



2023 TAX INFORMATION ORGANIZER

Client Name: _____

Preferred Email: _____

Preferred Phone: _____

To ensure that you get the best value for your money, PLEASE USE THIS ORGANIZER! It helps you to organize your data quickly and allows us to prepare your tax return efficiently. Not using it will mean a more difficult time for both of us in determining how to save you the most money and may result in additional return preparation fees.

We understand that keeping records regarding your tax matters well organized and documented is a big job, but it is CRITICAL to you paying the lowest legal tax bill! And, it allows TWTB Inc to charge you the lowest possible amount for professional tax reduction services.

It is your responsibility to accurately organize and summarize your tax return information! If you do not use the organizer, or repeated calls or emails are necessary to gather required information, or you change information previously submitted, our fee may increase, perhaps substantially.

PLEASE ONLY SEND COPIES OF THE ORGANIZER AND RELATED TAX DOCUMENTS OR YOU MAY BE SUBJECT TO AN ADDITIONAL FEE. YOU WILL NEED TO KEEP THE ORIGINALS IN A SAFE PLACE FOR FUTURE REFERENCE.

You MUST SIGN the engagement letter on the next page!

TO E-FILE WE MUST HAVE FORM 8879 SIGNED AND IN OUR FILE. This form will be uploaded to the client portal and you can sign electronically from your computer or phone.

If any section of this organizer does not have enough space for all your information, please use additional pages.



CLIENT PAYMENT AUTHORIZATION FINANCIAL POLICY

All major credit cards, debit and ACH as forms of payment. We are committed to providing you with the best possible service. In order to achieve these goals, we need your assistance and your understanding of our payment policy. By your signature below, we are authorized to automatically process your payment upon approval to e-file your return.

PAYMENT INFORMATION				
Credit Card Type:	Visa	MasterCard	American Express	Discover
Credit Card Number:				
Credit Card Expiration Date:				
CVV Code:				
Cardholder Name:				
Billing Address:				
Cardholder Signature:				
ACH Bank Routing Number:				
ACH Bank Account Number:				
By signing above, I release and authorize the use of the about credit card/bank information to TWTB Inc for payment of services.				

Please e-mail your authorization to: diana@twtbinc.com

**THIS IS REQUIRED TO BE SIGNED AND RETURNED TO TWTB INC IN ORDER TO
 COMMENCE SERVICES.**

PERSONAL INFORMATION

TAXPAYER-ONLY FILL-IN THE APPLICABLE CHANGES OR IF YOU ARE A NEW CLIENT FILL-IN IN ALL DETAILS

Name		DOB	SSN
Cell Phone		Work Phone	
Email		Occupation	
<input type="checkbox"/> Legally Blind 12/31/23		<input type="checkbox"/> Presidential Campaign Contribution (Check if Yes)	

SPOUSE

Name		DOB	SSN
Cell Phone		Work Phone	
Email		Occupation	
<input type="checkbox"/> Legally Blind 12/31/23		<input type="checkbox"/> Presidential Campaign Contribution (Check if Yes)	

HOME ADDRESS

Street Address			
City	State	Zip	
Home Phone		Fax	

FILLING STATUS

<input type="checkbox"/> Single	<input type="checkbox"/> Married Filing Jointly	<input type="checkbox"/> Married Filing Separately	<input type="checkbox"/> Head of Household	<input type="checkbox"/> Qualifying Widow(er)
		Spouse Name & SSN:	Qualifying Person:	Year Spouse Died:

DEPENDENTS

Full Name		Months in House	
DOB	SSN	Relation	
Full Name		Months in House	
DOB	SSN	Relation	
Full Name		Months in House	
DOB	SSN	Relation	

<input type="checkbox"/>	One or more of the dependents may be claimed as a dependent by another taxpayer
<input type="checkbox"/>	One or more of the dependents had over \$1,250 of unearned income or \$13,850 earned income (Please provide all W-2's, 1099's and other tax documents).

