

Analyzing 1040s for Financial Planning Opportunities

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Today's Presenter

- Lawrence Pon
 - Lawrence Pon is a Certified Public Accountant, Personal Financial Specialist, Certified Financial Planner, Enrolled Agent, United States Tax Court Practitioner, and Accredited Estate Planner in Redwood Shores, CA
 - Mr. Pon has been in practice since 1986 and speaks regularly to tax professionals on the latest tax planning and preparation topics nationally.
 - Mr. Pon teaches Income Tax at College of San Mateo
 - Mr. Pon received his BS in Business Administration from UC Berkeley and MS in Taxation from Golden Gate University in San Francisco

Analyzing 1040s for Financial Planning Opportunities

- Form 1040
- Schedule 1
- Schedule 2
- Schedule 3
- Form 8606
- Form 5239
- Form 8889

For the year Jan. 1–Dec. 31, 2023, or other tax year beginning . . . , 2023, ending . . . , 20 . . . See separate instructions.
Your first name and middle initial Last name Your social security number
If joint return, spouse's first name and middle initial Last name Spouse's social security number
Home address (number and street). If you have a P.O. box, see instructions. Apt. no. Presidential Election Campaign
City, town, or post office. If you have a foreign address, also complete spaces below. State ZIP code Check here if you, or your spouse if filing jointly, want \$3 to go to this fund. Checking a box below will not change your tax or refund.
Foreign country name Foreign province/state/county Foreign postal code You Spouse

Filing Status Single Married filing jointly (even if only one had income) Head of household (HOH)
Married filing separately (MFS) Qualifying surviving spouse (QSS)
Check only one box.
If you checked the MFS box, enter the name of your spouse. If you checked the HOH or QSS box, enter the child's name if the qualifying person is a child but not your dependent: . . .

Digital Assets At any time during 2023, did you: (a) receive (as a reward, award, or payment for property or services); or (b) sell, exchange, or otherwise dispose of a digital asset (or a financial interest in a digital asset)? (See instructions.) Yes No

Standard Deduction Someone can claim: You as a dependent Your spouse as a dependent
Spouse itemizes on a separate return or you were a dual-status alien

Age/Blindness You: Were born before January 2, 1959 Are blind Spouse: Was born before January 2, 1959 Is blind

Dependents (see instructions):
(1) First name Last name (2) Social security number (3) Relationship to you (4) Check the box if qualifies for (see instructions): Child tax credit Credit for other dependents

Income
1a Total amount from Form(s) W-2, box 1 (see instructions) 1a
1b Household employee wages not reported on Form(s) W-2 1b
1c Tip income not reported on line 1a (see instructions) 1c
1d Medicaid waiver payments not reported on Form(s) W-2 (see instructions) 1d
1e Taxable dependent care benefits from Form 2441, line 26 1e
1f Employer-provided adoption benefits from Form 8839, line 29 1f
1g Wages from Form 8919, line 6 1g
1h Other earned income (see instructions) 1h
1i Nontaxable combat pay election (see instructions) 1i
z Add lines 1a through 1h

Attach Sch. B if required.
2a Tax-exempt interest 2a
3a Qualified dividends 3a
4a IRA distributions 4a
5a Pensions and annuities 5a
6a Social security benefits 6a
b Taxable interest 2b
b Ordinary dividends 3b
b Taxable amount 4b
b Taxable amount 5b
b Taxable amount 6b
7 Capital gain or (loss). Attach Schedule D if required. If not required, check here 7
8 Additional income from Schedule 1, line 10 8
9 Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income 9
10 Adjustments to income from Schedule 1, line 26 10
11 Subtract line 10 from line 9. This is your adjusted gross income 11
12 Standard deduction or itemized deductions (from Schedule A) 12
13 Qualified business income deduction from Form 8995 or Form 8995-A 13
14 Add lines 12 and 13 14
15 Subtract line 14 from line 11. If zero or less, enter -0-. This is your taxable income 15

Standard Deduction for—
• Single or Married filing separately, \$13,850
• Married filing jointly or Qualifying surviving spouse, \$27,700
• Head of household, \$20,800
• If you checked any box under Standard Deduction, see instructions.

For the year Jan. 1–Dec. 31, 2023, or other tax year beginning _____, 2023, ending _____, 20 _____ See separate instructions.

Your first name and middle initial	Last name	Your social security number
_____	_____	_____ _____ _____
If joint return, spouse's first name and middle initial	Last name	Spouse's social security number
_____	_____	_____ _____ _____

Home address (number and street). If you have a P.O. box, see instructions.		Apt. no.	Presidential Election Campaign Check here if you, or your spouse if filing jointly, want \$3 to go to this fund. Checking a box below will not change your tax or refund. <input type="checkbox"/> You <input type="checkbox"/> Spouse
City, town, or post office. If you have a foreign address, also complete spaces below.	State	ZIP code	
Foreign country name	Foreign province/state/county	Foreign postal code	

Filing Status Single Married filing jointly (even if only one had income) Married filing separately (MFS) Head of household (HOH) Qualifying surviving spouse (QSS)

Check only one box.

If you checked the MFS box, enter the name of your spouse. If you checked the HOH or QSS box, enter the child's name if the qualifying person is a child but not your dependent: _____

Digital Assets At any time during 2023, did you: (a) receive (as a reward, award, or payment for property or services); or (b) sell, exchange, or otherwise dispose of a digital asset (or a financial interest in a digital asset)? (See instructions.) Yes No

Standard Deduction **Someone can claim:** You as a dependent Your spouse as a dependent Spouse itemizes on a separate return or you were a dual-status alien

Age/Blindness **You:** Were born before January 2, 1959 Are blind **Spouse:** Was born before January 2, 1959 Is blind

Dependents (see instructions): If more than four dependents, see instructions and check here <input type="checkbox"/>	(1) First name		(2) Social security number	(3) Relationship to you	(4) Check the box if qualifies for (see instructions):	
	Last name				Child tax credit	Credit for other dependents
					<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>

Demographics, Dependents, & Filing Status

- Client's filing status
- Does client have dependents
- Does client have basic estate planning documents prepared
- Has the client opened 529 accounts for the children
- Does occupation indicate special coverage needs
 - Adequate disability insurance
- Review beneficiary designations

Income

Attach Form(s) W-2 here. Also attach Forms W-2G and 1099-R if tax was withheld.

If you did not get a Form W-2, see instructions.

Attach Sch. B if required.

Standard Deduction for—

- Single or Married filing separately, \$13,850
- Married filing jointly or Qualifying surviving spouse, \$27,700
- Head of household, \$20,800
- If you checked any box under *Standard Deduction*, see instructions.

1a	Total amount from Form(s) W-2, box 1 (see instructions)					1a	
b	Household employee wages not reported on Form(s) W-2					1b	
c	Tip income not reported on line 1a (see instructions)					1c	
d	Medicaid waiver payments not reported on Form(s) W-2 (see instructions)					1d	
e	Taxable dependent care benefits from Form 2441, line 26					1e	
f	Employer-provided adoption benefits from Form 8839, line 29					1f	
g	Wages from Form 8919, line 6					1g	
h	Other earned income (see instructions)					1h	
i	Nontaxable combat pay election (see instructions)				1i		
z	Add lines 1a through 1h					1z	
2a	Tax-exempt interest	2a		b	Taxable interest	2b	
3a	Qualified dividends	3a		b	Ordinary dividends	3b	
4a	IRA distributions	4a		b	Taxable amount	4b	
5a	Pensions and annuities	5a		b	Taxable amount	5b	
6a	Social security benefits	6a		b	Taxable amount	6b	
c	If you elect to use the lump-sum election method, check here (see instructions)				<input type="checkbox"/>		
7	Capital gain or (loss). Attach Schedule D if required. If not required, check here				<input type="checkbox"/>	7	
8	Additional income from Schedule 1, line 10					8	
9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income					9	
10	Adjustments to income from Schedule 1, line 26					10	
11	Subtract line 10 from line 9. This is your adjusted gross income					11	
12	Standard deduction or itemized deductions (from Schedule A)					12	
13	Qualified business income deduction from Form 8995 or Form 8995-A					13	
14	Add lines 12 and 13					14	
15	Subtract line 14 from line 11. If zero or less, enter -0-. This is your taxable income					15	

W-2 Income

- Are they taking advantage of income deferral opportunities
 - Catch up
- Discuss benefits of 83(b) election, if applicable
- Discuss benefits of exercising stock options
- Review insurance premiums
- Review Social Security taxes
- Health Savings Account

W-2

- Mega Back-Door Roth
- Dependent Care Plans
- Flexible spending accounts

22222		VOID <input type="checkbox"/>		a Employee's social security number		For Official Use Only OMB No. 1545-0008					
b Employer identification number (EIN)				1 Wages, tips, other compensation		2 Federal income tax withheld					
c Employer's name, address, and ZIP code				3 Social security wages		4 Social security tax withheld					
				5 Medicare wages and tips		6 Medicare tax withheld					
				7 Social security tips		8 Allocated tips					
d Control number				9		10 Dependent care benefits					
e Employee's first name and initial		Last name		Suff.	11 Nonqualified plans		12a See instructions for box 12				
f Employee's address and ZIP code				13 Statutory employee <input type="checkbox"/>		Retirement plan <input type="checkbox"/>		Third-party sick pay <input type="checkbox"/>		12b	
				14 Other				12c		12d	
15 State	Employer's state ID number		16 State wages, tips, etc.		17 State income tax	18 Local wages, tips, etc.	19 Local income tax		20 Locality name		

Form **W-2** Wage and Tax Statement

2023

Department of the Treasury—Internal Revenue Service
For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

Copy A—For Social Security Administration. Send this entire page with Form W-3 to the Social Security Administration; photocopies are **not** acceptable.

Cat. No. 10134D

Do Not Cut, Fold, or Staple Forms on This Page

W-2 Box 12 Codes

- Code C – Taxable cost of group-term life insurance over \$50,000
- Code D – 401(k) contribution
- Code E – 403(b) contribution
- Code F – 408(k)(6) salary reduction SEP
- Code G – 457(b) plan contribution
- Code J – Nontaxable sick pay
- Code S – SIMPLE plan
- Code T – Adoption benefits

W-2 Box 12 Codes

- Code V – Income from exercise of nonstatutory stock options
- Code W – Employer contribution to HSA (includes employee contribution)
- Code AA – Designated Roth contribution under 401(k) plan
- Code BB – Designated Roth contribution under 403(b) plan
- Code DD – Cost of employer-sponsored health coverage
- Code EE – Designated Roth contribution under 457(b) plan

Tax and Credits	16	Tax (see instructions). Check if any from Form(s): 1 <input type="checkbox"/> 8814 2 <input type="checkbox"/> 4972 3 <input type="checkbox"/> _____	16	
	17	Amount from Schedule 2, line 3	17	
	18	Add lines 16 and 17	18	
	19	Child tax credit or credit for other dependents from Schedule 8812	19	
	20	Amount from Schedule 3, line 8	20	
	21	Add lines 19 and 20	21	
	22	Subtract line 21 from line 18. If zero or less, enter -0-	22	
	23	Other taxes, including self-employment tax, from Schedule 2, line 21	23	
	24	Add lines 22 and 23. This is your total tax	24	

Payments	25	Federal income tax withheld from:		
	a	Form(s) W-2	25a	
	b	Form(s) 1099	25b	
	c	Other forms (see instructions)	25c	
	d	Add lines 25a through 25c	25d	
	26	2023 estimated tax payments and amount applied from 2022 return	26	
	27	Earned income credit (EIC)	27	
	28	Additional child tax credit from Schedule 8812	28	
	29	American opportunity credit from Form 8863, line 8	29	
	30	Reserved for future use	30	
	31	Amount from Schedule 3, line 15	31	
	32	Add lines 27, 28, 29, and 31. These are your total other payments and refundable credits	32	
	33	Add lines 25d, 26, and 32. These are your total payments	33	

Refund	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid	34	
	35a	Amount of line 34 you want refunded to you . If Form 8888 is attached, check here <input type="checkbox"/>	35a	
	b	Routing number _____	c	Type: <input type="checkbox"/> Checking <input type="checkbox"/> Savings
	d	Account number _____		
	36	Amount of line 34 you want applied to your 2024 estimated tax	36	

Amount You Owe	37	Subtract line 33 from line 24. This is the amount you owe . For details on how to pay, go to www.irs.gov/Payments or see instructions	37	
	38	Estimated tax penalty (see instructions)	38	

Third Party Designee	Do you want to allow another person to discuss this return with the IRS? See instructions <input type="checkbox"/> Yes . Complete below. <input type="checkbox"/> No		
	Designee's name _____	Phone no. _____	Personal identification number (PIN) _____

Sign Here	Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.			
	Your signature _____	Date _____	Your occupation _____	If the IRS sent you an Identity Protection PIN, enter it here (see inst.) _____
	Spouse's signature. If a joint return, both must sign. _____	Date _____	Spouse's occupation _____	If the IRS sent your spouse an Identity Protection PIN, enter it here (see inst.) _____
	Phone no. _____	Email address _____		

Paid Preparer Use Only	Preparer's name _____	Preparer's signature _____	Date _____	PTIN _____	Check if: <input type="checkbox"/> Self-employed
	Firm's name _____	Phone no. _____			
	Firm's address _____	Firm's EIN _____			

Tax and Credits

16	Tax (see instructions). Check if any from Form(s): 1 <input type="checkbox"/> 8814 2 <input type="checkbox"/> 4972 3 <input type="checkbox"/> _____ . . .	16	
17	Amount from Schedule 2, line 3	17	
18	Add lines 16 and 17	18	
19	Child tax credit or credit for other dependents from Schedule 8812	19	
20	Amount from Schedule 3, line 8	20	
21	Add lines 19 and 20	21	
22	Subtract line 21 from line 18. If zero or less, enter -0-	22	
23	Other taxes, including self-employment tax, from Schedule 2, line 21	23	
24	Add lines 22 and 23. This is your total tax	24	

Payments

If you have a qualifying child, attach Sch. EIC.

25	Federal income tax withheld from:		
a	Form(s) W-2	25a	
b	Form(s) 1099	25b	
c	Other forms (see instructions)	25c	
d	Add lines 25a through 25c		25d
26	2023 estimated tax payments and amount applied from 2022 return		26
27	Earned income credit (EIC)	27	
28	Additional child tax credit from Schedule 8812	28	
29	American opportunity credit from Form 8863, line 8	29	
30	Reserved for future use	30	
31	Amount from Schedule 3, line 15	31	
32	Add lines 27, 28, 29, and 31. These are your total other payments and refundable credits		32
33	Add lines 25d, 26, and 32. These are your total payments		33

Refund	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid . . .	34	
	35a	Amount of line 34 you want refunded to you . If Form 8888 is attached, check here <input type="checkbox"/>	35a	
	b	Routing number <input type="text"/>	c Type: <input type="checkbox"/> Checking <input type="checkbox"/> Savings	
	d	Account number <input type="text"/>		
	36	Amount of line 34 you want applied to your 2024 estimated tax	36	

Amount You Owe	37	Subtract line 33 from line 24. This is the amount you owe . For details on how to pay, go to www.irs.gov/Payments or see instructions	37	
	38	Estimated tax penalty (see instructions)	38	

Third Party Designee Do you want to allow another person to discuss this return with the IRS? See instructions **Yes. Complete below.** **No**

Designee's name Phone no. Personal identification number (PIN)

Sign Here Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Your signature	Date	Your occupation	If the IRS sent you an Identity Protection PIN, enter it here (see inst.) <input type="text"/>
Spouse's signature. If a joint return, both must sign.	Date	Spouse's occupation	If the IRS sent your spouse an Identity Protection PIN, enter it here (see inst.) <input type="text"/>
Phone no. <input type="text"/>	Email address <input type="text"/>		

Paid Preparer Use Only

Preparer's name <input type="text"/>	Preparer's signature <input type="text"/>	Date <input type="text"/>	PTIN <input type="text"/>	Check if: <input type="checkbox"/> Self-employed
Firm's name <input type="text"/>	Phone no. <input type="text"/>			
Firm's address <input type="text"/>	Firm's EIN <input type="text"/>			

Allocation of Refund (Including Savings Bond Purchases)

Go to www.irs.gov/Form8888 for the latest information.

Attach to your income tax return.

Name(s) shown on return

Your social security number

Part I Direct Deposit

Complete this part if you want us to directly deposit a portion of your refund to one or more accounts.

1a Amount to be deposited in first account (see instructions)	1a
b Routing number <input type="text"/> c <input type="checkbox"/> Checking <input type="checkbox"/> Savings	
d Account number <input type="text"/>	
2a Amount to be deposited in second account	2a
b Routing number <input type="text"/> c <input type="checkbox"/> Checking <input type="checkbox"/> Savings	
d Account number <input type="text"/>	
3a Amount to be deposited in third account	3a
b Routing number <input type="text"/> c <input type="checkbox"/> Checking <input type="checkbox"/> Savings	
d Account number <input type="text"/>	

Part II U.S. Series I Savings Bond Purchases

Complete this part if you want to buy paper bonds with a portion of your refund.



If a name is entered on line 5c or 6c below, co-ownership will be assumed unless the beneficiary box is checked. See instructions for more details.

4 Amount to be used for bond purchases for yourself (and your spouse, if filing jointly)	4
5a Amount to be used to buy bonds for yourself, your spouse, or someone else	5a
b Enter the owner's name (First then Last) for the bond registration <input type="text"/>	
c If you would like to add a co-owner or beneficiary, enter the name here (First then Last). If beneficiary, also check here . . . <input type="checkbox"/> <input type="text"/>	
6a Amount to be used to buy bonds for yourself, your spouse, or someone else	6a
b Enter the owner's name (First then Last) for the bond registration <input type="text"/>	
c If you would like to add a co-owner or beneficiary, enter the name here (First then Last). If beneficiary, also check here . . . <input type="checkbox"/> <input type="text"/>	

Part III Paper Check

Complete this part if you want a portion of your refund to be sent to you as a check.

7 Amount to be refunded by check	7
---	----------

Part IV Total Allocation of Refund

8 Add lines 1a, 2a, 3a, 4, 5a, 6a, and 7. The total must equal the refund amount shown on your tax return	8
--	----------

I-Bonds

- **Pays interest for 30 years**
 - **Interest taxable when I-Bonds cashed**
- **Interest taxable federal only**
- **Adjusts twice a year – May and November**
 - **Fixed rate + Inflation**
- **Interest rate**
 - **November 1, 2023 to April 30, 2024 = 5.27%**
 - **May 1, 2023 to October 31, 2023 = 4.30%**
 - **November 1, 2022 to April 30, 2023 = 6.89%**
 - **May 1, 2022 to October 31, 2022 = 9.62%**
 - **November 1, 2021 to April 30, 2021 = 7.12%**

**SCHEDULE 1
(Form 1040)**

Department of the Treasury
Internal Revenue Service

Additional Income and Adjustments to Income

Attach to Form 1040, 1040-SR, or 1040-NR.

Go to www.irs.gov/Form1040 for instructions and the latest information.

OMB No. 1545-0074

2023

Attachment
Sequence No. **01**

Name(s) shown on Form 1040, 1040-SR, or 1040-NR

Your social security number

Part I Additional Income

1	Taxable refunds, credits, or offsets of state and local income taxes	1	
2a	Alimony received	2a	
b	Date of original divorce or separation agreement (see instructions):		
3	Business income or (loss). Attach Schedule C	3	
4	Other gains or (losses). Attach Form 4797	4	
5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E	5	
6	Farm income or (loss). Attach Schedule F	6	
7	Unemployment compensation	7	
8	Other income:		
a	Net operating loss	8a	()
b	Gambling	8b	
c	Cancellation of debt	8c	
d	Foreign earned income exclusion from Form 2555	8d	()
e	Income from Form 8853	8e	
f	Income from Form 8889	8f	
g	Alaska Permanent Fund dividends	8g	
h	Jury duty pay	8h	
i	Prizes and awards	8i	
j	Activity not engaged in for profit income	8j	
k	Stock options	8k	
l	Income from the rental of personal property if you engaged in the rental for profit but were not in the business of renting such property	8l	
m	Olympic and Paralympic medals and USOC prize money (see instructions)	8m	
n	Section 951(a) inclusion (see instructions)	8n	
o	Section 951A(a) inclusion (see instructions)	8o	
p	Section 461(l) excess business loss adjustment	8p	
q	Taxable distributions from an ABLE account (see instructions)	8q	
r	Scholarship and fellowship grants not reported on Form W-2	8r	
s	Nontaxable amount of Medicaid waiver payments included on Form 1040, line 1a or 1d	8s	()
t	Pension or annuity from a nonqualified deferred compensation plan or a nongovernmental section 457 plan	8t	
u	Wages earned while incarcerated	8u	
z	Other income. List type and amount:	8z	
9	Total other income. Add lines 8a through 8z	9	
10	Combine lines 1 through 7 and 9. This is your additional income . Enter here and on Form 1040, 1040-SR, or 1040-NR, line 8	10	

SCHEDULE 1
(Form 1040)

Department of the Treasury
Internal Revenue Service

Additional Income and Adjustments to Income

Attach to Form 1040, 1040-SR, or 1040-NR.

Go to www.irs.gov/Form1040 for instructions and the latest information.

OMB No. 1545-0074

2023

Attachment
Sequence No. **01**

Name(s) shown on Form 1040, 1040-SR, or 1040-NR

Your social security number

Part I Additional Income

1	Taxable refunds, credits, or offsets of state and local income taxes	1
2a	Alimony received	2a
b	Date of original divorce or separation agreement (see instructions): _____	
3	Business income or (loss). Attach Schedule C	3
4	Other gains or (losses). Attach Form 4797	4
5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E	5
6	Farm income or (loss). Attach Schedule F	6
7	Unemployment compensation	7
8	Other income:	
a	Net operating loss	8a ()
b	Gambling	8b
c	Cancellation of debt	8c
d	Foreign earned income exclusion from Form 2555	8d ()
e	Income from Form 8853	8e
f	Income from Form 8889	8f
g	Alaska Permanent Fund dividends	8g
h	Jury duty pay	8h

- h** Jury duty pay
- i** Prizes and awards
- j** Activity not engaged in for profit income
- k** Stock options
- l** Income from the rental of personal property if you engaged in the rental for profit but were not in the business of renting such property
- m** Olympic and Paralympic medals and USOC prize money (see instructions)
- n** Section 951(a) inclusion (see instructions)
- o** Section 951A(a) inclusion (see instructions)
- p** Section 461(l) excess business loss adjustment
- q** Taxable distributions from an ABLE account (see instructions)
- r** Scholarship and fellowship grants not reported on Form W-2
- s** Nontaxable amount of Medicaid waiver payments included on Form 1040, line 1a or 1d
- t** Pension or annuity from a nonqualified deferred compensation plan or a nongovernmental section 457 plan
- u** Wages earned while incarcerated
- z** Other income. List type and amount: _____

8h	
8i	
8j	
8k	
8l	
8m	
8n	
8o	
8p	
8q	
8r	
8s	()
8t	
8u	
8z	

- 9** Total other income. Add lines 8a through 8z
- 10** Combine lines 1 through 7 and 9. This is your **additional income**. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 8

9	
10	

Part II Adjustments to Income

11	Educator expenses	11	
12	Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106	12	
13	Health savings account deduction. Attach Form 8889	13	
14	Moving expenses for members of the Armed Forces. Attach Form 3903	14	
15	Deductible part of self-employment tax. Attach Schedule SE	15	
16	Self-employed SEP, SIMPLE, and qualified plans	16	
17	Self-employed health insurance deduction	17	
18	Penalty on early withdrawal of savings	18	
19a	Alimony paid	19a	
b	Recipient's SSN		
c	Date of original divorce or separation agreement (see instructions):		
20	IRA deduction	20	
21	Student loan interest deduction	21	
22	Reserved for future use	22	
23	Archer MSA deduction	23	
24	Other adjustments:		
a	Jury duty pay (see instructions)	24a	
b	Deductible expenses related to income reported on line 8l from the rental of personal property engaged in for profit	24b	
c	Nontaxable amount of the value of Olympic and Paralympic medals and USOC prize money reported on line 8m	24c	
d	Reforestation amortization and expenses	24d	
e	Repayment of supplemental unemployment benefits under the Trade Act of 1974	24e	
f	Contributions to section 501(c)(18)(D) pension plans	24f	
g	Contributions by certain chaplains to section 403(b) plans	24g	
h	Attorney fees and court costs for actions involving certain unlawful discrimination claims (see instructions)	24h	
i	Attorney fees and court costs you paid in connection with an award from the IRS for information you provided that helped the IRS detect tax law violations	24i	
j	Housing deduction from Form 2555	24j	
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form 1041)	24k	
z	Other adjustments. List type and amount:	24z	
25	Total other adjustments. Add lines 24a through 24z	25	
26	Add lines 11 through 23 and 25. These are your adjustments to income . Enter here and on Form 1040, 1040-SR, or 1040-NR, line 10	26	

Part II Adjustments to Income

11	Educator expenses	11	
12	Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106	12	
13	Health savings account deduction. Attach Form 8889	13	
14	Moving expenses for members of the Armed Forces. Attach Form 3903	14	
15	Deductible part of self-employment tax. Attach Schedule SE	15	
16	Self-employed SEP, SIMPLE, and qualified plans	16	
17	Self-employed health insurance deduction	17	
18	Penalty on early withdrawal of savings	18	
19a	Alimony paid	19a	
b	Recipient's SSN		
c	Date of original divorce or separation agreement (see instructions): _____		
20	IRA deduction	20	
21	Student loan interest deduction	21	
22	Reserved for future use	22	
23	Archer MSA deduction	23	
24	Other adjustments:		
a	Jury duty pay (see instructions)	24a	
b	Deductible expenses related to income reported on line 8l from the rental of personal property engaged in for profit	24b	
c	Nontaxable amount of the value of Olympic and Paralympic medals and USOC prize money reported on line 8m	24c	

- c Nontaxable amount of the value of Olympic and Paralympic medals and USOC prize money reported on line 8m
- d Reforestation amortization and expenses
- e Repayment of supplemental unemployment benefits under the Trade Act of 1974
- f Contributions to section 501(c)(18)(D) pension plans
- g Contributions by certain chaplains to section 403(b) plans
- h Attorney fees and court costs for actions involving certain unlawful discrimination claims (see instructions)
- i Attorney fees and court costs you paid in connection with an award from the IRS for information you provided that helped the IRS detect tax law violations
- j Housing deduction from Form 2555
- k Excess deductions of section 67(e) expenses from Schedule K-1 (Form 1041)
- z Other adjustments. List type and amount: _____

24c			
24d			
24e			
24f			
24g			
24h			
24i			
24j			
24k			
24z			
25	Total other adjustments. Add lines 24a through 24z	25	
26	Add lines 11 through 23 and 25. These are your adjustments to income . Enter here and on Form 1040, 1040-SR, or 1040-NR, line 10	26	

Schedule 1

- Retirement plan distributions
 - RMD planning
- Roth Conversion Planning
- Income from a retirement plan from former employers
- Social Security income
- When to retire
 - Early
 - “On time”
 - Late

**SCHEDULE 2
(Form 1040)**

Department of the Treasury
Internal Revenue Service

Additional Taxes

Attach to Form 1040, 1040-SR, or 1040-NR.
Go to www.irs.gov/Form1040 for instructions and the latest information.

OMB No. 1545-0074

2023
Attachment
Sequence No. **02**

Name(s) shown on Form 1040, 1040-SR, or 1040-NR

Your social security number

Part I Tax

- | | | |
|---|--|---|
| 1 | Alternative minimum tax. Attach Form 6251 | 1 |
| 2 | Excess advance premium tax credit repayment. Attach Form 8962 | 2 |
| 3 | Add lines 1 and 2. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 17 | 3 |

Part II Other Taxes

- | | | |
|----|---|----|
| 4 | Self-employment tax. Attach Schedule SE | 4 |
| 5 | Social security and Medicare tax on unreported tip income. Attach Form 4137 | 5 |
| 6 | Uncollected social security and Medicare tax on wages. Attach Form 8919 | 6 |
| 7 | Total additional social security and Medicare tax. Add lines 5 and 6 | 7 |
| 8 | Additional tax on IRAs or other tax-favored accounts. Attach Form 5329 if required.
If not required, check here <input type="checkbox"/> | 8 |
| 9 | Household employment taxes. Attach Schedule H | 9 |
| 10 | Repayment of first-time homebuyer credit. Attach Form 5405 if required | 10 |
| 11 | Additional Medicare Tax. Attach Form 8959 | 11 |
| 12 | Net investment income tax. Attach Form 8960 | 12 |
| 13 | Uncollected social security and Medicare or RRTA tax on tips or group-term life insurance from Form W-2, box 12 | 13 |
| 14 | Interest on tax due on installment income from the sale of certain residential lots and timeshares | 14 |
| 15 | Interest on the deferred tax on gain from certain installment sales with a sales price over \$150,000 | 15 |
| 16 | Recapture of low-income housing credit. Attach Form 8611 | 16 |

(continued on page 2)

Part II Other Taxes (continued)

17	Other additional taxes:		
a	Recapture of other credits. List type, form number, and amount: _____	17a	
b	Recapture of federal mortgage subsidy, if you sold your home see instructions	17b	
c	Additional tax on HSA distributions. Attach Form 8889	17c	
d	Additional tax on an HSA because you didn't remain an eligible individual. Attach Form 8889	17d	
e	Additional tax on Archer MSA distributions. Attach Form 8853	17e	
f	Additional tax on Medicare Advantage MSA distributions. Attach Form 8853	17f	
g	Recapture of a charitable contribution deduction related to a fractional interest in tangible personal property	17g	
h	Income you received from a nonqualified deferred compensation plan that fails to meet the requirements of section 409A	17h	
i	Compensation you received from a nonqualified deferred compensation plan described in section 457A	17i	
j	Section 72(m)(5) excess benefits tax	17j	
k	Golden parachute payments	17k	
l	Tax on accumulation distribution of trusts	17l	
m	Excise tax on insider stock compensation from an expatriated corporation	17m	
n	Look-back interest under section 167(g) or 460(b) from Form 8697 or 8866	17n	
o	Tax on non-effectively connected income for any part of the year you were a nonresident alien from Form 1040-NR	17o	
p	Any interest from Form 8621, line 16f, relating to distributions from, and dispositions of, stock of a section 1291 fund	17p	
q	Any interest from Form 8621, line 24	17q	
z	Any other taxes. List type and amount: _____ _____	17z	
18	Total additional taxes. Add lines 17a through 17z	18	
19	Reserved for future use	19	
20	Section 965 net tax liability installment from Form 965-A	20	
21	Add lines 4, 7 through 16, and 18. These are your total other taxes . Enter here and on Form 1040 or 1040-SR, line 23, or Form 1040-NR, line 23b	21	

**SCHEDULE 3
(Form 1040)**

Department of the Treasury
Internal Revenue Service

Additional Credits and Payments

Attach to Form 1040, 1040-SR, or 1040-NR.
Go to www.irs.gov/Form1040 for instructions and the latest information.

OMB No. 1545-0074

2023

Attachment
Sequence No. **03**

Name(s) shown on Form 1040, 1040-SR, or 1040-NR

Your social security number

Part I Nonrefundable Credits

1	Foreign tax credit. Attach Form 1116 if required	1	
2	Credit for child and dependent care expenses from Form 2441, line 11. Attach Form 2441	2	
3	Education credits from Form 8863, line 19	3	
4	Retirement savings contributions credit. Attach Form 8880	4	
5a	Residential clean energy credit from Form 5695, line 15	5a	
5b	Energy efficient home improvement credit from Form 5695, line 32	5b	
6	Other nonrefundable credits:		
a	General business credit. Attach Form 3800	6a	
b	Credit for prior year minimum tax. Attach Form 8801	6b	
c	Adoption credit. Attach Form 8839	6c	
d	Credit for the elderly or disabled. Attach Schedule R	6d	
e	Reserved for future use	6e	
f	Clean vehicle credit. Attach Form 8936	6f	
g	Mortgage interest credit. Attach Form 8396	6g	
h	District of Columbia first-time homebuyer credit. Attach Form 8859	6h	
i	Qualified electric vehicle credit. Attach Form 8834	6i	
j	Alternative fuel vehicle refueling property credit. Attach Form 8911	6j	
k	Credit to holders of tax credit bonds. Attach Form 8912	6k	
l	Amount on Form 8978, line 14. See instructions	6l	
m	Credit for previously owned clean vehicles. Attach Form 8936	6m	
z	Other nonrefundable credits. List type and amount: _____ _____	6z	
7	Total other nonrefundable credits. Add lines 6a through 6z	7	
8	Add lines 1 through 4, 5a, 5b, and 7. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 20	8	

(continued on page 2)

Part II Other Payments and Refundable Credits

9	Net premium tax credit. Attach Form 8962	9	
10	Amount paid with request for extension to file (see instructions)	10	
11	Excess social security and tier 1 RRTA tax withheld	11	
12	Credit for federal tax on fuels. Attach Form 4136	12	
13	Other payments or refundable credits:		
a	Form 2439	13a	
b	Credit for qualified sick and family leave wages paid in 2022 from Schedule(s) H for leave taken before April 1, 2021	13b	
c	Reserved for future use	13c	
d	Credit for repayment of amounts included in income from earlier years	13d	
e	Reserved for future use	13e	
f	Deferred amount of net 965 tax liability (see instructions)	13f	
g	Reserved for future use	13g	
h	Credit for qualified sick and family leave wages paid in 2022 from Schedule(s) H for leave taken after March 31, 2021, and before October 1, 2021	13h	
z	Other payments or refundable credits. List type and amount: _____ _____	13z	
14	Total other payments or refundable credits. Add lines 13a through 13z	14	
15	Add lines 9 through 12 and 14. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 31	15	

Part II Other Payments and Refundable Credits

9	Net premium tax credit. Attach Form 8962	9	
10	Amount paid with request for extension to file (see instructions)	10	
11	Excess social security and tier 1 RRTA tax withheld	11	
12	Credit for federal tax on fuels. Attach Form 4136	12	
13	Other payments or refundable credits:		
a	Form 2439	13a	
b	Credit for repayment of amounts included in income from earlier years	13b	
c	Elective payment election amount from Form 3800, Part III, line 6, column (i)	13c	
d	Deferred amount of net 965 tax liability (see instructions)	13d	
z	Other payments or refundable credits. List type and amount: _____ _____	13z	
14	Total other payments or refundable credits. Add lines 13a through 13z	14	
15	Add lines 9 through 12 and 14. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 31	15	

Credits

- Education credits
- Energy Credits
- EV Credits
- Foreign Tax Credits

Standard Deduction

	2022	2023	2024
Single	\$12,950	\$13,850	\$14,600
HOH	\$19,400	\$20,800	\$21,900
MFJ	\$25,900	\$27,700	\$29,200
MFS	\$12,950	\$13,850	\$14,600

**SCHEDULE A
(Form 1040)**

Department of the Treasury
Internal Revenue Service

Itemized Deductions

Attach to Form 1040 or 1040-SR.

Go to www.irs.gov/ScheduleA for instructions and the latest information.

Caution: If you are claiming a net qualified disaster loss on Form 4684, see the instructions for line 16.

OMB No. 1545-0074

2023

Attachment
Sequence No. **07**

Name(s) shown on Form 1040 or 1040-SR

Your social security number

Medical and Dental Expenses	Caution: Do not include expenses reimbursed or paid by others.		
1	Medical and dental expenses (see instructions)	1	
2	Enter amount from Form 1040 or 1040-SR, line 11 2		
3	Multiply line 2 by 7.5% (0.075)	3	
4	Subtract line 3 from line 1. If line 3 is more than line 1, enter -0-		4
Taxes You Paid	5 State and local taxes.		
	a State and local income taxes or general sales taxes. You may include either income taxes or general sales taxes on line 5a, but not both. If you elect to include general sales taxes instead of income taxes, check this box <input type="checkbox"/>	5a	
	b State and local real estate taxes (see instructions)	5b	
	c State and local personal property taxes	5c	
	d Add lines 5a through 5c	5d	
	e Enter the smaller of line 5d or \$10,000 (\$5,000 if married filing separately)	5e	
	6 Other taxes. List type and amount:	6	
	7 Add lines 5e and 6		7
Interest You Paid	8 Home mortgage interest and points. If you didn't use all of your home mortgage loan(s) to buy, build, or improve your home, see instructions and check this box <input type="checkbox"/>		
Caution: Your mortgage interest deduction may be limited. See instructions.	a Home mortgage interest and points reported to you on Form 1098. See instructions if limited	8a	
	b Home mortgage interest not reported to you on Form 1098. See instructions if limited. If paid to the person from whom you bought the home, see instructions and show that person's name, identifying no., and address	8b	
	c Points not reported to you on Form 1098. See instructions for special rules	8c	
	d Reserved for future use	8d	
	e Add lines 8a through 8c	8e	
	9 Investment interest. Attach Form 4952 if required. See instructions	9	
	10 Add lines 8e and 9		10
Gifts to Charity	11 Gifts by cash or check. If you made any gift of \$250 or more, see instructions	11	
Caution: If you made a gift and got a benefit for it, see instructions.	12 Other than by cash or check. If you made any gift of \$250 or more, see instructions. You must attach Form 8283 if over \$500	12	
	13 Carryover from prior year	13	
	14 Add lines 11 through 13		14
Casualty and Theft Losses	15 Casualty and theft loss(es) from a federally declared disaster (other than net qualified disaster losses). Attach Form 4684 and enter the amount from line 18 of that form. See instructions		15
Other Itemized Deductions	16 Other—from list in instructions. List type and amount:		16
Total Itemized Deductions	17 Add the amounts in the far right column for lines 4 through 16. Also, enter this amount on Form 1040 or 1040-SR, line 12		17
	18 If you elect to itemize deductions even though they are less than your standard deduction, check this box <input type="checkbox"/>		

**SCHEDULE A
(Form 1040)**

Department of the Treasury
Internal Revenue Service

Itemized Deductions

Attach to Form 1040 or 1040-SR.

Go to www.irs.gov/ScheduleA for instructions and the latest information.

Caution: If you are claiming a net qualified disaster loss on Form 4684, see the instructions for line 16.

OMB No. 1545-0074

2023

Attachment
Sequence No. **07**

Name(s) shown on Form 1040 or 1040-SR

Your social security number

**Medical
and
Dental
Expenses**

Caution: Do not include expenses reimbursed or paid by others.

- 1** Medical and dental expenses (see instructions)
- 2** Enter amount from Form 1040 or 1040-SR, line 11
- 3** Multiply line 2 by 7.5% (0.075)
- 4** Subtract line 3 from line 1. If line 3 is more than line 1, enter -0-

1	
2	
3	
4	

**Taxes You
Paid**

- 5** State and local taxes.
 - a** State and local income taxes or general sales taxes. You may include either income taxes or general sales taxes on line 5a, but not both. If you elect to include general sales taxes instead of income taxes, check this box
 - b** State and local real estate taxes (see instructions)
 - c** State and local personal property taxes
 - d** Add lines 5a through 5c
 - e** Enter the smaller of line 5d or \$10,000 (\$5,000 if married filing separately)
- 6** Other taxes. List type and amount: _____
- 7** Add lines 5e and 6

5a	
5b	
5c	
5d	
5e	
6	
7	

Interest You Paid

Caution: Your mortgage interest deduction may be limited. See instructions.

8 Home mortgage interest and points. If you didn't use all of your home mortgage loan(s) to buy, build, or improve your home, see instructions and check this box

a Home mortgage interest and points reported to you on Form 1098. See instructions if limited

b Home mortgage interest not reported to you on Form 1098. See instructions if limited. If paid to the person from whom you bought the home, see instructions and show that person's name, identifying no., and address

.....

c Points not reported to you on Form 1098. See instructions for special rules

d Reserved for future use

e Add lines 8a through 8c

9 Investment interest. Attach Form 4952 if required. See instructions

10 Add lines 8e and 9

8a	
8b	
8c	
8d	
8e	
9	

10

Gifts to Charity

Caution: If you made a gift and got a benefit for it, see instructions.

11 Gifts by cash or check. If you made any gift of \$250 or more, see instructions

12 Other than by cash or check. If you made any gift of \$250 or more, see instructions. You **must** attach Form 8283 if over \$500

13 Carryover from prior year

14 Add lines 11 through 13

11	
12	
13	

14

Casualty and Theft Losses	15	Casualty and theft loss(es) from a federally declared disaster (other than net qualified disaster losses). Attach Form 4684 and enter the amount from line 18 of that form. See instructions	15	
Other Itemized Deductions	16	Other—from list in instructions. List type and amount: _____ _____	16	
Total Itemized Deductions	17	Add the amounts in the far right column for lines 4 through 16. Also, enter this amount on Form 1040 or 1040-SR, line 12	17	
	18	If you elect to itemize deductions even though they are less than your standard deduction, check this box <input type="checkbox"/>		

For Paperwork Reduction Act Notice, see the Instructions for Form 1040.

Cat. No. 17145C

Schedule A (Form 1040) 2023

Schedule A

- Unreimbursed medical expenses
- Substantial charitable deductions
- State and local tax (SALT) limitation
- Mortgage interest

What If Client Does Not Itemize?

- Qualified charitable distribution (QCD)
 - >Age 70 ½
 - Up to \$100,000 to charity (\$2024 = \$105,000)
 - Fulfills RMD requirement
 - SECURE 2.0
 - \$50,000 to CGA, ~~CRUT or CRAT~~
 - 2024 = \$53,000
- Bunching deductions

SCHEDULE B (Form 1040)

Department of the Treasury Internal Revenue Service

Interest and Ordinary Dividends

Attach to Form 1040 or 1040-SR.

Go to www.irs.gov/ScheduleB for instructions and the latest information.

OMB No. 1545-0074

2023

Attachment Sequence No. 08

Name(s) shown on return Your social security number

Part I Interest
1 List name of payer. If any interest is from a seller-financed mortgage and the buyer used the property as a personal residence, see the instructions and list this interest first. Also, show that buyer's social security number and address:
(See instructions and the Instructions for Form 1040, line 2b.)
Note: If you received a Form 1099-INT, Form 1099-OID, or substitute statement from a brokerage firm, list the firm's name as the payer and enter the total interest shown on that form.
2 Add the amounts on line 1
3 Excludable interest on series EE and I U.S. savings bonds issued after 1989. Attach Form 8815
4 Subtract line 3 from line 2. Enter the result here and on Form 1040 or 1040-SR, line 2b

Part II Ordinary Dividends
5 List name of payer:
(See instructions and the Instructions for Form 1040, line 3b.)
Note: If you received a Form 1099-DIV or substitute statement from a brokerage firm, list the firm's name as the payer and enter the ordinary dividends shown on that form.
6 Add the amounts on line 5. Enter the total here and on Form 1040 or 1040-SR, line 3b
Note: If line 6 is over \$1,500, you must complete Part III.

Part III Foreign Accounts and Trusts
You must complete this part if you (a) had over \$1,500 of taxable interest or ordinary dividends; (b) had a foreign account; or (c) received a distribution from, or were a grantor of, or a transferor to, a foreign trust.

7a At any time during 2023, did you have a financial interest in or signature authority over a financial account (such as a bank account, securities account, or brokerage account) located in a foreign country? See instructions
If "Yes," are you required to file FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR), to report that financial interest or signature authority? See FinCEN Form 114 and its instructions for filing requirements and exceptions to those requirements
b If you are required to file FinCEN Form 114, list the name(s) of the foreign country(-ies) where the financial account(s) is (are) located:
8 During 2023, did you receive a distribution from, or were you the grantor of, or transferor to, a foreign trust? If "Yes," you may have to file Form 3520. See instructions

Part III Foreign Accounts and Trusts

You must complete this part if you (a) had over \$1,500 of taxable interest or ordinary dividends; (b) had a foreign account; or (c) received a distribution from, or were a grantor of, or a transferor to, a foreign trust.

Caution: If required, failure to file FinCEN Form 114 may result in substantial penalties. Additionally, you may be required to file Form 8938, Statement of Specified Foreign Financial Assets. See instructions.

	Yes	No
7a At any time during 2023, did you have a financial interest in or signature authority over a financial account (such as a bank account, securities account, or brokerage account) located in a foreign country? See instructions	<input type="checkbox"/>	<input type="checkbox"/>
If "Yes," are you required to file FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR), to report that financial interest or signature authority? See FinCEN Form 114 and its instructions for filing requirements and exceptions to those requirements	<input type="checkbox"/>	<input type="checkbox"/>
b If you are required to file FinCEN Form 114, list the name(s) of the foreign country(-ies) where the financial account(s) is (are) located: _____ _____		
8 During 2023, did you receive a distribution from, or were you the grantor of, or transferor to, a foreign trust? If "Yes," you may have to file Form 3520. See instructions	<input type="checkbox"/>	<input type="checkbox"/>

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.		Payer's RTN (optional)		OMB No. 1545-0112		Interest Income
		1 Interest income		Form 1099-INT (Rev. January 2022)		
		\$		For calendar year 20 ____		
PAYER'S TIN		RECIPIENT'S TIN		2 Early withdrawal penalty		Copy A
				\$		
				3 Interest on U.S. Savings Bonds and Treasury obligations		For Internal Revenue Service Center
				\$		
RECIPIENT'S name		4 Federal income tax withheld		5 Investment expenses		File with Form 1096. For Privacy Act and Paperwork Reduction Act Notice, see the current General Instructions for Certain Information Returns.
		\$		\$		
Street address (including apt. no.)		6 Foreign tax paid		7 Foreign country or U.S. possession		
		\$				
City or town, state or province, country, and ZIP or foreign postal code		8 Tax-exempt interest		9 Specified private activity bond interest		
		\$		\$		
		10 Market discount		11 Bond premium		
		\$		\$		
		12 Bond premium on Treasury obligations		13 Bond premium on tax-exempt bond		
		\$		\$		
Account number (see instructions)		2nd TIN not.		14 Tax-exempt and tax credit bond CUSIP no.		17 State tax withheld \$ ----- \$
		<input type="checkbox"/>		15 State 16 State identification no.		

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.		1a Total ordinary dividends		OMB No. 1545-0110		
		\$		Form 1099-DIV		
		1b Qualified dividends		(Rev. January 2022)		
		\$		For calendar year		
				20 ____		
2a Total capital gain distr.		2b Unrecap. Sec. 1250 gain		<p align="center">Copy A For Internal Revenue Service Center</p> <p>File with Form 1096.</p> <p>For Privacy Act and Paperwork Reduction Act Notice, see the current General Instructions for Certain Information Returns.</p>		
\$		\$				
PAYER'S TIN	RECIPIENT'S TIN	2c Section 1202 gain	2d Collectibles (28%) gain			
		\$	\$			
		2e Section 897 ordinary dividends	2f Section 897 capital gain			
		\$	\$			
RECIPIENT'S name		3 Nondividend distributions	4 Federal income tax withheld			
		\$	\$			
Street address (including apt. no.)		5 Section 199A dividends	6 Investment expenses			
		\$	\$			
City or town, state or province, country, and ZIP or foreign postal code		7 Foreign tax paid	8 Foreign country or U.S. possession			
		\$				
		9 Cash liquidation distributions	10 Noncash liquidation distributions			
		\$	\$			
		11 FATCA filing requirement	12 Exempt-interest dividends			13 Specified private activity bond interest dividends
		<input type="checkbox"/>	\$			\$
Account number (see instructions)	2nd TIN not.	14 State	15 State identification no.			16 State tax withheld
	<input type="checkbox"/>					\$
				\$		

Schedule B

- Sources of interest and dividend income
- Tax efficient investing
- Other planning opportunities

SCHEDULE C (Form 1040)

Profit or Loss From Business (Sole Proprietorship)

OMB No. 1545-0074

2023

Department of the Treasury Internal Revenue Service

Attach to Form 1040, 1040-SR, 1040-SS, 1040-NR, or 1041; partnerships must generally file Form 1065. Go to www.irs.gov/ScheduleC for instructions and the latest information.

Attachment Sequence No. 09

Name of proprietor, Social security number (SSN), Principal business or profession, Business name, Business address, Accounting method, Did you materially participate, etc.

Part I Income

Table with 7 rows for income calculation: 1 Gross receipts or sales, 2 Returns and allowances, 3 Subtract line 2 from line 1, 4 Cost of goods sold, 5 Gross profit, 6 Other income, 7 Gross income.

Part II Expenses. Enter expenses for business use of your home only on line 30.

Table with 28 rows for expenses: 8 Advertising, 9 Car and truck expenses, 10 Commissions and fees, 11 Contract labor, 12 Depletion, 13 Depreciation and section 179 expense deduction, 14 Employee benefit programs, 15 Insurance, 16 Interest, 17 Legal and professional services, 18 Office expense, 19 Pension and profit-sharing plans, 20 Rent or lease, 21 Repairs and maintenance, 22 Supplies, 23 Taxes and licenses, 24 Travel and meals, 25 Utilities, 26 Wages, 27a Other expenses, 27b Energy efficient commercial bldgs deduction.

28 Total expenses before expenses for business use of home. Add lines 8 through 27b. 29 Tentative profit or (loss). Subtract line 28 from line 7.

30 Expenses for business use of your home. Do not report these expenses elsewhere. Attach Form 8829 unless using the simplified method. See instructions. Simplified method filers only: Enter the total square footage of (a) your home: and (b) the part of your home used for business: Use the Simplified Method Worksheet in the instructions to figure the amount to enter on line 30.

31 Net profit or (loss). Subtract line 30 from line 29. 32 If you have a loss, check the box that describes your investment in this activity. See instructions. 32a All investment is at risk. 32b Some investment is not at risk.

Part III Cost of Goods Sold (see instructions)

33 Method(s) used to value closing inventory: **a** Cost **b** Lower of cost or market **c** Other (attach explanation)

34 Was there any change in determining quantities, costs, or valuations between opening and closing inventory? If "Yes," attach explanation Yes No

35 Inventory at beginning of year. If different from last year's closing inventory, attach explanation	35	
36 Purchases less cost of items withdrawn for personal use	36	
37 Cost of labor. Do not include any amounts paid to yourself	37	
38 Materials and supplies	38	
39 Other costs	39	
40 Add lines 35 through 39	40	
41 Inventory at end of year	41	
42 Cost of goods sold. Subtract line 41 from line 40. Enter the result here and on line 4	42	

Part IV Information on Your Vehicle. Complete this part **only** if you are claiming car or truck expenses on line 9 and are not required to file Form 4562 for this business. See the instructions for line 13 to find out if you must file Form 4562.

43 When did you place your vehicle in service for business purposes? (month/day/year) _____ / _____ / _____

44 Of the total number of miles you drove your vehicle during 2023, enter the number of miles you used your vehicle for:

a Business _____ **b** Commuting (see instructions) _____ **c** Other _____

45 Was your vehicle available for personal use during off-duty hours? Yes No

46 Do you (or your spouse) have another vehicle available for personal use? Yes No

47a Do you have evidence to support your deduction? Yes No

b If "Yes," is the evidence written? Yes No

Part V Other Expenses. List below business expenses not included on lines 8–26, line 27b, or line 30.

48 Total other expenses. Enter here and on line 27a	48	

Schedule C

- Self employment income
- Entity selection
- Retirement plans

**SCHEDULE D
(Form 1040)**

Capital Gains and Losses

OMB No. 1545-0074

2023

Department of the Treasury
Internal Revenue Service

Attach to Form 1040, 1040-SR, or 1040-NR.
Use Form 8949 to list your transactions for lines 1b, 2, 3, 8b, 9, and 10.
Go to www.irs.gov/ScheduleD for instructions and the latest information.

Attachment
Sequence No. **12**

Name(s) shown on return

Your social security number

Did you dispose of any investment(s) in a qualified opportunity fund during the tax year? Yes No

If "Yes," attach Form 8949 and see its instructions for additional requirements for reporting your gain or loss.

Part I Short-Term Capital Gains and Losses—Generally Assets Held One Year or Less (see instructions)

See instructions for how to figure the amounts to enter on the lines below.

This form may be easier to complete if you round off cents to whole dollars.

	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gain or loss from Form(s) 8949, Part I, line 2, column (g)	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
1a Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b				
1b Totals for all transactions reported on Form(s) 8949 with Box A checked				
2 Totals for all transactions reported on Form(s) 8949 with Box B checked				
3 Totals for all transactions reported on Form(s) 8949 with Box C checked				
4 Short-term gain from Form 6252 and short-term gain or (loss) from Forms 4684, 6781, and 8824				4
5 Net short-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1				5
6 Short-term capital loss carryover. Enter the amount, if any, from line 8 of your Capital Loss Carryover Worksheet in the instructions				6 ()
7 Net short-term capital gain or (loss) . Combine lines 1a through 6 in column (h). If you have any long-term capital gains or losses, go to Part II below. Otherwise, go to Part III on the back				7

Part II Long-Term Capital Gains and Losses—Generally Assets Held More Than One Year (see instructions)

See instructions for how to figure the amounts to enter on the lines below.

This form may be easier to complete if you round off cents to whole dollars.

	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gain or loss from Form(s) 8949, Part II, line 2, column (g)	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
8a Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b				
8b Totals for all transactions reported on Form(s) 8949 with Box D checked				
9 Totals for all transactions reported on Form(s) 8949 with Box E checked				
10 Totals for all transactions reported on Form(s) 8949 with Box F checked				
11 Gain from Form 4797, Part I; long-term gain from Forms 2439 and 6252; and long-term gain or (loss) from Forms 4684, 6781, and 8824				11
12 Net long-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1				12
13 Capital gain distributions. See the instructions				13
14 Long-term capital loss carryover. Enter the amount, if any, from line 13 of your Capital Loss Carryover Worksheet in the instructions				14 ()
15 Net long-term capital gain or (loss) . Combine lines 8a through 14 in column (h). Then, go to Part III on the back				15

Schedule D

- Employee Stock Plans
- Capital loss carryovers
- Capital gains tax brackets
- Capital gains harvesting
- Capital loss harvesting
- Qualified Small Business Stock (§1202 stock)
- Qualified Opportunity Zone Funds

2023 Long-Term Capital Gains Tax Rates

Tax filing status	0% rate	15% rate	20% rate
Single	Taxable income of up to \$44,625	\$44,625 to \$492,300	Over \$492,300
Married filing jointly	Taxable income of up to \$89,250	\$89,250 to \$553,850	Over \$553,850
Married filing separately	Taxable income of up to \$44,625	\$44,625 to \$276,900	Over \$276,900
Head of household	Taxable income of up to \$59,750	\$59,750 to \$523,050	Over \$523,050

Maximum Capital Gains Rates

2024 Official Annual Adjustment

Filing Status	Maximum Zero Rate Amount:	Maximum 15% Rate Amount:
Married Filing Jointly & Surviving Spouses	\$94,050	\$583,750
Married Filing Separately	\$47,025	\$291,850
Heads of Household	\$63,000	\$551,350
Individual Taxpayers	\$47,025	\$518,900
Trusts and Estates	\$3,150	\$15,450

2023 Federal Income Tax Brackets

Tax rate	Single	Married filing jointly	Married filing separately	Head of household
10%	Taxable income of \$0 to \$10,275	Taxable income of \$0 to \$20,550	Taxable income of \$0 to \$10,275	Taxable income of \$0 to \$14,650
12%	Over \$10,275 but not over \$41,775	Over \$20,550 but not over \$83,550	Over \$10,275 but not over \$41,775	Over \$14,650 but not over \$55,900
22%	Over \$41,775 but not over \$89,075	Over \$83,550 but not over \$178,150	Over \$41,775 but not over \$89,075	Over \$55,900 but not over \$89,050
24%	Over \$89,075 but not over \$170,050	Over \$178,150 but not over \$340,100	Over \$89,075 but not over \$170,050	Over \$89,050 but not over \$170,050
32%	Over \$170,050 but not over \$215,950	Over \$340,100 but not over \$431,900	Over \$170,050 but not over \$215,950	Over \$170,050 but not over \$215,950
35%	Over \$215,950 but not over \$539,900	Over \$431,900 but not over \$647,850	Over \$215,950 but not over \$323,925	Over \$215,950 but not over \$539,900
37%	Over \$539,900	Over \$647,850	Over \$323,925	Over \$539,900

Single Taxpayers

2024 Official Tax Brackets

If Taxable Income Is:	The Tax Due Is:
0 - \$11,600	10% of taxable income
\$11,601 - \$47,150	\$1,160 + 12% of the amount over \$11,600
\$47,151 - \$100,525	\$5,426 + 22% of the amount over \$47,150
\$100,526 - \$191,950	\$17,168.50 + 24% of the amount over \$100,525
\$191,951 - \$243,725	\$39,110.50 + 32% of the amount over \$191,950
\$243,726 - \$609,350	\$55,678.50 + 35% of the amount over \$243,725
\$609,351+	\$183,647.25 + 37% of the amount over \$609,350

Married Taxpayers Filing Jointly

2024 Official Tax Brackets

If Taxable Income Is:	The Tax Due Is:
0 - \$23,200	10% of taxable income
\$23,201 - \$94,300	\$2,320 + 12% of the amount over \$23,200
\$94,301 - \$201,050	\$10,852 + 22% of the amount over \$94,300
\$201,051 - \$383,900	\$34,337 + 24% of the amount over \$201,050
\$383,901 - \$487,450	\$78,221 + 32% of the amount over \$383,900
\$487,451 - \$731,200	\$111,357 + 35% of the amount over \$487,450
\$731,201 +	\$196,669.50 + 37% of the amount over \$731,200

Married Filing Separately

2024 Official Tax Brackets

If Taxable Income Is:	The Tax Is:
\$0 - \$11,600	10% of taxable income
\$11,601 - \$47,150	\$1,160 + 12% of the amount over \$11,600
\$47,151 - \$100,525	\$5,426 + 22% of the amount over \$47,150
\$100,526 - \$191,950	\$17,168.50 + 24% of the amount over \$100,525
\$191,951 - \$243,725	\$39,110.50 + 32% of the amount over \$191,950
\$243,726 - \$365,600	\$55,678.50 + 35% of the amount over \$243,725
\$365,601+	\$98,334.75 + 37% of the amount over \$365,600

Head Of Household

2024 Official Tax Brackets

If Taxable Income Is:	The Tax Due Is:
0 - \$16,550	10% of taxable income
\$16,551 - \$63,100	\$1,655 + 12% of the amount over \$16,550
\$63,101 - \$100,500	\$7,241 + 22% of the amount over \$63,100
\$100,501 - \$191,950	\$15,469 + 24% of the amount over \$100,500
\$191,951 - \$243,700	\$37,417 + 32% of the amount over \$191,950
\$243,701 - \$609,350	\$53,977 + 35% of the amount over \$243,700
\$609,351+	\$181,954.50 + 37% of the amount over \$609,350

SCHEDULE E (Form 1040)

Supplemental Income and Loss

(From rental real estate, royalties, partnerships, S corporations, estates, trusts, REMICs, etc.)

OMB No. 1545-0074

2023 Attachment Sequence No. 13

Department of the Treasury Internal Revenue Service

Attach to Form 1040, 1040-SR, 1040-NR, or 1041. Go to www.irs.gov/ScheduleE for instructions and the latest information.

Name(s) shown on return

Your social security number

Part I Income or Loss From Rental Real Estate and Royalties

Note: If you are in the business of renting personal property, use Schedule C. See instructions. If you are an individual, report farm rental income or loss from Form 4835 on page 2, line 40.

- A Did you make any payments in 2023 that would require you to file Form(s) 1099? See instructions. B If "Yes," did you or will you file required Form(s) 1099?

1a Physical address of each property (street, city, state, ZIP code)

Table with columns A, B, C for address information.

Table with columns 1b Type of Property, 2 Fair Rental Days, Personal Use Days, QJV.

Type of Property:

- 1 Single Family Residence, 2 Multi-Family Residence, 3 Vacation/Short-Term Rental, 4 Commercial, 5 Land, 6 Royalties, 7 Self-Rental, 8 Other (describe)

Main income and expense table with columns for Properties A, B, C and rows for Income (rents, royalties) and Expenses (advertising, travel, etc.).

Name(s) shown on return. Do not enter name and social security number if shown on other side. Your social security number

Caution: The IRS compares amounts reported on your tax return with amounts shown on Schedule(s) K-1.

Part II Income or Loss From Partnerships and S Corporations

Note: If you report a loss, receive a distribution, dispose of stock, or receive a loan repayment from an S corporation, you must check the box in column (e) on line 28 and attach the required basis computation. If you report a loss from an at-risk activity for which any amount is not at risk, you must check the box in column (f) on line 28 and attach Form 6196. See instructions.

27 Are you reporting any loss not allowed in a prior year due to the at-risk or basis limitations, a prior year unallowed loss from a passive activity (if that loss was not reported on Form 8582), or unreimbursed partnership expenses? If you answered "Yes," see instructions before completing this section Yes No

Table with 7 columns: (a) Name, (b) Enter P for partnership; S for S corporation, (c) Check if foreign partnership, (d) Employer identification number, (e) Check if basis computation is required, (f) Check if any amount is not at risk. Rows A, B, C, D.

Table with 5 columns: (g) Passive loss allowed (attach Form 8582 if required), (h) Passive income from Schedule K-1, (i) Nonpassive loss allowed (see Schedule K-1), (j) Section 179 expense deduction from Form 4562, (k) Nonpassive income from Schedule K-1. Rows A, B, C, D, 29a Totals, 29b Totals, 30, 31, 32.

Part III Income or Loss From Estates and Trusts

Table with 2 columns: (a) Name, (b) Employer identification number. Rows A, B.

Table with 4 columns: (c) Passive deduction or loss allowed (attach Form 8582 if required), (d) Passive income from Schedule K-1, (e) Deduction or loss from Schedule K-1, (f) Other income from Schedule K-1. Rows A, B, 34a Totals, 34b Totals, 35, 36, 37.

Part IV Income or Loss From Real Estate Mortgage Investment Conduits (REMICs) - Residual Holder

Table with 5 columns: (a) Name, (b) Employer identification number, (c) Excess inclusion from Schedules O, line 2c (see instructions), (d) Taxable income (net loss) from Schedules O, line 1b, (e) Income from Schedules O, line 3b. Row 38, 39.

Part V Summary

Table with 2 columns: Description, Amount. Rows 40, 41, 42, 43.

Schedule E

- Unrealized gain in real estate
 - 1031 exchanges
 - Charitable planning
- Qualified Business Income Deduction (§199A)
- Flow through income from LLCs and S corporations
 - Basis
 - At risk
 - Passive losses
- Is there income flowing from a trust

Name. If married, file a separate form for each spouse required to file 2023 Form 8606. See instructions. Your social security number

Fill in Your Address Only if You Are Filing This Form by Itself and Not With Your Tax Return

Home address (number and street, or P.O. box if mail is not delivered to your home) Apt. no.

City, town or post office, state, and ZIP code. If you have a foreign address, also complete the spaces below (see instructions).

Foreign country name Foreign province/state/county Foreign postal code

Part I Nondeductible Contributions to Traditional IRAs and Distributions From Traditional, Traditional SEP, and Traditional SIMPLE IRAs

Complete this part only if one or more of the following apply.

- You made nondeductible contributions to a traditional IRA for 2023.
- You took distributions from a traditional, traditional SEP, or traditional SIMPLE IRA in 2023 **and** you made nondeductible contributions to a traditional IRA in 2023 or an earlier year. For this purpose, a distribution does not include a rollover (other than certain qualified disaster distribution repayments from 2023 Form(s) 8915-F), qualified charitable distribution, one-time distribution to fund an HSA, conversion, recharacterization, or return of certain contributions.
- You converted part, but not all, of your traditional, traditional SEP, and traditional SIMPLE IRAs to Roth, Roth SEP, or Roth SIMPLE IRAs in 2023 **and** you made nondeductible contributions to a traditional IRA in 2023 or an earlier year.

1	Enter your nondeductible contributions to traditional IRAs for 2023, including those made for 2023 from January 1, 2024, through April 15, 2024. See instructions				
2	Enter your total basis in traditional IRAs. See instructions				
3	Add lines 1 and 2				
	<p>In 2023, did you take a distribution from traditional, traditional SEP, or traditional SIMPLE IRAs, or make a Roth, Roth SEP, or Roth SIMPLE IRA conversion?</p> <p style="margin-left: 20px;">— No — Enter the amount from line 3 on line 14. Do not complete the rest of Part I.</p> <p style="margin-left: 20px;">— Yes — Go to line 4.</p>				
4	Enter those contributions included on line 1 that were made from January 1, 2024, through April 15, 2024				
5	Subtract line 4 from line 3				
6	Enter the value of all your traditional, traditional SEP, and traditional SIMPLE IRAs as of December 31, 2023, plus any outstanding rollovers. Subtract certain repayments of qualified disaster distributions, if any, from 2023 Form(s) 8915-F (see instructions)				
7	Enter your distributions from traditional, traditional SEP, and traditional SIMPLE IRAs in 2023. Do not include rollovers (other than repayments of qualified disaster distributions, if any, from 2023 Form(s) 8915-F (see instructions)); qualified charitable distributions; a one-time distribution to fund an HSA; conversions to a Roth, Roth SEP, or Roth SIMPLE IRA; certain returned contributions; or recharacterizations of traditional IRA contributions (see instructions)				
8	Enter the net amount you converted from traditional, traditional SEP, and traditional SIMPLE IRAs to Roth, Roth SEP, or Roth SIMPLE IRAs in 2023. Also, enter this amount on line 16				
9	Add lines 6, 7, and 8				
10	Divide line 5 by line 9. Enter the result as a decimal rounded to at least 3 places. If the result is 1.000 or more, enter "1.000"		x		
11	Multiply line 8 by line 10. This is the nontaxable portion of the amount you converted to Roth, Roth SEP, or Roth SIMPLE IRAs. Also, enter this amount on line 17				
12	Multiply line 7 by line 10. This is the nontaxable portion of your distributions that you did not convert to a Roth, Roth SEP, or Roth SIMPLE IRA				
13	Add lines 11 and 12. This is the nontaxable portion of all your distributions				
14	Subtract line 13 from line 3. This is your total basis in traditional IRAs for 2023 and earlier years				
15a	Subtract line 12 from line 7				
b	Enter the amount on line 15a attributable to qualified disaster distributions, if any, from 2023 Form(s) 8915-F (see instructions). Also, enter this amount on 2023 Form(s) 8915-F, line 18, as applicable (see instructions)				
c	Taxable amount. Subtract line 15b from line 15a. If more than zero, also include this amount on 2023 Form 1040, 1040-SR, or 1040-NR, line 4b				
	Note: You may be subject to an additional 10% tax on the amount on line 15c if you were under age 59½ at the time of the distribution. See instructions.				

Part II 2023 Conversions From Traditional, Traditional SEP, or Traditional SIMPLE IRAs to Roth, Roth SEP, or Roth SIMPLE IRAs

Complete this part if you converted part or all of your traditional, traditional SEP, and traditional SIMPLE IRAs to a Roth, Roth SEP, or Roth SIMPLE IRA in 2023.

16	If you completed Part I, enter the amount from line 8. Otherwise, enter the net amount you converted from traditional, traditional SEP, and traditional SIMPLE IRAs to Roth, Roth SEP, or Roth SIMPLE IRAs in 2023			
		16		
17	If you completed Part I, enter the amount from line 11. Otherwise, enter your basis in the amount on line 16 (see instructions)			
		17		
18	Taxable amount. Subtract line 17 from line 16. If more than zero, also include this amount on 2023 Form 1040, 1040-SR, or 1040-NR, line 4b			
		18		

Part III Distributions From Roth, Roth SEP, or Roth SIMPLE IRAs

Complete this part only if you took a distribution from a Roth, Roth SEP, or Roth SIMPLE IRA in 2023. For this purpose, a distribution does not include a rollover (other than a repayment of a qualified disaster distribution from 2023 Form(s) 8915-F (see instructions)), qualified charitable distribution, one-time distribution to fund an HSA, recharacterization, or return of certain contributions (see instructions).

19	Enter your total nonqualified distributions from Roth, Roth SEP, and Roth SIMPLE IRAs in 2023, including any qualified first-time homebuyer distributions, and any qualified disaster distributions from 2023 Form(s) 8915-F (see instructions)			
		19		
20	Qualified first-time homebuyer expenses (see instructions). Do not enter more than \$10,000 reduced by the total of all your prior qualified first-time homebuyer distributions			
		20		
21	Subtract line 20 from line 19. If zero or less, enter -0-			
		21		
22	Enter your basis in Roth, Roth SEP, and Roth SIMPLE IRA contributions (see instructions). If line 21 is zero, stop here			
		22		
23	Subtract line 22 from line 21. If zero or less, enter -0- and skip lines 24 and 25. If more than zero, you may be subject to an additional tax (see instructions)			
		23		
24	Enter your basis in conversions from traditional, traditional SEP, and traditional SIMPLE IRAs and rollovers from qualified retirement plans to a Roth, Roth SEP, or Roth SIMPLE IRA. See instructions			
		24		
25a	Subtract line 24 from line 23. If zero or less, enter -0- and skip lines 25b and 25c			
		25a		
b	Enter the amount on line 25a attributable to qualified disaster distributions, if any, from 2023 Form(s) 8915-F (see instructions). Also, enter this amount on 2023 Form(s) 8915-F, line 19, as applicable (see instructions)			
		25b		
c	Taxable amount. Subtract line 25b from line 25a. If more than zero, also include this amount on 2023 Form 1040, 1040-SR, or 1040-NR, line 4b			
		25c		

Sign Here Only if You Are Filing This Form by Itself and Not With Your Tax Return

Under penalties of perjury, I declare that I have examined this form, including accompanying attachments, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Your signature Date

Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
	Firm's name			Firm's EIN	
	Firm's address			Phone no.	

**Additional Taxes on Qualified Plans
(Including IRAs) and Other Tax-Favored Accounts**

Attach to Form 1040, 1040-SR, or 1040-NR.

Go to www.irs.gov/Form5329 for instructions and the latest information.

Name of individual subject to additional tax. If married filing jointly, see instructions. Your social security number

Fill in Your Address Only if You Are Filing This Form by Itself and Not With Your Tax Return	Home address (number and street), or P.O. box if mail is not delivered to your home		Apt. no.
	City, town or post office, state, and ZIP code. If you have a foreign address, also complete the spaces below. See instructions.		If this is an amended return, check here <input type="checkbox"/>
	Foreign country name	Foreign province/state/county	

If you **only** owe the additional 10% tax on the full amount of the early distributions, you may be able to report this tax directly on Schedule 2 (Form 1040), line 8, without filing Form 5329. See instructions.

Part I Additional Tax on Early Distributions. Complete this part if you took a taxable distribution (other than a qualified disaster distribution) before you reached age 59½ from a qualified retirement plan (including an IRA) or modified endowment contract (unless you are reporting this tax directly on Schedule 2 (Form 1040)—see above). You may also have to complete this part to indicate that you qualify for an exception to the additional tax on early distributions or for certain Roth IRA distributions. See instructions.

1	Early distributions includible in income (see instructions). For Roth IRA distributions, see instructions.		
2	Early distributions included on line 1 that are not subject to the additional tax (see instructions). Enter the appropriate exception number from the instructions: _____		
3	Amount subject to additional tax. Subtract line 2 from line 1		
4	Additional tax. Enter 10% (0.10) of line 3. Include this amount on Schedule 2 (Form 1040), line 8 . . .		
Caution: If any part of the amount on line 3 was a distribution from a SIMPLE IRA, you may have to include 25% of that amount on line 4 instead of 10%. See instructions.			

Part II Additional Tax on Certain Distributions From Education Accounts and ABLÉ Accounts. Complete this part if you included an amount in income, on Schedule 1 (Form 1040), line 8z, from a Coverdell education savings account (ESA) or a qualified tuition program (QTP), or on Schedule 1 (Form 1040), line 8q, from an ABLÉ account.

5	Distributions included in income from a Coverdell ESA, a QTP, or an ABLÉ account		
6	Distributions included on line 5 that are not subject to the additional tax (see instructions)		
7	Amount subject to additional tax. Subtract line 6 from line 5		
8	Additional tax. Enter 10% (0.10) of line 7. Include this amount on Schedule 2 (Form 1040), line 8		

Part III Additional Tax on Excess Contributions to Traditional IRAs. Complete this part if you contributed more to your traditional IRAs for 2022 than is allowable or you had an amount on line 17 of your 2021 Form 5329.

9	Enter your excess contributions from line 16 of your 2021 Form 5329. See instructions. If zero, go to line 15		
10	If your traditional IRA contributions for 2022 are less than your maximum allowable contribution, see instructions. Otherwise, enter -0-	10	
11	2022 traditional IRA distributions included in income (see instructions)	11	
12	2022 distributions of prior year excess contributions (see instructions)	12	
13	Add lines 10, 11, and 12		13
14	Prior year excess contributions. Subtract line 13 from line 9. If zero or less, enter -0-		14
15	Excess contributions for 2022 (see instructions)		15
16	Total excess contributions. Add lines 14 and 15		16
17	Additional tax. Enter 6% (0.06) of the smaller of line 16 or the value of your traditional IRAs on December 31, 2022 (including 2022 contributions made in 2023). Include this amount on Schedule 2 (Form 1040), line 8		17

Part IV Additional Tax on Excess Contributions to Roth IRAs. Complete this part if you contributed more to your Roth IRAs for 2022 than is allowable or you had an amount on line 25 of your 2021 Form 5329.

18	Enter your excess contributions from line 24 of your 2021 Form 5329. See instructions. If zero, go to line 23		
19	If your Roth IRA contributions for 2022 are less than your maximum allowable contribution, see instructions. Otherwise, enter -0-	19	
20	2022 distributions from your Roth IRAs (see instructions)	20	
21	Add lines 19 and 20		21
22	Prior year excess contributions. Subtract line 21 from line 18. If zero or less, enter -0-		22
23	Excess contributions for 2022 (see instructions)		23
24	Total excess contributions. Add lines 22 and 23		24
25	Additional tax. Enter 6% (0.06) of the smaller of line 24 or the value of your Roth IRAs on December 31, 2022 (including 2022 contributions made in 2023). Include this amount on Schedule 2 (Form 1040), line 8		25

Part V Additional Tax on Excess Contributions to Coverdell ESAs. Complete this part if the contributions to your Coverdell ESAs for 2022 were more than is allowable or you had an amount on line 33 of your 2021 Form 5329.

26	Enter the excess contributions from line 32 of your 2021 Form 5329. See instructions. If zero, go to line 31	26	
27	If the contributions to your Coverdell ESAs for 2022 were less than the maximum allowable contribution, see instructions. Otherwise, enter -0-	27	
28	2022 distributions from your Coverdell ESAs (see instructions)	28	
29	Add lines 27 and 28	29	
30	Prior year excess contributions. Subtract line 29 from line 26. If zero or less, enter -0-	30	
31	Excess contributions for 2022 (see instructions)	31	
32	Total excess contributions. Add lines 30 and 31	32	
33	Additional tax. Enter 6% (0.06) of the smaller of line 32 or the value of your Coverdell ESAs on December 31, 2022 (including 2022 contributions made in 2023). Include this amount on Schedule 2 (Form 1040), line 8	33	

Part VI Additional Tax on Excess Contributions to Archer MSAs. Complete this part if you or your employer contributed more to your Archer MSAs for 2022 than is allowable or you had an amount on line 41 of your 2021 Form 5329.

34	Enter the excess contributions from line 40 of your 2021 Form 5329. See instructions. If zero, go to line 39	34	
35	If the contributions to your Archer MSAs for 2022 are less than the maximum allowable contribution, see instructions. Otherwise, enter -0-	35	
36	2022 distributions from your Archer MSAs from Form 8853, line 8	36	
37	Add lines 35 and 36	37	
38	Prior year excess contributions. Subtract line 37 from line 34. If zero or less, enter -0-	38	
39	Excess contributions for 2022 (see instructions)	39	
40	Total excess contributions. Add lines 38 and 39	40	
41	Additional tax. Enter 6% (0.06) of the smaller of line 40 or the value of your Archer MSAs on December 31, 2022 (including 2022 contributions made in 2023). Include this amount on Schedule 2 (Form 1040), line 8	41	

Part VII Additional Tax on Excess Contributions to Health Savings Accounts (HSAs). Complete this part if you, someone on your behalf, or your employer contributed more to your HSAs for 2022 than is allowable or you had an amount on line 49 of your 2021 Form 5329.

42	Enter the excess contributions from line 48 of your 2021 Form 5329. If zero, go to line 47	42	
43	If the contributions to your HSAs for 2022 are less than the maximum allowable contribution, see instructions. Otherwise, enter -0-	43	
44	2022 distributions from your HSAs from Form 8889, line 16	44	
45	Add lines 43 and 44	45	
46	Prior year excess contributions. Subtract line 45 from line 42. If zero or less, enter -0-	46	
47	Excess contributions for 2022 (see instructions)	47	
48	Total excess contributions. Add lines 46 and 47	48	
49	Additional tax. Enter 6% (0.06) of the smaller of line 48 or the value of your HSAs on December 31, 2022 (including 2022 contributions made in 2023). Include this amount on Schedule 2 (Form 1040), line 8	49	

Part VIII Additional Tax on Excess Contributions to an ABLER Account. Complete this part if contributions to your ABLER account for 2022 were more than is allowable.

50	Excess contributions for 2022 (see instructions)	50	
51	Additional tax. Enter 6% (0.06) of the smaller of line 50 or the value of your ABLER account on December 31, 2022. Include this amount on Schedule 2 (Form 1040), line 8	51	

Part IX Additional Tax on Excess Accumulation in Qualified Retirement Plans (Including IRAs). Complete this part if you did not receive the minimum required distribution from your qualified retirement plan.

52	Minimum required distribution for 2022 (see instructions)	52	
53	Amount actually distributed to you in 2022	53	
54	Subtract line 53 from line 52. If zero or less, enter -0-	54	
55	Additional tax. Enter 50% (0.50) of line 54. Include this amount on Schedule 2 (Form 1040), line 8	55	

Sign Here Only if You Are Filing This Form by Itself and Not With Your Tax Return Under penalties of perjury, I declare that I have examined this form, including accompanying attachments, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Print/Type preparer's name		Preparer's signature		Date	
Firm's name		Firm's EIN		Check <input type="checkbox"/> if self-employed	
Firm's address		Phone no.		PTIN	

Exceptions to Early Distribution Tax

- 01 – Rule of 55 (or 50 for qualified public safety employees)
 - SECURE 2.0 – includes employees with 25 years of service
- 02 – Substantial Equal Periodic Payments (SEPP) aka 72(t)
- 03 – Total and permanent disability
- 04 – Death
- 05 – Unreimbursed medical expenses minus 7.5% of AGI
- 06 – QDRO (does not apply to IRAs)
- 07 – IRA distributions made to unemployed individuals for health insurance premiums

Exceptions to Early Distribution Tax

- 08 – IRA distributions for qualified higher education expenses
- 09 – IRA distributions for purchase of first home, up to \$10,000
- 10 – Qualified retirement plan distributions due to an IRS levy
- 11 – Reservists while serving on active duty for at least 180 days
- 12 – Distributions incorrectly indicated as early distributions by code 1, J, or S in Box 7 of Form 1099R.
- 13 – Distributions from 457 plan which are not from a rollover from a qualified retirement plan

Exceptions to Early Distribution Tax

- 19 – Qualified birth or adoption distributions
 - Attach statement that provides the name, age, and TIN of child or adoptee
- 20 – Distributions due to terminal illness made on or after December 30, 2022
 - Physician certification that expected to result in death in 84 months or less after the date of certification
- 21 - Corrective distributions made on or after December 29, 2022
 - The income on excess contributions distributed before the due date of the tax return (including extensions)
- 99 – Enter this code if more than one exception applies

Exceptions to Early Distribution Tax

- 2024
 - Emergency expenses up to \$1,000 per year
 - Can repay in three years
 - No further emergency distributions are permissible during the three-year period unless repayment occurs
 - Domestic abuse survivor
 - Self-certify they experienced domestic abuse
 - Lesser of \$10,000 or 50% of participant's account
 - Can repay over three years

Name(s) shown on Form 1040, 1040-SR, or 1040-NR

Social security number of HSA beneficiary. If both spouses have HSAs, see instructions.

Before you begin: Complete Form 8853, Archer MSAs and Long-Term Care Insurance Contracts, if required.

Part I HSA Contributions and Deduction. See the instructions before completing this part. If you are filing jointly and both you and your spouse each have separate HSAs, complete a separate Part I for each spouse.

1 Check the box to indicate your coverage under a high-deductible health plan (HDHP) during 2023. See instructions. Self-only Family
2 HSA contributions you made for 2023 (or those made on your behalf), including those made by the unextended due date of your tax return that were for 2023. Do not include employer contributions, contributions through a cafeteria plan, or rollovers. See instructions
3 If you were under age 55 at the end of 2023 and, on the first day of every month during 2023, you were, or were considered, an eligible individual with the same coverage, enter \$3,850 (\$7,750 for family coverage). All others, see the instructions for the amount to enter
4 Enter the amount you and your employer contributed to your Archer MSAs for 2023 from Form 8853, lines 1 and 2. If you or your spouse had family coverage under an HDHP at any time during 2023, also include any amount contributed to your spouse's Archer MSAs
5 Subtract line 4 from line 3. If zero or less, enter -0-
6 Enter the amount from line 5. But if you and your spouse each have separate HSAs and had family coverage under an HDHP at any time during 2023, see the instructions for the amount to enter
7 If you were age 55 or older at the end of 2023, married, and you or your spouse had family coverage under an HDHP at any time during 2023, enter your additional contribution amount. See instructions.
8 Add lines 6 and 7
9 Employer contributions made to your HSAs for 2023
10 Qualified HSA funding distributions
11 Add lines 9 and 10
12 Subtract line 11 from line 8. If zero or less, enter -0-
13 HSA deduction. Enter the smaller of line 2 or line 12 here and on Schedule 1 (Form 1040), Part II, line 13 Caution: If line 2 is more than line 13, you may have to pay an additional tax. See instructions.

Part II HSA Distributions. If you are filing jointly and both you and your spouse each have separate HSAs, complete a separate Part II for each spouse.

14a Total distributions you received in 2023 from all HSAs (see instructions)
b Distributions included on line 14a that you rolled over to another HSA. Also include any excess contributions (and the earnings on those excess contributions) included on line 14a that were withdrawn by the due date of your return. See instructions
c Subtract line 14b from line 14a
15 Qualified medical expenses paid using HSA distributions (see instructions)
16 Taxable HSA distributions. Subtract line 15 from line 14c. If zero or less, enter -0-. Also, include this amount in the total on Schedule 1 (Form 1040), Part I, line 8f
17a If any of the distributions included on line 16 meet any of the Exceptions to the Additional 20% Tax (see instructions), check here
b Additional 20% tax (see instructions). Enter 20% (0.20) of the distributions included on line 16 that are subject to the additional 20% tax. Also, include this amount in the total on Schedule 2 (Form 1040), Part II, line 17c

Part III Income and Additional Tax for Failure To Maintain HDHP Coverage. See the instructions before completing this part. If you are filing jointly and both you and your spouse each have separate HSAs, complete a separate Part III for each spouse.

18 Last-month rule
19 Qualified HSA funding distribution
20 Total income. Add lines 18 and 19. Include this amount on Schedule 1 (Form 1040), Part I, line 8f
21 Additional tax. Multiply line 20 by 10% (0.10). Include this amount in the total on Schedule 2 (Form 1040), Part II, line 17d

Health Savings Accounts

- Triple Tax Advantage
- No time limit on spending
- Pay for medical expenses out of pocket when working
 - Reimburse later
- Super HSA
- Once in a life-time IRA Rollover
- Tool for retirement medical expenses

State Taxes

- Resident state income tax
- State tax planning opportunities
- PTET

Other Considerations

- Multi-year tax planning
 - Future changes in tax rates
- Sunset of TCJA
 - Reduced estate life-time exclusion
 - Portability of DSUE
- Pending legislation

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