<u>ORGANIZER</u>				
2022	1040	US	Tax Organizer	
	804 Loc Escond Telepho Fax nun		ce	Tax Return Appointment Date: Time: Location:
of: school red records, plac NOTE: If you	claim the earn cords or statem ement agency or child is disable	of your 2 ned income creatent, landlord of statement, soo led, please pro	O22 tax return. Please ented this, please provide proof that your concept property management statement, clail service records or statement, playide one of the following forms of provide one of the following forms of processing the statement of	ing information necessary for the preparation all pertinent 2022 information. Thild is a resident of the United States. This proof is typically in the form health care provider statement, medical records, child care provider acc of worship, Indian tribal office statement, or employer statement. The order of disability: doctor statement, other health care provider statement,
	vices agency or INFORMA	. 0	_	Spouse
First name a	and initial			
Last name				
Social secur	itv number			
Date of birth	(m/d/y)			
Date of deat	h (m/d/y)			
Home phone	7			

RG/	ANIZER																
20)22	1040	US	<u>ا</u> ا	Na	ges	s, F	ens	sic	ns, Gam	bling V	Vinn	ings			10, 1	3.1, 13.2
	WAG	Ple ES, SAL		Ī	_ast	yea	202 r's a	2 amo mour	oun its	nts & attach a are provided	all W-2, W- I for your i	2G ar refere	nd 1099 nce.	9-R fo	rms.		
				1=ret	ireme	nt	Wage	es, Tips	s,			Tax W	ithheld				
No.	Name	of Employer	(Box c)	plan (1=spou		(3)	Comp	Other Densation Box 1)	on	Federal (Box 2)	Social Security (Box 4)		dicare ox 6)		tate ox 17)	Local (Box 19)	2021 Wages
	PENS	SIONS, IF	RA DIS	TRIB	UTI	ON	S (13.1)									
		·						ode #2			1		Та	x Withh	neld	Value of	
No.		Name of	Payer		1=IR/		on cod	- 1		Gross Distribution (Box 1)	Taxak Amou (Box 2	ınt	Feder (Box		State Box 14)	all IRAs at 12/31/22	2021 Distribution
								+									
								$\frac{1}{1}$									
	GAM	BLING W	/INNIN	GS (\	N-2	G) ((13.	.2)									
						Ť	<u> </u>	<u>.</u>		rocc Winnings			Tax V	Vithheld	k		
No.		Name	e of Payer	-			1=sp	ouse	G	ross Winnings (Box 1)	Federal (I	3ox 4)	State	(Box 15	5) Loca	al (Box 17)	2021 Winnings
	GAM (13.2)	BLING L	OSSES	S & W	/INI	IIN	GS	(NO	N '	W-2G)	วกวร	2 Amou	nt	TS		2021 Amount	
	Total ga	mbling losses									2022	. ,00		13		- Zanount	

2022 1040 US Interest & Dividend Income	11, 12	2
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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 David			Interest Income		Tay Evom	pt Interest	Early	
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	Early Withdrawal Penalty (Box 2)	2021 Interest

DIVIDEND INCOME (12)

