NEWBURGH TAX SERVICE

812.858.1040

2023 TAX ORGANIZER

4155 State Route 261, Newburgh, IN 47630

nts.tax

N

Tax Return Copy:	Paper or	Cloud PDF	Notifications:	Phone or	Text
Refund:	Check or	Direct Deposit	2024 Tax Organizer:	🗌 E-mail or	🗌 Mail

Primary Contact? 🗌 TAXPAYER				Primary Contact? SPOUSE						
Name:					Name:					
SS#:			D/O/B:		SS#:				D/O/B:	
Occupation:				Occupation:						
Phone:			Blind	Y N	Phone:				Blind	Y N
E-mail:	il:				E-mail:					
Mailing	Mailing Address:				•	•			Zip:	

YES	NO		S MFJ	MFS	HH	QW
		Are you married? If yes, do you want to file jointly? YES NO UN	SURE 🗌			
		Did your marital status change in 2023? MARRIED DIVORCED	DATE	:		
		Are you a dependent?				

Η	HOUSEHOLD MEMBERS and / or DEPENDENTS BC SS DR DC Sch										
w	Who lived with you? Check all that apply SPOUSE RELATED ADULT UNRELATED ADULT NO ADULTS										
N	ame on Social Security Card	Social Security #	Relation- ship	Date of Birth	U.S. Citizen?	Income	Full-time Student?				
1					Y N		Y N				
2					Y N		Y N				
3					Y N		Y N				
4					Y N		Y N				
5					Y N		Y N				

Did any child receive Social Security benefits?	Y N	Did you pay for childcare?	Y N
Did taxpayer / spouse / child take college classes?	Y N	Dependent Care Benefits used?	Y N
Did taxpayer / spouse / child receive 529 money?	Y N	Was childcare in your home?	Y N
Did your employer pay any education costs?	Y N	Enrolled in private / home school?	Y N

#	ADO	Data	Intvw	Prep	Ck/Prnt	IN Only	Asmb	Sign	Ph Txt	DD	P/U	Upload	CIS	Sign	E-file	Post	R
PR						8453											
Ч						Folder											
tal	Portal	Prt/Data	Intvw	Prep	Ck/Prnt	Paper	Asmb	Sign	Upload	Req Sig	Notify		CIS	Sign	E-file	Post	R
orte						A.M.D.											
д.						Req \$											

		BRING ALL TAX STATEMENTS	Taxpayer	Spouse
YES	NO	How many W-2s did you receive?		
		Did you receive interest on checking or savings accounts?	Enter on	last page.
		Did get money from a retirement account?	Enter on	last page.
		Did you pay quarterly estimated tax payments?	Enter on	last page.
		Did you receive Social Security benefits?	\$	\$
		Did you receive unemployment compensation?	\$	\$
		Did you receive gambling or lottery winnings, a prize or an award?	\$	\$
		Did you have debt cancelled, a foreclosure, or bankruptcy?	\$	\$
		Did you receive a 1099K for accepting electronic payments?	\$	\$
		Did you receive any other taxable or non-taxable income?	\$	\$
Mark	Туре	Jury Duty Election Legal Settlement Gig Hobby	Child Support	VA Benefits
		Cash Tips Royalty Cash Job K-1 Crop	Other 🗌	

YES	NO	POTENTIAL TAX EVENTS
		Did you BUY SELL REFINANCE a house or land? IF YES, bring Closing Disclosure.
		Property taxes paid on primary residence? \$
		Did you pay mortgage interest? If yes, bring 1098 \$
		Did you make energy efficiency improvements on a home? If yes, bring certification / receipt.
		Did you buy a new or used clean energy vehicle?
		Did you have health insurance? Employer Marketplace Medicare Other
		Did you have an FSA 🗌 HSA 🔄? Self-Only 🗌 Family 🗌 All used on medical? YES 🗌 NO
		Did you contribute money to retirement? Roth Traditional IRA 401-K Other
		Did you pay student loan interest? If yes, bring 1098-E \$
		Did you sell used items or collectibles?
		Did you buy or sell stocks through an app or a broker?
		Did you own digital assets (such as cryptocurrency, Bitcoin, NFTs) at any time during 2023?
		Do you have a foreign bank account or signature authority over a foreign account?
		Did you gift or transfer money, investments, or property to another person?
		Did you receive money, investments, or property as a gift, inheritance, or trust beneficiary?
		Did you receive a notice from the IRS or a state taxing authority?