<input type="checkbox"/> Yes <input type="checkbox"/> No	Did taxpayers or dependents receive any government-subsidized amounts for health insurance coverage in 2023? If YES, please provide IRS Form 1095-A.
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CHILD & DEPENDENT CARE EXPENSE (all information is necessary for filing)

Provider Name		SSN/FEIN	
Address		Amount Paid	\$
Provider Name		SSN/FEIN	
Address		Amount Paid	\$

TAX DOCUMENTS RECEIVED

Please attach legible copies of all tax documents listed on this page. Complete any other information requested below. If you can't obtain a missing document, attach explanation with all details of amounts.

WARNING: The IRS matches the documents listed on this page with duplicates filed by the employer, broker or other payer. Omitted items may trigger an IRS audit!

W-2: WAGES & SALARIES

EMPLOYER	FOR
	<input type="checkbox"/> Taxpayer <input type="checkbox"/> Spouse
	<input type="checkbox"/> Taxpayer <input type="checkbox"/> Spouse
	<input type="checkbox"/> Taxpayer <input type="checkbox"/> Spouse

1099-R: RETIREMENT PLANS

SOURCE	FOR
	<input type="checkbox"/> Taxpayer <input type="checkbox"/> Spouse
	<input type="checkbox"/> Taxpayer <input type="checkbox"/> Spouse
	<input type="checkbox"/> Taxpayer <input type="checkbox"/> Spouse

AVAILABLE TAX CREDITS FOR YOUR HOME

<input type="checkbox"/> Yes <input type="checkbox"/> No	Did you take any energy tax credits from 2009 thru 2023?
<input type="checkbox"/> Yes <input type="checkbox"/> No	Have you sold your home in which you claimed the First Time Homebuyer Credit?

INVESTMENT INCOME

1099-B Statements from Brokers: Interest, Dividends, OID and Broker Proceeds. (If an amount is shown in 1099-B section, also attach the "Schedule of Realized Gains and Losses.")		How many attached?	
1099-INT (Other than statements from brokers)		How many attached?	
1099-DIV (Other than statements from brokers)		How many attached?	
Form K-1: From Partnerships, "S" Corporations and Trusts		How many attached?	
1099-MISC & 1099-NEC: If there is an amount in box 2 Royalties on the 1099-MISC, also attach the annual summary of deductions. If you received a 1099-NEC Nonemployee Compensation, you should also complete the page for Self-Employment/Contract Labor.			
Sale of Real Estate: Attach both pages of HUD closing statement (or equivalent) for sale <u>AND</u> original purchase.		<input type="checkbox"/> Personal residence or timeshare <input type="checkbox"/> Rental/Investment Property	
Sale of Other Assets (Describe) Attach bill of sale.	Purchase Price	\$	Date of Purchase
Foreign & Other Income: Attach description with amount. TWTB Inc will advise the proper tax treatment.			

1099-G UNEMPLOYMENT OR TAX REFUNDS W-2G-GAMBLING WINNINGS	
How many attached?	
Documented gambling losses?	\$

SSA-1099 SOCIAL SECURITY	
<input type="checkbox"/> Taxpayer	<input type="checkbox"/> Spouse

ALIMONY						
Paid/Received:	Name		SSN		Amount	\$

ITEMIZED DEDUCTIONS

You might benefit from using the standard deduction instead of itemizing. If your deductions are less than \$27,700 for married filing jointly, \$13,850 for single or \$20,800 for head of household there is no need to itemize deductions. STOP here and go to next page.

