### TAX DEDUCTION LOCATOR & IRS TROUBLE MINIMIZER

### YOUR TAX APPOINTMENT

Please complete and sign this organizer prior to your appointment.

Please call to schedule your appointment. Try to call early before the calendar is booked up.

Please mail the completed organizer along with the requested information to this office prior to your appointment.

Please mail the completed organizer along with the requested information to this office so the return can be prepared by correspondence.

Your tax appointment is scheduled for:

Day:	
Date:	
Γime:	

Office Appointment Virtual Appointment

Please notify this office promptly if you are unable to keep this appointment.

### REFERRALS ARE ALWAYS **APPRECIATED**

If you know someone who would like a tax appointment, please have them call this office. Do not be concerned that your business, personal or financial matters will be discussed with clients whom you refer. All client information is treated in the utmost confidence.



Phone: 907-357-7707

email: court@countonaccounting.com Mailing: PO Box 872575, Wasilla AK 99687

Physical: 165 E Parks Hwy, Ste 104, Wasilla AK 99654

### IF YOU ARE A NEW CLIENT, BE SURE TO PROVIDE A COPY OF LAST YEAR'S TAX RETURN.

### SAVE TIME - READ THIS FIRST

This organizer is designed to assist and remind you of information that is needed to prepare your tax return. The goal is to not overlook anything so you can maximize your legal deductions, comply with government reporting requirements, and avoid problems with the IRS after the return is filed.

Taxes are complicated and the rules change constantly. This organizer was designed specifically for the 2022 tax year and certain items may not apply to other years. Although care has been taken to accommodate most taxpayers' needs, please note questions that are related to issues not included here under "Questions You May Have" in Section D6.

### **Section Categories**

To help you collect your information quickly, this organizer is organized into five general areas. Information required from:

- everyone Sections A1 A13 (Pages 2 & 3)
- those who itemize their deductions Sections B1 B11 (Pages 4 & 5)
- those with business or rental income Sections C1 C7 (Pages 6 & 7)
- business owners Pass-through deduction -Section D1 (Page 8).
- those who have relocated (military only), sold their home, made home energy improvements, or have debt relief income -Sections D2 - D6 (Page 8)

The instructions provided in the header of each section will help you determine if you are required to complete the information in that section.

If you paid foreign taxes (entered at Sections A10 or A11) and are a partner in a partnership or a shareholder in an S-Corporation, it is important that you so notify whoever is responsible for the entity's

Before proceeding, please take a moment to review the purpose of the SPECIAL MARKERS used throughout this organizer.



Your tax information from the prior year is automatically transferred to this year's tax return. Therefore, not all taxpayer data and contact info needs to be recorded. The marker signifies that returning clients need only enter data in that section if it has changed since the prior year or if there is new information.



This marker notes areas where the IRS can match the entry in their computer and incomplete or incorrect information can trigger government correspondence or, worse yet, an office audit. Pay particular attention to sections or individual entries with this symbol.



This flag symbol denotes areas where a deduction or item of income is to be treated differently when computing the alternative minimum tax (AMT). The AMT is another way of computing your tax liability, which applies more restrictive limits on certain deductions and preference income. If higher than the regular tax, the AMT applies.



This marker indicates payments that may require the issuance of a 1099 if, in the course of a trade or business (including most rentals), the annual amount paid to an individual is \$600 or more. Failure to file 1099s can lead to a loss of the tax deduction for that expense and failure to timely file the forms with the IRS and furnish copies to payees can result in substantial penalties.

# A - TAXPAYER INFORMATION The information on this page is required for every taxpayer. Please review each section on this page and report items that are applicable to you, your

spouse or dependents.

