Dear Client.

If you would like PPG Partners, LLC to complete your 2023 tax return, please do the following:

- 1. Read the enclosed engagement letter and then sign and date on page 3.
- 2. Complete the Foreign Assets Disclosure and then sign and date at the bottom.

You must sign and return both the engagement letter and the Foreign Assets Disclosure in order for us to complete your 2023 tax return. Please return these signed forms with your tax documents; you do not need to send them ahead of time.

- 3. Verify your current mailing address.
- 4. Read and complete all of the questions in the tax organizer to the best of your ability.

Once these steps are completed, please send to us: your signed engagement letter and Foreign Assets Disclosure, tax organizer, and supporting forms and documents that will help us complete your return.

Introducing Ben Johnson, our Newest CPA and Manager



In fall 2023 we welcomed Ben Johnson, CPA, as Manager to our PPG Partners team!

Ben brings a wealth of knowledge and experience with him to PPG. Ben graduated from the University of Wisconsin-Parkside in 2010 with a degree in accounting and continued on to earn an MBA in 2013. He became a licensed CPA in 2014, successfully passing all four sections of the exam on his first attempt. Ben prides himself on being responsive and building lasting relationships with clients. He loves listening to his clients tell their story and figuring out where his accounting experience can help.

Ben is a life-long resident of Kenosha, Wisconsin. In his free time, he enjoys golfing, watching the Milwaukee Bucks, traveling to Door County, and spending time with his wife, two children, and chocolate lab.

Robert Weber, Our New Senior Associate

In 2023, Robert Weber, CPA, CHBC, was promoted to Senior Associate at PPG Partners!

Robert graduated from UW-Milwaukee in 2014 with degrees in Accounting and Finance. He joined PPG Partners in 2015, and became a licensed CPA in 2016.

In 2022 he became a Certified Healthcare Business Consultant. A CHBC is a seasoned business healthcare consultant who has demonstrated an understanding of the total healthcare business environment, both practice and financial management.

Robert has been competing in dog agility for more than 20 years, earning multiple championship titles. Outside of work and competition Robert enjoys spending time with friends and family, and has recently begun doing more genealogy research.





Telephone: 262/657-2060 Fax: 262/657-2080 www.ppgpartners.net

January 1, 2024

Dear Client.

TAX ENGAGEMENT LETTER

We appreciate the opportunity to prepare your personal income tax returns. To minimize the possibility of a misunderstanding between us, we are setting forth pertinent information about the services we will perform for you.

We will prepare your 2023 federal and state individual income tax returns from information you furnish us. It is your responsibility to give us complete and accurate information required for the preparation of your tax returns. We will not audit or otherwise verify the data you submit, although we may ask you to clarify some of the information. You are certifying that the information you provide to us can be substantiated by appropriate documentation, and that it is true, correct and complete to the best of your knowledge.

We will prepare the tax returns specified above for the 2023 tax year only. We are not responsible for the preparation of any other tax returns other than what is specified above that may be due to any taxing authority.

The 2023 tax organizer will assist you in collecting and reporting information necessary for us to properly prepare your 2023 income tax return. This organizer is designed as a tool to assist you in providing supporting documentation. Prior year data is included in the organizer sections for your reference in determining what information we require. You may find some information, such as addresses, email addresses, phone numbers, etc. needs updating. It is also important that you verify your bank account information if you would like direct deposit of a tax refund. Please feel free to jot down notes, questions and comments on the organizer. <u>Please do not wait to return the organizer and supporting information when you are missing only a couple of items</u>. We will be able to complete the majority of the tax return with the initial items you provide us.

We must receive all of your tax information no later than Friday, March 15, 2024, to ensure that your return will be completed by April 15, 2024. If we have not received all of your information by Friday, March 15, 2024, we cannot guarantee your return will be completed by April 15, 2024, and you may be subject to late filing or late payment penalties.

Here is a list of the items we really need you to send us:

- · A copy of your 2022 tax return, if not prepared by this office.
- · IP PIN number (if you were the victim of identity theft and the IRS issued one to you).
- · Amounts and dates of estimated tax payments made for 2023 for both Federal and State.
- . Form(s) W-2 (for wages, etc.).
- . Form(s) 1099 (interest, dividends, etc.).
- . Year-end brokerage statements (for stock sales: remember we need to know what you paid for the stocks and when you bought them).
- · Schedule(s) K-1 (income/loss from partnerships, S-corporations and trusts).
- · Form(s) 1099-SSA (for social security benefits).
- · IRA, SÉP & 401(k) deposits.
- · Form(s) 1098 (mortgage interest).
- · Copy of property tax bills paid during the year and the date they were actually paid.
- . Closing statements (real estate purchases or sales).
- · Charitable donations (see note below).
- · IRS Form(s) 1095 or other forms received relating to health insurance coverage.
- · Form(s) 1099-SA for health savings accounts deposits and withdrawals (were withdrawals used for qualified medical expenses?). Please include a year-end summary of your account from your bank.
- . Paperwork for new vehicle purchases.
- · 529 Plan deposits and withdrawals (college savings plans).
- . Kid's tax material, including college tuition, Form(s) 1098-T, Form(s) 1099-Q, and other education expense **invoices paid**.
- · Statement of Tuition paid to K-12 private school.
- · Anything else that looks, feels or smells like tax material.

Please indicate the amount of any	Internet or out-of-state	purchases in w	hich you did not
pay sales tax: \$	<u>.</u>	-	•

Charitable Donations

By law all charitable contributions claimed as a deduction on your tax return must be substantiated by keeping a written record of the contribution. Acceptable written records used to substantiate each contribution include a cancelled check or bank record that supports the donation, or a written receipt or similar statement that includes (1) the name of the donee organization, (2) the date and amount of the contribution, and (3) if any goods or services were received in exchange for the contribution. Contributions of \$250 or more require a letter of acknowledgment from the charitable organization. If the resulting returns are examined by the IRS, requests may be made for the written record of the contribution. It is recommended that for any charitable contribution claimed, you retain the written records for at least seven years.

You are responsible for the accuracy of your financial records and the full and accurate disclosure to us of all relevant facts affecting the returns. It is your responsibility to maintain, in your records, the documentation necessary to support the data used in preparing your returns, including but not limited to the auto, travel, entertainment, and related expenses and the required documents to support your charitable contributions. If you have any questions as to the type of records required, ask us for advice in that regard. It is also your responsibility to carefully examine and approve your completed tax returns before signing, mailing or authorizing e-filing of the returns. We are not responsible for the disallowance of doubtful deductions or inadequately supported documentation, nor for resulting taxes, penalties and interest.

We will use our judgement to resolve questions in your favor where a tax law is unclear if there is a reasonable justification for doing so. Whenever we are aware that a possibly applicable tax law is unclear or that there are conflicting interpretations of the law by authorities (e.g. tax agencies and courts), we will explain the possible positions that may be taken on your return. We will follow whatever position you request, so long as it is consistent with the codes and regulations and interpretations that have been promulgated. If the IRS should later contest the position taken, there may be an assessment of additional tax plus interest and penalties. We assume no liability for any such additional penalties or assessments.

It is our firm's policy to retain electronic copies of your tax returns for seven years, after which they will be destroyed. We are responsible for preparing only the returns listed above. Our fee does not include responding to inquires or examination by taxing authorities. However, we are available to represent you.

Fees for our services will be at our standard rates plus out-of-pocket expenses. Payment for service is due when rendered and interim billings may be submitted as work progresses and expenses are incurred.

We thank you for the opportunity to work with you and want you to know how much we appreciate your business.

If the above fairly sets forth your understanding, please sign and return this letter with your tax organizer.

Sincerely,

PPG Partners, LLC

X		
Taxpayer Signature	Date	
v		
Λ		
Spouse Signature	Date	

REPORTING OF FOREIGN ASSETS

Disclosure of Foreign Assets

We need to ensure a \$10,000 penalty (or higher), and the loss of tax return statute of limitation, will not affect you. Check "Yes" or "No" to each question and write in any applicable information/amounts:

Yes No								
	Do you own, <u>directly or with others</u> , any foreign stock or securities, financial instruments, foreign-issued annuities or life insurance, or foreign hedge or private-equity funds? If so, what country?							
	Estimated value of the stock 12/31/2023 \$							
	Do you have a retirement or deferred compensation plan/account in another country? If so, what country? FMV on 12/31/2023 \$							
	Highest estimated value of the retirement plan during 2023 \$							
	Do you have a bank/brokerage account or a custodial account in another country? Highest value of the bank account during the year \$							
	Do you have any other assets outside the U.S., such as land? If so, what country?							
	Description and estimated value of the assets \$							
	OR							
	At any time during 2023, did you have a financial interest in or signature authority over a financial account (such as a bank account, securities account, or brokerage account) located in a foreign country? If "Yes," you may be required to file Form FinCEN 114 to report that financial interest or signature authority. Enter the name of the foreign country where the financial account is located:							
	Highest value of the financial account during the year \$							
	During 2023, did you receive a distribution from, or were you the grantor of or transfer to, a foreign trust? If "Yes," you may have to file Form 3520.							
The above info	ormation is correct to the best of my knowledge.							
Signature	Date							
Print Name								
Signature	Date							
Print Name								

2023	1040	US	Miscellaneous Questions
			If any of the following items pertain to you or your spouse for 2023, check the appropriate box and provide additional information if necessary.
	Yes	No	PERSONAL INFORMATION
			Did your marital status change during the year?
			Did your address change during the year?
			Could you be claimed as a dependent on another person's tax return for 2023?
			DEPENDENTS
			Were there any changes in dependents?
			Were any of your unmarried children who might be claimed as dependents 19 years of age or older at the end of 2023?
			Did you have any children under age 19 or full-time students under age 24 at the end of 2023, with interest and dividend income in excess of \$1,250, or total investment income in excess of \$2,500?
			HEALTH CARE COVERAGE
			Did you receive IRS document Form 1095-A (Health Insurance Marketplace Statement)? If so, please attach.
			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?
			Did you have any foreign income or pay any foreign taxes?
			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?