MEDICAL

Insurance Premiums DO NOT include Medicare or amounts listed on Self-Employment-Contractor Labor Pages DO NOT include any BEFORE-Tax amounts deducted from your paycheck(s)		\$
Doctor, Dentists, Clinics, Hospitals, Medications, Glasses, etc.	\$	Miles for Medical Purposes:

TAX DEDUCTIONS -Paid in 2023 (Limit is \$10,000)

Real Estate Taxes on Your Home:	\$
Real Estate or Personal Property on Other Property (NOT Rental Property)	\$

INTEREST -Paid in 2023 (Only interest paid on loans used to buy, build or improve you home)

Mortgage Interest paid to a bank, etc.: (Attach Form 1098 & Year-End Mortgage Statement.)		How many attached?	
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Points Paid in 2023	\$	<input type="checkbox"/> Purchase	
		<input type="checkbox"/> Refinance-Term of Note:	_____ years

If you paid Mortgage Interest to an <u>Individual</u>	Name		
Interest Paid	\$	SSN	
Address, City, State			

Margin Interest on Broker Statements- List Broker(s)(attach brokerage statements)	\$
Investment Interest not listed on Broker Statements- Attach list of Payee and Amounts	\$
Student Loan Interest- Attach Year-End Statement and 1098-E	\$

CHARITABLE CONTRIBUTIONS

Paid by Check, Credit Card, or substantiated by receipt or statement from recipient Includes out-of-pocket volunteer expenses. Do not include meals. Keep a list for your records.	\$
Contributions of Property- If total for 2023 is over \$500, attach receipts If over \$5,000, you must have an appraisal. If vehicle donated, attach statement from recipient.	\$
<input type="checkbox"/> Check if Stocks or other Capital Gains Property	
Miles Driven for Volunteer Travel	

MISCELLANEOUS

Job-related expenses or other miscellaneous itemized deductions are no longer deductible. Talk to your employer to see if you can be reimbursed.

MISCELLANEOUS

ADJUSTMENTS/EXCLUSIONS

Attach 1098-T Tuition	Did the student complete the first 4 years of college as of 01/01/2023	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Name of Student			
Did your student receive Pell Grants, Tax-Free Scholarships, employer Assistance or Veteran's Benefits?			
Attach 5498- Contributions to IRA, Roth IRA, SEP, SIMPLE, ESA, HAS, and MSA Accounts			

Did you or your spouse work overseas during 2022 or 2023? If so, attach a list of dates of entry and exit. Visa stamps in your passport are the best source of information.
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Did you suffer a casualty (fire, flood, storm, theft) or burglary? Was your property condemned? If so: Only Federally declared disaster	Loss in Fair Market Value or Cost to Repair	\$
	Insurance Reimbursement	\$

MOVING EXPENSES: Moving expenses are suspended unless you are a member of the U.S. Armed Forces on active duty.

EXPENSES REIMBURSED BY EMPLOYER Unreimbursed job-related expenses or other unreimbursed miscellaneous itemized deductions are no longer deductible. Talk to your employer to see if you can be reimbursed.

2023 TAX YEAR ESTIMATED PAYMENTS MADE

Only amounts paid towards tax year 2023.

Due Date	April 15, 2023	June 15, 2023	September 15, 2023	January 15, 2024
Check Date				
IRS Payment	\$	\$	\$	\$
State Payment	\$	\$	\$	\$
Extension Filed?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Amount Paid with extension	\$

ELECTRONIC FILING

Do you want to e-file your return(s)?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
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REFUNDS		
Do you want a portion of your refund applied to your 2024 return?	<input type="checkbox"/> Yes	How much? \$
Do you want your refund/ tax due to be electronically processed?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If YES, please attach a <u>voided check</u> for the account you wish to be used.		
Bank Account Number		Routing Number

TO E-FILE WE MUST KEEP A SIGNED COPY OF FORM 8879 IN OUR FILE

SELF-EMPLOYMENT/CONTRACT LABOR/SOLE PROPRIETORSHIP

Also, complete Business Vehicle-Home Office-Business Assets Page, if applicable. Page 9

Business Start Date		Number of months operated this year	
Business Name (if any)		EIN (if any)	
Address (if different from home)			
Operated by:	<input type="checkbox"/> Taxpayer <input type="checkbox"/> Spouse <input type="checkbox"/> Both		
INCOME		INVENTORY	
Gross Sales at Retail	\$	In your Possession 01/01/2022	\$
<i>Money actually collected by you, excluding sales tax</i>		In your Possession 12/31/2022	\$
Returns & Refunds		Purchase	\$
Miscellaneous Business Income		Personal Use	\$
Sale of Fixed Assets		Abandoned, Obsolete, Destroyed	\$
<i>Vehicles, Equipment, Furniture & Fixtures, etc.</i>			

