statements regarding these programs and transactions.
			Did you purchase, sell, or refinance your principal home or second home, or did you take a home equity loan? If yes, please provide final (closing) escrow statement (HUD-1).
			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? If so, please provide purchase details.
			Did you purchase a new plug in electric drive motor vehicle in 2022? If yes, please provide a copy of the purchase statement.
			Did you have any debts cancelled or forgiven? If yes, please provide a copy of form 1099-C and/or details of debt cancelled or forgiven.
			Did anyone owe you money which has become uncollectible? If yes, please let us know details such as name of person, amount uncollectible and any other details.

ORGANIZ	ER		
2022	1040	US	Miscellaneous Questions
			If you made any purchases of tangible personal property without paying sales tax (by purchasing online or from an out of state vendor), do you owe any use tax to the state of California? If so, provide details of purchase and use tax owed.
	Yes	No	RETIREMENT PLANS  Did you receive a distribution from a retirement plan (401(k), IRA, SEP, SIMPLE, Qualified Plan, etc.)? If yes, please provide a copy of Form 1099-R
			Did you make a contribution to a retirement plan (401(k), SEP, SIMPLE, Qualified Plan, etc.)? If yes, please specify to what plan, the amount and date of contribution.
			Did you make or will you make by April 18, 2023 a deductible or non-deductible contribution to your IRA? If so, please provide amount and date(s) of contribution.
			Did you convert part or all of your traditional IRA, SEP, or SIMPLE IRA to a Roth IRA? If yes, please provide a copy of form 1099-R.
			Did you either directly rollover an amount from one retirement plan to another or receive a distribution from a retirement plan that you deposited into another plan within 60 days? If yes, please provide supporting documentation for distribution and deposit.
			Did you make a qualified charitable distribution from your IRA directly to a charity? If yes, please provide details.
			Will you be turning 73 in 2023 and be required to take a required minimum distribution from a retirement plan?
	Yes	No	EDUCATION
			Did you receive a distribution from an Education Savings Account or a Qualified Tuition Program? If yes, please provide a copy of form 1098-Q. Also, please confirm whether or not the funds were used entirely for education purposes or something different.
			Did you, your spouse, or a dependent incur any tuition expenses to attend a college, university, or vocational school? If yes, please provide a copy of form 1098-T along with a detailed listing of books and supplies.
	Yes	No	HEALTH CARE COVERAGE
			Did you and your dependents have healthcare coverage for the full year? If so, please provide copies of Forms 1095-A, 1095-B, or 1095-C (whichever you may have received).
			If you or your dependents did not have health care coverage for the entire 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? Please provide additional details regarding the exempt status. If you received an exemption certificate, please provide a copy of all such documents.
			For 2022 and / or 2023, if you applied for and will be getting health insurance via the health insurance marketplace (i.e. healthcare.gov or coveredca.com), did you apply for a premium assistance tax credit? If so, please provide information about the credit you will be receiving.
			If self-employed, please provide the total amount of premiums paid for health, dental, vision and for long term care insurance during the year.

ORGANIZ	ER		
2022	1040	US	Miscellaneous Questions
			Did you engage the services of any household employees and pay wages of \$1,900.00 or more in 2022? If yes, please provide details about how much was paid to each employee.
			Were you notified or audited by either the Internal Revenue Service or the State taxing agency? If yes, please provide a copy of the notice(s) for our review.
			Did you or your spouse make any gifts to an individual that total more than \$15,000, or any gifts to a trust, such as a life insurance trust or an irrevocable trust? If yes, please provide details about the gifts including dates and amounts of gifts (by individual or trust).
			Were you or was any of your property located in a federally declared disaster area?
			Did you or your spouse receive a pension or annuity in 2022 for services performed as an employee of the U.S., state or local government from work not covered by social security? If yes, please provide details about such income.
			Did you or your spouse elect to receive COBRA continuation health coverage? If yes, please provide the amounts you paid for such coverage during the year.
			Are you a member of the Armed Forces of the United States on active duty who moved pursuant to a military order related to a permanent change of station?
	Yes	No	PLEASE IDENTIFY WHICH OF THE FOLLOWING SERVICES MIGHT BE OF VALUE TO YOU. IF ANY OF THESE APPLY, PLEASE CONTACT US TO DISCUSS.
			Tax planning for the year 2023 (proactive planning to uncover and identify tax strategies to help you reduce tax liability / increase tax refund)
			Preparation of a personal financial statement (useful for estate and financial planning, retirement planning, for borrowing purposes, etc.)
			Financial planning (planning, identifying and implementing wealth building strategies)
			Retirement planning (near retirement and post retirement assessment and funding strategies)
			IRA or Social Security Planning. Will you be collecting benefits soon? Will you be 73 soon? Are you trying to decide about collecting early?
			Estate, legacy planning and update (preserving, directing and transferring wealth)
			College education funding (funding, investment and distribution strategies)
			Investment strategy (review of existing programs, development of investment policy and/or investment management)
			Insurance (identifying and managing risk to preserve capital)
			Banking (analyzing and solving personal banking issues)
			Lending (analyzing capital needs and directing the right financing source i.e. personal, home, business loans and lines of credit)
	PLEASI	E SUBMI	T THE FOLLOWING FORMS WITH THIS TAX ORGANIZER
	Form 1 Form 1 Form 1 Form 1 Form 1 Form 1	L099 L098 L098-T (-1 L095-A L095-C ices and	correspondence from IRS, Franchise Tax Board or other State Tax Agencies.
	Any ot	her pert	ents for any real estate purchase, sale, or refinance. inent tax documentation that will assist us in preparing your return.

ORGANIZER				Page I
2022	1040	US	Client Information	1

Wertz & Company LLP 5450 Trabuco Road

Irvine CA 92620

Telephone number: (949) 756-5000 Fax number: (949) 756-1618

E-mail address:

**Tax Return Appointment** 

Date: Time: Location:

This tax organizer will assist you in gathering information necessary for the preparation of your 2022 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 (2020 or 2021)
	First name and initial
	Last name
	Title/suffix
Taxpayer	Social security number
. anpayo.	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
Spouse	Occupation
	Date of birth (m/d/y)
	Date of death (m/d/y)
	1=blind
	In care of
	Street address
Address	Apartment number
/ ladi 033	City
	State
	ZIP code
Foreign	Region
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)

		i		 		_
2022	1040	US	Dependents	2	)	

## Please add, change or delete information for 2022.

### **DEPENDENTS**

	Dependent	Dependent	
First name			
Last name			Type of Dependent
Title/suffix			1 = Child living w/taxpayer
Date of birth (m/d/y)			2 = Child not living w/taxpaver
Date of death			3 = Dependent other than child 4 = Head of household or
Date of adoption			qualifying surviving
Social security number			spouše (QSS) only. not a dependent
Relationship			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			1 - When applicable (default)
IRS theft protection PIN			1 = When applicable (default) 2 = Student age 19 to 23
	Dependent	Dependent	3 = Disabled 4 = Force
First name			5 = Suppress
Last name			
Title/suffix			
Date of birth (m/d/y)			NOTE: If you claim the carned
Date of death			NOTE: If you claim the earned income credit, please provide
Date of adoption			proof that your child is a resident of the U.S. This proof is
Social security number			typically in the form of:
Relationship			School records or statement
Months lived at home			2. Landlord or property man-
Type of dependent (see table)			agement statement 3. Health care provider
Earned income credit (see table)			statement
Claimed by: 1=taxpayer, 2=spouse			4. Medical records
IRS theft protection PIN			<ul><li>5. Child care provider records</li><li>6. Placement agency statement</li></ul>
İ	Dependent	Dependent	7. Social service records or statement
First name			8. Place of worship statement
Last name			<ul><li>9. Indian tribe office statement</li><li>10. Employer statement</li></ul>
Title/suffix			10. Employer statement
Date of birth (m/d/y)			
Date of death			
Date of adoption			NOTE: If your child is disabled, please provide one of the fol-
Social security number			lowing forms of proof of disa-
Relationship			bility:
Months lived at home			1. Doctor statement 2. Other health care provider
Type of dependent (see table)			statement
Earned income credit (see table)			Social services agency or program statement
Larried income credit (see table)			program statement
Claimed by: 1=taxpayer, 2=spouse			

**ORGANIZER** 

Direct Deposit & Estimates (Form 1040 ES) US 2022 1040 3, 6 Please enter all pertinent 2022 information. **DIRECT DEPOSIT / ELECTRONIC PAYMENT (3)** 1=direct deposit of federal tax refund into bank account ...... **BANK INFORMATION** Percent to Type of Type of Deposit Account Invest. Name of Bank **Routing Number Account Number**  $(x\dot{x}.xx)$ (Table 1) (Table 2) 2022 ESTIMATED TAX / 1040-ES (6) 2022 **Federal Amount Paid Date Paid** Voucher Amount Overpayment applied from 2021 3rd quarter payment... Additional Estimated Tax Payments Paid with extension . . . . . . . Former spouse SSN if joint estimates 2022 State **Amount Paid Date Paid** Voucher Amount Overpayment applied from 2021 1st quarter payment 2nd quarter payment 3rd quarter payment 4th quarter payment Additional Estimated Tax Payments Paid with extension ..... 2 1 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 8 = Taxpayer's IRA (current year limits) 9 = Spouse's IRA (current year limits) 1 = Savings 2 = Checking

**ORGANIZER** Page 5 Direct Deposit & Estimates (Form 1040 ES) (cont.) US 1040 7.1 2022 Please enter all pertinent 2022 information. **APPLICATION OF 2022 OVERPAYMENT (7.1)** If you have an overpayment of 2022 taxes, do you want the excess refunded? or applied to 2023 estimate? Other (please explain): 2023 ESTIMATED TAX INFORMATION Do you expect your 2023 taxable income to be different from 2022? If "yes" explain any differences in income, deductions, dependents, etc.: Do you expect your 2023 withholding to be different from 2022? If "yes" explain any differences:

7.1

2022 1040 US Wages, Pensions, Gambling Winnings 10, 13.1, 13.2

Please enter all pertinent 2022 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 Wages, Ti e of Employer (Box c) plan (Box 13) Other							
No.	Name of Employer (Box c)	plan (Box 13) 1=spouse	Wages, Tips, Other Compensation (Box 1)	Federal (Box 2)	Social Security (Box 4)	Medicare (Box 6)	State (Box 17)	Local (Box 19)	2021 Wages

### PENSIONS, IRA DISTRIBUTIONS (13.1)

		Distribution code #2			.	Cross	T 1-1 -	Tax Withheld		Value of		
No.	Name of Payer	Name of Payer  Distribution code #1  1=IRA/SEP/SIMPLE  1=spouse		Gross Distribution (Box 1)	Taxable Amount (Box 2a)	Federal (Box 4)	State (Box 14)	Value of all IRAs at 12/31/22	2021 Distribution			

### **GAMBLING WINNINGS (W-2G) (13.2)**

			Cross Winnings					
No.	Name of Payer	1=spouse	Gross Winnings (Box 1)	Federal (Box 4)	State (Box 15)	Local (Box 17)	2021 Winnings	

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

(13.2)	2022 Amount	TS	2021 Amount
Total gambling losses			
Winnings not reported on Form W-2G			

10, 13.1, 13.2

2022 1040 US Interest & Dividend Income 11, 12

Please enter all pertinent 2022 amounts & attach all 1099-INT, 1099-OID and 1099-DIV forms. Last year's amounts are provided for your reference.

### **INTEREST INCOME (11)**

	Name of Paver	1		Interest Income		Tax-Exem	pt Interest	Early Withdrawal	
No.	Name of Payer (also enter SSN & address for seller-financed mortgage)  1=t 2=		Banks, S&Ls, C/Us, etc. (Box 1)	Seller- Financed Mtg. (Box 1)	U.S. Bonds, T-Bills (Box 3)	Total Municipal Bonds	In-state Municipal Bonds	Penalty (Box 2)	2021 Interest
	•		•		•				

## **DIVIDEND INCOME (12)**

	No. Name of Payer 1= 2=		Dividend Income				Tax-Exempt Interest		Foreign		
No.			Total Ordinary Dividends (Box 1a)	Qualified Dividends (Box 1b)	Total Capital Gain Distrib. (Box 2a)	SubSection 199A (Box 5)	U.S. Bonds (% or amt.)	Total Municipal Bonds	In-state Muni-bonds (% or amt.)	Foreign Tax Paid (Box 7)	2021 Dividends

2022 1040 US Miscellaneous Income 14.1

Please enter all pertinent 2022 amounts and attach all 1099-MISC, 1099-NEC, SSA-1099, and RRB-1099 forms. Last year's amounts are provided for your reference.

MISCELLANEOUS INCOME	2022 Am	ount	2021 Amount		
	Taxpayer	Spouse	Taxpayer	Spouse	
Social security benefits (SSA-1099, box 5)					
Medicare premiums paid (SSA-1099)					
1=treat Medicare premiums paid as SE health ins.					
Tier 1 RR retirement benefits (RRB-1099, box 5)					
1=lump-sum election for SS benefits					
Alimony received					
Taxable scholarships and fellowships					
Jury duty pay					
Household employee income not on W-2					
Excess minister's allowance					
Alaska permanent fund dividends					
Income from rental of personal property					
Income subject to S/E tax:			·		
-					
her income (1099-MISC, box 3, 8, 1099-NEC, box 1)	L				
TAX WITHHELD (not entered elsewhere)					
Federal income tax withheld					
State income tax withheld					
Local income tax withheld					
Local income tax withheld					

OKGANIZEK				<u>rage 9</u>
2022	1040	US	State & Local Tax Refunds / Unemployment Compensation	14.2

Please add, change or delete 2022 information as appropriate. Be sure to attach all 1099-G forms.

# STATE AND LOCAL TAX REFUNDS / UNEMPLOYMENT COMPENSATION (Form 1099-G)

	Time it Com Energine (Form 1977 G)	2022 1099-G Amount
	Name of payer	
	1=spouse	
	Unemployment compensation:	
	Total received (Box 1)	
	2022 Overpayment repaid	
	State and local refunds:	
	State and local income tax refund, credit or offsets (Box 2).	
	1=city or local income tax refund	
	Tax year for box 2 if not 2021 (Box 3)	
	Federal income tax withheld (Box 4)	
No.	RTAA payments (Box 5)	
	Taxable grants:	
	Federal taxable amount (Box 6)	
	State taxable amount, if different	
	Farm amounts:	
	Agriculture payments (Box 7)	
	1=agriculture payments are from conservation reserve program	
	Market gain (Box 9)	
	Number of farm.	
	1=box 2 is trade or business income (Box 8)	
	State income tax withheld (Box 11)	
	State income tax withheld (box 11)	
	Name of payor	
	Name of payer	
	1=spouse.	
	Unemployment compensation:	
	Total received (Box 1)	
	2022 Overpayment repaid	
	State and local refunds:	
	State and local income tax refund, credit or offsets (Box 2)	
	1=city or local income tax refund	
	Tax year for box 2 if not 2021 (Box 3)	
—	Federal income tax withheld (Box 4)	
No.	RTAA payments (Box 5)	
	Taxable grants:	
	Federal taxable amount (Box 6)	
	I	
	State taxable amount, if different	
	Farm amounts:	
	Farm amounts: Agriculture payments (Box 7)	
	Farm amounts:  Agriculture payments (Box 7)	
	Farm amounts:  Agriculture payments (Box 7)	
	Farm amounts:  Agriculture payments (Box 7)	
	Farm amounts:  Agriculture payments (Box 7)  1=agriculture payments are from conservation reserve program  Market gain (Box 9)  Number of farm  1=box 2 is trade or business income (Box 8)	
	Farm amounts:  Agriculture payments (Box 7)	

				,
2022	1040	US	Education Distributions (ESA's and QTP's)	14.3

Please enter all pertinent 2022 amounts and attach all 1099-Q forms. Enter qualified education expenses below that are not entered elsewhere. Last year's amounts are provided for your reference.

ESA'S AN	ID QTP'S (Form 1099-Q)	2022 Amount	2021 Amount
	Name of payer		
	1=spouse.		
	Qualified expenses:		
	Higher education (net of nontaxable benefits)		
	Elementary & secondary education (net of nontaxable benefits)		
	Form 1099-Q:		
No 🗆	Gross distributions (Box 1)		
No.	Earnings (Box 2)		
	Basis (Box 3)		
	Rollover: 1=nontaxable, 2=taxable (Box 4)		
	Distribution type: 1=private 529, 2=state 529, 3=Coverdell ESA (Box 5)		
	ESA's only:		
	2022 contributions to this ESA		
	Value of this account at 12/31/22 (plus outstanding rollovers)		
	Basis in this ESA as of 12/31/21		
	Name of payer		
	1=spouse		
	Qualified expenses:		
	Higher education (net of nontaxable benefits)		
	Elementary & secondary education (net of nontaxable benefits)		
	Form 1099-Q:		
	Gross distributions (Box 1)		
No.	Earnings (Box 2)		
	Basis (Box 3)		
	Rollover: 1=nontaxable, 2=taxable (Box 4)		
	Distribution type: 1=private 529, 2=state 529, 3=Coverdell ESA (Box 5)		
	ESA's only:		
	2022 contributions to this ESA		
	<u> </u>		
	Value of this account at 12/31/22 (plus outstanding rollovers)		
	Basis in this ESA as of 12/31/21		
	Name of anion		
	Name of payer		
	1=spouse		
	Qualified expenses:		
	Higher education (net of nontaxable benefits)		
	Elementary & secondary education (net of nontaxable benefits)		
	Form 1099-Q:		
	Gross distributions (Box 1)		
No.	Earnings (Box 2)		
	Basis (Box 3)		
	Rollover: 1=nontaxable, 2=taxable (Box 4)		
	Distribution type: 1=private 529, 2=state 529, 3=Coverdell ESA (Box 5)		
	ESA's only:		
	2022 contributions to this ESA		
	Value of this account at 12/31/22 (plus outstanding rollovers)		
	Basis in this ESA as of 12/31/21		

ORGANIZER		Page II

2022 | 1040 | US | ABLE Distributions | 14.4

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

ABLE DIST	RIBUTIONS / CONTRIBUTIONS		
		2022 Amount	2021 Amount
	Name of payer or issuer		
	1=spouse.		
	Distributions (1099-QA):		
	Gross distributions (1)		
	Earnings (2)		
	Basis (3)		
No.	1=program to program transfer (4)		
	1=ABLE account terminated (5)		
	1=recipient is not the designated beneficiary (6)		
	Qualified disability expenses paid		
	Amount excluded from 10% tax		
	Excess contributions:		
	Excess contributions withdrawn by due date of return		
	Earnings on excess contributions		
	Name of payer or issuer		
	1=spouse		
	Distributions (1099-QA):		
	Gross distributions (1)		
	Earnings (2)		
No 🗆	Basis (3)		
No.	1=program to program transfer (4)		
	1=ABLE account terminated (5)		
	1=recipient is not the designated beneficiary (6)		
	Qualified disability expenses paid		
	Amount excluded from 10% tax		
	Excess contributions:		
	Excess contributions withdrawn by due date of return		
	Earnings on excess contributions		
	Name of payer or issuer		
	1=spouse		
	Distributions (1099-QA):		
	Gross distributions (1)		
	Earnings (2)		
	Basis (3)		
No.	1=program to program transfer (4)		
	1=ABLE account terminated (5)		
	1=recipient is not the designated beneficiary (6)		
	Qualified disability expenses paid		
	Amount excluded from 10% tax		
	Excess contributions:		
	Excess contributions withdrawn by due date of return		
	Earnings on excess contributions		

22	1040	US	Business Income (Schedule C)	No. 1
_	1040		243 moonie (36 module 3)	
	Please er	iter all pert	inent 2022 amounts. Last year's amounts are provid	ed for your reference.
<b>~</b> =-		•	•	-
		NFORMA7		
	-		Form 1040	
			n Form 1040	
City, it	if different fro	m Form 1040.		
			D	
			040	
_	=			
_				
_				
Other	accounting m	nethod		
Δετοιι	inting method	· 1-cach 2 c	accrual	
			per cost/market, 3=other	
	=			
	-			
			usiness	
			will you file all required Form(s) 1099: 1=yes, 2=no	
	-			
			erial income producing factor	
1=inve	estment			
			company	
		instruments or	commodities	
INC	OME		2022 Amount	2021 Amount
	•		99-MISC, box 7)	
		nces		
Other	income:			
•				
•			L	
COS	ST OF GO	OODS SO	LD	
Invent	tory at beginn	ing of the year	r	
Purch	ases			
	•			
	costs:			
•				
Invent	tory at end of	the year		I

2022 1040 US Business Income (Schedule C) (cont.) No. 16 p2

Please enter all pertinent 2022 amounts.	Last	year's amounts are p	provided for your referer	nce.
------------------------------------------	------	----------------------	---------------------------	------

XPENSES	2022 Amount	2021 Amount
ccounting		
dvertising.		
nswering service.		
ad debts from sales or service		
ank charges.		
ar and truck expenses (not entered elsewhere)		
ommissions.		
ontract labor		
elivery and freight		
ues and subscriptions.		
mployee benefit programs.		
surance (other than health)		
ortgage interest (paid to banks, etc.)		
ther interest (not entered elsewhere)		
anitorial		
aundry and cleaning		
egal and professional		
iscellaneous		
ffice expense		
utside services		
arking and tolls		
ension and profit sharing plans - contributions		
ension and profit sharing plans - admin. and education costs		
ostage		
rinting		
ent - vehicles, machinery, & equipment (not entered elsewhere)		
ent - other.		
epairs.		
ecurity.		
upplies.		
axes - real estate		
axes - payroll		
axes - sales tax included in gross receipts		
axes - other (not entered elsewhere)		
elephone		
pols		
ravel		
otal meals in full (50%)		
epartment of Transportation meals in full (80%)		
eals provided by restaurants in full (100%)		
niforms.		
tilities.		
/ages.		
ugos		
than avnances		
ther expenses:		

16 p2

2022 1040 US Capital Gains & Losses (Schedule D)

17

If you sold any stocks, bonds, or other investment property in 2022, please list the pertinent information for each sale below or provide a spreadsheet file with this information. Be sure to attach all 1099-B forms and brokerage statements.

No.	Quantity	Description of Property (Box 1a)	Date Acquired (Box 1b)	Date Sold (Box 1c)	Sales Price (gross or net) (Box 1d)	Cost or Basis (Box 1e)	Blank=basis rep. to IRS, 1=nonrec. security (Box 3, 5)	Expenses of Sale (if gross sales price entered)	Federal Incom Tax Withheld (Box 4)
						_			
									17

ORGANIZER		i			rage	 ۲,
	4 - 4 -	 	 /—			

IOR YE	AR INSTALLMENT SALE	2022 Amount	2021 Amount
	Description of property		
	Date acquired (m/d/y)		
lo	Date sold (m/d/y)		
	Gross profit ratio (.xxxx)		
	Current year principal payments (-1 ii none)		1
	Description of property		
	Date acquired (m/d/y)		
О.	Date sold (m/d/y)		
	Gross profit ratio (.xxxx)		
	Current year principal payments (-1 if none)		
	Description of property		
	Description of property  Date acquired (m/d/y)		
o	Date sold (m/d/y)		_
	Gross profit ratio (.xxxx)		
	Current year principal payments (-1 if none)		
			1
	Description of property		
	Date acquired (m/d/y)		
О.	Date sold (m/d/y)		
	Gross profit ratio (.xxxx)		
	Current year principal payments (-1 if none)		
	Description of property		
	Date acquired (m/d/y)		
О.	Date sold (m/d/y)		
	Gross profit ratio (.xxxx)		
	Current year principal payments (-1 if none)		
	Description of property		
o.	Date acquired (m/d/y)  Date sold (m/d/y)		
٠	Gross profit ratio (.xxxx)		
	Current year principal payments (-1 if none)		
	Description of property		
	Date acquired (m/d/y)		
О.	Date sold (m/d/y)		
	Gross profit ratio (.xxxx)		
	Current year principal payments (-1 if none)		

					_
2022	1040	US	Sale of Home & Moving Expenses	17	, 27

If you sold your home or moved in 2022, please complete the information below.

For the sale of home, please provide Form 1099-S and closing stater the purchase and sale of your home.	ments from
SALE OF HOME (17)	
Description of property (Box 3)	
Date acquired (m/d/y)	
Date sold (m/d/y) (Box 1)	
Sales price (Box 2)	
1=sale of home	
1=owned and used property as main home for at least 2 of 5 years before sale	
1=first-time homebuyer credit was previously taken on this home	
1=business use in year of sale	
Number of days after becomber 31, 2000 that home was not used as principal residence	
Adjusted Basis	
Original cost	
Improvements:	
Adjusted basis	
Adjusted basis	
Total expenses of sale	
Please complete the following information if due to a change in health, place of employment, or unforeseen ca) Did not meet the ownership and use tests *, or b) Excluded gain on the sale of another home after May 6,	rcumstances you either: 1997.
If excl. gain from another home after May 6, 1997 & within 2 yrs. of current sale, enter date of sale (m/d/y)	
1=sale due to change in health, employment or unforeseen circumstances	
Days used as main home - taxpayer	
Days used as main home - spouse	
Days property owned - taxpayer	
Days property owned - spouse	
MOVING EXPENSES (27) (If you are a member of the Armed Forces and moved due to a perma	nent change in station)
1=spouse, 2=joint	,
1=armed forces move due to permanent change of station	
Miles from old home to new work place	
Miles from old home to old work place	
Expenses for transportation and storage of household goods and personal effects	
Lodging and travel (excluding meals):	
Lodging and travel (excluding automobile)	
Parking fees and tolls	
Gas and oil	
Miles driven to new home	
(* owned and used property as main home for at least 2 of 5 years before sale	))

17, 27

22	1040	US	Rental & Royalty Incom	e (Schedule E)	No.	18
	Please en	ter all pert	inent 2022 amounts. Last year's a	mounts are provided for	your reference.	
GEN	IERAL IN	IFORMA7	ΓΙΟΝ	2022 Amount	2021 Amou	nt
Descri	ption of prope	erty			Type of Pro	pertv
Street	address				1 = Single Family Re	-
					2 = Multi-Family Res	sidence
					3 = Vacation/Short- 4 = Commercial	Term Rental
	ode				5 = Land 6 = Royalties	
٠.	of property (se	-			7 = Self-Rental	
	type of prope			34		
Numb	er or days ren	.cu		34		
Percental	age of ownership		1=dic	not actively participate		
Percental if not 10	10% (.xxxx) age of tenant occu	ipancy	1=rea	al estate professional		
	use, 2=joint .			ntal other than real estate		
1=qua	lified joint ver		1=in\	vestment		
1=nonpa 2=passi	assive activity, ve royalty		1=sing liability	le member limited  / company		
If requ	ired to file Fo	rm(s) 1099, d	id you or will you file all required Form(s) 10	99: 1=yes, 2=no		
INC	OME			2022 Amount	2021 Amoui	nt
Rents	or royalties re	eceived		2022 Amount	2021 Allioui	ıı
	· ·		wnere)			
			where)			
	· ·					
	•					
O	•					
			etc.)			
Qualif	ied mortgage	insurance pre	miums			
Exces	s mortgage in	terest				
Other	interest (not e	entered elsew	here)			
	•	•				
			•••••			
			nere)			
	•					
_					ı	
Other:						
Otner:						
Otner:						
Otner:						

022	1040	US	Rental & Royalty Income	e (Sch. E) (cont.)	No.	18 <sub>p2</sub>
Pleas e	e enter all expense co	pertinent 2 Dlumn shou	2022 amounts. Last year's amounts ald only be used for vacation home	s are provided for your ref s or less than 100% tenan	ference. The ir t occupied rer	ndirect ntals.
GEN	NERAL IN	IFORMA	ΓΙΟN			
Foreig	n postal code	9				
OIL	AND GA	S		2022 Amount	2021 Amou	nt
Cost of Perce State	depletion	on rate or amo	bunt -1 if none) ., if different (-1 if none)	2022 Amount	2021 Amou	
PER	RSONAL	USE OF I	DWELLING UNIT (INCLUDING	VACATION HOME)		
	<i>y</i> ,		al method elected)			
IND	IRECT EX	XPENSES				
			ited to operating or maintaining the dwelling usurance, and utilities.	unit.		
Associ Auto a Clean Comm Garde Insura Legal Licens Manag Miscel Mortga Qualif Exces Other Painti Pest of Plumb Repail Suppl Taxes Teleph Utilitie	ciation dues and travel (no ing and main inissions and professions and	onal fees  paid to banks, insurance prenterest entered elsewating  rical	etc.) miums here)			

18 <sub>p2</sub>

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) Total conservation reserve program payments Taxable conservation reserve program payments	19
Principal product	ence.
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=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: Sales of livestock and other resale items Cost or basis of livestock or other resale items Sales of products raised Accrual method: Sales of iivestock, 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) Total conservation reserve program payments Taxable conservation reserve program payments	
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=real estate professional (Farm rental only) 1=real estate professional (Farm rental only) 1=single member limited liability company % of ownership if not 100% (xxxxx) (Farm rental only)  FARM INCOME Cash method: 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) Total conservation reserve program payments Taxable conservation reserve program payments Taxable conservation reserve program payments Taxable conservation reserve program payments	
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:  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)  Total conservation reserve program payments  Taxable conservation reserve program payments	
1=single member limited liability company % of ownership if not 100% (.xxxx) (Farm rental only).  FARM INCOME  Cash method: 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) Total conservation reserve program payments Taxable conservation reserve program payments	
## FARM INCOME  Cash method:  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) Total conservation reserve program payments Taxable conservation reserve program payments	
FARM INCOME  Cash method:  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 Taxable conservation reserve program payments	
Cash method:  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 Total conservation reserve program payments Taxable conservation reserve program payments	
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 Total conservation reserve program payments Taxable conservation reserve program payments	
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 Total conservation reserve program payments Taxable conservation reserve program payments	Amount
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)  Total conservation reserve program payments  Taxable conservation reserve program payments	
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  Total conservation reserve program payments  Taxable conservation reserve program payments	
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	
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	
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	
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	
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	
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	
Total agricultural program payments (other than CRP)  Taxable agricultural program payments (other than CRP)  Total conservation reserve program payments  Taxable conservation reserve program payments	
Taxable agricultural program payments (other than CRP)  Total conservation reserve program payments  Taxable conservation reserve program payments	
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	

022	1040	US	Farm Income (Sch. F/For	m 4835) (cont.)	No.	<b>19</b> <sub>p2</sub>
	Please en	iter all pert	inent 2022 amounts. Last year's am	ounts are provided for y	our reference.	
	RM INCO	ME (conti	inued)			
Other	income:		Г	2022 Amount	2021 Amoun	t
FAF	RM EXPE	NSES				
Car a	nd truck expe	nses (not ente	ered elsewhere)			
		•				
Custo	om hire (machi	ine work)				
Empl	oyee benefit p	rograms				
Fertili	izers and lime					
	•					
	•	-				
			etc.)			
	•		here)			
			ributions			
	•	•	- admin. and education costs			
			equipment (not entered elsewhere)			
		=				
Repa	irs and mainte	enance				
Seeds	s and plants p	urchased				
	•	•				
			neexpenses (also enter below)			
	expenses:	luctive period	expenses (also enter below)			
Otrici	скрепаса.					
			_			
					<u> </u>	
		NOTE:	If you purchased or disposed of any business a	ssets, please complete Sheet 2	2.	
					Ī	
						19 <sub>p2</sub>

	1040	110	Dt-	:  C	: I - <b>£</b>	Page 2
2022	1040	US	Partnersh	ip and S corporat	ion Information	20.1,20.
PAI			delete 2022 info	ormation as appropriate	. Be sure to attach all S	Schedule K-1s.
No.		e of Partners		Employer Identification Number	Tax Shelter Registration Number	Additional Amounts Invested in Partnership
S C	ORPORAT	ION INFO	ORMATION (2	0.2)		
		ON INFO		Employer Identification Number	Tax Shelter Registration Number	Additional Amounts Invested in S corporation
				Employer	Tax Shelter Registration Number	Additional Amounts Invested in S corporation
				Employer	Tax Shelter Registration Number	Additional Amounts Invested in S corporation
				Employer	Tax Shelter Registration Number	Additional Amounts Invested in S corporation
				Employer	Tax Shelter Registration Number	Additional Amounts Invested in S corporation
S C				Employer	Tax Shelter Registration Number	Additional Amounts Invested in S corporation

20.1,20.2

ORGANIZER	<u> </u>				Page 22
2022	1040	US	Estate or Trust and REM	IIC Information	20.3,20.4
EST	ATE OR T		ase add, change or delete 2022 info Be sure to attach all Schedule K- FORMATION (20.3)	rmation as appropriate. 1s and Schedule Qs.	
No.		Nar	me of Estate or Trust	Employer Identification Number	Tax Shelter Registration Number
REM	IIC INFOR	RMATION	(20.4)		
No.			Name of REMIC		Employer Identification Number
				I	

ORGANIZER				Page 23
2022	1040	US	Asset Disposition List	22

If you disposed of any business assets in 2022, please enter date sold, sales price, and expenses of sale. For real estate transactions, be sure to attach all 1099-S forms and closing statements.

				<b>.</b>	, ,	
No.	Description of Property (Box 3)	Date Placed in Service	Date Sold (Box 1)	Sales Price (Box 2)	Cost or Basis	Expenses of Sale
	<u> </u>	l	I	l	1	

**Asset Acquisition List** US 1040 **22** p2 2022

If you purchased any business assets (furniture, equipment, vehicles, real estate, etc.) or converted any personal assets to business use in 2022, please enter all pertinent information below.

