PHYSICIANS RESOURCE GROUP 2022 Tax Questionnaire

COMPLETION OF THE TAX QUESTIONNAIRE, ALONG WITH YOUR SIGNATURE, IS MANDATORY FOR ALL CLIENTS.

**If you are a new client, please provide a copy of your 2021 Federal and State returns.

Please submit all tax documents, e.g. Form(s) W-2, 1099, 1098, K1s; and any other documentation, so that we may accurately report all taxable income you received throughout the year. If you are uncertain, provide the additional information and we will determine the tax impact.

Persona	I Information (can write SALY if none of the fo	llowing 10 lines ch	anged since 20	21)
	Taxpayer		Spouse	
Name:				
Birthdate:				
SSN:				
Occupation/ Physician/Resident (year if resident):				
Specialty:				
Current Employer:				
E-mail:				
Cell Phone:				
Address:				
City, State, Zip:				
Date of Move if during 2	022 & Previous State of Residency: (if applicable)			
Is this a temporary move	e (2 years or less and intent to return to prior state)?		YES	NO
return. Please provi	e in Identity Theft, the IRS is now requiring pode the following information (if you provided to can just write SALY):			
Driver's License #:				
Issuing State:				
Issue Date:				
Expiration Date:				
New York Doc# (1st three letters only):				

Electronic Filing Options	YES	NO
We will send your return copy via your Intuit Link Portal account and will not send a hard	copy, unless yo	ou request one.
If you were a victim of identity theft on your 2021 or earlier tax return, did you receive a letter from the IRS issuing you an Identity Protection Personal Identification Number? Is so, please provide copy of the letter or the number.		
If you qualify for electronic filing and have a balance due with the IRS and/or the state, would you like that amount to be directly withdrawn from your bank account through an electronic draft?		
Refund Application: If you have an overpayment of 2022 taxes, do you want the excess:		
Refunded via a check in the mail?		
Refunded via Direct Deposit?		
Applied to your 2023 estimated tax liability?		
Purchase I-bonds (max of \$5,000)?		
Please attach/upload a voided check or indicate that your bank information is the S		T YEAR.
Attach a Voided Check - or circle/underline/highligh		

Federal, State, and City Estimated Tax Payments **DO NOT INCLUDE 2021 APPLIED REFUNDS** 2022 Date Paid IRS State ____ State ____ 1st Qtr. ES due 04-15-2022 \$ \$ \$ \$ \$ \$ 2nd Qtr. ES due 06-15-2022 \$ \$ \$ 3rd Qtr. ES due 09-15-2022 \$ \$ \$ 4th Qtr. ES due 01-15-2023

Dependents				YE	S	NO
Were there any changes in dependents	from the prior year?					
If adding a dependent, please provide the following:						
Name:	Social Security No.:	Date of Bir	th:	Son/E	Daughte	r/Parent/Etc.:
				YE	S	NO
Did you have any household employees \$2,300 for the entire year that have or pW-2 and LA unemployment (SUTA) repDo you have any children with wages, in	lan to report to the IRS? If orts.	so, please provide	copy of			
sold any stock in 2022?						
If yes, do you want us to prepare their r	eturn(s)?					
Did you adopt a child or begin adoption	proceedings during 2022?					
If you are an out-of-state client and con name of the plan and amount(s) contrib deductions available.						
	Child & Dependent	Care Expense	s			
Any child care expenses (including or please provide the following: (only for include K-12 tuition). Overnight cam	or children under the age					
Provider: Addres	SS:	Fed ID#:	Amount	Paid:		Child:

Purchases, Sales, and Debt	YES	NO
Did you sell any securities, bonds, or other investment property?		
At any time in 2022, did you (or your children) receive (as a reward, award, or payment for property/services), sell, exchange, gift, or otherwise dispose of any financial interest in any virtual currency/digital asset? (If you only bought virtual currency to hold, the answer is NO.)		
f so, please attach a statement of cost basis, dates of purchase, shares acquired, shares orice.	sold, date of sa	ale, and sales
If you sold at a loss, did you buy back the identical security sold within 30 days before or after the sale?		
If yes, please explain:		
Did you purchase or sell a rental property or farm, or acquire or sell any interest in any Partnership or S Corporation during 2022?		
If you purchased interest in any Partnership or S Corporations during 2022, please provide now much you paid to purchase the interest.		
Please provide us with the K-1s as soon as they are available.		
If you sold your interest in any Partnership or S Corporation, did you receive any cash or property from the sale? If so, how much?		
If you sold your interest in any partnership or S Corporation, how much did you originally contribute to buy into the Partnership or S Corporation?		
Did you receive grants of stock options from your employer, exercise any stock options granted to you, or dispose of any stock acquired under a qualified employee stock purchase plan? If so, please provide support (statements/schedules from your employer).		
Residential Energy Efficient Property Credit	YES	NO
In 2022, did you install any alternative energy or energy efficient equipment in your residence		

Residential Energy Efficient Property Credit	YES	NO
In 2022, did you install any alternative energy or energy efficient equipment in your residence such as solar water heaters, solar panels, geothermal heat pump, fuel cells, HVAC w/Seer>16, insulation, or windows/doors? If so, please attach receipts and certification documents.		
Qualified Hybrid/Electric Vehicle/Charging Station Credit	YES	NO
In 2022, did you purchase a qualified hybrid/electric vehicle or install a charging station? If so, please attach receipt and purchase agreement/document.		

First Time Homeowner Credit – 2008 (April 8th – Jan 1st 2009)	YES	NO
Did you take the first time homeowner credit in 2008?		
Purchase date.		
Credit amount taken on your 2008 return. This needs to be paid back over a 15-year period beginning with 2010 taxes.		

Home/Real Estate Transactions (Sale of Home)		YES	NO
Did you sell, exchange, or purchase any real estate in 2022? If so, please a HUD statements.	attach the closing		
Did you sell your primary residence in 2022? If no, go to the next section.			
If yes, did you own and occupy the home as your principal residence for at le the 5-year period prior to the sale?	east 2 years out of		
Date of sale			
Sales price			
(please provide closing HUD statement)	•		
Date of purchase of house sold			
Original purchase price of home sold			
(please provide original purchase HUD statement)			
Did you make any home improvements, if so amount?			
Did you ever rent out this property?			
Did you ever deduct any portion of the home for business purposes?			
Did you deduct a casualty loss on the home in a prior year? If so, did you re-reimbursement?	ceive insurance		
Have you or your spouse sold a principle residence within the last 2 years?			
At the time of the sale, the residence was owned by:	Taxpayer	Spouse	Both
IRA/Pension Contributions & Distributions		YES	NO
Did you make a contribution to a retirement plan (SEP), 401k, Traditional IRA was NOT reported on your W-2?	A, or Roth IRA that		
If so, please indicate the following:		Taxpayer	Spouse
<u>Date Made</u> Type of Retirement Plan:			
Amount Contributed:			
Did you withdraw any amounts from your Individual Retirement Account (IRA pension plan? If so, attach all 1099-Rs.	A), Roth IRA, or		
Were any distributions from your IRA and/or Roth IRA distributed to a charita	able organization?		
Did you or your spouse convert an existing IRA to a Roth IRA, e.g. Backdoor did a Roth Conversion, we will need the 12/31 balances on all open Traditior and SEP IRA accounts. Please send the year end statements for all of these	nal IRA, Roth IRA,		
If you withdrew retirement funds in 2020 due to Covid, did you repay any the If so, please provide the date and amount that was repaid.	se funds in 2022?		

Other Income	YES	NO
Did you receive any payments from insurance companies, legal settlements, disability payments, unemployment, or other taxable income that was not reported to you on a tax document? (Please provide/attach details)		
Did you receive or pay any alimony? (Only need if divorce was final prior to 12/31/18. Please provide recipient's name, social security number, amount, and date of divorce/separation)		
Did you receive any grant payments that are exempt from income under the National Health Service Corp Loan Repayment Program or Other Certain Sate Loan Student Loan Repayment Programs? If so, please indicate amount and provide the 1099-MISC.		

Adjustments to Income		
	YES	NO
If you or your spouse were a teacher/educator for grades K-12, did you incur any unreimbursed teaching expenses, such as supplies, union dues, academic journals, etc.)?		
Did you or your spouse have a Health Savings Account (HSA)? (This does not include a Flexible Savings Account (Cafeteria Plan) maintained by your employer) Coverage: Self-only or Family		
HSA Contributions made during 2022 that were NOT made through your employer (Please provide Form 5498-SA if received):		
Amount of HSA distributions (Please provide Form 1099-SA if received)?		
Were all the funds distributed used for qualified medical expenses?		

Higher Education / Student Loans	YES	NO
Did you pay any student loan interest? If so, please attach Form 1098-E from lender. **Please note: Married Filing Jointly adjusted gross income (AGI) limitation is \$175,000; Single and Head of Household adjusted gross income (AGI) limitation is \$85,000; Married Filing Separately taxpayers cannot deduct student loan interest.		
Did you or your dependents incur any post-secondary education expense, such as tuition? If so, please provide amount and who it was for. (Include Form 1098-T)		
Did you withdraw amounts from a Coverdell Education Savings Account or Qualified Education Program (529 Plan)? If yes, include Form 1099-Q along with an expense breakdown of tuition, room & board, books, and supplies.		

Schedule A – Itemized Deductions Information		
Medical & Dental Expenses (only needed if they exceed 7.5% of income) YES NO		NO
Did you or your spouse incur any large medical expenses in 2022 (included prescription drugs & medicines? If so, what is the amount? (Do not include medical expenses paid with HSA funds.)		
Any insurance reimbursements received with respect to above expenses?		

Health Insurance	YES	NO
Did you, your spouse, or your dependents receive Form 1095-A from Healthcare.gov? Please provide a copy if received.		

Mortgage Interest, Property and Sales Tax	YES	NO
Did you have any mortgage interest? (Please provide 1098 Mortgage Interest Forms).		
Did you refinance your existing mortgage in 2022?		
If your total mortgage debt from all home loans is in excess of \$750,000 (mortgages originating after December 15, 2017) or in excess of \$1,000,000 (mortgages originating before December 15, 2017), please provide the beginning and ending balances of each.	Beginning	Ending
Real Estate Taxes Paid in 2022:	\$	
Personal Property Taxes Paid:	\$	
Did you make any large purchases, such as a motor vehicle or boat in 2022? If so, please provide us with the invoice amount and sales tax paid on the transaction.	Invoice Amount:	Sales Tax Paid:

Charitable Contrib	outions	
Regarding charitable co	ontributions, how much of your deductible contributions were made in the	e following forms:
	 Under strict substantiation requirements for cash charitable contributions of less than \$250, you must have one of the following: A bank record such as a canceled check, bank statement, or credit card statement, A receipt with date, contribution amount, and organization name, or Payroll records and a pledge card, if made by payroll deduction. 	
Cash Donations:	For cash charitable contributions of \$250 or more, you must obtain a "contemporaneous written acknowledgement" from the charitable organization before filing that shows the following: • Date and amount of contribution, • Whether any goods or services other than intangible religious benefits were provided by the organization (including a good faith estimate of the value), and • A statement that the only benefit the taxpayer received was an intangible religious benefit (if applicable).	\$
Clothing and household goods or other contributions:	These must be in good condition or better. If over \$500, please indicate the name and address of the charity; approximate date property was obtained; how the property was acquired, such as purchase, gift, inheritance, etc.; and property cost or other basis. Items or groups of similar items for which a deduction of more than \$5,000 is claimed require a written appraisal. Similar items are items of the same generic category or type. For example, clothing and books are not similar.	\$
Charitable Miles:	Did you travel any in the performance of services for a charitable organization? If so, how many miles during the year were a result of this? Were other travel expenses incurred?	
	<u> </u>	1
Other Itemized De	ductions	
	alty or theft loss(es) from a <u>federally declared disaster</u> during the year. I st before and after, date property was acquired, and if any insurance rei	
Gambling losses to ext	ent of gambling winnings:	\$

Schedule C (Taxpayer) - Business Expenses (Self-Employed/1099-Misc. Income Only) (W2 employee unreimbursed expenses are no longer deductible) Please indicate the amount of each expense for the Taxpayer. **Taxpayer** Licenses Cell Phone Internet Books Uniforms Dry Cleaning of Uniforms Dues Professional Fees Journals Office Supplies Malpractice Insurance Board Review Exam Fees Continuing Education **Business Travel:** Airfare Hotel Cabs/Car Rentals Meals Business Meals (not related to travel) Business Assets Purchased: Computer Date: Printer Date: Cell Phone Date: Description: Medical Equipment Date: Other Date: Self-Employed Health Insurance Did you make payments to anyone greater than \$600 that would require the filing Form 1099? If so, did you file Form 1099? Business car expenses need to be substantiated with mileage logs and trip sheets for each trip. Do you have a record of total miles and business miles driven? (Note that commuting miles between your home and a fixed work location are not considered deductible business miles.) Make/ Model of auto Odometer Reading - 1/1/2022 Odometer Reading - 12/31/2022 Business Miles **Total Miles** If using the actual method instead of the standard mileage rate, please list Purchase Price (if car was purchased in 2022) Gasoline Insurance Maintenance/Repairs Auto loan interest/ Lease payments

Schedule C (Spouse) - Business Expenses (Self-Employed/1099-Misc. Income Only) (W2 employee unreimbursed expenses are no longer deductible) Please indicate the amount of each expense for the Spouse. **Spouse** Licenses Cell Phone Internet Books Uniforms Dry Cleaning of Uniforms Dues Professional Fees Journals Office Supplies Malpractice Insurance **Board Review** Exam Fees Continuing Education **Business Travel:** Airfare Hotel Cabs/Car Rentals Meals Business Meals (not related to travel) Business Assets Purchased: Computer Date: Printer Date: Cell Phone Date: Description: Medical Equipment Date: Other Date: Self-Employed Health Insurance Did you make payments to anyone greater than \$600 that would require the filing Form 1099? If so, did you file Form 1099? Business car expenses need to be substantiated with mileage logs and trip sheets for each trip. Do you have a record of total miles and business miles driven? (Note that commuting miles between your home and a fixed work location are not considered deductible business miles.) Make/ Model of auto Odometer Reading - 1/1/2022 Odometer Reading - 12/31/2022 Business Miles **Total Miles** If using the actual method instead of the standard mileage rate, please list Purchase Price (if car was purchased in 2022) Gasoline Insurance Maintenance/Repairs Auto loan interest/ Lease payments

Schedule E- Rental Property		
Address of rental:		
Date purchased: Purchase price:		
	YES	NO
Were 1099's required for payments to contractors or workers (payments made in excess of \$600 to an individual or corporation?)		
f yes, were they filed?		
How many days/months was property rented at FMV:		
Was the rental property used personally at any time during the year? If yes, how long?		
	Amo	ount
Rental income for 2022		
Expenses:		
Maintenance/Cleaning/Lawn Care		
Insurance		
Legal/Professional Fees		
Management Fees		
Mortgage interest on property (attach Form 1098)		
Repairs (Please provide additional info for repairs greater than \$2,500)		
Supplies		
Property taxes paid		
Utilities		
Pest Control		
HOA Fees		
Advertising		
Commissions		
Other:		

Schedule E- Rental Property		
Address of rental:		
Date purchased: Purchase price:		
	YES	NO
Were 1099's required for payments to contractors or workers (payments made in excess of \$600 to an individual or corporation?)		
If yes, were they filed?		
How many days/months was property rented at FMV:		
Was the rental property used personally at any time during the year? If yes, how long?		
	Am	ount
Rental income for 2022		
Expenses:		
Maintenance/Cleaning/Lawn Care		
Insurance		
Legal/Professional Fees		
Management Fees		
Mortgage interest on property (attach Form 1098)		
Repairs (Please provide additional info for repairs greater than \$2,500)		
Supplies		
Property taxes paid		
Utilities		
Pest Control		
HOA Fees		
Advertising		
Commissions		
Other:		

Louisiana Residents Only

LA Sales/Con	sumer Tax			YES	NO
	goods for use in Louisi Louisiana state sales ta	ana from out-of-state companies x?	and were not		
f so, please prov the companies.	ide the total combined p	urchase amount and/or the state	ments received from	\$	
Historic or Fil	lm Credits			YES	NO
	e Historic or Film Credits d any other supporting o	in 2022? If so, please attach LA locuments.	Form R-6135, LA		
LA Start K12 I	Program			YES	NO
Did you contribute to the LA Start K12 program for your children?					
If so, please prov	ide the amount contribu	ted per child:		L	1
Did you withdraw	any money from the LA	Start K-12 program in 2022 to pa	y 2022 tuition?		
LA Start Colle	ege Program			YES	NO
Did you contribute to the LA Start College program for your children?					
lf so, please prov	ide the amount contribu	ted per child:			
LA Tuition (K-	-12)				
or books (K-12		th non-public schools (tuition, not be included in this amount		tc.) or public sch	nool uniforms
ii so, piease pro	ovide trie following.		Expe	enses Paid in 2	022
Child:	Grade Level Dec. 31st	Name of School	Tuition	Uniforms	Textbooks/ Supplies

Miscellaneous			
	YES	NO	
Did you or your spouse make any gifts, including birthday, holiday, anniversary, graduation, etc., with a total aggregate value in excess of \$16,000 to any individual during the year?			
Were you or your spouse a grantor or transferor for a foreign trust, have an interest in or a signature or other authority over a bank account, securities account, or other financial account in a foreign country? If yes, we must file FinCEN Form 114 - Report of Foreign Bank and financial Accounts. Failure to file can result in penalties ranging from \$25,000 to \$100,000			
Did you create or transfer money or property to a foreign trust?			
Were you notified by the IRS or other taxing authority of any changes in prior year returns? Please attach documents.			
Do you have Disability Insurance? If yes, with who? If not, any health issues?			
Did you change jobs in 2022?			
Do you plan to change jobs in 2023?			
Do you expect your 2023 taxable income and withholding to be generally the same as 2022?			
If not, please provide details:			
Authorization	YES	NO	
With your authorization, the IRS and certain states allow us to verify credits, payments, etc., for your tax account online. Do we have your authorization to view this information, if necessary?	r		
If the above answer is yes, please e-mail us to obtain Form 2848 – Power of Attorney. <u>(Each taxpayer must sign a separate Form 2848)</u>			
Kindly sign below and return this questionnaire to our office with your tax information or at your scheduled made available to you upon request. I (We) have submitted this information for the sole purpose of preparing my (our) tax resubstantiated by receipts, canceled checks, or other documents. This information is trubest of my (our) knowledge.	turn. Each item ca	an be	
If applicable, both taxpayer and spouse must sign.			
Accepted by:Taxpaye	er's signature		
Accepted by:			
Spouse	Spouse's signature		
Printed name:			
Date:			

WAITING ON THE FOLLOWING INFORMATION:

1)			
2)			
3)			
4)			
5)			
6)			
7)			
8)			
9)			
10)			