		Perso	nal Information			1
Mark if you we	status code (1 = Single, 2 = Married ere married but living apart all onresident alien spouse does	year	Taxpayer Identification N			
Social socurity	numbor		Taxpayer		Spouse	
Social security First name	number	•		_		
Last name						
Occupation						
Designate \$3.0	00 to the presidential election	campaign fund? (1 = Yes	, 2 = No, 3 = Blank)			-
•	dent of another taxpayer					<u> </u>
	income less than 1/2 support	age 18 or 19 - 23 full-t	ime student? (Y, <u>N)</u>			
Mark if legally	blind		hermone			
Date of birth Date of death		_				
	telephone number/ext numb	er –	•			
	telephone number		to the second se	<u> </u>		
	ize us to discuss your return w	vith the IRS? (Y, N)				
		Present	Mailing Address			
Address						
Apartment nu	mber					
•	tal code, zip code					
Foreign count	ry name					
Foreign phone	number		-			
In care of addi	essee		<u> </u>			
		Depend	dent Information			
	(*	Please refer to Depe	ndent Codes located at t	he bottom)	Months**Dep	Care expenses
First Name	e Last Name	Date of Birth	Social Security No.	Relationship	in Codes home * **	paid for dependent
			, <u>, , , , , , , , , , , , , , , , , , </u>			
						-
			-			
			, p			
	who lived with you but is not number of qualifying person	your dependent				
			pendent Codes			
	number of qualifying person 1 = Child who lived with yo	De _l	**Other 1 = Stud	ent (Age 19 - 23)		
Social security	number of qualifying person 1 = Child who lived with yo 2 = Child who did not live w	De _l	**Other 1 = Stude e/separation 2 = Disal	oled dependent		
Social security	number of qualifying person 1 = Child who lived with yo 2 = Child who did not live w 3 = Other dependent	Dep u vith you due to divorc	**Other 1 = Stud e/separation 2 = Disal 3 = Depe	oled dependent endent who is both a	a student and disa	bled
Social security	number of qualifying person 1 = Child who lived with yo 2 = Child who did not live w 3 = Other dependent 4 = Other dependents, but	Dep u vith you due to divorc do not qualify for Cre	**Other 1 = Stud e/separation 2 = Disal 3 = Depe dit for Other Dependent	oled dependent endent who is both a	a student and disa	bled
Social security	number of qualifying person 1 = Child who lived with yo 2 = Child who did not live w 3 = Other dependent 4 = Other dependents, but 5 = Qualifying child for Earn	Depute The point of the point	**Other 1 = Stud e/separation 2 = Disal 3 = Depe dit for Other Dependent y	oled dependent endent who is both a s (ODC)	a student and disa	bled
Social security	number of qualifying person 1 = Child who lived with yo 2 = Child who did not live w 3 = Other dependent 4 = Other dependents, but 5 = Qualifying child for Earr 6 = Children who lived with	Depute The point in the point of the point	**Other 1 = Stud e/separation 2 = Disal 3 = Depe dit for Other Dependent Y ify for Earned Income Cr	oled dependent endent who is both a s (ODC)	a student and disa	bled
Social security	number of qualifying person 1 = Child who lived with yo 2 = Child who did not live w 3 = Other dependent 4 = Other dependents, but 5 = Qualifying child for Earr 6 = Children who lived with 7 = Children who lived with	Depute to divorce to dinduce to divorce to divorce to divorce to divorce to divorce to d	**Other 1 = Stud e/separation 2 = Disal 3 = Depe dit for Other Dependent y ify for Earned Income Cr ify for Child Tax Credit	oled dependent endent who is both a s (ODC) edit		
*Basic	number of qualifying person 1 = Child who lived with yo 2 = Child who did not live w 3 = Other dependent 4 = Other dependents, but 5 = Qualifying child for Earr 6 = Children who lived with	Depute to divorce to divorce do not qualify for Crested Income Credit only you, but do not qualityou,	**Other 1 = Stud e/separation 2 = Disal 3 = Depe dit for Other Dependent y ify for Earned Income Cr ify for Child Tax Credit	oled dependent endent who is both a s (ODC) edit		
*Basic	number of qualifying person 1 = Child who lived with yo 2 = Child who did not live w 3 = Other dependent 4 = Other dependents, but 5 = Qualifying child for Earr 6 = Children who lived with 7 = Children who lived with 8 = Children who lived with	Depute The post of the post o	**Other 1 = Stud e/separation 2 = Disal 3 = Depe dit for Other Dependent y ify for Earned Income Cr ify for Child Tax Credit	oled dependent endent who is both a s (ODC) edit		
*Basic	number of qualifying person 1 = Child who lived with yo 2 = Child who did not live w 3 = Other dependent 4 = Other dependents, but 5 = Qualifying child for Earr 6 = Children who lived with 7 = Children who lived with 8 = Children who lived with 8 = Children who lived with 7 = Reported on odd year	Depute The post of the post o	**Other 1 = Stud e/separation 2 = Disal 3 = Depe dit for Other Dependent y ify for Earned Income Cr ify for Child Tax Credit	oled dependent endent who is both a s (ODC) edit		
*Basic	number of qualifying person 1 = Child who lived with yo 2 = Child who did not live w 3 = Other dependent 4 = Other dependents, but 5 = Qualifying child for Earr 6 = Children who lived with 7 = Children who lived with 8 = Children who lived with 8 = Children who lived with 8 = Reported on odd year 88 = Reported on even yea	Depute The post of the post o	**Other 1 = Stud e/separation 2 = Disal 3 = Depe dit for Other Dependent y ify for Earned Income Cr ify for Child Tax Credit	oled dependent endent who is both a s (ODC) edit	endents/Earned In	