		1_taynayor		Di	vidend Incor			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	Farm Income (Schedule F/	Form 4835)	No.	19
	Please en	ter all pert	inent 2022 amounts. Last year's amou	unts are provided for	your reference.	
GEN	NERAL IN	IFORMAT	ΓΙΟΝ			
	pal product					
Emplo	yer ID numbe	r				
Accou 1=spo 1=farn Type o 1=crop If requir 1=did	nting method: buse, 2=joint m rental (Form of rental prope p insurance pr red to file Form(s) not "material!	1=cash, 2=a 	tal only): 1=land, 2=self-rental, 3=other on r will you file all required Form(s) 1099: 1=yes, 2=no (Schedule F only) rm rental only)			
	= :		rental only)			
			company			
% of c	ownership if no	ot 100% (.xxx	x) (Farm rental only)			
FAR	SW INCOM	ΛE				
Cash i	method:			2022 Amount	2021 Amount	
			resale items			
			ther resale items			
	ales of product al method:	is raised				
		ck. produce. e	etc			
			ock, etc.			
			sed			
Er	nding inventor	y of livestock	, etc			
Other	farm income:		<u> </u>			
To	otal cooperativ	e distributions	S			
	•		ons			
	_		yments (other than CRP)			
	axable agricult	ural program	payments (other than CRP)			
			· ·			
To			ogram payments			
To Ta	axable conserv	ation reserve	ogram payments			
To Ta Co	axable conservommodity cred	vation reserve lit loans repor	ogram payments program payments rted under election			
To Ta Co To	axable conservolumedity crecontal commodity	vation reserve lit loans repor y credit loans	ogram payments program payments rted under election forfeited or repaid			
To Ta Co To Ta	axable conservolumedity crecontal commodity axable commodity	vation reserve lit loans repor y credit loans dity credit loa	ogram payments e program payments red under election forfeited or repaid uns forfeited or repaid			
To Ta Co To Ta	axable conserve ommodity crecotal commodity axable commo otal crop insur	vation reserve lit loans repor y credit loans dity credit loa ance proceed	ogram payments e program payments rted under election forfeited or repaid ens forfeited or repaid s received in 2022			
To Ta Co To Ta To	axable conservommodity crecotal commodity axable commodity axable commodity axable crop insuraxable crop crop insuraxable crop crop crop crop crop crop crop crop	vation reserve lit loans repor y credit loans dity credit loa ance proceed surance proce	ogram payments e program payments red under election forfeited or repaid uns forfeited or repaid			

22	1040	US	Farm Income (Sch. F/Form	m 4835) (cont.)	No.	19 p2
	Please en	iter all pert	tinent 2022 amounts. Last year's amo	ounts are provided for y	our reference.	
	RM INCO	ME (cont	inued)			
Other	income:			2022 Amount	2021 Amoun	t
		NOFO				
	RM EXPE		ered elsewhere)		Г	
			ered ersewriere)			
Empl	oyee benefit p	rograms				
Feed	purchased					
_	,	•				
			, etc.)			
			/here)			
Labor	hired					
Pensi	ion and profit	sharing - cont	tributions			
			- admin. and education costs			
		=	equipment (not entered elsewhere)			
-	s and plants p		—			
Supp	lies purchased	1				
	-	-	expenses (also enter below)			
	expenses:	luctive period	expenses (also enter below)			
		NOTE:	If you purchased or disposed of any business as	sets, please complete Sheet 2	2.	
						19 _{p2}
						1 7 p2

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	FYDFNISFS
MEDICAL	AND DENIAL	EVLEINDED

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:			
TAXES PAID (State and local withholding and 2022 estimates are auto	matic.)		
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			
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			
Sales tax on boats, aircraft, other special items			
OTHER TAXES PAID			
Real estate taxes - principal residence:			
· ·			
Real estate taxes - held for investment :			
Personal property taxes (including auto fees in some states. Provide a copy of tax notice)			
Foreign income taxes			
Other taxes:			
Other lanes.			

