

# 2023 Tax Organizer

Please complete and return this organizer to us along with your tax documents.

If dropping off, call us at **636-435-1040** to schedule a drop-off appointment.

If mailing, please send to:

KW Income Tax Service  
c/o Ken Ward, CPA  
1286 Jungermann Rd., Suite F  
Saint Peters, MO 63376

**Upload your tax documents to us using our [secure web portal](#)!**

## **Personal Information (required)**

- ☐ Copy of your driver's license (new clients only or if renewed in 2023)
- ☐ Copy of your spouse's driver's license (new clients only or if renewed in 2023)
- ☐ Copy of your social security card (new clients only)
- ☐ Copy of your spouse's social security card (new clients only)
- ☐ Copy of your 2022 Federal and State Tax Returns (new clients only)
- ☐ Copy of voided check for direct deposit

## **Dependent(s) Information (required)**

- ☐ Copy of social security cards for each dependent (new clients only)
- ☐ Childcare provider statements with amount paid for each child.
- ☐ Proof of income of "adult dependents" living in your home (if applicable)
- ☐ Tax return of any dependents living in your home (if applicable)
- ☐ Form 8332 – signed release of claim for dependent exemption (if applicable)

## Personal Information

Taxpayer Information		Spouse Information					
Last Name (per your SS Card):		Last Name (per your SS Card):					
First Name:		First Name:					
Middle Name:		Middle Name:					
Social Sec. Number:		Social Sec. Number:					
Date of Birth:		Date of Birth:					
Occupation:		Occupation:					
Home Phone:		Home Phone:					
Cell Phone:		Cell Phone:					
Email:		Email:					
Best method to contact you:		Best method to contact you:					
Street Address		Apt. #	City	State	Zip Code		
<b>Filing Status (Check One)</b>							
<input type="checkbox"/> <b>Single</b>			<input type="checkbox"/> <b>Married Filing Jointly</b>				
<input type="checkbox"/> <b>Married Filing Separate</b> <i>If you file MFS and itemize your deductions your spouse must also itemize deductions.</i>		Spouse Name:			Spouse SSN:		
		<input type="checkbox"/> Yes	<input type="checkbox"/> No	Did you live with your spouse any time during 2023?			
		<input type="checkbox"/> Yes	<input type="checkbox"/> No	If yes, did you live with your spouse any time after June 30?			
<input type="checkbox"/> <b>Head of Household</b> <i>A qualifying person must have lived in your home for more than ½ of the year. However, a qualifying dependent parent does not have to live with you if in nursing facility.</i>		<input type="checkbox"/> Yes	<input type="checkbox"/> No	Did you pay more than ½ the cost of keeping up a home in 2023?			
		<input type="checkbox"/> Yes	<input type="checkbox"/> No	If married, did spouse live in your home last 6 months of year?			
		<input type="checkbox"/> Yes	<input type="checkbox"/> No	Was your home the main home of a dependent during the year?			
		<input type="checkbox"/> Yes	<input type="checkbox"/> No	Is a noncustodial parent eligible to claim the child as a dependent?			
<input type="checkbox"/> <b>Qualifying Widow(er)</b> <i>Must not have remarried in 2023</i>		<input type="checkbox"/> Yes	<input type="checkbox"/> No	Did your spouse die in 2022 or 2023?			
		<input type="checkbox"/> Yes	<input type="checkbox"/> No	Did a child live in your home who is also your dependent?			
<b>Dependents</b>							
Dependent's Full Name (First, Middle, Last)		Soc. Sec. Num.	Relationship?	Date of Birth	Months at Home	Full-Time Student?	Child-Care Paid?
<input type="checkbox"/> Yes	<input type="checkbox"/> No	Do you have any dependents under age 24 with investment income over \$2,200?					
<input type="checkbox"/> Yes	<input type="checkbox"/> No	Do you have any dependents under age 24 who are required or will file a return for 2023?					
<input type="checkbox"/> Yes	<input type="checkbox"/> No	Could another person qualify to claim any of your dependents? If yes, Who?					