Form ID: Bank

3

Direct Deposit/Electronic Funds Withdrawal Information

Per IRS Security Summit requirements, verify the name of financial institution, routing transit number, account number, and type of account below. If you would like to have a refund direct deposited into or a balance due debited from your bank account(s), please enter information in the fields below. Note that electronic funds will be withdrawn only from the primary account listed below.

Mark to verify all accounts listed below have been reviewed, updated as needed, and are correct.

Primary account:			
Financial institution routing transit number			
Name of financial institution			
Your account number		•	
Type of account (1 = Savings, 2 = Checking, 3 = IRA*)			
Mark if married filing jointly and this is a joint account (Both taxpaye			******
Mark if financial institution is foreign based (Not located in the territoria			
Enter the maximum dollar amount, or percentage of total refund	Dollar	or Percent (xxx.xx)	
Secondary account #1:			
Financial institution routing transit number			
Name of financial institution			
Your account number			
Type of account (1 = Savings, 2 = Checking, 3 = IRA*)			
Mark if married filing jointly and this is a joint account (Both taxpaye	r and spouse names are on the account)		_
Mark if financial institution is foreign based (Not located in the territoria			
Enter the maximum dollar amount, or percentage of total refund	Dollar	or Percent (xxx.xx)	
Casardam, assaunt #2.			
Secondary account #2:			
Financial institution routing transit number			
Name of financial institution			
Your account number			_
Type of account (1 = Savings, 2 = Checking, 3 = IRA*)			
Mark if married filing jointly and this is a joint account (Both taxpayer			_
Mark if financial institution is foreign based (Not located in the territoria			_
Enter the maximum dollar amount, or percentage of total refund	Dollar	or Percent (xxx.xx)	_
*Refunds may only be direct deposited to established traditional, Roth or SEP-IRA accounts.	. Make sure direct deposits will be accepted by	the bank or financial institution.	
D. f I. U.S. C	I Coult on Double of		
Refund - U.S. Series	I Savings Bond Purchases		
A tax refund may be used to buy up to \$5,000 of U.S. Series I Saving to purchase U.S. Series I Savings bonds (in increments of \$50) with Please note you may enter only one name per registration (with example 1) and the saving series of \$50 or \$50	your refund, if applicable, please	complete the following informa	ation.
name, do not use nicknames.			
Indicate either a maximum dollar amount (up to \$5,000), or percenta	ge of refund you would like used to	purchase bonds	
The bonds will be registered to the name(s) on the return. For married filing joint returns	this means the bonds will be registered in both	names listed on the return.	
To register the bonds separately, leave these fields blank and use the fields provided below	ow.		
Enter either a dollar amount or percent, but not both	Dollar	or Percent (xxx.xx)	
Bond information for someone other than taxpayer and spouse, if ma			
Maximum dollar amount (up to \$5,000), or percentage of refund us	sed to purchase bondsollar	or Percent (xxx.xx)	
Owner's name (First Last)			
Co-owner or beneficiary (First Last)			
Mark if the name listed above is a beneficiary			_
Bond information for someone other than taxpayer and spouse, if ma	arried filing jointly		
Maximum dollar amount (up to \$5,000), or percentage of refund us		or Porcent from and	
	sed to harcitase notifingular	or Percent (xxx.xx)	
()whor's name (First Last)			
Owner's name (First Last)			
Co-owner or beneficiary (First Last)			
· · · · · · · · · · · · · · · · · · ·			
Co-owner or beneficiary (First Last)		Form ID:	

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7		
	. 4	

Form ID: IntDiv

Interest and Dividend Summary

Below is a list of the forms as reported in last year's tax return. Please provide copies of all 1099-INT and 1099-DIV you received. To indicate which forms are attached, enter a "1" for attached in the field provided. To indicate which forms are not applicable, enter a "2" for not applicable (N/A) in the field provided. Otherwise, leave this field blank.

