## SCHNEIDER, LARCHE, HAAPALA & COMPANY, PLLC CERTIFIED PUBLIC ACCOUNTANTS & CONSULTANTS 401 LUDINGTON STREET, ESCANABA, MICHIGAN 49829 PHONE: 906.786.6151 FAX: 906.786.6625 www.slh-cpa.com

## Tax Season Hours: Monday – Friday 9:00am – 5:00 pm Saturday 9:00am – 12:00pm We are encouraging taxpayers to drop off, use the portal, or securely email tax information to us.

## **INDIVIDUAL TAX INFORMATION ORGANIZER FOR 2022 RETURN**

<b>Personal Information</b> - If you are a new client, please provide copies of last year's tax return.									
Taxpayer	Social Security Number	Identity Protection Pin							
First Name	Last Name	Birthdate							
Address	Home Phone ( )			Occupation	n				
City, State Zip	Cell/Work ( )			Email Addr	ress				
Driver's License Number	State	Issue Dat	te	Expi	ration Date				
Are you Legally Blind? Yes No Permanent	ly disabled? Yes No								
Spouse	Social Security Number			Identity Pr	otection Pin				
First Name	Last Name			Birthdate					
Address	Home Phone ( )			Occupation	n				
City, State Zip	Cell/Work ( )			Email Addr	ress				
Driver's License Number	State	Issue Dat	te	Expi	ration Date				
Are you Legally Blind? Yes No Permanent	ly disabled? Yes No								
Filing status: Single Married filing jointly M	arried filing separately	Widow(er) H	lead of hou	usehold R	egistered Do	mestic Part	tnership		
Did/have you celebrate(d) marriage to a same-sex s	oouse in a state that legall	ly recognized sai	me-sex ma	rriage? Ye	es No				
Were you divorced or separated during the year?	Yes No Were there a	any deaths in the	e family?	Yes No					
				M	lonths lived		Care		
Names of dependent children		Date of			in home in	College	expenses		
First and Last Name	Social Security #	birth	Relatio	nship	2022	Student	paid		
Is it anticipated that a different taxpayer will seek to		•					No		
Are any children disabled? Yes No Did any chi Other dependents or people who lived with you	Idren have unearned inco	me above \$1,10 T	JU for the y	ear for filing	Months		No		
First and Last Name	Social Security #	Date of birth	h Rel	ationship	In home in		Income		
Direct D	eposit/Electronic F	unds Withd	rawal In	formatio	n				
Bank Information: Use for Direct Deposit of Refund,	/ Direct Debit of Balance D	Due							
Name of bank									
Checking Savings Routing transit number Account number									
Ask your tax preparer for information about deposit	ing a refund into an IRA a	ccount, or splitti	ing the dep	osit into mo	re than one a	account.			
To the best of my knowledge the enclosed information	on is correct and includes	all income, ded	uctions, an	d other info	rmation for t	he prepara	tion of this year		
income tax returns for which I have adequate record									
information may be needed to electronically file you	ır tax return.								
Tourseur Cionatura			<b>D</b> - 4 -						

