

| Name: | | | |
|-------|--|--|--|
| | | | |

2023 TAX ORGANIZER

Please check the kind of income you received or got notice of

| Business Income Farm Income Rental Income Royalty Income Sale of Stocks, Bo | income 9s ailroad retirement onds, or other securit e te or Trust Income (this year) (prior years) s over \$17,000 | Tax exe Pension Pension IRA, SEF Military Veteran's Barter/T Unemple ties Worker's Lump su Gamblir Scholars Cancella | Tips not reported to your employer Tax exempt interest Pensions or annuities-taxable Pensions or annuities-nontaxable IRA, SEP or KEOGH distributions Military pay Veteran's benefits Barter/Trade Income Unemployment income Worker's Comp/Sick Pay/Disability Lump sum payments from a pension plan Gambling or Lottery winnings Scholarship or grant Cancellation of debt or mortgage Jury Duty Digital Assets received, sold, sent, exchanged | | | | |
|---|--|--|---|--------------|--|--|--|
| Estimate | Federal \$\$ | Date paid | State \$\$ | Date paid | | | |
| Last Year 4 th Q | | | | | | | |
| 1 _{st} Quarter | | | | | | | |
| 2 _{nd} Quarter | | | | | | | |
| 3rdQuarter | | | | | | | |
| 4thQuarter | | | | | | | |
| Do you want direct d Do you want to pay y Name of Bank | | □ Yes □ Yes | □ No □ No | | | | |
| Name of Bank | | Routing # | | | | | |
| Acct # Checking Savings | | | | | | | |
| Are you paying back Do you have a foreign | • | | ☐ Yes ☐ Yes | □ No □ No | | | |
| At any time during 2023, did you: (a) receive (as a reward, award, or payment for property or services); (b) sell, exchange, gift, or otherwise dispose of a digital asset (or a financial interest in a digital asset)? □ Yes □ No | | | | | | | |

| MEDICAL EXPENSES Prescription medicine and drugs \$ Doctors, Dentists, Hospitals \$ Health/Dental/Vision premiums \$ | | | CONTRIBUTIONS Contributions (cash or check) \$ (You must have receipt for all contributions) Volunteer miles | | |
|---|---|-------------------------------|---|----------------------------|--|
| Self Employed Long Term Care Premiums Other (eyeglasses, hearing aids) Medical Miles (# of miles) HDHP/HSA Accounts | Non-Cash Contributions eglasses, hearing aids) \$ (Over \$500 please itemize (Provide Form 1098-C for | | \$on a separate sheet) | | |
| Form 1095-A Received? | ☐ Yes | □ No | | | |
| STATE AND LOCAL TAXES Property taxes on your home Portland Art Tax Paid INTEREST EXPENSE | \$ \$ | | MISCELLANEOUS EXPENSE: Educator Expenses paid Tax Preparation Student Loan Interest Tuition and Fees | \$ \$ \$ \$ \$ | |
| Home Mortgage interest Second Mortgage / Line of Cred Second home interest (Trailer, Motor Home, Housebox Mortgage Insurance Investment Interest | it \$ \$ at) | | Additional College Costs | \$ | |
| OTHER Expenses of reservists, performing Moving Expenses for members | _ | | _ | \$ \$ | |
| Alimony income received or alin Individual who received/paid ali Date of when the spousal agree | mony - So | | | \$ | |
| Self Employed retirement contr | ibutions | ☐ SEP IRA | ☐ SIMPLE IRA ☐ 401K | \$ | |
| Individual Retirement Contribut You \$ Spouse \$ | | | nal IRA 🔲 ROTH IRA | | |
| Energy Efficient Home Improver | nents \$ | | | | |
| OREGON | | | | | |
| Did you contribute to a 529 plar Political Contributions \$ | | | | | |
| OTHER TAX MATTERS (Check an Did you receive letters from the Did you refinance your home? Blind or disableled? Use convertible digital assets (li | e IRS or stat Buy a new h | e tax agency nome? Sell yo | , , , | nsaction? | |

^{*}Please supply all tax documents such as W-2s, 1099s, 1098s, K-1s, property tax and closing statements.