STATE 1	TAX QUESTIONS						
County of r	esidence on 1-1-23:	Taxpayer:	Spou	ise:			
County of e	employment on 1-1-23:	Taxpayer:	Spou	ise:			
Rent Paid:	\$ # Months:	Landlord/Address:					
YES NO							
	Did you pay Indiana lor	ng term care (nursing ho	ome) insurance prem	iums? \$			
	Did you contribute to a	529 college savings ac	count? \$	\$			
	Did you donate to an Indiana college? School: Date: \$						
	Did you buy on-line wit	d you buy on-line without paying sales tax? Amount purchased: \$					

BUSINESS / SELF-EMPLOYMENT		
Business name:	Address:	
Principal activity:	Federal ID#:	
Did you start this business in 2023? YES NO	Were you in business on 12/31/23? YES	
Is the business an LLC? YES NO		

INCOME Gross Receipts / Sales	\$
Is sales tax you collected included in your gross income total? YES D NO	\$
Are credit card / Square / PayPal, etc. fees already deducted from income? YES NO	\$

EXPENSES	PENSES Enter Vehicle and Home Office Expenses on back								
Advertising						\$			
Commissions and Fees						\$			
Contract Work Paid individuals over	\$600? YES	NO 1099	9-NEC iss	ued? YES	NO	\$			
Insurance Liability E & O	Work/Comp	Property	(Note veh	icle / home ins o	on back.)	\$			
Interest									
Legal and Professional Services						\$			
Office Supplies and Expenses						\$			
Rent or Lease						\$			
Repairs and Maintenance						\$			
Supplies						\$			
Taxes and Licenses									
Travel (hotel, airfare, tolls, parking, etc.)									
Meals									
Utilities (i <i>nternet</i>)									
Cell Phone Business use? % Personal use? %									
Wages Were W-2s issued? YES] NO					\$			
Business gifts (Limited to \$25 per per	son per year)					\$			
Other:						\$			
Other:						\$			
	ty, equipment, t		•		U	er tha			
Description	Purchase Price	Purchase Date	Date Firs Used	st Business Use %	Date Dispose	ed	Price if Sold		
	\$					Ş	Б		
	\$					5	Б		
	\$					5	6		
	\$					5	5		
	\$					5	Б		
INVENTORY		Were any	/ inventory	items used pe	ersonally?	YES			
Beginning Inventory at Cost on 1-1-23	Р	urchases		Ending Inven	tory at Co	ost on	12-31-23		

BUSINESS USE VEHICLES		Vehicle 1	Vehicle 2		Vehicle 3
Vehicle year, make and model					
Business miles 01-01-23 to 12-31-23	T				
Commuting miles					
Odometer reading 01-01-23					
Odometer reading 12-31-23					
Loan interest	\$		\$	\$	
Lease payments	\$		\$	\$	
Vehicle registration	\$		\$	\$	
Gas, oil, service, repair, insurance, plates, carwash, etc.	\$		\$	\$	
Do you have WRITTEN evidence to support deductions?			YES NO	,	YES NO
How do you track business mileage?					

If a vehicle was purchased, traded, or sold, please provide documentation.

Business Use B	EGAN in 2023	Business Use E	ENDED in 2023
Vehicle		Vehicle	
Purchase Date		Purchase Date	
Purchase Price	\$	Purchase price	\$
Odometer		Odometer	
		-	
Vehicle		Vehicle	
Purchase Date		Purchase Date	
Purchase Price	\$	Purchase price	\$
Odometer		Odometer	

HOME OFFICE

 <u> </u>	•••												
YES	NO	For a	first-year	home o	ffice, bri	ing the	original	purchase	e closing	disclosu	ıre.		
		Did you	id you make improvements to your home?										
		Did you	Did you make improvements to your home office?										
		Is the office used regularly and exclusively for business administrative / management activities?											
		Is there another location where you conduct substantial administrative business activities?											
		Do othe	Do others use the office for school, employment, or personal purposes?										
		Do you i	meet with c	lients or s	tore inven	tory in you	Ir home?						
		Do you	use your of	fice to per	form work	for your e	mployer)					
Sq ft Office		Sq ft Home	Insurance	Gas / Electric	Water	Sewer	Trash P/U	General Repairs	Cleaning Lawncare	Pest Control	Alarm Fees		
			\$	\$	\$	\$	\$	\$	\$	\$	\$		

RENTAL REAL ESTATE PROPERTY

١	YES	NO	Address:	Rental Period: Short-term 🗌 Long-Term 🗌						
			Is your rental property set up in an LLC?							
			Do you actively participate in renting and managin	o you actively participate in renting and managing the property? How many hours?						
			Was the property rented for less than fair market	value?						
		/ 365	Days rented at fair market value							
		/ 365	Days used by you or family (spouse, brother/sister, Do not include days you used the property primarily fo							