EXPENSES

Advertising	\$	Office Expenses	\$
Bank Charges	\$	Parking	\$
Credit Card & PayPal Fees	\$	Pension & Profit-Sharing	\$
Commission Paid	\$	Postage	\$
Dues & Subscriptions	\$	Rent Office/Warehouse	\$
Education & Training	\$	Repairs & Maintenance	\$
Equipment Rent/Lease	\$	Supplies	\$
Freight & Delivery	\$	Taxes Paid Payroll	\$
Health Insurance	\$	Taxes Paid Sales	\$
Other Insurance	\$	Taxes Paid Other	\$
Interest <i>Business Credit Cards & Business Loans Only</i>	\$	Travel, Hotels, Cabs, Tolls	\$
Legal & Accounting <i>Include tax preparation fees</i>	\$	Cellphone Business Portion	\$
Meals & Entertainment	\$	Long Distance Service	\$
Outside Services/Contract Labor	\$	Business & Fax Line(s)	\$
<input type="checkbox"/> Check if you gave an employee or assistant a W-2 or 1099MISC (contract labor) and attach a copy		Internet Access & Website	\$
Other describe			\$

BUSINESS VEHICLES-HOME OFFICE-BUSINESS ASSETS

BUSINESS VEHICLE #1	Make/Model		Year		Cost	\$
	Date Placed in Service. <i>If acquired this year, attach copy of sales document</i>					
	<input type="checkbox"/> Used in Business Activity (Describe)					
	If Sold, Date Attach copy of sales document				Price/Trade-In Value	\$
	Total Miles Driven In 2023		Total Business Miles Driven in 2023		Total Commuting Miles Driven in 2023	
	Commuting includes from your home to your regular office, even if you have a home office					
	Gas	\$	Tags & Inspection	\$	Lease Payments	\$
	Insurance	\$	Repairs & Maint.	\$	Interest Portion on Note	\$
	Reimbursement for Use	\$	Other (Describe)			

BUSINESS VEHICLE #2	Make/Model		Year		Cost	\$
	Date Placed in Service. <i>If acquired this year, attach copy of sales document</i>					
	<input type="checkbox"/> Used in Business Activity (Describe)					
	If Sold, Date Attach copy of sales document				Price/Trade-In Value	\$
	Total Miles Driven in 2023		Total Business Miles Driven in 2023		Total Commuting Miles Driven in 2023	
	Commuting includes from your home to your regular office, even if you have a home office					
	Gas	\$	Tags & Inspection	\$	Lease Payments	\$
	Insurance	\$	Repairs & Maint.	\$	Interest Portion on Note	\$
	Reimbursement for Use	\$	Other (Describe)			

OFFICE IN HOME	Date Residence Acquired		Cost	\$	Rent Paid	\$		
	If acquired this year, attach a copy of the two-page HUD statement				Mortgage Interest	\$		
	Number of Rooms		Business Rooms		Taxes Paid	\$		
	Do not count bathrooms, halls, closets, utility room, garage, etc.				Insurance	\$		
	Total Square Feet		Business Sq. Feet		Utilities	\$		
	<input type="checkbox"/> Used in Business Activity (Describe)				Repairs & Maint.	\$		
	If Sold, Date		Attach a copy of the HUD statement		Lawn Care	\$		
	2023 Improvements/Additions				House Cleaning	\$		
	Describe		Date Completed		Cost	\$	Security Service	\$
	Describe		Date Completed		Cost	\$	HOA	\$

BUSINESS ASSETS	Purchased in 2023 for Business Use- Example: Computers, Furniture, Printer, etc.						
	Description		Cost	\$	Date Bought		% Business Use
	Description		Cost	\$	Date Bought		% Business Use
	Description		Cost	\$	Date Bought		% Business Use
	Description		Cost	\$	Date Bought		% Business Use