	Description of Property	Dolotod	Preparer Use Only			Date Placed	Cost	Preparer Use Only		
No.	Description of Property	Related Business or Activity	Form	No. of Form	Category	Date Placed in Service	Cost or Basis	Current Section 179	Method	
								22	<b>2</b> <sub>p2</sub>	

22	1040	US	Vehicle Expenses		No.	22
	Please ent	ter all pert	inent 2022 amounts. Last year's amo	unts are provided fo	or your reference.	
GEN	NERAL IN	•	-			
Docer	intion of vobic	0		2022 Amount	2021 Amount	
			eduction			
			your deduction			
			personal use		_	
		_	or personal use		_	
			e than 5% owner			
			se if changed from 100% personal use			
			g p			
Avera		-trip commut	year)			
Parkir	ng fees and tol	ls (business	portion only)			
Gasol	ine, lube, oil					
Repai	rs					
Tires.						
Insura	ince					
			I property taxes)			
			on car's value)			
			C, E & F)			
		-	ve)			
			cle on Form W-2 (2106)		1	

2022 1040 US Adjustments to Income 24

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

TRADITIONAL IRA CONTRIBUTIONS	2022 Amount		2021 Am	
	Taxpayer	Spouse	Taxpayer	Spouse
IRA contributions you made or expect to make (1=maximum) (\$6,000/\$7,000 if 50 or older)				
Contributions made to date				
1-covered by plan 2-net covered				
2022 payments from 1/1/23 to 4/15/23				
ROTH IRA CONTRIBUTIONS	·			
Roth IRA contributions you made or expect to make (1=maximum) (\$6,000/\$7,000 if 50 or older)				
Contributions made to date				
SEP, SIMPLE AND QUALIFIED PLANS	S (KEOGH)			
Profit-sharing (25%/1.25) contributions you made or expect to make (1=maximum)				
Money purchase (25%/1.25) contributions you made or expect to make (1=maximum)				
Defined benefit contributions you expect to make				
Self-employed SEP (25%/1.25) contributions you made or expect to make (1=maximum)				
Plan contribution rate if not .25 (.xxxx)				
Individual 401k, CE alastiva deformale (event Deth) (1 may)				
Individual A01k, CE decignated Dath contributions (1, may)				
SIMPLE contributions:				
Self-employed SIMPLE contributions you made or expect to make (1=maximum)				
Employer matching rate if not 02 ( vvvv)				
Contributions made to date				
ADJUSTMENTS TO INCOME				
Self-employed health insurance:				
Total premiums (excluding long-term care)				
Long torm care promiums				
Student lean interest paid (1000 E. boy 1)				
Educator expenses (kindergarten thru grade 12)				
Jury duty pay given to employer				
Expenses from rental of personal property				
Other adjustments to income:				
Alimony paid: Taxpayer		Spouse		
e of divorce or sep. agreement				
Recipient's first name				
		<del></del>		
Recipient's last name				
Recipient's last name				

2022 1040 US Itemized Deductions

25

Please enter all pertinent 2022 amounts and attach all 1098 forms. Last year's amounts are provided for your reference.

MEDICAL	AND DENTAL	EADEVICES
1VII 1 /1\ . A 1		I AFI 14-31 -3

Medicare insurance premiums on Sheet 14.	2022 Amount	TS	2021 Amount
Prescription medicines and drugs			
Ooctors, dentists and nurses			
lospitals and nursing homes			
nsurance premiums not entered elsewhere (excl. LT care & amts. paid w/pre-tax dollars)			
ong-term care premiums - taxpayer			
ong-term care premiums - spouse			
nsurance reimbursement (enter as a positive number)			
odging and transportation:			
Out-of-pocket expenses			
· · · · · · · · - · · · ·			
Medical miles driven (7/1/22 - 6/30/22)			
Medical miles driven (7/1/22 - 12/31/22)			
Other medical and dental expenses:			
' Г			
TAVES DAID (S	W. N		
ΓΑΧΕS PAID (State and local withholding and 2022 estimates are auto	omatic.)		
State income taxes - 1/22 payment on 2021 state estimate			
State income taxes - paid with 2021 state return extension			
State income taxes - paid with 2021 state return			
State income taxes - paid for prior years and/or to other state			
City/local income taxes - 1/22 payment on 2021 city/local estimate			
City/local income taxes - paid with 2021 city/local extension			
City/local income taxes - paid with 2021 city/local return			
SALES AND USE TAXES PAID			
State and local sales taxes (except autos and special items)			
Jse taxes paid on 2022 purchases			
Jse taxes paid with 2021 state return			
· —			
Sales tax on autos not included above			
Sales tax on boats, aircraft, other special items			
OTHER TAXES PAID			
Real estate taxes - principal residence:			
real estate taxes - principal residence.			
Real estate taxes - held for investment :			
		$\perp$	
Personal property taxes (including auto fees in some states. Provide a copy of tax notice)			
Foreign income taxes			
Other taxes:		1 1	
I			

ORGANIZER **Itemized Deductions (continued)** US 2022 1040 25 p2 Please enter all pertinent 2022 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 2021 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: Mortgage insurance premiums on post 12/31/06 contracts (Box 4) . . . . 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: 

2022 1040 US Itemized Deductions (continued) 25 p3

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

•	,	•
NONCASH CONTRIBUTIONS		

NOTE: Use Sheet 26 if total noncash contributions are over \$500. No deduction is allowed for contributions of clothing and household items that are not in *good* used condition or better. In addition, a deduction for any item with minimal monetary value may be depied

0% limitation (see above):	2022 Amount	TS	2021 Amount
-			
6 limitation (see above):			
% capital gain property (gifts of capital gain property to 50% limit orgs.):			
% capital gain property (gifts of capital gain property to non-50% limit orgs.):			
-			
-			
ion and professional dues		ACT (su	ubject to 2% AGI limit)
ion and professional dues		ACT (su	ubject to 2% AGI limit)
ion and professional dues.		ACT (su	ubject to 2% AGI limit)
ion and professional dues.		ACT (su	ubject to 2% AGI limit)
ion and professional dues.		ACT (su	ubject to 2% AGI limit)
ion and professional dues		ACT (su	ubject to 2% AGI limit)
ion and professional dues		ACT (su	ubject to 2% AGI limit)
ion and professional dues		ACT (su	ubject to 2% AGI limit)
ion and professional dues		ACT (su	ubject to 2% AGI limit)
ion and professional dues		ACT (su	ubject to 2% AGI limit)
her unreimbursed employee expenses (uniforms and protective clothing, ofessional subscriptions, employment agency fees, and certain edu. expenses		ACT (su	ubject to 2% AGI limit)
TATE MISC. DEDS. IF NON-CONFORMING TO TAX nion and professional dues ther unreimbursed employee expenses (uniforms and protective clothing, ofessional subscriptions, employment agency fees, and certain edu. expenses  westment expense:		ACT (su	ubject to 2% AGI limit)
her unreimbursed employee expenses (uniforms and protective clothing, offessional subscriptions, employment agency fees, and certain edu. expenses  //estment expense:		ACT (su	ubject to 2% AGI limit)
ion and professional dues  her unreimbursed employee expenses (uniforms and protective clothing, offessional subscriptions, employment agency fees, and certain edu. expenses exestment expenses:		ACT (su	ubject to 2% AGI limit)
ion and professional dues		ACT (su	ubject to 2% AGI limit)
ion and professional dues  her unreimbursed employee expenses (uniforms and protective clothing, ofessional subscriptions, employment agency fees, and certain edu. expenses  vestment expense:  x return preparation fee fe deposit box rental  scellaneous deductions (2% AGI) (certain legal and accounting fees,		ACT (st	ubject to 2% AGI limit)
her unreimbursed employee expenses (uniforms and protective clothing, offessional subscriptions, employment agency fees, and certain edu. expenses		ACT (su	ubject to 2% AGI limit)
ion and professional dues		ACT (su	ubject to 2% AGI limit)
ion and professional dues her unreimbursed employee expenses (uniforms and protective clothing, ofessional subscriptions, employment agency fees, and certain edu. expenses  //estment expense:		ACT (st	ubject to 2% AGI limit)

0000	1040	116	Itaminad Daduations (acutionad)	25	
2022	1040	US	Itemized Deductions (continued)	25 p/	4

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

IER MISCELLANEOUS DEDUCTIONS	2022 Amount	TS	2021 Amount
tax, section 691(c)			
miscellaneous deductions:			

2022 1040 US Itemized Deductions (continued) 25 p5

If either of the following conditions below apply to you, your home mortgage interest deduction may need to be limited and the input section provided below should be completed. If neither condition applies, enter home mortgage interest amounts on organizer sheet 25 p2.

- 1. Total home equity debt exceeded \$100,000 at any time during 2022 (\$50,000 if married filing separate). For this purpose, home equity debt is defined as any mortgages taken out in which the proceeds were used to buy, build, or improve your home.
- 2. Total home acquisition debt exceeded \$750,000 at any time during 2022 (\$375,000 if married filing separate). For this purpose, home acquisition debt is defined as any mortgages taken out after October 13, 1987 in which the proceeds were used to buy, build, or improve your home.

NOTE: When completing the input section below, grandfather debt represents loans taken out prior to October 14, 1987.

# Please enter all pertinent 2022 amounts and attach all 1098 forms. Last year's amounts are provided for your reference.

	2022 Amount	TS	2021 Amount
air market value of the property on the date that the last debt was secured .			
ome acquisition and grandfather debt on the date that the last debt was secured			
OAN INFORMATION			
oan #1			
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 2022			
Home equity debt balance - beginning of year			
Home equity debt borrowed in 2022			
Grandfather debt balance - beginning of year			
pan #2			
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 2022			
Home equity debt balance - beginning of year			
Home equity debt borrowed in 2022			
Grandfather debt balance - beginning of year			
Form			
1 = Schedule A (defai	ult)		
2 = Business use of h 3 = Schedule E	ome		
3 = Scriedule E			

**Itemized Deductions (continued)** US  $25_{\ p5\ cont}$ 2022 1040

Please enter all pertinent 2022 amounts and attach all 1098 forms. Last year's amounts are provided for your reference.

### **LOAN INFORMATION (continued)**

Loan #3	2022 Amount	TS	2021 Amount
Lender's name			
Form (see table)			
Number of form		$\Box$	
1=taxpayer, 2=spouse, blank=joint		$\Box$	
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 2022			
Home equity debt balance - beginning of year			
Home equity debt borrowed in 2022			
Grandfather debt balance - beginning of year			
Loan #4			
Lender's name			
Form (see table)		Ш	
Number of form		Ш	
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 2022			
Home equity debt balance - beginning of year			
Home equity debt borrowed in 2022			
Grandfather debt balance - beginning of year		]	

#### Form

- 1 = Schedule A (default) 2 = Business use of home 3 = Schedule E

2022 1040 US Noncash Contributions (Form 8283)

If your total noncash contributions are in excess of \$500 in 2022, please complete the information below for each donee using the following guidelines:

- \* If you contributed a motor vehicle, boat, or airplane with a claimed value of more than \$500, attach Form 1098-C or other written acknowledgement received from the donee organization.
- \* A deduction for contributions of clothing or other household items that are not in *good* used condition or better is not allowed. In addition, a deduction for any item with minimal monetary value may be denied. However, these rules do not apply to any contribution of a single item for which a deduction of more than \$500 is claimed, if a qualified appraisal for the donated property is provided.

		aritable organization (donee)		
	Street addre	ess		
	City			
	State			
	ZIP code			
	1=spouse, 2	2=joint		
	Property de	scription (other than vehicle)		-
		Identification number (VIN)		
No.	Vehicle	Year (yyyy)	_	
	Verlicie	Make and model		
		Condition and mileage		
	Date of con	tribution (m/d/y)		
	Date acquir	ed by donor (m/y)		
		ed by donor (Table 1 or describe)		-
	Donor's cos	t or basis		
	Fair market	value		
	Method use	d to determine FMV (Table 2 or desc	cribe)	<u> </u>
	Name of cha	aritable organization (donee)		
	Street addre	ess		
	City			
	State			
	ZIP code			
	1=spouse, 2	=joint		
	Property des	scription (other than vehicle)		
		Identification number (VIN)		
No.	]   Vabiala	Year (yyyy)		
	J Vehicle	Make and model	-	
		Condition and mileage		
	Date of cont	ribution (m/d/y)		
		ed by donor (m/y)	_	
		d by donor (Table 1 or describe)	F-	
	1	or basis	-	
		value	_	
		d to determine FMV (Table 2 or describ		
		,		
I	How Pro	pperty was Acquired	2	Method Used to Determine FMV
	1 = Purchase	3 = Inheritance 4 = Exchange		= Appraisal 3 = Catalog - Thrift shop value 4 = Comparable sale
	2 = Gift	T - Exchange	2 =	Thrift shop value 4 = Comparable sale
				For other methods, see IRS Pub. 561.

26

2022	1040	US	Business Use of Home (	Form 8829)	No.	29
2022	1070	00	Dasiness Osc of Hollie (	1 01111 002 //		<i>_ ,</i>

Please enter 2022 indirect expenses in full. Nonbusiness portion will carry to Schedule A. Business percentage will be applied to indirect expenses only.

BUSINESS USE OF HOME	2022 Amount	2021 Amount
Form		
Number of form (e.g., enter 2 for Schedule C number 2)		
Business use area (square footage)		
Total area of home (square footage)		
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)		
% (.xx) or amount of gross income from home if not 100% (-1 if none)		
% (.xx) or amount of expenses from home if not 100% (-1 if none)		
INDIRECT EXPENSES		
NOTE: Indirect expenses are for keeping up and running your entire home.  They benefit both the business and personal parts of your home.		
Mortgage interest		
Real estate taxes		
Casualty losses		
Insurance		
Miscellaneous		
Rent		
Repairs and maintenance		
Utilities.		
Excess mortgage interest		
Excess real estate taxes		
Other indirect expenses:		
·		
-		
-		
DIRECT 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.	de	
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:		
Other direct expenses.		

29

**ORGANIZER** Employee/Vehicle Bus. Exp. (Form 2106) 1040 US No. 2022 30 Please enter all pertinent 2022 amounts. Last year's amounts are provided for your reference. GENERAL INFORMATION 1=spouse..... 1=performance artist, 2=handicapped, 3=fee-basis government official . . . . . . 1=minister's expenses ..... **EMPLOYEE BUSINESS EXPENSES** 2022 Amount 2021 Amount Meal expenses from restaurants in full ..... Meal expenses from sources other than restaurants ..... Reimbursements for meals not on W-2, box 1 ..... 1=Department of Transportation (80% meal allowance) ..... Reimbursements not included on Form W-2, box 1 ..... Other business expenses:

Please enter all pertinent 2022 amounts. Last year's amounts are provided for your reference.  VEHICLE INFORMATION  1-whiclo used primarily by more than 3% owner  1-whicle is waliable for after drulp personal use  1-an other whicle is available for personal use  1-an other whicle is available for personal use  1-an overloce to support your deduction  VEHICLE 1  Discription of whicle  Date placed in service (midsly)  Total misage (for the tax year)  Total misage (17/192 - 12/33/22)  Commuting misage (7/192 - 12/33/22)  Commuting misage (provided to the system)  Acreage dely round rip commune  Mimber of months of business use if changed from 100% personal use  Partiag less and tolis (business portion only)  Actual expenses:  Gaseline, lube, ell.  Repairs  If res  Insurance.  Miscellaneaux  Auto license (other than personal property taxes)  Personal proporty taxes (based on cars value)  Interest (car lonn) (for Schedule C, F & F)  Vehicle rest for less personal property taxes)  Personal property taxes (based on cars value)  Interest (car lonn) (for Schedule C, F & F)  Vehicle rest or lesse personal property taxes)  Personal property taxes (based on cars value)  Interest (car lonn) (for Schedule C, F & F)  Vehicle rest or lesse personal property taxes)  Personal property taxes (based on cars value)  Interest (car lonn) (for Schedule C, F & F)  Vehicle rest or lesse personal property taxes)  Personal property taxes (based on cars value)  Interest (car lonn) (for Schedule C, F & F)  Vehicle rest or lesse personal property taxes)  Personal property taxes (based on cars value)  Interest (car lonn) (for Schedule C, F & F)  Vehicle rest or less personal property taxes)  Personal property taxes (based on cars value)  Interest (car lonn) (tor Schedule C, F & F)  Vehicle rest or lesse personal property taxes)  Personal property taxes (based on cars value)  Interest (car lonn) (tor Schedule C, F & F)  Vehicle rest or lesse personal property taxes)  Personal property taxes (based on cars value)  Interest (car lonn) (tor tax y	2022 10	040	US	Vehicle Expenses (Form	2106) (cont.)	No.	30 p2
1=vehicle used primarily by more than 5% owner 1=vehicle is available for off-duty personal use 1=no other volicle is available for personal use 1=no evidence to support your deduction 1=no evidence to support your deduction  VEHICLE 1  Description of vehicle Date placed in service (midry) Total mileage (for the tax year) Business mileage (17/122 - 4/30/22) Business mileage (17/122 - 1/23/1/22) Communiting mileage (for the tax year) Average daily round-tip commute Number of months of business use if changed from 100% personal use Parking fees and tolis (business portion only) Actual expenses: Casoline, tube, oil Repairs. Tires. Insuranco Miscellaneous. Auto license (other than personal property taxes) Personal property taxes (saced on car's value) Interest (car foan) (for Schedule C, E, & F) Vehicle rent or lease payments Inclusion amount (enter as positive) Vehicle 12  Description of vehicle. Date placed in service (midry) Dominium (enter as positive) Vehicle 14 (as year) Business mileage (17/122 - 12/31/22) Communing mileage (for the tax year) Business mileage (17/122 - 12/31/22) Communing mileage (for the tax year) Business mileage (17/122 - 12/31/22) Communing mileage (for the tax year) Business mileage (17/122 - 12/31/22) Communing mileage (for the tax year) Business mileage (17/122 - 12/31/22) Communing mileage (for the tax year) Business mileage (17/122 - 12/31/22) Communing mileage (for the tax year) Business mileage (17/122 - 12/31/22) Communing mileage (for the tax year) Business mileage (17/122 - 12/31/22) Communing mileage (for the tax year) Business mileage (17/122 - 12/31/22) Communing mileage (for the tax year) Business mileage (17/122 - 12/31/22) Communing mileage (for the tax year) Business mileage (17/122 - 12/31/22) Communing mileage (for the tax year) Business mileage (17/122 - 12/31/22) Communing mileage (for the tax year) Business mileage (17/122 - 12/31/22) Communing mileage (for the tax year) Business for the form mileage (17/122 - 12/31/22) Communing mileage (for the tax year) Business	Ple	ase en	ter all perti	inent 2022 amounts. Last year's am	ounts are provided for	your reference.	
In-wellcide used primarily by more than 5% cowner ta-wellcide is available for feddy pressoral use 1-no other vehicle is available for feddy pressoral use 1-no ovidence to support your deduction  VEHICLE 1  Description of vehicle Date placed in service (midfy) Total mileage (for the tax year)  Business mileage (17/122 - 6/30/222)  Business mileage (17/122 - 1/31/22) Community mileage (for the tax year)  Aurola of dialy round-trip commune Number of months of business use if changed from 100% personal use Parking fees and tolist (business portion only) Actual expenses: Gasoline, luce, oil Repaira.  Teres Insurance Miscellaneous Auto license (other than personal property taxes) Personal property taxes (based on car's value) Interest (car loan) (for Schodule C, E & F) Vehicle rent or lease spriments Inclusion amount (enter as positive) Value of employer-provided vehicle on Form W-2 (2106)  VEHICLE 2  Description of vehicle Date placed in service (midfy) Total mileage (for the tax year) Business mileage (17/122 - 6/30/22) Business mileage (17/122 - 6/30/22) Business mileage (17/122 - 1/23/122) Community mileage (community of the tax year) Business mileage (17/122 - 1/23/122) Community mileage (community of the tax year) Business mileage (17/122 - 1/23/122) Community mileage (community of the tax year) Business mileage (17/122 - 1/23/122) Community mileage (community of the tax year) Business mileage (17/122 - 1/23/122) Community mileage (community of the tax year) Business mileage (17/122 - 1/23/122) Community mileage (community of the tax year) Business mileage (17/122 - 1/23/122) Community mileage (community of the tax year) Business mileage (community of the t	VEHICL	LE INF	ORMATI	ON	2022 Amount	2021 Amour	nt
1-verticle is available for off duty personal use 1-no evidence to support your deduction  VEHICLE 1  Description of vehicle Date placed in service (m/dy).  Total mileage (for the tax year)  Average daily round-trip commute  Repairs  Tires Insurance Miscellaneous  Auto license (ofter than personal property taxes)  Personal property taxes (sased on car's value) Include placed for the tax year)  Autorage daily round-trip commute  Number of months of business use if changed from W-2 (2106)  VEHICLE 2  Description of vehicle Date placed in service (m/dy).  Total mileage (for the xay ser)  Autorage daily round-trip commute  Number of months of business use if changed from 100% personal use  Personal property taxes (sased on car's value)  Interest (car lann) for Schedule C, E, & F)  Vehicle rent or lease payments  Inclusion amount (entre as positive)  Value of employer-provided vehicle on Form W-2 (2106)  VEHICLE 2  Description of vehicle Date placed in service (m/dy).  Total mileage (for the tax year)  Business mileage (1/1/22 - 6/30/27).  Business mileage (1/1/22 - 6/30/27).  Business mileage (1/1/22 - 1/30/1/27)  Commuting mileage (for the tax year)  Average daily round-trip commute.  Number of months of business use if changed from 100% personal use  Parking frees and tolis (business portion only)  Actual expenses:  Gasoline, uice, 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 and F)  Vehicle rent or lease payments  Licenses (rent not personal property taxes)  Personal property taxes (based on car's value)  Interest (car loan) for Schedule C, E, and F)  Vehicle rent or lease payments	1=vehicle u	used prim	narily by more	than 5% owner	EOLE THIOGHT	20217tillodi	··
I-no other vehicle is available for personal use I-no evidence to support your deduction  VEHICLE 1  Description of vehicle. Date placed in service (midly). Total milkage (for the tax year)  Business mileage (17/12 - 6730/22).  Business mileage (17/12 - 173/12/2)  Commuting mileage (for the tax year)  Actual expenses:  Gusciline, lube, oil.  Repairs.  Tires.  Insurance.  Miscellancous.  Auto license (after than personal property taxes).  Personal property taxes (cased on car's value). Inclusion amount (centra spositive).  VEHICLE 2  Description of vehicle.  Date placed in service (midfy).  Total mileage (for the tax year).  Average daily round-rip commute.  Average daily round-rip commute.  Average daily round-rip commute.  Average (and the property taxes).  Personal property taxes (cased on car's value).  Interest (cer toan) (for Schedule C, E, a F).  Vehicle real or lease payments.  Inclusion amount (centra spositive).  VEHICLE 2  Description of vehicle.  Date placed in service (midfy).  Total mileage (for the tax year).  Business mileage (17/122 - 6/30/22).  Business mileage (17/122 - 6/30/22).  Business mileage (for the tax year).  Average daily round-rip commute.  Autonicerse such effects on the payments.  Inclusion amount (centra spositive).  Average daily round-rip commute.  Parking tess and tells (business portion only).  Actual expenses:  Gasciline, lube, oil.  Repairs.  Trees.  Insurance.  Miscellancous.  Auto license (wher than personal property taxes).  Personal property taxes (cased on car's value).  Interest (car toan) (for Schedule C, E, and F).  Vehicle real or lease payments.		-		<u> </u>			
VEHICLE 1  Description of vehicle Date placed in service (m/d/y) Total mileage (for the tax year)  Business mileage (1/1/22 - 6/30/22)  Business mileage (1/1/2			_	·			
VEHICLE 1  Description of vehicle Date placed in service (m/dy) Total mileage (for the lax year)  Business mileage (17/122 - 12/31/22)  Commuting mileage (for the tax year)  Average daily round-intp commute Number of months of business use if changed from 100% personal use Parking letes and totals (business portion only)  Actual expenses:  Gasoline, lube, oil.  Repairs.  Tires. Insurance. Miscellaneous. Auto license (other than personal property laxes) Personal property taxes (based on car's value) Interest (car loan) (for Schedule C, E & F) Vehicle ront or lease payments Inclusion amount (enter as positive) Value of employer-provided vehicle on Form W-2 (2106)  VEHICLE 2  Description of vehicle. Date placed in service (m/dy) Total mileage (for the tax year) Business mileage (17/12 - 17/31/27) Commuting mileage (for the tax year) Average daily round-trip commute Number of months of business use if changed from 100% personal use Parking letes and totals (business use it changed from 100% personal use Parking letes and totals (business portion only) Actual expenses: Gasoline, lube, oil. Repairs. Tires. Insurance. Miscellaneous Auto license (other than personal property laxes) Personal property taxes (based on car's value) Interest (car loan) (for Schedule C, E and F) Vehicle repairs. Tires. Insurance. Miscellaneous Auto license (other than personal property laxes) Personal property taxes (based on car's value) Interest (car loan) (for Schedule C, E and F) Vehicle rent or lease payments	1=no evide	ence to su	upport your de	eduction			
Description of vehicle Date placed in service (m/d/y) Total mileage (for the tax year)  Business mileage (1/1/22 - 6/30/22)  Business mileage (1/1/22 - 6/30/22)  Business mileage (7/1/22 - 12/31/22) Commuting mileage (for the tax year) Average deily round-trip commute Number of months of business use if changed from 100% personal use Parking fees and tolls (business portion only) Actual expenses:  Gasoline, lube, oil.  Repairs.  Tires.  Insurance.  Miscellaneous Auto license (other than personal property taxes) Personal property taxes (based on car's value) Interest (car lonn) (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)  VEHICLE 2  Description of vehicle Date placed in service (m/d/y) Total mileage (for the tax year) Business mileage (1/1/22 - 1/3/12/2) Commuting mileage (for the tax year) Average daily round-trip commute Number of months of business use if changed from 100% personal use Parking fees and tolls (susiness portion only) Actual expenses: Gasoline, tube, oil. Repairs.  Tires Insurance. Miscellaneous Auto license (cher than personal property taxes) Personal property taxes (based on car's value) Interest (car lonn) (for Schedule C, E and F) Vehicle rent or lease payments	1=no writte	en eviden	ce to support	your deduction			
Date placed in service (m/d/y) Total mileage (171/22 - 6/30/22) Business mileage (171/22 - 12/31/22) Commuting mileage (for the tax year) Average daily round-trip commute Number of months of business portion only) Actual expenses: Gasoline, tube, oil. Repairs. Tires. Insurance. Miscellaneous Auto license (cither than personal property taxes) Personal property taxes (based on car's value) Interest (car loan) (for Schedule C, E & F)  Vehicle re under the tax year)  Verification of vehicle Date placed in service (m/d/y) Total mileage (for the tax year) Business mileage (171/22 - 12/31/22) Commuting mileage (for the tax year) Average daily round-trip commute Number of months of business use if changed from 100% personal use Parking fees and toils (business portion only) Actual expenses: Gasoline, lube, oil. Repairs. Tires. Insurance. Miscellaneous Average daily round-trip commute Number of months of business use if changed from 100% personal use Parking fees and toils (business portion only) Actual expenses: Gasoline, lube, oil. Repairs. Tires. Insurance. Miscellaneous Auto (license (cither than personal property taxes) Personal property taxes (based on car's value) Interest (car loan) (for Schedule C, E and F) Vehicle rent or lease payments	VEHICL	LE 1					
Date placed in service (m/d/y) Total mileage (171/22 - 6/30/22) Business mileage (171/22 - 12/31/22) Commuting mileage (for the tax year) Average daily round-trip commute Number of months of business portion only) Actual expenses: Gasoline, tube, oil. Repairs. Tires. Insurance. Miscellaneous Auto license (cither than personal property taxes) Personal property taxes (based on car's value) Interest (car loan) (for Schedule C, E & F)  Vehicle re under the tax year)  Verification of vehicle Date placed in service (m/d/y) Total mileage (for the tax year) Business mileage (171/22 - 12/31/22) Commuting mileage (for the tax year) Average daily round-trip commute Number of months of business use if changed from 100% personal use Parking fees and toils (business portion only) Actual expenses: Gasoline, lube, oil. Repairs. Tires. Insurance. Miscellaneous Average daily round-trip commute Number of months of business use if changed from 100% personal use Parking fees and toils (business portion only) Actual expenses: Gasoline, lube, oil. Repairs. Tires. Insurance. Miscellaneous Auto (license (cither than personal property taxes) Personal property taxes (based on car's value) Interest (car loan) (for Schedule C, E and F) Vehicle rent or lease payments	Description	of vehic	le				
Total mileage (1/1/22 - 6/30/22) Business mileage (1/1/22 - 1/31/22) Commuting mileage (or the tax year) Average daily round-trip commute Number of months of business use if changed from 100% personal use Parking fees and tolis (business portion only) Actual expenses:  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 a F) Vehicle rent or lease payments Inclusion amount (enter a positive) Value of employer-provided vehicle on Form W-2 (2106)  VEHICLE 2  Description of vehicle. Date placed in service (m/d/y) Total mileage (for the tax year) Average daily round-trip commute Number of months of business use if changed from 100% personal use Parking fees and tolis (business portion only) Actual expenses: 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 and F) Vehicle rent or lease payments Interest (car loan) (for Schedule C, E and F) Vehicle rent or lease payments				<del>-</del>			
Business mileage (17/122 - 6/30/22)  Business mileage (17/122 - 12/31/22) Commuting mileage (for the tax year) Average daily round-trip commute Number of months of business use if changed from 100% personal use Parking fees and folis (business portion only). Actual expenses: 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 ear payments Inclusion amount (enter as positive) VEHICLE 2 Description of wehicle. Date placed in service (m/d/y) Total mileage (for the tax year) Business mileage (17/122 - 6/30/22) Business mileage (17/122 - 6/30/22) Business mileage (17/122 - 6/30/22) Business mileage (17/122 - 12/31/22) Commuting mileage (for the tax year) Average daily round-trip commute Number of months of business use if changed from 100% personal use Parking fees and tolis (business portion only) Actual expenses: 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 and F) Vehicle rent or lease payments	· ·		=	<u> </u>			
Business mileage (7/1/22 - 12/31/22). Commuting mileage (for the tax year). Average daily round-trip commute Number of months of business use if changed from 100% personal use Parking fees and tolls (business portion only). Actual expenses: 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) VEHICLE 2 Description of vehicle. Date placed in service (m/d/y) Total mileage (for the tax year) Average daily round-trip commute Number of months of business use if changed from 100% personal use Parking fees and tolls (business portion only) Actual expenses: Gasoline, lube, oil. Repairs. Tires. Insurance. Miscellaneous Auto license (other than personal property taxes) Personal property taxes Personal property taxes Insurance. Miscellaneous Auto license (other than personal property taxes) Personal property taxes (based on car's value) Interest (car loan) (for Schedule C, E and F) Vehicle rent or lease payments		-	=	<u> </u>			
Commuting mileage (for the tax year) Average dally round-trip commute Number of months of business use if changed from 100% personal use Parking fees and tolls (business portion only) Actual expenses: 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)  VEHICLE 2 Description of vehicle Date placed in service (m/d/y) Total mileage (for the tax year) Business mileage (11/122 - 6/30/22) Business mileage (11/122 - 1/31/22) Commuting mileage (for the tax year) Average daily round-trip commule Number of months of business use if changed from 100% personal use Parking fees and tolls (business portion only) Actual expenses: 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 and F) Vehicle rent or lease payments		• •		· · · · · · · · · · · · · · · · · · ·			
Average daily round-trip commute Number of months of business use if changed from 100% personal use Parking fees and tolis (business portion only)  Actual expenses:  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).  VEHICLE 2  Description of vehicle. Date placed in service (m/d/y). Total mileage (for the tax year). Business mileage (1/1/22 - 6/30/22). Business mileage (1/1/22 - 6/30/22).  Rumber of months of business use if changed from 100% personal use Parking fees and tolis (business portion only) Actual expenses: 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 and F). Vehicle rent or lease payments.		•		· · · · · · · · · · · · · · · · · · ·			
Number of months of business use if changed from 100% personal use Parking fees and tolls (business portion only) Actual expenses:  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)  VEHICLE 2  Description of vehicle Date placed in service (m/d/y) Total mileage (17/1/22 - 6/30/222) Business mileage (17/1/22 - 12/31/22) Commuting mileage (7/7/22 - 12/31/22) Commuting mileage (7/7/22 - 12/31/22) Commuting mileage (for the tax year) Number of months of business use if changed from 100% personal use Parking fees and tolls (business portion only) Actual expenses: 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 and F) Vehicle rent or lease payments.	=	_	=	<b>—</b>			
Parking fees and tolls (business portion only)  Actual expenses:  Gasoline, Jube, 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).  VEHICLE 2  Description of vehicle.  Date placed in service (m/d/y).  Total mileage (for the tax year).  Business mileage (1/1/22 - 1/3/1/22).  Commuting mileage (7/1/22 - 1/3/1/22).  Average daily round-frip commute.  Number of months of business use if changed from 100% personal use.  Parking fees and tolls (business portion only).  Actual expenses:  Gasoline, Jube, 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 and F).  Vehicle rent or lease payments.	_	-		L			
Actual expenses: 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)  VEHICLE 2  Description of vehicle. Date placed in service (m/dry). Total mileage (for the tax year) Business mileage (1/1/22 - 6/30/22). Business mileage (7/1/22 - 1/2/31/22) Commuting mileage (for the tax year) Average daily round-trip commute. Number of months of business use if changed from 100% personal use Parking fees and tolls (business portion only) Actual expenses: 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 and F) Vehicle rent or lease payments.							
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 (netre as positive). Value of employer-provided vehicle on Form W-2 (2106)  VEHICLE 2 Description of vehicle. Date placed in service (m/d/y). Total mileage (for the tax year). Business mileage (71/122 - 6/30/22). Business mileage (71/122 - 12/31/22) Commuting mileage (for the tax year) Average daily round-trip commute. Number of months of business use if changed from 100% personal use Parking fees and toils (business portion only) Actual expenses: 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 and F) Vehicle rent or lease payments.	=		(240				
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)  VEHICLE 2  Description of vehicle Date placed in service (m/d/y). Total mileage (for the tax year) Business mileage (17/122 - 6/30/22). Business mileage (71/122 - 12/31/22) Commuting mileage (71/122 - 12/31/22) Commuting mileage for the tax year) Average daily round-trip commute Number of months of business use if changed from 100% personal use Parking fees and tolis (business portion only) Actual expenses: Gasoline, lube, oil. Repairs. Tires. Insurance. Miscellaneous Auto license (other than personal property taxes) Personal property taxes (based on car's value) Interest (car toan) (for Schedule C, E and F) Vehicle rent or lease payments.			oil				
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)  VEHICLE 2  Description of vehicle. Date placed in service (m/d/y) Total mileage (for the tax year) Business mileage (1/1/22 - 6/30/22) Business mileage (1/1/22 - 12/31/22) Commuting mileage (for the tax year) Average daily round-trip commute. Number of months of business use if changed from 100% personal use Parking fees and tolls (business portion only) Actual expenses: 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 and F) Vehicle rent or lease payments				<u> </u>			
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)  VEHICLE 2  Description of vehicle Date placed in service (m/d/y) Total mileage (for the tax year) Business mileage (17/122 - 6/30/22) Business mileage (17/122 - 6/30/22) Business mileage (7/1/22 - 12/31/22) Commuting mileage (for the tax year) Average daily round-trip commute Number of months of business use if changed from 100% personal use Parking fees and toils (business portion only) Actual expenses: 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) Inte	·			<u> </u>			
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)  VEHICLE 2  Description of vehicle. Date placed in service (m/d/y) Total mileage (for the tax year) Business mileage (71/122 - 6/30/22) Business mileage (71/122 - 12/31/22) Commuting mileage (for the tax year) Average daily round-trip commute Number of months of business use if changed from 100% personal use Parking fees and tolls (business portion only) Actual expenses: 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 and F) Vehicle rent or lease payments				<del>-</del>			
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)  VEHICLE 2  Description of vehicle  Date placed in service (m/d/y)  Total mileage (for the tax year)  Business mileage (1/1/22 - 6/30/22)  Business mileage (1/1/22 - 1/231/22)  Commuting mileage (for the tax year)  Average daily round-trip commute  Number of months of business use if changed from 100% personal use  Parking fees and tolls (business portion only)  Actual expenses:  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 and F)  Vehicle rent or lease payments				<b>⊢</b>			
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)  VEHICLE 2  Description of vehicle Date placed in service (m/d/y). Total mileage (for the tax year) Business mileage (1/1/22 - 6/30/22). Business mileage (1/1/22 - 12/31/22) Commuting mileage (for the tax year) Average daily round-trip commute Number of months of business use if changed from 100% personal use Parking fees and tolls (business portion only) Actual expenses: 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 and F) Vehicle rent or lease payments							
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)   VEHICLE 2  Description of vehicle Date placed in service (m/d/y) Total mileage (for the tax year)  Business mileage (17/1/22 - 6/30/22)  Business mileage (7/1/22 - 1/231/22)  Commuting mileage (for the tax year)  Average daily round-trip commute  Number of months of business use if changed from 100% personal use  Parking fees and tolls (business portion only)  Actual expenses:  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 and F)  Vehicle rent or lease payments			•				
Vehicle rent or lease payments Inclusion amount (enter as positive) Value of employer-provided vehicle on Form W-2 (2106)  VEHICLE 2  Description of vehicle Date placed in service (m/d/y) Total mileage (for the tax year) Business mileage (1/1/22 - 6/30/22). Business mileage (1/1/22 - 6/30/22). Business mileage (7/1/22 - 12/31/22) Commuting mileage (for the tax year) Average daily round-trip commute Number of months of business use if changed from 100% personal use Parking fees and tolls (business portion only) Actual expenses: 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 and F) Vehicle rent or lease payments			-	<u> </u>			
Inclusion amount (enter as positive) Value of employer-provided vehicle on Form W-2 (2106)  VEHICLE 2  Description of vehicle Date placed in service (m/d/y) Total mileage (for the tax year) Business mileage (1/1/22 - 6/30/22) Business mileage (1/1/22 - 12/31/22) Commuting mileage (for the tax year) Average daily round-trip commute Number of months of business use if changed from 100% personal use Parking fees and tolls (business portion only) Actual expenses: 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 and F) Vehicle rent or lease payments				<u> </u>			
VEHICLE 2  Description of vehicle Date placed in service (m/d/y) Total mileage (for the tax year) Business mileage (1/1/22 - 6/30/22) Business mileage (7/1/22 - 12/31/22) Commuting mileage (for the tax year) Average daily round-trip commute Number of months of business use if changed from 100% personal use Parking fees and tolls (business portion only) Actual expenses: 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 and F) Vehicle rent or lease payments				<u> </u>			
VEHICLE 2  Description of vehicle Date placed in service (m/d/y) Total mileage (for the tax year) Business mileage (1/1/22 - 6/30/22) Business mileage (7/1/22 - 12/31/22) Commuting mileage (for the tax year) Average daily round-trip commute Number of months of business use if changed from 100% personal use Parking fees and tolls (business portion only) Actual expenses: 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 and F) Vehicle rent or lease payments				·			
Description of vehicle Date placed in service (m/d/y) Total mileage (for the tax year) Business mileage (1/1/22 - 6/30/22). Business mileage (7/1/22 - 12/31/22) Commuting mileage (for the tax year) Average daily round-trip commute Number of months of business use if changed from 100% personal use Parking fees and tolls (business portion only) Actual expenses: 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 and F) Vehicle rent or lease payments	value c	or employ	yer-provided v	enicle of Form w-2 (2100)			
Date placed in service (m/d/y) Total mileage (for the tax year)  Business mileage (1/1/22 - 6/30/22).  Business mileage (7/1/22 - 12/31/22)  Commuting mileage (for the tax year).  Average daily round-trip commute  Number of months of business use if changed from 100% personal use Parking fees and tolls (business portion only).  Actual expenses:  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 and F)  Vehicle rent or lease payments	VEHICL	LE 2		_			
Total mileage (for the tax year)  Business mileage (1/1/22 - 6/30/22).  Business mileage (7/1/22 - 12/31/22)  Commuting mileage (for the tax year)  Average daily round-trip commute  Number of months of business use if changed from 100% personal use  Parking fees and tolls (business portion only)  Actual expenses:  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 and F)  Vehicle rent or lease payments	Description	of vehic	le				
Business mileage (1/1/22 - 6/30/22).  Business mileage (7/1/22 - 12/31/22)  Commuting mileage (for the tax year).  Average daily round-trip commute.  Number of months of business use if changed from 100% personal use.  Parking fees and tolls (business portion only).  Actual expenses:  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 and F)  Vehicle rent or lease payments.							
Business mileage (7/1/22 - 12/31/22)  Commuting mileage (for the tax year)  Average daily round-trip commute  Number of months of business use if changed from 100% personal use  Parking fees and tolls (business portion only)  Actual expenses:  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 and F)  Vehicle rent or lease payments							
Commuting mileage (for the tax year)  Average daily round-trip commute  Number of months of business use if changed from 100% personal use  Parking fees and tolls (business portion only)  Actual expenses:  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 and F)  Vehicle rent or lease payments							
Average daily round-trip commute  Number of months of business use if changed from 100% personal use  Parking fees and tolls (business portion only)  Actual expenses:  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 and F)  Vehicle rent or lease payments	Business m	nileage (7	7/1/22 - 12/31/	/22)			
Number of months of business use if changed from 100% personal use  Parking fees and tolls (business portion only)  Actual expenses:  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 and F)  Vehicle rent or lease payments	Commuting	g mileage	(for the tax y	/ear)			
Parking fees and tolls (business portion only)  Actual expenses:  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 and F)  Vehicle rent or lease payments.	Average da	aily round	I-trip commute	9			
Actual expenses: 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 and F) Vehicle rent or lease payments.	Number of	months of	of business us	se if changed from 100% personal use			
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 and F)  Vehicle rent or lease payments.	Parking fee	es and to	lls (business p	portion only)			
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 and F)  Vehicle rent or lease payments.	Actual expe	enses:		_		1	
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 and F)  Vehicle rent or lease payments	Gasolin	ne, lube,	oil				
Insurance.  Miscellaneous.  Auto license (other than personal property taxes)  Personal property taxes (based on car's value)  Interest (car loan) (for Schedule C, E and F)  Vehicle rent or lease payments.	Repairs	S					
Miscellaneous Auto license (other than personal property taxes)  Personal property taxes (based on car's value) Interest (car loan) (for Schedule C, E and F)  Vehicle rent or lease payments	Tires						
Auto license (other than personal property taxes)  Personal property taxes (based on car's value)  Interest (car loan) (for Schedule C, E and F)  Vehicle rent or lease payments	Insuran	nce					
Personal property taxes (based on car's value) Interest (car loan) (for Schedule C, E and F) Vehicle rent or lease payments	Miscella	aneous					
Interest (car loan) (for Schedule C, E and F)  Vehicle rent or lease payments	Auto lic	cense (ot	her than perso	onal property taxes)			
Vehicle rent or lease payments	Person	al proper	ty taxes (base	ed on car's value)			
	Interest	t (car loa	n) (for Schedu	ule C, E and F)			
Inclusion amount (onter as positive)	Vehicle	e rent or I	ease paymen	ts			
Inclusion amount (enter as positive)	Inclusio	on amour	nt (enter as po	ositive)			
Value of employer-provided vehicle on Form W-2 (2106)							