25

			Itemized Deductions (c				25
	Please enter	all pert	nent 2022 amounts. Last year's	amounts are provide	ed for yo	ur reference.	
		-	-	·			
IINIE	EREST PAII	ט					
Home	mortgage int. (Bo	ox 1) and	points (Box 2) reported on Form 1098:	2022 Amount	TS	2021 Amoun	it
-							
-					++		
- F	Home mortgage i	interest no	t reported on Form 1098:				
	Payee's name		reported on room royer				
	Payee's SSN or F						
	Payee's street ad						
	Payee's city						
	Payee's state	_					
	Payee's ZIP code	_					
	Payee's region Payee's postal co						
A	Amount paid						
	not reported on		<u></u>				
_							
_							
•	•		post 12/31/06 contracts (Box 4)				
Invastr	ment interest (int	terest on n	nargin accounts):				
iiivesti	·						
-							
- Passiv NOTE	e interest E: Points paid on For these types	loans others of loans a	er than to buy, build, or improve your main also provide the dates and lives of the loan	home are deductible over ts.	he life of th	ne mortgage.	
- Passiv NOTE	e interest E: Points paid on For these types H CONTRI	loans others of loans a	er than to buy, build, or improve your main also provide the dates and lives of the loan				iion
Passiv NOTE CAS NOTE	E: Points paid on For these types SH CONTRI E: No deduction is from the donee thes, schools, hos	loans others of loans a BUTIO s allowed for showing spitals, and	r than to buy, build, or improve your main also provide the dates and lives of the loan NS or cash or check contributions unless the date name of the organization, contribution other charitable organizations (60% limita	onor maintains a bank reco date(s), and contribution an			ion
Passiv NOTE CAS NOTE	e interest E: Points paid on For these types SH CONTRI E: No deduction is from the donee	loans others of loans a BUTIO s allowed for showing spitals, and	r than to buy, build, or improve your main also provide the dates and lives of the loan NS or cash or check contributions unless the date name of the organization, contribution other charitable organizations (60% limita	onor maintains a bank reco date(s), and contribution an			iion
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Passiv NOTE CAS NOTE	E: Points paid on For these types SH CONTRI E: No deduction is from the donee thes, schools, hos	loans others of loans a BUTIO s allowed for showing spitals, and	r than to buy, build, or improve your main also provide the dates and lives of the loan NS or cash or check contributions unless the date name of the organization, contribution other charitable organizations (60% limita	onor maintains a bank reco date(s), and contribution an			iion
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Passiv NOTE CAS NOTE Church	Pe interest E: Points paid on For these types SH CONTRI E: No deduction is from the donee thes, schools, hos partributions by cather the contributions by cather the contributions of the co	loans others of loans a BUTIO s allowed file, showing spitals, and ash or check	r than to buy, build, or improve your main also provide the dates and lives of the loan NS or cash or check contributions unless the date name of the organization, contribution other charitable organizations (60% limitals).	onor maintains a bank reco date(s), and contribution an			ion
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Passiv NOTE CAS NOTE Church Co Vo Nu	Per interest E: Points paid on For these types SH CONTRI E: No deduction is from the donee thes, schools, hos pontributions by cather such that is a supplemental to the supplement of the supplemental to the suppleme	loans others of loans a BUTIO s allowed f e, showing spitals, and esh or check s (out-of-p ble miles	r than to buy, build, or improve your main also provide the dates and lives of the loan NS or cash or check contributions unless the dathen ame of the organization, contribution other charitable organizations (60% limitals).	onor maintains a bank reco date(s), and contribution an tion):	ord, or a w	ritten communicat	iion
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Passiv NOTE CAS NOTE Church Co Nu Vetera Co	ve interest E: Points paid on For these types SH CONTRI E: No deduction is from the donee thes, schools, hos ontributions by can be sumber of charitable ans' organizations ontributions by can be something the second se	loans others of loans at BUTIO s allowed fee, showing spitals, and ash or check s (out-of-pole miles	r than to buy, build, or improve your main also provide the dates and lives of the loan NS or cash or check contributions unless the dathen ame of the organization, contribution other charitable organizations (60% limitals).	onor maintains a bank reco date(s), and contribution an tion):	ord, or a w	ritten communicat	iion
Passiv NOTE CAS NOTE Church Co Nu Vetera Co Vo	re interest E: Points paid on For these types SH CONTRI E: No deduction is from the donee thes, schools, hos pontributions by can be sometiment of charitable ans' organizations on tributions by can be sometiment.	loans others of loans at BUTIO s allowed fe, showing spitals, and ash or check s (out-of-pole miles s, fraternal ash or check s (out-of-pole miles s, fraternal ash or check s (out-of-pole miles s)	r than to buy, build, or improve your main also provide the dates and lives of the loan NS or cash or check contributions unless the dathen ame of the organization, contribution other charitable organizations (60% limitals). cocket)	onor maintains a bank reco date(s), and contribution an tion):	ord, or a w	ritten communicat	iion
Passiv NOTE CAS NOTE Church Co Nu Vetera Co Vo	re interest E: Points paid on For these types SH CONTRI E: No deduction is from the donee thes, schools, hos pontributions by can be sometiment of charitable ans' organizations on tributions by can be sometiment.	loans others of loans at BUTIO s allowed fe, showing spitals, and ash or check s (out-of-pole miles s, fraternal ash or check s (out-of-pole miles s, fraternal ash or check s (out-of-pole miles s)	r than to buy, build, or improve your main also provide the dates and lives of the loan NS or cash or check contributions unless the dathen ame of the organization, contribution other charitable organizations (60% limitals). ocket)	onor maintains a bank reco date(s), and contribution an tion):	ord, or a w	ritten communicat	ion

22	1040	US	Itemized Deductions (co	ntinued)		25
		=	tinent 2022 amounts. Last year's an	nounts are provided	d for you	ur reference.
	NCASH C			is allowed for contribution	uns of cloth	sing and household items
NOTE	that are not i	n <i>good</i> used	cash contributions are over \$500. No deduction condition or better. In addition, a deduction for	or any item with minimal	monetary v	value may be denied.
50% I	limitation (see	above):	r	2022 Amount	TS	2021 Amount
20% 1	limitation (see	abovo):				
30 /0 1	iiiiiitatioii (see	above).]			
30% (capital gain pro	operty (gifts	of capital gain property to 50% limit orgs.):			
20% (capital gain pro	operty (gifts	of capital gain property to non-50% limit orgs.)	:		
ST/	TE MISC	DEDS		CUITS & IORS	ACT (s)	shicet to 39/ ACI limit)
			IF NON-CONFORMING TO TAX	CUTS & JOBS	ACT (su	ubject to 2% AGI limit)
Union	and professio	onal dues	[ACT (su	ubject to 2% AGI limit)
Union	and professio	onal dues	r		ACT (su	ubject to 2% AGI limit)
Union	and professio	onal dues	[ACT (su	ubject to 2% AGI limit)
Union	and professio	onal dues	[ACT (su	ubject to 2% AGI limit)
Union	and professio	onal dues	[ACT (st	ubject to 2% AGI limit)
Union	and professio	onal dues	[ACT (su	ubject to 2% AGI limit)
Union Other profes	and professio	onal dues l employee e iptions, empl	[ACT (st	ubject to 2% AGI limit)
Union Other profes	and profession and profession and subscri	onal dues l employee e iptions, empl	[ACT (su	ubject to 2% AGI limit)
Union Other profes	and profession and profession and subscri	onal dues l employee e iptions, empl	[ACT (st	ubject to 2% AGI limit)
Union Other profes	and profession and profession and subscri	onal dues l employee e iptions, empl	[ACT (st	ubject to 2% AGI limit)
Union Other profes	and profession and profession and subscri	onal dues l employee e iptions, empl	[ACT (st	ubject to 2% AGI limit)
Union Other profes	and profession unreimbursed ssional subscri	employee e ptions, empl	[ACT (st	ubject to 2% AGI limit)
Union Other profes	tment expense	employee e iptions, empl	xpenses (uniforms and protective clothing, oyment agency fees, and certain edu. expense		ACT (su	ubject to 2% AGI limit)
Union Other profes Inves: Tax re Safe	tment expense eturn preparati deposit box rel	employee e ptions, emploses	xpenses (uniforms and protective clothing, oyment agency fees, and certain edu. expense		ACT (st	ubject to 2% AGI limit)
Union Other profes	tment expense	employee e ptions, emploses	xpenses (uniforms and protective clothing, oyment agency fees, and certain edu. expense		ACT (su	ubject to 2% AGI limit)
Union Other profes	tment expense eturn preparati deposit box rel	employee e ptions, emploses	xpenses (uniforms and protective clothing, oyment agency fees, and certain edu. expense		ACT (st	ubject to 2% AGI limit)
Union Other profes	tment expense eturn preparati deposit box rel	employee e ptions, emploses	xpenses (uniforms and protective clothing, oyment agency fees, and certain edu. expense		ACT (su	ubject to 2% AGI limit)

