



# INTERNATIONAL TAXES INC

## 2023 Tax Year

Please make sure this Organizer is complete and all requested materials are provided. Provide original W-2s and 1099 statements and copies of all other documents.

### PERSONAL DATA (Please Print)

First Name	M.I.	Last Name (as on your SS Card)	Social Security Number	Date of Birth	Sex
Taxpayer:					<input type="checkbox"/> M <input type="checkbox"/> F
Spouse:					<input type="checkbox"/> M <input type="checkbox"/> F
Street Address	Apt. #	City	State	Zip Code	
Current Tax Address:					
Mailing Address:					
<i>Tax Address: The current state to which you pay tax and the address we use on your tax return. Note: Must be able to receive mail.</i>					
<i>Mailing Address: The address where we mail your documents if different from your tax address.</i>					
Occupation	Airline	Base	Employee #	Date of Hire	Preferred Name/Nickname
Taxpayer:					
Spouse:					
Email:	Home Phone Number:		Cell Phone Number:		
Spouse's Email:	Spouse's Home Number:		Spouse's Cell Number:		
Best way to contact you:	May we notify you via text messages to your cell phone when your return is complete? <input type="checkbox"/> Yes <input type="checkbox"/> No <b>If yes, tell us which carrier to use (e.g. Verizon, Sprint, etc.)</b>				

### FILING STATUS (Check One)

<input type="checkbox"/> <b>Single</b>	<input type="checkbox"/> <b>Married Filing Joint</b>	<input type="checkbox"/> <b>Qualifying Widow(er)</b> Spouse's date of death ____/____/____
<input type="checkbox"/> <b>Married Filing Separate</b> <i>If you file MFS and itemize your deductions, your spouse must itemize their deductions as well.</i>	Spouse Name: _____ Spouse Soc. Sec. #: _____	
	Did you live with your spouse any time during 2023? <input type="checkbox"/> Yes <input type="checkbox"/> No	
	If yes, did you live with your spouse any time after June 30? <input type="checkbox"/> Yes <input type="checkbox"/> No	
<input type="checkbox"/> <b>Head of Household</b> <i>If you are the custodial parent &amp; someone else is taking the exemption for your child, complete this section. Otherwise, list all dependents in the following section.</i>	Name: _____ Soc. Sec. #: _____	
	Relationship: _____	Date of Birth: _____
	# of months lived with you: _____	
	Who is claiming this person on their tax return? _____	
<input type="checkbox"/> <b>Domestic Partner/Civil Union</b> <i>If you are in a legal union recognized by your state (e.g. civil union, registered domestic partnership).</i>	List State(s) where your relationship is registered: _____	
	For your state return(s), please identify your preferred filing status: <input type="checkbox"/> Married Filing Joint <input type="checkbox"/> Married Filing Separate	

### DEPENDENT INFORMATION

Dependent's income must be under \$4,000 unless they are a full time student under the age of 24. If your dependent children do not live with you, YOU MUST PROVIDE CURRENT FORM 8332 RELEASE OF CLAIM IN ORDER FOR IRS TO GRANT THE EXEMPTION.

Name (as it appears on the SS Card)	Date of Birth	SSN	Relationship	Income	# Months at home	Full Time Student?	Dep. Tax Return Filed?
				\$		<input type="checkbox"/> Yes	<input type="checkbox"/> Yes <input type="checkbox"/> No
				\$		<input type="checkbox"/> Yes	<input type="checkbox"/> Yes <input type="checkbox"/> No
				\$		<input type="checkbox"/> Yes	<input type="checkbox"/> Yes <input type="checkbox"/> No
				\$		<input type="checkbox"/> Yes	<input type="checkbox"/> Yes <input type="checkbox"/> No
				\$		<input type="checkbox"/> Yes	<input type="checkbox"/> Yes <input type="checkbox"/> No

Divorced/Separated Parents: Do you alternate claiming child(ren) in even/odd years?  Yes  No *If yes, please provide details.*

**IMPORTANT QUESTIONS**

Yes	No	Please Answer All Questions	Amount
<input type="checkbox"/>	<input type="checkbox"/>	Did you make any out of state purchases without paying sales tax that you need to claim on your state return?	\$
<input type="checkbox"/>	<input type="checkbox"/>	Do you have any children under age 24 with investment income over \$2,100? If yes, please provide 1099 statements.	
<input type="checkbox"/>	<input type="checkbox"/>	Did you adopt a child during 2023? If yes, contact us for additional information.	
<input type="checkbox"/>	<input type="checkbox"/>	Do you owe any back taxes to the IRS or your state?	
<input type="checkbox"/>	<input type="checkbox"/>	Do you have any delinquent student loans or owe back child support?	
<input type="checkbox"/>	<input type="checkbox"/>	Did the IRS garnish your refund last year?	
<input type="checkbox"/>	<input type="checkbox"/>	Did you have any debts cancelled or forgiven? If yes, provide explanation in Comments on pg. 10. Provide Form 1099-A and/or 1099-C.	
<input type="checkbox"/>	<input type="checkbox"/>	Do you agree to allow International Taxes Inc to discuss this return with the IRS should questions arise?	
What is your maiden name or previous married name?			

NEW CLIENTS ONLY			
Yes	No	New Clients Please Answer All Questions	Amount
<input type="checkbox"/>	<input type="checkbox"/>	Did International Taxes Inc prepare your 2023 tax return?	
<input type="checkbox"/>	<input type="checkbox"/>	Did you receive a federal refund last year? If yes, amount?	\$
<input type="checkbox"/>	<input type="checkbox"/>	Did you receive a state and/or local tax refund last year? If yes, amount?	\$
<input type="checkbox"/>	<input type="checkbox"/>	Did you pay additional tax when you filed your state or local tax return last year? If yes, amount?	\$
<input type="checkbox"/>	<input type="checkbox"/>	Did you itemize your deductions for 2023?	
<input type="checkbox"/>	<input type="checkbox"/>	Did you take a distribution from a retirement plan (401K, IRA, SEP, Roth) during 2017 or 2023?	
<input type="checkbox"/>	<input type="checkbox"/>	Have you been (or are you being) audited for 2017 or 2023?	
<input type="checkbox"/>	<input type="checkbox"/>	Did you claim a Net Operating Loss (NOL) or carry over loss in 2023?	
Who referred you to International Taxes Inc?			

**FOREIGN ACCOUNTS**

Yes	No	Please Answer All Questions
<input type="checkbox"/>	<input type="checkbox"/>	At any time during 2023, did you have a financial interest in, or a signature authority over a financial account located in a foreign country? (Foreign Bank, Securities or other financial account)
<input type="checkbox"/>	<input type="checkbox"/>	Did the combined value of these accounts exceed \$10,000 at any time during 2023? <b>If yes, provide the Country(ies) as these must be reported on your tax return.</b>
<b>Additionally, you are required to submit an FBAR-FinCEN Report 114 electronically via the BSA E-Filing System no later than June 30, 2023. A link is available on our website.</b>		

If you live in the U.S. and the balance of your foreign account(s) exceeds \$50,000 for Single/MFS or \$100,000 for Joint filers on the last day of the year **OR** the balance exceeds \$100,000/\$150,000 at any point during the year, **you are required to file form 8938 with your tax return.** Taxpayers living outside of the U.S. have higher thresholds and are only required to file the form if the foreign account(s) balance exceeds \$200,000 for Single/MFS or \$400,000 for Joint filers on the last day of the year **OR** exceeds \$300,000/\$600,000 at any point during the year. If you are required to file form 8938, please visit our website and download the Foreign Accounts Worksheet.

**STATE RESIDENCY INFORMATION FOR 2023**

All clients complete this section, even if you only lived in one state or lived in a state with no income tax.  
If you paid taxes to more than one state, you may receive a separate W-2 for each state. We must have ALL of these W-2's.

State	Own	Rent	Other	Date Moved In	Date Moved Out	Still a Resident?	County	School District
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/> Yes <input type="checkbox"/> No		
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/> Yes <input type="checkbox"/> No		
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/> Yes <input type="checkbox"/> No		

If you are required to file a state return and **DO NOT** want International Taxes Inc to prepare your state return for you, initial here. (Remember, you **should not** file your state return before you file your federal return.)

**DO NOT File my State** Initial Here

**A. INCOME SOURCES**

Yes	No	Please Answer All Questions	Amount
<input type="checkbox"/>	<input type="checkbox"/>	Did you receive any alimony during 2023?	\$
<input type="checkbox"/>	<input type="checkbox"/>	Did you pay any alimony in 2023? To: SSN:	\$
<input type="checkbox"/>	<input type="checkbox"/>	Did you receive any unemployment during 2023? If yes, please provide Form 1099 G.	\$
<input type="checkbox"/>	<input type="checkbox"/>	Did you receive a K-1 from any entities—Corporation, Estate, Trust, Partnership, etc.? If yes, enclose.	\$
<input type="checkbox"/>	<input type="checkbox"/>	Did you receive any Social Security during 2023? (Enclose SSA - 1099)	\$
<b>1099 Misc.—income should be reported in Small Business/Self Employment Section.</b>			

Yes	No	Please Answer All Questions	Amount
<input type="checkbox"/>	<input type="checkbox"/>	Did you receive any type of additional income during 2023? (jury duty pay, training stipends, duty free commissions, taxable prizes, trustee fees, etc.) Specify type of income and provide amount. Provide 1099-MISC if applicable.	Taxpayer \$ Spouse \$
<i>Gambling losses may only be used to offset winnings. Losses greater than winnings are not deductible. You need to have documentation of your gambling losses.</i> <b>Note: Provide Forms W-2G reporting state where winnings were paid.</b>			
<input type="checkbox"/>	<input type="checkbox"/>	Did you have any gambling winnings in 2023?	\$
<input type="checkbox"/>	<input type="checkbox"/>	Did you have any gambling losses in 2023?	\$

**B. FORM W-2: WAGE & TAX STATEMENT**

Please list the 2023 employers for you and your spouse, indicate whether the employer is the Taxpayer's or Spouse's, and **provide the original Forms W-2.**

Employer	Taxpayer or Spouse?	Employer	Taxpayer or Spouse?	Employer	Taxpayer or Spouse?
	<input type="checkbox"/> T/P <input type="checkbox"/> S		<input type="checkbox"/> T/P <input type="checkbox"/> S		<input type="checkbox"/> T/P <input type="checkbox"/> S
	<input type="checkbox"/> T/P <input type="checkbox"/> S		<input type="checkbox"/> T/P <input type="checkbox"/> S		<input type="checkbox"/> T/P <input type="checkbox"/> S

**C. ESTIMATED TAX PAYMENTS**

The quarterly payments made to the IRS and/or your state. These payments are usually for tax on self-employment/investment income.

