## **Tilghman Accounting & Tax Solutions**

3021 College Heights Blvd Allentown, PA 18104 cgraberitz@tilghtax.com Phone: (484)274-6979 | Fax: (866)906-0266

December 14, 2023

Subject: Preparation of Your 2023 Tax Returns

:

Thank you for choosing Tilghman Accounting & Tax Solutions to assist you with your 2023 taxes. This letter confirms the terms of our engagement with you and outlines the nature and extent of the services we will provide.

We will prepare your 2023 federal and state income tax returns. We will depend on you to provide the information we need to prepare complete and accurate returns. We may ask you to clarify some items but will not audit or otherwise verify the data you submit. An Organizer is enclosed to help you collect the data required for your return. The Organizer will help you avoid overlooking important information. By using it, you will contribute to the efficient preparation of your returns and help minimize the cost of our services.

We will perform accounting services only as needed to prepare your tax returns. Our work will not include procedures to find defalcations or other irregularities. Accordingly, our engagement should not be relied upon to disclose errors, fraud, or other illegal acts, though it may be necessary for you to clarify some of the information you submit. We will inform you of any material errors, fraud, or other illegal acts we discover.

The law imposes penalties when taxpayers underestimate their tax liability. Call us if you have concerns about such penalties.

Should we encounter instances of unclear tax law, or of potential conflicts in the interpretation of the law, we will outline the reasonable courses of action and the risks and consequences of each. We will ultimately adopt, on your behalf, the alternative you select.

Our fee is based on the time required at standard billing rates plus out-of-pocket expenses. Invoices are due and payable upon presentation. All accounts not paid within thirty (30) days are subject to interest charges to the extent permitted by state law.

We will return your original records to you at the end of this engagement. Store these records, along with all supporting documents, in a secure location. We retain copies of your records and our work papers from your engagement for up to seven years, after which these documents will be destroyed.

If you have not selected to e-file your returns with our office, you will be solely responsible to file the returns with the appropriate taxing authorities. Review all tax-return documents carefully before signing them. Our engagement to prepare your 2023 tax returns will conclude with the delivery of the completed returns to you, or with e-filed returns, with your signature and our subsequent submittal of your tax return.

To affirm that this letter correctly summarizes your understanding of the arrangements for this work, sign the enclosed copy of this letter in the space indicated and return it to us in the envelope provided.

Thank you for the opportunity to be of service. If you have any questions, contact our office at (484)274-6979.

Sincerely,

Cynthia L Graberitz EA Tilghman Accounting & Tax Solutions	
(Both spouses must sign for preparation of joint returns.)	
Accepted By:	
T.	
Taxpayer	
Spouse	
Date	

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Your privacy is important to us. Read the following privacy policy.

We collect nonpublic personal information about you from various sources, including:

- \* Interviews regarding your tax situation
- \* Applications, organizers, or other documents that supply such information as your name, address, telephone number, Social Security Number, number of dependents, income, and other tax-related data
- \* Tax-related documents you provide that are required for processing tax returns, such as Forms W-2, 1099R, 1099-INT and 1099-DIV, and stock transactions

We do not disclose any nonpublic personal information about our clients or former clients to anyone, except as requested by our clients or as required by law.

We restrict access to personal information concerning you, except to our employees who need such information in order to provide products or services to you. We maintain physical, electronic, and procedural safeguards that comply with federal regulations to guard your personal information.

If you have any questions about our privacy policy, contact our office at (484)274-6979.