)22	1040	US	Foreign Income Exclu	sion (Form 2555)	No.	31.1			
	Please enter all pertinent 2022 information.								
GEI	NERAL IN	FORMA	ΓΙΟΝ						
Foreiç	gn address of t	axpayer, if di	fferent from Form 1040:						
С	ity								
Emplo	oyer:								
U	.S. street addr	ess							
U	.S. state								
F	oreign street a	ddress							
F	oreign region.								
			ntity, 2=U.S. company, J.S. company, 5=other						
E	mpioyer type,	ir otner							
Туре	of exclusion re	voked if revo	ked in earlier year (if applicable):	Tax year revocation was effective					
Count	try of citizensh	ip							
City a adver	and country of se living condi	separate fore tions (if appli	ign residence if maintained due to cable):	Number of days during tax year at separate foreign address (if applicable)					
Tax h	omes(s) during	n tax vear		Dates tax home(s) were established (m/d/y)					
	omes(s) dum	y tax your.		established (HVdry)					

22	1040	US	Foreign Inco	me Exclusion	(2555)	No.	31.1 p2
TRA	VEL INF	ORMATIO		II pertinent 2022 info	ormation.		
			2022 as well as travel for				
Trave	el Type (table)	) Name of	f country (if not United Sta	ates) Date arrive	ed Date left	Days in U.S	. on business
Begini Endin	ning date for bong date for bon	oona fide resi a fide resider	dence (m/d/y)		ENCE TEST		
			r: 1=purchased home, 2=requarters furnished by emp	oloyer	Dorio	d family lived abroa	ad
Names	or raining niving at	лоай witii taxpay	er (if applicable):	Relationship	Pello	d faililly lived abioa	au
Contra Type of Explana Addre	actual terms re of visa you en	elating to leng tered foreign ited stay or emplo U.S. maintain	country of bona fide reside gth of employment abroad country under		ZIP Co		S. home rented (applicable)
	Names	of occupants	s in U.S. home (if applicab	ole) Rel	ationship of occupants in	U.S. home (if appli	cable)
Drinci	pal country of	employment					
FILLICI							
		NICING I	TYDENCEC				
FOF	REIGN HO		EXPENSES		2022 Amount	2021 Amou	unt
FOF Qualif	REIGN HO	xpenses			2022 Amount  ualifying days in location (		
FOF Qualif	REIGN HO	xpenses					

31.1 p2

2022 1040 US Foreign Income Exclusion (Form 2555) No. 31.2

Please enter all pertinent 2022 amounts and attach all W-2 forms, or other wage statements. Enter amounts in U.S. dollars only. Last year's amounts are provided for your reference.

OREIGN WAGES, SALARIES, TIPS	2022 Amount	2021 Amount
ame or number		
spouse		
eretirement plan (Box 13)		
nme of employer (Box c)		
ages, tips, other compensation (Box 1)		
deral income tax withheld (Box 2)		
cial security tax withheld (Box 4)		
edicare tax withheld (Box 6)		
ate income tax withheld (Box 17)		
cal income tax withheld (Box 19)		
OREIGN ALLOWANCES, REIMBURSEMENTS	S AND OTHER EARNED I	NCOME
oncash Income		
ome (lodging)		
eals		
ır		
ther properties or facilities:		
Illowances and Reimbursements ost of living and overseas differential		
amily		
ducation		
ome leave		
uarters		
her purposes:		
eals and lodging provided for the convenience of the		
eals and lodging provided for the convenience of the nployer (excludable under section 119)		
eals and lodging provided for the convenience of the mployer (excludable under section 119)		
other Foreign Earned Income		
other Foreign Earned Income  O22 Days Worked Allocation Information		

2022 1040 US Health Savings Accounts (8889) 32.1

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. 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 the 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.

	2022 Amount		2021 Am	ount
_	Taxpayer	Spouse	Taxpayer	Spouse
1=self-only coverage, 2=family coverage				
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)				
Contributions included above that were made after you became eligible for Medicare				
Contributions made to date				
HSA DISTRIBUTIONS				
Total HSA distribution received (1099-SA, box 1)				
Distributions included above that were rolled over to another HSA				
Total unreimbursed qualified medical expenses				

022	1040	US	Child and Depe	endent Care	Expenses (Fo	orm 2441)	33.1,33.2		
lease enter all pertinent 2022 information. Last year's amounts are provided for your reference. You must have paid for the care of one or more dependents enabling you to work or attend school to qualify for this credit.									
DEP	ENDEN	T CARE E	XPENSES (33.1)	2022 An		2021 Amou			
			ed but not paid in 2022	Taxpayer	Spouse	Taxpayer	Spouse		
		d benefits forfe	·						
PER	SONS A	AND EXPE	NSES QUALIFYIN	G FOR DEPEN	DENT CARE CE	REDIT			
No.	F L T D S	irst name ast name itle or suffix ate of birth (m/ ocial security r	d/y)		DENT CARE OF				
	1	=disabled	lent care expenses d in 2022			2021 amt:			
No.	L T D S C ir 1	ast name	l/y) Imber ent care expenses in 2022			2021 amt:			
PER	SONS (	DR ORGA  ame of provide treet address ity tate IP code oreign region oreign postal co oreign country lentification nui	MIZATIONS PROVI	DING CARE (3:	3.2)	2021 amt:			

33.1,33.2

				Lage	
2022	1040	US	Qualified Adoption Expenses (Form 8839)	37	

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

ELIGIBLE	CHILDRI	EN	2022 Amount	2021 Amount
	First name			
	Identification	n number		
	Date of birth	(m/d/y)		
	1=born before	e 2005 and was disabled		
	1=special ne	eeds child		
No.		ild		
	_	was not final in 2022		
	-	2021 for adoption not finalized by end of 2022		
	Qualified Adoption	Prior years for adoption of foreign child finalized in 2022		
	Expenses	2021 and 2022 for adoption finalized in 2022		
	Paid in	2022 for adoption finalized before 2022		
	1=spouse, 2	=joint		
	First name			
	Last name			
	Identification	number		
	Date of birth	(m/d/y)		
	1=born before	e 2005 and was disabled		
	1=special nee	eds child		
No.	1=foreign chi	ld		
	1=adoption w	vas not final in 2022		
	Qualified	2021 for adoption not finalized by end of 2022		
	Adoption	Prior years for adoption of foreign child finalized in 2022		
	Expenses	2021 and 2022 for adoption finalized in 2022		
	Paid in	2022 for adoption finalized before 2022		
	1=spouse, 2=			
		-		
	First name			
	Last name			
	Identification	number		
	Date of birth	(m/d/y)		
	1=born before	e 2005 and was disabled		
	1=special nee	eds child		
No.	1=foreign chi	ld		
	1=adoption w	vas not final in 2022		
	Qualified	2021 for adoption not finalized by end of 2022		
	Adoption	Prior years for adoption of foreign child finalized in 2022		
	Expenses Paid in	2021 and 2022 for adoption finalized in 2022		
	I aid III	2022 for adoption finalized before 2022		
	1=spouse, 2=	-joint		

ORGANIZER

JROANIZER					raye 4
2022	1040	US	Education Credits / Tuition Deduction	No.	38

Please complete the information below if you paid qualified education expenses in 2022 for you,

First name. Last name. Social security number. Number of years hope credit claimed Number of grior years AOC claimed 100202 for the first 3 months of 2023 if the qualified seprenses were made in 2022) 11-student was NOT credited a loss after seprense were made in 2022) 11-student completed first four years of post-secondary education before 2022 11-student completed first four years of post-secondary education before 2022 11-student completed first four years of 2022, of a fettery for possession or distribution of a controlled before the send of 2022, of a fettery for possession or distribution of a controlled substance.  EDUCATIONAL INSTITUTION ATTENDED (#1) Name  Street address City. State 11-2022 Form 1098-T was NOT received 11-2022 Form 1098-T received with Box 2 & 7 completed 11-2022 Form 1098-T received with Box 2 & 7 completed 11-2021 Form 1098-T received with Box 2 & 7 completed 11-2022 Form 1098-T received with Box 2 & 7 completed 11-2022 Form 1098-T received with Box 2 & 7 completed 11-2022 Form 1098-T received with Box 2 & 7 completed 11-2022 Form 1098-T received with Box 2 & 7 completed 11-2022 Form 1098-T received with Box 2 & 7 completed 11-2022 Form 1098-T received with Box 2 & 7 completed 11-2022 Form 1098-T received with Box 2 & 7 completed 11-2022 Form 1098-T received with Box 2 & 7 completed 11-2022 Form 1098-T received with Box 2 & 7 completed 11-2022 Form 1098-T received with Box 2 & 7 completed 11-2022 Form 1098-T received with Box 2 & 7 completed 11-2022 Form 1098-T received with Box 2 & 7 completed 11-2022 Form 1098-T received with Box 2 & 7 completed 11-2022 Form 1098-T received with Box 2 & 7 completed 11-2022 Form 1098-T received with Box 2 & 7 completed 11-2021 Form 1098-T received with Box 2 & 7 completed 11-2021 Form 1098-T received with Box 2 & 7 completed 11-2021 Form 1098-T received with Box 2 & 7 completed 11-2021 Form 1098-T received with Box 2 & 7 completed 11-2021 Form 1098-T received with Box 2 & 7 completed 11-2021 Form 1098-T received with Box 2 & 7 completed 11-2021 Form	STUDENT INFORMATION		
EDUCATIONAL INSTITUTION ATTENDED (#1)  Name  Street address  City  State  ZIP code  1=2022 Form 1098-T was NOT received  1=2022 Form 1098-T received with Box 2 & 7 completed  1=2021 Form 1098-T received with Box 2 & 7 completed  Federal ID number from Form 1098-T  EDUCATIONAL INSTITUTION ATTENDED (#2)  Name  Street address  City  State  ZIP code  1=2022 Form 1098-T was NOT received  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=2021 Form 1098-T received with Box 2 & 7 completed  1=2021 Form 1098-T received with Box 2 & 7 completed  1=2021 Form 1098-T received with Box 2 & 7 completed  1=2021 Form 1098-T received with Box 2 & 7 completed  1=2021 Form 1098-T received with Box 2 & 7 completed  1=2021 Form 1098-T received with Box 2 & 7 completed	1=taxpayer, 2=spouse.  First name.  Last name.  Social security number.  Number of years hope credit claimed.  Number of prior years AOC claimed  1=student was NOT enrolled at least half-time for at least one academic period that began in 2022 (or the first 3 months of 2023 if the qualified expenses were made in 2022) at an eligible institution in a qualified program.  1=student completed first four years of post-secondary education before 2022 1=student was convicted, before the end of 2022, of a felony for possession or distribution of a controlled substance.		
Name Street address City. State ZIP code 1=2022 Form 1098-T was NOT received 1=2021 Form 1098-T received with Box 2 & 7 completed 1=2021 Form 1098-T received with Box 2 & 7 completed Federal ID number from Form 1098-T  EDUCATIONAL INSTITUTION ATTENDED (#2)  Name Street address City. State ZIP code 1=2022 Form 1098-T was NOT received 1=2022 Form 1098-T was NOT received 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=2021 Form 1098-T received with Box 2 & 7 completed Federal ID number from Form 1098-T  QUALIFIED EDUCATION EXPENSES QUALIFIED EDUCATION EXPENSES 2022 Amount Books & supplies required to be purchased from institution Books & supplies not entered above			,
Name Street address City. State ZIP code 1=2022 Form 1098-T was NOT received 1=2022 Form 1098-T received with Box 2 & 7 completed 1=2021 Form 1098-T received with Box 2 & 7 completed Federal ID number from Form 1098-T  QUALIFIED EDUCATION EXPENSES Dooks & supplies required to be purchased from institution Books & supplies not entered above	Street address  City.  State.  ZIP code.  1=2022 Form 1098-T was NOT received  1=2022 Form 1098-T received with Box 2 & 7 completed  1=2021 Form 1098-T received with Box 2 & 7 completed		
Qualified tuition & fees paid in 2022 (net of refund or assistance, & not entered elsewhere)  Books & supplies required to be purchased from institution  Books & supplies not entered above	Name		
Qualified tuition & fees paid in 2022 (net of refund or assistance, & not entered elsewhere)	QUALIFIED EDUCATION EXPENSES	2022 Amount	2021 Amount
· -	Books & supplies required to be purchased from institution  Books & supplies not entered above	2022 Tuniodin	2027711104111

2022 1040 US Household Employment Taxes (Schedule H)

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

#### HOUSEHOLD EMPLOYMENT TAXES

NOTE:If you paid any one household employee cash wages of \$2,400 or more in 2022; withheld federal income tax during 2022 for any household employee; or paid total cash wages of \$1,000 or more in any calendar quarter of 2021 or 2022 to household employees, please complete the following:

Employer identification number		
=spouse, 2=joint.		
Social security, Medicare and income taxes:	2022 Amount	2021 Amount
1=paid any one employee cash wages of \$2,400 or more		
1=withheld federal income tax for household employee		
Total cash wages subject to social security taxes		
Total cash wages subject to Medicare taxes		
Federal income tax withheld		
Taxes withheld from state disability payments		
1=paid total cash wages of \$1,000 or more in any calendar quarter of 2021 or 2022		
Total cash wages subject to FUTA tax		
1=paid unemployment contributions to only one state		
1=paid all state unemployment contributions by 4/17/23		
1=all wages taxable for FUTA were also taxable for state unemployment .		
Name of state		
Contributions paid to state unemployment fund		