INCOME	Amount
Gross rent received (Do not include refundable deposits)	\$
Was any part of a deposit not refunded in 2023 to a departing tenant? YES NO	\$

EXPENSES	Amount
Advertising	\$
Cleaning and maintenance	\$
Insurance	\$
Legal and professional services	\$
Management Fees	\$
Mortgage interest	\$
Home equity or line of credit interest	\$
Mortgage insurance premium	\$
Repairs / maintenance	\$
Improvements	\$
Supplies	\$
Taxes	\$
Travel (hotel, airfare, tolls, parking, etc.)	\$
Meals	\$
Utilities	\$
Other:	\$
Other:	\$

DEPRECIATION	List property, appliances, tools, and improvements expected to last longer than a year.									
Description		l	Purchase	Purchase	Date First	Business	Date		Price if	
			Price	Date	Used	Use %	Disposed		Sold	
		\$						\$		
		\$						\$		
		\$						\$		
		\$						\$		
		\$						\$		
		\$						\$		

ITEMIZED DEDUCTIONS

MEDICAL								
	Health Insurance	\$		Medical Expenses	\$			
	Long Term Care Ins	\$		Medical Mileage				
	Do NOT include premiums paid through	en	ployer or exp	penses paid by insurance or with FSA or H	IS	A funds.		

Do NOT include premiums paid through employer or expenses paid by insurance or with FSA or HSA funds.

Т	AXES		Amount
	State tax due from 2022 paid in 2023	\$ Real Estate tax on primary home	\$
	Estimated state tax pmts made in 2023	\$ Real Estate tax on other property	\$
	Vehicle/County Tax (not fees)	\$ Sales tax on vehicle / boat / motorhome	\$

ľ	MORTGAGE INTEREST	1098	1098		1098
	Property Address / Motorhome / Houseboat				
	Interest	\$	\$	\$	
	Mortgage insurance premium	\$	\$	\$	
	Points	\$	\$	\$	
	Primary or secondary residence?	Prim / Sec / Neither	Prim / Sec / Neither	F	Prim / Sec / Neither
	Is this the original mortgage?	YES NO	YES NO		YES NO
	Was the loan used to buy the property that secures the loan?	YES NO	YES NO		YES NO
I	f you refinanced				
	Date of Refinance				
	New Loan Term	years	years		years
	Old Loan Payoff	\$	\$	\$	
	New Loan Amount	\$	\$	\$	
	If borrowed more than payoff, for what was the additional money used?				

С	HARITAB	LE CONTRIBUTIONS		
	Monetary	Do you have receipts or canceled checks for all donations?	YES NO	\$
	Non-cash	Do you have receipts listing item descriptions & used values?	YES NO	\$

C	DTHER					
	Gambling / lottery losses	\$	Investment in	nterest	\$	
	Casualty / theft loss in a federally declar	ed disa	ster area	Approximat	te loss \$	

This page left blank

INTEREST & DIVIDENDS (1099-INT / 1099-DIV)

Source	Interest	Dividend	Qualified Dividend	Capital Gain Distribution	Tax Exempt	Sec 199A Dividends	Foreign Tax	% US

CAPITAL GAINS / LOSSES (1099-B / 1099-S)	Exa	amples: Stock	, Property, Coll	ectibles, etc.

Brokerage	Date Sold	Date Acquired	Sale Price	Original Cost	Sale Expense

RETIREMENT / ANNUITY / HSA / ABLE (1099-R / 1099-SA) Examples: Pension, 401-K, IRA, Roth, etc.

Source	Туре	Box 7	Distribution	Contribution	Rollover	Exception	Charity

ESTIMATED TAX PAYMENTS

	2022 Refund Applied to '23	2 nd Qtr Date Pd:	3 rd Qtr Date Pd:	4 th Qtr Date Pd:	Apply 2023 refund to '24
Federal	\$	\$ \$	\$	\$	\$ \$
State	\$	\$ \$	\$	\$	\$ \$

Privacy Policy Notice - Pursuant to FTC Rule 16CFR 313, Newburgh Tax Service does not disclose information provided to us by you to any third party without your written permission, except to the extent permitted by law with a subpoena or summons. Access to information is restricted to our employees and owners. We maintain physical, electronic, and procedural safeguards to protect your information.

I hereby affirm that the information provided to Newburgh Tax Service (NTS) for my 2023 tax return is accurate and complete to the best of my knowledge. NTS may ask for clarification but will not verify all information. NTS's liability to me for the service performed is limited to the fee I pay. If information provided to NTS is inaccurate or incomplete, NTS is relieved of all liability. I will maintain all supporting documents and records that may be requested by a taxing authority upon examination.

Taxpayer	/ Spouse
----------	----------