Form	T/S/J	Description	Mark if Foreign	1 = Attached 2 = N/A
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			-	_
				_
	—			Approximation of
				A

Taxpayer/Spouse (T, S)

Prior Year Information

Form ID: W2

Wages and Salaries #1 Please provide all copies of Form W-2. 2023 Information

Employer name		
Were these wages earned for service as: (1 = Minister, 2 = Mili	tary, 3 = Farming / Fishing, 4 = National Guard, 5 = Diff of Care)	
Mark if this is your current employer	_	
Mark if this is the last year for this employer	<u>_</u>	
Federal wages and salaries (Box 1)	+	
Federal tax withheld (Box 2)	+	
Social security wages (Box 3) (If different than federal wages)	+	
Social security tax withheld (Box 4)	+	
Medicare wages (Box 5) (If different than federal wages)	+	
Medicare tax withheld (Box 6)	+	
SS tips (Box 7)	+	
Allocated tips (Box 8)	+	
Dependent care benefits (Box 10)	+	
Box 13 -		
Statutory employee	<u>_</u>	
Retirement plan	_	
Third-party sick pay	_	
State postal code (Box 15)	_	
State wages (Box 16) (If different than federal wages)	+	
State tax withheld (Box 17)	+	
Local wages (Box 18)	+	
Local tax withheld (Box 19)	+	
Name of locality (Box 20)		
	Control Totals +	
	w loli "	
	Wages and Salaries #2	
Plea	se provide all copies of Form W-2.	
	2023 Information	Prior Year Information
Taxpayer/Spouse (T, s)	_	
Employer name		
Were these wages earned for service as: (1 = Minister, 2 = Milit	ary, 3 = Farming / Fishing, 4 = National Guard, 5 = Diff of Care)	
Mark if this your current employer	power.	
Mark if this is the last year for this employer		
Federal wages and salaries (Box 1)	+	
Federal tax withheld (Box 2)	+	:
Social security wages (Box 3) (If different than federal wages)	+	
Social security tax withheld (Box 4)	+	
Medicare wages (Box 5) (If different than federal wages)	+	
Medicare tax withheld (Box 6)	+	
SS tips (Box 7)	+	
Allocated tips (Box 8)	+	
Dependent care benefits (Box 10)	+	
Box 13 -		
Statutory employee	_	
Retirement plan	_	
Third-party sick pay	_	
State postal code (Box 15)		
State wages (Box 16) (If different than federal wages)	+	
State tax withheld (Box 17)	+	
Local wages (Box 18)	+	
Local tax withheld (Box 19)	+	
Name of locality (Box 20)		
	Control Totals +	
	Control Totals +	

Form ID: Income		Other Income		18
State and local income tax refund:	s	4	2023 Information	Prior Year Information
	T/S	Agreement Date	2023 Information	Prior Year Information
Alimony received	1/3	=	+	
			+	
**Unemployment benefits are tax any amount of tax withheld. You				
		Taxpayer	Spouse	Prior Year Information
Unemployment compensation**	+		+	
Unemployment compensation fed			H	
Unemployment compensation sta			+	
Unemployment compensation rep Alaska Permanent Fund dividends	paid +		+ 	
Alaska Permanent Fund dividends	т			
Self-				
Employment Income ?				
T/S/J (Y, N)			2023 Information	Prior Year Information
	ome, such as: Commission			
			+ +	
			+	
			+	
			+	
		-	t	a to the second
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			<u> </u>	
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		+	+	
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		+	+	
			t	
		-	+	
		-	+	
			+	
		-	+	
		-	+	
		-	+	
NOTES/QUESTIONS:				

