2023	1040	US	Client Information		1
		ert Alliso	n Jeter Co Inc	Tax Return Appointment	
		CA 91724		Date:	
	Telepho	one numbe	r: (626) 331-0531	Time:	
	Fax nur	nber:	(626) 966-1451	Location:	
	E-mail a	address:	mike@wajtax.com		
	This of y	tax organiz our 2023 ta	.er will assist you in gathering มx return. Please add, chang	g information necessary for the preparation e, or delete information as appropriate.	

Filing Status Year spouse died, if qualifying surviving spouse (2021 or 2022) First name and initial Last name..... Title/suffix..... Social security number Taxpayer Occupation..... Date of birth (m/d/y)..... Date of death (m/d/y)..... 1=blind..... First name and initial..... Last name..... Title/suffix..... Social security number Spouse Occupation.... Date of birth (m/d/y)..... Date of death (m/d/y)..... In care of..... Street address..... Apartment number Address City..... Region.... Foreign Address Postal code.....

Filing Status

- 1 = Single 2 = Married filing joint 3 = Married filing separate 4 = Head of household
- 5 = Qualifying surviving spouse (QSS)

2023	1040	US	Client Information (continued)		Page 2 1 p2
			Please add, change or delete information for 2023.		
CLIE	NT INFO	RMATION			
Taxpayer Contact Information	Work phon Work exter Daytime pho Mobile pho Fax number	neesionnone (table)ne		Daytim 1 = W 2 = H 3 = W	ome
Spouse Contact Information	Home phor Work phon Work exter Daytime ph Mobile pho Fax numbe	ne			
Taxpayer Authentication	Driver's lice Driver's lice Issue date Expiration	ense noense state (m/d/y)date (m/d/y) ction PIN			
Spouse Authentication	Driver's lice Driver's lice Issue date Expiration	ense noense state (m/d/y)date (m/d/y) ction PIN			
	The process		•••		

ORGANIZER

2023 1040 US Miscellaneous Questions

2023	1040	US Miscellaneous Questions
	If any	of the following items pertain to you or your spouse for 2023, please check the appropriate box and provide additional information if necessary.
YES	NO	Did your marital status change during the year?
		Did your address change during the year?
		Could you be claimed as a dependent on another person's tax return?
		Were there any changes in dependents?
		Did you and your dependents have health care coverage for the full-year?
		Did you receive an IRS document 1095-A (Health Insurance Marketplace Statement)? If so, please attach.
		Did you receive unreported tip income of \$20 or more in any month?
		Did you receive any disability income?
		Did you buy or sell any stocks, bonds or other investment property?
		Did you purchase, sell, or refinance your principal home or second home, or did you take a home equity loan?
		Did you make any residential energy-efficient improvements or purchases involving solar, wind, geothermal or fuel cell energy sources?
		Did you receive a distribution from or make a contribution to a retirement plan (401(k), IRA, etc.)?
		Did you transfer or rollover any amount from one retirement plan to another?
		Did you convert part or all of your traditional/SEP/SIMPLE IRA to a Roth IRA?
		Did you, your spouse, or a dependent incur any tuition expenses that are required to attend a college, university, or vocational school?
		Did you incur a loss because of damaged or stolen property?
		Did you use your car on the job (other than to and from work)?
		May the IRS discuss your tax return with your preparer?
		Was your home rented out or used for business?
		Were you notified or audited by either the IRS or the State taxing agency?
		At any time during the tax year, did you: receive or sell, exchange, gift, or otherwise dispose of digital asset?

ORGANIZER Wages, Pensions, Gambling Winnings 10, 13.1, 13.2 US 2023 1040 Please enter all pertinent 2023 amounts & attach all W-2, W-2G and 1099-R forms. Last year's amounts are provided for your reference. WAGES, SALARIES, TIPS (10) Wages, Tips, Other 1=retirement Tax Withheld plan (Box 13) Social Name of Employer (Box c) Federal Medicare State Local Compensation Security (Box 4) No (Box 17) (Box 19) 2022 (Box 2) (Box 6) 1=spouse (Box 1) Wages PENSIONS, IRA DISTRIBUTIONS (13.1) Distribution code #2 Tax Withheld Value of Taxable Gross Distribution code #1 all IRAs Amount (Box 2a) Distribution Name of Payer Federal State 2022 at No 1=IRA/SEP/SIMPLE (Box 1) (Box 4) (Box 14) 12/31/23 Distribution 1=spouse GAMBLING WINNINGS (W-2G) (13.2) Tax Withheld **Gross Winnings** Name of Payer 1=spouse 2022 (Box 1) No Federal (Box 4) State (Box 15) Local (Box 17) Winnings **GAMBLING LOSSES & WINNINGS (NON W-2G)** (13.2)2023 Amount TS 2022 Amount Total gambling losses..... Winnings not reported on Form W-2G