## Questions

	Yes	No	<i>"You" refers to both yourself and spouse</i>
1.	<input type="checkbox"/>	<input type="checkbox"/>	Did you make any contributions to an IRA, 401K, Annuity, or Pension in 2023?
2.	<input type="checkbox"/>	<input type="checkbox"/>	Did you take any distributions from an IRA, 401K, Annuity, or Pension in 2023?
3.	<input type="checkbox"/>	<input type="checkbox"/>	Did you make cash charitable contributions of \$300 or more?
4.	<input type="checkbox"/>	<input type="checkbox"/>	Were you a victim of identity theft? If yes, submit the IRS letter with the 6-digit PIN
5.	<input type="checkbox"/>	<input type="checkbox"/>	Was your family covered the entire year with minimum essential health coverage?
6.	<input type="checkbox"/>	<input type="checkbox"/>	Did anyone have healthcare coverage through an employer? Provide the 1095-C
7.	<input type="checkbox"/>	<input type="checkbox"/>	Did anyone have healthcare coverage through the Marketplace? Provide the 1095-A
8.	<input type="checkbox"/>	<input type="checkbox"/>	Did the IRS or State garnish your refund?
9.	<input type="checkbox"/>	<input type="checkbox"/>	Do you owe any back taxes to the IRS/State/Local?
10.	<input type="checkbox"/>	<input type="checkbox"/>	Do you have any prior year unfiled tax returns with the Federal/State/Local?
11.	<input type="checkbox"/>	<input type="checkbox"/>	Do you have any delinquent student loans or owe back child support?
12.	<input type="checkbox"/>	<input type="checkbox"/>	Do you currently have an installment payment arrangement with the IRS/State?
13.	<input type="checkbox"/>	<input type="checkbox"/>	Did you file for bankruptcy in 2023?
14.	<input type="checkbox"/>	<input type="checkbox"/>	Did you have any debts cancelled or forgiven including credit cards?
15.	<input type="checkbox"/>	<input type="checkbox"/>	Were you divorced or separated during 2023? Provide date of separation or divorce
16.	<input type="checkbox"/>	<input type="checkbox"/>	Did you receive any alimony during 2023? Provide Amount
17.	<input type="checkbox"/>	<input type="checkbox"/>	Did you pay any alimony in 2023? Provide Amount, Name and SSN of person paid
18.	<input type="checkbox"/>	<input type="checkbox"/>	Are you eligible to be claimed as a dependent on another person's tax return for 2023?
19.	<input type="checkbox"/>	<input type="checkbox"/>	Were any children born or adopted in 2023?
20.	<input type="checkbox"/>	<input type="checkbox"/>	Did you make any contributions to a college savings plan in 2023?
21.	<input type="checkbox"/>	<input type="checkbox"/>	Did you take a 529 Plan distribution for grades K-12?
22.	<input type="checkbox"/>	<input type="checkbox"/>	Did you have signature authority or a financial interest over any foreign accounts?
23.	<input type="checkbox"/>	<input type="checkbox"/>	Do you have an interest in any foreign income producing assets? (rentals, business, etc.)
24.	<input type="checkbox"/>	<input type="checkbox"/>	Did you receive, sell, send, exchange, or acquire any interest in any virtual currency?
25.	<input type="checkbox"/>	<input type="checkbox"/>	Did you live and work in another state at any time during the tax year?
26.	<input type="checkbox"/>	<input type="checkbox"/>	Did you move from one state to another in 2023? Provide details and dates of move
27.	<input type="checkbox"/>	<input type="checkbox"/>	Did you buy or sell any home in 2023? – Provide closing/settlement statement
28.	<input type="checkbox"/>	<input type="checkbox"/>	Did you refinance any home or take out a home equity loan during 2023?
29.	<input type="checkbox"/>	<input type="checkbox"/>	Did you have a principal residence or real property foreclosed on in 2023?
30.	<input type="checkbox"/>	<input type="checkbox"/>	Did you abandon a principal residence or real property?
31.	<input type="checkbox"/>	<input type="checkbox"/>	Did you make any energy-efficient improvements to your main home during the year?
32.	<input type="checkbox"/>	<input type="checkbox"/>	If you are a teacher (K-12), did you have classroom expenses of at least \$250?
33.	<input type="checkbox"/>	<input type="checkbox"/>	Did you pay any student loan interest in 2023? Provide Form 1098E
34.	<input type="checkbox"/>	<input type="checkbox"/>	Did anyone in your household attend a post-secondary school or program?
35.	<input type="checkbox"/>	<input type="checkbox"/>	Did you pay tuition expenses for yourself, spouse or dependent? Provide 1098-T