2	1040	US	Business Use of Home (F	orm 8829)	No.	2
	Please	enter 2022 Bu	indirect expenses in full. Nonbusine siness percentage will be applied to i	ss portion will carry ndirect expenses or	to Schedule A. nly.	
BUS	INESS U	SE OF H	IOME	2022 Amount	2021 Amount	
Form						
Numbe	er of form (e.g	g., enter 2 for	Schedule C number 2)			
Busine	ess use area (square foota	ge)			
Total a	rea of home	(square foota	ge)			
Total h	nours facility ι	ised (for day	care facilities only)			
Total h	nours available	e (if not 8,76	0)			
Area of h	home included ab	ove used exclus	vely for daycare business, if any (sq ft)			
% (.xx)) or amount o	f gross incor	ne from home if not 100% (-1 if none)			
% (.xx)) or amount o	f expenses f	rom home if not 100% (-1 if none)			
INDI	RECT EX	(PENSES				
NOTE:	Indirect expe	enses are for both the bus	keeping up and running your entire home. iness and personal parts of your home.			
Real es	state taxes					
	-					
•						
	indirect exper					
-						
-						
-						
					I	
DIRE	ECT EXP	ENSES				
NOTE:	Direct expen painting or re	ses benefit o epairs made	nly the business part of your home. They include to specific areas or rooms used for business.			
Mortga	ige interest					
Casual	Ity losses					
Insurar	nce					
Miscell	laneous					
Rent						
Repair	s and mainte	nance				
Utilities	S					
Excess	s mortgage in	terest				
Excess	s real estate t	axes				
Excess	s casualty los	ses		<u> </u>		
Allowa	ble casualty I	osses				
	direct expens					·

29

2022	1040	US	Vehicle Expenses (Form 2106) (cont.)		No.	30 p2						
Please enter all pertinent 2022 amounts. Last year's amounts are provided for your reference.												
VEH	HICLE INF	ORMATI	ON	2022 Amount	2021 Amount							
1=veh	nicle used prim	narily by more	than 5% owner	2022 / WHOCH	20217111001							
		=	personal use									
			personal use		_							
			duction									
I=no	written eviden	ice to support	your deduction									
VEHICLE 1												
Descr	iption of vehic	:le										
Date	placed in serv	ice (m/d/y)										
Total	mileage (for tl	he tax year)										
Busin	ess mileage (1/1/22 - 6/30/2	22)									
Busin	ess mileage (7/1/22 - 12/31	/22)									
Comm	nuting mileage	e (for the tax y	ear)									
	0	•	9									
			e if changed from 100% personal use									
	=	lls (business p	portion only)									
	I expenses:		Г									
	•											
_												
		•	onal property taxes)									
		=	ed on car's value)									
			ule C, E & F)									
			ositive)									
			ehicle on Form W-2 (2106)									
•	alue of emplo	yer provided v	2 (2100)									
VEF	HICLE 2											
Descr	iption of vehic	:le										
Date p	placed in serv	ice (m/d/y)										
Total	mileage (for tl	he tax year)										
			22)									
			/22) · · · · · · · · · · · · · · · · · ·									
Comm	nuting mileage	e (for the tax y	rear)									
			9									
			e if changed from 100% personal use									
	-	lls (business p	portion only)									
	l expenses:	oil.										
	•		•									
			onal property taxes)									
		•	ed on car's value)									
			ule C, E and F)									
			ts									
			ositive)									
			ehicle on Form W-2 (2106)									
•	5. omplo	, _F . 5	2 (2.00)		<u> </u>							

30 _{p2}