42

Please enter all pertinent 2022 amounts & attach all 1099-INT and 1099-DIV forms. Last year's amounts are provided for your reference.  CHILD'S INFORMATION  First name Last name Social security number Date of birth (midry), 1-nontaxable to fadera 1-nontaxable to fadera 1-nontaxable to state.  INTEREST INCOME (Form 1099-INT)  Banks, credit unions, etc. (Box 1):  U.S. bonds, T-bills, etc. (nontaxable to state) (Box 3):  U.S. bonds, T-bills, etc. (nontaxable to state) (Box 3):  Tax-exempt interest Total municipal bonds Adjustments Nominee distribution Accrued interest 1-neterest in or authority over foreign account Name of foreign counity. 1-grantor/transferor or received distribution from foreign trust Post 87/86 private activity bond interest (included above) (6251)  DIVIDENDI INCOME (Form 1099-DIV)  Total ordinary dividends (Box 1a):  Unrecaptured section 1250 gain (Box 22)  Unrecaptured section 1250 gain (Box 24) Nontaxable distributions (Box 3) Tax exempt interest Total municipal bonds Interest Total capital gain distributions (Box 3) Interest in or authority over foreign account Name of foreign caucity Interest in or authority over foreign account Name of foreign caucity Interest in or authority Int	Last year's amounts are provided for your reference.  CHILD'S INFORMATION  First name Last name Social security number. Date of birth (m/d/y) 1-nontaxable to federal 1-nontaxable to state  INTEREST INCOME (Form 1099-INT)  Banks, credit unions, etc. (Box 1):  2022 Amount 2021 Amount  U.S. bonds, T-bills, etc. (nontaxable to stale) (Box 3):  Tax-exempt interest: Total municipal bonds In-state municipal bonds In-state municipal bonds Adjustments: Nominee distribution Accrued interest: Tax-exempt interest (1099-INT in error) OID adjustment AAP adjustment Foreign: 1-interest in or authority over foreign account Name of foreign country. 1-grantor/transferor or received distribution from toreign futs! Post 8/7/86 prisale activity bond interest (included above) (6/251)  DIVIDEND INCOME (Form 1099-DIV) Total ordinary dividends (Box 1a):  Unrecaptured section 1250 gain (Box 2b) Section 1202 gain (Box 2c) Collectibles (289) gain (Box 2c) Nontaxable distributions (Box 3) Tax-exempt interest: Total municipal bonds In-state municipal bonds In-s	22	1040	US	Parent's Election to Report	No.	44	
CHILD'S INFORMATION  First name Last name Social security number Date of birth (m/dy) 1-nontaxable to federal 1-nontaxable to state  INTEREST INCOME (Form 1099-INT)  Banks, credit unions, etc. (Box 1):  U.S. bonds, T-bills, etc. (nontaxable to state) (Box 3):  U.S. bonds, T-bills, etc. (nontaxable to state) (Box 3):  Tax-exempt interest: Total municipal bonds In-state municipal bonds In-state municipal to exempt interest (1099-INT in error) OID adjustment Acquisitments Nominee distribution Accrued interest 1 ave exempt interest (1099-INT in error) OID adjustment (Interest (1099-INT in error)) Interest in or authority over foreign account Name of toreign country 1-granfor/fransferor or received distribution from foreign frust Post 81/786 private activity bond interest (included above) (6251)  DIVIDEND INCOME (Form 1099-DIV) Total ordinary dividends (Box 1a)  Unrecaptured section 1250 gain (Box 2b) Section 1202 gain (Box 2c) Section 1202 gain (Box 2c) Social sections (Social Sections) In-state municipal bonds In-state municipal bonds Nominee distributions Capital gain distributions	CHILD'S INFORMATION First name. Last name. Social security number. Date of birth (m/dy) 1-conntaxable to state.  INTEREST INCOME (Form 1099-INT) Banks, credit unions, etc. (Box 1):  U.S. bonds, T-bills, etc. (nontaxable to state) (Box 3):  Tax-exempt interest: Total municipal bonds In-state and interest (1099-INT) interest) OID adjustment. Applications in authority over foreign account Name of foreign country 1-grantor/transferor or received distribution from foreign trust Post 87/780 private activity bond interest (included above) (6251)  DIVIDEND INCOME (Form 1099-DIV) Total capital gain (Box 2c) Cullified dividends (Box 1a):  Unrecaptured section 1250 gain (Box 2c) Cullified dividends In-state municipal bonds In-state municipal tonds		Plea	ase enter a	all pertinent 2022 amounts & attach al	1 1099-INT and 1099-I	OIV forms.	
First name Last name Social security number Date of birth (m/dy) 1-montaxable to tederal 1-nontaxable to state  INTEREST INCOME (Form 1099-INT) Banks, credit unions, etc. (Box 1):  U.S. bonds, T-bills, etc. (nontaxable to state) (Box 3):   Tax-exempt interest: Total municipal bonds In-state municipal bonds Adjustments: Nominee distribution Accrued interest 1 Tax-exempt interest (1099-INT in error) OID adjustment AAP adjustment Foreign: 1-interest in or authority over foreign account Name of foreign country 1-granfor/transferor or received distribution from foreign trust Post 87/86 private activity bond interest (included above) (6251)  DIVIDEND INCOME (Form 1099-DIV) Total ordinary dividends (Box 1a):  Unrecaptured section 1250 gain (Box 2d) Nontaxable distributions (Box 3)  Tax-exempt interest 1 Collectibles (280) gain (Box 2d) Nontaxable distributions (Box 3)  Tax-exempt interest 1 Collectibles (280) gain (Box 2d) Nontaxable distributions (Box 3)  Tax-exempt interest 1 Collectibles (280) gain (Box 2d) Nontaxable distributions (Box 3)  Tax-exempt interest 1 Collectibles (280) gain (Box 2d) Nontaxable distributions (Box 3)  Tax-exempt interest 1 Collectibles (280) gain (Box 2d) Nontaxable distributions (Box 3)  Tax-exempt interest 1 Collectibles (280) gain (Box 2d) Nontaxable distributions (Box 3)  Tax-exempt interest 1 Collectibles (280) gain (Box 2d) Nontaxable distributions (Box 3)  Coulified dividends Coulified dividen	First name. Last name. Date of birth (m/dy) 1-nontaxable to federal 1-nontaxable to state.  INTEREST INCOME (Form 1099-INT) Banks, credit unions, etc. (Box 1):  U.S. bonds, T-bills, etc. (nontaxable to state) (Box 3):  Tax-exempt interest: Total municipal bonds In-state municipal bonds In-state municipal bonds Adjustments Accrued interest Total adjustment. AABP adjustments Foreign: 1-interest in or authority over foreign account Name of foreign country 1-grantor/transferor or received distribution from foreign trust Post 87/86 private activity bond interest (included shove) (6251)  DIVIDEND INCOME (Form 1099-DIV) Total ordinary dividends (Box 1a):  Urrecaptured section 1250 gain (Box 2b) Section 1202 gain (Box 2c) Cultified dividends (Box 3) Tax-exempt interest (Included Source) (Included Sour	СПІ	I DIS INE			or your reference.		
Last name, Social security number Date of birth (m/d/y) 1-nontaxable to federal 1-nontaxable to state.  INTEREST INCOME (Form 1099-INT) Banks, credit unions, etc. (Box 1):  2022 Amount 2021 Amount 2022 Amount 2021 Amount 2022 Amount 2021 Amount 2022 Amount 2	Last name. Social security number Date of birth (m/dr/y) 1-nontaxable to federal 1-nontaxable to state.  INTEREST INCOME (Form 1099-INT) Banks, credit unions, etc. (Box 1):  2022 Amount 2021 Amount 2022 Amount							
Social security number Date of birth (m/ddy) 1-nontaxable to faderal 1-nontaxable to state.  INTEREST INCOME (Form 1099-INT) Banks, credit unions, etc. (Box 1):  U.S. bonds, T-bills, etc. (nontaxable to state) (Box 3):  Tax-exempt interest: Total municipal bonds In-state municipal bonds Adjustments: Nominee distribution Accrued interest Tax-exempt interest (1099-INT in error) OID adjustment. ABP adjustment Poreign: 1-interes in or authority over foreign account Name of foreign country 1-grantor/transferor or received distribution from foreign trust Post 8/7/86 private activity bond interest (included above) (6251)  DIVIDEND INCOME (Form 1099-DIV) Total ordinary dividends (Box 1a):  Urrecaptured section 1250 gain (Box 2b) Section 1207 gain (Box 2c) Collectibles (Selb) gain (Box 2c) Collectibles (Selb) gain (Box 2c) Nontaxable distributions Cordinary dividends In-state municipal bonds In-state municipal bonds Nominee distributions Ordinary dividends Capital gain distributions Cordinary dividends Capital gain distributions Ordinary dividends Capital gain distributions	Social security number Date of birth (midty) I-nontaxable to state.  INTEREST INCOME (Form 1099-INT) Banks, credit unions, etc. (Box 1):  U.S. bonds, T-bills, etc. (nontaxable to state) (Box 3):  Tax-exempt interest: Total municipal bonds In-state municipal bonds Adjustments: Nominee distribution ABP adjustment ABP adjustment Poreign: I-interest in or authority over foreign account. Name of foreign country I-grantor/transferor or received distribution from foreign trust Post 87/86 private activity bond interest (included above) (6251)  DIVIDEND INCOME (Form 1099-DIV) Total capital gain distributions (Box 2a):  Unrecaptured section 1250 gain (Box 2b) Section 1202 gain (Box 2c) Nontaxable distributions In-state municipal bonds In-state municipal bonds In-state municipal bonds Nontinee distributions In-state municipal bonds In-state municipal bonds Oualified dividends Capital gain distributions Ordinary dividends Oualified dividends							
Date of birth (m/d/y) 1-nontaxable to federal 1-nontaxable to state  INTEREST INCOME (Form 1099-INT)  Banks, credit unions, etc. (Box 1):  2022 Amount 2021 Amount  2021 Amount  2021 Amount  2021 Amount  2021 Amount  2021 Amount  2021 Amount  2021 Amount  2022 Amount 2021 Amount  2021 Amount  2021 Amount  2021 Amount  2022 Amount 2021 Amount  2023 Amount 2024 Amount  2024 Amount  2024 Amount  2024 Amount  2024 Amount  2024 Amount  2024 Amount  2025 Amount 2024 Amount  2026 Amount 2026 Amount 2026 Amount 2026 Amount 2026 Amount 2026 Amount 2026 Amount 2026 Amount 2026 Amount 2026 Amount 2026 Amount 2026 Amount 2026 Amount 2026 Amount 2026 Amount 2026 Amount 2026 Amount 2026 Amount 2026 Amount 2026 Amount 2026 Amount 2026 Amount 2026 Amount 2026 Amount 2027 Amount 2027 Amount 2027 Amount 2027 Amount 2028 Amount 2021 Amount 20	Date of birth (m/d/y) 1-nontaxable to state  INTEREST INCOME (Form 1099-INT)  Banks, credit unions, etc. (Box 1):  U.S. bonds, T-bills, etc. (nontaxable to state) (Box 3):  Tax-exempt interest: Total municipal bonds In-state municipal bonds Adjustments: Nominee distribution Accrued interest (1099-INT in error) OiD adjustment. ABP adjustment. Name of foreign country 1-grante/transferor or received distribution from foreign trust Post 87/786 private activity bond interest (included above) (6251)  DIVIDEND INCOME (Form 1099-DIV) Total capital gain distributions (Box 2a):  Unrecaptured section 1250 gain (Box 2b) Section 1202 gain (Box 2c) Collectibies (28%) gain (Box 2d) Nontinee distributions Ordinary dividends In-state municipal bonds In-state municipal bonds Nontinee distributions Ordinary dividends Capital gain distributions							
1-nontaxable to federal 1-nontaxable to state  INTEREST INCOME (Form 1099-INT)  Banks, credit unions, etc. (Box 1):  U.S. bonds, T-bills, etc. (nontaxable to state) (Box 3):  Tax-exempt interest: Total municipal bonds In-state municipal bonds Adjustments: Nominee distribution Accrued interest Tax-exempt interest (1099-INT in error) OID adjustment ABP adjustment ABP adjustment 1-Interest in or authority over foreign account Name of foreign country 1-grantor/transferor or received distribution from foreign trust Post 87/86 private activity bond interest (included above) (6251)  DIVIDEND INCOME (Form 1099-DIV) Total ordinary dividends (Box 1a):  Unrecaptured section 1250 gain (Box 2b) Section 1202 gain (Box 2c) Collectibles (28%) gain (Box 2d) Nontaxable distributions Ordinary dividends In-state municipal bonds I	1-nontaxable to federal. 1-nontaxable to state  INTEREST INCOME (Form 1099-INT)  Banks, credit unions, etc. (Box 1):  U.S. bonds, T-bills, etc. (nontaxable to state) (Box 3):  Tax-exempt interest: Total municipal bonds In-state municipal bonds Adjustments: Nominee distribution Accrued interest Tax-exempt interest (1099-INT in error) OID adjustment. ABP adjustment. ABP adjustment. Sapparation/transfero or received distribution from foreign trust Post 8/7/86 private activity bond interest (included above) (6251)  DIVIDEND INCOME (Form 1099-DIV)  Total ordinary dividends (Box 1a):  Unrecaptured section 1250 gain (Box 2b) Section 1202 gain (Box 2c) Collectibles (28%) gain (Box 2d) Nontaxable distributions Ordinary dividends (Box 3) In-state municipal bonds Nominee distributions: Ordinary dividends Capital gain distributions		,					
INTEREST INCOME (Form 1099-INT)  Banks, credit unions, etc. (Box 1):  U.S. bonds, T-bills, etc. (nontaxable to state) (Box 3):  Tax-exempt interest: Total municipal bonds In-state municipal bonds Adjustments: Nominee distribution Accrued interest. Tax-exempt interest (1099-INT in error) OID adjustment. ABP adjustment. Foreign: 1=interest in or authority over foreign account Name of foreign country 1=grantor/transferor or received distribution from foreign trust Post 87/786 private activity bond interest (included above) (6251)  DIVIDEND INCOME (Form 1099-DIV) Total capital gain distributions (Box 2a):  Unrecaptured section 1250 gain (Box 2b) Section 1202 gain (Box 2c) Collectibles (28%) gain (Box 2d) Nontaxable distributions (Box 3) In-state municipal bonds In-state municipal bonds In-state municipal bonds Nominee distributions: Ordinary dividends Capital gain distributions Ordinary dividends Capital gain distributions Ordinary dividends Capital gain distributions Collectibles (28%) gain (Box 2d) Nontaxable distributions Ordinary dividends Capital gain distributions	INTEREST INCOME (Form 1099-INT)  Banks, credit unions, etc. (Box 1):  2022 Amount  2021 Amount							
Banks, credit unions, etc. (Box 1):  U.S. bonds, T-bills, etc. (nontaxable to state) (Box 3):  Tax-exempt interest: Total municipal bonds In-state municipal bonds Adjustments: Nominee distribution Accrued interest Tax-exempt interest (1090-INT in error) OID adjustment ABP adjustment 1 = interest in or authority over foreign account Name of foreign country 1 = grantor/transferor or received distribution from foreign trust Post 87/86 private activity bond interest (included above) (6251)  DIVIDEND INCOME (Form 1099-DIV) Total ordinary dividends (Box 1a):  Unrecaptured section 1250 gain (Box 2b) Section 1202 gain (Box 2c) Collectibles (28%) gain (Box 2d) Nontaxable distributions Ordinary dividends In-state municipal bonds In-state municipal bonds In-state municipal bonds Oqualified dividends Qualified dividends	Banks, credit unions, etc. (Box 1):  U.S. bonds, T-bills, etc. (nontaxable to state) (Box 3):  Tax-exempt interest:  Total municipal bonds In-state municipal bonds Adjustments:  Nominee distribution.  Accrued interest.  Tax-exempt interest (1099-INT in error). OID adjustment. ABP adjustment.  Foreign:  1=interest in or authority over foreign account. Name of foreign country. 1=grantor/transferor or received distribution from foreign trust Post 87/786 private activity bond interest (included above) (6251)  DIVIDEND INCOME (Form 1099-DIV)  Total ordinary dividends (Box 1a):  Unrecaptured section 1250 gain (Box 2b) Section 1202 gain (Box 2c) Collectibles (28%) gain (Box 2d) Nontaxable distributions (Box 3)  Tax-exempt interest: Total municipal bonds In-state municipal bonds Oualified dividends. Capital gain distributions.							
Banks, credit unions, etc. (Box 1):  U.S. bonds, T-bills, etc. (nontaxable to state) (Box 3):  Tax-exempt interest: Total municipal bonds In-state municipal bonds Adjustments: Nominee distribution Accrued interest Tax-exempt interest (1099-INT in error) OID adjustment ABP adjustment Foreign: 1-interest in or authority over foreign account Name of foreign country 1-grantor/transferor or received distribution from foreign trust Post 87/786 private activity bond interest (included above) (6251)  DIVIDEND INCOME (Form 1099-DIV) Total ordinary dividends (Box 1a):  Unrecaptured section 1250 gain (Box 2b) Section 1202 gain (Box 2c) Collectibles (28%) gain (Box 2d) Nontaxable distributions (Box 3) Tax-exempt Interest: Total municipal bonds In-state municipal bonds In-state municipal bonds In-state municipal bonds Capital gain distributions Ordinary dividends Capital gain distributions Ordinary dividends Capital gain distributions Ordinary dividends Capital gain distributions	Banks, credit unions, etc. (Box 1):  U.S. bonds, T-bills, etc. (nontaxable to state) (Box 3):  Tax-exempt interest: Total municipal bonds In-state municipal bonds Adjustments: Nominee distribution Accrued interest. Tax-exempt interest (1099-INT in error) OID adjustment ABP adjustment Foreign: 1-interest in or authority over foreign account Name of foreign country. 1-granto/transferor or received distribution from foreign trust Post 87/786 private activity bond interest (included above) (6251)  DIVIDEND INCOME (Form 1099-DIV) Total ordinary dividends (Box 1a):  Unrecaptured section 1250 gain (Box 2b) Section 1202 gain (Box 2c) Collectibles (28%) gain (Box 2d) Nontaxable distributions (Box 3) Tax-exempt interest: Total municipal bonds In-state municipal bonds In-	INT	EREST IN	ICOME (F	Form 1099-INT)			
U.S. bonds, T-bills, etc. (nontaxable to state) (Box 3):  Tax-exempt interest: Total municipal bonds In-state municipal bonds Adjustments: Nominee distribution Accrued interest. Tax-exempt interest (1099-INT in error) OID adjustment ABP adjustment Foreign: 1=interest in or authority over foreign account Name of foreign country 1=granto/transferor or received distribution from foreign trust Post 87/86 private activity bond interest (included above) (6251)  DIVIDEND INCOME (Form 1099-DIV)  Total ordinary dividends (Box 1a):  Qualified dividends (Box 1b) Total capital gain distributions (Box 2a):  Unrecaptured section 1250 gain (Box 2c) Collectibles (28%) gain (Box 2c) Collectibles (28%) gain (Box 2d) Nontaxable distributions (Box 3) Tax-exempt interest: Total municipal bonds In-state municipal bonds In-state municipal bonds In-state municipal bonds Coulified dividends Oualified dividends Capital gain distributions	U.S. bonds, T-bills, etc. (nontaxable to state) (Box 3):  Tax-exempt interest: Total municipal bonds In-state municipal bonds In-state municipal bonds Adjustments: Nominee distribution. Accrued interest Tax-exempt interest (1099-INT in error). OID adjustment. ABP adjustment. Foreign: 1=interest in or authority over foreign account. Name of foreign country. 1=grantor/transferor or received distribution from foreign trust Post 87/86 private activity bond interest (included above) (6251)  DIVIDEND INCOME (Form 1099-DIV)  Total ordinary dividends (Box 1a):  Qualified dividends (Box 1b). Total capital gain distributions (Box 2a):  Unrecaptured section 1250 gain (Box 2b). Section 1202 gain (Box 2c). Collectibles (28%) gain (Box 2c) Collectibles (28%) gain (Box 2d) Nontaxable distributions (Box 3) Tax-exempt interest: Total municipal bonds In-state municipal bonds I			-	•	2022 Amount	2021 Amount	
Tax-exempt interest: Total municipal bonds In-state municipal bonds Adjustments: Nominee distribution Accrued interest Tax-exempt interest (1099-INT in error) OID adjustment ABP adjustment ABP adjustment I=interest in or authority over foreign account Name of foreign country 1=grantor/transferor or received distribution from foreign trust Post 87/86 private activity bond interest (included above) (6251)  DIVIDEND INCOME (Form 1099-DIV)  Total ordinary dividends (Box 1a):  Oualified dividends (Box 1b) Total capital gain distributions (Box 2a):  Unrecaptured section 1250 gain (Box 2c) Collectibles (28%) gain (Box 2c) Collectibles (28%) gain (Box 2d) Nontaxable distributions (Box 3) Tax-exempt interest: Total municipal bonds In-state municipal bonds Nominee distributions: Ordinary dividends Capital gain distributions Oualified dividends Capital gain distributions	Tax-exempt interest: Total municipal bonds In-state municipal bonds Adjustments: Nominee distribution Accrued interest Tax-exempt interest (1099-INT in error) Olo adjustment ABP adjustment  Foreign: 1=interest in or authority over foreign account Name of foreign country 1=grantor/transferor or received distribution from foreign trust Post 877/86 private activity bond interest (included above) (6251)  DIVIDEND INCOME (Form 1099-DIV)  Total ordinary dividends (Box 1a):  Unrecaptured section 1250 gain (Box 2b) Section 1202 gain (Box 2c) Collectibles (28%) gain (Box 2d) Nontaxable distributions (Box 3) Tax-exempt interest: Total municipal bonds In-state municipal bon			, ,				
Tax-exempt interest:  Total municipal bonds In-state municipal bonds Adjustments: Nominee distribution Accrued interest Tax-exempt interest (1099-INT in error) OiD adjustment. ABP adjustment.  Foreign: 1=interest in or authority over foreign account. Name of foreign country 1=grantor/transferor or received distribution from foreign trust Post 8/7/86 private activity bond interest (included above) (6251)  DIVIDEND INCOME (Form 1099-DIV)  Total ordinary dividends (Box 1a):  Cualified dividends (Box 2a):  Unrecaptured section 1250 gain (Box 2b) Section 1202 gain (Box 2c) Collectibles (28%) gain (Box 2d) Nontaxable distributions (Box 3) Tax-exempt interest: Total municipal bonds In-state municipal bonds Nominee distributions: Ordinary dividends. Cualified dividends Capital gain distributions: Ordinary dividends Capital gain distributions	Tax-exempt interest: Total municipal bonds In-state municipal bonds Adjustments: Nominee distribution Accrued interest Tax-exempt interest (1099-INT in error) OID adjustment ABP adjustment.  Foreign: 1=interest in or authority over foreign account Name of foreign country 1=grantor/transferor or received distribution from foreign trust Post 8/7/86 private activity bond interest (included above) (6251)  DIVIDEND INCOME (Form 1099-DIV)  Total ordinary dividends (Box 1a):  Cualified dividends (Box 2a):  Unrecaptured section 1250 gain (Box 2b) Section 1202 gain (Box 2c) Collectibles (28%) gain (Box 2d) Nontaxable distributions (Box 3)  Tax-exempt interest: Total municipal bonds In-state municipal bonds In-state municipal bonds Nominee distributions: Ordinary dividends Capital gain distributions Outlified dividends Capital gain distributions	II S F		etc (nontava	ible to state) (Roy 3):			
Total municipal bonds In-state municipal bonds Adjustments:  Nominee distribution Accrued interest.  Tax-exempt interest (1099-INT in error) OID adjustment ABP adjustment ABP adjustment 1=interest in or authority over foreign account Name of foreign country. 1=grantor/transferor or received distribution from foreign trust Post 8/7/86 private activity bond interest (included above) (6251)  DIVIDEND INCOME (Form 1099-DIV)  Total ordinary dividends (Box 1a):  Qualified dividends (Box 1b) Total capital gain distributions (Box 2a):  Unrecaptured section 1250 gain (Box 2b) Section 1202 gain (Box 2c) Collectibles (28%) gain (Box 2d) Nontaxable distributions (Box 3) Tax-exempt interest: Total municipal bonds In-state municipal bonds Nominee distributions: Ordinary dividends Capital gain distributions	Total municipal bonds In-state municipal bonds Adjustments: Nominee distribution Accrued interest (1099-INT in error) OID adjustment ABP adjustment ABP adjustment I-interest in or authority over foreign account Name of foreign country 1-grantor/transferor or received distribution from foreign trust Post 8/7/86 private activity bond interest (included above) (6251)  DIVIDEND INCOME (Form 1099-DIV) Total ordinary dividends (Box 1a):  Qualified dividends (Box 1b) Total capital gain distributions (Box 2a):  Unrecaptured section 1250 gain (Box 2b) Section 1202 gain (Box 2c) Collectibles (28%) gain (Box 2d) Nontaxable distributions (Box 3) Tax-exempt interest: Total municipal bonds In-state municipal bonds Oualified dividends Capital gain distributions: Ordinary dividends Capital gain distributions	U.S. L	JUHUS, 1-DIIIS,	екс. (попкаха	ible to state) (Box 3).			
Total municipal bonds In-state municipal bonds Adjustments:  Nominee distribution Accrued interest.  Tax-exempt interest (1099-INT in error) OID adjustment ABP adjustment ABP adjustment 1=interest in or authority over foreign account Name of foreign country. 1=grantor/transferor or received distribution from foreign trust Post 8/7/86 private activity bond interest (included above) (6251)  DIVIDEND INCOME (Form 1099-DIV)  Total ordinary dividends (Box 1a):  Qualified dividends (Box 1b) Total capital gain distributions (Box 2a):  Unrecaptured section 1250 gain (Box 2b) Section 1202 gain (Box 2c) Collectibles (28%) gain (Box 2d) Nontaxable distributions (Box 3) Tax-exempt interest: Total municipal bonds In-state municipal bonds Nominee distributions: Ordinary dividends Capital gain distributions	Total municipal bonds In-state municipal bonds Adjustments: Nominee distribution Accrued interest (1099-INT in error) OID adjustment ABP adjustment ABP adjustment I-interest in or authority over foreign account Name of foreign country 1-grantor/transferor or received distribution from foreign trust Post 8/7/86 private activity bond interest (included above) (6251)  DIVIDEND INCOME (Form 1099-DIV) Total ordinary dividends (Box 1a):  Qualified dividends (Box 1b) Total capital gain distributions (Box 2a):  Unrecaptured section 1250 gain (Box 2b) Section 1202 gain (Box 2c) Collectibles (28%) gain (Box 2d) Nontaxable distributions (Box 3) Tax-exempt interest: Total municipal bonds In-state municipal bonds Oualified dividends Capital gain distributions: Ordinary dividends Capital gain distributions							
In-state municipal bonds Adjustments:  Nominee distribution Accrued interest Tax-exempt interest (1099-INT in error) OID adjustment ABP adjustment ABP adjustment 1-interest in or authority over foreign account Name of foreign country 1-grantor/transferor or received distribution from foreign trust Post 87/786 private activity bond interest (included above) (6251)  DIVIDEND INCOME (Form 1099-DIV) Total ordinary dividends (Box 1a):  Qualified dividends (Box 1b) Total capital gain distributions (Box 2a):  Unrecaptured section 1250 gain (Box 2b) Section 1202 gain (Box 2c) Collectibles (28%) gain (Box 2d) Nontaxable distributions (Box 3) Tax-exempt interest: Total municipal bonds In-state municipal bonds In-state municipal bonds Cualified dividends Cualified dividends Cualified dividends Capital gain distributions	In-state municipal bonds Adjustments: Nominee distribution Accrued interest Tax-exempt interest (1099-INT in error) OID adjustment ABP adjustment ABP adjustment I-interest in or authority over foreign account Name of foreign country 1-grantor/transferor or received distribution from foreign trust Post 87/786 private activity bond interest (included above) (6251)  DIVIDEND INCOME (Form 1099-DIV) Total ordinary dividends (Box 1a):  Qualified dividends (Box 1b) Total capital gain distributions (Box 2a):  Unrecaptured section 1250 gain (Box 2b) Section 1202 gain (Box 2c) Collectibles (28%) gain (Box 2d) Nontaxable distributions (Box 3) Tax-exempt interest: Total municipal bonds In-state municipal bonds In-state municipal bonds Ordinary dividends Oualified dividends Capital gain distributions		•					
Adjustments:  Nominee distribution Accrued interest.  Tax-exempt interest (1099-INT in error) OID adjustment ABP adjustment. Foreign:  1-interest in or authority over foreign account Name of foreign country 1=grantor/transferor or received distribution from foreign trust Post 8/7/86 private activity bond interest (included above) (6251)  DIVIDEND INCOME (Form 1099-DIV)  Total ordinary dividends (Box 1a):  Qualified dividends (Box 1b) Total capital gain distributions (Box 2a):  Unrecaptured section 1250 gain (Box 2c) Collectibles (28%) gain (Box 2d) Nontaxable distributions (Box 3) Tax-exempt interest: Total municipal bonds In-state municipal bonds In-state municipal bonds Ordinary dividends Capital gain distributions:	Adjustments:  Nominee distribution  Accrued interest.  Tax-exempt interest (1099-INT in error)  OID adjustment.  ABP adjustment.  Foreign:  1interest in or authority over foreign account  Name of foreign country.  1							
Nominee distribution Accrued interest.  Tax-exempt interest (1099-INT in error) OID adjustment.  ABP adjustment.  Foreign: 1=interest in or authority over foreign account Name of foreign country. 1=grantor/transferor or received distribution from foreign trust Post 8/7/86 private activity bond interest (included above) (6251)  DIVIDEND INCOME (Form 1099-DIV)  Total ordinary dividends (Box 1a):  Qualified dividends (Box 1b).  Total capital gain distributions (Box 2a):  Unrecaptured section 1250 gain (Box 2b) Section 1202 gain (Box 2c) Collectibles (28%) gain (Box 2d) Nontaxable distributions (Box 3)  Tax-exempt interest: Total municipal bonds In-state municipal bonds In-state municipal bonds Ordinary dividends Qualified dividends Capital gain distributions	Nominee distribution. Accrued interest Tax-exempt interest (1099-INT in error) OID adjustment. ABP adjustment. Foreign: 1=interest in or authority over foreign account Name of foreign country. 1=grantor/transferor or received distribution from foreign trust Post 8/7/86 private activity bond interest (included above) (6251)  DIVIDEND INCOME (Form 1099-DIV)  Total ordinary dividends (Box 1a):  Qualified dividends (Box 1b) Total capital gain distributions (Box 2a):  Unrecaptured section 1250 gain (Box 2b) Section 1202 gain (Box 2c) Collectibles (28%) gain (Box 2d) Nontaxable distributions (Box 3) Tax-exempt interest: Total municipal bonds In-state municipal bonds In-state municipal bonds Ordinary dividends Capital gain distributions		•	al bonds				
Accrued interest. Tax-exempt interest (1099-INT in error). OID adjustment. ABP adjustment.  Foreign:  1=interest in or authority over foreign account. Name of foreign country. 1=grantor/transferor or received distribution from foreign trust Post 8/7/86 private activity bond interest (included above) (6251)  DIVIDEND INCOME (Form 1099-DIV)  Total ordinary dividends (Box 1a):  Qualified dividends (Box 1b).  Total capital gain distributions (Box 2a):  Unrecaptured section 1250 gain (Box 2b). Section 1202 gain (Box 2c). Collectibles (28%) gain (Box 2d). Nontaxable distributions (Box 3). Tax-exempt interest: Total municipal bonds In-state municipal bonds Nominee distributions: Ordinary dividends. Oqualified dividends. Capital gain distributions	Accrued interest. Tax-exempt interest (1099-INT in error). OID adjustment. ABP adjustment.  Foreign:  1=interest in or authority over foreign account. Name of foreign country. 1=grantor/transferor or received distribution from foreign trust Post 8/7/86 private activity bond interest (included above) (6251)  DIVIDEND INCOME (Form 1099-DIV)  Total ordinary dividends (Box 1a):  Qualified dividends (Box 1b).  Total capital gain distributions (Box 2a):  Unrecaptured section 1250 gain (Box 2b) Section 1202 gain (Box 2c) Collectibles (28%) gain (Box 2d) Nontaxable distributions (Box 3)  Tax-exempt interest: Total municipal bonds In-state municipal bonds In-state municipal bonds Nominee distributions: Ordinary dividends Qualified dividends Capital gain distributions	-		.41				
Tax-exempt interest (1099-INT in error) OID adjustment. ABP adjustment.  ABP adjustment.  Foreign:  1-interest in or authority over foreign account Name of foreign country 1-grantor/transferor or received distribution from foreign trust Post 8/7/86 private activity bond interest (included above) (6251)  DIVIDEND INCOME (Form 1099-DIV)  Total ordinary dividends (Box 1a):  Qualified dividends (Box 1b)  Total capital gain distributions (Box 2a):  Unrecaptured section 1250 gain (Box 2b) Section 1202 gain (Box 2c) Collectibles (28%) gain (Box 2d) Nontaxable distributions (Box 3)  Tax-exempt interest: Total municipal bonds In-state municipal bonds In-state municipal bonds Ordinary dividends Qualified dividends Capital gain distributions	Tax-exempt interest (1099-INT in error) OID adjustment ABP adjustment  ABP adjustment  Foreign:  1=interest in or authority over foreign account Name of foreign country  1=grantor/transferor or received distribution from foreign trust Post 8/7/86 private activity bond interest (included above) (6251)  DIVIDEND INCOME (Form 1099-DIV)  Total ordinary dividends (Box 1a):  Qualified dividends (Box 1b)  Total capital gain distributions (Box 2a):  Unrecaptured section 1250 gain (Box 2b)  Section 1202 gain (Box 2c)  Collectibles (28%) gain (Box 2d)  Nontaxable distributions (Box 3)  Tax-exempt interest: Total municipal bonds In-state municipal bonds In-state municipal bonds Ordinary dividends Oqualified dividends Capital gain distributions							
OID adjustment.  ABP adjustment.  Forelgn:  1=interest in or authority over foreign account. Name of foreign country.  1=grantor/transferor or received distribution from foreign trust.  Post 8/7/86 private activity bond interest (included above) (6251)  DIVIDEND INCOME (Form 1099-DIV)  Total ordinary dividends (Box 1a):  Qualified dividends (Box 1b)  Total capital gain distributions (Box 2a):  Unrecaptured section 1250 gain (Box 2b)  Section 1202 gain (Box 2c).  Collectibles (28%) gain (Box 2d)  Nontaxable distributions (Box 3)  Tax-exempt interest:  Total municipal bonds In-state municipal bonds In-state municipal bonds Ordinary dividends Qualified dividends Qualified dividends Capital gain distributions	OID adjustment ABP adjustment  Foreign:  1=interest in or authority over foreign account Name of foreign country  1=grantor/transferor or received distribution from foreign trust Post 8/7/86 private activity bond interest (included above) (6251)  DIVIDEND INCOME (Form 1099-DIV)  Total ordinary dividends (Box 1a):  Qualified dividends (Box 1b) Total capital gain distributions (Box 2a):  Unrecaptured section 1250 gain (Box 2b) Section 1202 gain (Box 2c) Collectibles (28%) gain (Box 2d) Nontaxable distributions (Box 3)  Tax-exempt interest: Total municipal bonds In-state municipal bonds In-state municipal bonds Ordinary dividends Qualified dividends Capital gain distributions  Ordinary dividends Qualified dividends Capital gain distributions							
ABP adjustment Foreign: 1=interest in or authority over foreign account Name of foreign country 1=grantor/transferor or received distribution from foreign trust Post 8/7/86 private activity bond interest (included above) (6251)  DIVIDEND INCOME (Form 1099-DIV)  Total ordinary dividends (Box 1a):  Qualified dividends (Box 1b) Total capital gain distributions (Box 2a):  Unrecaptured section 1250 gain (Box 2b) Section 1202 gain (Box 2c) Collectibles (28%) gain (Box 2d) Nontaxable distributions (Box 3)  Tax-exempt interest: Total municipal bonds In-state municipal bonds Nominee distributions: Ordinary dividends Qualified dividends Qualified dividends Capital gain distributions	ABP adjustment.  Foreign:  1-interest in or authority over foreign account Name of foreign country  1-grantor/transferor or received distribution from foreign trust Post 8/7/86 private activity bond interest (included above) (6251)  DIVIDEND INCOME (Form 1099-DIV)  Total ordinary dividends (Box 1a):  Qualified dividends (Box 1b).  Total capital gain distributions (Box 2a):  Unrecaptured section 1250 gain (Box 2b).  Section 1202 gain (Box 2c).  Collectibles (28%) gain (Box 2d).  Nontaxable distributions (Box 3).  Tax-exempt interest:  Total municipal bonds In-state municipal bonds In-state municipal bonds Ordinary dividends.  Qualified dividends.  Qualified dividends.  Capital gain distributions.							
Foreign: 1=interest in or authority over foreign account Name of foreign country 1=grantor/transferor or received distribution from foreign trust Post 8/7/86 private activity bond interest (included above) (6251)  DIVIDEND INCOME (Form 1099-DIV)  Total ordinary dividends (Box 1a):  Qualified dividends (Box 1b)  Total capital gain distributions (Box 2a):  Unrecaptured section 1250 gain (Box 2b) Section 1202 gain (Box 2c) Collectibles (28%) gain (Box 2d) Nontaxable distributions (Box 3)  Tax-exempt interest: Total municipal bonds In-state municipal bonds Nominee distributions: Ordinary dividends Qualified dividends Qualified dividends Capital gain distributions	Foreign: 1=interest in or authority over foreign account Name of foreign country. 1=grantor/transferor or received distribution from foreign trust Post 8/7/86 private activity bond interest (included above) (6251)  DIVIDEND INCOME (Form 1099-DIV)  Total ordinary dividends (Box 1a):  Qualified dividends (Box 1b)  Total capital gain distributions (Box 2a):  Unrecaptured section 1250 gain (Box 2b)  Section 1202 gain (Box 2c)  Collectibles (28%) gain (Box 2d)  Nontaxable distributions (Box 3)  Tax-exempt interest: Total municipal bonds In-state municipal bonds In-state municipal bonds Ordinary dividends Qualified dividends Qualified dividends Capital gain distributions		•		<u></u>			
1=interest in or authority over foreign account Name of foreign country  1=grantor/transferor or received distribution from foreign trust Post 8/7/86 private activity bond interest (included above) (6251)  DIVIDEND INCOME (Form 1099-DIV)  Total ordinary dividends (Box 1a):  Qualified dividends (Box 1b)  Total capital gain distributions (Box 2a):  Unrecaptured section 1250 gain (Box 2b)  Section 1202 gain (Box 2c)  Collectibles (28%) gain (Box 2d)  Nontaxable distributions (Box 3)  Tax-exempt interest:  Total municipal bonds In-state municipal bonds Nominee distributions:  Ordinary dividends Qualified dividends Capital gain distributions	1=interest in or authority over foreign account Name of foreign country. 1=grantor/transferor or received distribution from foreign trust Post 8/7/86 private activity bond interest (included above) (6251)  DIVIDEND INCOME (Form 1099-DIV)  Total ordinary dividends (Box 1a):  Qualified dividends (Box 1b).  Total capital gain distributions (Box 2a):  Unrecaptured section 1250 gain (Box 2b).  Section 1202 gain (Box 2c).  Collectibles (28%) gain (Box 2d).  Nontaxable distributions (Box 3).  Tax-exempt interest:  Total municipal bonds In-state municipal bonds Nominee distributions:  Ordinary dividends Qualified dividends Capital gain distributions							
Name of foreign country  1=grantor/transferor or received distribution from foreign trust  Post 8/7/86 private activity bond interest (included above) (6251)  DIVIDEND INCOME (Form 1099-DIV)  Total ordinary dividends (Box 1a):  Qualified dividends (Box 1b)  Total capital gain distributions (Box 2a):  Unrecaptured section 1250 gain (Box 2b)  Section 1202 gain (Box 2c)  Collectibles (28%) gain (Box 2d)  Nontaxable distributions (Box 3)  Tax-exempt interest:  Total municipal bonds In-state municipal bonds Ordinary dividends Qualified dividends Capital gain distributions	Name of foreign country 1=grantor/transferor or received distribution from foreign trust Post 8/7/86 private activity bond interest (included above) (6251)  DIVIDEND INCOME (Form 1099-DIV)  Total ordinary dividends (Box 1a):  Qualified dividends (Box 1b)  Total capital gain distributions (Box 2a):  Unrecaptured section 1250 gain (Box 2b)  Section 1202 gain (Box 2c)  Collectibles (28%) gain (Box 2d)  Nontaxable distributions (Box 3)  Tax-exempt interest:  Total municipal bonds In-state municipal bonds Nominee distributions:  Ordinary dividends Qualified dividends Capital gain distributions	_		authority ovo	r foreign account			
1=grantor/transferor or received distribution from foreign trust Post 8/7/86 private activity bond interest (included above) (6251)  DIVIDEND INCOME (Form 1099-DIV)  Total ordinary dividends (Box 1a):  Qualified dividends (Box 1b).  Total capital gain distributions (Box 2a):  Unrecaptured section 1250 gain (Box 2b).  Section 1202 gain (Box 2c).  Collectibles (28%) gain (Box 2d).  Nontaxable distributions (Box 3).  Tax-exempt interest:  Total municipal bonds. In-state municipal bonds. Ordinary dividends. Qualified dividends.  Qualified dividends. Capital gain distributions.	1=grantor/transferor or received distribution from foreign trust Post 8/7/86 private activity bond interest (included above) (6251)  DIVIDEND INCOME (Form 1099-DIV)  Total ordinary dividends (Box 1a):  Qualified dividends (Box 1b).  Total capital gain distributions (Box 2a):  Unrecaptured section 1250 gain (Box 2b).  Section 1202 gain (Box 2c).  Collectibles (28%) gain (Box 2d).  Nontaxable distributions (Box 3).  Tax-exempt interest:  Total municipal bonds. In-state municipal bonds. Ordinary dividends. Qualified dividends. Qualified dividends. Capital gain distributions.							
Post 8/7/86 private activity bond interest (included above) (6251)  DIVIDEND INCOME (Form 1099-DIV)  Total ordinary dividends (Box 1a):  Qualified dividends (Box 1b)  Total capital gain distributions (Box 2a):  Unrecaptured section 1250 gain (Box 2b)  Section 1202 gain (Box 2c)  Collectibles (28%) gain (Box 2d)  Nontaxable distributions (Box 3)  Tax-exempt interest:  Total municipal bonds In-state municipal bonds Ordinary dividends Oualified dividends Oualified dividends Capital gain distributions	Post 8/7/86 private activity bond interest (included above) (6251)  DIVIDEND INCOME (Form 1099-DIV)  Total ordinary dividends (Box 1a):  Qualified dividends (Box 1b)  Total capital gain distributions (Box 2a):  Unrecaptured section 1250 gain (Box 2b)  Section 1202 gain (Box 2c)  Collectibles (28%) gain (Box 2d)  Nontaxable distributions (Box 3)  Tax-exempt interest:  Total municipal bonds In-state municipal bonds Undirect dividends Ordinary dividends Qualified dividends Qualified dividends Capital gain distributions							
DIVIDEND INCOME (Form 1099-DIV)  Total ordinary dividends (Box 1a):  Qualified dividends (Box 1b).  Total capital gain distributions (Box 2a):  Unrecaptured section 1250 gain (Box 2b).  Section 1202 gain (Box 2c).  Collectibles (28%) gain (Box 2d).  Nontaxable distributions (Box 3).  Tax-exempt interest:  Total municipal bonds.  In-state municipal bonds.  Nominee distributions:  Ordinary dividends.  Qualified dividends.  Capital gain distributions.	DIVIDEND INCOME (Form 1099-DIV)  Total ordinary dividends (Box 1a):  Qualified dividends (Box 1b).  Total capital gain distributions (Box 2a):  Unrecaptured section 1250 gain (Box 2b)  Section 1202 gain (Box 2c).  Collectibles (28%) gain (Box 2d).  Nontaxable distributions (Box 3).  Tax-exempt interest:  Total municipal bonds.  In-state municipal bonds.  In-state municipal bonds.  Ordinary dividends.  Qualified dividends.  Capital gain distributions.		-		_			
Total ordinary dividends (Box 1a):  Qualified dividends (Box 1b).  Total capital gain distributions (Box 2a):  Unrecaptured section 1250 gain (Box 2b).  Section 1202 gain (Box 2c).  Collectibles (28%) gain (Box 2d).  Nontaxable distributions (Box 3).  Tax-exempt interest:  Total municipal bonds.  In-state municipal bonds.  In-state municipal bonds.  Ordinary dividends.  Oualified dividends.  Capital gain distributions.	Total ordinary dividends (Box 1a):  Qualified dividends (Box 1b)  Total capital gain distributions (Box 2a):  Unrecaptured section 1250 gain (Box 2b)  Section 1202 gain (Box 2c)  Collectibles (28%) gain (Box 2d)  Nontaxable distributions (Box 3)  Tax-exempt interest:  Total municipal bonds In-state municipal bonds In-state municipal bonds Cordinary dividends Qualified dividends Capital gain distributions							
Qualified dividends (Box 1b) .  Total capital gain distributions (Box 2a):  Unrecaptured section 1250 gain (Box 2b) .  Section 1202 gain (Box 2c) .  Collectibles (28%) gain (Box 2d) .  Nontaxable distributions (Box 3) .  Tax-exempt interest:  Total municipal bonds .  In-state municipal bonds .  Nominee distributions:  Ordinary dividends .  Qualified dividends .  Capital gain distributions .	Qualified dividends (Box 1b)  Total capital gain distributions (Box 2a):  Unrecaptured section 1250 gain (Box 2b)  Section 1202 gain (Box 2c)  Collectibles (28%) gain (Box 2d)  Nontaxable distributions (Box 3)  Tax-exempt interest:  Total municipal bonds  In-state municipal bonds  Nominee distributions:  Ordinary dividends  Qualified dividends  Capital gain distributions	DIV	IDEND IN	COME (F	Form 1099-DIV)			
Total capital gain distributions (Box 2a):  Unrecaptured section 1250 gain (Box 2b)  Section 1202 gain (Box 2c)  Collectibles (28%) gain (Box 2d)  Nontaxable distributions (Box 3)  Tax-exempt interest:  Total municipal bonds  In-state municipal bonds  In-state municipal bonds  Ordinary dividends  Qualified dividends  Capital gain distributions	Total capital gain distributions (Box 2a):  Unrecaptured section 1250 gain (Box 2b)  Section 1202 gain (Box 2c)  Collectibles (28%) gain (Box 2d)  Nontaxable distributions (Box 3)  Tax-exempt interest:  Total municipal bonds  In-state municipal bonds  In-state municipal bonds  Ordinary dividends  Qualified dividends  Capital gain distributions	Total	ordinary divide	ends (Box 1a)	:			
Total capital gain distributions (Box 2a):  Unrecaptured section 1250 gain (Box 2b)  Section 1202 gain (Box 2c)  Collectibles (28%) gain (Box 2d)  Nontaxable distributions (Box 3)  Tax-exempt interest:  Total municipal bonds  In-state municipal bonds  In-state municipal bonds  Ordinary dividends  Qualified dividends  Capital gain distributions	Total capital gain distributions (Box 2a):  Unrecaptured section 1250 gain (Box 2b)  Section 1202 gain (Box 2c)  Collectibles (28%) gain (Box 2d)  Nontaxable distributions (Box 3)  Tax-exempt interest:  Total municipal bonds  In-state municipal bonds  In-state municipal bonds  Ordinary dividends  Qualified dividends  Capital gain distributions							
Total capital gain distributions (Box 2a):  Unrecaptured section 1250 gain (Box 2b)  Section 1202 gain (Box 2c)  Collectibles (28%) gain (Box 2d)  Nontaxable distributions (Box 3)  Tax-exempt interest:  Total municipal bonds  In-state municipal bonds  In-state municipal bonds  Ordinary dividends  Qualified dividends  Capital gain distributions	Total capital gain distributions (Box 2a):  Unrecaptured section 1250 gain (Box 2b)  Section 1202 gain (Box 2c)  Collectibles (28%) gain (Box 2d)  Nontaxable distributions (Box 3)  Tax-exempt interest:  Total municipal bonds  In-state municipal bonds  In-state municipal bonds  Ordinary dividends  Qualified dividends  Capital gain distributions	Oualif	fied dividends	(Rov 1h)				
Unrecaptured section 1250 gain (Box 2b)  Section 1202 gain (Box 2c)  Collectibles (28%) gain (Box 2d)  Nontaxable distributions (Box 3)  Tax-exempt interest:  Total municipal bonds  In-state municipal bonds  Ordinary dividends  Qualified dividends  Capital gain distributions	Unrecaptured section 1250 gain (Box 2b)  Section 1202 gain (Box 2c)  Collectibles (28%) gain (Box 2d)  Nontaxable distributions (Box 3)  Tax-exempt interest:  Total municipal bonds  In-state municipal bonds  Ordinary dividends  Qualified dividends  Capital gain distributions							
Section 1202 gain (Box 2c)  Collectibles (28%) gain (Box 2d)  Nontaxable distributions (Box 3)  Tax-exempt interest:  Total municipal bonds  In-state municipal bonds  Nominee distributions:  Ordinary dividends  Qualified dividends  Capital gain distributions	Section 1202 gain (Box 2c)  Collectibles (28%) gain (Box 2d)  Nontaxable distributions (Box 3)  Tax-exempt interest:  Total municipal bonds  In-state municipal bonds  Nominee distributions:  Ordinary dividends  Qualified dividends  Capital gain distributions	Total	capital galli di	Stributions (D	ox 2a).			
Section 1202 gain (Box 2c)  Collectibles (28%) gain (Box 2d)  Nontaxable distributions (Box 3)  Tax-exempt interest:  Total municipal bonds  In-state municipal bonds  Nominee distributions:  Ordinary dividends  Qualified dividends  Capital gain distributions	Section 1202 gain (Box 2c)  Collectibles (28%) gain (Box 2d)  Nontaxable distributions (Box 3)  Tax-exempt interest:  Total municipal bonds  In-state municipal bonds  Nominee distributions:  Ordinary dividends  Qualified dividends  Capital gain distributions							
Section 1202 gain (Box 2c)  Collectibles (28%) gain (Box 2d)  Nontaxable distributions (Box 3)  Tax-exempt interest:  Total municipal bonds  In-state municipal bonds  Nominee distributions:  Ordinary dividends  Qualified dividends  Capital gain distributions	Section 1202 gain (Box 2c)  Collectibles (28%) gain (Box 2d)  Nontaxable distributions (Box 3)  Tax-exempt interest:  Total municipal bonds  In-state municipal bonds  Nominee distributions:  Ordinary dividends  Qualified dividends  Capital gain distributions	Unrec	antured section	n 1250 gain (	(Box 2h)			
Collectibles (28%) gain (Box 2d)  Nontaxable distributions (Box 3)  Tax-exempt interest:  Total municipal bonds  In-state municipal bonds  Nominee distributions:  Ordinary dividends  Qualified dividends  Capital gain distributions	Collectibles (28%) gain (Box 2d)  Nontaxable distributions (Box 3)  Tax-exempt interest:  Total municipal bonds  In-state municipal bonds  Nominee distributions:  Ordinary dividends  Qualified dividends  Capital gain distributions		-	=	<del></del>			
Nontaxable distributions (Box 3)  Tax-exempt interest:  Total municipal bonds  In-state municipal bonds  Nominee distributions:  Ordinary dividends  Qualified dividends  Capital gain distributions	Nontaxable distributions (Box 3)  Tax-exempt interest:  Total municipal bonds  In-state municipal bonds  Nominee distributions:  Ordinary dividends  Qualified dividends  Capital gain distributions		=		<del></del>			
Tax-exempt interest:  Total municipal bonds  In-state municipal bonds  Nominee distributions:  Ordinary dividends  Qualified dividends  Capital gain distributions	Tax-exempt interest:  Total municipal bonds  In-state municipal bonds  Nominee distributions:  Ordinary dividends  Qualified dividends  Capital gain distributions		_		<del></del>			
Total municipal bonds In-state municipal bonds Nominee distributions: Ordinary dividends Qualified dividends Capital gain distributions	Total municipal bonds In-state municipal bonds Nominee distributions: Ordinary dividends Qualified dividends Capital gain distributions							
In-state municipal bonds  Nominee distributions:  Ordinary dividends  Qualified dividends  Capital gain distributions	In-state municipal bonds  Nominee distributions:  Ordinary dividends  Qualified dividends  Capital gain distributions		•					
Nominee distributions:  Ordinary dividends  Qualified dividends  Capital gain distributions	Nominee distributions:  Ordinary dividends  Qualified dividends  Capital gain distributions							
Ordinary dividends	Ordinary dividends		•				l	
Qualified dividends       Capital gain distributions	Qualified dividends       Capital gain distributions							
Capital gain distributions	Capital gain distributions		•		<b>⊢</b>			
		30/1	. 1				l	
								4