			FORMA1		ly.	₽ ↔			& ADJU		<u> </u>	You	Spouse
Filer Name 9 Birthda				Birtḥday	,	<u> </u>	W-2 Wages - Please provide W-2 Forms (retain copy "C" for your red Partnership, Trust or S-Corporation K-1s (provide complete K-1 cop				nd K-3s if is	sued	
(Must Match SS Admin)			/	/	Were you the b	eneficiary of a	. ,	Yes	Yes				
Social Secu (and IRS IP-PIN						executor or trustee if you will be receiving a K-1.  State Tax Refund (provide 1099-G)							
Driver's Licence (DL)			State	te   Social Security or RR (provide SSA-1099 or RRB-1099) Pension Income (provide all 1099-Rs) - enter IRA distributions in A7									
DL Issued D	. ,	/	/	DL Expires		/	Pension Income	ibutions in A/					
Contact Pho			,	DE EXPITES	<b>/</b> Day	Evening	Alimony Paid (p						
Email Addre						☐ Legally Blind Paid to: SSN:					SSN:		
_							Tips (not included in W-2s)						
Spouse Nan (Must Match SS					/	Birthday / Unemployment Compensation (provide 1099-G)							
Social Security No. (and IRS IP-PIN if issued)				A7 - IRA & RETIREMENT PLANS						You	Spouse		
Driver's Lice	ence (DL)				State		Retirement pla					☐ Yes	Yes
DL Issued D	ate	/	/	DL Expires	/	/	Did you or you	r spouse conve	ert a traditional	l IRA to a F	Roth IRA in 2022?	☐ Yes	Yes
Contact Pho	one			'	Day	Evening	Traditional	Contribution	ıs				
Email Addre	ess				☐ Legal	lly Blind	IRA, Keogh	Withdrawals	(1099-R) <sup>(1)</sup>				
A 2 - A	DDDE	C C				<b>O</b> .	& SEP Plans	Rollovers <sup>(2)(3)</sup>					
	DDRE ients can skip		except for chang	es.		<b>∀</b> ←	T turis	Basis (Total of	f your prior year no	on-deductib	le contributions)		
Street				Apt/Unit No	0		Roth IRA		vals (1099-R) <sup>(1)</sup>				
City				State	Zip		11041111111	Rollovers <sup>(2)(3)</sup>	, ,				
Home Phone Number (if different from above)			'		Coronavirus Amount Originally Distributed in 2020 (Maximum \$100,000)			0 (Maximum					
A3 - STATUS CHANGES FOR 2022				Distribution Amount Recontributed in 2022									
	nat apply and				<del>-</del>				1/2 (2) Must be re Roth IRA may be		if not taxable unless	directly "tran	sferred"
Married	t ,	′ /	Moved		/	/	A9 . S	PECIAL	OHES	TION	S & INEO		
Separat	ted ,	/ /	Home S	Sold	/	/	A8 - SPECIAL QUESTIONS & INFO						
Divorce	ed /		Spouse	Deceased	/	/					Distribution - provide		
Retired	/	′ /	Depend	lent Deceased	i /	/	HSA Contribut	<b>ion</b> other than	via employer		<b>Distribution</b> - provide	de 1099-SA	
			AXES PA		schodulad c	<b>Q</b>	Adoption Expen				Educator Expenses		
time. Therefor	re, please ente	r the amount	ited taxes were pa s and dates of pay	ment or provide	proof of pa						rt an interest in or sigr gn accounts, dealings,		
		lt in IRS or st	ate correspondenc						<u></u>		YOUR SPOUSE		
Applied from		Pofund	Date Paid	Federal	Stat	te			ds are not your		owner on a bank ac	count in a 1	oreign
First Quarte			/ /				Received an inheritance from someone in a foreign country.						
		•					Have a foreign bank account (over \$10,000 at any time in 2022)						
Second Qua	`	•	/ /				Received a distribution from, or were the grantor, or transferor to, a foreign tr						ıst
Third Quart	• • •	•	/ /				At any time during the year hold an interest in a foreign financial asset  Receive, sell, exchange or otherwise acquire a financial interest in virtual cur						
Fourth Qua			/ /				during th		or otherwise a	cquire a ni	nancial interest in v	/irtual curr	ency
			ECT DEP und automatically		vour bank	account.	☐ Invest in	a Qualified O	pportunity Fund	d during th	ne year		
Doing so will	l speed up the	e refund and	eliminate the dai	nger of a check	being lost	or	☐ Been der	nied Earned In	come Credit by	the IRS			,
			to up to 3 separa 1 to make multipl				☐ Been re-o	certified for the	e Earned Incom	e, Child Ta	x, or American Oppo	rtunity Cre	dit
additional ac	count inform	ation and ho	w you wish to allo	ocate the refund	d.						please call in advar		
Bank Name							☐ Made a g joint gift	ift of money o s by a married	or property to a couple) in 202	ny individu 2	ual in excess of \$16	,000 (\$32,0	000 for
Bank Routir	ng Number (	Exactly 9 Digit	5)				☐ Employ h	nousehold wor	kers				
Account Nu	count Number (include hyphens - omit spaces & special characters – 17 digits max)					Sell jewelry, gold, coins, or other precious metals during the year							
					☐ Filer ☐	<b>]</b> Spouse	You wish to co	ntribute to	the Presidential ca	ampaign fu	nd		

Savings

Allocation:

%

Checking

Account Type

## A - TAXPAYER INFORMATION The information on this page is required for every taxpayer. Please review each section on this page and report items that are applicable to you, your

spouse or dependents.