Sincerely,

Cynthia L Graberitz EA
Tilghman Accounting & Tax Solutions

## 2023 Tax Organizer Personal Information

Persona	al Information								
		Name			SS	SN I	Has P PIN	Dat	e of Birth
Taxpayer									
Spouse									
Name of pe	erson to whom all inf	formation should be addressed, if not t	the taxpayer						
Street add	dress, city, state,	and ZIP							
	I	Occupation		Daytime Phone	Evening	Phone	Cell Phone		
Taxpayer									
Spouse									
Taxpayer	email								
Spouse ei	mail								
axpayer' Drive Choto ID r State photo	Are you or you Are you or you Are you or you Do you or you At any time du (a) receive ( (b) sell, exch cation Informatis type of photo er's license number to ID was issued	ID State-issued photo ID	vice) a digital asset? or a financial interest in a  Spouse's type of photo  Driver's license  Photo ID number  State photo ID was issue	a digital asset)  ID  Sta	ı? ate-issued p	bhoto II	)		
	o ID expires			Date photo ID expires					
Accoun	t Information	for Deposits and Withdra	wals						
	Name	of Bank	Bank Routing Number	Bank Account Number	Type of A	Savings	Use		Count for Withdrawal
Appoint	tment Informa	ation	,	,			•		
Your 2023	appointment is s	scheduled for							

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Depend	dent and	Other	Inform	ation
Depend	aciit aiiu	Othici		ıatıvı

lame:								SSN	<u> :</u>
Dependent Information				1					
First and Last Name SSN			Has IP PIN	Relationship	Months in Home	Date of Birth	Disabled	Full- time Student	Childcare Expenses
st dependents required to fil	e a retum		1	1			1		
Child and Other Depen	dent Care E	xpenses	S						
Name of Care Provider				Address			SSN or E	IN	Amount Paid
Estimates				_					
	Date Paid	Federal	Amount	Res Date Paid	sident State	Amount	F Date Paid	Resident	City Amount
Estimates  Overpayment applied om 2022	Date Paid	Federal	Amount					Resident	-
	Date Paid	Federal	Amount					Resident	-
Overpayment applied om 2022	Date Paid	Federal	Amount					Resident	-
Overpayment applied om 2022	Date Paid	Federal	Amount					Resident	-
overpayment applied om 2022 irst quarter second quarter	Date Paid	Federal	Amount					Resident	-
Overpayment applied om 2022 irst quarter second quarter	Date Paid	Federal	Amount					Resident	-
Overpayment applied om 2022 irst quarter second quarter third quarter	Date Paid	Federal	Amount					Resident	-
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Overpayment applied om 2022 irst quarter second quarter third quarter	Date Paid	Federal	Amount					Resident	-
Overpayment applied om 2022 irst quarter second quarter third quarter	Date Paid	Federal	Amount					Resident	-
overpayment applied om 2022 irst quarter econd quarter hird quarter ourth quarter	Date Paid	Federal	Amount					Resident	-
overpayment applied om 2022 irst quarter econd quarter hird quarter ourth quarter	Date Paid	Federal	Amount					Resident	-

## **Schedule A - Itemized Deductions**

Name:	SSN:
Medical and Dental Expenses	Charitable Contributions
Health insurance premiums (paid by you, not through work)	Donations to charity Cash Noncash Amount  - Church
Amount above that is for Medicare premiums	Boy or Girl Scouts
Long-term care premiums (you)	
Long-term care premiums (your spouse) · · · · · · ·	<del></del>
Long-term care premiums (dependents)	
Mileage driven for medical purposes	United Way
Out of pocket medical & dental expenses  Doctor, dental, etc	Veterans
Prescription medicines	Hospital
Glasses & contacts	University
Hearing aids	Other
Medical equipment & supplies	Miles driven for charitable purposes
Hospital services	Other Miscellaneous Deductions
Laboratory services	Amortizable bond premiums
Nursing services	Federal estate tax
Other	Gambling losses
Other	Impairment-related work expenses
Taxes Paid	Claim repayments
	Unrecovered pension investments
State and local income taxes	Loss from other activities from Schedule K-1
General sales tax (vehicle, boat, home, etc.)	Ordinary loss debt instrument
Real estate taxes	Excess deduction on termination
Personal property taxes	Job Expenses & Certain Miscellaneous Deductions  Necessary job expenses you paid that were not reimbursed by your employer
Other taxes (list)	Safety equipment, tools, & supplies
	Uniforms
	Protective clothing (shoes, hardhats, glasses, etc.)
Interest Paid	Dues to professional organizations
Home mortgage interest paid (attach Form 1098)	Books & subscriptions
Some of your home mortgage loan was not used to buy, build, or improve your home.	Other
Home mortgage interest paid to an individual	Union dues
Paid to: Name	Tax preparation fees
Address	Other nonpersonal expenses related to taxable income
City, State, ZIP	Safe deposit box fees
SSN or EIN	Investment expenses not entered elsewhere
Points not reported on Form 1098	Other
Investment interest	Home equity interest

	Checklist	
Name:	SSN:	
Checklis	t e e e e e e e e e e e e e e e e e e e	
This check	clist is provided to help you gather necessary information for us to prepare your 2023 income tax return. Return	
	ong with the supporting documentation, to our office and let us know of any significant changes from your 2022	
General Ir	nformation and Prior Year Documentation	
[]	Proof of identity for those claimed on the return (driver's license or state issued ID, Social Security card, birth certificates for children. etc.)	
[]		
	If there were losses from business activities in prior years, include prior five years of returns instead of two	
[]	Depreciation schedules from prior years for businesses, rentals, etc.	
Current Y	ear Income Documentation	
[]	Wage and tax statements (Form W-2)	
[ ]	Gambling income (Form W2-G)	
[]	IRA distributions, pensions, and annuities (Form 1099-R)	
[ ]	Dividend income (Form 1099-DIV)	
[]	Interest income (Form 1099-INT)	
[]	Miscellaneous income (Form 1099-MISC)	
[]	Nonemployee compensation (Form 1099-NEC)	
[]	Unemployment compensation and other government payments (Form 1099-G)	
[ ]		
[ ]		
[ ]	0 1 1 0 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
[ ]		
[ ]		
	[ ] Basis information for any partnerships and S corporations	
[]		
[ ]		
[ ]		
[ ]	Farm income (Schedule F)	
[ ]		
[ ]		
Other Inc	ome (provide supporting documentation for income received for the following items)	
	Sale of assets or property	
[ ]		
[]		
Payments	(provide supporting documentation for payments made for the following items)	
	Educator classroom expenses	
[ ]		
	Contributions to a Health Savings Account	

ents	(provide supporting documentation for payments
[]	Educator classroom expenses
[]	Employee business expenses
[]	Contributions to a Health Savings Account
[]	Expenses related to work relocation with the military
[]	Alimony
[]	Student loan interest
[]	Refunded student loan interest payments
[]	Student loan forgiveness
[]	Tuition and fees for higher education
[]	Expenses related to child or dependent care
[]	Contributions to a Retirement Savings Account

[ ] Other state and local taxes

[] Medical and dental expenses

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2023		. 490 0
	Checklist	
Name:		SSN:
Checklist		
[]	Mortgage interest Investment interest	
	Cash contributions	
	Noncash contributions (provide organization name) Unreimbursed employee expenses	
	Investment expenses	
	Gambling losses	
[]	Other payments	