Faxpayer Signature	Date
Spouse Signature	Date

			Questions – All Taxpayers								
۷.	[		Yes refers to both taxpayer and spouse. Enter ? if unsure. Did your marital status change during the year?								
ERSON L INFO	Yes	No	If yes, explain:								
PERSONA L INFO	Yes	No	Can you be claimed as a dependent by another taxpayer?								
	Yes	No	Do any of your dependents have unearned income in excess of \$2,200? (Kiddie tax)								
F	Yes	No	Did you pay for child care while you worked or looked for work?								
DEN.	Yes	No	Did you pay any expenses related to the adoption of a child during the year?								
DEPENDENT INFO	Yes	No	If you are divorced or separated with child(ren), do you have a divorce decree or other form of separation agreement which establishes custodial responsibilities?								
	Yes	No	Did any births, adoptions, marriages, separations, divorces or deaths occur related to you, your spouse or any of your dependents in 2022?								
i i	Yes	No	Did you start a new business, purchase rental property, or receive income from a sharing/gig activity during the year?								
PURCHASES, SALES, AND DEBT INFORMATION	Yes	No	Did you purchase or sell a principal residence during the year?								
RCHASES, SALE AND DEBT INFORMATION	Did you have any investments become worthless or were you a victim of investment theft in 2022??										
ASE VD D RM	Yes	No	Are you involved in bankruptcy, foreclosure, repossession, or had any debt (including credit cards) cancelled?								
RCH AN NFO	Yes	No	Did you sell an existing business, rental or other property this year?								
	Yes	No	Did you lend money with the understanding of repayment in this tax year and it became totally uncollectable?								
	Yes	No	Do you own a business or an interest in a partnership, corporation, LLC, or other venture?								
	Yes	No	Were you granted, or did you exercise, any employer stock options during 2022?								
	105	110	Did you pay or receive alimony in 2022?     Recipient SSN#     Date of divorce								
INCOME INFORMATION	Yes	No	Paid/received (circle one) \$ Did you have any foreign income or pay any foreign taxes during the year, directly or indirectly, such as from investment								
DRM.	Yes	No	accounts, partnerships or a foreign employer?								
INFO	Yes	No	Did you receive any income from an installment sale?								
ME	Yes	No	Did you receive any disability income during the year?								
ACO	Yes	No	Did you receive tip income not reported to your employer this year?								
2	Yes	No	Did any of your life insurance policies mature, or did you surrender any policies?								
	Yes	No	Did you receive any awards, prizes, hobby income, gambling or lottery winnings?								
	Yes	No	Do you expect a large fluctuation in income, deductions, or withholding next year, such as retirement?								
EDUCATION											
UCA ORM	Yes	No	Did you make any withdrawals from an education savings or 529 Plan account? Please enclose forms.								
ED INF	Yes	No	Did you cash any Series EE or I U.S. Savings bonds issued after 1989?								
HEALTHCARE INFORMATION	Yes	No	Did you enroll for lower-cost Marketplace Coverage through healthcare.gov under the Affordable Care Act? If yes, please provide any <b>Form(s) 1095-A</b> you received.								
THC	Yes	No	Did you make any contributions before April 18, 2023, to a Health saving account (HSA) or Archer MSA?								
IEAL	Yes	No	Did you receive any distributions from a Health savings account (HSA)? Include Forms 1099-SA and Form 5498-SA								
Ξ	Yes	No	Did you pay long-term care premiums for yourself or your family?								
FO	Yes	No	Did you pay any interest on a loan for a boat or RV that has living quarters?								
LED N IN	Yes	No	Did you refinance a mortgage or take a home equity loan? If yes, provide the closing statement.								
ITEMIZED	Yes	No	Did you incur any business casualty or theft loss or any condemnation awards during the year?								
ITEMIZED DEDUCTION INFO	Yes	No	Do you have evidence to substantiate all of your charitable deductions?								
DEI	Yes	No	Did you make any major purchases during the year (cars, boats, motorhomes, etc.)?								
	Yes	No	Did you make any gifts of more than \$16,000 to any individual?								
7	Yes	No	Did you acquire, use, dispose of or hold any virtual currency (such as bitcoin)?								
TIOL	Yes	No	Did you pay any individual for domestic services in your home?								
MA	Yes	No	Did you make any solar energy improvements to any property you own?								
FOR	Yes	No	Did you make energy-efficient improvements to your main home this year?								
NI S	Yes	No	Did you purchase a new energy-efficient car, truck, or van?								
MISCELLANEOUS INFORMATION	Yes	No	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?								
IAN	Yes	No	Did you have any foreign financial accounts, foreign financial assets, or hold an interest in a foreign entity?								
SCEL			Did you receive correspondence from the State or the Internal Revenue Service?								
M	Yes	No	If so, explain								
	Yes	No	Did you receive an Identity Protection PIN from the Internal Revenue Service or have you been a victim of identity theft? If yes, attach the IRS letter.								