Control Totals +

Form ID: Income

Form ID: 1099R Pension, Ann	nuity, and IRA Distributions #1	24
Please	provide all Forms 1099-R.	
	2023 Information	Prior Year Information
Taxpayer/Spouse (τ, s)	_	
Name of payer		
State postal code		
Gross distributions received (Box 1)	+	
Taxable amount received (Box 2a)	+	
Federal withholding (Box 4)	+	
Distribution code (Box 7)		
Mark if distribution is from an IRA, SEP, SIMPLE retirement	-	
State withholding (Box 14)	+	
Local withholding (Box 17)	+	
Amount of rollover	+	
Mark if distribution was due to a pre-retirement age disability	_	
	Control Totals +	forth of the form the form of
Pension, Ann	nuity, and IRA Distributions #2	
	provide all Forms 1099-R.	
	2023 Information	Prior Year Information
Taxpayer/Spouse (т, s)	_	
Name of payer		
State postal code		
Gross distributions received (Box 1)	+	
Taxable amount received (Box 2a)	+	
Federal withholding (Box 4)	+	
Distribution code (Box 7)		_
Mark if distribution is from an IRA, SEP, SIMPLE retirement	plan	
State withholding (Box 14)	+	
Local withholding (Box 17)	+	
Amount of rollover	+	
Mark if distribution was due to a pre-retirement age disability	_	
	Control Totals +	
	,	
Pension, Ann	uity, and IRA Distributions #3	
	provide all Forms 1099-R.	
	2023 Information	Prior Year Information
Taxpayer/Spouse (T, S)		
Name of payer		
State postal code	grandparkets	
Gross distributions received (Box 1)	+	
Taxable amount received (Box 2a)	+	
Federal withholding (Box 4)	+	
Distribution code (Box 7)		_
Mark if distribution is from an IRA, SEP, SIMPLE retirement	plan	
State withholding (Box 14)	+	
Local withholding (Box 17)	+	
Amount of rollover	+	
Mark if distribution was due to a pre-retirement age disability	-	
	Control Totals +	
	Control Totals T	
NOTES/QUESTIONS:		

Form ID: 1099R

Form	ID:	SSA	-1()99

Social Security, Tier 1 Railroad Benefits

25

Please provide a copy of Form(s)	SSA-1099 or RRB-1099	
Taxpayer/Spouse (T, s)	·	
State postal code		
Social Security B	enefits	
	2023 Information	Prior Year Information
If you received a Form SSA - 1099, please complete the following information:		
From the DESCRIPTION OF AMOUNT IN BOX 3 area of Form SSA-1099:		
Medicare premiums	+	
Prescription drug (Part D) premiums	+	
Net Benefits for 2023 (Box 3 minus Box 4) (Box 5)	+	
Voluntary Federal Income Tax Withheld (Box 6)	+	
Tier 1 Railroad B	enefits	
	2023 Information	Prior Year Information
If you received a Form RRB - 1099, please complete the following information: $ \\$		
Net Social Security Equivalent Benefit:		
Portion of Tier 1 Paid in 2023 (Box 5)	+	
Federal Income Tax Withheld (Box 10)	+	
Medicare Premium Total (Box 11)	+	
Additional Information Abou	ut Benefits Received	
Additional information about the benefits received not reported above. For exbenefits in 2023. This information will be reported in the SSA-1099 DESCRIPTION		
NOTES/QUESTIONS:		

Schedule C - General Information

Preparer use only			
		2023 Information	Prior Year Information
Taxpayer/Spouse/Joint (T, S, J)		_	
Employer identification number			
Business name			
Principal business/profession Business code	<u> </u>		
Business address, if different from hom	e address on Organizer Form ID: 10		
Address	re address on Organizer Point D. 104	+0	
City/State/Zip	L		
Accounting method (1 = Cash, 2 = Accrual, 3 =			
If other:		_	_
Inventory method (1 = Cost, 2 = LCM, 3 = Othe	er)		
If other enter explanation:		_	_
Enter an explanation if there was a cha	nge in determining your inventory:		
Did Hortoidh dii dil dhid			
Did you "materially participate" in this i		_	_
If not, number of hours you did sigr Mark if you began or acquired this busi			
Did you make any payments in 2023 that			
If "Yes", did you or will you file all re			_
Mark if this business is considered relat	· ·	or religious worker	_
Did you receive wages as a statutory en	The state of the s	_	
Medical insurance premiums paid by th		+	
Long-term care premiums paid by this a		+	
Amount of wages received as a statutor	y employee	+	
	Business Ir	ncome	
		2023 Information	Prior Year Information
Gross receipts and sales		2023 IIIIOIIIIacioii	
dross receipes and sures		+	
		+ +	
		+	
		+	
		+ + 	
Returns and allowances		+ + 	
Returns and allowances		+ + 	
Returns and allowances		+ + + + +	
Returns and allowances		+ + + + +	
Returns and allowances	Cost of Goo	+ + + + + + + + +	
Returns and allowances		+ + + + + + + + +	
Returns and allowances		+	
Returns and allowances Other income:		+	
Returns and allowances Other income: Beginning inventory		+	
Returns and allowances Other income: Beginning inventory Purchases		+	
Returns and allowances Other income: Beginning inventory Purchases Labor:		+	
Returns and allowances Other income: Beginning inventory Purchases Labor: Materials		+	
Returns and allowances Other income: Beginning inventory Purchases Labor:		+	
Returns and allowances Other income: Beginning inventory Purchases Labor: Materials		+	
Returns and allowances Other income: Beginning inventory Purchases Labor: Materials		+	
Returns and allowances Other income: Beginning inventory Purchases Labor: Materials		+	
Returns and allowances Other income: Beginning inventory Purchases Labor: Materials		+	