Income		
Yes	No	<i>Please note this list is not all-inclusive. List any income not listed on last page of organizer.</i>
<input type="checkbox"/>	<input type="checkbox"/>	<b>Wages and Tip Income</b> – Submit Form(s) W-2
<input type="checkbox"/>	<input type="checkbox"/>	<b>Interest Income</b> – Submit Form(s) 1099-INT
<input type="checkbox"/>	<input type="checkbox"/>	<b>Dividend Income</b> – Submit Form(s) 1099-DIV
<input type="checkbox"/>	<input type="checkbox"/>	<b>Sales of Stock, Bonds</b> – Submit Form(s) 1099-B brokerage statements with cost basis
<input type="checkbox"/>	<input type="checkbox"/>	<b>Distribution from Pensions, Annuities, IRA's, 401K's</b> – Submit Form(s) 1099-R
<input type="checkbox"/>	<input type="checkbox"/>	<b>Social Security, Railroad Retirement, SSI or VA benefits</b> – Submit SSA-1099, RRB-1099
<input type="checkbox"/>	<input type="checkbox"/>	<b>Unemployment Income</b> – Submit Form(s) 1099-G
<input type="checkbox"/>	<input type="checkbox"/>	<b>State or Local Income Tax Refund</b> – Submit Form(s) 1099-G
<input type="checkbox"/>	<input type="checkbox"/>	<b>Alimony Received</b> (Provide date of divorce)
<input type="checkbox"/>	<input type="checkbox"/>	<b>Sale of home or other property</b> – Submit Form 1099-S and Closing Statement
<input type="checkbox"/>	<input type="checkbox"/>	<b>Cancellation of Debt or Home Foreclosure</b> (Submit Form 1099-A and/or 1099-C)
<input type="checkbox"/>	<input type="checkbox"/>	<b>Lotto or Gambling Winnings</b> – Submit W-2G and summary of gambling losses
<input type="checkbox"/>	<input type="checkbox"/>	<b>S-Corporation, Partnership, Trust or Estate K-1 Income</b> – Submit Form(s) K-1
<input type="checkbox"/>	<input type="checkbox"/>	<b>Self-Employment Income</b> – Submit 1099's (Please provide your profit and loss statement)
<input type="checkbox"/>	<input type="checkbox"/>	<b>Rental Income</b> (Provide summary of your rental income and expenses)
<input type="checkbox"/>	<input type="checkbox"/>	<b>Farm Income</b> (Provide summary of your farm income and expenses)
<input type="checkbox"/>	<input type="checkbox"/>	<b>Jury Duty Pay</b>
<input type="checkbox"/>	<input type="checkbox"/>	<b>Military Pay</b>
<input type="checkbox"/>	<input type="checkbox"/>	<b>Awards, Taxable Prizes</b>
<input type="checkbox"/>	<input type="checkbox"/>	<b>Earnings from foreign bank accounts?</b> (Interest, Dividends, Capital Gains, Etc.)
<input type="checkbox"/>	<input type="checkbox"/>	<b>Virtual/Digital Currency</b> (i.e.: Bitcoin, Cryptocurrency, etc.)
<input type="checkbox"/>	<input type="checkbox"/>	<b>Installment sale income</b>
<input type="checkbox"/>	<input type="checkbox"/>	<b>Any other type of income not listed above?</b>
Health Savings Account and Retirement Contributions		
	Taxpayer	Spouse
What type of high deductible health plan do you have? Self Only or Family?		
Indicate the number of months in the high deductible health plan in 2023	#	#
Was the high deductible health plan in effect for the month of December 2023?		
Total HSA contributions for 2023 made via payroll deduction (Form 5498-SA)	\$	\$
Total HSA contributions for 2023 made to your account by you via cash or check	\$	\$
Distributions from your Health Savings Account (Submit Form 1099-SA)	\$	\$
How much of your HSA distribution was used for medical expenses?	\$	\$
Amount of <b>non-deductible</b> contributions ever made to your Traditional IRA	\$	\$
Contributions already made to a Traditional IRA for 2023	\$	\$
Contributions already made to a Roth IRA for 2023	\$	\$
Contributions already made to a Self-Employment Retirement Plan for 2023	\$	\$