IEOUS TION JED)	Yes	No	Do you want to designate \$3 to the Presidential Election Campaign Fund? If you check yes, it will not change your tax or reduce your refund.
LAN MA	Yes	No	Would you like the IRS and State to discuss your tax return with your tax preparer if any questions should arise?
AISCEL INFOR (CON <sup>-</sup>	Yes	No	Are you a member of the Military?
(C	Yes	No	Has your will or trust been updated in the last three years?

			State Information	n					
Full-year resident Pa	art-year resident	Non-resid	lent						
States of residence during 2022	Dates:								
School District:			Did you own or rent you	ur home?	Own	Rent			
Are you or your spouse a veter	an with a service-co	nnected disa	ability? Yes No			%			%
Are you or your spouse a "resid	lent tribal member"	of a federal	ly recognized Indian Tribe	? Yes	No If yes,	what tribe	e?		
Contributions made to:	Michig	gan Educatio	on Trust	Michigar	n Education S	Savings Pl	an (MESP)		
				Including	y MI 529 Adv	isor Plan	(MAP)		
Payments made in 2022 \$			\$						
Did you purchase tangible pers	that you did	d not pay Michigan sales t	ax on?			Yes	No		
If yes, what was purchased and	shipping and handling?				\$				

Quarterly Tax Estimates Paid – Federal and State							
		Federal		State			
	Date paid	Amount	Date paid	Amount			
1 <sup>st</sup> quarter 2022		\$		\$			
2 <sup>nd</sup> quarter 2022		\$		\$			
3 <sup>rd</sup> quarter 2022		\$		\$			
4 <sup>th</sup> quarter 2022		\$		\$			
Other:		\$		\$			
Other:		\$		\$			
TOTAL estimates paid for 2022		\$		\$			

Income Information								
Please bring in all supporting documentation such as W-2's, 1099's, 1095 from Marketplace healthcare, K-1's from employers, partnerships, S corporations, estates and trusts, brokerage houses, mutual funds, banks and credit unions, etc. for the following:								
Wages, salaries, and tips		Annuities						
Interest income		Unemployment compensation (For	rm 1099-G)					
Tax-exempt interest income receiv	ed (attach year-end statement)	Social Security (attach Social Security)	ity report					
Dividends		Form SSA-1099)						
<ul> <li>Stock sales</li> </ul>		<ul> <li>Railroad retirement</li> </ul>						
Retirement income including pensi	ions and IRA's *	<ul> <li>State income tax refund</li> </ul>						
<ul> <li>Debt Forgiveness</li> </ul>		<ul> <li>Gambling winnings</li> </ul>						
Please provide a total amount for (if applicable):								
Public assistance	\$	Strike benefits	\$					
Prizes/award	\$	Scholarships	\$					
Education grants	\$	Tips/gratuities not reported on W-2	\$					
Veterans' disability	\$	Workers' compensation	\$					
Bartering	\$	Other	\$					
Alimony received	\$							
If any of the following apply, please a	ttach detail of receipts and expenditur	es. (Contact us if you need additional hel	p)					
Business (Schedule C)								
Rental (Schedule E) including type of property and full address     Installment sale payments received on a previously reported transaction								
Interest \$	Principal \$	Payor Social security #						
Did you obtain a PPP or EIDL loan? Yes No Did you obtain forgiveness? If so, the amount: \$ Date:								