A9 - DEPE Returning clients need	NDENTS d only enter first names ar	nd any changes. Ente	r all the informa	tion for ne	w depende	nts.							9	
·	Last Name	Social Securit	_	1	F, M, G,		nths in Home			If		f over the age of 18		
First Name	(If Different)	(and, if issued, IRS			or HOH*	_	(Your Home)		Birth Date Income			Student		
									/ ,	′			☐ Yes	
									/ /	′			☐ Yes	
									/ ,	′			☐ Yes	
* Enter S-Son, D-Daugl	hter, F-Father, M-Mother, G	-Grandchild, or enter	other relationsh	ip. Enter H	IOH for nor	n-depe	endent Head of	Househol	d qualifier	S.				
	EREST INCOI		n 1099 even if no	ot the origi	inal source			Caution	ı: All inter	est must	be reported	even i	f tax-free!	
Name of Payer Please provide all forms 1099INT and 10990ID (Entries are not needed when 1099s are provided)		Banks, Credit Union, Corp Bonds, Seller Financed Mortgages, etc.	Foreign Tax or With		Saving Ronde		ds, T-Bills, etc.	T-Bills, etc. (Generally T		•	•		Other State (Federal Tax-Free)	
Forfeited Interest (e.	arly withdrawal penalty)				Federa	l Tax V	Witholding o	n Interest	: & Divid	ends				
					ed Mortg	-					'			
Daver Name			ller financed mortg	ages require	1		address of the pa	ayer.						
Payer Name:		SSN			Address	S.								
IRS matches payer an the various types of d	DEND INCOL d amount. Always use paye ividends. Please bring brol e of Payer	er name listed on 10				ne inst							parating  Non-Taxable	
Please provide	e all forms 1099DIV d when 1099s are provided)	Taxes Paid or Withheld	Ordinary Dividends	Qualif Divider		Capi Gair	_	99A idends	Source Obligati		Taxable State Or		State & Federal	
(1) Qualified dividends	s receive special tax treatn	nent and are include	d in the "Ordinar	y Dividend	ls" total. (2)	Includ	des income fro	m savings	bonds, T-E	sills, etc.,	which are st	ate ta	x-free.	
IRS matches gross pro	ESTMENT SA oceeds from sales using the e sales, see Section D2.		tions must be re	ported eve	en if there i	is no p	orofit. If broker	provides a	summary	of transa	actions, bring	j it and	<b>Q</b> I skip	
(Please provide all forms	<b>Description</b> 1099-B and any gain/loss state	ements provided by brol	(er) Inherited	? Date	e Acquirec	i	Date Sold	Sellin	ng Price		t or Other Basis <sup>(1)</sup>		<b>Profit</b> (Memo Only)	
			☐ Yes	/	′ /		/ /							
			☐ Yes	/	′ /		/ /							
			☐ Yes	/	′ /		/ /							
(1) The basis from whi	ich gain is determined may	y not be the original	cost and must a	count for	stock splits	s, rever	se splits, merg	ers, reinve	sted divide	ends, was	sh sales, etc.			
A13 - CHIL	LD OR DEPE	NDENT C	RE EXP	ENSE	S									
	to work (or search for wor ent, also see section C4. IR								o is physi	cally or r	mentally inca	apable	of self	
☐ Employer	provides dependent ca	re services 😌	Provider	's SSN or E	mployer IC	)#	Pa	yments M	IUST BE	Allocate	d by Child/	/Depe	ndent	
Paid To	Address & Ph	one Number	MANDAT	Provider's SSN or Er  MANDATORY unless it  organization (EO). If E			Child/Depnd	's Name:	Child/	Depnd.'s	Name: C	hild/D	epnd.'s Name:	

# D - BUSINESS DEDUCTION, RELOCATION, HOME SALE, DEBT RELIEF, ENERGY CREDITS

### D1 - SEC 199A DEDUCTION

Income passed through from a business activity via a K-I may qualify for a special tax deduction.