10, 13.1, 13.2

2023 1040 US Interest & Dividend Income 11, 12

Please enter all pertinent 2023 amounts & attach all 1099-INT, 1099-OID and 1099-DIV forms. Last year's amounts are provided for your reference.

INTEREST INCOME (11)

	Name of Paver	1		Interest Income		Tax-Exem	pt Interest	Early Withdrawal	
No.	Name of Payer (also enter SSN & address for seller-financed mortgage)	1=taxpayer 2=spouse	Banks, S&Ls, C/Us, etc. (Box 1)	Seller- Financed Mtg. (Box 1)	U.S. Bonds, T-Bills (Box 3)	Total Municipal Bonds	In-state Municipal Bonds	Penalty (Box 2)	2022 Interest

DIVIDEND INCOME (12)

		1_taypayo	_	Di	vidend Incor	me		Tax-Exem	pt Interest	Foreign	
No.	Name of Payer	2=spouse	Total Ordinary Dividends (Box 1a)	Qualified Dividends (Box 1b)	Total Capital Gain Distrib. (Box 2a)	SubSection 199A (Box 5)	U.S. Bonds (% or amt.)	Total Municipal Bonds	In-state Muni-bonds (% or amt.)	Foreign Tax Paid (Box 7)	2022 Dividends
	•				•	•	•				

2023 1040 US Itemized Deductions 25

Please enter all pertinent 2023 amounts and attach all 1098 forms. Last year's amounts are provided for your reference.

MEDICAL AND DENTAL EXPENSES

NOTE:Enter self-employed health insurance premiums on Sheet 24 and Medicare insurance premiums on Sheet 14.	2023 Amount	TS	2022 Amount
Prescription medicines and drugs			
Doctors, dentists and nurses			
Hospitals and nursing homes			
Insurance premiums not entered elsewhere (excl. LT care & amts. paid w/pre-tax dollars)			
Long-term care premiums - taxpayer			
Long-term care premiums - spouse			
Insurance reimbursement (enter as a positive number)			
Lodging and transportation:			_
Out-of-pocket expenses			
Medical miles driven			
Other medical and dental expenses:			
TAXES PAID (State and local withholding and 2023 estimates are a	utomatic.)		
State income taxes - 1/23 payment on 2022 state estimate			
State income taxes - paid with 2022 state return extension			
State income taxes - paid with 2022 state return			
State income taxes - paid for prior years and/or to other state			
City/local income taxes - 1/23 payment on 2022 city/local estimate			
City/local income taxes - paid with 2022 city/local extension			
City/local income taxes - paid with 2022 city/local return			
SALES AND USE TAXES PAID			
State and local sales taxes (except autos and special items)			
Use taxes paid on 2023 purchases			
Use taxes paid with 2022 state return			
Sales tax on autos not included above			
Sales tax on boats, aircraft, other special items			
OTHER TAXES PAID			
Real estate taxes - principal residence:			
Real estate taxes - held for investment :			
		1 1	
Personal property taxes (including auto fees in some states. Provide a copy of tax notice)			
Foreign income taxes.			
Other taxes:		1 1	

ORGANIZER **Itemized Deductions (continued)** US 2023 1040 25 p2 Please enter all pertinent 2023 amounts. Last year's amounts are provided for your reference. INTEREST PAID Home mortgage int. (Box 1) and points (Box 2) reported on Form 1098: 2023 Amount 2022 Amount Home mortgage interest not reported on Form 1098: Payee's name..... Payee's SSN or FEIN . . . Payee's street address.. Payee's city..... Payee's state..... Payee's ZIP code..... Payee's region.... Payee's postal code Payee's country..... Amount paid.... Points not reported on Form 1098: Investment interest (interest on margin accounts): Passive interest NOTE: Points paid on loans other than to buy, build, or improve your main home are deductible over the life of the mortgage. For these types of loans also provide the dates and lives of the loans. CASH CONTRIBUTIONS NOTE: No deduction is allowed for cash or check contributions unless the donor maintains a bank record, or a written communication from the donee, showing the name of the organization, contribution date(s), and contribution amount(s). Churches, schools, hospitals, and other charitable organizations (60% limitation): Contributions by cash or check: Veterans' organizations, fraternal societies, nonprofit cemeteries, and certain private nonoperating foundations (30% limitation): Contributions by cash or check:

ORGANIZER Page 8

2023 1040 US Itemized Deductions (continued) 25 p3

Please enter all pertinent 2023 amounts. Last year's amounts are provided for your reference.

NONCASH CONTRIBUTIONS

NOTE:Use Sheet 26 if total	noncash contributions are	e over \$500.	No deduction is allowed	for contributions	of clothing and	d household it	tems
that are not in <i>good</i>	used condition or better.	In addition.	a deduction for any item	n with minimal mo	onetarv value n	nav be denied	1.

% limitation (see above):	2023 Amount	TS	2022 Amount
limitation (see above):			
-			
6 capital gain property (gifts of capital gain property to 50% limit of	orgs.):		
s capital gain property (gifts of capital gain property to non-50% li	mit orgs.):		
ion and professional dues		ACT (su	ubject to 2% AGI limit)
ion and professional dues		ACT (su	ubject to 2% AGI limit)
on and professional dues		ACT (su	ubject to 2% AGI limit)
on and professional dues		ACT (su	ubject to 2% AGI limit)
on and professional dues		ACT (su	ubject to 2% AGI limit)
on and professional dues		ACT (su	ubject to 2% AGI limit)
on and professional dues		ACT (su	ubject to 2% AGI limit)
on and professional dues		ACT (su	ubject to 2% AGI limit)
on and professional dues		ACT (su	ubject to 2% AGI limit)
on and professional dues		ACT (su	ubject to 2% AGI limit)
on and professional dues		ACT (su	ubject to 2% AGI limit)
ion and professional dues		ACT (su	ubject to 2% AGI limit)
ion and professional dues ner unreimbursed employee expenses (uniforms and protective clo offessional subscriptions, employment agency fees, and certain edu estment expense:	thing, . expenses):	ACT (su	ubject to 2% AGI limit)
estment expense: creturn preparation fee	thing, . expenses):	ACT (su	ubject to 2% AGI limit)
er unreimbursed employee expenses (uniforms and protective clo fessional subscriptions, employment agency fees, and certain edu estment expense: return preparation fee e deposit box rental	thing, . expenses):	ACT (su	ubject to 2% AGI limit)
er unreimbursed employee expenses (uniforms and protective clo fessional subscriptions, employment agency fees, and certain edu estment expense: return preparation fee edeposit box rental cellaneous deductions (2% AGI) (certain legal and accounting fee	thing, . expenses):	ACT (su	ubject to 2% AGI limit)
er unreimbursed employee expenses (uniforms and protective clo fessional subscriptions, employment agency fees, and certain edu estment expense: er return preparation fee edeposit box rental edu	thing, . expenses):	ACT (su	ubject to 2% AGI limit)
er unreimbursed employee expenses (uniforms and protective clo fessional subscriptions, employment agency fees, and certain edu estment expense: c return preparation fee fee deposit box rental feedlaneous deductions (2% AGI) (certain legal and accounting feedlaneous deductions (2% AGI))	thing, . expenses):	ACT (su	ubject to 2% AGI limit)
er unreimbursed employee expenses (uniforms and protective clo fessional subscriptions, employment agency fees, and certain edu estment expense: c return preparation fee fee deposit box rental feedlaneous deductions (2% AGI) (certain legal and accounting feedlaneous deductions (2% AGI))	thing, . expenses):	ACT (su	ubject to 2% AGI limit)
rate Misc. Deds. If Non-conforming ion and professional dues the unreimbursed employee expenses (uniforms and protective closfessional subscriptions, employment agency fees, and certain education extractions and certain educations (as return preparation fees feedeposit box rental as cellaneous deductions (2% AGI) (certain legal and accounting feedecustodial fees):	thing, . expenses):	ACT (su	ubject to 2% AGI limit)

ORGANIZER Page 9

2023	1040	US	Itemized Deductions (continued)	25 n4
2023	1010	00	nternized beddetteris (continued)	_ _ _ D4

Please enter all pertinent 2023 amounts. Last year's amounts are provided for your reference.

THER MISCELLANEOUS DEDUCTIONS	2023 Amount	TS	2022 Amount
tate tax, section 691(c)			
er miscenaneous deductions.			

2023 1040 US Itemized Deductions (continued) 25 p5

If either of the following conditions below apply to you, your home mortgage interest deduction may need to be limited and the input section provided below should be completed. If neither condition applies, enter home mortgage interest amounts on organizer sheet 25 p2.

- 1. Total home equity debt exceeded \$100,000 at any time during 2023 (\$50,000 if married filing separate). For this purpose, home equity debt is defined as any mortgages taken out in which the proceeds were used to buy, build, or improve your home.
- 2. Total home acquisition debt exceeded \$750,000 at any time during 2023 (\$375,000 if married filing separate). For this purpose, home acquisition debt is defined as any mortgages taken out after October 13, 1987 in which the proceeds were used to buy, build, or improve your home.

NOTE: When completing the input section below, grandfather debt represents loans taken out prior to October 14, 1987.

Please enter all pertinent 2023 amounts and attach all 1098 forms. Last year's amounts are provided for your reference.

_	2023 Amount	TS	2022 Amount
air market value of the property on the date that the last debt was secured .			
me acquisition and grandfather debt on the date that the last debt was secured			
OAN INFORMATION			
oan #1			
Lender's name			
Form (see table)			
Number of form			
1=taxpayer, 2=spouse, blank=joint			
Interest paid			
Points paid.			
Total principal paid			
Lump sum principal payment (if paid off)			
Months outstanding (if not 12)			
1=home acquisition debt incurred after 12/15/17 (blank=10/13/87 - 12/15/17)			
Home acquisition debt balance - beginning of year			
Home acquisition debt borrowed in 2023			
Home equity debt balance - beginning of year			
Home equity debt borrowed in 2023			
Grandfather debt balance - beginning of year			
pan #2			
Lender's name			
Form (see table)			
Number of form			
1=taxpayer, 2=spouse, blank=joint			
Interest paid			
Points paid			
Total principal paid			
Lump sum principal payment (if paid off)			
Months outstanding (if not 12)			
1=home acquisition debt incurred after 12/15/17 (blank=10/13/87 - 12/15/17)			
Home acquisition debt balance - beginning of year			
Home acquisition debt borrowed in 2023			
Home equity debt balance - beginning of year			
Home equity debt borrowed in 2023			
Grandfather debt balance - beginning of year			
		,	
Form			
1 = Schedule A (defai 2 = Business use of h			
3 = Schedule E	IOTTIC		

25 p5

Itemized Deductions (continued) US $25_{\ p5\ cont}$ 2023 1040

Please enter all pertinent 2023 amounts and attach all 1098 forms. Last year's amounts are provided for your reference.

LOAN INFORMATION (continued)

Loan #3	2023 Amount	TS	2022 Amount
Lender's name			
Form (see table)			
Number of form			
1=taxpayer, 2=spouse, blank=joint			
Interest paid			
Points paid			
Total principal paid			
Lump sum principal payment (if paid off)			
Months outstanding (if not 12)			
1=home acquisition debt incurred after 12/15/17			
Home acquisition debt balance - beginning of year			
Home acquisition debt borrowed in 2023			
Home equity debt balance - beginning of year			
Home equity debt borrowed in 2023			
Grandfather debt balance - beginning of year			
Loan #4			
Lender's name			
Form (see table)			
Number of form			
1=taxpayer, 2=spouse, blank=joint			
Interest paid			
Points paid			
Total principal paid			
Lump sum principal payment (if paid off)			
Months outstanding (if not 12)			
1=home acquisition debt incurred after 12/15/17			
Home acquisition debt balance - beginning of year			
Home acquisition debt borrowed in 2023			
Home equity debt balance - beginning of year			
Home equity debt borrowed in 2023			
Grandfather debt balance - beginning of year			

Form

1 = Schedule A (default) 2 = Business use of home 3 = Schedule E