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	Questionnaire	
Name:	S	SSN:
Questionnaire		
Personal Inform	nation	
Yes No		
[][]	Did your marital status change during the year?  If "Yes," explain	
[][]	Did your name change during the tax year?  If "Yes," explain	
[][]	If your filing status is married, but you are filing separately from your spouse, did you and your s live apart for the last six months of 2023?	pouse
[][]	Can you or your spouse be claimed as a dependent by someone else?	
[][]	Did your address change during the year?	
[][]	Were you, your spouse, or any dependents a victim of identity theft?  If "Yes," explain	
[][]	Were you, your spouse, or any dependents issued an Identity Protection PIN (IP PIN)?  If "Yes," provide Notice CP01A from the IRS.	
Provide p	proof of identity to be eligible to e-file your tax return (driver's license or state-issued photo	o ID)
Dependent Info	ormation	
Yes No		
[][]	Did you have any changes in dependents during the year?	
.,.,	If "Yes," explain	
[][]	Can another person qualify to claim any of your dependents?	
[][]	Did you have any child or dependent care expenses during the year?	
[][]	Did you have any adoption expenses during the year?	
[][]	Did you have any children under age 19 or a full-time student under age 24 with more than \$2,5 unearned income?	00 of
Provide o	documentation for proof of dependent credits (school records, medical records, daycare re	ecords, etc.)
Health Care Info	ormation	
Yes No	ormanon	
[][]	Did any member of your household have healthcare coverage through the Marketplace (Obama	acare)?
	If "Yes," provide copies of Form 1095-A.	iouro).
[][]	Did you receive any distributions from a Health Savings Account (HSA), Archer MSA, or Medica	are Advantage
	MSA during the year?	
Income, Purcha	ases, Sales, and Debt Information	
Yes No		
[][]	Did you receive any tips not reported to your employer?	
[][]	Did you receive any disability income during the year?	
[][]	Did you cash in any U.S. savings bonds during the year?	
[][]	Did you start a new business or purchase any rental property during the year?	
[][]	Did you sell an existing business, rental property, or other property during the year?	
[][]	Did you purchase any business assets or convert any assets to business use?	
	If "Yes," provide the cost of the asset, the date it was placed in service, and the business us percentage.	е
[][]	Did you purchase any gasoline, diesel, or special fuels for off-road business use?	
[][]	Did you buy or sell any stocks, bonds, or other investments during the year?	
[][]	Did you sell a principal residence during the year?	
	If "Yes," provide closing documentation for the purchase and sale of the home.	
[][]	Did you have a principal residence or a piece of real property foreclosed on during the year?	
[][]	Did you abandon a principal residence or a piece of real property during the year?	
[][]	Did you refinance your principal home or second home or take out a home equity loan during th If "Yes," provide all escrow, closing, and other pertinent documentation and information.	e year?
[][]	Did you receive any principal or interest during this year from property sold in prior years?	

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	Questionnaire
Name:	SSN:
Questionnaire	
[][]	Did you rent out your home or use it for business?
[][]	Did you sell, exchange, or purchase any real estate during the year?
[][]	Did you acquire a new or additional interest in a partnership or S corporation?
[][]	Did you have any debts canceled or forgiven this year?
[][]	Does anyone owe you money that has become uncollectible?  Did you purchase a new or previously owned clean vehicle (electric vehicle, plug-in hybrid, fuel-cell
[][]	vehicle, qualified commercial clean vehicle) during the year?
	If "Yes," provide the report the dealer or seller is required to provide to you.
[][]	Did you receive income or incur expenses associated with a fantasy sports league?
	If "Yes," provide documentation.
[][]	Did you receive income or incur expenses associated with car sharing (e.g., Lyft or Uber)?
	If "Yes," attach Form 1099-MISC, Form 1099-NEC, or Form 1099-K.
[][]	Did you receive income or incur expenses associated with freelancing (e.g., Upwork or TaskRabbit)?
	If "Yes," attach Form 1099-K or Form W-2.
[][]	Did you receive income or incur expenses associated with fashion sharing (e.g., Poshmark or thredUP)?
	If "Yes," provide documentation.
[][]	Did you receive income or incur expenses associated with crowdfunding (e.g., Kickstarter or Indiegogo)?  If "Yes," attach Form 1099-K.
[][]	Did you receive income or incur expenses associated with a short-term rental (e.g., Airbnb, VRBO or
	HomeAway)?
	If "Yes," provide documentation.
[][]	Did you receive income or incur expenses as an independent contractor (e.g., Shipt, Instacart, DoorDash)?
	If "Yes," provide documentation.
[][]	Did you receive any other income you have not provided information for with this organizer?
	If "Yes," explain
Itemized Deduct	tion Information
Yes No	
[][]	Did you pay out-of-pocket medical or dental expenses (premiums, prescriptions, mileage, etc.) during the
	year?
[][]	Did you pay any long-term care premiums for yourself, your spouse, or a dependent during the year?
[][]	Did you receive any state or local income tax refunds from prior years?
[][]	Did you make any major purchases (vehicle, boat, etc.) during the year?
[][]	Did you pay any real estate property taxes or personal taxes during the year?
	Did you pay mortgage interest during the year?
[][]	Did you make cash donations to charity during the year?
[][]	Did you make noncash donations to charity (clothes, furniture, etc.) during the year?  Did you donate a boat or vehicle during the year?
[][]	If "Yes," attach Form 1098-C.
[][]	Did you have gambling winnings or losses during the year?
[][]	Did you have any job-related expenses that were not reimbursed by your employer (uniforms, safety
	equipment, etc.)?
[][]	Did you use your vehicle on the job other than for commuting to work?
[][]	Did you work out of town at any time during the year?
Date and the	
Retirement Infor	rmation
[][]	Did you make any contributions to an IRA, Roth, Keogh, SIMPLE, SEP, 401(k), or other qualified retirement
[][]	plan during the year?
[][]	Did you make any withdrawals or receive distributions from a pension or profit-sharing plan, IRA, Roth,
	Keogh, SIMPLE, SEP, 401(k), or other qualified retirement plan during the year?
[][]	Did you execute any rollovers from an IRA, Roth, Keogh, SIMPLE, SEP, 401(k), or other qualified
<b>-</b>	retirement plan during the year?
[][]	Did you receive any Social Security benefits during the year?

Questionnaire			
Name:	SSI	N:	
Questionnaire			
Questionnaire			
Education Information Yes No			
[][]	Did you pay tuition expenses that were required for attending college, university, or vocational sch for yourself, your spouse, or a dependent during the year (even if classes were attended in another year)?		
[][]	Did anyone in your household attend a post-secondary school during the year?  Did you make a contribution to or receive a distribution from an Education Savings Account or Qu Tuition Program during the year?  Did you pay student loan interest for yourself, your spouse, or your dependents during the year?	alified	
[][]	If "Yes," provide the amount of interest that was refunded.  Did you receive forgiveness on a qualifying federal student loan?		
Foreign Tax Information Yes No			
[][]	Did you have a financial interest in or signature authority over a financial account or asset located a foreign country?	in	
[] [] [] [] [] [] [] []	Did you receive a distribution from, or were you a grantor of, or transferor to, a foreign trust?  Did the aggregate value of your foreign accounts exceed \$10,000 at any time during the year?  Did you have any income from, or pay taxes to, a foreign country?  Did you receive a Schedule K-3 from a partnership or S corporation?  Did you have ownership in a foreign corporation at any time during the year?		
[ ] [ ] Did you own property in a foreign country?  Refund, Withholding, and Estimated Tax Information			
Yes No [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ]	If you have an overpayment of 2023 taxes, do you want the refund applied to your 2024 estimated Did you make any estimated payments toward your 2023 taxes?  Did you apply an overpayment of your 2022 taxes to your 2023 estimated taxes?  Do you want to have any refund or balance due directly deposited or withdrawn?  If "Yes," provide a canceled checking or savings slip.  Do you anticipate your income or withholdings to be different for 2024?	taxes?	
Miscellaneous Information Yes No			
[][]	Did you receive, sell, exchange, gift, or otherwise dispose of any digital asset or financial interest any digital asset?	in	
[][]	Did you incur a gain or loss due to damaged or stolen property, while living in a federally declared disaster area?  If "Yes," provide the incident date, value of the property, amount of insurance reimbursements the declaration number assigned by FEMA.		
[][]	Did you pay wages to any household employees (babysitter, nanny, housekeeper, etc.)?  Did you make gifts to any one person in excess of \$17,000 during the year?  Yes No  [ ] [ ] If "Yes," are you splitting the gift with your spouse?		
[] [] [] [] [] [] [] []	Did you incur moving expenses with the military during the year?  Did you make any energy-efficient improvements to your main home during the year?  Are you a business owner who paid health insurance premiums for your employees during the year Did you receive a cash payment or digital asset of more than \$10,000 in one transaction or two or related transactions during the year?  Yes No		
[][]	[ ] [ ] If "Yes," was Form 8300, Report of Cash Payment over \$10,000 Received in Trade Business, filed?  Do you own interest or shares in or did you dispose of a Qualified Opportunity Fund during the year.		

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2023	Questionnaire
Name:	SSN:
Questionnaire	
[][]	Did you make any purchases subject to use tax during the year?  If "Yes," provide details.
[][]	Did you receive any notices from the IRS or state taxing authority?  If "Yes," explain
[ ] [ ] [ ] [ ]	May the IRS discuss your tax return with your preparer? Would you like a copy of your tax return sent to you electronically instead of receiving a printed copy?
Preparer Notes	