Itemized Deductions			
Medical and Dental Expenses			
	Taxpayer	Spouse	Dependent
Prescriptions	\$	\$	\$
Insurance Premiums (not pre-tax)	\$	\$	\$
Long-Term Care Insurance Premiums Paid	\$	\$	\$
Long-Term Care Expenses (not covered by insurance)	\$	\$	\$
COBRA Premiums	\$	\$	\$
Co-Pays	\$	\$	\$
Physician/Dentist/Chiropractor	\$	\$	\$
Psychotherapy/Counseling	\$	\$	\$
Hospital	\$	\$	\$
Lab Fees	\$	\$	\$
Contacts/Glasses	\$	\$	\$
Laser Eye Surgery/Lasik	\$	\$	\$
Miles Driven for Medical	#	#	#
Other costs	\$	\$	\$
Taxes Paid			
Sales tax paid on the purchase of an automobile, RV, or aircraft during 2023			\$
Sales tax paid on all items purchased – otherwise you can take the sales tax standard deduction			\$
Real Estate Taxes paid on Principal Residence			\$
Real Estate Taxes paid on 2 <sup>nd</sup> Home			\$
All other Real Estate taxes paid on personal residences, including vacant land			\$
Personal property taxes			\$
Other			\$
Mortgage Interest			
Mortgage Interest on Principal Residence			\$
Home Equity Interest or 2 <sup>nd</sup> Mortgage on your Principal Residence			\$
Mortgage Interest on 2 <sup>nd</sup> Home			\$
Mortgage Interest Vacant Land			\$
Charitable Contributions			
Cash			\$
Noncash Contributions (FMV) Submit itemized list and the corresponding receipt			\$
Charitable mileage			#
Other Deductions			
Gambling Losses			\$
Casualty or theft Loss (Must be in a Federal Disaster Area)			\$

## Estimated Tax Payments

*These payments are usually for tax on self-employment and/or investment income.*

	Federal		State		Local	
	Date Paid	Amount	Date Paid	Amount	Date Paid	Amount
1 <sup>st</sup> Quarter		\$		\$		\$
2 <sup>nd</sup> Quarter		\$		\$		\$
3 <sup>rd</sup> Quarter		\$		\$		\$
4 <sup>th</sup> Quarter		\$		\$		\$

## Direct Deposit

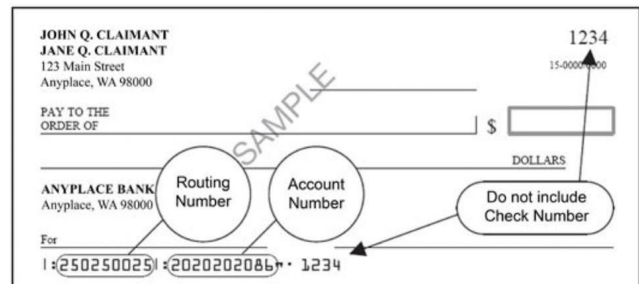
☐ Yes ☐ No If you receive a refund, would you like Direct Deposit into your bank account?

If yes, **please submit a voided check** (not a deposit slip)

Routing Number .....

Account Number .....

What type of account is this? ☐ Checking ☐ Savings



## Electronic Filing

Upon completion of your return we will provide you a copy of your return (PDF) along with Form 8879 (*E-File Authorization Form*) for your signature. After your review, return the signed Form 8879 to us so that we can electronically file your return. **IMPORTANT: You and your spouse (if filing jointly) must sign Form 8879 and return the form to us before we will e-file your return.**

## Privacy Policy

We do not disclose any nonpublic personal information obtained in the course of our practice except as required by law. Permitted disclosures include, for instance, providing information to our employees and, in limited situations, to unrelated third parties who need to know that information to assist us in providing services to you. In all such situations, we stress the confidential nature of information being shared. We retain records relating to professional services that we provide so that we are better able to assist you with your professional needs and, in some cases, to comply with professional guidelines and the law.

## Taxpayer Responsibilities

I certify that all of the information presented in this tax organizer is true and accurate to the best of my knowledge. I acknowledge that it is my sole responsibility to include any and all information concerning income, deductions and other information necessary for the preparation of my personal income tax return. It is my responsibility to review the return carefully before signing to make sure the information is correct. I understand that my engagement with KW Income Tax Service to prepare my tax return will conclude with the delivery of the completed tax return to me and the e-filing of my tax return. I understand that all tax preparation fees must be paid prior to the delivery and the electronic filing of my return. (If filing a joint return, both you and your spouse must sign)

Signature

Spouse's Signature

Date

**Additional Comments**

[illegible]