The information needed to compute this deduction is included on **the K-1 and a separate K-1 statement** where the business income or loss is from partnerships, S-corporations and trusts Please be sure to provide the supplemental statement along with any K-1 form you've received.

### **D2 - HOME SALE**

If you sold your home, abandoned it, or lost it to foreclosure, the disposition may need to be reported. If you received a 1099-S, it is very important that you provide it. If you abandoned the home or lost it to foreclosure, see Section D5.

	o foreclosure, see Section D5.	ou provide it. II you abandoned					
CHECK ALL THAT	APPLY						
Address of Home Sold	1						
Date Purchased		/ /					
Purchase Price (please	e provide purchase escrow statement)						
☐ You deferred ga Form 2119 for t	in from a home sale made prior to 5/7/ he year of sale.	1997. If so, please provide the					
Improvements to Hon	ne Sold (not maintenance)(provide list)						
Date of Sale	(Please bring FINAL closing escrow statement. This	/ /					
Sales Price	document will have the information needed for						
Sales Expenses	these entries.)						
You owned and (counting back)	used the home as your primary resident from the sale date)	ce for two of the prior five years					
Your spouse (if two of the prior	Your spouse (if married) owned and used the home as his/her primary residence for two of the prior five years						
If owned and used les	s than two years, give reason for sale:						
☐ If the home was center)	s ever used for business (such as a renta	l, home office or day care					
Any of the busir	ness use in the prior question was befor	e 5/7/97					
☐ The home was a	The home was acquired by tax-deferred (Sec 1031) exchange after 10/22/04						
You (and spouse within two year	e if married) have excluded gain from th s of the date of sale of this residence	e sale of a prior residence					
☐ The home was i	nherited (including from a deceased sp	ouse)					
The home was i	not used as your primary residence for a	ny period after 2008					
You previously	claimed the new or long time resident h	omeowner credit					
D3 - ENERGY CREDITS							
Enter only items cert	ified by the manufacturer to meet Gove	rnment energy standards.					
Did you have so home in 2022?	olar electric or solar water heating insta	lled on your main or second					
☐ Did you make e	nergy savings improvements to your ma	nin home in 2022?					

Did you purchase a new or used electric vehicle in 2022?

### **D4 - MOVING DEDUCTIONS**

For federal for years 2018 - 2025, allowed only for active duty members of the Armed Forces who move pursuant to a military order. There are no distance requirements for military change of station.

Check if employer reimbursed any amount of moving expense or home sale assistance

and provide the reimbur substitute statement)	and provide the reimbursement statement from the employer (Form 3903 or a substitute statement)							
A - Miles from Old Residence to New Job mile								
B - Miles from Old Residence to Old Job mil								
A minus B – if less than 50 miles, stop: no deduction allowed								
Commercial Mover		Truck Rental						
Temporary Storage (up to 30 days)	Lodging en route (no meals)							
Trailer Rental Highway Tolls								
Rental Fuel Costs Airfare								
# of owned vehicles driven to new home		Auto Travel		miles				
Boxes/Tape/Supplies Other:								

### **D5 - DEBT RELIEF & FORECLOSURE**

If you had debt totally or partially forgiven, you may be required to report debt relief income. This includes real estate mortgages, credit card debt, vehicle loans, etc. Debts discharged in bankruptcy and most forgiven student loans are not included. Please call the office in advance to discuss what additional documentation may be required.

#### **CHECK ALL THAT APPLY**

- You had any amount of credit card debt forgiven and provide a copy of the 1099-C you received from the financial institution
- You abandoned your home and provide a copy of the 1099-A and/or the 1099-C you received from the financial institution (also complete Section D2 home sale information)
- Your home was foreclosed upon or you sold it under a "short sale" agreement with the lender and provide a copy of the 1099-A and/or the 1099-C you received

## D6 - PAYCHECK PROTECTION PROGRAM (PPP) LOANS

If you obtained a PPP Loan during 2020 or 2021 for your business, please enter:

Amount of loan(s)	
Amount of loan(s) forgiven	
Amount of expenses used to qualify for forgiveness	

### **D7 - QUESTIONS YOU MAY HAVE**

If you need more space please include a separate note.

Filer Signature Date	Spouse Signature	Date						
/ /		/ /						
To the best of my knowledge, all the information contained within this document is true, correct and complete.								
D8 - SIGNATURE								