Federal Amount	Date of Payment	State Amount	Date of Payment	Local Amount	Date of Payment
\$		\$		\$	
\$		\$		\$	
\$		\$		\$	
\$		\$		\$	

**D. FORM 1099-INT: INTEREST INCOME**

Please list the institutions for which 2023 interest income was received for you, your spouse, and any dependents under the age of 24. If your child files their own tax return and their interest and dividends are over \$2,100, it must be reported on your return or be taxed at your tax rate on their return. **Please provide the original Forms 1099-INT or other statements reporting interest income.**

Institution	Taxpayer, Spouse or Dependent?	Institution	Taxpayer, Spouse or Dependent?	Institution	Taxpayer, Spouse or Dependent?
	<input type="checkbox"/> T/P <input type="checkbox"/> S <input type="checkbox"/> D		<input type="checkbox"/> T/P <input type="checkbox"/> S <input type="checkbox"/> D		<input type="checkbox"/> T/P <input type="checkbox"/> S <input type="checkbox"/> D
	<input type="checkbox"/> T/P <input type="checkbox"/> S <input type="checkbox"/> D		<input type="checkbox"/> T/P <input type="checkbox"/> S <input type="checkbox"/> D		<input type="checkbox"/> T/P <input type="checkbox"/> S <input type="checkbox"/> D

**E. FORM 1099-DIV: DIVIDENDS AND DISTRIBUTIONS**

Please list the institutions for which 2023 dividends and capital gains distributions were received by you, your spouse, and any dependents under the age of 24. If your child files their own tax return and their interest and dividends are over \$2,100, it must be reported on your return or be taxed at your tax rate on their return. **Please provide the original Forms 1099-DIV and all year-end summary statements.**

Institution	Taxpayer, Spouse or Dependent?	Institution	Taxpayer, Spouse or Dependent?	Institution	Taxpayer, Spouse or Dependent?
	<input type="checkbox"/> T/P <input type="checkbox"/> S <input type="checkbox"/> D		<input type="checkbox"/> T/P <input type="checkbox"/> S <input type="checkbox"/> D		<input type="checkbox"/> T/P <input type="checkbox"/> S <input type="checkbox"/> D
	<input type="checkbox"/> T/P <input type="checkbox"/> S <input type="checkbox"/> D		<input type="checkbox"/> T/P <input type="checkbox"/> S <input type="checkbox"/> D		<input type="checkbox"/> T/P <input type="checkbox"/> S <input type="checkbox"/> D

**F. FORM 1099-B: STOCKS AND BONDS SOLD\***

The information below **MUST** be provided. **Provide your complete year-end statement including Form 1099-B from your broker.** Purchase price (cost basis) must be provided.

Description and Quantity	Purchase Date	Sale Date	Proceeds	Purchase Price Cost Basis
			\$	\$
			\$	\$
			\$	\$

**G. FORM 1099-R: DISTRIBUTIONS FROM PENSIONS, ANNUITIES, RETIREMENT, PROFIT SHARING PLANS, IRAs, ETC.\***

Please list the institutions and provide the following information for which 2023 distributions were received for you and your spouse. **Please provide the original Forms 1099-R.**

Institution	Taxpayer or Spouse?	Date of Distribution	Reason for Distribution	Amount rolled over, if any
	<input type="checkbox"/> T/P <input type="checkbox"/> S			\$
	<input type="checkbox"/> T/P <input type="checkbox"/> S			\$
	<input type="checkbox"/> T/P <input type="checkbox"/> S			\$

**H. IRA & SELF EMPLOYED RETIREMENT CONTRIBUTIONS\***

	Taxpayer	Spouse
<b>Traditional IRA</b>		
Do you want us to calculate the maximum amount you may contribute for 2023? <i>Not available if tax return is filed after 4/18/18. (\$10 additional fee)</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you want to make this contribution even if it is non-deductible? <i>(Required form and fee)</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Have you ever made non-deductible contributions to any Traditional IRA? <i>(If yes, we must have the amount of non-deductible contributions made.)</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
2023 contribution already made, if any. <i>(May qualify for tax credit.)</i>	\$	\$
<b>Roth IRA</b>		
Do you want us to calculate the maximum amount you may contribute for 2023 <i>Not available if tax return is filed after 4/18/18. (\$10 additional fee)</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
2023 Roth contribution already made, if any. <i>(May qualify for tax credit.)</i>	\$	\$
<b>Self Employment Retirement Plan</b>		
Do you want us to calculate the maximum amount you may contribute for 2023? <i>(\$10 additional fee)</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
2023 contribution already made, if any. <i>(May qualify for tax credit.)</i>	\$	\$

**I. EDUCATIONAL DEDUCTION\* & STUDENT LOAN INTEREST**

Did you pay any student loan interest in 2023? **If so, provide Form 1098E.**  T/P  S  D \$

For the Tuition and Fees Deduction or the American Opportunity Tax Credit (formerly the Hope Credit) and Lifetime Learning Credit you may claim qualified expenses and fees for yourself, your spouse, and/or your dependent children. If you are married, you must file a joint return to receive the deduction or credits. The IRS defines qualified expenses as tuition and fees, books and other required materials an individual is required to pay in order to be enrolled in an eligible institution. For the Lifetime Learning Credit, the student must be taking it to improve or acquire job skills. **We will determine which benefits you most. Additional Form Fees Apply!** Please provide Form 1098-T from school showing tuition paid during the year. This information may be found on students' online account.

Please provide Form 1098T	Student #1	Student #2	Student #3	Student #4
Name of Student				
Name of Institution				
Year in College	1 <sup>ST</sup> 2 <sup>ND</sup> 3 <sup>RD</sup> 4 <sup>TH</sup> Grad	1 <sup>ST</sup> 2 <sup>ND</sup> 3 <sup>RD</sup> 4 <sup>TH</sup> Grad	1 <sup>ST</sup> 2 <sup>ND</sup> 3 <sup>RD</sup> 4 <sup>TH</sup> Grad	1 <sup>ST</sup> 2 <sup>ND</sup> 3 <sup>RD</sup> 4 <sup>TH</sup> Grad
Was student at least halftime?	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Amount of Tuition Paid	\$	\$	\$	\$
Amount of 529 Plan Withdrawals	\$	\$	\$	\$
Amount of 529 Plan Withdrawals used for Room & Board Expenses	\$	\$	\$	\$

**J. MOVING EXPENSES\***

Only report job related relocations of primary residence below. See Professional Deductions for relocation of commuter pad.

Moved Primary Residence From:		Old Base:	Number of Vehicles driven:	#
Moved Primary Residence To:		New Base:	Miles driven for move:	#
Distance (Miles from old home to new workplace):	mi.	Lodging Expense (only while in transit):		\$
Distance (Miles from old home to old workplace):	mi.	Moving Expense (material, rental, movers, & storage):		\$
Date Moved:		Was this move for change of job for spouse?		<input type="checkbox"/> Yes <input type="checkbox"/> No

**K. CHILD CARE EXPENSES\***

Qualifying expense for care which allows you to work, look for work, or go to school full time. Deduction only allowed for children under age 13.

**NOTE: Provider Social Security Number or ID Number is required to receive credit! This information must be provided even if you have dependent care benefits through your employer.**

Provider Name	Provider Address	Provider I.D.# or SS#	Child's Name	Amount
				\$
				\$

**L. SALES TAX**

For the **Sales Tax Deduction**—you have the option of taking the standard deduction plus major purchases (auto, boat, RV, aircraft) or providing a total amount of sales tax paid for all purchases during the year. The IRS requires you keep all receipts used for this deduction—provide total amount below. (Do not send receipts except for major purchases listed below.)

Sales tax paid on the purchase of an automobile, boat, RV, or aircraft during 2023. (Enclose copy of receipts.)	\$
Sales tax paid on all items purchased during 2023—IRS requires documentation for all items purchased.	\$

**M. FLEXIBLE SPENDING ARRANGEMENTS (FSA)**

A Flexible Spending Arrangement (FSA) is the "use it or lose it" account that allows you to contribute pre-tax dollars through payroll deduction to an account used for reimbursement of medical expenses incurred in 2023. These reimbursed expenses cannot subsequently be used as medical expenses for the purpose of a deduction on your tax return.

Did you contribute to an FSA in 2023?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Amount contributed?	\$
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**N. HEALTH SAVINGS ACCOUNTS (HSA)**

If you or your spouse has a Health Savings Account, please provide the following information. Please provide Forms 5498-SA and/or 1099-SA, as applicable.

What type of high deductible health plan do you have?	<input type="checkbox"/> Self Only <input type="checkbox"/> Family	Number of months in the high deductible health plan in 2012	months	Was high deductible health plan in effect for the month of December 2023?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Total HSA contributions for 2023 made through payroll deduction	\$	Total HSA distributions for 2023		\$	
Total HSA contributions for 2023 made by cash or check to your account (Do not include payroll deductions).	\$	How much of this distribution was used for medical expenses?		\$	

**O. MEDICAL EXPENSES**

**Do not include amounts paid by insurance or with pre-tax dollars (HSA's or FSA's). Out-of-pocket expenses must exceed 10% of your income. Your state may allow a medical deduction. Therefore, please complete this section to enable you to get the maximum federal and state medical deductions. Do not include premiums for Accident or Disability insurance.**

Prescriptions	\$	Physician/Dentist/Chiropractor	\$
Long-Term Care Insurance Premiums Paid	Taxpayer \$ Spouse \$	Long-Term Care Expenses (not covered by insurance)	Taxpayer \$ Spouse \$
Insurance Premiums— <b>Not Pre-Tax</b>	\$	Contacts/Glasses	\$
COBRA Premiums	\$	Psychotherapy/Counseling	\$
Co-Pays	\$	Hospital	\$
		Lab Fees	\$
		Laser Eye Surgery/Lasik	\$
		Miles Driven for Medical	mi.

**Health Care Tax Credit**—send us Form 8885 or Form 1099-H. You should receive either of these forms if you are eligible.

**P. AFFORDABLE CARE ACT (ACA)\*—\*\*REQUIRED ANNUAL REPORTING\*\***

**New for 2023** If your coverage was Employer-Provided, you must provide Form 1095-C or 1095-B.  
If your coverage was obtained through the Insurance Marketplace, you must provide Form 1095-A.

Was your entire family covered for the full year with minimum essential health care coverage?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If no, please download and complete the Affordable Care Act Worksheet from our website. Submit with this organizer and other tax information.	
If yes, how was your coverage provided?	<input type="checkbox"/> Employer <input type="checkbox"/> Insurance Marketplace <input type="checkbox"/> Government

**Q. CHARITABLE CONTRIBUTIONS\***

**IRS Requirements for Cash Contributions:** You cannot deduct a cash contribution, regardless of the amount, unless you keep as a record of the contribution a bank record (such as a cancelled check, a bank copy of a cancelled check, or a bank statement containing the name of the charity, the date, and the amount) or a written communication from the charity. The written communication must include the name of the charity, date of the contribution, and amount of the contribution.

<b>Cash</b>	Church	\$	Official Charities	\$	Airline Charity	\$
	School/Education Contributions		\$	Charitable Miles Driven		mi.

**IRS Requirements for Vehicle Contributions:** The IRS requires written acknowledgement (1098-C) received from the charitable organization be attached to the return if you are taking a deduction over \$500. If your donation was valued at less than \$500 please complete the following:

<b>Vehicle</b>	Name of Charitable Organization:					
	Date of Donation		Make and Model of Vehicle			
	Fair Market Value under \$500		\$	Original Purchase Date & Price		\$
	Method to determine value:		How acquired?			

**IRS Requirements for Non-Cash Contributions:** The IRS requires an itemized list of all items donated and a receipt from the charitable organization. **Name and address are required for any donation over \$500.** Please make sure your receipt has a dollar value on it; if over \$500, you must submit the receipts.

<b>Non-Cash</b>	Charitable Organization receiving donated goods:					
	Address of this organization:					
	Do you have an itemized list and the corresponding receipt? <input type="checkbox"/> Yes <input type="checkbox"/> No					
	Date of Donation		Resale Value of Furniture		\$	
	Original Purchase Date:		Resale Value of Clothing		\$	
	How acquired? (purchase, inheritance, gift):		Resale Value of Appliances		\$	
	Original Purchase Price:		\$	Resale Value of Household Items		\$

<b>Non-Cash</b>	Charitable Organization receiving donated goods:					
	Address of this organization:					
	Do you have an itemized list and the corresponding receipt? <input type="checkbox"/> Yes <input type="checkbox"/> No					
	Date of Donation		Resale Value of Furniture		\$	
	Original Purchase Date:		Resale Value of Clothing		\$	
	How acquired? (purchase, inheritance, gift):		Resale Value of Appliances		\$	
	Original Purchase Price:		\$	Resale Value of Household Items		\$

**R. HOMEOWNER INFORMATION (Principal Residence and 2nd Home within the U.S.)**

**Note: If you own a Principal Residence or 2nd Home outside of the U.S., complete section T. Foreign Residence Information.**

**Do not include rental property expenses**—see Section Y. Provide 1098 statement from mortgage company. If you purchased, sold, or refinanced, send a copy of the closing statement.

Mortgage Interest on Principal Residence	\$	Real Estate Taxes on Principal Residence	\$
Home Equity Interest or 2nd Mortgage on your Principal Residence	\$	All other Real Estate taxes paid on personal residences, including vacant land	\$
Mortgage Interest on 2nd Home	\$	Real Estate Taxes on 2nd Home	\$
Mortgage Interest on Vacant Land	\$	Is this a Construction Loan on Vacant Land?	<input type="checkbox"/> Yes <input type="checkbox"/> No

At any time in 2023, did the mortgage balances on your principal and/or second homes exceed \$1,100,000?  Yes  No

*Interest paid on a boat/RV may qualify as a deduction if it has a lavatory and a range. HOA—Homeowner Association Fees are not deductible for primary residence.*

Did you refinance your home in 2023?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, please provide number of years you refinanced & closing statement.		
Did you spend the proceeds from the refinance on anything other than home improvements?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, enter the amount spent for each	Home Improvements \$	Other \$
Did you sell your home in 2023?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, provide purchase & sale closing statements.		
If yes, what was the sale price?	\$	Sale Date:		
What was the original purchase price?	\$	Original Purchase Date:		
Was the property you sold your primary residence for 2 of the past 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Number of years in home before sale:		
Was an office in home deduction ever taken?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, please provide tax return from each year taken ( <i>new clients</i> ).		
Was this home ever used as a rental property?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, please provide tax return from each year rented ( <i>new clients</i> ).		
Did you purchase your home in 2023?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, <b>a copy of your closing statement is required.</b>		

**S. FIRST-TIME HOMEBUYER (FTHB) CREDIT RECAPTURE\***

Did you take the FTHB credit of up to \$7,500 for a new home purchased in 2008 that must be paid back on a yearly basis?  Yes  No

*If International Taxes Inc did not prepare your 2008 return, you must provide a full copy of the 2008 return.*

**T. RESIDENTIAL ENERGY CREDITS\***

If you made qualifying energy improvements to your home, you may be eligible for an energy credit.

Did you install alternative energy equipment, such as solar hot water heaters, geothermal heat pumps, or wind turbines?

Yes  No

**If yes, you must provide a copy of the manufacturer's certificate and a copy of your sales receipt.**

**U. FOREIGN RESIDENCE INFORMATION** (Principal and 2nd Home located outside the U.S.)

Provide information below for Mortgage Interest and/or property taxes you paid in a country other than the U.S. Please list all amounts in U.S. dollars.

Mortgage interest on principal residence	\$	Real Estate taxes on principal residence	\$
Mortgage interest on 2nd home	\$	Real Estate taxes on 2nd home	\$

Name of Lender	Lenders' Street Address	City	State	Zip

**V. CASUALTY THEFT & LOSS**

Only net amounts over 10% of your income are deductible. Please provide itemized insurance list or police report.

Type of Property	Reason for Damage	Date of Event	Date Acquired	Value Before Loss/Damage	Value After Loss/Damage	Insurance Reimbursement
				\$	\$	\$

**W. MISCELLANEOUS EXPENSES**

Tax Prep Fees Paid in 2023 (Mailing Fees not allowed)	\$	Investment Expense	\$
Tax Prep Books/Software	\$	IRA Fees (not paid out of IRA account)	\$
Safe Deposit Box Rental	\$	Personal Property Tax	\$
Margin or Investment Interest Paid	\$	Vehicle Excise/Ad Valorem Tax	\$

**X. NON AIRLINE EMPLOYEE BUSINESS DEDUCTIONS—W-2 INCOME ONLY\***

If you have a 2nd job, or your spouse has a job with non-reimbursed employee business expenses, please list them below. If you are a Policeman or Fireman, we have a detailed professional worksheet designed for your deductions. Call us or download one at [www.InternationalTaxesInccom](http://www.InternationalTaxesInccom).

Name of Employer:	Office Equip. (Provide list)	\$	Travel	\$	
Name of Employee:	Uniform Items	\$	Company Business Cards	\$	
Union Dues/Initiation Fee	\$	Uniform Maint./Alterations	\$	Cell Phone (if required for job)	\$
Professional Publications	\$	Company Related Phone Calls	\$	Job Related Education Expense	\$
Office Supplies	\$	Licenses	\$	Meals/Entertainment	\$
Were you reimbursed or paid for any of the above expenses? <input type="checkbox"/> Yes <input type="checkbox"/> No				If yes, what was the amount?	\$

**Vehicle Expense** Please answer ALL questions below! The IRS requires written evidence of business miles to qualify for the deduction!

Type & Year of Vehicle:	Miles Driven for Business Jan. 1–June 30	mi.	
Date First Used for Business	Miles Driven for Business July 1–Dec. 31	mi.	
Do you have another car for personal use?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Miles Driven for Commuting Jan. 1–June 30	mi.
Do you have evidence to support the deduction?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Miles Driven for Commuting July 1–Dec. 31	mi.
Is this evidence written?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Were you reimbursed or paid for any of your vehicle expenses?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Miles Driven for Personal Jan. 1–Dec. 31	mi.	If yes, what was the amount?	\$

**Home Office** Must be required by Employer!

Square Footage of Home	sq./ft	Cost of Utilities during 2023 (excluding water)	\$
Square Footage of Space/Room Used	sq./ft	Amount of Rent Paid per Month	\$
Lesser of Purchase Price of Home or Fair Market Value	\$	Insurance—Homeowners/Renters	\$
Months Office was in Home during 2015		Other—Specify	\$

**Educator Expenses** Classroom expenses for K thru 12 educators may qualify for a special above the line deduction up to \$250.