FARM INCOME

Also, complete Business Vehicle-Home Office-Business Assets Page 11

Business Start Date		Number of months operated this year	
Name of Farm or Ranch			EIN (if any)
Address (if different from home)			
Owned/Operated by:	<input type="checkbox"/> Taxpayer <input type="checkbox"/> Spouse <input type="checkbox"/> Both		

INCOME	
Gross Sales of Livestock Bought for Resale	\$
Cost of Purchased Livestock Sold	\$
Gross Sales of Crops and Livestock Raised	\$
Crop Insurance and Crop Disaster Payments	\$
Other Income (Custom Hire, Co-Op Distributions, Fuel Refunds, etc.)	\$

EXPENSES			
Breeding Fees	\$	Rent/Lease Land	\$
Chemicals	\$	Rent/Lease Equipment	\$
Conservation Expenses	\$	Pension & Profit-Sharing	\$
Custom Hire Machine Work	\$	Repairs & Maintenance	\$
Employee Benefits	\$	Seeds & Plants	\$
Feed	\$	Supplies	\$
Fertilizer & Lime	\$	Storage & Warehousing	\$
Freight & Trucking	\$	Taxes Paid	\$
Gasoline, Fuel & Oil	\$	Utilities	\$
Insurance Other than Health	\$	Veterinary Fees	\$
Interest	\$	Outside Services/Contract Labor	\$
<i>Business Credit Cards & Business Loans Only</i>		<input type="checkbox"/> Check if you issued any Form w-2's and attach copy(s)	
Other Describe			\$
Other Describe			\$
Gallons of Fuel Used:	Gasoline	Diesel	Other

FARM-BUSINESS VEHICLES-HOME OFFICE-BUSINESS ASSETS

BUSINESS VEHICLE #1	Make/Model		Year		Cost	\$
	Date Placed in Service. <i>If acquired this year, attach copy of sales document</i>					
	<input type="checkbox"/> Used in Business Activity (Describe)					
	If Sold, Date <i>Attach copy of sales document</i>				Price/Trade-In Value	\$
	Total Miles Driven In 2023		Total Business Miles Driven in 2023		Total Commuting Miles Driven in 2023	
	Commuting includes from your home to your regular office, even if you have a home office					
	Gas	\$	Tags & Inspection	\$	Lease Payments	\$
	Insurance	\$	Repairs & Maint.	\$	Interest Portion on Note	\$
	Reimbursement for Use	\$	Other (Describe)			
	BUSINESS VEHICLE #2	Make/Model		Year		Cost
Date Placed in Service. <i>If acquired this year, attach copy of sales document</i>						
<input type="checkbox"/> Used in Business Activity (Describe)						
If Sold, Date <i>Attach copy of sales document</i>				Price/Trade-In Value	\$	
Total Miles Driven in 2023			Total Business Miles Driven in 2023		Total Commuting Miles Driven in 2023	
Commuting includes from your home to your regular office, even if you have a home office						
Gas		\$	Tags & Inspection	\$	Lease Payments	\$
Insurance		\$	Repairs & Maint.	\$	Interest Portion on Note	\$
Reimbursement for Use		\$	Other (Describe)			
OFFICE IN HOME		Date Residence Acquired		Cost	\$	Rent Paid
	<i>If acquired this year, attach a copy of the two-page HUD statement</i>				Mortgage Interest	\$
	Number of Rooms		Business Rooms		Taxes Paid	\$
	Do not count bathrooms, halls, closets, utility room, garage, etc.				Insurance	\$
	Total Square Feet		Business Sq. Feet		Utilities	\$
	<input type="checkbox"/> Used in Business Activity (Describe)				Repairs & Maint.	\$
	If Sold, Date		<i>Attach a copy of the HUD statement</i>		Lawn Care	\$
	2023 Improvements/Additions				House Cleaning	\$
	Describe		Date Completed		Cost	\$
	Describe		Date Completed		Cost	\$
BUSINESS ASSETS	Purchased in 2022 for Business Use- Example: Computers, Furniture, Printer, etc.					
	Description		Cost	\$	Date Bought	
	Description		Cost	\$	Date Bought	
	Description		Cost	\$	Date Bought	
	Description		Cost	\$	Date Bought	

RENTAL PROPERTY

If property is bought during 2023, attach a copy of the two-page HUD statement. If property is sold during 2023, attach a copy of the HUD statement for sale & purchase. New clients, attach depreciation schedule for rental assets from prior year tax return.