	Sa	les and Exchan	ige Worksh	ieet – F	Please b	oring 1	L <b>099'</b> s y	you re	eceive	d		
Pr	ovide information about	sales of stock, real e	estate or other	property	, along wit	th Form	s 1099-B,	1099-9	s, or othe	er suppor	ting statements.	
	Description		Purchase dat	е	Cost			Selling	date		Sale price	
					\$						\$	
					\$					\$		
					\$						\$	
					\$						\$	
We need exa	ct purchase and sale date	es and cost including	g reinvestment:	s, if appli	cable, to d	letermin	ne the cap	oital ga	in rate w	hich appl	lies. Electronic	
	spreadsheets can be imported into our tax package. Your statements from your broker (Form 1099-B) sometimes provide the cost/basis information											
necessary to	necessary to compute gain or loss. If the statement does not contain this information, you must provide it.											
	Other Adjustment/Credits											
	Retirement Plans											
IRA Maximum \$6,000 for 2022 (additional \$1,000 if 50 years or older)												
Traditional o	r Roth IRA <b>(indicate whic</b>	h):		Date m	ade				Amoun	t		
Taxpayer									\$			
Spouse									\$			
If amount lis	ted is not the maximum,	do you want to cont	tribute the max	kimum?		Yes	No					
Did you mak	e a retirement plan rollov	ver to a traditional o	or Roth IRA in 2	022?		Yes	No	If yes	, amount	::\$		
Do you or yo	ur spouse actively partici	pate in an employe	r plan?		Self:	Yes	No	Spous	se: Y	es No	)	
Did you mak	e contributions for a self-	employed SEP, Simp	ole and/or qual	lified plar	ו?	Yes	No	If yes	, amount	::\$		
Some contrib	outions for 2022 can be m	ade in 2023	-	-								
	-		Chi	ild Care	e Credit							
Child care ex	penses paid to allow pare	ent to work or go to										
	g information is needed f				-		ree to de	nender	t totals.			
Provider nan					ovider nar			pender	it totals.			
Address					ddress							
Social securit	ty or ID number			So	ocial securi	ity or ID	number					
TOTAL PAID				ΤC	OTAL PAID	\$						
Amount you	elected to defer through	your payroll to a ca	feteria or flex p	plan for c	hild care in	n 2022 -	– should a	agree t	o W-2 bo	x 10 \$		
		Highe	r Educatior	ו Dedu	ctions a	nd/o	r Credi	ts				
Qualified tui	tion and course fees paid	for student attendi	ng eligible edu	cation ins	stitutions p	oost hig	h school.	Please	attach y	our <b>tuiti</b>	on settlement	
statements a	nd 1098T's. We need th	e institutions EIN, n	ame and addre	ess.							1	
Yes No	Were any children	Year in	Paid by You		tion \$ Student loan interest \$						Books \$	
	attending college?	college	Paid by stuc	dent: <i>Tuit</i>	ion \$		Student	loan in	terest \$		Books \$	
Vac N-	Other expenses:	for a motor to	fan a de s									
Yes No	Did you pay any tuition	for a private school	i i or a depende	ent child c	or take clas	sses you	urself?		<u> </u>	Amount	naid Ś	
	Student Name and address of so	chool								Amount	μuiu ş	
Qualified Stu	dent Loan Interest Paid in		use or depende	ent	\$2.500	Maxim	um per ye	ear – In	come I in	nits Annh	/	
Name			Amou		<i></i> ,500		Тахр		Spouse	Depend		
	vings Account (ESA) - ma	ximum \$2,000 for 2										
Contribution	s made in 2022	\$		Di	istribution	s receiv	ed in 202	2	\$			
Adjustments Worksheet												
Educator expenses. Classroom expenses of teachers, counselors, and principals. Maximum \$300 each (\$600 joint)							\$					
Are you covered by a Health Savings Account (HSA)? Amount of deductible contributions						\$						
Self-employed SEP, Simple, and qualified plans. Some contributions for 2022 may be made in 2023.								\$				
Self-employed health insurance deduction. (Sole proprietors)							\$					
Penalty on early withdrawal of savings.								\$				
Moving expenses. Job-related move and at least a 50-mile increase in commuting distance. ARMED FORCES ONLY							(	Ask pre	parer			
	enses of reservists, perfo				-					Ask preparer		
	· · ·	& Concerns to	-			Dron	aration	۱ of V			•	
	Questions		De Address		ing the	, riep	aratior			A NETU		

			Itemized Ded	uctions p	aid du	iring 2022				
Deductions mus	st generally exceed \$12,9	950 for single	e; \$25,900 for MFJ; \$1	9,400 HOH;	or \$12,9	950 MFS to be a l	benefit.			
Medical – Mu	st exceed 7.5% of AGI									
Prescription m	nedicines and drugs	\$		Docto	or, denti	st, etc.	\$			
Medical insura	ance premiums paid	\$		Hosp	itals/Nu	rsing Home fees	\$			
Medicare insu	rance paid (SSA-1099)	\$		Lab f	ees/X ra	ys	\$	\$		
Long-term car	e insurance premiums	Taxpayer \$		Eyegl	asses ar	nd contacts	\$			
		Spouse \$		Heari	ng aids		\$	\$		
Ambulance		\$		Medi	cal Supp	olies	\$			
Number of medical miles:@ 18.0 cents per mile 1-1-22 to 6-30-2222.0 cents per mile 7-1-							nile 7-1-22 t	o 12-31-22		
Lodging - limit	of \$50 per day per pers	on	\$							
Total insuranc	e and HSA reimburseme	ent if not nett	ted in above figures		\$					
Taxes – Do no	t include taxes paid for	full or partia	I business or rental-u	ise property	·.					
Real estate taxes on personal residence: Amount								Date paid		
Taxable value of residence   Township/City   \$							,			
2021 Winter			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			\$				
2022 Summer						\$				
2022 Winter						\$				
Other real est	ate taxes on land, camp,	. etc.:				\$				
Licenses fees						Ś				
Yes No	Did you keep receipts	for sales tax i	paid during 2022?	Amount S	5	Ŧ				
Yes No	Did you purchase a car				r					
Sales tax paid		, p.ae, seae	Purchase paid \$				Dat	re / /		
Interest Expe			1 di cindo e para 4							
•	ence and <u>one</u> vacation r	esidence (hou	at or recreational veh	icle with livi	na accor	mmodations)				
	ge paid to financial insti				-	liniouutionsy	\$			
-	or home improvement lo			in on icide	')		\$			
	ge or contract paid to a						\$			
Name			Social S	ecurity #			Ļ			
Address			500101 5	ecunty #						
	e or refinance?		For how many pay	umonts?		Date	. /	1		
Points Paid	e of remance:		FOI HOW Many pay	yments:		Date	/	1		
	ad a martagaa ar purch	acad a naw r	asidanca nlagca hrir	a in closina	nanors			\$		
	ced a mortgage or purch terest - i.e., on debt to c			ig in closing	pupers			\$		
	<u>lerest</u> - <i>i.e., on debt to t</i>	urry slocks, d						ć		
List:								\$		
Charitable	1 1 *									
	n and charities *			\$						
	ribution - Fair market va		-	\$						
	If over \$500, provide details of contributions. Items must be in good used condition or better									
Out-of-pocket expenses for charities \$										
	es (14 cents per mile)				<u> </u>					
	ur spouse make a contrik		•							
		-					-	ck, or any other monetary gift:		
	te written communicatic	-		aequatery a	ocumen	ts the donation.	ij the dona	tion is \$250 or more, you must have		
Casualty and			chunty.							
-		d damage or	loss of property or th	neft, provide	details	to your prepare	r. (Federally	declared disaster area only)		
Miscellaneous				, p. 51/00		, - , p. cpui Ci	(. sacrany			
	f applicable: Were any o	expenses reir	mbursed by your emp	lover N	es N	0				
	es (Deductible only up to					-	ify losses	<u>د</u>		
	es (Deductible only up to	s the uniount	. oj gumbing winning	reporteu. A	nog mu.	si be kepî to veri	jy iosses.)	\$		
								<u>خ</u>		
								\$		