**ORGANIZER** Report of Foreign Bank and Financial Accounts US 1040 82.1 2022 Please enter all pertinent 2022 amounts. Last year's amounts are provided for your reference. GENERAL INFORMATION 2022 Amount 2021 Amount Canadian province or Mexican state ...... Other type of filer..... Foreign identification: Taxpayer: 1=passport, 2=foreign TIN Other type of identification ..... Country of issue ..... Spouse: 1=passport, 2=foreign TIN ..... Other type of identification ..... Country of issue Taxpayer: Title.

Spouse:

Page 47

					rage in
2022	1040	US	Report of Foreign Bank & Fin. Accts.	No.	82.1 p2

					-
Please enter all	pertinent 2022 amounts.	Last vear's	amounts are i	provided for v	vour reference
. ioaoo oiitoi aii	por timorit bobb arrival	=act you. c	arrio arrio aro p	0. 0 t.aoa .o.	,

INFORMATION ON FINANCIAL ACCOUNTS	2022 Amount	2021 Amount
1=spouse.		
Type of account: 1=bank account, 2=securities account, or specify		
Maximum value of account (-1 if unknown)		
Financial institution:		
Name of institution (Line 1) (mandatory)		
Name of institution (Line 2)		
Mailing address.		
Account number		
City		
State		
ZIP/postal code		
Country (if not US)		
Accounts owned jointly:		
Number of joint owners (Mandatory for Part III accounts) (-1 if joint owner is joint filer)		
Principal joint owner:		
Taxpayer identification number, if not joint filer		
TIN type: 1=EIN, 2=SSN/ITIN, 3=foreign, 4=unknown		
Last name.		
First name.		
Middle initial		
Address.		
City		
State.		
ZIP/postal code		
Country (if not US)		
Accounts where filer has no financial interest:		
Last name or org. name (mandatory)		
First name		
Middle initial		
Taxpayer identification number		
TIN type: 1=EIN, 2=SSN/ITIN, 3=foreign, 4=unknown.		
Address		
City		
State		
ZIP/postal code		
Country (if not US)		
Filer's title.		

					,
2022	1040	US	Foreign Reporting (8938)	No.	82.2 <sub>p2</sub>

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

### FOREIGN DEPOSIT AND CUSTODIAL ACCOUNTS (Part I)

	2022 Amount	2021 Amount
Description of asset		
Type of account: 1=deposit, 2=custodial		
Use financial institution information from Form 114		
Financial institution information (if not filing Form 114):		
Maximum value of account during year		
Name of institution		
Account number (mandatory for part I)		
Mailing address of institution		
City of institution		
State/province of institution		
Postal code of institution		
Country of institution		
1=account opened during year		
1=account closed during year		
1=account jointly owned with spouse		
1=no tax item in Part III with respect to this account		
1=used foreign currency exchange rate to convert value to US dollars		
Foreign currency in which account is maintained		
Foreign currency exchange rate (xxxx.xxxx)		
Source of exchange rate		
OTHER FOREIGN ASSETS (Part II)		
Date asset acquired during year (m/d/y)		
Date asset disposed of during year (m/d/y)		
1=jointly owned with spouse		
1=no tax item in Part III with respect to this asset		
Maximum value of asset during year		
1=used foreign currency exchange rate to convert value to US dollars		
Foreign currency in which asset is denominated  Foreign currency exchange rate (xxxx.xxxx)		
Source of exchange rate		1
Foreign entity information (complete if stock or interest):		
Name of entity		
Type of entity		
Mailing address of entity		
City of entity		
State/province of entity		
Postal code of entity		
Country of entity		
Country of Criticy		
-		
1		
Type of E	ntity	
1 = Partne		
2 = Corpor 3 = Trust	ation	
4 = Estate		

Page 19

Foreign Reporting (8938) (continued) US 2022 1040 No. 82.2 p2 Please enter all pertinent 2022 amounts. Last year's amounts are provided for your reference. OTHER FOREIGN ASSETS (Part II) (continued) Issuer or counterparty (#1): Name..... 1=issuer, 2=counterparty ..... Type of issuer or counterparty (see table 2) Issuer or counterparty: 1=US person, 2=foreign person Mailing address ..... City..... State/province ..... Postal code ..... Issuer or counterparty (#2): 1=issuer, 2=counterparty ..... Type of issuer or counterparty (see table 2) Issuer or counterparty: 1=US person, 2=foreign person Mailing address ..... City State/province ..... Issuer or counterparty (#3): Name 1=issuer, 2=counterparty ..... Type of issuer or counterparty (see table 2) Issuer or counterparty: 1=US person, 2=foreign person Mailing address ..... City..... State/province ..... Country Issuer or counterparty (#4): 1=issuer, 2=counterparty ..... Type of issuer or counterparty (see table 2) Issuer or counterparty: 1=US person, 2=foreign person Mailing address ..... State/province ..... Postal code ..... Country 2 Type of Issuer or Counterparty 1 = Individual Partnership 5 = Estate

ORGANIZER

ORGANIZER					Page 51
2022	1040	US	Client Information		1
	Wertz	& Compa	anv LLP	Tax Return Appointment	

5450 Trabuco Road

Irvine CA 92620 Telephone number: (949) 756-5000 Fax number: (949) 756-1618

E-mail address:

Date: Time: Location:

This tax organizer will assist you in gathering information necessary for the preparation of your 2022 tax return. Please add, change, or delete information as appropriate.

#### **CLIENT INFORMATION**

Filing status (table)
1=married filing separate and lived with spouse
Year spouse died, if qualifying surviving spouse (2020 or 2021)
First name and initial
Last name
Title/suffix
Social security number
Occupation
Date of birth (m/d/y)
Date of death (m/d/y)
1=blind
First name and initial
Last name
Title/suffix
Social security number
Occupation
Date of birth (m/d/y)
Date of death (m/d/y)
1=blind
In care of
Street address
Apartment number
City
State
ZIP code
Region
Postal code
Country

#### Filing Status

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

MOANIZER				<u>raye</u> .	<u>,                                    </u>
2022	1040	US/CA	Client Information (continued)	1 n2	

Please add, change or delete information for 2022.

CI	IEN	UT.	INIE		// /\ T	NOIT
١.,	161	v i	HVE	LJRN	/I A	111 7131

	Home phone	
	Work phone	
Taxpayer Contact	Work extension	
Information	Daytime phone (table)	
	Mobile phone	
	Fax number	
	E-mail address	
	Home phone	
	Work phone	
Spouse	Work extension	
Contact Information	Daytime phone (table)	
IIIIOITIIatioii	Mobile phone	
	Fax number	
	E-mail address	
	Driver's license no	
Taxpayer	Driver's license state	
Authentication	Issue date (m/d/y)	
	Expiration date (m/d/y)	
	Theft protection PIN	
	Driver's license no	
C	Driver's license state	
Spouse Authentication	Issue date (m/d/y)	
	Expiration date (m/d/y)	
	Theft protection PIN	
	Theft protection PIN	
0.4.01.1	1=PMB no. in address	
CA State Information	NOTE: If the taxpayer's mailing addre	s includes a private mail box number (PMB), indicate this er in the "Apartment Number" field in the Address area of

## **Daytime Phone**

- 1 = Work 2 = Home 3 = Mobile

#### **RDP Filing Status**

- 1 = Not applicable 2 = Joint 3 = Separate

US Dependents 2022 1040

# Please add, change or delete information for 2022.

# **DEPENDENTS**

First name.	Dependent	Dependent	
Last name			Type of Dependent
Title/suffix			
Date of birth (m/d/y)			1 = Child living w/taxpayer
Date of death			2 = Child not living w/taxpayer 3 = Dependent other than child
Date of adoption			4 = Head of household or
Social security number			qualifying surviving spouse (QSS) only.
Relationship			not a dependent
Months lived at home			5 = Earned income credit only, not a dependent
Type of dependent (see table)			not a dependent
Earned income credit (see table)			Earned Income Credit
			Larried income credit
Claimed by: 1=taxpayer, 2=spouse			1 = When applicable (default)
IRS theft protection PIN	Danasalasak	Dan and dant	2 = Student age 19 to 23
E'ast a second	Dependent	Dependent	3 = Disabled 4 = Force
First name			5 = Suppress
Last name			
Title/suffix			
Date of birth (m/d/y)			NOTE: If you claim the earned
Date of death			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 typically in the form of:
Relationship			School records or statement
Months lived at home			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			<ul><li>5. Child care provider records</li><li>6. Placement agency statement</li></ul>
1	Dependent	Dependent	7. Social service records or
First name	•	·	statement 8. Place of worship statement
Last name			Indian tribe office statement
Title/suffix			10. Employer statement
Date of birth (m/d/y)			
Date of death			
Date of adoption.			NOTE: If your child is disabled,
Social security number			please provide one of the fol- lowing forms of proof of disa-
Relationship.			bility:
Months lived at home			1. Doctor statement
			2. Other health care provider
Type of dependent (see table)			statement 3. Social services agency or
Earned income credit (see table)			program statement
Claimed by: 1=taxpayer, 2=spouse			

2

Please enter all pertinent 2022 information.  DIRECT DEPOSIT / ELECTRONIC PAYMENT (3)  1=direct deposit of federal tax refund into bank account	Type of Type of Account Invest (Table 1) (Table
DIRECT DEPOSIT / ELECTRONIC PAYMENT (3)  1-edirect deposit of federal tax refund into bank account 1-eelectronic payment of balance due 1-electronic payment of setimated tax 1-edirect deposit CA refund to one account, 2-split deposit between two accounts 1-electronic payment of CA state tax balance due 1-electronic payment of CA estimated tax  BANK INFORMATION Name of Bank Percent to Deposit (xx.xx) Routing Number Account Number  2022 ESTIMATED TAX / 1040-ES (6)  Federal Amount Paid Date Paid T: Overpayment applied from 2021 1st quarter payment 2rd quarter payment 3rd quarter payment Additional Estimated	Account (Table 1) (Table
edirect deposit of federal tax refund into bank account =electronic payment of balance due =electronic payment of estimated tax =direct deposit CA refund to one account, 2=split deposit between two accounts =electronic payment of CA state tax balance due =electronic payment of CA estimated tax  BANK INFORMATION Name of Bank  Name of Bank  Percent to Deposit (xx.xx) Routing Number  Account Number  Percederal  Amount Paid  Date Paid  Text quarter payment Indiquarter payment Additional Estimated	Account (Table 1) (Table
edirect deposit of federal tax refund into bank account  electronic payment of balance due  electronic payment of estimated tax  direct deposit CA refund to one account, 2=split deposit between two accounts  electronic payment of CA state tax balance due  electronic payment of CA estimated tax  BANK INFORMATION Name of Bank  Percent to Deposit (xx.xxx) Routing Number  Account Number  2022 ESTIMATED TAX / 1040-ES (6)  Federal  Amount Paid  Date Paid  Telegrapment applied from 2021  st quarter payment and quarter payment Additional Estimated	Account (Table 1) (Table
Selectronic payment of balance due   Selectronic payment of estimated tax   Selectronic payment of estimated tax   Selectronic payment of CA state tax balance due   Selectronic payment of CA estimated tax   Selectronic payment of CA estimated   Selectronic payment of	Account (Table 1) (Table
1=electronic payment of estimated tax 1=direct deposit CA refund to one account, 2=split deposit between two accounts 1=electronic payment of CA state tax balance due 1=electronic payment of CA estimated tax  BANK INFORMATION Percent to Deposit (xx.xx) Routing Number Account Number  2022 ESTIMATED TAX / 1040-ES (6) Federal Amount Paid Date Paid Tax Overpayment applied from 2021 1st quarter payment 2nd quarter payment 3rd quarter payment 4th quarter payment 4th quarter payment Additional Estimated	Account (Table 1) (Table
1=direct deposit CA refund to one account, 2=split deposit between two accounts 1=electronic payment of CA state tax balance due 1=electronic payment of CA estimated tax  BANK INFORMATION Name of Bank Percent to Deposit (xx.xx) Routing Number Account Number  2022 ESTIMATED TAX / 1040-ES (6) Federal Overpayment applied from 2021 1st quarter payment 2nd quarter payment Additional Estimated	Account (Table 1) (Table
BANK INFORMATION Name of Bank  Percent to Deposit (xx.xx) Routing Number  Account Number  2022 ESTIMATED TAX / 1040-ES (6)  Federal Overpayment applied from 2021 1st quarter payment 2nd quarter payment Additional Estimated	Account (Table 1) (Table
BANK INFORMATION Name of Bank Percent to Deposit (xx.xx) Routing Number Account Number  2022 ESTIMATED TAX / 1040-ES (6) Federal Overpayment applied from 2021 Ist quarter payment 2nd quarter payment Additional Estimated	Account (Table 1) (Table
Name of Bank  Deposit (xx.xx) Routing Number  Account Number  2022 ESTIMATED TAX / 1040-ES (6)  Federal  Overpayment applied from 2021 1st quarter payment 2nd quarter payment 2nd quarter payment 4th quarter payment Additional Estimated	Account (Table 1) (Table
Name of Bank (xx.xx) Routing Number Account Number  2022 ESTIMATED TAX / 1040-ES (6)  Federal Amount Paid Date Paid TS  Overpayment applied from 2021  1st quarter payment 2011  2nd quarter payment 312  4th quarter payment 441  Additional Estimated	(Table 1) (Table
Federal     Amount Paid     Date Paid     Ts       Overpayment applied from 2021	
Federal Amount Paid Date Paid Ts Overpayment applied from 2021  1st quarter payment 2nd quarter payment 3nd quarter payment 4th quarter payment 4dditional Estimated	
Federal Amount Paid Date Paid Ts  Overpayment applied from 2021  1st quarter payment 2nd quarter payment 2nd quarter payment 3nd quarter payment 4nd quarter 4nd quart	
Federal Amount Paid Date Paid Ts  Overpayment applied from 2021  1st quarter payment 2nd quarter payment 2nd quarter payment 3rd quarter payment 4th quarter payment 4dditional Estimated	
Overpayment applied from 2021  1st quarter payment	
1st quarter payment	
2nd quarter payment	
Additional Estimated	
Additional Estimated  Additional Estimated	
Additional Estimated	
	_
rax Payments	
	_
Paid with extension	
Former spouse SSN if joint estimates	
	2022
State Amount Paid Date Paid To	S Voucher Amount
Overpayment applied from 2021	
2nd quarter payment	+
3rd quarter payment	
4th quarter payment	
Additional Estimated Tax Payments	_
	_
Paid with extension	
1 Type of Account 2 Type of Investment	
1 = Savings 1 = Checking or savings (default) 6 = Coverdell saving	s account (ESA)
2 = Checking 2 = Taxpayer's IRA (next year limits) 7 = Other 3 = Spouse's IRA (next year limits) 8 = Taxpayer's IRA (1 + Health savings account (HSA) 9 = Spouse's IRA (1 + Health savings account (HSA) 9 = Spouse's IRA (1 + Health savings account (HSA)	current year limits)
5 = Archer MSA	intent year littits)

**ORGANIZER** Direct Deposit & Estimates (Form 1040 ES) (cont.) US 1040 7.1 2022 Please enter all pertinent 2022 information. **APPLICATION OF 2022 OVERPAYMENT (7.1)** If you have an overpayment of 2022 taxes, do you want the excess refunded? or applied to 2023 estimate? Other (please explain): 2023 ESTIMATED TAX INFORMATION Do you expect your 2023 taxable income to be different from 2022? If "yes" explain any differences in income, deductions, dependents, etc.: Do you expect your 2023 withholding to be different from 2022? If "yes" explain any differences: 7.1 **ORGANIZER** 

Wages, Pensions, Gambling Winnings US/CA 10, 13.1, 13.2 1040 2022 Please enter all pertinent 2022 amounts & attach all W-2, W-2G and 1099-R forms. Last year's amounts are provided for your reference. WAGES, SALARIES, TIPS (10) Wages, Tips, Other 1=retirement Tax Withheld plan (Box 13) Social Name of Employer (Box c) Federal Medicare State SDI Compensation No Security (Box 17) (Box 14) 2021 (Box 2) (Box 6) 1=spouse (Box 1) (Box 4) Wages PENSIONS, IRA DISTRIBUTIONS (13.1) Distribution code #2 Tax Withheld Value of Taxable Gross Distribution code #1 all IRAs Distribution Name of Payer Amount Federal State 2021 at No 1=IRA/SEP/SIMPLE (Box 1) (Box 2a) (Box 4) (Box 14) 12/31/22 Distribution 1=spouse GAMBLING WINNINGS (W-2G) (13.2) Tax Withheld Gross Winnings Name of Payer 1=spouse 2021 (Box 1) Federal (Box 4) No. State (Box 15) Local (Box 17) Winnings **GAMBLING LOSSES & WINNINGS (NON W-2G)** (13.2)2022 Amount TS 2021 Amount Total gambling losses..... Winnings not reported on Form W-2G . . . . . . .

10, 13.1, 13.2

2022 1040 US Interest & Dividend Income 11, 12

Please enter all pertinent 2022 amounts & attach all 1099-INT, 1099-OID and 1099-DIV forms. Last year's amounts are provided for your reference.

# **INTEREST INCOME (11)**

	Name of Paver	1		Interest Income		Tax-Exem	pt Interest	Early Withdrawal	
No.	Name of Payer (also enter SSN & address for seller-financed mortgage)	1=taxpayer 2=spouse	Banks, S&Ls, C/Us, etc. (Box 1)	Seller- Financed Mtg. (Box 1)	U.S. Bonds, T-Bills (Box 3)	Total Municipal Bonds	In-state Municipal Bonds	Penalty (Box 2)	2021 Interest
	•		•		•				

# **DIVIDEND INCOME (12)**

		1_taypayo	_	Di	vidend Incor	me		Tax-Exem	pt Interest	Foreign	
No.	Name of Payer	2=spouse	Total Ordinary Dividends (Box 1a)	Qualified Dividends (Box 1b)	Total Capital Gain Distrib. (Box 2a)	SubSection 199A (Box 5)	U.S. Bonds (% or amt.)	Total Municipal Bonds	In-state Muni-bonds (% or amt.)	Foreign Tax Paid (Box 7)	2021 Dividends
	_										
		•	•								

2022 1040 US Miscellaneous Income 14.1

Please enter all pertinent 2022 amounts and attach all 1099-MISC, 1099-NEC, SSA-1099, and RRB-1099 forms. Last year's amounts are provided for your reference.

MISCELLANEOUS INCOME	2022 Am	ount	2021 Amount		
	Taxpayer	Spouse	Taxpayer	Spouse	
Social security benefits (SSA-1099, box 5)					
Medicare premiums paid (SSA-1099)					
1=treat Medicare premiums paid as SE health ins					
Tier 1 RR retirement benefits (RRB-1099, box 5)					
1=lump-sum election for SS benefits					
Alimony received					
Taxable scholarships and fellowships					
Jury duty pay					
Household employee income not on W-2					
Excess minister's allowance					
Alaska permanent fund dividends					
Income from rental of personal property					
Income subject to S/E tax:	•				
Other income (1099-MISC, box 3, 8, 1099-NEC, box 1)					
_					
TAX WITHHELD (not entered elsewhere)					
Federal income tax withheld					
State income tax withheld					
Local income tax withheld					
Local income tax withincia					

				1490 01
2022	1040	US	State & Local Tax Refunds / Unemployment Compensation	14.2

Please add, change or delete 2022 information as appropriate. Be sure to attach all 1099-G forms.

# STATE AND LOCAL TAX REFUNDS / UNEMPLOYMENT COMPENSATION (Form 1099-G)

OINTIVIPLO	OTIVIENT COMPENSATION (FOITH 1099-G)	099-G Amount
	Name of payer	
	1=spouse	
	Unemployment compensation:	
	Total received (Box 1)	
	2022 Overpayment repaid	
	State and local refunds:	
	State and local income tax refund, credit or offsets (Box 2).	
	1=city or local income tax refund	
	Tax year for box 2 if not 2021 (Box 3)	
	Federal income tax withheld (Box 4)	
No.	RTAA payments (Box 5)	
	Taxable grants:	
	Federal taxable amount (Box 6)	
	State taxable amount, if different	
	Farm amounts:	
	Agriculture payments (Box 7)	
	1=agriculture payments are from conservation reserve program	
	Market gain (Box 9)	
	Number of farm	
	1=box 2 is trade or business income (Box 8)	
	State income tax withheld (Box 11)	
	State income tax withheld (Box 11)	
	Name of payer	
	1=spouse.	
	Unemployment compensation:	
	Total received (Box 1)	
	2022 Overpayment repaid	
	State and local income tax refund, credit or offsets (Box 2) .	
	1=city or local income tax refund	
	Tax year for box 2 if not 2021 (Box 3)	
	Fodoral income toy withhold (Doy 1)	
No.	Federal income tax withheld (Box 4)	
No.	RTAA payments (Box 5)	
No.	RTAA payments (Box 5)	
No.	RTAA payments (Box 5)  Taxable grants:  Federal taxable amount (Box 6)	
No.	RTAA payments (Box 5)  Taxable grants:  Federal taxable amount (Box 6)  State taxable amount, if different	
No.	RTAA payments (Box 5) Taxable grants: Federal taxable amount (Box 6) State taxable amount, if different Farm amounts:	
No.	RTAA payments (Box 5)  Taxable grants:  Federal taxable amount (Box 6)  State taxable amount, if different  Farm amounts:  Agriculture payments (Box 7)	
No.	RTAA payments (Box 5)  Taxable grants:  Federal taxable amount (Box 6)  State taxable amount, if different  Farm amounts:  Agriculture payments (Box 7)  1=agriculture payments are from conservation reserve program	
No.	RTAA payments (Box 5)  Taxable grants:  Federal taxable amount (Box 6)  State taxable amount, if different  Farm amounts:  Agriculture payments (Box 7)  1=agriculture payments are from conservation reserve program  Market gain (Box 9)	
No.	RTAA payments (Box 5) Taxable grants: Federal taxable amount (Box 6) State taxable amount, if different Farm amounts: Agriculture payments (Box 7) 1=agriculture payments are from conservation reserve program Market gain (Box 9) Number of farm	
No.	RTAA payments (Box 5)  Taxable grants:  Federal taxable amount (Box 6)  State taxable amount, if different  Farm amounts:  Agriculture payments (Box 7)  1=agriculture payments are from conservation reserve program  Market gain (Box 9)	

2022	1040	US	Education Distributions (ESA's and QTP's)	14.3

Please enter all pertinent 2022 amounts and attach all 1099-Q forms. Enter qualified education expenses below that are not entered elsewhere. Last year's amounts are provided for your reference.

ESA'S AN	D Q1P'S (Form 1099-Q)	2022 Amount	2021 Amount
	Name of payer		
	1=spouse		
	Qualified expenses:		
	Higher education (net of nontaxable benefits)		
	Elementary & secondary education (net of nontaxable benefits)		
	Form 1099-Q:		
	Gross distributions (Box 1)		
No.	Earnings (Box 2)		
	Basis (Box 3)		
	Rollover: 1=nontaxable, 2=taxable (Box 4)		
	Distribution type: 1=private 529, 2=state 529, 3=Coverdell ESA (Box 5)		
	ESA's only:		
	2022 contributions to this ESA		
	Value of this account at 12/31/22 (plus outstanding rollovers)		
1	Basis in this ESA as of 12/31/21		
	Nome of power		
	Name of payer		
	1=spouse.		
	Qualified expenses:		
	Higher education (net of nontaxable benefits)		
	Elementary & secondary education (net of nontaxable benefits).		
	Form 1099-Q:		
—	Gross distributions (Box 1)		
No.	Earnings (Box 2)		
	Basis (Box 3)		
	Rollover: 1=nontaxable, 2=taxable (Box 4)		
	Distribution type: 1=private 529, 2=state 529, 3=Coverdell ESA (Box 5)		
	ESA's only:		
	2022 contributions to this ESA		
	Value of this account at 12/31/22 (plus outstanding rollovers)		
	Basis in this ESA as of 12/31/21		
	Name of payer		
	1=spouse.		
	Qualified expenses:		
	Higher education (net of nontaxable benefits)		
	Elementary & secondary education (net of nontaxable benefits)		
	Form 1099-Q:		
	Gross distributions (Box 1)		
No.	Earnings (Box 2)		
	Basis (Box 3)		
	Rollover: 1=nontaxable, 2=taxable (Box 4)		
	Distribution type: 1=private 529, 2=state 529, 3=Coverdell ESA (Box 5)		
	ESA's only:		
	2022 contributions to this ESA		
	Value of this account at 12/31/22 (plus outstanding rollovers)		
	Basis in this ESA as of 12/31/21		

ORGANIZER		Page 61

2022 1040 US ABLE Distributions 14.4

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

ABLE DIST	RIBUTIONS / CONTRIBUTIONS	2022 Amount	2021 Amount
	Name of payer or issuer	2022 Amount	2021 Amount
	1=spouse.		
	Distributions (1099-QA):		
	Gross distributions (1)		
	Earnings (2)		
	Basis (3)		
No.			
140.	1=program to program transfer (4)		
	1=ABLE account terminated (5)		
	1=recipient is not the designated beneficiary (6)		
	Qualified disability expenses paid		
	Amount excluded from 10% tax		
	Excess contributions:		
	Excess contributions withdrawn by due date of return		
	Earnings on excess contributions		
	Name of payer or issuer		1
	1=spouse		
	Distributions (1099-QA):		
	Gross distributions (1)		
	Earnings (2)		
	Basis (3)		
No.	1=program to program transfer (4)		
	1=ABLE account terminated (5)		
	1=recipient is not the designated beneficiary (6)		
	Qualified disability expenses paid		
	Amount excluded from 10% tax		
	Excess contributions:		
	Excess contributions withdrawn by due date of return		
	Earnings on excess contributions		
	· · · · ·		<b>'</b>
	Name of payer or issuer		
	1=spouse		
	Distributions (1099-QA):		
	Gross distributions (1)		
	Earnings (2)		
	Basis (3)		
No.	1=program to program transfer (4)		
	1=ABLE account terminated (5)		
	1=recipient is not the designated beneficiary (6)		
	Qualified disability expenses paid		
	Amount excluded from 10% tax		
	Excess contributions:		
	Excess contributions withdrawn by due date of return		
	Earnings on excess contributions		

22	1040	US/CA	Business Income (Schedule	e C)	No.	16
	Please ent	ter all pertin	ent 2022 amounts. Last year's amounts a	are provided for you	r reference.	
GEN	NERAL IN	IFORMAT	TON			
Princip	pal business/p	orofession				
Princip	pal business o	code				
			Form 1040			
Busine	ess address, i	f different fron	n Form 1040			
-						
			040			
	•					
	•					
_	•					
	•					
0	accounting in					
Accou	inting method	: 1=cash, 2=a	ccrual			
	•		er cost/market, 3=other			
1=cha	inge of invent	ory method				
1=spo	use, 2=joint.					
1=first	t Schedule C t	filed for this bu	usiness			
		=	will you file all required Form(s) 1099: 1=yes, 2=no			
	=		tax			
			erial income producing factor			
			company			
_	=	=	commodities			
	B Form 3805'					
1=	eligible small	business				
Qı	ualified new b	usiness year:	1=1st, 2=2nd, 3=3rd			
Pr	inciple busine	ess code (SIC	1987)			
INC	OME			2022 Amount	2021 Amount	
Gross	receints or sa	ales (Form 109	99-MISC, box 7)	2022 Amount	2021 Amount	
	•	•				
	income:					
-						
COS	ST OF GO	ODS SO	LD			
Invent	tory at beginn	ing of the year				
Purcha	ases					
	•					
		ies				
Other	COSIS:					
-						
-						
Invent	tory at end of	the year				

ORGANIZER

US/CA Business Income (Schedule C) (cont.) 2022 1040 No.

16 p2

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

, ·		2021 Amount
Accounting	2022 Amount	2021 7 tillodik
Advertising		
Answering service.		
Bad debts from sales or service		
<del>-</del>		
Bank charges (not entered elegathers)		
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.  Tayon roal estate		
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%)		
Entertainment expenses in full		
Uniforms.		
Utilities		
Wages		
Other expenses:		
-		

16 <sub>p2</sub>

2022 1040 US Capital Gains & Losses (Schedule D)

If you sold any stocks, bonds, or other investment property in 2022, please list the pertinent information for each sale below or provide a spreadsheet file with this information. Be sure to attach all 1099-B forms and brokerage statements.

No.	Quantity	Description of Property (Box 1a)	Date Acquired (Box 1b)	Date Sold (Box 1c)	Sales Price (gross or net) (Box 1d)	Cost or Basis (Box 1e)	Blank=basis rep. to IRS, 1=nonrec. security (Box 3, 5)	Expenses of Sale (if gross sales price entered)	Federal Incom Tax Withheld (Box 4)
						_			
									17

17

JICO WILLEN				rage 05
2022	1040	US	Installment Sales (Form 6252)	17 <sub>p2</sub>

KIUR YE	AR INSTALLMENT SALE	2022 Amount	2021 Amoun
	Description of property		
	Date acquired (m/d/y)		
О.	Date sold (m/d/y)		
	Gross profit ratio (.xxxx)		
	Current year principal payments (-1 if none)		
	Description of property		
	Date acquired (m/d/y)		
lo.	Date sold (m/d/y)		
	Gross profit ratio (.xxxx)		
	Current year principal payments (-1 if none)		
	Description of property		
	Date acquired (m/d/y)		
lo.	Date sold (m/d/y)		
	Gross profit ratio (.xxxx)		
	Current year principal payments (-1 if none)		
	Description of property		
	Date acquired (m/d/y)		
lo.	Date sold (m/d/y)		
	Gross profit ratio (.xxxx)		
	Current year principal payments (-1 if none)		
	Description of property		
	Date acquired (m/d/y)		
No.	Date sold (m/d/y)		
,	Gross profit ratio (.xxxx)		
	Current year principal payments (-1 if none)		
	Description of property		
	Date acquired (m/d/y)		
lo.	Date sold (m/d/y)		
	Gross profit ratio (.xxxx)		
	Current year principal payments (-1 if none)		
			<del>.</del>
	Description of property		
_	Date acquired (m/d/y)		
No.	Date sold (m/d/y)		
	Gross profit ratio (.xxxx)		
	Current year principal payments (-1 if none)		

2022	1040	US	Sale of Home & Moving Expenses	17,	27

If you sold your home or moved in 2022, please complete the information below. For the sale of home, please provide Form 1099-S and closing statements from the purchase and sale of your home.

Description of property (Box 3) Date acquired (m/dy) Date acquired (m/dy) Date sold (m/dy) (Box 1) Sales price (Box 2)sale of home	Jales sold (m/d/y) (Box 1).  Jales price (Box 2).  Jales price (Bo		
Date acquired (m/dry) (Box 1)  Sales price (Box 2)  Sales (Sales (Sales)  Sales (Sales)  S	Date sout (midty) (Box 1)  Sales price (Box 2)  Issale of home  ome after May 6, 1997 & within 2 yrs. of current sale, enter date of sale (midty)  Issale due to knape in health, employment or unforeseen circumstances you either:  Issale due to knape in health remployment or unforeseen circumstances  Days used as main home - taxpayer  Days used as main home - taxpayer  Days property owned - taxpayer  Days proper	Jescription of property (Rox 3)	
able sold (m/d/y) (Box 1).  Solles price (Box 2). sound and used property as main home for at least 2 of 5 years before sale. sound and used property as main home for at least 2 of 5 years before sale. sound and used property as main home for at least 2 of 5 years before sale. sound and used property as main home for at least 2 of 5 years before sale. sound and used property as main home for at least 2 of 5 years before sale. sound and used property as main home for at least 2 of 5 years before sale. sound and used property as main home as not used as principal residence.	Date sold (m/d/y) (Box 1).  Sales price (Box 2).  Lesale of home.  Lebusiness use in year of sale.  Vumber of days after December 31, 2008 that home was not used as principal residence.  Adjusted Basis  Original cost.  Improvements:  Expenses of Sale (Commissions, advertising fees, legal fees, and loan charges paid by the seller)  For sale expenses of sale.  Reduced Exclusion  Please complete the following information if due to a change in health, place of employment, or unforeseen circumstances you either:  By Did not meet the ownership and use lests ", or b) Excluded gain on the sale of another home after May 6, 1997.  Lesale due to change in health, employment or unforeseen circumstances you either:  By Did not meet the ownership and use lests ", or b) Excluded gain on the sale of another home after May 6, 1997.  Lesale due to change in health, employment or unforeseen circumstances.  By Days used as main home - laxpayer  Days used as main home - laxpayer  Days used as main home - laxpayer  Days property owned - taxpayer  Days property owned - taxpayer  Days property owned - spouse  MOVING EXPENSES (27) (If you are a member of the Armed Forces and moved due to a permanent change in station)  Lespouse, 2-ploint  Lesting forces move due to permanent change of station  Wiles from old home to new work place.  Wiles from old home to new work place.  Wiles from old home to new work place.  Expenses for transportation and storage of household goods and personal effects  Capan and a deal.  Capan and a de		
Sales price (Box 2)	Sales price (Box 2)	· · · · · · · · · · · · · · · · · · ·	
issale of home	III-sake of home. III-sake of home. III-sake and used property as main home for at least 2 of 5 years before sale. III-strist-time homebuyer credit was previously taken on this home. III-strist-time homebuyer credit was previously taken on this home. III-strist-time homebuyer credit was previously taken on this home. III-strist-time homebuyer credit was previously taken on this home. III-strist-time homebuyer credit was previously taken on this home. III-strist-time homebuyer credit was previously taken on this home. III-strist-time the sale of another credit was previously taken on the sale of another home after May 6. 1997. III-strist-time the ownership and use tests 1, or b) Excluded gain on the sale of another home after May 6. 1997. III-strist-time the ownership and use tests 2, or b) Excluded gain on the sale of another home after May 6. 1997. III-strist-time the ownership and use tests 3, or b) Excluded gain on the sale of another home after May 6. 1997. III-strist-time the ownership and use tests 3, or b) Excluded gain on the sale of another home after May 6. 1997. III-strist-time the ownership and use tests 3, or b) Excluded gain on the sale of another home after May 6. 1997. III-strist-time the ownership and use tests 3, or b) Excluded gain on the sale of another home after May 6. 1997. III-strist-time the ownership and use tests 3, or b) Excluded gain on the sale of another home after May 6. 1997. III-strist-time the ownership and use tests 3, or b) Excluded gain on the sale of another home after May 6. 1997. III-strist-time the ownership and use tests 3, or b) Excluded gain on the sale of another home after May 6. 1997. III-strist-time the ownership and use tests 3, or b) Excluded gain on the sale of another home after May 6. 1997. III-strist-time after May 6	· · · · · · · · · · · · · · · · · · ·	
	owned and used property as main home for at least 2 of 5 years before sale	·	
-first-time homebuyer credit was previously taken on this home  -business use in year of sale	L=first-time homebuyer credit was previously taken on this home  -business use in year of sale  -wumber of days after December 31, 2008 that home was not used as principal residence	<b>├</b>	
Ebusiness use in year of sale	-business use in year of sale,		
Adjusted Basis  Driginal cost	Adjusted Basis Driginal cost. Improvements:  Adjusted basis Driginal cost. Improvements:  Expenses of Sale (Commissions, advertising fees, legal fees, and loan charges paid by the seller)  Expenses of Sale (Commissions, advertising fees, legal fees, and loan charges paid by the seller)  Fotal expenses of sale  Reduced Exclusion  Please complete the following information if due to a change in health, place of employment, or unforeseen circumstances you either:  1) Did not meet the ownership and use tests *, or b) Excluded gain on the sale of another home after May 6, 1997.  1 excl. gain from another home after May 6, 1997 & within 2 yrs, of current sale, enter date of sale (m/dy)  Issale due to change in health, employment or unforeseen circumstances  Jays used as main home - taxpayer  Jays used as main home - taxpayer  Jays property owned - taxpayer  Jays property owned - taxpayer  Jays property owned - spouse  MOVING EXPENSES (27) (If you are a member of the Armed Forces and moved due to a permanent change in station)  Issponse, 2-joint  Learmed forces move due to permanent change of station  Adjusted basis  Expenses for transportation and storage of household goods and personal effects  Lodging and fravel (excluding meals):  Lodging and travel (excluding automobile)  Parking fees and tolls.  Gas and oil.	· · · · · · · · · · · · · · · · · · ·	
Adjusted Basis  Driginal cost	Adjusted Basis  Driginal cost Improvements:  Adjusted basis  Expenses of Sale (Commissions, advertising fees, legal fees, and loan charges paid by the seller)  For all expenses of sale  Expenses of Sale (Commissions, advertising fees, legal fees, and loan charges paid by the seller)  For all expenses of sale  Reduced Exclusion  Please complete the following information if due to a change in health, place of employment, or unforeseen circumstances you either:  (a) Did not meet the ownership and use tests *, or by Excluded gain on the sale of another home after May 6, 1997.  It is sale due to change in health, employment or unforeseen circumstances  Jays used as main home - taxpayer  Jays used as main home - taxpayer  Jays property owned - taxpayer  Jays property owned - taxpayer  Jays property owned - spouse  MOVING EXPENSES (27) (If you are a member of the Armed Forces and moved due to a permanent change in station)  It is pouse, 2-joint  Jerspouse, 2-joint  Jerspouse, 2-joint  Jerspouse, 2-joint  Jerspouse and taxpayer of the Armed Forces and moved due to a permanent change in station)  Wiles from old home to new work place  Wiles from old home to new work place  Wiles from old home to old work place  Wiles from old home to old work place  Jerspouse, 2-joint  Jersp		
Adjusted basis.  Expenses of Sale (Commissions, advertising fees, legal fees, and loan charges paid by the seller)  Fotal expenses of sale.  Reduced Exclusion  Please complete the following information if due to a change in health, place of employment, or unforeseen circumstances you either:  1 ox.d. gain from another home after May 6, 1997 & within 2 yrs. of current sale, enter date of sale (m/d/y).  I sale due to change in health, employment or unforeseen circumstances obays used as main home - taxpayer  Days used as main home - spouse  Days property owned - taxpayer  Days property owned - spouse.  MOVING EXPENSES (27) (If you are a member of the Armed Forces and moved due to a permanent change in station)  I espouse, 2-joint.  I espouse, 2-joint.  I espouse, 2-joint.  I element forces move due to permanent change of station.  I diles from old home to new work place.  I diles from old home to new work place of household goods and personal effects.  Lodging and travel (excluding meals):  Lodging and travel (excluding automobile)  Parking fees and tolls.  Gas and oil.	Driginal cost mprovements:  Adjusted basis.  Expenses of Sale (Commissions, advertising fees, legal fees, and loan charges paid by the seller)  Fotal expenses of sale.  Reduced Exclusion  Please complete the following information if due to a change in health, place of employment, or unforeseen circumstances you either:  10 for of meet the ownership and use tests', or b) Excluded gain on the sale of another home after May 6, 1997.  11 exale due to change in health, employment or unforeseen circumstances vous either:  12 Days used as main home - taxpayer  13 Days used as main home - spouse  24 Days property owned - taxpayer  25 Days property owned - spouse.  MOVING EXPENSES (27) (If you are a member of the Armed Forces and moved due to a permanent change in station)  11 expouse, 2-joint  11 expouse, 2-joint  12 expenses for transportation and storage of household goods and personal effects  26 dign and travel (excluding automobile)  27 Parking fees and tolls.  28 Gas and oil.		
Adjusted basis.  Expenses of Sale (Commissions, advertising fees, legal fees, and loan charges paid by the seller)  Frequency of Sale (Commissions, advertising fees, legal fees, and loan charges paid by the seller)  Frequency of Sale (Commissions, advertising fees, legal fees, and loan charges paid by the seller)  Frequency of Sale (Commissions)  Frequency of S	Expenses of Sale (Commissions, advertising fees, legal fees, and loan charges paid by the seller)    Cotal expenses of Sale (Commissions, advertising fees, legal fees, and loan charges paid by the seller)	Adjusted Basis	
Adjusted basis.  Expenses of Sale (Commissions, advertising fees, legal fees, and loan charges paid by the seller)  Fotal expenses of sale (Commissions, advertising fees, legal fees, and loan charges paid by the seller)  Fotal expenses of sale (Commissions)  Please complete the following information if due to a change in health, place of employment, or unforeseen circumstances you either:  (a) Did not meet the ownership and use tests ', or b) Excluded gain on the sale of another home after May 6, 1997.  For excl. gain from another home after May 6, 1997 & within 2 yrs. of current sale, enter date of sale (m/d/y) (1997)  For excl. gain from another home after May 6, 1997, within 2 yrs. of current sale, enter date of sale (m/d/y) (1997)  For excl. gain from another home after May 6, 1997, within 2 yrs. of current sale, enter date of sale (m/d/y) (1997)  For excl. gain from eafter May 6, 1997, within 2 yrs. of current sale, enter date of sale (m/d/y) (1997)  For excl. gain from eafter May 6, 1997, within 2 yrs. of current sale, enter date of sale (m/d/y) (1997)  For excl. gain from eafter May 6, 1997, within 2 yrs. of current sale, enter date of sale (m/d/y) (1997)  For excl. gain from eafter May 6, 1997, within 2 yrs. of current sale, enter date of sale (m/d/y) (1997)  For excl. gain from eafter May 6, 1997, within 2 yrs. of current sale, enter date of sale (m/d/y) (1997)  For excl. gain from eafter May 6, 1997, within 2 yrs. of current sale, enter date of sale (m/d/y) (1997)  For excl. gain from eafter May 6, 1997, within 2 yrs. of current sale, enter date of sale (m/d/y) (1997)  For excl. gain from eafter May 6, 1997, within 2 yrs. of current sale, enter date of sale (m/d/y) (1997)  For excl. gain from eafter May 6, 1997, within 2 yrs. of current sale, enter date of sale (m/d/y) (1997)  For excl. gain from eafter May 6, 1997, within 2 yrs. of current sale, enter date of sale (m/d/y) (1997)  For excl. gain from eafter May 6, 1997, within 2 yrs. of current sale, enter date of sale (m/d/y) (1997)  For excl. gain f	Adjusted basis.  Expenses of Sale (Commissions, advertising fees, legal fees, and loan charges paid by the seller)  Fotal expenses of sale  Reduced Exclusion  Please complete the following information if due to a change in health, place of employment, or unforeseen circumstances you either:  a) Did not meet the ownership and use tests *, or b) Excluded gain on the sale of another home after May 6, 1997.  I esale due to change in health, employment or unforeseen circumstances  Days used as main home - taxpayer  Days used as main home - spouse  Days property owned - taxpayer  Days property owned - taxpayer  Days property owned - taxpayer  Days property owned - spouse  MOVING EXPENSES (27) (If you are a member of the Armed Forces and moved due to a permanent change in station)  I espouse, 2 = joint.  I earmed forces move due to permanent change of station  Miles from old home to new work place  Miles from old home to new work place  Miles from old home to old work place  Miles from old home to old work place  Jays used as main tavel (excluding meals):  Lodging and travel (excluding automobile)  Parking fees and tolls  Gas and oil.	Priginal cost	
Expenses of Sale (Commissions, advertising fees, legal fees, and loan charges paid by the seller)    Cotal expenses of sale   Cotal expenses of sale	Expenses of Sale (Commissions, advertising fees, legal fees, and loan charges paid by the seller)  Fotal expenses of sale.  Reduced Exclusion  Please complete the following information if due to a change in health, place of employment, or unforeseen circumstances you either: a) Did not meet the ownership and use tests *, or b) Excluded gain on the sale of another home after May 6, 1997.  If excl. gain from another home after May 6, 1997 & within 2 yrs. of current sale, enter date of sale (m/d/y).  I = sale due to change in health, employment or unforeseen circumstances  Days used as main home - taxpayer  Days used as main home - spouse  Days property owned - taxpayer  Days property owned - spouse  MOVING EXPENSES (27) (If you are a member of the Armed Forces and moved due to a permanent change in station)  I = spouse, 2 = joint.  I = larmed forces move due to permanent change of station  Wiles from old home to new work place  Wiles from old home to new work place  Wiles from old home to new work place  Expenses for transportation and storage of household goods and personal effects  Lodging and travel (excluding meals):  Lodging and travel (excluding automobile)  Parking fees and tolls  Gas and oil.	nprovements:	
Expenses of Sale (Commissions, advertising fees, legal fees, and loan charges paid by the seller)    Cotal expenses of sale   Cotal expenses of sale	Expenses of Sale (Commissions, advertising fees, legal fees, and loan charges paid by the seller)  Fotal expenses of sale.  Reduced Exclusion  Please complete the following information if due to a change in health, place of employment, or unforeseen circumstances you either: a) Did not meet the ownership and use tests *, or b) Excluded gain on the sale of another home after May 6, 1997.  If excl. gain from another home after May 6, 1997 & within 2 yrs. of current sale, enter date of sale (m/d/y).  I = sale due to change in health, employment or unforeseen circumstances  Days used as main home - taxpayer  Days used as main home - spouse  Days property owned - taxpayer  Days property owned - spouse  MOVING EXPENSES (27) (If you are a member of the Armed Forces and moved due to a permanent change in station)  I = spouse, 2 = joint.  I = larmed forces move due to permanent change of station  Wiles from old home to new work place  Wiles from old home to new work place  Wiles from old home to new work place  Expenses for transportation and storage of household goods and personal effects  Lodging and travel (excluding meals):  Lodging and travel (excluding automobile)  Parking fees and tolls  Gas and oil.		
Expenses of Sale (Commissions, advertising fees, legal fees, and loan charges paid by the seller)    Cotal expenses of sale   Cotal expenses of sale	Expenses of Sale (Commissions, advertising fees, legal fees, and loan charges paid by the seller)    Commissions		
Expenses of Sale (Commissions, advertising fees, legal fees, and loan charges paid by the seller)    Cotal expenses of sale   Cotal expenses of sale	Expenses of Sale (Commissions, advertising fees, legal fees, and loan charges paid by the seller)  Fotal expenses of sale.  Reduced Exclusion  Please complete the following information if due to a change in health, place of employment, or unforeseen circumstances you either:  a) Did not meet the ownership and use tests *, or b) Excluded gain on the sale of another home after May 6, 1997.  f excl. gain from another home after May 6, 1997 & within 2 yrs. of current sale, enter date of sale (m/d/y).		
Expenses of Sale (Commissions, advertising fees, legal fees, and loan charges paid by the seller)    Cotal expenses of sale   Cotal expenses of sale	Expenses of Sale (Commissions, advertising fees, legal fees, and loan charges paid by the seller)    Commissions		
Fotal expenses of sale  Reduced Exclusion  Please complete the following information if due to a change in health, place of employment, or unforeseen circumstances you either:  1) Did not meet the ownership and use tests *, or b) Excluded gain on the sale of another home after May 6, 1997.  1) Esale due to change in health, employment or unforeseen circumstances  2) Days used as main home - taxpayer  2) Days used as main home - taxpayer  2) Days property owned - taxpayer  2) Days property owned - spouse  3) Days property owned - spouse  4) Days property owned - spouse  5) Days property owned - spouse  6) Days property owned - spouse  7) Days property owned - spouse  8) Days property owned - spouse  9) Days property owned - spouse  9) Days property owned - spouse  9) Days property o	Fotal expenses of sale  Reduced Exclusion  Please complete the following information if due to a change in health, place of employment, or unforeseen circumstances you either:  a) Did not meet the ownership and use tests *, or b) Excluded gain on the sale of another home after May 6, 1997.  f excl. gain from another home after May 6, 1997 & within 2 yrs. of current sale, enter date of sale (m/d/y)	djusted basis	
Fotal expenses of sale  Reduced Exclusion  Please complete the following information if due to a change in health, place of employment, or unforeseen circumstances you either:  1) Did not meet the ownership and use tests *, or b) Excluded gain on the sale of another home after May 6, 1997.  1) Esale due to change in health, employment or unforeseen circumstances  2) Lays used as main home - taxpayer  2) Lays used as main home - taxpayer  2) Lays property owned - taxpayer  2) Lays property owned - spouse  3) Lays property owned - spouse  4) Lays property owned - spouse  5) Lays property owned - spouse  6) Lays property owned - spouse  7) Lays property owned - spouse  8) Lays property owned - spouse  9) Lays property owned - spouse  9) Lays property owned - spouse  9) Lays property o	Fotal expenses of sale  Reduced Exclusion  Please complete the following information if due to a change in health, place of employment, or unforeseen circumstances you either: a) Did not meet the ownership and use tests *, or b) Excluded gain on the sale of another home after May 6, 1997. f excl. gain from another home after May 6, 1997 & within 2 yrs. of current sale, enter date of sale (m/d/y)  1 = sale due to change in health, employment or unforeseen circumstances  Days used as main home - taxpayer  Days used as main home - spouse  Days property owned - taxpayer  Days property owned - spouse  MOVING EXPENSES (27) (If you are a member of the Armed Forces and moved due to a permanent change in station)  1 = spouse, 2 = joint. 1 = armed forces move due to permanent change of station  Wiles from old home to new work place  Wiles from old home to new work place  Wiles from old home to old work place  Expenses for transportation and storage of household goods and personal effects  Lodging and travel (excluding meals):  Lodging and travel (excluding automobile)  Parking fees and tolls.  Gas and oil.		
Reduced Exclusion  Please complete the following information if due to a change in health, place of employment, or unforeseen circumstances you either:  (a) Did not meet the ownership and use tests *, or b) Excluded gain on the sale of another home after May 6, 1997.  Fexcl. gain from another home after May 6, 1997 & within 2 yrs. of current sale, enter date of sale (m/d/y)  =sale due to change in health, employment or unforeseen circumstances  Days used as main home - taxpayer  Days used as main home - spouse  Days property owned - taxpayer  Days property owned - spouse  WOVING EXPENSES (27) (If you are a member of the Armed Forces and moved due to a permanent change in station)  =spouse, 2=joint.  =armed forces move due to permanent change of station  Wiles from old home to new work place  Wiles from old home to new work place  Expenses for transportation and storage of household goods and personal effects  Lodging and travel (excluding meals):  Lodging and travel (excluding automobile)  Parking fees and tolls  Gas and oil.	Reduced Exclusion  Please complete the following information if due to a change in health, place of employment, or unforeseen circumstances you either:  (a) Did not meet the ownership and use tests *, or b) Excluded gain on the sale of another home after May 6, 1997.  Fexcl. gain from another home after May 6, 1997 & within 2 yrs. of current sale, enter date of sale (m/d/y)  =sale due to change in health, employment or unforeseen circumstances  Days used as main home - taxpayer  Days property owned - taxpayer  Days property owned - taxpayer  Days property owned - spouse  WOVING EXPENSES (27) (If you are a member of the Armed Forces and moved due to a permanent change in station)  =spouse, 2=joint.  =armed forces move due to permanent change of station  Wiles from old home to new work place  Wiles from old home to new work place  Expenses for transportation and storage of household goods and personal effects  Lodging and travel (excluding meals):  Lodging and travel (excluding automobile)  Parking fees and tolls  Gas and oil.		
Please complete the following information if due to a change in health, place of employment, or unforeseen circumstances you either:  a) Did not meet the ownership and use tests *, or b) Excluded gain on the sale of another home after May 6, 1997.  f excl. gain from another home after May 6, 1997 & within 2 yrs. of current sale, enter date of sale (m/d/y).	If excl. gain from another home after May 6, 1997 & within 2 yrs. of current sale, enter date of sale (m/d/y).  1=sale due to change in health, employment or unforeseen circumstances.  Days used as main home - taxpayer.  Days property owned - taxpayer.  Days property owned - spouse.  Days property owned - spouse.  MOVING EXPENSES (27) (If you are a member of the Armed Forces and moved due to a permanent change in station)  1=spouse, 2=joint.  1=armed forces move due to permanent change of station.  Wiles from old home to new work place.  Wiles from old home to old work place.  Expenses for transportation and storage of household goods and personal effects  Lodging and travel (excluding meals):  Lodging and travel (excluding automobile)  Parking fees and tolls.  Gas and oil.	otal expenses of sale	
Please complete the following information if due to a change in health, place of employment, or unforeseen circumstances you either:  a) Did not meet the ownership and use tests *, or b) Excluded gain on the sale of another home after May 6, 1997.  f excl. gain from another home after May 6, 1997 & within 2 yrs. of current sale, enter date of sale (m/d/y).	Please complete the following information if due to a change in health, place of employment, or unforeseen circumstances you either:  a) Did not meet the ownership and use tests *, or b) Excluded gain on the sale of another home after May 6, 1997.  If excl. gain from another home after May 6, 1997 & within 2 yrs. of current sale, enter date of sale (m/d/y)  1=sale due to change in health, employment or unforeseen circumstances  Days used as main home - taxpayer  Days used as main home - spouse  Days property owned - taxpayer  Days property owned - spouse  MOVING EXPENSES (27) (If you are a member of the Armed Forces and moved due to a permanent change in station)  1=spouse, 2=joint  1=armed forces move due to permanent change of station  Miles from old home to new work place  Expenses for transportation and storage of household goods and personal effects  Lodging and travel (excluding meals):  Lodging and travel (excluding automobile)  Parking fees and tolls  Gas and oil.		
f excl. gain from another home after May 6, 1997 & within 2 yrs. of current sale, enter date of sale (m/d/y).  I = sale due to change in health, employment or unforeseen circumstances  Days used as main home - taxpayer  Days used as main home - spouse  Days property owned - taxpayer  Days property owned - spouse  WOVING EXPENSES (27) (If you are a member of the Armed Forces and moved due to a permanent change in station)  I = spouse, 2 = joint  I = armed forces move due to permanent change of station  Miles from old home to new work place  Expenses for transportation and storage of household goods and personal effects  Lodging and travel (excluding meals):  Lodging and travel (excluding automobile)  Parking fees and tolls.  Gas and oil.	If excl. gain from another home after May 6, 1997 & within 2 yrs. of current sale, enter date of sale (m/d/y).  1=sale due to change in health, employment or unforeseen circumstances.  Days used as main home - taxpayer.  Days property owned - taxpayer.  Days property owned - spouse.  Days property owned - spouse.  MOVING EXPENSES (27) (If you are a member of the Armed Forces and moved due to a permanent change in station)  1=spouse, 2=joint.  1=armed forces move due to permanent change of station.  Wiles from old home to new work place.  Wiles from old home to old work place.  Expenses for transportation and storage of household goods and personal effects  Lodging and travel (excluding meals):  Lodging and travel (excluding automobile)  Parking fees and tolls.  Gas and oil.	Reduced Exclusion	
Seale due to change in health, employment or unforeseen circumstances   Says used as main home - taxpayer   Says used as main home - spouse   Says property owned - taxpayer   Says property owned - spouse   Says prop	I = sale due to change in health, employment or unforeseen circumstances  Days used as main home - taxpayer  Days property owned - taxpayer  Days property owned - spouse  MOVING EXPENSES (27) (If you are a member of the Armed Forces and moved due to a permanent change in station)  I = spouse, 2 = joint  II = armed forces move due to permanent change of station  Wiles from old home to new work place  Expenses for transportation and storage of household goods and personal effects  Lodging and travel (excluding meals):  Lodging and travel (excluding automobile)  Parking fees and tolls  Gas and oil.	lease complete the following information if due to a change in health, place of employment, or unforeseen circ $\mathbf{j}$ Did not meet the ownership and use tests $\mathbf{j}$ , or $\mathbf{j}$ Excluded gain on the sale of another home after May 6, $\mathbf{j}$	cumstances you either: 997.
Days used as main home - taxpayer Days used as main home - spouse Days property owned - taxpayer Days property owned - spouse  MOVING EXPENSES (27) (If you are a member of the Armed Forces and moved due to a permanent change in station)    spouse, 2=joint	Days used as main home - taxpayer Days used as main home - spouse Days property owned - taxpayer Days property owned - spouse  MOVING EXPENSES (27) (If you are a member of the Armed Forces and moved due to a permanent change in station)  I = spouse, 2 = joint I = armed forces move due to permanent change of station Wiles from old home to new work place Wiles from old home to old work place Expenses for transportation and storage of household goods and personal effects Lodging and travel (excluding meals): Lodging and travel (excluding automobile) Parking fees and tolls Gas and oil	excl. gain from another home after May 6, 1997 & within 2 yrs. of current sale, enter date of sale (m/d/y) .	
Days property owned - taxpayer Days property owned - spouse  MOVING EXPENSES (27) (If you are a member of the Armed Forces and moved due to a permanent change in station)    = spouse, 2 = joint.	Days used as main home - spouse Days property owned - taxpayer Days property owned - spouse  MOVING EXPENSES (27) (If you are a member of the Armed Forces and moved due to a permanent change in station)  I = spouse, 2 = joint I = armed forces move due to permanent change of station Wiles from old home to new work place Wiles from old home to old work place Expenses for transportation and storage of household goods and personal effects Lodging and travel (excluding meals): Lodging and travel (excluding automobile) Parking fees and tolls Gas and oil.	=sale due to change in health, employment or unforeseen circumstances	
Days property owned - taxpayer  Days property owned - spouse  MOVING EXPENSES (27) (If you are a member of the Armed Forces and moved due to a permanent change in station)    = spouse, 2 = joint	Days property owned - taxpayer Days property owned - spouse  MOVING EXPENSES (27) (If you are a member of the Armed Forces and moved due to a permanent change in station)  I = spouse, 2 = joint.  I = armed forces move due to permanent change of station  Miles from old home to new work place  Miles from old home to old work place  Expenses for transportation and storage of household goods and personal effects  Lodging and travel (excluding meals):  Lodging and travel (excluding automobile)  Parking fees and tolls.  Gas and oil.	La companya di Carante	
Days property owned - spouse  MOVING EXPENSES (27) (If you are a member of the Armed Forces and moved due to a permanent change in station)    = spouse, 2 = joint	MOVING EXPENSES (27) (If you are a member of the Armed Forces and moved due to a permanent change in station)  I = spouse, 2 = joint. I = armed forces move due to permanent change of station  Miles from old home to new work place  Miles from old home to old work place  Expenses for transportation and storage of household goods and personal effects  Lodging and travel (excluding meals):  Lodging and travel (excluding automobile)  Parking fees and tolls  Gas and oil.	· · · · · · · · · · · · · · · · · · ·	
WOVING EXPENSES (27) (If you are a member of the Armed Forces and moved due to a permanent change in station)    =spouse, 2=joint	MOVING EXPENSES (27) (If you are a member of the Armed Forces and moved due to a permanent change in station)  I = spouse, 2 = joint.  I = armed forces move due to permanent change of station  Wiles from old home to new work place  Wiles from old home to old work place  Expenses for transportation and storage of household goods and personal effects  Lodging and travel (excluding meals):  Lodging and travel (excluding automobile)  Parking fees and tolls  Gas and oil.	Pays used as main home - taxpayer	
spouse, 2=joint	I =spouse, 2=joint.  I =armed forces move due to permanent change of station  Miles from old home to new work place  Miles from old home to old work place  Expenses for transportation and storage of household goods and personal effects  Lodging and travel (excluding meals):  Lodging and travel (excluding automobile)  Parking fees and tolls  Gas and oil.	Days used as main home - taxpayer Days used as main home - spouse	
spouse, 2=joint	I =spouse, 2=joint.  I =armed forces move due to permanent change of station  Miles from old home to new work place  Miles from old home to old work place  Expenses for transportation and storage of household goods and personal effects  Lodging and travel (excluding meals):  Lodging and travel (excluding automobile)  Parking fees and tolls  Gas and oil.	Days used as main home - taxpayer Days used as main home - spouse Days property owned - taxpayer	
=armed forces move due to permanent change of station  Miles from old home to new work place  Miles from old home to old work place  Expenses for transportation and storage of household goods and personal effects  Lodging and travel (excluding meals):  Lodging and travel (excluding automobile)  Parking fees and tolls  Gas and oil.	I =armed forces move due to permanent change of station  Miles from old home to new work place  Wiles from old home to old work place  Expenses for transportation and storage of household goods and personal effects  Lodging and travel (excluding meals):  Lodging and travel (excluding automobile)  Parking fees and tolls  Gas and oil.	Days used as main home - taxpayer Days used as main home - spouse Days property owned - taxpayer Days property owned - spouse	
Miles from old home to new work place  Miles from old home to old work place  Expenses for transportation and storage of household goods and personal effects  Lodging and travel (excluding meals):  Lodging and travel (excluding automobile)  Parking fees and tolls  Gas and oil.	Miles from old home to new work place  Miles from old home to old work place  Expenses for transportation and storage of household goods and personal effects  Lodging and travel (excluding meals):  Lodging and travel (excluding automobile)  Parking fees and tolls  Gas and oil.	Days used as main home - taxpayer Days used as main home - spouse Days property owned - taxpayer Days property owned - spouse	ent change in station)
Miles from old home to old work place Expenses for transportation and storage of household goods and personal effects Lodging and travel (excluding meals):  Lodging and travel (excluding automobile)  Parking fees and tolls  Gas and oil	Wiles from old home to old work place  Expenses for transportation and storage of household goods and personal effects  Lodging and travel (excluding meals):  Lodging and travel (excluding automobile)  Parking fees and tolls  Gas and oil.	Days used as main home - taxpayer Days used as main home - spouse Days property owned - taxpayer Days property owned - spouse  MOVING EXPENSES (27) (If you are a member of the Armed Forces and moved due to a permane	ent change in station)
Expenses for transportation and storage of household goods and personal effects  odging and travel (excluding meals):  Lodging and travel (excluding automobile)  Parking fees and tolls  Gas and oil	Expenses for transportation and storage of household goods and personal effects  Lodging and travel (excluding meals):  Lodging and travel (excluding automobile)  Parking fees and tolls  Gas and oil	Pays used as main home - taxpayer Pays used as main home - spouse Pays property owned - taxpayer Pays property owned - spouse Pays property owned - spouse  MOVING EXPENSES (27) (If you are a member of the Armed Forces and moved due to a permanent espouse, 2=joint  = armed forces move due to permanent change of station	ent change in station)
Lodging and travel (excluding meals):  Lodging and travel (excluding automobile)  Parking fees and tolls  Gas and oil.	Lodging and travel (excluding meals):  Lodging and travel (excluding automobile)  Parking fees and tolls  Gas and oil.	Pays used as main home - taxpayer Pays used as main home - spouse Pays property owned - taxpayer Pays property owned - spouse Pays property owned - spouse  MOVING EXPENSES (27) (If you are a member of the Armed Forces and moved due to a permanent espouse, 2=joint  = armed forces move due to permanent change of station  Miles from old home to new work place	ent change in station)
Lodging and travel (excluding automobile)  Parking fees and tolls  Gas and oil	Lodging and travel (excluding automobile)  Parking fees and tolls  Gas and oil	Pays used as main home - taxpayer Pays used as main home - spouse Pays property owned - taxpayer Pays property owned - spouse  Pays property owned - staxpayer  Pays property owned - spouse  Pays property owned - staxpayer  Pays property	ent change in station)
Parking fees and tolls.  Gas and oil.	Parking fees and tolls  Gas and oil	Pays used as main home - taxpayer Pays used as main home - spouse Pays property owned - taxpayer Pays property owned - spouse  MOVING EXPENSES (27) (If you are a member of the Armed Forces and moved due to a permanent espouse, 2=joint  = armed forces move due to permanent change of station  Miles from old home to new work place Miles from old home to old work place  Expenses for transportation and storage of household goods and personal effects	ent change in station)
Gas and oil.	Gas and oil.	Pays used as main home - taxpayer Pays used as main home - spouse Pays property owned - taxpayer Pays property owned - spouse  MOVING EXPENSES (27) (If you are a member of the Armed Forces and moved due to a permanent espouse, 2=joint  = armed forces move due to permanent change of station  Miles from old home to new work place Miles from old home to old work place  Expenses for transportation and storage of household goods and personal effects	ent change in station)
		Pays used as main home - taxpayer Pays used as main home - spouse Pays property owned - taxpayer Pays property owned - spouse  MOVING EXPENSES (27) (If you are a member of the Armed Forces and moved due to a permanent espouse, 2=joint  = armed forces move due to permanent change of station  Miles from old home to new work place Miles from old home to old work place  Expenses for transportation and storage of household goods and personal effects  odging and travel (excluding meals):	ent change in station)
Miles driven to new home	Miles driven to new home	Pays used as main home - taxpayer Pays used as main home - spouse Pays property owned - taxpayer Pays property owned - spouse  MOVING EXPENSES (27) (If you are a member of the Armed Forces and moved due to a permanent espouse, 2=joint  = armed forces move due to permanent change of station  Miles from old home to new work place  Miles from old home to old work place  Expenses for transportation and storage of household goods and personal effects  odging and travel (excluding meals):  Lodging and travel (excluding automobile)  Parking fees and tolls	ent change in station)
		Pays used as main home - taxpayer Pays used as main home - spouse Pays property owned - taxpayer Pays property owned - spouse  MOVING EXPENSES (27) (If you are a member of the Armed Forces and moved due to a permanent espouse, 2=joint  = armed forces move due to permanent change of station  Miles from old home to new work place  Miles from old home to old work place  Expenses for transportation and storage of household goods and personal effects  odging and travel (excluding meals):  Lodging and travel (excluding automobile)  Parking fees and tolls	ent change in station)

US/CA Rental & Royalty Income (Schedule E) 2022 1040 No. 18 Please enter all pertinent 2022 amounts. Last year's amounts are provided for your reference. **GENERAL INFORMATION** 2022 Amount Description of property . . . . . . . Type of Property Street address..... 1 = Single Family Residence 2 = Multi-Family Residence 3 = Vacation/Short-Term Rental State..... 4 = Commercial ZIP code..... 5 = Land6 = Royalties 7 = Self-Rental Type of property (see table) . . . . Other type of property..... Number of days rented ..... 1=did not actively participate... 1=real estate professional. 1=spouse, 2=joint..... 1=rental other than real estate. 1=qualified joint venture...... 1=investment 1=single member limited liability company. 1=nonpassive activity, 2=passive royalty. . . . If required to file Form(s) 1099, did you or will you file all required Form(s) 1099: 1=yes, 2=no ...... CA FTB Form 3805V: 1=eligible small business..... Qualified new business year: 1, 2 or 3 ..... 2022 Amount 2021 Amount INCOME DIRECT EXPENSES NOTE: Direct expenses are related only to the rental activity. These include rental agency fees, advertising, and office supplies. Advertising. Association dues..... Auto and travel (not entered elsewhere) Cleaning and maintenance ...... Commissions..... Gardening. Legal and professional fees..... Licenses and permits..... Management fees ..... Excess mortgage interest . . . . . . . . Painting and decorating..... Pest control..... Repairs. Taxes - real estate Wages and salaries..... Other: NOTE: If you purchased or disposed of any business assets, please complete Sheet 22

022	1040	US	Rental & Royalty Incom	e (Sch. E) (cont.)	No.	18 p2				
Pleas	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.									
GEN	NERAL IN	IFORMAT	ΓΙΟΝ							
Foreig	n region									
_										
OIL	AND GA	S		2022 Amount	2021 Amoui	nt				
Cost of Perce	depletion ntage depletion cost depletion	on rate or amo	bunt -1 if none) -, if different (-1 if none)		2021 Amoun					
PER	RSONAL	USE OF I	DWELLING UNIT (INCLUDING	VACATION HOME)						
Numb	er of days per	rsonal use	al method elected)							
	_	XPENSES			1					
			ted to operating or maintaining the dwelling tarance, and utilities.	unit.						
Assoc	iation dues		where)							
Clean	ing and maint	tenance	wileie)							
Garde	ening									
Misce	llaneous									
Qualif	ied mortgage	insurance pre	etc.)miums							
Other	interest (not	entered elsew	here)							
Pest of	control									
Repai	rs									
			nere)							
Utilitie	es									
Wage: Other		5								

ORGANIZEF		T				Page 69
2022	1040	US	Partnersh	nip and S corpora	tion Information	20.1,20.2
			r delete 2022 in MATION (20.		e. Be sure to attach all S	Schedule K-1s.
No.	Nam	ne of Partners	hip	Employer Identification Number	Tax Shelter Registration Number	Additional Amounts Invested in Partnership
S C	ORPORAT	ION INFO	ORMATION (	20.2)		
No.	Name	e of S corpora	ation	Employer Identification Number	Tax Shelter Registration Number	Additional Amounts Invested in S corporation

20.1,20.2

ORGANIZER US **Estate or Trust and REMIC Information** 20.3,20.4 1040 2022 Please add, change or delete 2022 information as appropriate. Be sure to attach all Schedule K-1s and Schedule Qs. **ESTATE OR TRUST INFORMATION (20.3)** Employer Identification Tax Shelter Registration Number Name of Estate or Trust No. Number **REMIC INFORMATION (20.4)** 

No.	Name of REMIC	Employer Identification Number

ORGANIZER				raye	/
2022	1040	US	Asset Disposition List	22	

If you disposed of any business assets in 2022, please enter date sold, sales price, and expenses of sale. For real estate transactions, be sure to attach all 1099-S forms and closing statements.

No.	Description of Property (Box 3)	Date Placed in Service	Date Sold (Box 1)	Sales Price (Box 2)	Cost or Basis	Expenses of Sale
						22

**Asset Acquisition List** US 1040 **22** p2 2022

If you purchased any business assets (furniture, equipment, vehicles, real estate, etc.) or converted any personal assets to business use in 2022, please enter all pertinent information below.

		Delatad	Preparer Use Only			Date Placed	Cost	Preparer Use Only	
No.	Description of Property	Related Business or Activity	Form	No. of Form	Category	Date Placed in Service	Cost or Basis	Current Section 179	Method
								22	<b>2</b> p2

)22	1040	US	Vehicle Expenses		No.	22 p3
	Please en	ter all pert	inent 2022 amounts. Last year's an	nounts are provided for	your reference	·.
GEI	NERAL IN	IFORMAT	ΓΙΟΝ	2022 Amount	2021 Amou	ınt
Descr	iption of vehic	:le				
1=no	evidence to su	upport your de	eduction			
1=no	written eviden	ice to support	your deduction			
			personal use			
			r personal use			
1=veh	nicle used prim	narily by more	than 5% owner			
Numb	er of months	of business us	se if changed from 100% personal use			
ΑU٦	ГОМОВІЬ	E MILEA	GE			
Total	mileage (for the	ne tax year)				
	=	=				
Comn	nuting mileage	e (for the tax y	/ear)			
Avera	ige daily round	d-trip commute	e			
AC	ΓUAL EXI	PENSES				
Parkir	ng fees and to	lls (business i	portion only)			
	-					
'						
Insura	ance					
Misce	llaneous					
			property taxes)			
Perso	nal property to	axes (based o	n car's value)			
Intere	st (car loan) (	for Schedule (	C, E & F)			
Vehic	le rent or leas	e payments				
Inclus	sion amount (e	enter as positiv	ve)			
Value	of employer-	orovided vehic	:le on Form W-2 (2106)			

Page 74

				rage / r
2022	1040	US	Adjustments to Income	24

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

TRADITIONAL IRA CONTRIBUTIONS	S Zavnaver	mount Spouse	2021 Am Taxpayer	Spouse
	Taxpayer	Spouse	Taxpayer	Spouse
IRA contributions you made or expect to make (1=maximum) (\$6,000/\$7,000 if 50 or older)				
Contributions made to date				
1=covered by plan, 2=not covered				
2022 payments from 1/1/23 to 4/15/23				
ROTH IRA CONTRIBUTIONS				
Roth IRA contributions you made or expect to make (1=maximum) (\$6,000/\$7,000 if 50 or older)				
Contributions made to date				
SEP, SIMPLE AND QUALIFIED PLAI	NS (KEOGH)			
Profit-sharing (25%/1.25) contributions you				
made or expect to make (1=maximum)				
Money purchase (25%/1.25) contributions you made or expect to make (1=maximum)				
Defined benefit contributions you expect to make				
Self-employed SEP (25%/1.25) contributions you made or expect to make (1=maximum)				
Plan contribution rate if not .25 (.xxxx)			<del> </del>	
Individual 401k: SE elective deferrals (except Roth) (1=max.)				
Individual 401k: SE designated Roth contributions (1=max.)				
SIMPLE contributions:				
Self-employed SIMPLE contributions you made or expect to make (1=maximum)				
Employer matching rate if not .03 (.xxxx)				
1=nonelective contributions (2%)				
Contributions made to date			-	
ADJUSTMENTS TO INCOME				
Self-employed health insurance:				
Total premiums (excluding long-term care)				
Long-term care premiums				
Student loan interest paid (1098-E, box 1)				
Educator expenses (kindergarten thru grade 12)				
Jury duty pay given to employer				
Expenses from rental of personal property				
Other adjustments to income:		•		
Alimony paid: Taxpayer		Spouse		
of divorce or sep. agreement				
Recipient's first name				
Recipient's last name				
Recipient's SSN				
Amount paid	2021 amt:			

2022 1040 US Itemized Deductions

Please enter all pertinent 2022 amounts and attach all 1098 forms. Last year's amounts are provided for your reference.

#### MEDICAL AND DENTAL EXPENSES

NOTE:Enter self-employed health insurance premiums on Sheet 24 and Medicare insurance premiums on Sheet 14.	2022 Amount	TS	2021 Amount
Prescription medicines and drugs			
Doctors, dentists and nurses			
Hospitals and nursing homes.			
Insurance premiums not entered elsewhere (excl. LT care & amts. paid w/pre-tax dollars)			
Long-term care premiums - taxpayer			
Long-term care premiums - spouse			
Insurance reimbursement (enter as a positive number)			
Lodging and transportation:			
Out-of-pocket expenses			
Medical miles driven (1/1/22 - 6/30/22)			
Medical miles driven (7/1/22 - 12/31/22)			
Other medical and dental expenses:			
other medical and defital expenses.			
TAXES PAID (State and local withholding and 2022 estimates are au	tomatic.)		
State income taxes - 1/22 payment on 2021 state estimate			
State income taxes - paid with 2021 state return extension			
·			
State income taxes - paid for prior years and/or to other state			
State income taxes - paid for prior years and/or to other state			
City/local income taxes - 1/22 payment on 2021 city/local estimate			
City/local income taxes - paid with 2021 city/local extension			
City/local income taxes - paid with 2021 city/local return			
SALES AND USE TAXES PAID			
State and local sales taxes (except autos and special items)			
Use taxes paid on 2022 purchases			
Use taxes paid with 2021 state return			
Sales tax on autos not included above			
<u> </u>			
Sales tax on boats, aircraft, other special items			
OTHER TAXES PAID			
Real estate taxes - principal residence:			
Real estate taxes - held for investment :			
			<del></del>
Personal property taxes (including auto fees in some states. Provide a copy of tax notice)			
Foreign income taxes.			
Other taxes:			
Citici taxes.			

22	1040	US	Itemized Deductions	(continued)			25 <sub>i</sub>
	Please en	ter all pert	inent 2022 amounts. Last year'	s amounts are provided	for yo	our reference.	
INT	EREST PA	AID					
Home	mortgage int.	(Box 1) and	points (Box 2) reported on Form 1098:	2022 Amount	TS	2021 Amou	nt
•							
,	Home mortgag	ge interest no	ot reported on Form 1098:				
	Payee's name						
	Payee's SSN	<del>-</del>					
	Payee's street	<del> </del>					
	Payee's city Payee's state.	<u> </u>					
	Payee's ZIP c	H-					
	Payee's region						
	Payee's posta						
	Payee's count	_		T			
	Amount paid.  s not reported		9.				
r Office	s not reported	OH FOHIL 103	5.				
•							
	•	•	post 12/31/06 contracts (Box 4)				
Invest	ment interest	(interest on r	nargin accounts):				
Passiv	ve interest						
				n hama ara daduatible aver the	lifo of	the mortgage	
NOTE	For these ty	pes of loans	er than to buy, build, or improve your mai also provide the dates and lives of the loa	ans.	, iiic oi	the mortgage.	
CAS	SH CONT	RIBUTIO	NS				
NOTE	E: No deduction from the dor	n is allowed nee, showing	for cash or check contributions unless the the name of the organization, contributio	donor maintains a bank record date(s), and contribution amo	d, or a vount(s).	written communica	ation
Churc	hes, schools,	nospitals, and	d other charitable organizations (60% limi	tation):			
С	ontributions by	cash or che	ck:				
					+		
,					$\dashv \dashv$		
			ocket)				
Nι	umber of chari	table miles					
Votor	anal arganizati	one froterno	Landiction popprofit comptonies and cort	ain private papagarating found	otions (	(200/ limitation)	
	ans organizati ontributions by		I societies, nonprofit cemeteries, and cert sk $\cdot$	ain private nonoperating tound	ations (	,30% ilmitation):	
	ontributions by	oddir or one					
•						-	
	olunteer over	neae (out of n	packat)				
			ocket)				
			ocket)				

Page 77 ORGANIZER

22   1	040	US/CA	Itemized Deductions (continued)	25 p3
NONC	ASH C	ONTRIBL	inent 2022 amounts. Last year's amounts are provided for your reference.  JTIONS  ask contributions are over \$500. No deduction is allowed for contributions of clothing and househout condition or better. In addition, a deduction for any item with minimal monetary value may be defined.	
50% limita	ation (see	above):	2022 Amount TS 2021 Amount	nt
30% limita	ation (see	above):		
30% capit	al gain pro	operty (gifts of	f capital gain property to 50% limit orgs.):	
		. (15)		
20% capit	al gain pro	operty (gifts of	f capital gain property to non-50% limit orgs.):	
Union and	l professio	nal dues	F NON-CONFORMING TO TAX CUTS & JOBS ACT (subject to 2% AG penses (uniforms and protective clothing, yment agency fees, and certain edu. expenses):	
_				
Investmer	it expense	<b>:</b> :		
		6		
Miscellane and custo	eous dedu dial fees):	ctions (2% AG	GI) (certain legal and accounting fees,	
Federal or	nly:			
State only	<b>'</b> :			

22	1040	US/CA	Itemized Deductions	(continued)		25
	Please en	'	ent 2022 amounts. Last year's a		r your ref	erence.
OTH	HER MISO	CELLANE	OUS DEDUCTIONS	2022 Amount	TS	2021 Amount
		691(c)				
				_		
				_		
				_		
				_		
				_		
				_		
				_		
				_		
				_		
Feder	al only:					
Ctata						
State	orny:					

25 p4

2022 1040 US Itemized Deductions (continued) 25 p5

If either of the following conditions below apply to you, your home mortgage interest deduction may need to be limited and the input section provided below should be completed. If neither condition applies, enter home mortgage interest amounts on organizer sheet 25 p2.

- 1. Total home equity debt exceeded \$100,000 at any time during 2022 (\$50,000 if married filing separate). For this purpose, home equity debt is defined as any mortgages taken out in which the proceeds were used to buy, build, or improve your home.
- 2. Total home acquisition debt exceeded \$750,000 at any time during 2022 (\$375,000 if married filing separate). For this purpose, home acquisition debt is defined as any mortgages taken out after October 13, 1987 in which the proceeds were used to buy, build, or improve your home.

NOTE: When completing the input section below, grandfather debt represents loans taken out prior to October 14, 1987.

# Please enter all pertinent 2022 amounts and attach all 1098 forms. Last year's amounts are provided for your reference.

	2022 Amou	nt -	ΓS	2021 Amount
Fair market value of the property on the date that the last debt was secured .				
dome acquisition and grandfather debt on the date that the last debt was secured				
LOAN INFORMATION				
oan #1				
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 2022				
Home equity debt balance - beginning of year				
Home equity debt borrowed in 2022				
Grandfather debt balance - beginning of year				
oan #2		l .		
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 2022				
Home equity debt balance - beginning of year				
Home equity debt borrowed in 2022				
Grandfather debt balance - beginning of year				
Form				
1 = Schedule A (defau 2 = Business use of he 3 = Schedule E				

**Itemized Deductions (continued)** US  $25_{\ p5\ cont}$ 2022 1040

Please enter all pertinent 2022 amounts and attach all 1098 forms. Last year's amounts are provided for your reference.

## **LOAN INFORMATION (continued)**

Loan #3	2022 Amount	TS	2021 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 2022			
Home equity debt balance - beginning of year			
Home equity debt borrowed in 2022			
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 2022			
Home equity debt balance - beginning of year			
Home equity debt borrowed in 2022			
Grandfather debt balance - beginning of year			

#### Form

1 = Schedule A (default) 2 = Business use of home 3 = Schedule E

2022 1040 US Noncash Contributions (Form 8283)

If your total noncash contributions are in excess of \$500 in 2022, please complete the information below for each donee using the following guidelines:

- \* If you contributed a motor vehicle, boat, or airplane with a claimed value of more than \$500, attach Form 1098-C or other written acknowledgement received from the donee organization.
- \* A deduction for contributions of clothing or other household items that are not in *good* used condition or better is not allowed. In addition, a deduction for any item with minimal monetary value may be denied. However, these rules do not apply to any contribution of a single item for which a deduction of more than \$500 is claimed, if a qualified appraisal for the donated property is provided.

	Name of ch	aritable organization (donee)			
		ess			
	City				
	State				
	ZIP code				
	· ·	2=joint	<u> </u>		
	Property de	escription (other than vehicle)			
	<b>,</b>	Identification number (VIN)			
No.	Vehicle	Year (yyyy)	<u> </u>		
		Make and model	_		
		Condition and mileage			
		tribution (m/d/y)	_		
		ed by donor (m/y)			
	· ·	ed by donor (Table 1 or describe)			
		t or basis			
	ivietnoù use	d to determine FMV (Table 2 or desc	cribe)		
	Name of ohe	aritable organization (donee)			
		ess	<del>-</del>		
	City.				
			_		
		!=joint			
		scription (other than vehicle)	_		
	1 3	Identification number (VIN)	_		
No.	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	Year (yyyy)			
	☐ Vehicle	Make and model			
		Condition and mileage			
	Date of cont	ribution (m/d/y)	_		
	Date acquire	ed by donor (m/y)			
	How acquire	ed by donor (Table 1 or describe)			
	Donor's cost	t or basis			
	Fair market	value			
	Method used	d to determine FMV (Table 2 or describ	oe)		
 1			2		
•	How Pro	operty was Acquired		Method Used to Determine FMV	
	1 = Purchase	3 = Inheritance 4 = Exchange		Appraisal 3 = Catalog 4 = Comparable sales	
	2 = Gift	ge	2 =	Thint shop value	
			1	For other methods, see IRS Pub. 561.	

26

2022	1040	US	Business Use of Home (	Form 8829)	No.	29
2022	1070	00	Dasiness Osc of Hollie (	1 01111 002 //		<i>_ ,</i>

Please enter 2022 indirect expenses in full. Nonbusiness portion will carry to Schedule A. Business percentage will be applied to indirect expenses only.

BUSINESS USE OF HOME	2022 Amount	2021 Amount
Form		
Number of form (e.g., enter 2 for Schedule C number 2)		
Business use area (square footage)		
Total area of home (square footage)		
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)		
% (.xx) or amount of gross income from home if not 100% (-1 if none)		
% (.xx) or amount of expenses from home if not 100% (-1 if none)		
INDIRECT EXPENSES		
NOTE: Indirect expenses are for keeping up and running your entire home.  They benefit both the business and personal parts of your home.		
Mortgage interest		
Real estate taxes		
Casualty losses		
Insurance		
Miscellaneous		
Rent		
Repairs and maintenance		
Utilities.		
Excess mortgage interest		
Excess real estate taxes		
Other indirect expenses:		
·		
-		
-		
DIRECT 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.	de	
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:		
Other direct expenses.		

29

22	1040	US	Employee/Vehicle Bus. Ex	(p. (Form 2106)	No.	30
	Please en	ter all pert	inent 2022 amounts. Last year's amo	unts are provided for y	our reference.	
GEI	NERAL IN	IFORMA <sup>-</sup>	TION			
Occu	pation, if differ	ent from Forr	n 1040			
Numb 1=spo 1=per	oer of form (1= ouse rformance artis	first Schedule st, 2=handica	e C, 2=second, etc.)  pped, 3=fee-basis government official			
	·		SS EXPENSES	2022 Amount	2021 Amour	nt
Meal	expenses from	n restaurants	in full	2022 Amount	2021 Amour	ıı
			er than restaurants			
			(80% meal allowance)			
			ain, etc.)			
		-	n home overnight			
Reim	bursements no	ot included on	Form W-2, box 1			
	bursements no business exp		Form W-2, box 1			
			Form W-2, box 1			
			Form W-2, box 1			
			Form W-2, box 1			
			Form W-2, box 1			
			Form W-2, box 1			
			Form W-2, box 1			
			Form W-2, box 1			
			Form W-2, box 1			
			Form W-2, box 1			
			Form W-2, box 1			
			Form W-2, box 1			
			Form W-2, box 1			
			Form W-2, box 1			
			Form W-2, box 1			
			Form W-2, box 1			