	Address			City & State	% Owned, if not 100%
Property A					
Property B					
Property C					
Property D					
	Property A	Property B	Property C	Property D	
Rental Income:	\$	\$	\$	\$	
Advertising	\$	\$	\$	\$	
Miles Driven	\$	\$	\$	\$	
Travel	\$	\$	\$	\$	
Cleaning & Maint.	\$	\$	\$	\$	
Commissions	\$	\$	\$	\$	
Insurance	\$	\$	\$	\$	
Legal & Professional	\$	\$	\$	\$	
Management Fees	\$	\$	\$	\$	
Mortgage Interest	\$	\$	\$	\$	
Repairs	\$	\$	\$	\$	
Supplies	\$	\$	\$	\$	
Taxes	\$	\$	\$	\$	
Utilities	\$	\$	\$	\$	
Wages & Salaries	\$	\$	\$	\$	
HOA Dues	\$	\$	\$	\$	
Pest Control	\$	\$	\$	\$	
Other (describe)					
NEW CLIENTS:					
Original Cost & Improvements	\$	\$	\$	\$	
Date in Service					

CASUALTY LOSSES-DISASTER LOSS

If your losses were for personal property or personal property used for business; use this form only if the non-reimbursed loss is more than 10% of your adjusted gross income minus \$100.00 **Only Federally declared disaster area losses**

Type of casualty	
Documentary evidence to support claimed allowable loss?	
Was the loss Personal, Business, or Home used for business?	
Was a timely insurance claim filed?	

PERSONAL PROPERTY LOSSES	
Description of properties (type, location & date acquired)	
Property A	
Property B	
Property C	
Property D	

	Property A	Property B	Property C	Property D
Cost basis (original price plus improvements)				
Insurance or other reimbursement				
Fair market value before casualty				
Fair market value after casualty				

NOTES

PRIVACY POLICY

The privacy of your client information has always been important to us, and we have always been bound by professional standards of confidentiality. However, we are now required by law to inform you of our privacy policy.

- We collect nonpublic personal information about you that is provided by you or obtained by us with your authorization. This information may come from various sources, including information we receive from personal interviews, tax organizers, worksheets and other documents necessary to provide professional services to you.
- We do not disclose any nonpublic personal information about our clients or former clients to anyone, except as permitted or required by law, or when necessary to process transactions requested by a client.
- We restrict access to nonpublic personal information about you to members of our firm who need to know that information in order to provide you professional services. We retain records relating to the professional services that we provided you in accordance with accounting and government standards.
- We employ physical, electronic, and procedural security safeguards to protect your nonpublic personal information.

Your confidence and trust are important to us. If you have questions or concerns regarding the privacy of your nonpublic personal information, please contact us.

IF YOU DO NOT CHOOSE TO E-FILE

We will prepare two copies of your tax return(s) for you. The "Client Copy" has a cover sheet titled "Instructions for Filing Tax Return". These instructions clearly advise you what type of tax return was prepared, how much you are being refunded or the amount you owe, where to sign the tax return, and where to mail the tax return.

Please read the instructions carefully to ensure that you correctly file the second copy of your tax return(s).

Always mail your tax return by certified mail, return receipt request!

ESTIMATED TAX PAYMENTS

Your tax situation may call for you to make estimated tax payments toward your 2023 tax liabilities. If so, the instruction sheet will indicate the due date and amount of each recommended payment. Payment coupons, with mailing address, are included in your tax return package.

Failure to make estimated tax payments may result in substantial penalties!