Schedule C - Expenses

Preparer use only			
Principal business or profession			
•		2023 Information	Prior Year Information
Advertising		+	
Car and truck expenses			
Commissions and fees			
		+	-
Contract labor		+	
Depletion		+	
Depreciation		+	
Employee benefit programs (Include Sma	all Employer Health Ins Premiums credit):		
		+	
-		+	
Insurance (Other than health):		Name of the state	
		4	
		+	
Interest:			
Mortgage (Paid to banks, etc.)			
		+	
		+	
		+	
Other:			
		+	
		+	
Legal and professional services			
		+	
Office expense		+	-
Pension and profit sharing:			
		+	
		+	
Rent or lease:			
Vehicles, machinery, and equipment		+	
Other business property		+	
Repairs and maintenance		+	
Supplies		+	
Taxes and licenses:			
raxes and licenses.			
		+	
		+	
		+	
		+	
		+	
Travel and meals:			
Travel		+	
Meals (Enter 100% subject to 50% lir	nitation)	+	
Meals (Enter 100% subject to 50% in			
	576 HITHL)	+	
Meals (Fully deductible)		+	
Utilities		+	
Wages (Less employment credit):			
		+	
		+	
Other expenses:			
,		+	
		+	
		+	
		+	
		+	
		+	
		+	
		+	
		+	
	Control Totals +		Form ID: C-2
			1

