Veritas Tax Solutions 9140 W USTICK RD BOISE, ID 83704

Telephone: (208)377-4303 Fax: (208)789-2786 E-mail: jalene@veritasbusinesssolutions.com

2023 TAX ORGANIZER

		Spous	e Information	
	Last name			
Suffix				Suffix
	Social security	number	<u> </u>	
	Occupation			
_	Cell phone			
			Apartment nur	nber
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	3			
1	1		1 1	
		Date of Birth	Months Lived	Child Care Expense
Sumx	Relationship	OI BII (II	with raxpayer	Lxpense
ses				
	Address		ID Number	Amount Paid
ation expens	ses.			
	Fax r Fax r Suffix All Suffix ation expense	Suffix	Last name	First name

Employer Name		Amount
Attach Form(s) 1099-R — Distributions from Pensions, Annuities, Retire	ment, Profit-Sharing,	IRAs, etc
1099-R Paye		Amount
Attach Forms(s) SSA 1000 - Social Sequeity/Deilyand Benefits	Tarmarian	- Constant
Attach Form(s) SSA-1099 — Social Security/Railroad Benefits Social Security Benefits from Form SSA-1099	Taxpayer	Spouse
Railroad Retirement Benefits from Form RRB-1099		
Medicare B premiums withheld		
Medicare C premiums withheld		
Medicare D premiums withheld		
Attach Form(s) 1099-MISC — Miscellaneous Income and 1099-NEC 1099-MISC Payer Name		
Attach Form(s) 1099-INT — Interest Income		Amazint
1099-INT Payer Name		Amount
Attach Form(s) 1099-DIV — Dividend Income		
1099-DIV Payer Name		Amount
Attach Form(s) 1099-B, 1099-S — Sales of Stocks, Bonds, Real Estate, etc Attach all stock sale transaction information, including initial cost information.		
		me, Form(s) W-2G
Attach all stock sale transaction information, including initial cost information. Other Government Forms to attach: Form(s) 1099-G — Certain Government Payments, Schedule K-1s — Partnership, S-Corpo Gambling or Lottery Winnings, Form(s) 1099-Q — Payments from Qualified Education Pro-		me, Form(s) W-2G
Attach all stock sale transaction information, including initial cost information. Other Government Forms to attach: Form(s) 1099-G — Certain Government Payments, Schedule K-1s — Partnership, S-Corpo	grams	· · · · · ·
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2023 Deductions

Prescription medications Health insurance premiums Doctors, dentists, etc		
Health insurance premiums		
Doctors, dentists, etc		
Hospitals, clinics, etc		
Eyeglasses and contact lenses		
Miles driven for medical purposes.		
Other medical and dental expenses:		
Taxes	2023 Amount	2022 Amount
Real estate taxes paid on principal residence		
Real estate taxes paid on additional homes or land		
Auto license registration fees based on the value of the vehicle		
Other personal property taxes		
Interest Expenses Home mortgage interest paid — Attach Form(s) 1098. Lender's Name	2023 Amount	2022 Amount
Points paid on loan to buy, build or improve main home Lender's Name	2023 Amount	
Cash/Check/Credit Contributions	2023 Amount	2022 Amount
Noncash Charitable Contributions Attach all receipts with details listing the following information: Donee, donee address, description of don your cost, value at time of donation, and how you acquired the property.	nation, date acquired and	date contributed,
Miscellaneous Deductions DOES NOT APPLY IN IDAHO	2023 Amount	2022 Amount
Union and professional dues		
Professional subscriptions, books, supplies		
Uniforms and protective clothing (including cleaning)		
Job search costs		
raxpayer educator expenses		
Taxpayer educator expenses		
Spouse educator expenses		

2023

Questions

							5
Did you make energattach details	gy efficient imp	rovements to your home	or purchase any en	ergy-saving	property during 2	16 yes, please]
		ric vehicle in 2023? If ye]
Did your marital sta		2023 ?]
-		t file?					1
-		er age 19 or a full time s				<u></u>] I
		ort for any other person]]
Did you receive a to	otal distribution	from an IRA or other qu	ualified plan that was	partially or	totally rolled ove	r into another IRA	ر آ
Did you buy, sell, re	efinance, foreclo	the distribution? ose or abandon a princip 9-A forms	oal residence or othe	r real prope	rty in 2023? If y e	es, attach closing or]
		he First-Time Homebuye				_	j
Did you pay any inc	dividual for dom	nestic services in 2023?]
Did you buy or sell	any stocks or b	onds in 2023 ?]
		Ith Insurance Marketplac]
At any time during	2023, did you s	ell, send, exchange, or	otherwise acquire an	y financial i	nterest in any vir	tual currency?]
		pient's name & SSN:					
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Enter your state of re	esidence		Тах	oayer	Spouse		
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Taxpayer		Spouse					
QL#		DL#		<u> </u>			
State							
				<u></u>			
Expiration Date _		Expiration	Date				
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		lirect deposit?					1
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		Routing #	Ac	count #			
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s, please provide the	o o						
Name:		Routing #	Ac	count #			
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litional Informat	ion (Enter any	y additional information	here and attach any	documents.))		