Please enter all pertinent 2022 amounts. Last year's amounts are provided for your reference.  VEHICLE INFORMATION  1-vehible used primarily by more than 5% owner.  1-whible is used primarily by more than 5% owner.  1-whible is used permarily by more than 5% owner.  1-mo evidence to support your deduction  1-mo written evidence to support your deduction  VEHICLE 1  Description of vehible  Date piscod in service (midly).  Total mileage (for the lax year)  Business mileage (17/102 - 6/30/207)  Business mileage (17/102 - 17/30/207)  Description of vehible.  Desc	2022	1040	US	Vehicle Expenses (Form	2106) (cont.)	No.	30 p2
1-vehicle used primarily by more than 5% owner 1-vehicle is available for off duty personal use 1-no netwidence to support your deduction 1-no netwidence to support your deduction 1-no writtened in service (midsy) 1-no written writtened to support your deduction  VEHICLE 1  Description of vehicle Date placed in service (midsy) 1-rotal mileage (17/12 - 16/30/22) 1-		Please en	iter all pert	inent 2022 amounts. Last year's an	nounts are provided for	your reference.	
1-vehicle used primarily by more than 5% owner  1-vehicle is available for of duty personal use  1-no other vehicle is available for personal use  1-no overher vehicle is available for personal use  1-no overher vehicle is available for personal use  1-no overher vehicle to support your deduction  VEHICLE 1  Description of vehicle Date placed in service (m/d/y)  Total mileage (for the tax year)  Business mileage (1/122 - 1/23/122)  Business mileage (1/122 - 1/23/122)  Business mileage (1/122 - 1/23/122)  Commuting mileage (for the tax year)  Average daily round-trip commute  Number of months of business use it changed from 100% personal use  Parking fees and totils (business portion only)  Actual expenses:  Gasoline, lube, oil  Repairs  Tires.  Insurance.  Miscellaneous.  Auto liciones (other than personal property taxes)  Personal property taxes (based on car's value)  Interest (car loan) (for Schoule C, E & P)  Vehicle rent or lease payments.  Inclusion amount (enter as positive)  Value of employer-provided vehicle on Form W-2 (2106)  VEHICLE 2  Description of vehicle  Date placed in seators (m/d/y)  Tatal mileage (for the tax year)  Average dail in seators (m/d/y)  Tatal mileage (for the tax year)  Average dail in seators (m/d/y)  Tatal mileage (for the tax year)  Average dail in seators (m/d/y)  Tatal mileage (for the tax year)  Average daily round trip commune  Number of months of business use if changed from 100% personal use  Parking fees and foils (business portion only)  Actual expenses:  Casaline, lube, oil  Repairs  Tires.  Insurance  Miscellaneous.  Auto liciense (other than personal property taxes)  Personal property taxes (based on car's value)  Interest (car loan) (for Schoule C, E and f)  Vehicle rent or lease payments.  Inclusion amount (enter a positive)  Personal property taxes (based on car's value)  Interest (car loan) (for Schoule C, E and f)  Vehicle rent or lease payments.  Inclusion amount (enter a positive)	VEH	HICLE INF	ORMATI	ON	2022 Amount	2021 Amou	nt
1-en other vehicle is available for personal use 1-no evidence to support your deduction 1-no vehicle consuport your deduction 1-no vehicle consuport your deduction 1-no vehicle consuport your deduction 1-no vehicle 1 Description of vehicle 1 Deteplaced in service (midly) 1 Total mileage (17/122 - 1/33/127) 1 Deteplaced in service (midly) 1 Total mileage (for the tax year) 1 Deteplaced in service (midly) 1 Total mileage (for the tax year) 1 Deteplaced in service (midly) 1 Total mileage (for the tax year) 1 Deteplaced in service (midly) 1 Total mileage (for the tax year) 1 Deteplaced only (for Schedule C. E. & (f.) 1 Vehicle rout or lease payments 1 Deteplaced on service (midly) 1 Total mileage (for the tax year) 1 Deteplaced only (for Schedule C. E. & (f.) 2 Deteplaced only (for Schedule C. E. & (f.) 3 Deteplaced only (for Schedule C. E. & (f.) 4 Deteplaced only (for Schedule C. E. & (f.) 4 Deteplaced only (for Schedule C. E. & (f.) 4 Deteplaced only (for Schedule C. E. & (f.) 4 Deteplaced only (for Schedule C. E. & (f.) 4 Deteplaced only (for Schedule C. E. & (f.) 4 Deteplaced only (for Schedule C. E. & (f.) 4 Deteplaced only (for Schedule C. E. & (f.) 4 Deteplaced only (for Schedule C. E. & (f.) 4 Deteplaced only (for Schedule C. E. & (f.) 4 Deteplaced only (for Schedule C. E. & (f.) 4 Deteplaced only (for Schedule C. E. & (f.) 4 Deteplaced only (for Schedule C. E. & (f.)	1=veh	nicle used prin	narily by more	than 5% owner	2022 Amount	2021 Amou	
1—no other vehicle is available for personal use 1—no evidence to support your deduction  VEHICLE 1  Description of vehicle  Data placed in service (in/vly)  Trial miteage (for the tax year)  Business miteage (17/122 - 6/30/22)  Business miteage (17/122 - 12/31/22)  Commuting miteage for the tax year)  Average data and totals (business portion only)  Actual expenses:  Gasoline, lube, oil.  Repairs.  Tires  Insurance.  Miscellaneous  Auto license (other than personal property taxes)  Personal property laxes (bused on car's value)  Indication amount (enter as positive)  Vehicle rent or lease payments  Number of months of business use if changed from 100% personal use  Personal property laxes (bused on car's value)  Interest (car losn) (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)  VEHICLE 2  Description of vehicle  Data placed in service (midyl)  Total miteage (17/122 - 6/30/22)  Business miteage (17/122 - 12/31/22)  Commuting miteage (for the tax year)  Average data in service (midyl)  Total miteage (17/122 - 12/31/22)  Cammuting miteage (for the tax year)  Average data for service (midyl)  Total miteage (17/122 - 12/31/22)  Cammuting miteage (for the tax year)  Average data for the fusioness portion only)  Actual expenses:  Gasoline, lube, oil.  Repairs  Tires  Insurance.  Miscellaneous  Auto license (other than personal property taxes)  Personal property taxes (based on card value)  Interest (car long) (for Schoule C, E and F)  Vehicle erat or lease payments  Inclusion amount (enter as positive)		-		<u> </u>			
1=no evidence to support your deduction 1-no written evidence to support your deduction.  VEHICLE 1  Description of vehicle Date placed in service (m/d/y) Total mileage (for the tax year)  Business mileage (17/122 - 17/51/22) Commuting mileage (for the tax year)  Average daily round-trip commute. Paking fees and tolts (business portion only)  Actual expenses: Casoline, tube, cil. Repairs. Tites. Insurance. Miscellaneous Auto license (cinter than personal property taxes). Personal property taxes (dased on car's value) Interest (rar train) (for Schedule C, F & F) Vehicle rent or lease payments Inclusion amount (enths are positive) VEHICLE 2  Description of vehicle Date placed in service (m/d/y) Italian mileage (for the tax year) Average daily round-trip commute. Number of months of business such if changed from 100% personal use Parking fees and tolts (business portion only)  VEHICLE 2  Description of vehicle Date placed in service (m/d/y) Italian mileage (for the tax year) Average daily round-trip commute. Number of months of business use if changed from 100% personal use Parking fees and tolts (business portion only)  Actual expenses:  Gasoline, lube, cil. Repairs. Tites. Insurance. Miscellaneous Auto license (cinter than personal property taxes) Personal property taxes (based on car's value) Interest (car fear) for Schedule C, F & F) Insurance. Miscellaneous Auto license (cinter than personal property taxes) Personal property taxes (based on car's value) Interest (car fear) for Schedule C, F & F) Insurance. Miscellaneous Auto license (cinter) for Schedule C, F & F) Insurance. Miscellaneous Auto license (cinter) for Schedule C, F & F & F) Insurance. Insurance. Miscellaneous automatic fear or society of taxes (based on car's value) Interest (car fear) for Schedule C, F & F & F) Inclusion amount (center as positive) Interest (car fear) for Schedule C, F & F & F) Inclusion amount (center as positive) Interest (car fear) for Schedule C, F & F & F) Inclusion amount (center as positive) Interest (car fear) for Schedu							
VEHICLE 1  Description of vehicle Date placed in service (m/d/y) Total milleage (for the tax year)  Business mileage (17/122 - 4730/22)  Business mileage (17/122 - 12/31/22) Commuting mileage (for the tax year)  Average daily round-trip commute. Actual expenses:  Gasoline, lube, oil.  Repairs.  Tires.  Insurance  Miscellaneous.  Auto license (other than personal property taxes).  Personal property taxes (based on car's value) Interest (arr loan) (for Schedule C, E & F)  VEHICLE 2  Description of vehicle Date placed in service (m/d/y) Total mileage (for the tax year).  Average daily round-trip commute.  Number of months of business use if changed from 100% personal use  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)  VEHICLE 2  Description of vehicle Date placed in service (m/d/y) Total mileage (for the tax year)  Average daily round-trip commute.  Number of months of business use if changed from 100% personal use Parking fees and totis (business portion only)  Actual expenses:  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 and F)  Vehicle rent or lease payments Inclusion amount (enter as positive) Interest (car loan) (for Schedule C, E and F)  Vehicle rent or lease payments Inclusion amount (enter as positive) Interest (car loan) (for Schedule C, E and F)  Vehicle rent or lease payments Inclusion amount (enter as positive)				To the state of th			
Description of vehicle Date placed in service (ind(ty)) Total mileage (for the tax year)  Business mileage (17/1/22 - 6/30/2/2)  Business mileage (17/1/22 - 6/30/2/2)  Business mileage (7/1/22 - 1/23/1/22) Commuting mileage (for the tax year)  Average daily round-trip commute  Parking fees and toils (business portion only)  Actual expenses:  Gasoline, lube, oil  Repairs  Tres  Insurance  Miscellaneous  Auto license (other than personal property taxes)  Personal property laxes (bused on car's value) Interest (car losn) (for Schedule C, E and F)  Vehicle rent or lease payments  Inclusion amount (enter as positive)  Business mileage (for that year)  Average daily round-tip commute  Number of months of business use if changed from 100% personal use  Parking fees and toils (business portion only)  Actual expenses:  Vehicle rent or lease payments  Inclusion amount (enter as positive)  Value of employer-provided vehicle on Form W-2 (2106)  VEHICLE 2  Description of vehicle  Date placed in service (mid/y)  Total mileage (for the tax year)  Business mileage (for the tax year)  Business mileage (for the tax year)  Average daily round-tip commute  Number of months of business use if changed from 100% personal use  Parking fees and toils (business portion only)  Actual expenses:  Casoline, lube, oil  Repairs  Tres  Insurance  Miscellaneous  Auto license (other than personal property taxes)  Personal property taxes (based on car's value)  Interest (car lean) (for Schedule C, E and F)  Vehicle rent or lease payments.  Inclusion amount (enter as positive)	1=no	written evider	nce to support	your deduction			
Date placed in service (m/d/y) Total mileage (for the tax year) Business mileage (17/122 - 17/31/22) Business mileage (17/122 - 17/31/22) Commuting mileage (for the tax year) Average daily round trip commute Number of months of business use if changed from 100% personal use Parking fees and tolls (business portion only) Actual exponses: Gasoline, lube, oil Repairs Tires Insurance Miscellaneous Auto license (other than personal property taxes) Personal property taxes (based on car's value) Interest (car laon) (for Schedule C, E and F) VeHICLE 2  Description of vehicle Date placed in service (m/d/y) Total mileage (for the tax year) Business mileage (17/122 - 4/30/22) Business mileage (17/122 - 4/30/22) Business mileage (17/122 - 6/30/22) Busi	VEH	HICLE 1					
Date placed in service (m/d/y) Total mileage (for the tax year) Business mileage (17/122 - 17/31/22) Business mileage (17/122 - 17/31/22) Commuting mileage (for the tax year) Average daily round trip commute Number of months of business use if changed from 100% personal use Parking fees and tolls (business portion only) Actual exponses: Gasoline, lube, oil Repairs Tires Insurance Miscellaneous Auto license (other than personal property taxes) Personal property taxes (based on car's value) Interest (car laon) (for Schedule C, E and F) VeHICLE 2  Description of vehicle Date placed in service (m/d/y) Total mileage (for the tax year) Business mileage (17/122 - 4/30/22) Business mileage (17/122 - 4/30/22) Business mileage (17/122 - 6/30/22) Busi	Descr	iption of vehic	:le				
Total mileage (for the tax year) Business mileage (17/1/22 - 6/30/22) Business mileage (77/1/22 - 12/31/22) Commuting mileage (for the tax year) Average daily round-trip commute Number of months of business use if changed from 100% personal use Parking fees and tells (business portion only) Actual expenses:  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) VEHICLE 2 Description of vehicle Date placed in service (m/d/y) Total mileage (for the tax year) Average daily round-trip commute Number of months of business use if changed from 100% personal use Parking fees and tolls (business portion only) Actual expenses: Gasoline, lube, oil. Repairs. Tires Insurance. Miscellaneous Average daily round-frip commute. Repairs. Tires Insurance. Miscellaneous Auto licenses portion only) Actual expenses: 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 and F) Vehicle rent or lease payments Inclusion amount (eiter as positive)				F			
Business mileage (7/1/22 - 12/31/22) Commulin mileage (for the tax year) Average daily round-trip commute Number of months of business use if changed from 100% personal use Parking fees and tolls (business portion only) Actual expenses:  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) VEHICLE 2  Description of vehicle. Date placed in service (m/d/y) Total mileage (for the tax year). Business mileage (17/122 - 12/31/22) Commuting mileage (for the tax year). Average daily round-trip commute Number of months of business use if changed from 100% personal use Parking frees and tolls (susiness portion only) Actual expenses: Gasoline, lube, oil. Repairs. Tires. Insurance. Miscellaneous. Auto licenses (other than personal property taxes) Personal property taxes (based on car's value) Interest (car loan) for Schedule C, E and F) Vehicle rent or lease payments.			=	<u> </u>			
Commulting mileage (for the tax year) Average daily round-trip commute Number of months of business use if changed from 100% personal use Parking fees and tolls (business portion only) Actual expenses:  Gasoline, lube, oil.  Repairs Tires. Insurance. Miscellaneous Auto license (other than personal property taxes) Personal property taxes (based on car's value) Interest (ar loan) (for Schedule C, F & F) Vehicle rent or lease payments Inclusion amount (enter as positive)  VEHICLE 2  Description of vehicle Date placed in service (m/d/y) Total mileage (for the tax year) Average daily round-trip commute Number of months of business use if changed from 100% personal use Parking fees and tolls (business portion only) Actual expenses: 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, F and F) Vehicle rent or lease payments Inclusion amount (enter as positive)  Description of vehicle Date placed in service (m/d/y) Total mileage (for the tax year) Date placed in service (m/d/y) Total mileage (for the tax year) Date placed in service (m/d/y) Total mileage (for the tax year) Date placed in service (m/d/y) Total mileage (for the tax year) Date placed in service (m/d/y) Total mileage (for the tax year) Date placed in service (m/d/y) Total mileage (for the tax year) Date placed in service (m/d/y) Total mileage (for the tax year) Date placed in service (m/d/y) Date placed in service (m/d/y) Total mileage (for the tax year) Date placed in service (m/d/y) Date pl	Busin	ess mileage (	1/1/22 - 6/30/2	22)			
Average daily round-trip commute.  Number of months of business use if changed from 100% personal use Parking fees and tolis (business portion only)  Actual expenses:  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)  VEHICLE 2  Description of vehicle  Date placed in service (m/d/y)  Total mileage (for the tax year)  Business mileage (1/1/22 - 1/3/31/22)  Commuting mileage (for the tax year)  Average daily round-trip commute  Number of months of business use if changed from 100% personal use Parking fees and tolis (business portion only)  Actual expenses: 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 and F)  Vehicle rent or lease payments  Inclusion amount (enter as positive)	Busin	ess mileage (	7/1/22 - 12/31	/22)			
Number of months of business use if changed from 100% personal use Parking fees and folis (business portion only) Actual expenses:  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)  VEHICLE 2 Description of vehicle. Date placed in service (m/d/y) Total mileage (for the tax year) Business mileage (1/1/22 - 6/30/22). Business mileage (1/1/22 - 6/30/22). Number of months of business use if changed from 100% personal use Parking fees and tolis (business portion only) Actual expenses: 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 and F) Vehicle erent or lease payments. Inclusion amount (enter as positive).	Comn	nuting mileage	e (for the tax y	/ear)			
Parking fees and tolls (business portion only)  Actual expenses:  Gasoline, lube, oil.  Repairs.  Tires.  Insurance.  Miscellaneous  Auto license (other than personal property taxes)  Personal property laxes (based on car's value)  Interest (car loan) (for Schedule C, E & F)  Vehicle rent or lease payments.  Inclusion amount (enter as positive)  VEHICLE 2  Description of vehicle Date placed in service (m/d/y)  Total mileage (for the tax year)  Business mileage (171/22 - 16/30/22).  Business mileage (717/22 - 12/31/22)  Commuting mileage (for the tax year)  Average daily round-trip commute  Number of months of business use if changed from 100% personal use Parking fees and tolls (Usiness portion only)  Actual expenses:  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 and F)  Vehicle rent or lease payments  Inclusion amount (enter as positive)	Avera	ige daily round	d-trip commute	9			
Actual expenses: 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 and F) Vehicle rent or lease payments. Inclusion amount (enter as positive) Value of employer-provided vehicle on Form W-2 (2106)  VEHICLE 2  Description of vehicle. Date placed in service (m/d/y) Total mileage (for the tax year) Business mileage (f/1/22 - 1/3/3/22) Business mileage (f/1/22 - 1/3/3/22) Commuting mileage (for the tax year) Average daily round-trip commute. Number of months of business use if changed from 100% personal use Parking fees and tolls (business portion only) Actual expenses: 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 and F) Vehicle rent or lease payments. Inclusion amount (enter as positive)	Numb	er of months	of business us	se if changed from 100% personal use			
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).  VEHICLE 2  Description of vehicle. Date placed in service (m/d/y). Total mileage (for the tax year). Business mileage (1/1/22 - 4/30/22). Business mileage (1/1/22 - 1/3/1/22). Commuting mileage (for the tax year). Average daily round-trip commute. Number of months of business use if changed from 100% personal use. Parking fees and tolls (business portion only) Actual expenses: 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 and F). Vehicle rent or lease payments. Inclusion amount (enter as positive).	Parkii	ng fees and to	olls (business p	portion only)			
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)  VEHICLE 2  Description of vehicle Date placed in service (m/d/y) Total mileage (for the tax year) Business mileage (1/1/22 - 6/30/22) Business mileage (1/1/22 - 12/31/22) Commuting mileage (for the tax year) Average dally round-trip commute Number of months of business use if changed from 100% personal use Parking fees and tolls (business portion only) Actual expenses: 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 and F) Vehicle rent or lease payments Inclusion amount (enter as positive)	Actua	ıl expenses:		_			
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)  VEHICLE 2  Description of vehicle Date placed in service (m/d/y) Total mileage (for the tax year) Business mileage (17/122 - 6/30/22) Business mileage (7/1/22 - 1/2/31/22) Commuting mileage (for the tax year) Average daily round-trip commute Number of months of business use if changed from 100% personal use Parking fees and toils (business portion only) Actual expenses: 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 and F) Vehicle rent or lease payments Inclusion amount (enter as positive)	G	asoline, lube,	oil				
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 (nenter as positive) Value of employer-provided vehicle on Form W-2 (2106)  VEHICLE 2  Description of vehicle Date placed in service (m/d/y) Total mileage (for the tax year) Business mileage (17/1/22 - 6/30/22) Business mileage (7/1/22 - 12/31/22) Commuting mileage (for the tax year) Average daily round-trip commute Number of months of business use if changed from 100% personal use Parking fees and tolls (business portion only) Actual expenses: 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 and F) Vehicle rent or lease payments.	R	epairs					
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)  VEHICLE 2  Description of vehicle Date placed in service (m/d/y) Total mileage (for the tax year) Business mileage (17/122 - 6/30/22) Business mileage (17/122 - 12/31/22) Commuting mileage (for the tax year) Average daily round-trip commute Number of months of business use if changed from 100% personal use Parking fees and tolls (business portion only) Actual expenses: 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 and F) Vehicle rent or lease payments Inclusion amount (enter as positive)	Ti	ires					
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)  VEHICLE 2  Description of vehicle Date placed in service (m/d/y) Total mileage (for the tax year) Business mileage (11/122 - 6/30/22) Business mileage (11/122 - 12/31/22) Commuting mileage (for the tax year) Average daily round-trip commute Number of months of business use if changed from 100% personal use Parking fees and tolis (business portion only) Actual expenses: 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 and F) Vehicle rent or lease payments Inclusion amount (enter as positive)	In	surance					
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)  VEHICLE 2  Description of vehicle. Date placed in service (m/d/y). Total mileage (for the tax year). Business mileage (1/1/22 - 6/30/22). Business mileage (1/1/22 - 12/31/22). Commuting mileage (for the tax year). Average daily round-trip commute. Number of months of business use if changed from 100% personal use. Parking fees and tolls (business portion only) Actual expenses: 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).				<u> </u>			
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)  VEHICLE 2  Description of vehicle Date placed in service (m/d/y) Total mileage (for the tax year) Business mileage (71/122 - 6/30/22) Business mileage (71/122 - 12/31/22) Commuting mileage (for the tax year) Average daily round-trip commute Number of months of business use if changed from 100% personal use Parking fees and tolls (business portion only) Actual expenses: 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 and F) Vehicle rent or lease payments. Inclusion amount (enter as positive)							
Vehicle rent or lease payments Inclusion amount (enter as positive) Value of employer-provided vehicle on Form W-2 (2106)  VEHICLE 2  Description of vehicle Date placed in service (m/d/y) Total mileage (for the tax year) Business mileage (17/1/22 - 6/30/22) Business mileage (7/1/22 - 12/31/22) Commuting mileage (for the tax year) Average daily round-trip commute Number of months of business use if changed from 100% personal use Parking fees and tolis (business portion only) Actual expenses: Gasoline, lube, oil Repairs. Titres. Insurance. Miscellaneous Auto license (other than personal property taxes) Personal property taxes (based on car's value) Interest (car loan) (for Schedule C, E and F) Vehicle rent or lease payments Inclusion amount (enter as positive)				F			
Inclusion amount (enter as positive) Value of employer-provided vehicle on Form W-2 (2106)  VEHICLE 2  Description of vehicle Date placed in service (m/d/y) Total mileage (for the tax year) Business mileage (171/22 - 6/30/22) Business mileage (171/22 - 6/30/22) Business mileage (for the tax year) Average daily round-trip commute Number of months of business use if changed from 100% personal use Parking fees and tolls (business portion only) Actual expenses:  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 and F) Vehicle rent or lease payments. Inclusion amount (enter as positive)				<u> </u>			
VEHICLE 2  Description of vehicle Date placed in service (m/d/y) Total mileage (for the tax year) Business mileage (171/22 - 6/30/22) Business mileage (717/22 - 12/31/22) Commuting mileage (771/22 - 12/31/22) Commuting mileage (for the tax year) Average daily round-trip commute Number of months of business use if changed from 100% personal use Parking fees and tolls (business portion only) Actual expenses: 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 and F) Vehicle rent or lease payments. Inclusion amount (enter as positive)				F			
VEHICLE 2  Description of vehicle. Date placed in service (m/d/y). Total mileage (for the tax year). Business mileage (1/1/22 - 6/30/22). Business mileage (7/1/22 - 12/31/22). Commuting mileage (for the tax year). Average daily round-trip commute. Number of months of business use if changed from 100% personal use. Parking fees and tolls (business portion only). Actual expenses: 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 and F). Vehicle rent or lease payments. Inclusion amount (enter as positive).			•	<u> </u>			
Description of vehicle Date placed in service (m/d/y) Total mileage (for the tax year) Business mileage (1/1/22 - 6/30/22). Business mileage (7/1/22 - 12/31/22) Commuting mileage (for the tax year) Average daily round-trip commute Number of months of business use if changed from 100% personal use Parking fees and tolls (business portion only) Actual expenses: 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 and F) Vehicle rent or lease payments Inclusion amount (enter as positive)	V	alue of emplog	yer-provided v	ehicle on Form W-2 (2106)			
Date placed in service (m/d/y) Total mileage (for the tax year)  Business mileage (1/1/22 - 6/30/22).  Business mileage (7/1/22 - 12/31/22)  Commuting mileage (for the tax year)  Average daily round-trip commute  Number of months of business use if changed from 100% personal use Parking fees and tolls (business portion only)  Actual expenses:  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 and F)  Vehicle rent or lease payments Inclusion amount (enter as positive)	VEH	HICLE 2					
Total mileage (for the tax year)  Business mileage (1/1/22 - 6/30/22).  Business mileage (7/1/22 - 12/31/22)  Commuting mileage (for the tax year).  Average daily round-trip commute  Number of months of business use if changed from 100% personal use Parking fees and tolls (business portion only).  Actual expenses:  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 and F)  Vehicle rent or lease payments Inclusion amount (enter as positive)	Descr	iption of vehic	:le				
Business mileage (1/1/22 - 6/30/22).  Business mileage (7/1/22 - 12/31/22)  Commuting mileage (for the tax year).  Average daily round-trip commute  Number of months of business use if changed from 100% personal use  Parking fees and tolls (business portion only)  Actual expenses:  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 and F)  Vehicle rent or lease payments  Inclusion amount (enter as positive)	Date	placed in serv	ice (m/d/y)				
Business mileage (7/1/22 - 12/31/22)  Commuting mileage (for the tax year)  Average daily round-trip commute  Number of months of business use if changed from 100% personal use  Parking fees and tolls (business portion only)  Actual expenses:  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 and F)  Vehicle rent or lease payments  Inclusion amount (enter as positive)	Total	mileage (for the	he tax year)				
Commuting mileage (for the tax year)  Average daily round-trip commute  Number of months of business use if changed from 100% personal use  Parking fees and tolls (business portion only)  Actual expenses:  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 and F)  Vehicle rent or lease payments  Inclusion amount (enter as positive)							
Average daily round-trip commute  Number of months of business use if changed from 100% personal use  Parking fees and tolls (business portion only)  Actual expenses:  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 and F)  Vehicle rent or lease payments  Inclusion amount (enter as positive)							
Number of months of business use if changed from 100% personal use  Parking fees and tolls (business portion only)  Actual expenses:  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 and F)  Vehicle rent or lease payments  Inclusion amount (enter as positive)				The state of the s			
Parking fees and tolls (business portion only)  Actual expenses:  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 and F)  Vehicle rent or lease payments  Inclusion amount (enter as positive)				F			
Actual expenses:  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 and F) Vehicle rent or lease payments Inclusion amount (enter as positive)		•	olls (business p	portion only)			
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 and F)  Vehicle rent or lease payments  Inclusion amount (enter as positive)							
Insurance.  Miscellaneous.  Auto license (other than personal property taxes)  Personal property taxes (based on car's value)  Interest (car loan) (for Schedule C, E and F)  Vehicle rent or lease payments  Inclusion amount (enter as positive)		•					
Miscellaneous Auto license (other than personal property taxes)  Personal property taxes (based on car's value) Interest (car loan) (for Schedule C, E and F)  Vehicle rent or lease payments Inclusion amount (enter as positive)							
Personal property taxes (based on car's value) Interest (car loan) (for Schedule C, E and F) Vehicle rent or lease payments Inclusion amount (enter as positive)							
Interest (car loan) (for Schedule C, E and F)  Vehicle rent or lease payments  Inclusion amount (enter as positive)	А	uto license (ot	ther than perso	onal property taxes)			
Vehicle rent or lease payments	Р	ersonal prope	rty taxes (base	ed on car's value)			
Inclusion amount (enter as positive)	In	nterest (car loa	an) (for Sched	ule C, E and F)			
	V	ehicle rent or	lease paymen	ts			
Value of employer-provided vehicle on Form W-2 (2106)	In	nclusion amou	nt (enter as po	ositive)			
	V	alue of emplog	yer-provided v	ehicle on Form W-2 (2106)			

22	1040	US	Foreign Income Exclu	ision (Form 2555)	No.	31.1
			<u> </u>			
			Please enter all pertinent 2	2022 information.		
^ F.			•			
	NERAL IN					
			ifferent from Form 1040:			
	•					
Emplo						
U.	.S. city					
Eı 3=	mployer type: =self. 4=foreigi	1=foreign e	ntity, 2=U.S. company, J.S. company, 5=other			
Type	of exclusion re	voked if revo	ked in earlier year (if applicable):	Tax year revocation was effective		
					-	
					-	
	,	•				
City a	nd country of s	separate fore	ign residence if maintained due to icable):	Number of days during tax year at separate foreign address (if applicable)		
auron	oo nang oona.	( 466		Toreign address (if applicable)		
Tax h	omes(s) durinç	n tax vear·		Dates tax home(s) were established (m/d/y)		
Tax III	ornos(s) darin	g tax your.		established (Hivery)		
-						

22	1040	US	For	eign Income E	xclusi	on (2555)	)	No.	31.1 p
			Р	lease enter all perti	nent 202	2 informatio	n.		
TRA	AVEL INF	ORMATIO	ON						
	E: Please ente el Type (table			well as travel for 2023 kn (if not United States)		e. arrived	Date left	Days in U.S	. on business
	, , , , , , , , , , , , , , , , , , ,			,				,	
				EST AND PHYSIC		ESENCE	TEST		
•	•		-	n/d/y)					
Living	quarters in fo	oreign country	: 1=purch	nased home, 2=rented ho furnished by employer	use				
		broad with taxpay			elationship		Period	I family lived abroa	ad
1=suh	mitted statem	nent to country	v of bona	fide residence					
1=req	uired to pay i	ncome tax to	country o	f bona fide residence					
			_	ployment abroad					
				ountry (if applicable)					
		n U.S. maintaiı (if applicable)					ZIP Code		S. home rented applicable)
	Names	s of occupants	in U.S. I	home (if applicable)		Relationship	of occupants in U.	S. home (if appli	cable)
Princi	pal country of	f employment							
		DUSING E				2022 Am	ount	2021 Amou	ınt
	ion of housing e	•				Qualifying o	days in location (m	l nultiple locations o	only)
					vel Type				
				1 = Travel to L 2 = Travel to fo 3 = Travel to re	oreign count	ry			
				5 - Haver to le	-511 1010U CUL	y			

31.1 p2

Foreign Income Exclusion (Form 2555) 1040 US 31.2 2022 No.

Please enter all pertinent 2022 amounts and attach all W-2 forms, or other wage statements.

OREIGN WAGES, SALARIES, TIPS	2022 Amount	2021 Amount
ame or number		
=spouse		
retirement plan (Box 13)		
ame of employer (Box c)		
ages, tips, other compensation (Box 1)		
ederal income tax withheld (Box 2)		
ocial security tax withheld (Box 4)		
edicare tax withheld (Box 6)		
tate income tax withheld (Box 17)		
ocal income tax withheld (Box 19)		
	AND OTHER EARNER	NOOME
OREIGN ALLOWANCES, REIMBURSEMENTS A loncash Income	AND OTHER EARNED I	NCOME
ome (lodging)		
eals		
ar		
ther properties or facilities:		
ther properties of facilities.		
	1	
llowances and Reimbursements		
ost of living and overseas differential		
amily.		
ducation		
ome leave.		
uarters		
ther purposes:		
inei puiposes.		
eals and lodging provided for the convenience of the mployer (excludable under section 119)		
mployer (excludable under Section 117)		
ther Foreign Earned Income		
and I ordigit Latrica income	1	
022 Days Worked Allocation Information		
022 Days Worked Allocation Information		
022 Days Worked Allocation Information otal number of days worked (if not 240) otal days worked before and after foreign assignment		

2022 1040 US Health Savings Accounts (8889) 32.1

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. 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 the 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.

	2022 Amount		2021 Am	nount
	Taxpayer	Spouse	Taxpayer	Spouse
1=self-only coverage, 2=family coverage				
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)				
Contributions included above that were made after you became eligible for Medicare				
Contributions made to date				
HSA DISTRIBUTIONS				
Total HSA distribution received (1099-SA, box 1)				
Distributions included above that were rolled over to another HSA.				
Total unreimbursed qualified medical expenses				

22	1040	US/CA	Child and De	ependent Care	Expenses (Fo	orm 2441)	33.1,33.2
ease e paid	nter all pe for the ca	ertinent 2022 are of one or	information. Last ye more dependents e	ear's amounts are pr nabling you to work	ovided for your refer or attend school to o	rence. You must qualify for this cr	have edit.
DEF	PENDEN	IT CARE E	XPENSES (33.1)	2022 A Taxpayer	mount Spouse	2021 Amou Taxpayer	nt Spouse
		openses incurred I benefits forfeite	but not paid in 2022 d in 2022		Spouse	Тахраусі	Эроизс
PER	RSONS	AND EXPE	NSES QUALIFY	ING FOR DEPEN	NDENT CARE CR	REDIT	
No.	L	ast name	/y) mber ent care expenses in 2022			2021 amt:	
	1	=spouse, 2=joint	t				
No.		ast name itle or suffix Date of birth (m/d	/y)mber				
	iı   1	ncurred and paid =disabled	ent care expenses in 2022			2021 amt:	
PFRS	SONS O	R ORGAN	IZATIONS PROV	/IDING CARE (33	3 2)		
PERS	N S C C S Z	Jame of provider Street address City State			3.2)		
PERS	N S C S Z A	Street address City City City City City City City City	re provided (if different): ess ZIP code		3.2)		
	7 1 1 1 1	Jame of provider Street address City State CIP code Address where ca Street addre City, state, 2 Felephone number dentification num eorganization is ecare provider is	ure provided (if different): uss ZIP code		3.2)		

33.1,33.2

MOMINIZER					rage 7
2022	1040	US	Education Credits / Tuition Deduction	No.	38

Please complete the information below if you paid qualified education expenses in 2022 for you,

STUDENT INFORMATION		
1=taxpayer, 2=spouse		
First name.		·
Last name		
Social security number		
Number of years hope credit claimed		
1=student was NOT enrolled at least half-time for at least one academic period that began in 2022 (or the first 3 months of 2023 if the qualified expenses were made in 2022) at an eligible institution in a qualified program		
1=student completed first four years of post-secondary education before 2022 1=student was convicted, before the end of 2022, of a felony for possession or distribution of a controlled substance.		
EDUCATIONAL INSTITUTION ATTENDED (#1)		
Name		
Street address		
City		
State		
ZIP code		
1=2022 Form 1098-T received with Box 2 & 7 completed		
1=2021 Form 1098-T received with Box 2 & 7 completed		
Federal ID number from Form 1098-T		
City. State ZIP code  1=2022 Form 1098-T was NOT received 1=2022 Form 1098-T received with Box 2 & 7 completed 1=2021 Form 1098-T received with Box 2 & 7 completed Federal ID number from Form 1098-T		
QUALIFIED EDUCATION EXPENSES	2022 Amount	2021 Amount
Qualified tuition & fees paid in 2022 (net of refund or assistance, & not entered elsewhere)		
Books & supplies required to be purchased from institution		
Books & supplies not entered above  Amount of prior year refund or assistance *		

2022 1040 US Household Employment Taxes (Schedule H)

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

## HOUSEHOLD EMPLOYMENT TAXES

NOTE:If you paid any one household employee cash wages of \$2,400 or more in 2022; withheld federal income tax during 2022 for any household employee; or paid total cash wages of \$1,000 or more in any calendar quarter of 2021 or 2022 to household employees, please complete the following:

=spouse, 2=joint		
ocial security, Medicare and income taxes:	2022 Amount	2021 Amount
1=paid any one employee cash wages of \$2,400 or more		
1=withheld federal income tax for household employee		
Total cash wages subject to social security taxes		
Total cash wages subject to Medicare taxes		
Federal income tax withheld		
Taxes withheld from state disability payments		
1=paid total cash wages of \$1,000 or more in any calendar quarter of 2021 or 2022		
Total cash wages subject to FUTA tax		
1=paid unemployment contributions to only one state		
1=paid all state unemployment contributions by 4/17/23		
1=all wages taxable for FUTA were also taxable for state unemployment.		
· · · · · ·		
Name of state		

42

22	1040	US	Parent's Election to Repo	rt Child's Inc.	No.	44
	Plea	se enter a	Il pertinent 2022 amounts & attach al		OIV forms.	
CLIII	ו חיכ ואורנ		Last year's amounts are provided for	or your reference.		
СНІ	LD'S INFO	JRIVIATIC	JN			
	name					
	name I security numb					
	of birth (m/d/y)					
	ntaxable to fede					
	ntaxable to stat					
INTI	EREST IN	COME (F	Form 1099-INT)			
	s, credit unions	•	•	2022 Amount	2021 Amount	
24	of or our armono	, 0.0. (20/)		2022 Amount	2021 Amount	
•						
U.S. b	onds, T-bills, e	etc. (nontaxal	ble to state) (Box 3):			
Tay o	vomat interest					
	xempt interest: otal municipal l					
	•					
	tments:					
•		ıtion				
Ad	ccrued interest					
Ta	ax-exempt inte	rest (1099-IN	T in error)			
	•					
Foreig						
		,	foreign account			
	_	=	ed distribution from foreign trust			
	•		interest (included above) (6251)			
DIVI	IDEND IN	COME (F	orm 1099-DIV)			
	ordinary divide	·	·			
· otal·	oramany arriao	(20%)				
Qualif	ied dividends (	Box 1b)				
Total	capital gain dis	stributions (Bo	ox 2a):		1	
Uproc	antured costin	1250 asis //	Pov 2h)			
	•	-	Box 2b)			
	•	· ·				
	_					
	xempt interest:		_			
In	-state municipa	al bonds				
	nee distribution					
	•					
0.						
		inutions			i i	
Ca			included above			

2022 1040 US Report of Foreign Bank and Financial Accounts 82.1

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

GENERAL INFORMATION	2022 Amount	2021 Amount
Canadian province or Mexican state		
Other type of filer		
Foreign identification:		
Taxpayer:		
1=passport, 2=foreign TIN		
Other type of identification		
Number		
Country of issue		
Spouse:		
1=passport, 2=foreign TIN		
Other type of identification		
Number		
Country of issue		
Taxpayer:		
Title		
Spouse:		
Title		

Page 94

					20.0
2022	1040	US	Report of Foreign Bank & Fin. Accts.	No.	82.1 n2

DI					
Please enter all	pertinent 2022 amounts.	Last v	rear's amounts a	are provided i	for vour reference.

INFORMATION ON FINANCIAL ACCOUNTS	2022 Amount	2021 Amount
1=spouse.		
Type of account: 1=bank account, 2=securities account, or specify		
Maximum value of account (-1 if unknown)		
Financial institution:		
Name of institution (Line 1) (mandatory)		
Name of institution (Line 2)		
Mailing address		
Account number		
City		
State		
ZIP/postal code		
Country (if not US)		
Accounts owned jointly:		
Number of joint owners (Mandatory for Part III accounts) (-1 if joint owner is joint filer)		
Principal joint owner:		
Taxpayer identification number, if not joint filer		
TIN type: 1=EIN, 2=SSN/ITIN, 3=foreign , 4=unknown		
Last name		
First name		
Middle initial		
Address		
City.		
State		
ZIP/postal code		
Country (if not US)		
Accounts where filer has no financial interest:		
Last name or org. name (mandatory)		
First name		
Middle initial		
Taxpayer identification number		
TIN type: 1=EIN, 2=SSN/ITIN, 3=foreign , 4=unknown		
Address		
City		
State		
ZIP/postal code		
Country (if not US)		
Filer's title		

2022 1040 US Foreign Reporting (8938) No. 82.2 p2

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

## FOREIGN DEPOSIT AND CUSTODIAL ACCOUNTS (Part I)

_	2022 Amount	2021 Amount
Description of asset		
Type of account: 1=deposit, 2=custodial		
Use financial institution information from Form 114		
Financial institution information (if not filing Form 114):		
Maximum value of account during year		
Name of institution		·
Account number (mandatory for part I)		
Mailing address of institution		
City of institution		
State/province of institution		
Postal code of institution		
Country of institution		
1=account opened during year		
1=account closed during year		
1=account jointly owned with spouse		
1=no tax item in Part III with respect to this account		
1=used foreign currency exchange rate to convert value to US dollars		
Foreign currency in which account is maintained		•
Foreign currency exchange rate (xxxx.xxxx)		
Source of exchange rate		<u>'</u>
OTHER FOREIGN ASSETS (Part II)		
Identifying number or other designation (mandatory for part II)		
Date asset acquired during year (m/d/y)		
Date asset disposed of during year (m/d/y)		
1=jointly owned with spouse		
1=no tax item in Part III with respect to this asset		
Maximum value of asset during year		
1=used foreign currency exchange rate to convert value to US dollars		
Foreign currency in which asset is denominated		
Foreign currency exchange rate (xxxx.xxxx)		
Source of exchange rate		
Foreign entity information (complete if stock or interest):		
Name of entity		
Type of entity		
Mailing address of entity		
City of entity		
State/province of entity		
Postal code of entity		
Country of entity		
1		
Type of Er	ntity	
1 = Partner		
2 = Corpora 3 = Trust	ation	
4 = Estate		

82.2<sub>p2</sub>

22	1040	US	Foreign Reporting (8938) (continued)	No.	Page 82.2
	Please en	ter all per	tinent 2022 amounts. Last year's amounts are provided fo	or your refe	rence.
ОТН	ER FOREIG	N ASSETS	6 (Part II) (continued)		
	or counterpart				
	•	, , ,			
		. ,	(see table 2)		
			person, 2=foreign person		
			3 ,		
	· ·				
	•				
	•				
	or counterpart				
	•				
		. ,	(see table 2)		
	•		person, 2=foreign person		
			3 ,		
	· ·				
	•				
	•				
	or counterpart				
		•			
			(see table 2)		
_		. ,	person, 2=foreign person		
	· ·				
	•				
	•				
	or counterpart				
	•				
			(see table 2)		
	•		person, 2=foreign person		
		. , ,	3 4		
	•				
	•				
	'				
	3 di				
			2		
			Type of Issuer or		
			Counterparty		
			1 = Individual 2 = Partnership		
			3 = Corporation 4 = Trust		