Total Classroom Expenses (keep receipts)	\$	Grade level taught	
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**Y. SMALL BUSINESS—SELF EMPLOYED—1099-MISC. INCOME\***

*Includes acting & modeling income. Send last year's return if you had the business and we did not prepare the return for you.*

Name of Business:	Type of Business:
Taxpayer Name:	Taxpayer SSN: <span style="float:right;">EIN:</span>
<i>Note: If you are incorporated, please download the Corporate Organizer or submit your K-1.</i>	
1099 Income (provide any 1099's) \$	<b>+</b> Additional Income not reported on 1099 \$
<b>= Total Gross Income \$</b>	

**Expenses**

Advertising	\$	Rent (outside of home)	\$	Dues & Publications	\$
Business Insurance (not health)	\$	Repairs & Maintenance	\$	Postage & Shipping	\$
Contract Labor	\$	Supplies	\$	Telephone/Internet Services	\$
<b>Taxpayer Responsibility:</b> <i>You must file a 1099-Misc. for each Contract Laborer paid more than \$600.</i>		Taxes (Not Estimated Payments)	\$	Bank Charges	\$
		Travel	\$	Self Employed Health Insurance	\$
Interest: Mortgage	\$	Entertainment	\$	Other (specify)	\$
Other Interest	\$	Meals	\$	Equipment Purchases (complete information below)	
Legal & Professional Fees	\$	Utilities (outside of home)	\$	Date you started your business	

List Equipment Purchased in 2023	Date Purchased	Placed in Service	Cost
			\$
			\$
			\$
			\$
			\$

**Inventory** *If you purchase goods to have available for resale or you manufacture goods for resale in your business, you may carry an inventory. Beginning inventory should be the same as ending inventory for the previous tax year. Please include, in the cost of inventory purchased during the year, only the cost of materials and supplies which became a part of the product which you sell. All other materials and supplies related to your business should be listed separately in the categories above.*

Inventory at beginning of year. If different from last year's closing inventory, attach explanation. <b>Provide Cost, not Retail Amount.</b>	\$
Inventory purchased during the year—less the cost of items withdrawn for personal use.	\$
Inventory at the end of the year.	\$

**Vehicle Expense** *Please answer ALL questions below! The IRS requires written evidence of business miles to qualify for the deduction!*

Type & Year of Vehicle:	Miles Driven for Business Jan. 1–June 30	mi.
Date First Used for Business	Miles Driven for Business July 1–Dec. 31	mi.
Do you have another car for personal use? <input type="checkbox"/> Yes <input type="checkbox"/> No	Miles Driven for Commuting Jan. 1–June 30	mi.
Do you have evidence to support the deduction? <input type="checkbox"/> Yes <input type="checkbox"/> No	Miles Driven for Commuting July 1–Dec. 31	mi.
Is this evidence written? <input type="checkbox"/> Yes <input type="checkbox"/> No	Were you reimbursed or paid for any of your vehicle expenses?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Miles Driven for Personal Jan. 1–Dec. 31	If yes, what was the amount?	\$

**Home Office** *Must be used exclusively and regularly for business.*

Square Footage of Home	sq./ft	Cost of Utilities during 2023 (excluding water)	\$
Square Footage of Space/Room Used	sq./ft	Amount of Rent Paid per Month	\$
Lesser of Purchase Price of Home or Fair Market Value	\$	Insurance—Homeowners/Renters	\$
Months Office was in Home during 2023		Other—Specify	\$

**Small Business Comments and Other Expenses**

*Estimated Tax Payments should be included in Section C.*

**Z. RENTAL INCOME AND EXPENSE\***

*If you have more than three properties, download additional form from [www.intaxinc.com](http://www.intaxinc.com). Use yearly totals below! Send last year's tax return with this organizer if International Taxes Inc did not prepare your return. If you own only a portion of the property or only a portion is rented out, please include only the amounts that apply.*

	Property 1		Property 2		Property 3	
Date First Used as a Rental						
Lesser of Purchase Price of Home or Fair Market Value	\$		\$		\$	
Ownership %	%		%		%	
Type of Property						
Street Address of Property						
City, State						
Total Rent Received in 2023	\$		\$		\$	
Annual Expenses	Property 1		Property 2		Property 3	
Advertising	\$		\$		\$	
Travel / Hotel Expense	\$		\$		\$	
Cleaning / Maintenance	\$		\$		\$	
Commissions	\$		\$		\$	
Insurance	\$		\$		\$	
Legal / Professional Fees	\$		\$		\$	
Management Fees	\$		\$		\$	
Mortgage Interest	\$		\$		\$	
Real Estate Tax	\$		\$		\$	
Supplies	\$		\$		\$	
Repairs <i>If total exceeds \$1,000—please provide itemized list</i>	\$		\$		\$	
Utilities	\$		\$		\$	
Telephone	\$		\$		\$	
Condo / HOA Fees	\$		\$		\$	
Lawn Care	\$		\$		\$	
Bank Fees	\$		\$		\$	
Personal Auto Miles Driven for Rental Activity		mi.		mi.		mi.
Other—Specify:	\$		\$		\$	

**List Furniture & Equipment Purchased and Major Improvements made in 2023 (not included above)**

Description of Purchase/Major Improvement <i>Do not include routine maintenance or minor repair items.</i>	Property 1		Property 2		Property 3	
	Cost	Purchase/Improvement Date	Cost	Purchase/Improvement Date	Cost	Purchase/Improvement Date
	\$		\$		\$	
	\$		\$		\$	
	\$		\$		\$	

Important Questions	Property 1	Property 2	Property 3
Enter the number of months that this property was rented this year.			
Enter the number of months that this property was available for rent this year.			
List the number of days each property was used for personal use.			
If you do not have full ownership, do these amounts reflect your share of income and expenses?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Did you pay anyone a fee to manage this property for you this year?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you actively participate in the management of this property?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, did you maintain a log of the number of hours that you personally worked on this property during this year?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Is the average rental period/lease for the property 7 days or less?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

**Sale of Rental Property** *New clients should send prior year tax returns where the property was claimed as a rental.*

Date of Original Purchase <i>(Must provide copy of settlement/closing statement)</i>			
Date of Sale <i>(Must provide copy of settlement/closing statement)</i>			
Did you receive a 1099-C for this property? <i>(If yes, you must provide copy of the 1099-C)</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

**Vehicle Expense** *Must answer ALL questions and have written evidence as required by the IRS to qualify for this deduction.*

Type and Year of Vehicle:	Date First Used for Rental Activity	
Total Miles Driven for Personal	mi.	Do you have evidence to support the deduction? <input type="checkbox"/> Yes <input type="checkbox"/> No
Total Miles Driven for Rental Activity—All Properties	mi.	Is the evidence written? <input type="checkbox"/> Yes <input type="checkbox"/> No
Rental Car Expenses (rental fee & gas), please total them here and do not include the mileage above!		\$

**Rental Comments and Other Expenses**

## LOCAL ISSUES—Residents of OH only

**ATTENTION OHIO RESIDENTS:** We will prepare your Ohio state and school district return, where appropriate; however, **we will not prepare** any local or municipality returns (RITA, CCA, COL, CIN, etc.).

## LOCAL ISSUES—Residents of DE, MI, MO and PA only

**ATTENTION RESIDENTS OF DE, MI, MO, and PA:** Clients with local returns must be received by March 1st. If you want International Taxes Inc to prepare your city return, please complete the section below and provide the proper form or earnings statement required by the taxing location. Local tax paid with the filing of your return last year should be entered under Important Questions on page 2. **Please send instructions with forms to be completed.** (No additional forms for NYC are required.)

Do you want International Taxes Inc to prepare your local earnings or income tax return? <i>(If yes, provide tax form.)</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No
Name of Locality:	
Did you pay any estimated tax to your locality during 2023? <i>(Do not include amounts withheld on your W-2.)</i>	\$

### STATE SPECIFIC ISSUES—Residence State Only

**If you are eligible for a state credit or deduction not listed, please let us know.**

<b>AK</b>	Did you, your spouse, or dependent receive an AK Permanent Fund Dividend? <i>(If yes, please send statements)</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No	\$
<b>CA</b>	Carryover of prior year Solar Energy Equipment Credit.		\$
<b>CT</b>	Residents—Need Date Paid and Amount Paid on Home and Auto Property Tax. <i>(Maximum total credit is \$300)</i>		
	<b>Property</b>	<b>Date Paid</b>	<b>Amount Paid</b>
	<b>Property</b>	<b>Date Paid</b>	<b>Amount Paid</b>
	<b>Home</b>		\$
	<b>Auto 1</b>		\$
	<b>Auto 2</b>		\$
<b>DE</b>	Clothing or other expenses incurred for the active volunteer firefighter.		\$
<b>GA</b>	Amount spent on home care services for person(s) over 62 years old.		\$
<b>HI</b>	Cost of child restraint seat purchased during 2023.		
<b>ID</b>	Cost of insulation installed in primary residence during 2023. <i>(Home must have been built or started prior to 1/1/02.)</i>		\$
<b>IL</b>	Property owners provide PIN #. <i>(PIN=Property Index Number on Property Tax Statement)</i>		
<b>IN</b>	Insulation Installed <i>(include store where purchased, date of purchase and installation, and cost)</i>	<b>Where Purchased</b>	<b>Purchase Date</b>
		<b>Install Date</b>	<b>Amount Paid</b>
			\$
			years
<b>LA</b>	Provide copy of homeowner's or property's insurance declaration page showing the separate line item charges for LA Citizens assessments not already claimed.		\$
<b>MA</b>	Please provide qualified commuter expenses <i>(public transportation only)</i> .		\$
	Please provide Form 1099-HC. This form is required to claim health coverage exemption and avoid penalty.		
<b>MI</b>	Provide the property tax statement showing 2023 taxable value of your home.		\$
<b>MN</b>	Send statement of property taxes " <b>payable in 2023</b> ". You should receive this statement in March of 2023.		
<b>MT</b>	Contributions to First Time Homebuyers Savings Account		\$
<b>NH</b>	If you have interest/dividends in excess of \$2400, do you want International Taxes Inc to prepare your state return?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>OH</b>	Amount of job training expenses incurred during 12 months after employment layoff.		\$
<b>TN</b>	If you have interest/dividends in excess of \$1250 (single) or \$2500 (MFJ), do you want International Taxes Inc to prepare your state return?	<input type="checkbox"/> Yes <input type="checkbox"/> No	

**RENTER'S CREDIT**

If you paid rent at your TAX ADDRESS during year 2023, and it is in IN, MA, MI, MN, NJ, WI, or CA or a state with a renter's credit, complete the following section. MN residents send us your Certificate of Rent Paid (CRP).

Landlord's Name:		Landlord's Phone Number:	
Landlord's Address:			
Total Monthly Rent	\$	# of Months Rented:	Your Portion of Monthly Rent \$
Apartment Address:			
<b>NJ Residents</b> —Do you have a roommate? If yes, roommate's name:		Roommate's SSN:	
NJ Roommate's Number of Months Rented	mos.	NJ Roommate's Monthly Rent	\$

Note: For NJ residents to qualify for the credit, all roommate information must be provided.

**K-12 EDUCATION CREDITS**

**K-12 Education Credits for AZ, IL, IN, IA, LA, MN & WI** See state specific qualified expenses below. Keep all related receipts!

Name of Student	Grade	Qualified Expenses	Name of School	Address	State	Zip
		\$				
		\$				
		\$				
		\$				
		\$				

- Arizona** Only fees or donations to a public or charter school located in Arizona, for extracurricular activities or character education programs qualify. Expenses in excess of the \$250 maximum credit may be carried forward.
- Illinois** Fees, book rental, band or lab equipment rental, or tuition paid directly to public, private or religious schools qualify (*must be over \$250*).
- Indiana** List children enrolled in non-public private, parochial or home school for grades K-12.
- Iowa** Fees for tuition and textbooks to an Iowa accredited not-for-profit school. Some extracurricular expenses qualify, such as activity/club fees or dues, fees to participate in school sports, etc.
- Louisiana** Expenses for required school uniforms, tuition, fees, textbooks, curricula, instructional materials and educational supplies.
- Minnesota** Tuition and fees paid to public or private schools. Other education supplies including up to \$400 for the purchase of a home computer and educational software.
- Wisconsin** Fees for tuition and textbooks paid to a private school. Tuition **does not** include amounts paid with a voucher or amounts paid as a separate charge for other items or fees.

**EDUCATION SAVINGS ACCOUNTS**

You must provide the end of the year statement for all plans.

Education Savings Plans Only list contributions made on or before 12/31/15	Account Number	Beneficiary/Student	Amount
Contributions to Coverdell Education Savings Plan			\$
Contributions to Coverdell Education Savings Plan			\$
Contributions to State College Savings 529 Plan	St. Plan Name:		\$
Contributions to State Prepaid Tuition Program	St. Plan Name:		\$

Some states may allow carryover of credits for Education Savings Plans. If you are a new client, please provide prior year state return.

**ADDITIONAL COMMENTS**

# PROFESSIONAL DEDUCTIONS

## Uniform Items Purchased

Enter the total amount of payroll deducted uniform items. For most airlines, this amount can be found on the last pay check stub of the year.

\$

Enter additional "out of pocket" uniform expenses below. Do not include items provided by the company through replacement programs. You need a receipt for each item purchased, regardless of the amount. The \$75 rule does not apply as this is not a travel related deduction. Uniform items must have a company insignia or logo; no type of "street" clothes qualify for this deduction.

Uniform Items	Amount
Uniform Belt	\$
Uniform Dress	\$
Uniform Epaulets	\$
Uniform Jacket	\$
Uniform Hat	\$
Uniform Maternity Dress	\$
Uniform Pants	\$
Uniform Purse	\$
Uniform Scarf	\$
Uniform Serving Garment/Apron	\$
Uniform Shirt	\$
Uniform Skirt	\$
Uniform Sweater	\$
Uniform Tie	\$
Uniform Winter Coat, Gloves, Cap	\$

Uniform Shoes (must be purchased from a Uniform Store)	Amount
Uniform Shoes	\$
Shoe Repair	\$
Shoe Shine	\$

Support Hose (medical deduction)	Amount
Number of Pair used per Month	
Amount Per Pair	\$

Uniform Maintenance	Amount
Uniform Alterations	yearly amount \$
Home Laundering	monthly amount \$
Laundering	monthly amount \$
Dry Cleaning	monthly amount \$

<b>Airline Reimbursement Amount</b>	\$
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If you were reimbursed for any of your uniform maintenance expenses such as alterations or dry cleaning, do not include these amounts. We cannot take a deduction for any expense for which you were reimbursed. IRS regulations go even a little further. We cannot take a deduction for any expense for which you COULD have been reimbursed. For example: if your airline will reimburse you for your uniform alteration expenses but you just did not get around to submitting your receipts for reimbursement. The IRS will not allow this expense as a deduction because you 'could' have been reimbursed. Thus, do not include any expenses for which you were reimbursed, or any expenses for which you could have been reimbursed, but were not.



Please be aware that you, as the taxpayer, are responsible for keeping all evidence and support of all items reported on your tax return (flight schedules, log book, receipts, wage forms, and all other support) for a period of at least five years.

## Transportation Expenses

### Layover Transportation

Transportation between places of lodging and places where meals are taken, are included in the "Incidental Expenses" portion of your per diem; therefore, no separate deduction is allowed. See IRS Pub. 463

Satellite/Co-Terminal Transportation	Amount
Three Letter Airport Code	
Number of Round Trips Per Year	
Cost Per Round Trip or Mileage Driven	
Three Letter Airport Code	
Number of Round Trips Per Year	
Cost Per Round Trip or Mileage Driven	

If you cover more than one airport, transportation between your base (company mailbox) and another airport is deductible. Do not include expenses for transportation to your base (company mailbox) or home.

Other Related Expenses	Amount
Airport Parking Expense	\$
Reserve Emergency Cab Fares	\$

## Computer & Related Expenses

**Computers are not deductible.** The IRS has issued a Letter Ruling (#8615024 & Bryant, U.S. Ct. App. 3rd cir. 74 AFTR2d 94-5440) disallowing a deduction for home computers. The ruling states... "Despite legitimate business use, employees generally may not write off the cost of their computer. By law, a computer must be used for the convenience of the employer and required as a **condition of employment.**" In private rulings, the IRS ruled an individual may not claim depreciation when the purchase of a computer is optional and not absolutely required by their employer as a condition of employment. All airlines provide computers for their employees to use. Although they are a huge asset to our jobs, the airline does not require that we have a personal computer or laptop.

Printer/Software Deductions	Amount
Yearly Cost of Paper for Company Usage	\$
Yearly Cost of Toner/Ink Cartridges for Company Usage	\$
Bidding Computer Software	\$
Trip Trading Computer Software	\$

Internet/Online Services	Amount
Airline Schedule Service Fees	\$
Yearly Cost of Home Internet Access Fees, DSL, Cable, Aircard, VoIP, Skype	\$
Yearly Cost of Hotel Access Fees (paid while on layovers)	\$

## Travel/Required Items

Your profession requires you to have specific items for travel and to perform your job in areas of service and safety. Enter the expense below for the items you have purchased during the applicable tax year. Receipts are required for items priced over \$75 each. If you purchase an item that is under \$75 you need to make a record of that purchase in your log book or on your schedule. **You must have documentation, either a receipt or log book/schedule entry, for each item you list below.**

Travel Related Expenses	Monthly Amount	Yearly Amount	Safety and Professional Items	Amount
Tips to Hotel Van Drivers	\$	\$	Portable Security Device	\$
ATM Fees (while on layovers)	\$	\$	Portable Smoke Detector	\$
Check Cashing Fees (while on layovers)	\$	\$	International Voltage Converter	\$
Safety and Professional Items			Amount	
Luggage Items (wheels, repairs, locks, lunch bag)		\$	International Currency Converter	\$
Garment Bag		\$	Manual Replacement	\$
Luggage Tags		\$	Update and Revision Services	\$
Name Tags (lanyard, badge holder)		\$	ID Replacement	\$
Wings		\$	Company Business Cards	\$
Watch Battery/Repair Expenses		\$	Foreign Visa Expense	\$
Airline Access Keys		\$	Global Entry Fee	\$
Personal Organizer		\$	Passport Fee	\$
Logbook		\$	Passport Photo Expense	\$
Galley Supplies (corkscrew, can opener, tape, etc.)		\$	Professional Publications	\$
Flashlight		\$	Bid Service Fees	\$
Batteries		\$	Trading Service Fees	\$
Portable Alarm Clock		\$	If you pay a service to trade your trips or rearrange your schedule, these fees may be deductible. In order for you to deduct this expense, you must pick up trips of higher time or end up with a line of higher time or greater paying trips. If you trade from domestic to international, this would qualify since international pays more per hour than domestic. If you trade from an aisle position to a galley position at some airlines, this also qualifies since this position has a higher per hour pay.  If you drop your trips and don't fly a full schedule, your trading fees generally are not deductible. If you have any questions, please contact us at 305-229-2710.	
Portable Curling Iron		\$		
Portable Hair Dryer		\$	2nd Language Education Expense	\$
Portable Iron		\$	Drug Testing Fees	\$

## Communications

Your profession requires you to keep in touch with your employer, your fellow flight attendants and crew scheduling. We can take a portion of your cell phone expenses for business related calls. Provide your expenses in the area below.

Cell Phone	Yearly Amount	Calling Card	Amount
Cell Phone Purchase (your phone only)	\$	Direct Bill Calling Card	per month \$
Cell Phone Base Charge per Month (single line)	\$	International Prepaid Calling Card	per month \$
% Airline Business Usage per Month: Choose One: <input type="checkbox"/> 40% <input type="checkbox"/> 50% <input type="checkbox"/> 60% <input type="checkbox"/> Other _____ %		If you fly domestic and don't have a cell phone (yes, it does happen) or are flying international and do not have international service on your cell, the amount you place on a calling card or prepaid calling card is deductible under the same qualifications as your cell phone.  Please provide the monthly or yearly dollar amount on your business/layover usage calls.	
Additional Communication Expenses			Amount
Company Fax Expense			\$
Company Copy Expense			\$
Company Mailing Expense			\$
Company Overnight Expense			\$
If you have any expenses related to required communication between you and the company or the union, these expenses are deductible. If you are required to fax a copy of a doctor's note to your supervisor and Kinko's charges you to do this, make sure you save the receipt or put it on a credit card. Enter any expenses for copying, faxing or mailing in these specific entry areas.			

## Temporary Duty/Special Assignment

If you are on Temporary Duty assigned by the company for any reason, your related expenses may be deductible. The IRS defines Temporary Duty as any assignment that has an expected completion date of less than one year. If your assignment is greater than one year, you do not qualify for this deduction.

You may also qualify for some very substantial deductions if you are on a special assignment away from your base. For example, if you are based in New York and accept a training position in Dallas; your housing, meal and transportation expenses are all deductible (assuming these expenses are not provided by the airline).

Do NOT enter any TDY or SPA days that are on your schedule. If you are providing your schedules to us or using our online per diem calculator, we/you will include these dates and locations in your schedule per diem calculations. Only enter days below that are NOT included on your flight schedule.

Temporary Duty/Special Assignment Expenses	Entry
Number of Days on TDY at Location <i>Do not include any days that you had scheduled flying, this deduction will be taken in the per diem section.</i>	
From: Three Letter City Code of TDY Location To:	
Number of Days on TDY at 2nd Location	
From: Three Letter City Code of 2nd TDY Location To:	
Local Transportation Expense <i>(rental car, public transportation, etc.)</i>	\$
Were you provided housing for your TDY?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If no, enter cost of housing during TDY.	\$
Commuting Expense during TDY	\$
Utility Expense during TDY	\$
Local/Long Distance Phone Usage during TDY	\$
If you drove to the TDY location and used your car while on assignment, enter the total miles driven from departure until your return.	mi.
Purpose of TDY?	

## Union Expenses

As a unionized employee, your union dues, initiation fee and any union publications are all deductible. If you actually work for the union as a union rep. or direct employee, you will have additional deductions.

Union Expenses	Amount
Union Dues <i>(amount actually paid during year)</i>	\$
Union Initiation Fees	\$
Union Publications	\$
Travel Expense for Union Meetings/Events	\$



**Remember!** Amounts are annual totals unless otherwise specified.

## Training

Your job requires, at a minimum, yearly training per the FAA. You are allowed to take a per diem deduction for each day that you spend in training. For example, if you have training in Atlanta, you are allowed a deduction of \$52 for each day you are in Atlanta for training. We are, however, required to subtract the amount of per diem that your airline paid you for your time in training.

If you are based where your training is held, you are NOT allowed to take a per diem deduction for training. As in the example above, if you are based in Atlanta, you are not eligible for this deduction.

An easy way to determine this deduction, in general, if your airline pays you a per diem for your meal expenses during training, you are able to take the per diem deduction based on the city of training. If you are not paid a per diem (excluding initial training) you generally will not qualify for this deduction.

You may also have additional expenses for your time in training. Transportation expenses, housing, cell phone, etc. We have done our best to break down each type of training below for you to benefit from this deduction.

Initial Training	Entry
Number of Days you were in Initial Training	
Three Letter City Code of Training Location	
Days Spent in Initial Training at a Different Location	
Three Letter City Code of 2nd Training Location	
Date Initial Training Started	
Date Initial Training Ended	
Amount of Per Diem Paid for Training <i>(if not included in yearly amount provided by your airline)</i>	\$
Hotel Expense while in Initial Training	\$
Transportation Expense while in Initial Training	\$
Phone Expense while in Initial Training	\$

Recurrent/Upgrade Training	Entry
Number of Days you were in Training	
Three Letter City Code of Training Location	
Days Spent in Training at a Different Location	
Three Letter City Code of 2nd Training Location	
Hotel Expense if not Provided by Airline	\$
Transportation Expense while at Training	\$

# Job Search

Due to the instability of the airline industry, more and more of our clients are having job search related expenses. Your cost of finding a job within the airline industry is deductible. What does this mean? The job search expenses of finding another position within the same industry are deductible, the job search expenses of looking outside of the airline industry are NOT deductible.

This is one of those IRS regulations that sometimes does not make sense. If you are a flight attendant and update your resume or fly to an interview, these expenses are deductible. If you do the same for another position outside of the industry, such as a retail position or professional job, these expenses may not be taken as a deduction.

Several of our clients have requested a deduction for the purchase of a new suit or professional attire for the interviewing process. Although this is an additional expense to you, it is not a recognized deduction by the IRS. The only type of clothing that is deductible is that which has a company logo or insignia, such as a uniform.

Qualified Job Search Expense	Amount	Qualified Job Search Expense	Amount
Resume Expenses	\$	Airfare for Interview	\$
Fax/Postage/Overnight Delivery	\$	Airfare for Physical	\$
Airline Job Placement Services	\$	Hotel Expense for Interview	\$
Application Fees	\$	Hotel Expense for Physical	\$
Simulator Prep Time for Interview	\$	If you drove to your interview or physical, list the total miles driven round trip for all.	mi.

## Foreign Domicile\*

**This form is for United Airlines Flight Attendants only!** If you have other sources of foreign earned income, please refer to the Foreign Income Worksheet.

If you were based at a foreign domicile for any part of 2023 you have a couple of options in filing your income tax return. You can receive a credit for any taxes that you have paid to a foreign country and/or you may qualify to claim a Foreign Income Exclusion for a portion of the income you earned. Chances are you will be able to take advantage of both of these situations to reduce your tax obligation to the US.

**Foreign Tax Credit:** If you pay income tax to another country, you may take a credit of this tax towards your US obligation. If

you were based in the UK we will need the December 15th paystub showing London PAYE tax paid (US dollars) to determine the amount of foreign tax paid for the year.

**Foreign Income Exclusion:** The IRS allows you to exclude income earned while on or flying over foreign soil. Income earned while flying over international waters or the US is tax as earned in the US. In order to exclude the foreign portion of your earned income, you must qualify as a Bona Fide Resident of a foreign country. To qualify, you must be out of the U.S. for one complete calendar year—January 1 to January 1. For example, if you were not based in LHR until July of 2023, you will not be able to file your 2023 Federal Income Tax Return until January 1 of 2017. Your qualifying period to meet the Bona Fide Residency Test is January 1, 2023 to January 1, 2022 You will need to file a special

extension until this qualification can be met - which we can file for you. You do not have to be based in the same foreign country to meet this qualification, just out of the U.S. In order to claim the income exclusion you must also pay income tax to the foreign country where you claim residency - if that country requires you to do so.

**Duty Time Apportionment:** If you qualify as a Bona Fide resident of a foreign country, we will have to calculate the amount of income that is taxable to the US by a process called Duty Time Apportionment. We must have a copy of your Year End Audit Report providing the number of trips and each destination.

Our base fee for a Foreign Income return is \$299 (income exclusion only) and \$329 (income exclusion and foreign tax credit).

Address	City	Country	Postal Code	Date Established
Foreign Address:				
Prior Foreign Address(es):				
Foreign Employer Address:				

*Note: Your foreign address will be used on the tax return unless your residency ended after January 1 of this year.*

Have you ever filed form 2555 to claim the foreign income earned income exclusion? If yes, what year: <input type="checkbox"/> Yes <input type="checkbox"/> No Date Foreign Residence Began: _____ Date Foreign Residence Ended: _____ Principal Country of Employment: _____ Of What Country are you a Citizen/National? _____ Do you own or rent your foreign abode? <input type="checkbox"/> Own <input type="checkbox"/> Rent Type of Visa Issued to you? _____ Have you submitted a statement to the authorities of the foreign country where you claim bona fide residence that you are not a resident of that country? <input type="checkbox"/> Yes <input type="checkbox"/> No Are you required to pay income tax to the country where you claim bona fide residence? <i>If a foreign Income Tax Return was filed, please provide a copy with the relevant information translated to English.</i> <input type="checkbox"/> Yes <input type="checkbox"/> No Total Foreign Tax Paid Jan. 1–Dec. 31 of 2023 (In U.S. Dollars) _____	At any time during 2023, did you have an interest in, or a signature or other authority over a financial account foreign country, such as a bank account, securities account or other financial account? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, Country name required: _____ If yes, did the combined value of these accounts exceed \$10,000 at any time during 2016? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, did this amount exceed \$50,000 at the end of 2023 or surpass a value of \$75,000 anytime during the year? <i>If yes you are required to file Form 8938 as part of your tax return.</i> <input type="checkbox"/> Yes <input type="checkbox"/> No If family members lived abroad with you during the tax year, please list relationship (spouse, child, etc.) and duration (all year, 6 mos., etc.) for each.
---	--

### U.S. RESIDENCE INFORMATION (Home maintained in the U.S. while abroad)

Did you maintain a home in the U.S. while abroad? <input type="checkbox"/> Yes <input type="checkbox"/> No	Street Address		
Name of Current Occupant	Relationship	City	
Is the property rented? <input type="checkbox"/> Yes <input type="checkbox"/> No	State	Zip	

## Commuter Pad Moving Expense

If you transferred bases but did not move your primary home, these expenses are considered a professional deduction versus a moving deduction. If you had any expenses related to moving your crash pad or airport car from one base to another, list these expenses below. You must have receipts!

If you changed your tax address and had a full blown move, complete the section in the Organizer for moving expenses.

Commuter Pad Moving Expenses	Entry
Old Base	
New Base	
Distance Driven to Transport Belongings/Vehicle	mi.
Date Moved	
Travel Expense	\$
Shipping Expense	\$
Lodging Expense (only while in transit)	\$



**Remember!** Keep your receipts at all times, even if the item is less than \$75—this will help us in the case of an audit. The IRS will not accept cancelled checks or credit card statements as receipts.

## Military Worksheet

Branch of Military & Rank:

Are you Active Duty?  Reservist?  National Guard?

1st Post of Duty: Three Letter Code:

2nd Post of Duty: Three Letter Code:

Number of miles from Home to 1st Post: 2nd Post:

### Reservist

Travel expenses related to your Reservist Activities are deductible. This deduction includes meals, lodging and transportation expense, and is based on the rates applied to federal employees. If you travel over 100 miles from your post of duty, you are no longer required to itemize your deductions in order to receive this benefit, as these expenses are now deducted on the front of the tax return. If you travel 100 miles or less, your deduction will be taken as itemized deductions.

	1st Post	2nd Post
Number of Nights Spent at Post From: To:		
Number of round trips <i>driven</i> to/from Post		
Did the military provide housing?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Hotel/Housing Expense Paid by You	\$	\$
Miles driven while at post in personal car	mi.	mi.
Rental Car Expense	\$	\$
Were you paid a per diem?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
What was the total per diem paid?	\$	\$

### General Military Deductions Do not include airline expenses.

Dress Uniform Purchase	\$
Dress Uniform Shoes	\$
Uniform Accompaniments	\$

### General Military Deductions Do not include airline expenses.

Subscriptions to Military Related Publications	\$
Professional Dues	\$
Job Related Training	\$
Personal Organizer	\$
Log Book	\$
Foreign Visa	\$
Passport Fee	\$
Passport Photo	\$
Uniform Maintenance:	
Home Laundering Expense	\$
Professional Laundering Expense	\$
Dry Cleaning Expense	\$
Shoe Shine/Supplies	\$
Military Business Cards	\$
Military Copy/Fax Expense	\$
Military Mailing Expense	\$
Military Phone Expense	\$
Office Supplies	\$
Misc. (specify)	\$



You may see us in your company publication, on the internet or on your pay check stub...but nothing is as effective as you telling your friends about International Taxes Inc! To say "thank you" we will give you a referral reward of \$25.00 for each person you refer.

And they don't have to be Flight Attendants, our sister company Pilot-Tax will process your Pilot Referrals.

# PER DIEM DEDUCTION INFORMATION

The government allows a deduction for each day that you are away from base. The IRS states that you can either itemize each layover city or you may take a standard rate per day. It is to your advantage to provide your schedules so your per diem allowance can be calculated based on your specific flying. The IRS will not allow a mix of schedules and days flown! All schedules must include three-letter layover city codes, dates and times of each trip.

**Provide all 12 months of Flight Schedules** —OR—  **complete the Log Book Grid**

<b>PER DIEM PAID</b>	<b>We must have the non-taxable per diem amount you were paid!</b> This amount may be found on your W-2 next to the letter "L", or on your last pay stub of the year. <b>If you can't locate it, contact your employer for this required amount.</b>		\$
<b>MONTHS FLOWN</b>	Total Months Flown	months	Did you fly <input type="checkbox"/> Domestic <input type="checkbox"/> International <input type="checkbox"/> Both
	Did you fly for more than one airline during the year? <input type="checkbox"/> Yes <input type="checkbox"/> No <i>If yes, provide schedules, last pay stub and W-2's for each airline.</i>		
	For any month during the year in which you were eligible to fly but did not, please explain. <i>(examples: Retired in May, Off work April to August due to reserve activity, Began Maternity Leave in November)</i>		
<b>BASE LOCATION</b>	Base at Start of 2023:	Transfer Date:	Base at End of 2023:

## Provide Schedules

Provide all 12 months of schedules as indicated below by airline. If your airline is not listed, provide schedules which include the required information of three-letter layover city codes, dates and times of each trip. Call our office if you have any questions.

<b>AMERICAN</b>	We have created an account with <a href="http://www.pro-diem.com">www.pro-diem.com</a> , you can go to their webpage and download your perdiem.
	Comments:
<b>US AIRWAYS</b>	We have created an account with <a href="http://www.pro-diem.com">www.pro-diem.com</a> , you can go to their webpage and download your perdiem.
	Comments:
<b>DELTA</b>	We have created an account with <a href="http://www.pro-diem.com">www.pro-diem.com</a> , you can go to their webpage and download your perdiem.
	Comments:
<b>UNITED</b>	We have created an account with <a href="http://www.pro-diem.com">www.pro-diem.com</a> , you can go to their webpage and download your perdiem.
	Comments:
<b>WORLD AIRWAYS</b>	We have created an account with <a href="http://www.pro-diem.com">www.pro-diem.com</a> , you can go to their webpage and download your perdiem.
	Comments:
<b>CHAUTAUQUA, COMPASS, FREEDOM, FRONTIER, GO-JET, JETBLUE, MESA, REPUBLIC, SHUTTLE AMERICA, SPIRIT, TRANS STATES</b>	We have created an account with <a href="http://www.pro-diem.com">www.pro-diem.com</a> , you can go to their webpage and download your perdiem.
	Comments:
Comments:	

Base: \_\_\_\_\_ Airline: \_\_\_\_\_ Name: \_\_\_\_\_

January	February	March	April	May	June	July	August	September	October	November	December
1	1	1	1	1	1	1	1	1	1	1	1
2	2	2	2	2	2	2	2	2	2	2	2
3	3	3	3	3	3	3	3	3	3	3	3
4	4	4	4	4	4	4	4	4	4	4	4
5	5	5	5	5	5	5	5	5	5	5	5
6	6	6	6	6	6	6	6	6	6	6	6
7	7	7	7	7	7	7	7	7	7	7	7
8	8	8	8	8	8	8	8	8	8	8	8
9	9	9	9	9	9	9	9	9	9	9	9
10	10	10	10	10	10	10	10	10	10	10	10
11	11	11	11	11	11	11	11	11	11	11	11
12	12	12	12	12	12	12	12	12	12	12	12
13	13	13	13	13	13	13	13	13	13	13	13
14	14	14	14	14	14	14	14	14	14	14	14
15	15	15	15	15	15	15	15	15	15	15	15
16	16	16	16	16	16	16	16	16	16	16	16
17	17	17	17	17	17	17	17	17	17	17	17
18	18	18	18	18	18	18	18	18	18	18	18
19	19	19	19	19	19	19	19	19	19	19	19
20	20	20	20	20	20	20	20	20	20	20	20
21	21	21	21	21	21	21	21	21	21	21	21
22	22	22	22	22	22	22	22	22	22	22	22
23	23	23	23	23	23	23	23	23	23	23	23
24	24	24	24	24	24	24	24	24	24	24	24
25	25	25	25	25	25	25	25	25	25	25	25
26	26	26	26	26	26	26	26	26	26	26	26
27	27	27	27	27	27	27	27	27	27	27	27
28	28	28	28	28	28	28	28	28	28	28	28
29		29	29	29	29	29	29	29	29	29	29
30		30	30	30	30	30	30	30	30	30	30
31		31		31		31	31		31		31

Base: **JFK** Airline: **WORLD AIRWAYS** Name: **JA**

January	February	March	April	May	June	July
1	1	1	1 LAX	1	1	1 HON
2 LAX	2	2 SFO	2 HOU	2	2	2
3 HOU	3 MXP	3 DFW	3 HOME	3	3 MXP	3
		4 ORD	4	4 SFO	4 MXP	4 NRT

**Only complete this schedule if you do not have your actual monthly schedules.**  
 We have made this schedule easier for you to complete—we only need your layover cities entered on the day of each layover. When your trip has ended, write HOME on the day you returned to base. See the example at right.

**Transfer Schedule from Log Book**



# PRICING INFORMATION

**\$30 processing fee for all Organizers postmarked after March 1st!**  
**An Extension will be filed for all returns received after March 15th.**

Item	Form #	Price	Item	Form #	Price
Federal Long Form—Sch. A, First 2106	1040	\$165	Foreign Income Exclusion/Bona Fide Resident	2555	\$70
First State Return		\$30	Foreign Source Income Calculation		\$70
Additional State Return(s)		\$40 each	Foreign Tax Credit	1116	\$30
State w/Filing Status Change		\$50 each	Foreign Financial Asset (1st Account)	8938	\$30
Domestic Partner State		\$60	Foreign Financial Asset (Each Additional)	8938	\$10
Premium Tax Credit	8962	\$20	Health Insurance Credit	8885	\$30
Health Coverage Exemptions	8965	\$30	Injured Spouse/Innocent Spouse	8379/8857	\$30
<b>Additional Forms</b>			Installment Gain	6252	\$50
Local Tax Return		\$50 each	Interest & Dividend Income over \$1500	Sch. B	\$30
Joint Return		\$10	Investment Interest Expense	4952	\$20
Standard Return (Non E-File)		\$20	Investment Tax—Children Under 18	8615	\$40
W-2's in excess of 2 per Taxpayer		\$3 each	Mortgage Interest Credit	8396	\$20
1099 Retirement—Tax and Penalty	5329	\$30	Moving Expense	3903	\$30
Additional Child Tax Credit	8812	\$10	Net Operating Loss	1045	\$100
Alternative Minimum Tax	6251	\$30	Non Cash Contributions	8283	\$30
Alternative Motor Vehicle Credit	8910	\$30	Non Deductible IRA	8606	\$30
Business Use of Home	8829	\$30	Parents Reporting of Childs Income	8814	\$40
Capital Gains & Losses (see note below)	Sch. D	\$20*	Partnerships & S Corporations	K-1	\$30
Sale of Capital Assets		*see below	Passive Activity Loss	8582	\$30
Casualty Loss and/or Theft	4684	\$50	Prior Year Minimum Tax Credit	8801	\$30
Child Care Credit	2441	\$40	Reduction of Tax Attributes	982	\$50
Contract & Straddles	6781	\$50	Rental Property (price per property)	Sch. E	\$50
First Time Home Buyers Credit/Recapture	5405/8859	\$30	Rental Property (New—first time reporting)	Sch. E	\$80
Depreciation Worksheet		\$10 each	Retirement Savings Credit	8880	\$10
Earned Income Credit	Sch. EIC	\$30	Sale of Business Assets	4797	\$80
Education Credits or Deductions	8863/1040	\$30	Self Employment Tax	Sch. SE	\$20
Employee Business Expense Form	2106	\$30	Small Business/Self Employment Income	Sch. CEZ	\$30 each
Energy Credit	5695	\$30	Small Business/Self Employment Income	Sch. C	\$50 each
Extension of Time to File	4868	NC	Complex Small Bus./SE Income	Sch. C	\$80 each
Farm Income	Sch. F	\$50	Vehicle Credit	8936	\$30
Farm Rental	4835	\$50	<b>Professional Deductions &amp; Per Diem Only</b>	\$79 (included in Federal Long Form)	
Federal Estimated Payment Vouchers	1040 ES	\$30	<b>Per Diem Calculations Only</b>	\$59 (included in Federal Long Form)	

**Note:** Sale of Stocks and Bonds are calculated at \$20 for the first three transactions and \$3.00 for each additional transaction.  
 Sale of Capital Assets (Form 8949)—\$1.00 per required transaction reported.

**Yes, take \$10 off my fee and do not send me a paper copy! (Applies to preparation fees of full tax returns only.)** Go paperless and we will take \$10 off of your preparation fee. Check here! Your return will be available on our secure online portal. We will mail your original documents back to you for your records. You will *not* receive the International Taxes IncPortfolio with a paper copy of your return.

**Representation Fees:** Our fees for Audit Representation will be \$100 for current clients and \$250 for non-clients. Representation for IRS/State Correspondence letters will be \$50 for current clients and \$100 for non-clients (per incident/year).

**Please be aware that you, as the taxpayer, are responsible for keeping all evidence and support of all items reported on your tax return (flight schedules, log book, receipts, wage forms, and all other support) for a period of at least five years.**

**\*Note on fees:** Most federal returns will be completed for the base fee of \$165. This includes the federal long form, itemized deductions, employee business expense (for one person), interest income and various other items. However, more complex returns require additional forms to be filed. The fees for the additional forms are on a per form basis. An asterisk(\*) has been placed next to each section of the Organizer that requires additional forms and an additional fee. Please call if you have any questions concerning the fee for your return.

## Privacy Policy

We do not disclose any nonpublic personal information obtained in the course of our practice except as required or permitted by law. Permitted disclosures include, for example, providing information to our employees and those of our affiliates, Pilot-Tax, Specialty Tax Services, Inc. and to our tax return processing center for purposes of preparing and processing your tax return. In all situations we stress the confidential nature of information being shared. In order to guard your nonpublic personal information, we maintain physical, electronic, and procedural safeguards that comply with professional standards and the law.

## All Clients MUST Sign Below for Return to be Processed!

I certify that the information provided in this organizer is accurate and complete. I understand it is my responsibility to include any and all information concerning income, deductions and other information necessary for the preparation of my personal tax return. All returns in house after March 15th will have an extension automatically filed. The forms listed in the Pricing Information section are the most common forms used. Additional forms not listed may result in per form fees. Administrative fees will apply for more complex returns. I will be responsible for any collection fees due to nonpayment. (If filing a joint return, both you and your spouse must sign.)

Signature

Signature of Spouse

Date

## Final Checklist

- |  |   |
|--|---|
| <input type="checkbox"/> Originals of all W-2's  | <input type="checkbox"/> Copy of Closing Statement if Bought/Sold Home                            |
| <input type="checkbox"/> Copy of Last Pay Stub of 2023   | <input type="checkbox"/> Copy of Receipt for Sales Tax on Car or Boat                             |
| <input type="checkbox"/> Original Employer-Provided Health Insurance Offer and Coverage 1095-C or 1095-B | <input type="checkbox"/> Copies of Monthly Flight Schedules                                       |
| <input type="checkbox"/> Original Health Insurance Marketplace Statement 1095-A                          | <input type="checkbox"/> Original Voided Check for Direct Deposit                                 |
| <input type="checkbox"/> Originals of Interest Statements 1099 INT                                       | <input type="checkbox"/> Original Local Tax Forms with Instructions                               |
| <input type="checkbox"/> Original Tuition Statement 1098T  | <input type="checkbox"/> Copy of Last Year's Federal and State Tax Return if you are a New Client |
| <input type="checkbox"/> Original Dividend Statements 1099 DIV   | <input type="checkbox"/> Copy of Any Statement of which you are unsure                            |
| <input type="checkbox"/> Copies of Sale of Stock/Bonds 1099B   | <input type="checkbox"/> Copy of K-1's for Partnership, S-Corp, or Trusts                         |
| <input type="checkbox"/> Copies of Brokerage Statements for All Sales                                    | <input type="checkbox"/> <b>Payment</b>   |
| <input type="checkbox"/> Original Retirement Statements 1099R  | <input type="checkbox"/> <b>Signed Back Page!</b>   |
| <input type="checkbox"/> Copies of Mortgage Statements 1098  | <input type="checkbox"/> <b>Complete Organizer!</b>   |



INTERNATIONAL  
TAXES INC

[www.intaxinc.com](http://www.intaxinc.com)

1125 NW 135th Ct  
Miami, FL 33182

**Phone: 305-229-2710**

Fax: 305-553-9400

Department of the Treasury  
Internal Revenue Service

▶ Do not send to the IRS. This is not a tax return.  
▶ Keep this form for your records.  
▶ Information about Form 8879 and its instructions is at [www.irs.gov/form8879](http://www.irs.gov/form8879).

**2023**

Submission Identification Number (SID) ▶

Taxpayer's name	Social security number
Spouse's name	Spouse's social security number

**Part I Tax Return Information—Tax Year Ending December 31, 2023 (Whole Dollars Only)**

<b>1</b> Adjusted gross income (Form 1040, line 38; Form 1040A, line 22; Form 1040EZ, line 4)	<b>1</b>	
<b>2</b> Total tax (Form 1040, line 63; Form 1040A, line 39; Form 1040EZ, line 12)	<b>2</b>	
<b>3</b> Federal income tax withheld (Form 1040, line 64; Form 1040A, line 40; Form 1040EZ, line 7)	<b>3</b>	
<b>4</b> Refund (Form 1040, line 76a; Form 1040A, line 48a; Form 1040EZ, line 13a; Form 1040-SS, Part I, line 13a)	<b>4</b>	
<b>5</b> Amount you owe (Form 1040, line 78; Form 1040A, line 50; Form 1040EZ, line 14)	<b>5</b>	

**Part II Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your return)**

Under penalties of perjury, I declare that I have examined a copy of my electronic individual income tax return and accompanying schedules and statements for the tax year ending December 31, 2023, and to the best of my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above are the amounts from my electronic income tax return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution to debit the entry to this account. This authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate the authorization. To revoke (cancel) a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation requests must be received no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I further acknowledge that the personal identification number (PIN) below is my signature for my electronic income tax return and, if applicable, my Electronic Funds Withdrawal Consent.

**Taxpayer's PIN: check one box only**

- I authorize International Taxes Inc to enter or generate my PIN 

--	--	--	--	--

 as my signature on my tax year 2023 electronically filed income tax return.   
ERO firm name **Enter five digits, but do not enter all zeros**
- I will enter my PIN as my signature on my tax year 2023 electronically filed income tax return. Check this box **only** if you are entering your own PIN **and** your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Your signature ▶ \_\_\_\_\_ Date ▶ \_\_\_\_\_

**Spouse's PIN: check one box only**

- I authorize International Taxes Inc to enter or generate my PIN 

--	--	--	--	--

 as my signature on my tax year 2023 electronically filed income tax return.   
ERO firm name **Enter five digits, but do not enter all zeros**
- I will enter my PIN as my signature on my tax year 2023 electronically filed income tax return. Check this box **only** if you are entering your own PIN **and** your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Spouse's signature ▶ \_\_\_\_\_ Date ▶ \_\_\_\_\_

**Practitioner PIN Method Returns Only—continue below**

**Part III Certification and Authentication—Practitioner PIN Method Only**

**ERO's EFIN/PIN.** Enter your six-digit EFIN followed by your five-digit self-selected PIN. 

--	--	--	--	--	--	--	--	--	--	--	--

**Do not enter all zeros**

I certify that the above numeric entry is my PIN, which is my signature for the tax year 2023 electronically filed income tax return for the taxpayer(s) indicated above. I confirm that I am submitting this return in accordance with the requirements of the Practitioner PIN method and **Publication 1345**, Handbook for Authorized IRS e-file Providers of Individual Income Tax Returns.

ERO's signature ▶ \_\_\_\_\_ Date ▶ \_\_\_\_\_

**ERO Must Retain This Form — See Instructions  
Do Not Submit This Form to the IRS Unless Requested To Do So**



## **ELECTRONIC FILING INSTRUCTIONS**

For your refund to be electronically filed by  
**International Taxes Inc**, you must  
complete the following:

- Specify that you would like to electronically file your return in the Client Organizer.
- You must fill in your Name and Social Security number on the top portion of the 8879 form.
- Select a personal identification number (PIN) as your signature for your electronic income tax return. This five digit PIN can be any combination of numbers you choose. Most of our clients choose to use their Zip Code. You will not be asked to remember this number for any future purpose.
- Under Part II, You (and spouse if applicable) must **SIGN** and enter your PIN number(s) where appropriate.
- Return this **SIGNED** copy of the 8879 Electronic Filing Authorization form to our office no later than April 18th, 2023.
- You may fax the form to us at **305-553-9400**
- You also may email signed form to: **moldesj@internationaltaxesinc.com**
- You can take a photo with your phone and text it to us at: **305-229-2710**
- Or you may mail it: **1125 NW 135th Ct, Miami , FL 33182**
- Most important!! Call us at 305-229-2710 and confirm receipt of your fax/email.
- **For electronic filing we require a copy of your drivers license, passport or alien registration card.**

Your Name: \_\_\_\_\_

Enrolled Agents are bound by standards of confidentiality and therefore we will protect your right to privacy. In the preparation of your tax returns, nonpublic personal information is collected from you or obtained by us with your authorization. For current and former clients we do not disclose any nonpublic personal information obtained in the course of preparing your tax returns except as required by law; we will not release any permitted personal information without your express consent and when information is shared, we will stress the confidential nature of the information. We do our best to guard your nonpublic personal information by maintaining physical and electronic safeguards that comply with our professional standards.