2023	1040	US	Miscellaneous Questions			
			Did you purchase or dispose of any business assets (furniture, equipment, vehicles, real estate, etc.), or convert any personal assets to business use?			
			Did you buy or sell any stocks, bonds or other investment property in 2023?			
			Did you sell or do you plan to sell any dividend generating stocks or mutual funds during the first 60 days of 2024?			
			Did you purchase, sell, or refinance your principal home or second home, or did you take a home equity loan?			
			Did you purchase a home in 2023 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?			
			Did you have any debts cancelled or forgiven?			
	Does anyone owe you money which has become uncollectible?					
			RETIREMENT PLANS			
			Did you receive a distribution from a retirement plan (401(k), IRA, SEP, SIMPLE, Qualified Plan, etc.)?			
			Did you make a contribution to a retirement plan (401(k), IRA, SEP, SIMPLE, Qualified Plan, etc.)?			
			Did you transfer or rollover any amount from one retirement plan to another retirement plan?			
			Did you convert part or all of your traditional, SEP, or SIMPLE IRA to a Roth IRA in 2023?			
			EDUCATION			
			Did you receive a distribution from an Education Savings Account or a Qualified Tuition Program?			
			Did you, your spouse, or a dependent incur any tuition expenses that are required to attend a college, university, or vocational school?			
			ITEMIZED DEDUCTIONS			
			Did you incur a loss because of damaged or stolen property?			
			2.2 year mean a rest economic or animaged or storen property.			

2023	1040	US	Miscellaneous Questions
			Did you work out of town for part of the year?
			Did you use your car on the job (other than to and from work)?
			ESTIMATED TAXES
			Did you make any estimated income payments for 2023 to IRS or the state? If so, please fill in the amounts and dates on page 3,6.
			Did you apply an overpayment of 2022 taxes to your 2023 estimated tax (instead of being refunded)?
			If you have an overpayment of 2023 taxes, do you want the excess applied to your 2024 estimated tax (instead of being refunded)?
			Do you expect your 2024 taxable income and withholdings to be different from 2023?
			MISCELLANEOUS
			If you are receiving a paper copy of a tax organizer: In the future, would you like an electronic copy of a tax organizer instead? If yes, what email address(es)
			would you like it sent to?
			Do you want to electronically file your tax return?
			Do you want to allocate \$3 to the Presidential Election Campaign Fund?
			Does your spouse want to allocate \$3 to the Presidential Election Campaign Fund?
			May the IRS discuss your tax return with your preparer?
			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?
			Did you receive a distribution from, or were you the grantor of, or transferor to, a foreign trust or did you have an interest in any foreign assets or accounts?
			Was your home rented out or used for business?
			Did you have a medical savings account (MSA), a Medicare + Choice MSA, or acquire an interest in an MSA or a Medicare + Choice MSA because of the death of the account holder? Or, were you a policyholder who received payments under a long-term care (LTC) insurance contract or received any accelerated death benefits from a life insurance policy?

2023	1040	US	Miscellaneous Questions
			Did you have a health savings account (HSA) in 2023? If so, how much did you contribute to your HSA for 2023?
			Did you receive a distribution from your health savings account (HSA)?
			Did you receive a distribution from an Achieving a Better Life Experience (ABLE) savings account?
			Did you engage the services of any household employees? If so, you may have employment taxes to pay. Please call us to discuss.
			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?
			Were you notified or audited by either the Internal Revenue Service or the State taxing agency?
			Did you or your spouse make any gifts to an individual that total more than \$17,000, or any gifts to a trust?
			Did your bank account information change within the last twelve months? If so, please make the necessary changes on page 3,6
			Did you receive an IP PIN from the IRS or state because you were the victim of identity theft in a prior year? If so, please send us a copy of the letter you received.
			Did you receive, sell, send, exchange or otherwise acquire any financial interest in virtual currency?

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2023	1040	LIS	Client Information	1	

PPG Partners, L.L.C.

5525 Green Bay Road Kenosha WI 53144

Telephone number: (262) 657-2060 Fax number: (262) 657-2069 E-mail address: rich@ppgpartners.net **Tax Return Appointment**

Date: Time: Location:

This tax organizer will assist you in gathering information necessary for the preparation of your 2023 tax return. Please add, change, or delete information as appropriate.

CLIENT INFORMATION

Filing	Filling Status (table)
Status	1=married filing separate and lived with spouse
	Year spouse died, if qualifying surviving spouse (2021 or 2022)
	First name and initial
	Last name
	Title/suffix
Taxpayer	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
Spouse	Social security number
эройзс	Occupation
	Date of birth (m/d/y)
	Date of death (m/d/y)
	1=blind
	In care of
	Street address
Address	Apartment number
/ ladi c33	City
	State
	ZIP code
Foreign	Region
Foreign 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)

2023	1040	US	Client Information (continued)		Page 2 1 p2
			Please add, change or delete information for 2023.		
CLIE	NT INFO	RMATION			
Taxpayer Contact Information	Work phon Work exter Daytime pho Mobile pho Fax number	neesionnone (table)ne		Daytim 1 = W 2 = H 3 = W	ome
Spouse Contact Information	Home phor Work phon Work exter Daytime ph Mobile pho Fax numbe	ne			
Taxpayer Authentication	Driver's lice Driver's lice Issue date Expiration	ense noense state (m/d/y)date (m/d/y) ction PIN			
Spouse Authentication	Driver's lice Driver's lice Issue date Expiration	ense noense state (m/d/y)date (m/d/y) ction PIN			
	The process		•••		

2023 1040 US Dependents

Please add, change or delete information for 2023.

DEPENDENTS

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

2

ORGANIZER

Direct Deposit & Estimates (Form 1040 ES) US 2023 1040 3, 6 Please enter all pertinent 2023 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) 2023 ESTIMATED TAX / 1040-ES (6) 2023 **Federal Amount Paid Date Paid** Voucher Amount Overpayment applied from 2022 3rd quarter payment... Additional Estimated Tax Payments Paid with extension..... Former spouse SSN if joint estimates 2023 State **Amount Paid Date Paid** Voucher Amount Overpayment applied from 2022 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

3, 6

ORGANIZER Page 5 Direct Deposit & Estimates (Form 1040 ES) (cont.) US 1040 7.1 2023 Please enter all pertinent 2023 information. **APPLICATION OF 2023 OVERPAYMENT (7.1)** If you have an overpayment of 2023 taxes, do you want the excess refunded? or applied to 2024 estimate? Other (please explain): 2024 ESTIMATED TAX INFORMATION Do you expect your 2024 taxable income to be different from 2023? If "yes" explain any differences in income, deductions, dependents, etc.: Do you expect your 2024 withholding to be different from 2023? If "yes" explain any differences:

7.1

ORGANIZER

Wages, Pensions, Gambling Winnings 10, 13.1, 13.2 US 1040 2023

Please enter all pertinent 2023 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=retireme plan (Box 1	nt	Wages, Tips, Other			Tax Withheld			
No. Name of Employer (Box c)		plan (Box 13) 1=spouse		Compensation (Box 1)	Federal (Box 2)	Social Security (Box 4)	Medicare (Box 6)	State (Box 17)	Local (Box 19)	2022 Wages

PENSIONS, IRA DISTRIBUTIONS (13.1)

			Distribution code #2			2		-	Tax Withheld		Value of	
No.	Name of Payer	Distribution 1=IRA/SE 1=spous	P/SIN		1		Gross Distribution (Box 1)	Taxable Amount (Box 2a)	Federal (Box 4)	State (Box 14)	Value of all IRAs at 12/31/23	2022 Distribution

GAMBLING WINNINGS (W-2G) (13.2)

			Gross Winnings		I		
No.	Name of Payer	e of Payer	State (Box 15)	Local (Box 17)	2022 Winnings		

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

(13.2)	2023 Amount	TS	2022 Amount
Total gambling losses			
Winnings not reported on Form W-2G			

10, 13.1, 13.2

2023 1040 US Interest & Dividend Income 11, 12

Please enter all pertinent 2023 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 Payer	1 taypayor	1-taxpayor Interest Income				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)	2022 Interest

DIVIDEND INCOME (12)

		1 taypayar		Dividend Income						Tax-Exempt 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)	2022 Dividends	

0110711112211				<u>rage o</u>
2023	1040	US	Miscellaneous Income	14.1

Please enter all pertinent 2023 amounts and attach all 1099-MISC, 1099-NEC, 1099-K, SSA-1099, and RRB-1099 forms. Last year's amounts are provided for your reference.

MISCELLANEOUS INCOME	2023 Amo	unt	2022 Amount		
	Taxpayer	Spouse	Taxpayer	Spouse	
Social security benefits (SSA-1099, box 5)					
Medicare premiums paid (SSA-1099)					
I=treat Medicare premiums paid as SE health ins.					
Fier 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					
Activity not engaged in for profit income					
Olympic & Paralympic medals & USOC prize money.					
Prizes and awards					
Stock Options					
Strike or lockout benefits (other than bona fide gifts)					
· · · · · · · · · · · · · · · · · · ·					
Non-tuition fellowship and stipend payments entered above to include as taxable compensation for IRA purposes					
Wages earned while incarcerated not on W-2					
Income subject to S/E tax: (1099-NEC, box 1)					
her income (1099-MISC, box 3, 8)					
	<u>'</u>				
Form 1099-K					
Amount of cale proceeds from Form 1000 V for					
Amount of sale proceeds from Form 1099-K for personal item(s) sold at a loss					
Amount from Form 1099-K that was incorrectly reported					
Amount from Form 1077-K that was incorrectly reported					
TAX WITHHELD (not entered elsewhere)					
Fodoral income toy withhold	T				
Federal income tax withheld					
State income tax withheld					
Local income tax withheld					

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2023	1040	US	State & Local Tax Refunds / Unemployment Compensation	14.2

Please add, change or delete 2023 information as appropriate. Be sure to attach all 1099-G forms.

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

ONE IVIII E	2023 1099-G Amount
	Name of payer
	1=spouse.
	Unemployment compensation:
	Total received (Box 1)
	2023 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 2022 (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)
	Name of payer
	1=spouse
	Unemployment compensation:
	Total received (Box 1)
	2023 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 2022 (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:
	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
	Farm amounts: Agriculture payments (Box 7)

2022	1040	HC	Education Distributions (ESA's and OTD's)	1/12
2023	1040	US	Education Distributions (ESA's and QTP's)	14.3

Please enter all pertinent 2023 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 QTP'S (Form 1099-Q)	2023 Amount	2022 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:		
	2023 contributions to this ESA		
	Value of this account at 12/31/23 (plus outstanding rollovers)		
	Basis in this ESA as of 12/31/22		
	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:		
	2023 contributions to this ESA		
	Value of this account at 12/31/23 (plus outstanding rollovers)		
	Basis in this ESA as of 12/31/22		
	In a		
	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:		
	2023 contributions to this ESA		
	Value of this account at 12/31/23 (plus outstanding rollovers)		
	5 1 1 1 5 5 6 6 10/01/00		
	Basis in this ESA as of 12/31/22		

ORGANIZER				Page II
2023	1040	US	ABLE Distributions	14.4

	RIBUTIONS / CONTRIBUTIONS	2023 Amount	2022 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)		
4 0.	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		

	i				
1040	US	Business Income (Schedu	ule C)	No.	16
Please e	nter all nert	nent 2023 amounts. Last year's amo	ounts are provided for	r vour reference	
	•	-	ants are provided for	your reference.	
GENERAL I	NFORMAT	TION			
Principal business	•				
Principal business					
Business name, it Business address					
City, if different fr					
State, if different					
ZIP code, if differen					
Foreign region					
Foreign postal cod					
Foreign country					
Employer identific					
Other accounting	methou				
Accounting metho	d: 1=cash, 2=a	occrual			
		er cost/market, 3=other			
1=change of inver	ntory method				
		usiness			
		will you file all required Form(s) 1099: 1=yes, 2=no			
		tax			
		erial income producing factor			
•		mai inserie predasing racio			
1=minister's Sche	dule C				
1=single member	limited liability	company			
1=trader in financia	al instruments or	commodities			
INCOME			2023 Amount	2022 Amou	at
Gross receipts or	sales (Form 10	99-NEC)	2023 Amount	2022 Allioui	п
•					
Other income:				-	
	000000	L			
COST OF G	OODS 20	LD			
, ,					
Other costs:					
Inventory at end of	of the year				

2023	1040	US	Business Income (Schedule C) (cont.)	No.	16 n2
2023	1010		Basiness income (schedale of (cont.)		

Please enter all pe	pertinent 2023 amounts.	ast year's amounts are	provided for your reference
---------------------	-------------------------	------------------------	-----------------------------

EXPENSES	2023 Amount	2022 Amount
ccounting		
dvertising		
Inswering service		
and debts from sales or service.		
Bank charges		
Car and truck expenses (not entered elsewhere)		
Commissions		
Contract labor.		
Delivery and freight		
Dues and subscriptions		
Imployee benefit programs		
nsurance (other than health)		
Mortgage interest (paid to banks, etc.)		
Other interest (not entered elsewhere)		
anitorial		
aundry and cleaning		
egal 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)		
Pent - other		
Pepairs.		
· · · · · · · · · · · · · · · · · · ·		
Security		
Supplies.		
axes - real estate		
axes - payroll		
axes - sales tax included in gross receipts		
axes - other (not entered elsewhere)		
elephone		
ools		
ravel		
leals in full (50%)		
epartment of Transportation meals in full (80%)		
Iniforms.		
Itilities.		
Vages.		
vages.		
Other expenses:		

2023 1040 US Capital Gains & Losses (Schedule D)

17

If you sold any stocks, bonds, or other investment property in 2023, 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				Page 15
2023	1040	US	Installment Sales (Form 6252)	17 p2

Please enter all	pertinent 2023 amounts.	Last year's amounts	are provided for	vour reference
. ioaoo oiitoi aii	por tirrorit Edea arridanto.	East your o arriodints	are previous rer	,

RIOR YE	AR INSTALLMENT SALE	2023 Amount	2022 Amount
	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)		
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)		
	. 1		
lo.	Date sold (m/d/y)		
lo.	Date sold (m/d/y)		

2023	1040	US	Sale of Home & Moving Expenses	17,	, 27

If you sold your home or moved in 2023, please complete the information below.

For the sale of home, please provide Form 1099-S and closing staten the purchase and sale of your home.	nents from
SALE OF HOME (17)	
Description of property (Box 3) Date acquired (m/d/y) Date sold (m/d/y) (Box 1) Date sold (mod/y) (Box 2)	
=sale of home. =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	
Adjusted Basis	
Original cost	
Adjusted basis	
Expenses of Sale (Commissions, advertising fees, legal fees, and loan charges paid by the seller)	
otal expenses of sale	
Please complete the following information if due to a change in health, place of employment, or unforeseen cir i) Did not meet the ownership and use tests *, or b) Excluded gain on the sale of another home after May 6,	cumstances you either:
excl. 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	
MOVING EXPENSES (27) (If you are a member of the Armed Forces and moved due to a permar	ent change in station)
=spouse, 2=joint = armed forces move due to permanent change of station = liles from old home to new work place = liles from o	
Alles 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. 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

23	1040	US	Rental & Royalty Income (Schedule E)	No 18
<u>'</u>	Please en	ter all pert	inent 2023 amounts. Last year's amounts are provided fo	r your reference.
GEN	IERAL IN	IFORMA	TION 2023 Amount	2022 Amount
Descri	ption of prope	erty		Type of Property
Street	address			
City				1 = Single Family Residence 2 = Multi-Family Residence
State.				3 = Vacation/Short-Term Renta 4 = Commercial
ZIP co	de			5 = Land
		ee table)		6 = Royalties 7 = Self-Rental
		erty		, den kental
Numbe	er of days rer	nted		
Percenta	age of ownership		1 did not oatively noutrin at	
if not 10 Percenta	0% (.xxxx) age of tenant occi	upancy	1 = did not actively participate	
	-		1=rental other than real estate	
1=qua 1=nonpa	iiiieu joint vei assive activity,	nture	1=investment	
2=passiv	ve royalty		id you or will you file all required Form(s) 1099: 1=yes, 2=no	
ii requ	illed to file FC)1111(S) 1099, U	id you of will you file all required Form(s) 1099. 1=yes, 2=10	
INC	OME		2023 Amount	2022 Amount
Rents	or royalties re	eceived		
Garde Insura Legal	ningnceand professio	onal fees		
_				
			etc.)	
_	-			
			here)	-
Repair	S			
Repair Suppli	es			
Repair Suppli Taxes	es - real estate			
Repair Suppli Taxes Taxes	rses. - real estate - other (not e	entered elsewh	nere)	
Repair Suppli Taxes Taxes Teleph	es	entered elsewh	nere)	
Repair Suppli Taxes Taxes Teleph Utilitie	es	entered elsewh	nere)	
Repair Suppli Taxes Taxes Teleph Utilitie Wages	es	entered elsewh	nere)	
Repair Suppli Taxes Taxes Teleph Utilitie	es	entered elsewh	nere)	
Repair Suppli Taxes Taxes Teleph Utilitie Wages	es	entered elsewh	nere)	
Repair Suppli Taxes Taxes Teleph Utilitie Wages	es	entered elsewh	nere)	

18

23 1040 US Rental & Royalty Income (Sch. E) (cont.)						18 p2			
Please exp	Please enter all pertinent 2023 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.								
GENE	ERAL IN	IFORMAT	ION						
Foreign	postal code)							
OIL A	ND GA	S			2222.4				
Production Cost dep Percenta State co State %	on type (probletion	eparer use on on rate or amo n, if different (ate or amount	unt	2023 Amount	2022 Amou	nt			
PERS	ONAL	USE OF [DWELLING UNIT (INCLUDING	VACATION HOME)					
	, ,		ıl method elected)						
	_	•							
NOTE:II	ndirect expe	XPENSES enses are rela de repairs, ins	 ted to operating or maintaining the dwelling uurance, and utilities. 	unit.					
Associate Auto and Cleaning Commission Gardening Insurand Licensess Manager Miscellar Mortgage Excess rother inf Painting Pest complumbing Repairs. Supplies Taxes - Telephor Utilities.	d travel (not g and maint sions	t entered elsevenance	where) etc.) nere)						
Other:					I				
Ou 161 .									
_									

	1040	US	Farm Income (Schedule F	/Form 4835)	No.	19
	Please en	ter all pert	inent 2023 amounts. Last year's amo	unts are provided for	your reference.	
GEN	NERAL IN	IFORMA [*]	TION			
Princi	ipal product					
Emplo	oyer ID numbe	r				
			_			
•	-					
	•		ccrual			
	•	,			_	
		-	tal only): 1=land, 2=self-rental, 3=other		_	
			ion			
		=	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 n	ot 100% (.xxx	xx) (Farm rental only)			
FAR	RM INCOM	ИΕ				
	method:			0000 4	0000 4	
		ck and other i	resale items	2023 Amount	2022 Amount	
	ales of fivestor	ck and other i	esale items			
	act or bacic of	livectock or	ather recale items			
Co			other resale items			
Co Sa	ales of produc		other resale items			
Co Sa Accrua	ales of produc	ts raised				
Co Sa Accrua Sa	ales of productal method: ales of livestoo	ts raised	etc.			
Co Sa Accrua Sa Be	ales of productal method: ales of livestodeginning inver	ts raised ck, produce, e atory of livesto	etc.			
Co Sá Accru: Sá Bé Co	ales of productial method: ales of livestodeginning invertions of livestock	ts raised ck, produce, entory of livesto k, etc. purcha	etc pck, etc sed			
Co Sá Accrua Sá Be Co Er	ales of production in the control of	ts raised ck, produce, entory of livesto k, etc. purcha	etc.			
Co Sá Accrua Sá Ba Co Er Other	ales of production in the control of	ts raised ck, produce, e story of livesto k, etc. purcha y of livestock	etc. cck, etc. sed , etc.			
Co Sa Accrua Sa Be Co Er Other	ales of production in the control of	ts raised ck, produce, e story of livesto k, etc. purcha y of livestock re distribution	etc. cck, etc. sed , etc.			
Co Sa Accrui Sa Be Co Er Other To	ales of production in the control in	ts raised ck, produce, of story of livesto ck, etc. purcha y of livestock re distribution ative distribut	etc. ock, etc. sed , etc.			
Co Sa Accrus Sa Be Co Er Other To Ta	ales of production in the control in	ts raised ck, produce, outory of livestock, etc. purchate y of livestock are distribution ative distribution program pa	etc. cck, etc. sed , etc. s ions yments (other than CRP)			
Co Sa Accrus Sa Ba Co Er Other To Ta	ales of production and method: ales of livestod eginning invertost of livestock inding inventor farm income: otal cooperativaxable cooperativaxable agriculturaxable agriculturaxable agricult	ts raised ck, produce, entory of livestock, etc. purchate y of livestock are distribution ative distribution program parting the program parting the program parting the program of	setc. cock, etc. sed , etc. s. ions yments (other than CRP) payments (other than CRP)			
Co Sa Accrus Sa Be Co Er Other To Ta To	ales of production in the control of	ts raised ck, produce, extory of livestock, etc. purchar y of livestock re distribution ative distribut al program pa ural program on reserve pr	setc. cock, etc. sed , etc. ssions yments (other than CRP) payments (other than CRP) rogram payments			
Co Sa Accrus Sa Be Co Er Other To Ta To	ales of production in the content of	ts raised ck, produce, extory of livestock, etc. purcharch y of livestock are distribution ative distribution program particular program on reserve provides and produce and program on reserve provides and produce and program on reserve provides and produce and produc	etc. cock, etc. sed , etc. ss. ions yments (other than CRP) payments (other than CRP) rogram payments e program payments			
Co Sa Accrui Sa Be Co Er Other To Ta To Ta	ales of production in the content of	ts raised ck, produce, entory of livestock, etc. purchatly of livestock are distribution ative distribution program partion reserve provided in the program on reserve provided in the product of	etc. cck, etc. sed , etc. s ions yments (other than CRP) payments (other than CRP) rogram payments e program payments rted under election			
Co Sa Accrui Sa Be Co Er Other To Ta To Co	ales of production along the content of the content	ts raised ck, produce, entory of livestock re distribution ative distribution program partial program partial program on reserve provation reserve p	etc. ock, etc. sed , etc. sions yments (other than CRP) payments (other than CRP) rogram payments e program payments rted under election forfeited or repaid			
Co Sa Accrui Sa Be Co Er Other To Ta To Ta Co	ales of production along the commodity creating axable commodity creat	ts raised ck, produce, of story of livesto ck, etc. purcha y of livestock re distribution ative distribut al program pa ural program on reserve pr vation reserve dit loans repo y credit loans dity credit loans dity credit loans	etc. ock, etc. sed , etc. s ions yments (other than CRP) payments (other than CRP) rogram payments e program payments et program payments red under election forfeited or repaid ans forfeited or repaid			
Co Sa Accrus Sa Be Co Er Other To Ta To Ta Co Ta	ales of production and method: also of livestod eginning invertors of livestock inding inventors farm income: otal cooperative axable cooperative axable agricult otal conservation axable conservation axable commodity crectotal commodity crectotal commodity axable commodital crop insur	ts raised ck, produce, entory of livestock ck, etc. purcha y of livestock re distribution ative distribut al program pa ural program on reserve pr vation reserve dit loans repo y credit loans dity credit loa ance proceed	setc. cock, etc. sed , etc. s. ions yments (other than CRP) payments (other than CRP) rogram payments e program payments red under election forfeited or repaid is received in 2023			
Co Sa Accrus Sa Be Co Er Other To Ta To Ta To Ta	ales of production all method: ales of livestod eginning inversost of livestock inding inventor farm income: otal cooperative axable cooperative axable agricultural conservation axable conservation axable commodity crecotal commodity crecotal commodity axable commodital crop insuraxable crop in	ts raised ck, produce, entory of livestock, etc. purchatly of livestock are distribution attive distribution reserve provided in the program on reserve provided in the program of t	etc. ock, etc. sed , etc. s ions yments (other than CRP) payments (other than CRP) rogram payments e program payments red under election forfeited or repaid ans forfeited or repaid ls received in 2023 eeds received in 2023			
Co Sa Accrus Sa Be Co Er Other To Ta To Ta To Ta	ales of production in the common in the comm	ts raised ck, produce, entery of livestock, etc. purcharcy of livestock are distribution at ive distribution reserve provided loans report of the control of the con	setc. cock, etc. sed , etc. s. ions yments (other than CRP) payments (other than CRP) rogram payments e program payments red under election forfeited or repaid is received in 2023			

023	1040	US	Farm Income (Sch. F/For	m 4835) (cont.)	No.	19 _{p2}
	Please en	iter all pert	inent 2023 amounts. Last year's am	ounts are provided for y	our reference.	
	RM INCO	ME (conti	inued)			
Other	income:		Г	2023 Amount	2022 Amoun	t
	-					
	-					
	-					
	-					
FAF	RM EXPE	NSES				
Car a	and 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	nance				
Seeds	s and plants p	urchased				
Stora	ige and wareho	ousing				
			ne			
	alizea preproa * expenses:	luctive period	expenses (also enter below)			
Other	елрепзез.		Г			
	•					
	-		-			
	-					
	-					
		NOTE:	If you purchased or disposed of any business a	ssets, please complete Sheet 22	2.	
				•		
					ī	
						19 _{p2}

ORG	ANIZER						Page 21
20	23	1040	US	Partnersh	ip and S corpora	tion Information	20.1,20.2
			_	delete 2023 inf		te. Be sure to attach all Sc	hedule K-1s.
No.			ne of Partnersl		Employer Identification Number	Tax Shelter Registration Number	Additional Amounts Invested in Partnership
	s co	RPORAT	ION INFO	DRMATION (2	20.2)		
No.		Name	e of S corpora	tion	Employer Identification Number	Tax Shelter Registration Number	Additional Amounts Invested in S corporation
							20.1,20.2

ORGANIZER					Page 22
2023	1040	US	Estate or Trust and RE	MIC Information	20.3,20.4
		Plea	se add, change or delete 2023 in Be sure to attach all Schedule	formation as appropriate. K-1s and Schedule Qs.	
EST	ATE OR T	RUST IN	FORMATION (20.3)		
No.		Nar	ne of Estate or Trust	Employer Identification Number	Tax Shelter Registration Number
REM	IC INFOR	MATION	(20.4)		
No.			Name of REMIC		Employer Identification Number
					20.3,20.4

ORGANIZER				Page	<u> </u>
2023	1040	US	Asset Disposition List	22	

If you disposed of any business assets in 2023, 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 2023

If you purchased any business assets (furniture, equipment, vehicles, real estate, etc.) or converted any personal assets to business use in 2023, please enter all pertinent information below.

		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	2 p2

23	1040	US	Vehicle Expenses		No.	22
	Please en	ter all pert	inent 2023 amounts. Last year's amo	ounts are provided for	or your reference.	
GEN	NERAL IN	FORMA [*]	TION	2022 Am overt	2022 Amazum	
Doscr	intion of vehic	0		2023 Amount	2022 Amount	[
	•		eduction			
			your deduction			
			personal use			
		_	or personal use			
			e than 5% owner			
			se if changed from 100% personal use			
ΔΙΙΤ	ГОМОВІЬ	E MII E A	GE			
			year)			
Avera	ge dally round	-trip commu	e			
ACT	TUAL EXF	PENSES				
Parkir	ng fees and tol	Is (business	portion only)			
Insura	ince					
Misce	llaneous					
Auto I	icense (other t	han persona	I property taxes)			
Perso	nal property ta	ixes (based o	on car's value)			
Intere	st (car Ioan) (f	or Schedule	C, E & F)			
Vehicl	le rent or lease	e payments.				
Inclus	ion amount (e	nter as positi	ve)			
		and the state of the	cle on Form W-2 (2106)			

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1040 US Adjustments to Income

24

Please enter all pertinent 2023 information. Last year's amounts are provided for your reference.

TRADITIONAL IRA CONTRIBUTIONS	2023 Amount		2022 Am	ount
	Taxpayer	Spouse	Taxpayer	Spouse
IRA contributions you made or expect to make (1=maximum) (\$6,500/\$7,500 if 50 or older)				
Contributions made to date				
1=covered by plan, 2=not covered				
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	(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: SE elective deferrals (except Roth) (1=max.)				
Individual 401k: SE designated Roth contributions (1=max.) SIMPLE contributions:				
Self-employed SIMPLE contributions you				
Self-employed SIMPLE contributions you made or expect to make (1=maximum)				
Employer matching rate if not .03 (.xxxx)				
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)				
Jury duty pay given to employer				
Attorney fees and court costs for unlawful discrimination claims				
Attorney fees and court costs paid in connection with an IRS award for information on tax law violations				
Contributions by certain chaplains to section 403(b) plans				
Reforestation amortization and expenses				
Repayment of supplemental unemployment benefits				
Expenses from rental of personal property				
Other adjustments to income:	1			

023	1040	US	Adjustments to Income		24 p2
	Please ente	er all perti	•	amounts are provided for your referen	ice.
ADJU	JSTMENT	S TO IN	COME		
Reci Reci	rce or sep. ag pient's first na pient's last na	greement ame	xpayer	Spouse	
	pient's SSN. ount paid		2022 amt:	2022 amt:	

2023 1040 US Itemized Deductions 25

Please enter all pertinent 2023 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.	2023 Amount	TS	2022 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			
Other medical and dental expenses:		<u> </u>	
TAXES PAID (State and local withholding and 2023 estimates are at	utomatic.)		
State income taxes - 1/23 payment on 2022 state estimate			
State income taxes - paid with 2022 state return extension			
State income taxes - paid with 2022 state return			
State income taxes - paid for prior years and/or to other state			
City/local income taxes - 1/23 payment on 2022 city/local estimate			
City/local income taxes - paid with 2022 city/local extension			
City/local income taxes - paid with 2022 city/local return			
SALES AND USE TAXES PAID			
State and local sales taxes (except autos and special items)			
Use taxes paid on 2023 purchases			
Use taxes paid with 2022 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:		1	
· L			

2023 1040 US Itemized Deductions (continued) 25 p2

NTEREST PAID			
lome mortgage int. (Box 1) and points (Box 2) reported on Form 1098:	2023 Amount	TS	2022 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			
oints not reported on Form 1098:			
nvestment interest (interest on margin accounts):			
Passive interest			
NOTE: Points paid on loans other than to buy, build, or improve your main	n home are deductible over the	life of	the mortgage.
	n home are deductible over the	life of	the mortgage.
NOTE: Points paid on loans other than to buy, build, or improve your main	n home are deductible over the	life of	the mortgage.
NOTE: Points paid on loans other than to buy, build, or improve your main For these types of loans also provide the dates and lives of the loa	ns.		
NOTE: Points paid on loans other than to buy, build, or improve your main For these types of loans also provide the dates and lives of the loans	ns. donor maintains a bank record	d. or a	written communication
NOTE: Points paid on loans other than to buy, build, or improve your main For these types of loans also provide the dates and lives of the loan CASH CONTRIBUTIONS NOTE: No deduction is allowed for cash or check contributions unless the from the donee, showing the name of the organization, contribution	ns. donor maintains a bank record n date(s), and contribution amo	d. or a	written communication
NOTE: Points paid on loans other than to buy, build, or improve your main For these types of loans also provide the dates and lives of the loan CASH CONTRIBUTIONS NOTE: No deduction is allowed for cash or check contributions unless the from the donee, showing the name of the organization, contribution thurches, schools, hospitals, and other charitable organizations (60% limit	ns. donor maintains a bank record n date(s), and contribution amo	d. or a	written communication
NOTE: Points paid on loans other than to buy, build, or improve your main For these types of loans also provide the dates and lives of the loan CASH CONTRIBUTIONS NOTE: No deduction is allowed for cash or check contributions unless the from the donee, showing the name of the organization, contribution	ns. donor maintains a bank record n date(s), and contribution amo	d. or a	written communication
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NOTE: Points paid on loans other than to buy, build, or improve your main For these types of loans also provide the dates and lives of the loan CASH CONTRIBUTIONS NOTE: No deduction is allowed for cash or check contributions unless the from the donee, showing the name of the organization, contribution thurches, schools, hospitals, and other charitable organizations (60% limit	ns. donor maintains a bank record n date(s), and contribution amo	d. or a	written communication
NOTE: Points paid on loans other than to buy, build, or improve your main For these types of loans also provide the dates and lives of the loan CASH CONTRIBUTIONS NOTE: No deduction is allowed for cash or check contributions unless the from the donee, showing the name of the organization, contribution thurches, schools, hospitals, and other charitable organizations (60% limit	ns. donor maintains a bank record n date(s), and contribution amo	d. or a	written communication
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NOTE: Points paid on loans other than to buy, build, or improve your main For these types of loans also provide the dates and lives of the load CASH CONTRIBUTIONS NOTE: No deduction is allowed for cash or check contributions unless the from the donee, showing the name of the organization, contribution thurches, schools, hospitals, and other charitable organizations (60% limit Contributions by cash or check: Volunteer expenses (out-of-pocket) Number of charitable miles	donor maintains a bank recorn date(s), and contribution amo	d, or a bunt(s)	written communication
NOTE: Points paid on loans other than to buy, build, or improve your main For these types of loans also provide the dates and lives of the load CASH CONTRIBUTIONS NOTE: No deduction is allowed for cash or check contributions unless the from the donee, showing the name of the organization, contribution contributions by cash or check: Contributions by cash or check: Volunteer expenses (out-of-pocket) Number of charitable miles Veterans' organizations, fraternal societies, nonprofit cemeteries, and certain	donor maintains a bank recorn date(s), and contribution amo	d, or a bunt(s)	written communication
NOTE: Points paid on loans other than to buy, build, or improve your main For these types of loans also provide the dates and lives of the load CASH CONTRIBUTIONS NOTE: No deduction is allowed for cash or check contributions unless the from the donee, showing the name of the organization, contribution thurches, schools, hospitals, and other charitable organizations (60% limit Contributions by cash or check: Volunteer expenses (out-of-pocket) Number of charitable miles	donor maintains a bank recorn date(s), and contribution amo	d, or a bunt(s)	written communication
NOTE: Points paid on loans other than to buy, build, or improve your main For these types of loans also provide the dates and lives of the load CASH CONTRIBUTIONS NOTE: No deduction is allowed for cash or check contributions unless the from the donee, showing the name of the organization, contribution contributions by cash or check: Contributions by cash or check: Volunteer expenses (out-of-pocket) Number of charitable miles Veterans' organizations, fraternal societies, nonprofit cemeteries, and certain	donor maintains a bank recorn date(s), and contribution amo	d, or a bunt(s)	written communication
NOTE: Points paid on loans other than to buy, build, or improve your main For these types of loans also provide the dates and lives of the load CASH CONTRIBUTIONS NOTE: No deduction is allowed for cash or check contributions unless the from the donee, showing the name of the organization, contribution contributions by cash or check: Contributions by cash or check: Volunteer expenses (out-of-pocket) Number of charitable miles Veterans' organizations, fraternal societies, nonprofit cemeteries, and certain	donor maintains a bank recorn date(s), and contribution amo	d, or a bunt(s)	written communication
NOTE: Points paid on loans other than to buy, build, or improve your main For these types of loans also provide the dates and lives of the load CASH CONTRIBUTIONS NOTE: No deduction is allowed for cash or check contributions unless the from the donee, showing the name of the organization, contribution contributions by cash or check: Contributions by cash or check: Volunteer expenses (out-of-pocket) Number of charitable miles Veterans' organizations, fraternal societies, nonprofit cemeteries, and certain	donor maintains a bank recorn date(s), and contribution amo	d, or a bunt(s)	written communication

25 _{p2}

23	1040	US	Itemized Deductions (continued)	25 p3
	Please en	ter all pert	inent 2023 amounts. Last year's amounts are provided for your reference.	
	NCASH C			
NOTE	:Use Sheet 26 that are not i	if total nonca in <i>good</i> used	ash contributions are over \$500. No deduction is allowed for contributions of clothing and househo condition or better. In addition, a deduction for any item with minimal monetary value may be de	old items nied.
50% li	imitation (see	above):	2023 Amount TS 2022 Amount	nt
30% li	 imitation (see	above):		
•				
30% c	capital gain pr	operty (gifts o	f capital gain property to 50% limit orgs.):	
20% c	capital gain pr	operty (gifts o	f capital gain property to non-50% limit orgs.):	
СТА	TE MICO	DEDC I	E NON CONFORMING TO TAY OUTS & LODG ACT	
			F NON-CONFORMING TO TAX CUTS & JOBS ACT (subject to 2% AGI	limit)
	· ·		papeas (uniforms and protective clothing	
profes	ssional subscri	iptions, emplo	penses (uniforms and protective clothing, yment agency fees, and certain edu. expenses):	
-				
Invest	ment expense	9:		

Tax return preparation fee	
Safe deposit box rental	
Miscellaneous deductions (2% AGI) (certain legal and accounting fees, and custodial fees):	
	•

2023 1040 US Itemized Deductions (continued)	25 n4
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Please enter all pertinent 2023 amounts. Last year's amounts are provided for your reference.

THER MISCELLANEOUS DEDUCTIONS	2023 Amount	TS	2022 Amount
te tax, section 691(c)			
r miscellaneous deductions:			
	_		
-	_		
-			
-			
	_		
	_		
	_		
	_		
		-+	

2023 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 2023 (\$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 2023 (\$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 2023 amounts and attach all 1098 forms. Last year's amounts are provided for your reference.

	2023 Amount	TS	2022 Amount
Fair market value of the property on the date that the last debt was secured .			
lome 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 (blank=10/13/87 - 12/15/17)			
Home acquisition debt balance - beginning of year			
Home acquisition debt borrowed in 2023			
Home equity debt balance - beginning of year			
Home equity debt borrowed in 2023			
Grandfather debt balance - beginning of year			
oan #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 (blank=10/13/87 - 12/15/17)			
Home acquisition debt balance - beginning of year			
Home acquisition debt borrowed in 2023			
Home equity debt balance - beginning of year			
Home equity debt borrowed in 2023			
Grandfather debt balance - beginning of year			
Form 1 = Schedule A (defau 2 = Business use of ho 3 = Schedule E			

25 p5

Itemized Deductions (continued) US $25_{\ p5\ cont}$ 2023 1040

Please enter all pertinent 2023 amounts and attach all 1098 forms. Last year's amounts are provided for your reference.

LOAN INFORMATION (continued)

Loan #3	2023 Amount	TS	2022 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 2023			
Home equity debt balance - beginning of year			
Home equity debt borrowed in 2023			
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 2023			
Home equity debt balance - beginning of year			
Home equity debt borrowed in 2023			
Grandfather debt halance heginning of year			

Form

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

2023 1040 US Noncash Contributions (Form 8283)

26

If your total noncash contributions are in excess of \$500 in 2023, 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.

DONATED	PROPE	RTY INFORMATION		
	Name of cha	aritable organization (donee)		
ı		ess		
I				
	1 -			
		2=joint		
		scription (other than vehicle)		
	Froperty de.	7		
No.		Identification number (VIN)		
NO	Vehicle	Year (yyyy)		
I		Make and model		
I		Condition and mileage		
		tribution (m/d/y)		
I		ed by donor (m/y)		
		ed by donor (Table 1 or describe)		
	Donor's cos	t or basis		
	Fair market	value		
	Method used	d to determine FMV (Table 2 or describ	pe)	·
			·	
	Name of cha	ritable organization (donee)		
	Street addre	SS		
		=joint		
	Property des	scription (other than vehicle)		
N		Identification number (VIN)		
No.	Vehicle	Year (yyyy)		
		Make and model		
		Condition and mileage		
	Date of conti	ribution (m/d/y)		
	Date acquire	ed by donor (m/y)		
	How acquire	d by donor (Table 1 or describe)		
	Donor's cost	or basis		
		value		
		I to determine FMV (Table 2 or describe)		
	1	, , , , , , , , , , , , , , , , , , , ,		
1			2	
1	How Pro	perty was Acquired	2 Method Used to	Determine FMV
1	= Purchase	3 = Inheritance	1 = Appraisal	3 = Catalog
2	= Gift	4 = Exchange	2 = Thrift shop value	4 = Comparable sales
			For other methods,	see IRS Pub 561
			Tor other methods,	355 MOT up. 501.

	4040					
2023	1040	US	Business Use of Home (Form 8829)	No.	29

Please enter 2023 indirect expenses in full. Nonbusiness portion will carry to Schedule A. Business percentage will be applied to indirect expenses only.

BUSINESS USE OF HOME	2023 Amount	2022 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:		
o and manded empended.		
DIRECT EXPENSES		
DIRECTEAPENSES		
NOTE: Direct expenses benefit only the business part of your home. They include	le	
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.	le	
painting or repairs made to specific areas or rooms used for business.	le	
painting or repairs made to specific areas or rooms used for business. Mortgage interest	le	
painting or repairs made to specific areas or rooms used for business. Mortgage interest Real estate taxes	le	
painting or repairs made to specific areas or rooms used for business. Mortgage interest Real estate taxes Casualty losses	le	
painting or repairs made to specific areas or rooms used for business. Mortgage interest Real estate taxes Casualty losses Insurance	le	
painting or repairs made to specific areas or rooms used for business. Mortgage interest Real estate taxes Casualty losses Insurance Miscellaneous	le	
painting or repairs made to specific areas or rooms used for business. Mortgage interest Real estate taxes Casualty losses Insurance Miscellaneous Rent	le	
painting or repairs made to specific areas or rooms used for business. Mortgage interest Real estate taxes Casualty losses nsurance. Miscellaneous Rent Repairs and maintenance	le	
painting or repairs made to specific areas or rooms used for business. Mortgage interest Real estate taxes Casualty losses Insurance Miscellaneous Rent Repairs and maintenance Utilities	le	
painting or repairs made to specific areas or rooms used for business. Mortgage interest Real estate taxes Casualty losses Insurance Miscellaneous Rent Repairs and maintenance Utilities Excess mortgage interest	le	
painting or repairs made to specific areas or rooms used for business. Mortgage interest Real estate taxes Casualty losses Insurance Miscellaneous Rent Repairs and maintenance Utilities Excess mortgage interest Excess real estate taxes	le	
painting or repairs made to specific areas or rooms used for business. Mortgage interest Real estate taxes Casualty losses Insurance Miscellaneous Rent Repairs and maintenance Utilities Excess mortgage interest Excess real estate taxes Excess casualty losses	le	
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painting or repairs made to specific areas or rooms used for business. Mortgage interest Real estate taxes Casualty losses Insurance Miscellaneous	le	
painting or repairs made to specific areas or rooms used for business. 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	le	

29

ORGANIZER Employee/Vehicle Bus. Exp. (Form 2106) US 1040 No. 2023 30 Please enter all pertinent 2023 amounts. Last year's amounts are provided for your reference. GENERAL INFORMATION Occupation, if different from Form 1040 Number of form (1=first Schedule C, 2=second, etc.) 1=spouse..... 1=performance artist, 2=handicapped, 3=fee-basis government official 1=minister's expenses **EMPLOYEE BUSINESS EXPENSES** 2023 Amount 2022 Amount Meal expenses in full..... Reimbursements for meals not on W-2, box 1 1=Department of Transportation (80% meal allowance) Other business expenses:

2023	1040	US	Vehicle Expenses (Form	2106) (cont.)	No.	30 p2		
	Please enter all pertinent 2023 amounts. Last year's amounts are provided for your reference.							
VEH	HICLE INF	ORMATI	ON	2023 Amount	2022 Amou	nt		
1=veh 1=no 1=no	nicle is availab other vehicle i evidence to su	le for off-duty s available for upport your de	than 5% owner personal use r personal use duction your deduction	2023 Alliount	ZOZZ AITIOUI			
VEH	HICLE 1		·					
Date Total Busin Busin Comr Avera Numb	placed in serving placed in serving mileage (for the sess mileage (for the sess mileage (for muting mileage age daily round per of months (for the session).	ice (m/d/y) ne tax year) 1/1/22 - 6/30/2 7/1/22 - 12/31. e (for the tax y 1-trip commute of business us	22). (22). (22). (22). (22). (23). (24). (25). (26). (27). (27). (28). (
		iis (business p	portion only)					
G R T In A P Ir V	repairs	her than person ty taxes (base in) (for Schedol lease paymen nt (enter as po	onal property taxes) ed on car's value) ule C, E & F) ts ositive) ehicle on Form W-2 (2106)					
VEH	HICLE 2							
Date Total Busin	placed in servi mileage (for the ness mileage (ice (m/d/y) ne tax year) 1/1/22 - 6/30/2	22)					
Avera Numb Parki	age daily round per of months on ng fees and to	I-trip commute of business us	rear)eeeeeee					
G R T Ir M A P	epairsires	her than persorty taxes (base	onal property taxes) ed on car's value) ule C, E and F)					
V Ir	ehicle rent or lactusion amour	lease paymen nt (enter as po	ts					

Please enter all pertinent 2023 information. Please enter all pertinent 2023 information. Please enter all pertinent 2023 information.	INIZER		1		_	raye
GENERAL INFORMATION 1-spouse Foreign address of taxpayer, if different from Form 1040: Street address. City Region. Postal code. Country. Employer: Name. U.S. street address. U.S. city. U.S. state address. Foreign street address. Foreign street address. Foreign region. Foreign postal code Foreign outry. Foreign region. Foreign postal code Foreign country. Employer type, 1-foreign entity, 2-U.S. company, 3-self, 4-foreign affiliate of U.S. company, 5-solther Employer type, if other. Type of exclusion revoked if revoked in earlier year (if applicable): Tax year revocation was effective Number of days during fax year at separate foreign conditions (if applicable): Number of days during fax year at separate foreign conditions (if applicable): Number of days during fax year at separate foreign conditions (if applicable): Number of days during fax year at separate foreign conditions (if applicable): Number of days during fax year at separate foreign conditions (if applicable):	23 1040	US	Foreign Income Exclu	sion (Form 2555)	No.	31.1
GENERAL INFORMATION 1-spouse Foreign address of taxpayer, if different from Form 1040: Street address City Region. Postal code Country. Employer: Name U.S. street address U.S. city. U.S. state address. U.S. city. U.S. state address. Foreign street address Foreign fregion. Foreign postal code Foreign postal code Foreign cutry. Employer type, I -foreign entity, 2-U.S. company, 3-self, 4-foreign affiliate of U.S. company, 5-solther Employer type, if other Type of exclusion revoked if revoked in earlier year (if applicable): Country of citizenship. City and country of separate foreign residence if maintained due to adverse living conditions (if applicable): Country of citizenship	•					
1=spouse. Foreign address of taxpayer, if different from Form 1040: Street address. City. Region. Postal code. Country. Employer: Name. U.S. street address. U.S. city U.S. state. U.S. zIP code. Foreign street address Foreign city. Foreign region. Foreign postal code. Foreign region. Foreign postal code. Foreign foreign entity, 2-U.S. company, 3-self, 4-foreign affiliate of U.S. company, 5-other Employer type: I =foreign, entity, 2-U.S. company, 5-other Employer type: I fother. Type of exclusion revoked if revoked in earlier year (if applicable): Tax year revocation was effective Number of days during tax year at separatio foreign address (if applicable) Number of days during tax year at separatio foreign address (if applicable)			Please enter all pertinent 2	023 information.		
Foreign address of taxpayer, if different from Form 1040: Street address. City Region. Postal code. Country. Employer: Name U.S. street address. U.S. city U.S. state. U.S. zliP code. Foreign street address. Foreign city. Foreign region. Foreign postal code Foreign fostal code Foreign fillate of U.S. company, 3-self, 4-foreign affiliate of U.S. company, 5-other Employer type; I -foreign entity, 2-U.S. company, 5-other Employer type, if other Type of exclusion revoked if revoked in earlier year (if applicable): Country of citizenship. City and country of separate foreign residence if maintained due to adverse living conditions (if applicable): Number of days during tax year at separate foreign enditions (if applicable):	GENERAL IN	NFORMA ^T	TION			
Street address City Region Postal code Country. Employer: Name U.S. street address U.S. city U.S. state U.S. ZiP code Foreign street address Foreign crigon Foreign region Foreign region Foreign region Foreign gostal code Foreign gountry Employer type: 1-foreign entity, 2=U.S. company, 3-self, 4-foreign affiliate of U.S. company, 5-other Employer type: 1 foreign entity, 2=U.S. company, 5-other Country of citizenship. Country of citizenship. City and country of separate foreign residence if maintained due to adverse living conditions (if applicable): Dates tax home(s) were						
City. Region Postal code Country. Employer: Name. U.S. street address. U.S. city. U.S. state U.S. ZIP code. Foreign street address. Foreign city. Foreign region. Foreign postal code. Foreign postal code Foreign country. Employer type: 1=foreign entity, 2=U.S. company, 3-self, 4=foreign affiliate of U.S. company, 5-sother Employer type, if other. Type of exclusion revoked if revoked in earlier year (if applicable): Tax year revocation was effective Number of days during tax year at separate foreign address (if applicable) Number of days during tax year at separate foreign address (if applicable)			· · · · · · · · · · · · · · · · · · ·			
Region Postal code. Country. Employer: Name. U.S. street address U.S. city. U.S. state U.S. ZIP code. Foreign street address Foreign city. Foreign region. Foreign postal code Foreign postal code Foreign country Employer type: 1=foreign entity, 2=U.S. company, 3=self, 4=foreign affiliate of U.S. company, 5=solf, 4=foreign affiliate of						
Postal code Country Employer: Name U.S. street address U.S. city U.S. state U.S. zIP code Foreign street address Foreign city. Foreign postal code Foreign country Employer type: 1=foreign entity, 2=U.S. company, 3-self, 4=foreign affiliate of U.S' company, 5-other Employer type, if other Type of exclusion revoked if revoked in earlier year (if applicable): Tax year revocation was effective Number of days during tax year at separate foreign address (if applicable): Number of days during tax year at separate foreign address (if applicable):						
Country Employer: Name. U.S. street address. U.S. city. U.S. state. U.S. ZIP code. Foreign street address. Foreign city. Foreign region. Foreign postal code. Foreign country. Employer type: 1=foreign entity, 2=U.S. company, 3=self; 4=foreign affiliate of U.S' company, 5=other. Employer type, if other. Type of exclusion revoked if revoked in earlier year (if applicable): Tax year revocation was effective Country of citizenship. City and country of separate foreign residence if maintained due to adverse living conditions (if applicable): Dates tax home(s) were	· ·					
Name U.S. street address U.S. city. U.S. state. U.S. ZIP code Foreign street address Foreign city Foreign region Foreign postal code Foreign postal code Foreign country. Employer type: 1=foreign entity, 2=U.S. company, 3=self, 4=foreign affiliate of U.S. company, 5=other Employer type, if other Type of exclusion revoked if revoked in earlier year (if applicable): Tax year revocation was effective Country of citizenship. City and country of separate foreign residence if maintained due to adverse living conditions (if applicable): Dates tax home(s) were						
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U.S. ztlP code Foreign street address Foreign city Foreign postal code Foreign country Employer type: 1=foreign entity, 2=U.S. company, 3=self, 4=foreign affiliate of U.S. company, 5=other Employer type, if other. Type of exclusion revoked if revoked in earlier year (if applicable): Tax year revocation was effective Country of citizenship. City and country of separate foreign residence if maintained due to adverse living conditions (if applicable): Dates tax home(s) were	U.S. street add	lress				
U.S. ZIP code. Foreign street address. Foreign city. Foreign region. Foreign postal code. Foreign country. Employer type: 1=foreign entity, 2=U.S. company, 3=self, 4=foreign affiliate of U.S. company, 5=other. Employer type, if other. Type of exclusion revoked if revoked in earlier year (if applicable): Tax year revocation was effective Country of citizenship. City and country of separate foreign residence if maintained due to adverse living conditions (if applicable): Number of days during tax year at separate foreign address (if applicable)						
Foreign street address Foreign city Foreign region Foreign postal code Foreign country Employer type: 1=foreign entity, 2=U.S. company, 3=self, 4=foreign affiliate of U.S. company, 5=other Employer type, if other Type of exclusion revoked if revoked in earlier year (if applicable): Tax year revocation was effective Country of citizenship City and country of separate foreign residence if maintained due to adverse living conditions (if applicable): Number of days during tax year at separate foreign address (if applicable) Number of days during tax year at separate foreign address (if applicable)						
Foreign region. Foreign postal code. Foreign country. Employer type: 1=foreign entity, 2=U.S. company, 3=self, 4=foreign affiliate of U.S. company, 5=other Employer type, if other. Type of exclusion revoked if revoked in earlier year (if applicable): Tax year revocation was effective Country of citizenship. City and country of separate foreign residence if maintained due to adverse living conditions (if applicable): Dates tax home(s) were						
Foreign postal code. Foreign country. Employer type: 1=foreign entity, 2=U.S. company, 3=self, 4=foreign affiliate of U.S. company, 5=other. Employer type, if other. Type of exclusion revoked if revoked in earlier year (if applicable): Tax year revocation was effective Country of citizenship. City and country of separate foreign residence if maintained due to adverse living conditions (if applicable): Number of days during tax year at separate foreign address (if applicable) Dates tax home(s) were						
Foreign postal code Foreign country. Employer type: 1=foreign entity, 2=U.S. company, 3=self, 4=foreign affiliate of U.S. company, 5=other Employer type, if other. Type of exclusion revoked if revoked in earlier year (if applicable): Tax year revocation was effective Country of citizenship. City and country of separate foreign residence if maintained due to adverse living conditions (if applicable): Dates lax home(s) were	= =					
Foreign country. Employer type: 1=foreign entity, 2=U.S. company, 3=self, 4=foreign affiliate of U.S. company, 5=other Employer type, if other. Type of exclusion revoked if revoked in earlier year (if applicable): Tax year revocation was effective Country of citizenship. City and country of separate foreign residence if maintained due to adverse living conditions (if applicable): Number of days during tax year at separate foreign address (if applicable) Dates tax home(s) were						
Employer type: 1=foreign entity, 2=U.S. company, 3=self, 4=foreign affiliate of U.S. company, 5=other Employer type, if other Type of exclusion revoked if revoked in earlier year (if applicable): Tax year revocation was effective Country of citizenship City and country of separate foreign residence if maintained due to adverse living conditions (if applicable): Number of days during tax year at separate foreign address (if applicable) Dates tax home(s) were						
Employer type, if other. Type of exclusion revoked if revoked in earlier year (if applicable): Tax year revocation was effective Country of citizenship. City and country of separate foreign residence if maintained due to adverse living conditions (if applicable): Number of days during tax year at separate foreign address (if applicable) Dates tax home(s) were	Employer type	1=foreign e	entity 2=LLS company			
Type of exclusion revoked in earlier year (if applicable): Country of citizenship. City and country of separate foreign residence if maintained due to adverse living conditions (if applicable): Dates tax home(s) were	3=self, 4=foreiç	gn affiliate of l	U.S. company, 5=other			
Country of citizenship. City and country of separate foreign residence if maintained due to adverse living conditions (if applicable): Dates tax home(s) were	Employer type,	if other				
Country of citizenship. City and country of separate foreign residence if maintained due to adverse living conditions (if applicable): Dates tax home(s) were						
City and country of separate foreign residence if maintained due to adverse living conditions (if applicable): Number of days during tax year at separate foreign address (if applicable) Dates tax home(s) were	Type of exclusion r	revoked if revo	oked in earlier year (if applicable):	Tax year revocation was effective		
City and country of separate foreign residence if maintained due to adverse living conditions (if applicable): Number of days during tax year at separate foreign address (if applicable) Dates tax home(s) were					4	
City and country of separate foreign residence if maintained due to adverse living conditions (if applicable): Number of days during tax year at separate foreign address (if applicable) Dates tax home(s) were					4	
City and country of separate foreign residence if maintained due to adverse living conditions (if applicable): Number of days during tax year at separate foreign address (if applicable) Dates tax home(s) were						
Dates tax home(s) were	Country of citizens	hip				
Dates tax home(s) were	_	·				
Tax homes(s) during tax year: Dates tax home(s) were established (m/d/y)	adverse living cond	ditions (if appli	icable):	Number of days during tax year at separate foreign address (if applicable)		
Tax homes(s) during tax year: Dates tax home(s) were established (m/d/y) established (m/d/y)						
Tax homes(s) during tax year: Dates tax home(s) were established (m/d/y)					4	
Tax homes(s) during tax year: Dates tax home(s) were established (m/d/y) Established (m/d/y)						
	Tax homes(s) durir	ng tax year:				

23	1040	US	Foreigr	n Income Ex	clusion (25	55)	No.	31.1 _F
			Please	e enter all pertir	ent 2023 inform	ation.		
TRA	AVEL INF	ORMATIO	ON					
				s travel for 2024 knd				
Trav	el Type (table	e) Name o	country (if not	United States)	Date arrived	Date left	Days in U.S.	on business
				AND PHYSIC	AL PRESENC	E TEST		
•	•						-	
Living or apa	quarters in fo artment, 3=rer	oreign country nted room, 4=	: 1=purchased quarters furnish	home, 2=rented hou ned by employer	se			
Names	of family living al	broad with taxpay	er (if applicable):	Rela	ationship	Period	family lived abroa	ıd
		-		esidence				
Contra	actual terms r	elating to leng	gth of employme	fide residence ent abroad				
				if applicable)				
Addre	ss of home in	U.S. maintai (if applicable)	ned	,		ZIP Cod		6. home rented
Wille	iiviiig abioau	(п аррпсавле)				ZIP Cou	e (II	applicable)
	Names	of occupants	in U.S. home	(if applicable)	Relation	ship of occupants in U	.S. home (if applic	cable)
Princi	pal country of	employment						
-	DEICNIII		EXPENSES	•				
				.	2023	3 Amount	2022 Amou	nt
Locati	ion of housing	expenses:			Qualify	ing days in location (n	nultiple locations o	nly)
				Trav	el Type			
				1 = Travel to U. 2 = Travel to for	reign country			
				3 = Travel to re	stricted country			

ORGANIZER Foreign Income Exclusion (Form 2555) US No. 2023 1040 31.2 Please enter all pertinent 2023 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. FOREIGN WAGES, SALARIES, TIPS 2023 Amount Name or number..... 1=spouse..... 1=retirement plan (Box 13) Wages, tips, other compensation (Box 1) Federal income tax withheld (Box 2) Social security tax withheld (Box 4) Medicare tax withheld (Box 6) State income tax withheld (Box 17) Local income tax withheld (Box 19) FOREIGN ALLOWANCES, REIMBURSEMENTS AND OTHER EARNED INCOME Noncash Income Home (lodging) Other properties or facilities: **Allowances and Reimbursements** Quarters.. Other purposes: Other Foreign Earned Income 2023 Days Worked Allocation Information Total days worked before and after foreign assignment Foreign days worked before and after foreign assignment

31.2

2023 1040 US Health Savings Accounts (8889) 32.1

Please enter all pertinent 2023 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 2023, a high deductible health plan is one with an annual deductible that is not less than \$1,500 for self-only coverage or \$3,000 for family coverage, and the annual out-of-pocket expenses (deductibles, co-payments, and other amounts, but not premiums) do not exceed \$7,500 for self-only coverage or \$15,000 for family coverage.

	2023 Am	ount	2022 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				

23	1040	US	Child and Depe	endent Care E	Expenses (F	orm 2441)	33.1,33.
ease e paid	nter all pe for the ca	ertinent 202 ere of one o	3 information. Last year r more dependents en	ar's amounts are p abling you to worl	provided for you k or attend school	r reference. You ol to qualify for t	must have his credit.
DEP	ENDEN	Γ CARE E	XPENSES (33.1)	2023 Amo Taxpayer	ount Spouse	2022 Amou Taxpayer	unt Spouse
			ed but not paid in 2023 ted in 2023	Тахраует	Spouse	Тахрауеі	Spouse
PER	SONS A	ND EXPE	NSES QUALIFYING	FOR DEPEND	DENT CARE C	REDIT	
	La Tit	st name le or suffix	d/y)				
No.	Qu inc	ualified depend curred and paid over age 12 & disa	umberlent care expenses d in 2023 abled at the time care was provided at			2022 amt:	
No.	La: Tit Da	st namele or suffixte of birth (m/d	/y)				
	1=0	curred and paid over age 12 & disa	ent care expenses in 2023 abled at the time care was provided			2022 amt:	
PER	SONS O	R ORGAI	NIZATIONS PROVII	DING CARE (33	.2)		
No.	Sti Cit Sta ZIF Fo Fo Fo	reet address ty code reign region reign postal cooreign country.	de				
	An	nount paid to d	mber (SSN or EIN) care provider in 2023 at			2022 amt:	

33.1,33.2

UKGANIZEK				Page 43
2023	1040	US	Qualified Adoption Expenses (Form 8839)	37

	enter all pertinent 2023 information. Last yea	•	•
ELIGIBLE	CHILDREN	2023 Amount	2022 Amount
No.	First name. Last name. Identification number. Date of birth (m/d/y). 1=born before 2006 and was disabled 1=special needs child. 1=foreign child. 1=adoption was not final in 2023 Qualified Adoption Expenses Paid in 2022 for adoption not finalized by end of 2023 Prior years for adoption of foreign child finalized in 20.23 2022 and 2023 for adoption finalized in 2023 2023 for adoption finalized before 2023 1=spouse, 2=joint.	23	
No.	First name Last name Identification number Date of birth (m/d/y) 1=born before 2006 and was disabled 1=special needs child 1=foreign child 1=adoption was not final in 2023 Oualified Adoption Expenses Paid in 2022 for adoption not finalized by end of 2023 Prior years for adoption of foreign child finalized in 20 2022 and 2023 for adoption finalized in 2023 2023 for adoption finalized before 2023 1=spouse, 2=joint	23	
No.	First name Last name Identification number Date of birth (m/d/y) 1=born before 2006 and was disabled 1=special needs child 1=foreign child 1=adoption was not final in 2023 Qualified Adoption Expenses Paid in 2022 for adoption not finalized by end of 2023 Prior years for adoption of foreign child finalized in 2023 2023 for adoption finalized in 2023 2023 for adoption finalized before 2023 1=spouse, 2=joint	23	

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2023	1040	US	Education Credits	No.	38	

Please complete the information below if you paid qualified education expenses in 2023 for you

1=taxpayer, 2=spouse		
· · ·		
_ast name		
Social security number		
Number of prior years AOC claimed		
l=student was NOT enrolled at least half-time for at least one academic period that began in 2023 (or the first 3 months of 2024 if the qualified expenses were made in 2023) at an eligible institution in a qualified program		
=student completed first four years of post-secondary education before 2023 =student was convicted, before the end of 2023, of a felony for possession or distribution of a controlled substance		
EDUCATIONAL INSTITUTION ATTENDED (#1)		
Name		
Street address		
City		
State		
ZIP code		
1=2023 Form 1098-T was NOT received		
I=2023 Form 1098-T received with Box 7 completed		
1=2022 Form 1098-T received with Box 7 completed		
Federal ID number from Form 1098-T		
Name Street address City State ZIP code I=2023 Form 1098-T was NOT received I=2023 Form 1098-T received with Box 7 completed I=2022 Form 1098-T received with Box 7 completed Federal ID number from Form 1098-T		
QUALIFIED EDUCATION EXPENSES	2023 Amount	2022 Amount
Qualified tuition & fees paid in 2023 (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 *		

2023 1040 US Household Employment Taxes (Schedule H)

Please enter all pertinent 2023 information. Last year's amounts are provided for your reference.

HOUSEHOLD EMPLOYMENT TAXES

NOTE:If you paid any one household employee cash wages of \$2,600 or more in 2023; withheld federal income tax during 2023 for any household employee; or paid total cash wages of \$1,000 or more in any calendar quarter of 2022 or 2023 to household employees, please complete the following:

Employer identification number		
1=spouse, 2=joint		
Social security, Medicare and income taxes:	2023 Amount	2022 Amount
1=paid any one employee cash wages of \$2,600 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		
Federal unemployment tax:		T
1=paid total cash wages of \$1,000 or more in any calendar quarter of 2022 or 2023		
Total cash wages subject to FUTA tax		
1=paid unemployment contributions to only one state		
1=paid all state unemployment contributions by 4/15/24		
1=all wages taxable for FUTA were also taxable for state unemployment.		
Name of state		
Contributions paid to state unemployment fund		

42

23	1040	US	Parent's Election to Report	rt Child's Inc.	No.	44
	Plea	ise enter a	Il pertinent 2023 amounts & attach all Last year's amounts are provided for	1 1099-INT and 1099-I	OIV forms.	
CHI	LD'S INFO	TEMATIC		or your reference.		
	name name					
	security numl					
Date o	of birth (m/d/y)					
	ntaxable to fed					
1=non	ntaxable to sta	te				
INTI	EREST IN	COME (F	Form 1099-INT)			
Banks	s, credit unions	s, etc. (Box 1)	:	2023 Amount	2022 Amount	t
U.S. b	onds, T-bills,	etc. (nontaxal	ble to state) (Box 3):			
		(1011				
	xempt interest		_			
	-state municip tments:	ai bulius				
-		ution				
Ta	ax-exempt inte	rest (1099-IN	T in error)			
OI	ID adjustment					
	,					
Foreig	•	outbority, over	foreign account			
		=	foreign account			
	_	-	ed distribution from foreign trust			
	-		nterest (included above) (6251)			
DIVI	IDEND IN	COME (F	orm 1099-DIV)			
	ordinary divide	•	·			
rotart	oraniary arviac	mas (Box ra)	·			
•						
Total	capital gain di	stributions (Bo	ox 2a):			
•						
Unrec	aptured section	n 1250 gain (Box 2b)			
	-	=				
Collec	tibles (28%) g	ain (Box 2d).				
Nonta	xable distribut	ions (Box 3).				
	xempt interest		_			
	-					
	-state municip nee distributior					
	=					
Alaska	a permanent fo	und dividends	included above			

44

ORGANIZER Report of Foreign Bank and Financial Accounts US 1040 82.1 2023 Please enter all pertinent 2023 amounts. Last year's amounts are provided for your reference. GENERAL INFORMATION 2023 Amount 2022 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 48

					20.90 10
2023	1040	US	Report of Foreign Bank & Fin. Accts.	No.	82.1 _{n2}

Please enter all pertinent 2023 amounts.	Last year's amounts a	are provided for your reference
--	-----------------------	---------------------------------

INFORMATION ON FINANCIAL ACCOUNTS	2023 Amount	2022 Amount
1=spouse.		
Type of account: 1=bank account, 2=securities account, or specify		
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	HC	Foreign Departing (0020)	No.	02.2
2023	1040	US	Foreign Reporting (8938)	INO.	82.2 _{p2}

Please enter all pertinent 2023 amounts. Last year's amounts are provided for your reference.

FOREIGN DEPOSIT AND CUSTODIAL ACCOUNTS (Part I)

	2023 Amount	2022 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)		
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		
4		
1		
Type of I	Entity	
1 = Partn		
2 = Corpo 3 = Trust	oration	
4 = Estate	e	

82.2_{p2}

2023	1040	US	Foreign Reporting (8938) (continued)	No.	82.2 p2
	Please enter all pertinent 2023 amounts. Last year's amounts are provided for your reference.				
OTH	IER FOREIG	N ASSETS	(Part II) (continued)		
Issuer	r or counterparty	y (#1):			
			(see table 2)		
			person, 2=foreign person		
	-				
	r or counterparty				
		. ,	(see table 2)		
			person, 2=foreign person		
		-			
S	state/province				
Р	ostal code				
С	ountry				
Issuer	r or counterparty	y (#3):			
N	lame				
1	=issuer, 2=coun	terparty			
T	ype of issuer or	counterparty	(see table 2)		
Is	ssuer or counter	party: 1=US p	person, 2=foreign person		
M	Mailing address .				
	•				
	r or counterparty				
			(table 0)		
			(see table 2)		
			person, 2=foreign person		
	-				
			2		
			Type of Issuer or Counterparty		
			1 = Individual		
			2 = Partnership 3 = Corporation		
			4 = Trust 5 = Estate		