Preparer use only Description Taxpayer/Spouse/Joint (T,S,I) State postal code Physical address: Street City, state, zip code Foreign country Foreign province/country Foreign country Foreig
Description Taxpayer/Spouse/Joint (T, S, J) _ State postal code Physical address: Street City, state, zip code Foreign country Foreign province/county Foreign postal code Type (1-Single-family, 2-Multi-family, 3-Vacation/short-term, 4=Commercial, 5=Land, 6=Royalty, 7-Self-rental, 8=Other, 9=Personal ppty) Description of other type (Type code #8) Did you make any payments in 2023 that require you to file Form(s) 1099? (Y, N) If "Yes", did you or will you ifle all required Forms 1099? (Y, N) Fair rental days (if not full year) (For types 1, 2, 4, 5, 7 and 8 only) (Use Rent-2 for type 3) Percentage of ownership if not 100% Business use percentage, if not 100% (Not vacation home percentage) Rent and Royalty Income Rents and royalties Rent and Royalty Expenses Advertising Advertising Advertising Auto 1
Physical address: Street City, state, zip code Foreign country Foreign province/county Foreign postal code Type (1=Single-family, 2=Multi-family, 3=Vacation/short-term, 4=Commercial, 5=Land, 6=Royalty, 7=SelF-rental, 8=Other, 9=Personal ppty) Description of other type (Type code #8) Did you make any payments in 2023 that require you to file Form(s) 1099? (v, N) If "Yes", did you or will you file all required Forms 1099? (v, N) Fair rental days (if not full year) (For types 1, 2, 4, 5, 7 and 8 only) (Use Rent-2 for type 3) Percentage of ownership if not 100% Business use percentage, if not 100% (Not vacation home percentage) Rent and Royalty Income Rents and royalties 2023 Information + Rents and Royalty Expenses Advertising 4 Auto Prior Year Information Advertising Auto Friare Year Information Friare Year Information Advertising Auto Friare Year Information
City, state, zip code Foreign country Foreign province/country Foreign postal code Type (1=Single-family, 2=Multi-family, 3=Vacation/short-term, 4=Commercial, 5=Land, 6=Royalty, 7=Self-rental, 8=Other, 9=Personal ppty) Description of other type (Type code #8) Did you make any payments in 2023 that require you to file Form(s) 1099? (Y, N) If "Yes", did you or will you file all required Forms 1099? (Y, N) Fair rental days (if not full year) (For types 1, 2, 4, 5, 7 and 8 only) (Use Rent-2 for type 3) Percentage of ownership if not 100% Business use percentage, if not 100% (Not vacation home percentage) Rent and Royalty Income Rents and royalties Rent and Royalty Expenses Rent and Royalty Expenses Advertising Advertising + Auto - Cleaning and maintenance + Cleaning and maintenance Commissions:
Foreign country Foreign province/county Foreign province/county Foreign province/county Foreign postal code Type (1=Single-family, 2=Multi-family, 3=Vacation/short-term, 4=Commercial, 5=Land, 6=Royalty, 7=Self-rental, 8=Other, 9=Personal ppty) Description of other type (1ype code #8) Did you make any payments in 2023 that require you to file Form(s) 1099? (v, N) If "Yes", did you or will you file all required Forms 1099? (v, N) Fair rental days (if not full year) (for types 1, 2, 4, 5, 7 and 8 only) (Use Rent-2 for type 3) Percentage of ownership if not 100% Business use percentage, if not 100% (Not vacation home percentage) Rent and Royalty Income Rents and royalties Rent and Royalty Expenses Advertising Advertising Auto Travel
Foreign province/county_Foreign postal code Type (1=Single-familty, 2=Multi-familty, 3=Vacation/short-term, 4=Commercial, 5=Land, 6=Royalty, 7=Self-rental, 8=Other, 9=Personal ppty) Description of other type (Type code #8) Did you make any payments in 2023 that require you to file Form(s) 1099? (Y, N) If "Yes", did you or will you file all required Forms 1099? (Y, N) Fair rental days (If not full year) (For types 1, 2, 4, 5, 7 and 8 only) (Use Rent-2 for type 3) Percentage of ownership if not 100% Business use percentage, if not 100% (Not vacation home percentage) Rent and Royalty Income Rents and royalties Rent and Royalty Expenses Rent and Royalty Expenses 2023 Information Advertising Auto Advertising Auto Frior Year Information Advertising Auto H Travel Cleaning and maintenance Commissions:
Foreign postal code Type (1=Single-family, 2=Multi-family, 3=Vacation/short-term, 4=Commercial, 5=Land, 6=Royalty, 7=Self-rental, 8=Other, 9=Personal ppty) Description of other type (Type code #8) Did you make any payments in 2023 that require you to file Form(s) 1099? (Y, N) If "Yes", did you or will you file all required Forms 1099? (Y, N) Fair rental days (if not full year) (For types 1, 2, 4, 5, 7 and 8 only) (Use Rent-2 for type 3) Percentage of ownership if not 100% Business use percentage, if not 100% (Not vacation home percentage) Rent and Royalty Income Rents and royalties 2023 Information + 2023 Information Prior Year Information Advertising Auto Advertising Auto 1 Percent if not 100% Prior Year Information Advertising Auto Cleaning and maintenance Commissions:
Description of other type (Type code #8) Did you make any payments in 2023 that require you to file Form(s) 1099? (Y,N) If "Yes", did you or will you file all required Forms 1099? (Y,N) Fair rental days (If not full year) (For types 1, 2, 4, 5, 7 and 8 only) (Use Rent-2 for type 3) Percentage of ownership if not 100% Business use percentage, if not 100% (Not vacation home percentage) Rent and Royalty Income Rents and royalties Prior Year Information Advertising Advertising Auto H Cleaning and maintenance Commissions:
Did you make any payments in 2023 that require you to file Form(s) 1099? (Y,N) If "Yes", did you or will you file all required Forms 1099? (Y, N) Fair rental days (If not full year) (For types 1, 2, 4, 5, 7 and 8 only) (Use Rent-2 for type 3) Percentage of ownership if not 100% Business use percentage, if not 100% (Not vacation home percentage) Rent and Royalty Income Rents and royalties Rent and Royalty Expenses Rent and Royalty Expenses 2023 Information Advertising Auto Travel Cleaning and maintenance Commissions:
If "Yes", did you or will you file all required Forms 1099? (Y, N) Fair rental days (If not full year) (For types 1, 2, 4, 5, 7 and 8 only) (Use Rent-2 for type 3) Percentage of ownership if not 100% Business use percentage, if not 100% (Not vacation home percentage) Rent and Royalty Income Rents and royalties Prior Year Information + Rent and Royalty Expenses 2023 Information Advertising Auto + Auto + Cleaning and maintenance Commissions:
Fair rental days (If not full year) (For types 1, 2, 4, 5, 7 and 8 only) (Use Rent-2 for type 3) Percentage of ownership if not 100% Business use percentage, if not 100% (Not vacation home percentage) Rent and Royalty Income Rents and royalties Prior Year Information Rent and Royalty Expenses 2023 Information Percent if not 100% Prior Year Information Advertising Auto + Travel Cleaning and maintenance Commissions:
Rent and Royalty Income Rents and royalties Rent and Royalty Expenses Rent and Royalty Expenses 2023 Information Rents and Royalty Expenses 2023 Information Prior Year Information Advertising Auto Travel Cleaning and maintenance Commissions:
Rents and royalties Rent and Royalty Income Rents and royalties Rent and Royalty Expenses Rent and Royalty Expenses Rent and Royalty Expenses Advertising Auto Travel Cleaning and maintenance Commissions: Rent and Royalty Expenses Percent if not 100% Prior Year Information
Rents and royalties Rent and Royalty Expenses Rent and Royalty Expenses 2023 Information Percent if not 100% Prior Year Information Percent if not 100%
Rents and royalties Rent and Royalty Expenses Rent and Royalty Expenses 2023 Information Percent if not 100% Prior Year Information Percent if not 100%
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Rent and Royalty Expenses 2023 Information Percent if not 100% Prior Year Information Advertising +
Advertising +
Advertising +
Advertising +
Auto +
Travel + Cleaning and maintenance + Commissions:
Commissions:
+
Insurance:
+
+
Legal and professional fees + Management fees:
trianagement rees.
+
Mortgage interest paid to banks, etc (Form 1098)
+
Other mortgage interest +
Qualified mortgage insurance premiums +
Other interest:
+
†
Repairs +
Taxes:
+
+
Utilities +
Depreciation +
Other expenses:
+
+
+ Control Totals + Form ID: Rent

