Individual Tax Organizer

Thank you for choosing our firm on helping your 2023 individual tax return preparation and filing.Please fill out this “2023 Individual Tax Organizer”.

If we prepared your prior year returns, and there is no change on your personal information, you can skip part I.

If we did not prepare your prior year returns, please provide a copy of federal and state returns for the previous year.

**Note:Please provide us the supporting documents for your tax return preparation, send the scanned copy and this organizer to**

**Tax@chen.cpa.**

If you received any of the following forms, please check and provide us the copy.

* W-2 （Salary Income，From Employer）
* 1098 (Mortgage Interest，From Lender)
* 1098-T (Tuition，From College/University)
* 1099-B（Investment，From Bank/Brokerage）
* 1099-DIV(Dividend，From Bank/Brokerage)
* 1099-INT(Interest，From Bank/Brokerage)
* 1099-G (Unemployment, From State)
* 1095-B/C (Health Insurance, From Insurance Company)
* 1095-A (Health Insurance, From COVERECA)
* 1099-NEC (Self-employment, From Employer)
* 1099-Q (529Plan)
* 1099-SSA (Retirement, From SSA)
* 1099-R (Retirement, From IRA/Pension/401K)
* W2G (Gambling Winning, From Casino)
* K-1 (Shareholder Income, From S Corporation)
* K-1 (Partnership Income，From LLC/Partnership)
* K-1 (From Trust or Estates)
* 1098-E (Student Loan Interest）
* Self-employed income without an employer，Please provide income and expenses summary with the supporting documents。
* Sales of real estate properties. Please provide Buyer’s Final Settlement Statement, Seller’s Final Settlement Statement, and any improvement cost.
* Note 1：Please let us know if your child received any income in 2023.

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1: Personal Information. Please provide copy of the social security card and driver license. If not, please provide other photo ID.

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | Taxpayer | Spouse | Dependent 1 | | Dependent 2 | Dependent 3 |
| Full Name |  |  |  | |  |  |
| SSN |  |  |  | |  |  |
| DOB |  |  |  | |  |  |
| Mailing Address |  | | | | | |
| Email |  | | | | | |
| Cell |  |  |  | |  |  |
| Occupation |  |  |  | |  |  |
| Marital Status |  |  |  | |  |  |
| Immigration Status |  |  |  | |  |  |
| Health Insurance Coverage |  |  |  | |  |  |
| Relationship |  |  |  | |  |  |
| Bank Info (Used for direct deposit the refund or make tax payments) | Name of the Bank: | | | Bank Routing Number: | | |
| Checking Account Number: | | | | | |
| New Immigrant Information | | | | | | |
| Green Card Starting Date |  |  |  | |  |  |
| Visa before GC |  |  |  | |  |  |
| Days in the U.S. in 2021 |  |  |  | |  |  |
| Days in the U.S. in 2022 |  |  |  | |  |  |
| 2023 Travel History |  |  |  | |  |  |
| F1/OPT, B1/B2，and Other Non-Resident Aliens | | | | | | |
| Days in the U.S. in 2021 |  |  |  | |  |  |
| Days in the U.S. in 2022 |  |  |  | |  |  |
| 2023 Travel History |  |  |  | |  |  |
| Visa Type (Provide the date and detail if there is a change of status): | | | | | | |
| Green Card Application (Provide the date and detail if yes): | | | | | | |
| 2022 Tax Return（1040NR、1040NR EZ?,Please provide a copy）： | | | | | | |
| F1/OPT  School Info. | School Name: | | | | | |
| School Address: | | | | | |
| School Phone #: | | | | | |
| Director’s Name: | | | | | |
| Director’s Address: | | | | | |
| Director’s Phone #: | | | | | |
| F1/OPT, when was the first date entered the U.S.： | | | | | | |
| Full Home Country Mailing Address, including Zipcode | | | | | | |

2: Income Information. Please provide the amount in the form and supporting forms. Please report worldwide income, not U.S. income only.

|  | Taxpayer | Spouse |
| --- | --- | --- |
| Salary (Form W2s) |  |  |
| Self-Employment Income (Form 1099 NEC, or self prepared Income Statements with supporting documents) |  |  |
| Interest Income (Form 1099 Int) |  |  |
| Dividend Income (Form 1099 Div) |  |  |
| Securities Investment (Form 1099 B) |  |  |
| Business Investment (Form K1) |  |  |
| Unemployment Income (Form 1099G) |  |  |
| Retirement Income (Form 1099 SSA) |  |  |
| Individual Retirement Income (Form 1099R) |  |  |
| Virtual Currency(Please provide transaction summary） |  |  |
| Rental Income（Please provide Income and Expenses Summary and supporting documents） |  |  |
| Alimony Income (CA Income) |  |  |
| Foreign Income |  |  |
| 2023 Student Loan Forgiveness |  |  |
| Other Incomes |  |  |
| CA Resident：Any purchase might subject to USE Tax? If so, please provide the amount you purchased. |  |  |
| Foreign Earned Income |  |  |
| Foreign Employer Name: |  |  |
| Foreign Employer Address: | | |
| Individual Foreign Residence Address: |  |  |
| 2023 Travel History: |  |  |
|  |  |  |

3: Tax Deductible Items and Tax Credits,Please provide amount and supporting forms.

|  | Amount |
| --- | --- |
| Property Tax Paid（Property Tax Bill and Payment Receipt，and Final Settlement Statement if the property was purchased in 2023.） |  |
| Mortgage Interest（Form 1098） |  |
| DMV Registration Fee（DMV Receipt） |  |
| Charitable Donation（Receipt） |  |
| Out of Pocket Medical Expenses（Medial Bill and Payment Receipts，Only the amount paid over 7.5% of AGI will be tax deductible.Eg: AGI is $100K，out of pocket medical expense is $10,000，only $2,500 is tax deductible.） |  |
| Health Insurance（Form 1095A/B/C& Form 3895) |  |
| Dependent Care Expenses Credit for Child under 13 years Old (Payment Receipt，School Name, Address, EIN, Phone #, and Amount You Paid. Please separate the amount paid for each child if you have more than 1 qualified child.） |  |
| American Opportunity Tax Credit/Life Time Education Credit（Form 1098-T） |  |
| Student Loan Interest（ Form 1098-E) |  |
| Energy Saving Credit (Purchase Agreement and Payment Receipt） |  |
| IRA Contribution（Form 5498) |  |
| Alimony Paid (CA Deductible) |  |
| Moving Expenses (CA Deductible) |  |
| Other Deductions and Credits |  |
|  |  |
|  |  |

4：Estimated Tax Payment

|  |  |  |  |
| --- | --- | --- | --- |
| Federal | | State | |
| Payment Date | Amount | Payment Date | Amount |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

5：Gift Tax（Form 709,Over $17,000 per donee. Donor needs to report.）

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Donor Name | Donee Name | Relationship | Gift Date | Amount | Description |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
| Have you previously filed a Form 709 for any other year? (If yes, please provide copy) | | | | Yes | No |

6：Receipt of Foreign Gift（Form 3520）

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Did you receive more than $100,000 that you treated as gifts or bequests from a nonresident alien or a foreign estate? | | | | Yes | No |
| Did you receive more than $100,000 that you treated as gifts or bequests from a foreign corporation or a foreign partnership? | | | | Yes | No |
| If yes, please provide the following information and gift record. | | | | | |
| Donee | Donor | Relationship | Gift Date | Amount | Description |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

7：FBAR and Foreign Financial Assets Info (Form 114 & Form 8938)

|  |  |  |
| --- | --- | --- |
| A United States person, including a citizen, resident, corporation, partnership, limited liability company, trust and estate, must file an FBAR to report:   1. a financial interest in or signature or other authority over at least one financial account located outside the United States if 2. the aggregate value of those foreign financial accounts exceeded $10,000 at any time during the calendar year reported. 3. Please check the link for more filing requirement   <https://www.irs.gov/businesses/comparison-of-form-8938-and-fbar-requirements> | | |
|  | Asset 1 | Asset 2 |
| Account Holder Name |  |  |
| Name of Financial Institution |  |  |
| Financial Institution Address |  |  |
| Account Number |  |  |
| Foreign Currency |  |  |
| Type of Account |  |  |
| Maximum Account Value |  |  |
| New Account Opened in 2023? |  |  |
| Account Closed in 2023? |  |  |
| Investment Income Amount |  |  |
| Type of Income (Interest? Dividend?) |  |  |

8：Foreign Capital Gain/ Loss

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| If you have any foreign security transactions，please provide the transaction records，and fill out the following information. | | | | | |
| Short-Term Capital Gain/Loss (Holding 12 months or less) | | | | | |
| Account Number | Currency | Purchase Date | Proceed Date | Cost Basis | Proceeds |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
| Long-Term Capital Gain/Loss (Holding more than 12 months) | | | | | |
| Account Number | Currency | Purchase Date | Proceed Date | Cost Basis | Proceeds |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

9：Shares in Foreign Corporations

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| If you (directly or indirectly) holding 10% or more foreign corporation shares, you have to report the corporation’s financial information and other information to the IRS. Please provide Financial Statements of the corporation.  If your share percentage was not reach 10% at any time, please provide the following information only. No Financial Statements required. | | | | | | |
| Corporation 1 | | | | | | |
| Corporation Name |  | | Address |  | | |
| Set up Date |  | | Main Business |  | | |
| Foreign Tax ID |  | | Any Dividend? |  | Dividend Amount |  |
| Corporation Value |  | | Class of Stocks |  | Authorized Shares |  |
| During the tax year, did the foreign corporation own at least a 10% interest, directly or indirectly, in any foreignpartnership? | | | | | Yes | No |
| During the tax year, did the foreign corporation have any U.S. branch office or agent? If yes, please provide name, address, taxable income/loss, and U.S income tax paid. | | | | | Yes | No |
| During the tax year, did you purchase additional shares or dispose any shares? If yes, please provide detail. | | | | | Yes | No |
| Did the foreign corporation have any interest, rental, royalties, and insurance income? If yes, please provide amount. | | | | | Yes | No |
| Did the foreign corporation have any dividend income from other investments? If yes, please provide amount and source. | | | | | Yes | No |
| Did the foreign corporation have any income from dispose real estates? If yes, please provide amount and detail. | | | | | Yes | No |
| Related Person | Name | SSN | Address | Number of shares held at the beginning of annual accounting period | Number of shares held at the end of annual accounting period | Occupation (Director or Officer) |
| Shareholder 1 |  |  |  |  |  |  |
| Shareholder 2 |  |  |  |  |  |  |
| Shareholder 3 |  |  |  |  |  |  |
| Statutory Agent |  |  |  |  |  |  |

10：Rental Income

|  |  |  |  |
| --- | --- | --- | --- |
| Please provide rental agreement, expense receipts.Please provide the Final Settlement Statement if the property was purchased in 2023. | | | |
|  | Rental 1 | Rental 2 | Rental 3 |
| Property Owner Name |  |  |  |
| Type of Property |  |  |  |
| Property Address |  |  |  |
| Purchase Date |  |  |  |
| First Rental Date |  |  |  |
| Rental Days |  |  |  |
| Cost Basis |  |  |  |
| Rents Received |  |  |  |
| Rental Expenses | | | |
| Advertising |  |  |  |
| Cleaning & Maintenance |  |  |  |
| Commissions |  |  |  |
| Insurance |  |  |  |
| Management Fees |  |  |  |
| Mortgage Interest |  |  |  |
| Repairs |  |  |  |
| Supplies |  |  |  |
| Property Taxes |  |  |  |
| Utilities |  |  |  |
| HOA Fees |  |  |  |
| Internet and Phone |  |  |  |
| Other Expenses |  |  |  |

11:Self-employed Business Income

|  |  |  |  |
| --- | --- | --- | --- |
| Profit or loss from business，please provide Form 1099-NEC, 1099-K, and all other supporting documents. | | | |
|  | Business 1 | Business 2 | Business 3 |
| Gross Receipts |  |  |  |
| Business Description |  |  |  |
| Business Starting Date |  |  |  |
| Do you maintain a separate business bank account? |  |  |  |
| Expesnes | | | |
| Advertising |  |  |  |
| Contract Labor |  |  |  |
| Insurance |  |  |  |
| Professional Fees |  |  |  |
| Office Expenses |  |  |  |
| Rent |  |  |  |
| Repair |  |  |  |
| Supplies |  |  |  |
| Licenses and Taxes |  |  |  |
| Travel |  |  |  |
| Business Meals |  |  |  |
| Utilities |  |  |  |
| Employee Wages |  |  |  |
| Telephone & Internet |  |  |  |
| Other Expenses |  |  |  |
| Auto Expenses（Please provide the actual mileages） | | | |
| Vehicle Model |  |  |  |
| 1st Date Used in Business |  |  |  |
| 2023 Total Miles Drove |  |  |  |
| Business Mileages |  |  |  |
| Was it available for personal use? |  |  |  |
| Do you have another vehicle available for personal use? |  |  |  |
| Do you have evidence to support your deduction? Is the evidence written? |  |  |  |
| Home Office (Requirement：main business location，exclusively for business use） | | | |
| Office Area SQFT |  |  |  |
| Total Area of Home |  |  |  |
| Insurance |  |  |  |
| Property Tax |  |  |  |
| Mortgage Interest |  |  |  |
| Repairs |  |  |  |
| Utilites |  |  |  |
| Internet Expenses |  |  |  |
| Other Expenses |  |  |  |
| Cost of Goods Sold | | | |
| Beginning Inventory |  |  |  |
| 2023 Purchase Cost |  |  |  |
| Ending Inventory |  |  |  |

**The above listed items are the main items for individual tax returns. It is not including al items to be filed. Please use it for your reference only. If you have any other filing requirements, please let us know. Please fill in the above forms completely, any blank items are deemed to be none.**

**Please note, U.S. resident aliens need to report worldwide income, while the nonresident aliens only have to report U.S. sourced income.**

**The tax return filing due date is 4/15/2024. Please file an extension before 4/15/2024 if you cannot get your return filed before the due date. Please note, extension is only extend the time to file the return, it doesn’t extend the tax to make tax payments. If you need help on filing extension, please contact us.**

**By my signature below, I certify the information I provided on and in connection with this form is true and correct to the best of my knowledge. I also understand that any false statements or deliberate omissions on this form may subject me to legal responsibility.**

Taxpayer Signature： Date：

Spouse Signature: Date: