## DOCUMENTS NECESSARY TO COMPLETE YOUR TAX RETURN

W-2 wage forms, all 1099 (interest, dividend, Misc. etc.), 1098 Mortgage interest

W-2 G forms (gambling report)\*can be deducted on the itemized schedule A.

K-1 forms (Partnership, Corporation, Estates)

Stocks that you sold including date purchased and sold.

If you are self employed, bring a December 31 "Profit/Loss Statement".

Are you a landlord? We will need a "Profit/Loss Statement" for each property.

1095 A,B or C form or forms for proof of health insurance.

**Property Tax Statement** 

Child care information, total paid, who provided the care with the address, EIN# or SS# and phone #.

## TAX SEASON 2023 DATES TO REMEMBER

January 15, 2023	Last estimated payment is due
March 15, 2023	S-Corporations and Partnerships are due
March 15, 2023	Apply for extensions (S-Corporations and Partnerships deadline.)
April 15, 2023	C-Corporations that are a calendar year
April 15, 2023	California min. tax \$800.00 for Corporations and Partnerships
April 15, 2023	Personal Income Tax (All states)
April 15, 2023	Income Tax owed both IRS and States(s).
April 15, 2023	Filing extensions for personal income tax and C-Corporations.



Happy New Year! I hope the New Year 2023 finds you all in good health and that you have all had a wonderful Holiday Season.

Tax Season is here once more. I am sure you are compiling your Income Tax Information so that together we can prepare your 2022 Income Tax Return in the most efficient manner possible.

Regarding Health Insurance: If you received assistance through the Healthcare Marketplace. You will have to show proof! We cannot stress this enough. What the means in short is that you must have the 1095-A and CA 3895 before filing. (Only if you were insured through the marketplace).

On October 18, 2022, the IRS announced the tax year 2023 there would be annual inflation adjustments for more than 60 tax provisions. These include tax rate schedules, energy changes, a higher maximum Earned Income Tax Credit amount and more as well as notes on unaffected items available on IRS.gov.

A significant tax law change stated those who use third party apps, like Venmo and PayPal, will receive Form 1099-K if they received more than \$600 on these platforms. Once the maximum amount received through the vendor exceeds \$600, third-party payments networks and others who process payments will be required to issue From 1099-K.

There may be some confusion around the child tax credit moving into the 2023 tax season. The credit amount will drop \$1,000 for children six and older and \$1,600 for children for under age six. Not only has the amount of the credit changed, the child tax credit is partially nonrefundable. The Credit is limited to 15% of income from a job or self-employment over \$2,500. The child and dependent care credit has also reverted back to pre-2021 rules. The credit is again no more than 35% of allowed expenses and the expenses are limited to \$3,000 for each qualified child and \$6,000 for more than one qualified child.

## Important Tax Changes:

The amount that you can contribute to your 401(k) is increasing for 2023. It will be \$22,500, a \$2,000 boost from the \$20,500 limit 2022. The catch-up contribution limit for workers 50 and older also will increase \$7,500.

The new contribution limit for a traditional IRA and Roth IRA will be \$6,500.

The standard deduction has been raised for 2023:

\$27,700 for married couples

\$13,850 for single

\$20,800 for heads of households

The earned income tax Credit is \$7,430 who have three or more children.

The IRS has increased the threshold for how long-term capital gains are taxed.

We look forward to seeing you this tax season.

Larry, Chad, Linda and Mary

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INCOME	TAX				DO NO	T WRITE IN THIS	
QUESTIONAIRE						Federal Return State Tax Return	
QUESTION	Home	<u> </u>	Your Office		Spouse's Office	State Tax Return	1
Date	Phone No: ( )		Phone No. ( )		Phone No. ( )		
Cell Phone No. ( )	Pager	( )	Fax ( )	E-Mail	Address		
Your Name			Date of Birth			Blind	Over 65
Spouse's Name			Date of Birth			Blind	Over 65
Home Address		NAME OF THE PARTY		Mailing Address (If Different)		,	Do you rent?
				- (iii Diiii diiii)			Yes No [
Your Occupation?	ur Occupation? Spouse's Occupa		tion: Your Social Security No.		Your Spouse's Social Security No.		
Name of Dependents Claimed as Exemptions Name (First, Initial, and Last Name)		ons	Date of Birth Dependents		Social Security No.	Relationship	
		<del>,</del>					
		CHIL	D AND DEPENDE	NT CARE EXPENS	ES		1
			Address	o. inc and alto	Identification Num	ber	T
Name of Persons or Dep	endents	(Number,	er, Street, City, State & Zip Code)		(Soc Sec No. or Emp. I.D. No.)		Amount Paid
							\$
					Current Vaar	T	\$
	ESTIMATED TA	XES PAID AND	CREDITS		Current Year Contributions	Ira/Roth	Keogh or SE
	Due Date	Date Paid	Federal	State	You	\$	
Prior Yr. 4th Qtr	Last Jan.		\$	\$	Spouse	\$	
Prior Yr. Overpayment to	r Yr. Overpayment to this Yr. \$		\$	\$	Do either you or your spouse participate in a pension, profit sharing, Keogh, SEP or 401 K Plan? You Spouse		
First Quarter	April		\$	\$	Did you withdraw IRA or Keogh funds from one financial		
Second Quarter	June		\$	\$	institution and re-deposit YesNo	the funds to another in	nstitution with in 60 o
Third Quarter	Sept		\$	\$	If yes, please indicate the amount of funds Withdrawn: \$		
Fourth Quarter	This Jan		\$	\$			
		entransassar ansatz report on tropen shaket Umphi Astiket Unit	INCC	ME	ati kasilasi kahlah kahla di Masal kalikasi nya kisa kasangah sa inganasika kisa basah sa kasilasi kantar kasi		
Wages: (Attach W-2's)	Number of W-2's	\$		Ţ	Pension or Annuity (Attach 1099 R's)	\$	
Interest:			Amount:	Dividends:		Ordinary	Capital Gains
Payor			\$	Payor		\$	\$
			\$			\$	\$
			\$			\$	\$
Business Income: (Give Nar	ne of Business, Ado	lress & Occupation	)	Partnership, S-Co	rp or Fiduciary Income	(Give Name and P	rovide K-1)
Attach Profit or Loss Sta	tement						
IF SELF EMPLOYED POSSIBLE DEDUC		ANCE ALLOWED:					
Stocks, Bonds, Property,					and any Related Do		To 1 5
	Description		Date Acquired	Date Sold	Sale Price	Cost	Sale Expenses
			<del> </del>	-	\$	\$	\$
			<u> </u>		\$	\$	\$
Type of Rental Unit				Date Put Into Serv	rice		
Address							
Land Cost \$		Bldg. Cost \$			Account Depreciation		
Rental Income \$	Ex	penses on Rental \$	5	Advertising S	<u> </u>	Insurance \$	
Auto & Travel \$	(	Cleaning & Maint. \$	) )	Management Fee	s\$	Taxes \$	
Mortgage Interest \$		Repairs \$		Utilities \$		Other \$	
Other Income (Attach Copi	es of 1099's)	Tax Exempt Intere	est Income \$		Tips Received \$		
Other		\$	5	Other			\$
Unemployment		Allimony		Social Security			State Tax

## ITEMIZED DEDUCTIONS

MEDICAL EXPENSES			QUESTIONS
	Health Insurance	\$	
	Medicare Premium	\$	
	Prescriptions	\$	
	Total Doctors	\$	
	Total Dentists	\$	
	Total Hospitals	\$	
	Total Labs	\$	
	Total Glasses	\$	
	Total Hearing Aids	\$	
	Total Other	\$	
TAXES YOU PAID			
	Real Estate taxes	\$	
	Property taxes	\$	
	Other taxes	\$	
HOME MORTGAGE			
	Interest (form 1098)	\$	
	Points (other)	\$	
	Mortgage Insurance	\$	
	Investment interest	\$	
GIFTS TO CHARITY			
	Church	\$	
	Non profit groups	\$	
	Miles driven	\$	
	Non cash groups	\$	
Casualty & Theft			
•	Federal disaster	\$	
	Qualified disaster	\$	
	Theft	\$	
Gambling			
Ü	Total Losses	\$	
	ADJUSTN	MENTS TO INCOME	
Alimony	Paid	\$	æ
	Social Security Number	——————————————————————————————————————	
Student Loan	Paid interest	\$	
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