E7	

Form ID: A-1

	2023 Information	Prior Year Informa
Medical and dental expenses, such as: Doctors, Dentists, Hospital/nu		
Medical supplies, Hearing aids, Eyeglasses/contact lenses, and Insura		
• · · · · · · · · · · · · · · · · · · ·		
	_ +	
	_ +	<u> </u>
	+	Name of the second seco
	+	
Medical insurance premiums you paid: Do not include pre-tax amounts paid by an employer-sponsored plan or amounts enter self-employed business (Sch C, Sch F, Sch K-1, etc.) or Medicare premiums entered on F.	ed elsewhere, such as amounts paid for your	
	+	
		-
Long term gare premiume vou poid		
Long-term care premiums you paid: Do not include pre-tax amounts paid by an employer-sponsored plan or amounts enters self-employed business (Sch C, Sch F, Sch K-1, etc.)	ed elsewhere, such as amounts paid for your	
Party - 1941 - 1941 - 1941 - 1941 - 1941 - 1941 - 1941 - 1941 - 1941 - 1941 - 1941 - 1941 - 1941 - 1941 - 1941	+	No.
	+	
Prescription medicines and drugs:		
•	+	
Miles driven for medical items (22 cents)		
This division in the same (and same)		
State/local income taxes paid:	2023 Information	Prior Year Inform
	+	
	+	l .
	-1-	
2022 state and local income taxes paid in 2023:		
·	+	
	+ +	
	+ + + +	
	+	
Real estate taxes paid:	+	
Real estate taxes paid:		
Real estate taxes paid:		
Real estate taxes paid:		
Real estate taxes paid: Personal property taxes:	+	
Real estate taxes paid: Personal property taxes:	+	
Real estate taxes paid: Personal property taxes:	+	
Real estate taxes paid: Personal property taxes:	+	
Real estate taxes paid: Personal property taxes:	+ + + + + + + + + + + + + + + + + + + +	
Real estate taxes paid: Personal property taxes: Other taxes, such as: foreign taxes and State disability taxes	+ + + + +	
Real estate taxes paid: Personal property taxes: Other taxes, such as: foreign taxes and State disability taxes	+ + + + + + + + + + + + + + + + + + +	
Real estate taxes paid: Personal property taxes: Other taxes, such as: foreign taxes and State disability taxes	+ + + + + + + + + + + + + + + + + + +	
Real estate taxes paid: Personal property taxes: Other taxes, such as: foreign taxes and State disability taxes	+ + + + + + + + + + + + + + + + + + +	
Real estate taxes paid: Personal property taxes: Other taxes, such as: foreign taxes and State disability taxes	+ + + + + + + + + + + + + + + + + + +	
Real estate taxes paid: Personal property taxes: Other taxes, such as: foreign taxes and State disability taxes Sales tax paid on major purchases:	+ + + + + + + + + + + + + + + + + + +	
Real estate taxes paid: Personal property taxes: Other taxes, such as: foreign taxes and State disability taxes Sales tax paid on major purchases: Sales tax paid on actual expenses:	+ + + + + + + + + + + + + + + + + + +	
Real estate taxes paid: Personal property taxes: Other taxes, such as: foreign taxes and State disability taxes Sales tax paid on major purchases: Sales tax paid on actual expenses:	+ + + + + + + + + + + + + + + + + + +	
Real estate taxes paid: Personal property taxes: Other taxes, such as: foreign taxes and State disability taxes Sales tax paid on major purchases: Sales tax paid on actual expenses:	+ + + + + + + + + + + + + + + + + + +	

