

2023 Tax Organizer  
**GARY L. SPOON, Certified Public Accountant**  
 6209 Forest Road Cheverly, MD 20785

Phone (301) 322-7290 Fax (301) 322-3043 Email gspoon@spooncpa.com

NAME: _____	SSN: _____
SPOUSE: _____	SSN: _____
ADDRESS: _____	HOME PHONE: _____
CITY/STATE/ZIP _____	WORK PHONE: _____
EMAIL ADDRESS: _____	

DEPENDENTS				ESTIMATED TAXES PAID		
Name	SSN	DateBirth	Relationship	Date Paid	Fed Amt	St Amt

W-2 INCOME	Box 1	Box 2	Box 18	
Employer	Wages	Fed W/H	State W/H	
				T S*
				T S
				T S
				T S
				T S

State Tax Refund Received in 2022  Name of State

Interest Income			Dividend Income		
Company	Amount		Company	Amount	
		T S J *			T S J
		T S J			T S J
		T S J			T S J
		T S J			T S J
		T S J			T S J
		T S J			T S J

Other Income (1099Misc, K1, Alimony)			ADJUSTMENTS TO INCOME		
Source	Amount				
		T S J	Indiv Retirement Account for 2023		
		T S J	Type: Regular, Non-Deductible, Roth		
		T S J	Self Employed Health Insurance		
		T S J	Penalty on Early Withdrawals		
		T S J	Alimony Paid Moving Expenses		
		T S J	Other		

## SCHEDULE OF DEDUCTIONS

### MEDICAL EXPENSES

Medical Insurance	
Doctor/Dentists	
Prescriptions	
Xrays/lab	
Nursing Care	
Hospital	
Rehabilitation	
Medical Aids	
Transportation	
Mileage	
Parking, Other	

### TAXES

State Tax Withheld	
State Tax Paid with 21 Return in 2023	
Real Estate Taxes	
Personal Property Tax	
Other	

### INTEREST PAID

Home Mortgage to Bank	
Deductible Points	
Home Equity Mortgage	
Home Mortgage to Individuals	
Investment Interest Expense	
Educational Loan Interest Expense	

### CONTRIBUTIONS

Cash Contributions	
Non-Cash (clothes, household Items, etc)	

### MISCELLANEOUS

Union Dues	
Job Search Expenses	
Uniform Purchases	
Uniform Cleaning	
Small Tools/Safety Equip	
Job Supplies/Log Books, Etc	
Professional Publications/Dues	
Education required to maintain skills	
Tax Preparation	
Safety Deposit Box	
Other	

### EMPLOYEE BUSINESS EXPENSE

Vehicle Mileage or Expense	
Parking/Tolls/Limo Tips	
Lodging	
Meals Away from Home	
Travel to Second Location (miles)	
Gambling Loss to Extent of Winnings	

### CHILD CARE (include SSN, Address & Amount)


### TUITION (Higher Education)


### **Please bring the following to the interview:**

Residence Settlement Sheet	
Mortgage Interest Statement (1098)	
Record of Stock Transactions	
Include Purchase Date and Cost	
Log of Travel Expenses	
Vehicle Purchase Info - If Used in Job	
EOY Pay Statement for Union Dues, Etc	
W-2 Forms	
All 1099's (Interest Dividends, Etc.)	
Health Insurance 1095 A/B/C	
Last year's Tax Return	

### **Notes & Comments:**


Client Signature \_\_\_\_\_

**RENTAL INCOME/EXPENSE**

**PROPERTY**

A

B

Location

\_\_\_\_\_

Nr Days Personal Use

\_\_\_\_\_

Purchase Price

\_\_\_\_\_

Improvements

\_\_\_\_\_

Date Purchased

\_\_\_\_\_

Date First Rented

\_\_\_\_\_

Rents Received

\_\_\_\_\_

**EXPENSES**

Advertising

\_\_\_\_\_

Travel

\_\_\_\_\_

Cleaning

\_\_\_\_\_

Maintenance

\_\_\_\_\_

Commissions

\_\_\_\_\_

Insurance

\_\_\_\_\_

Legal/Accounting

\_\_\_\_\_

Management Fee

\_\_\_\_\_

Mortgage Interest

\_\_\_\_\_

Other Interest

\_\_\_\_\_

Repairs

\_\_\_\_\_

Supplies

\_\_\_\_\_

Taxes

\_\_\_\_\_

Utilities

\_\_\_\_\_

Condo Fees

\_\_\_\_\_

Telephone

\_\_\_\_\_

Pest Control

\_\_\_\_\_

Other (List)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Depreciation

\_\_\_\_\_

(I will calculate)

TOTAL EXPENSE

\_\_\_\_\_

NET INC/LOSS

\_\_\_\_\_

ALLOWABLE

\_\_\_\_\_