Control Totals +

orm ID: A-2	Interest Ex	penses		58
5/J Home mortgage interest: Fr	om Form 1098	2023 Interest Paid	2023 Points Paid	Type*Prior Year Informa
		+	+	
		+	+	-
		+		
		+		
		+	+	
		+	- -	
		+	F	
	*Mortgag	ge Types		
Blank = Used to buy, build or	improve main/qualified second home	1 = Not used to buy,	build, improve	nome or investment
S/J Pay Other, such as: Home m	ree's Name SSN ortgage interest paid to individuals	l or EIN 2023	Information	Prior Year Information
		+		
Address				
City, state and zip code				
Address				
City, state and zip code				
Payer's/Borrower's name Street Address City/State/Zip code Refinancing Points paid in 2 Taxpayer/Spouse/Joint (Recipient/Lender name Total points paid at time Points deemed as paid in Date of refinance Term of new loan (in mo Reported on Form 1098 Taxpayer/Spouse/Joint (Recipient/Lender name Total points paid at time Points deemed as paid in Date of refinance Term of new loan (in mo Reported on Form 1098 in	2023 - T, S, J) of refinance n 2023 (Preparer use only) nths) in 2023 T, S, J) of refinance n 2023 (Preparer use only)	+		
/J Investment interest expens	se, other than on Schedule(s) K-1:	2023 I	nformation	Prior Year Information
		+		
	Control Totals +			
	L COLLEGE LOTGES &			Form ID: A-2

ID: A-3 Charitable Cont	ributions	
/J	2023 Information	Prior Year Information
Contributions made by cash or check (including out-of-pocket expens	es)	
Any contribution of cash, a check or other monetary gift requires a written record of the Individual contributions of \$250 or more must be accompanied by a written acknowled	e contribution in order to claim the contribution In contribution the charity to claim the contribution	on on your return. on on your return.
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Volunteer miles driven		***************************************
Noncash items, such as: Goodwill/Salvation Army/clothing/househole	-	
	+	
	+	
	+	
	+	
	+	
	+	
	+	
	+	
	_ +	

Miscellaneous Deductions				
T/S/J	2023 Information	Prior Year Information		
Other expenses				
	+			
	+			
	+			
Page 1	+	•		
	+			
	+			
	+			
Gambling losses: (Enter only if you have gambling inco	ome)			
	+			
	+			
	+			
	+			

NOTES/QUESTIONS:

Control Totals	! !,	r
Control Totals +	1 1	Form ID: A-3
		101111111111111111111111111111111111111

Form ID: 5695		

Residential Energy Credit

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The Inflation Reduction Act of 2022 provides credits for clean energy and energy efficient improvements made to personal residences.

Taxpayer/Spouse/Joint (T, S, J)	_
Enter the total amount of costs for qualified solar electric property	+
Enter the total amount of costs for qualified solar water heating property	+
Enter the total amount of costs for qualified small wind energy property	+
Enter the total amount of costs for qualified geothermal heat pump property	+
Enter the total amount of costs for qualified battery technology costs with capacity of at least 3 kilowatt hours	+
Were the costs incurred made to your main home located in the United States? (Y, N)	_
Enter the total amount of costs for qualified fuel cell property	+
Enter the total amount of kilowatt capacity of the qualified fuel cell property	
Were the costs incurred related to the construction of your main home located in the United States? (Y, N)	_
Enter the total amount of costs for insulation material or system to reduce heat loss or gain	+
Enter the total amount of costs for the most expensive exterior door bought	
Enter the total amount of costs for all other exterior doors bought	+
Enter the total amount of costs for exterior windows and skylights	+
Enter the total amount of costs for central air conditioner	+
Enter the total amount of costs for natural gas, propane or oil hot water heaters	+
Enter the total amount of costs for qualified natural gas, propane, or oil furnace or hot water boilers	+
Enter the total amount of costs for panelboards, subpanelboards, branch circuits or feeders	+
Enter the total amount of costs for qualified home energy audit costs	+
Enter the total amount of costs for electric or natural gas heat pumps	+
Enter the total amount of costs for electric or natural gas heat pump water heaters	+
Enter the total amount of costs for biomass stoves and biomass boilers	+

NOTES/QUESTIONS: