

**RENS & HANISCH  
CERTIFIED PUBLIC ACCOUNTANTS  
2023 INCOME TAX WORKSHEET**

Phone (712) 477-2383

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Fax (712) 477-2847

Name: \_\_\_\_\_ Birth date: \_\_\_\_\_ Soc Sec #: \_\_\_\_\_  
 Spouse's Name \_\_\_\_\_ Birth date: \_\_\_\_\_ Soc Sec #: \_\_\_\_\_  
 Mailing Address: \_\_\_\_\_ Daytime Phone: \_\_\_\_\_  
 \_\_\_\_\_ Cell Phone: \_\_\_\_\_  
 City, State, Zip: \_\_\_\_\_ Email \_\_\_\_\_

<b>Dependents' Name</b>	<b>Birth date</b>	<b>Soc Sec #</b>	<b>Dependents' Name</b>	<b>Birth date</b>	<b>Soc Sec #</b>
1 _____	_____	_____	2 _____	_____	_____
3 _____	_____	_____	4 _____	_____	_____

**INCOME-W-2's; Form 1099's; Social Security Benefits; IRA's; & Pension Benefits**

<u>From</u>	<u>Amount</u>	<u>From</u>	<u>Amount</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

<b>STOCK SALES:</b> Stock Name	Number of Shares	Date Bought	Date Sold	Sales Price	Purchase Cost
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

**RETIREMENT CONTRIBUTIONS FOR 2023**

**Please indicate IRA, ROTH, SIMPLE, SEP**

Paid To	Amount	Type
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

**ELECTIVE CONTRIBUTIONS**

Federal Presidential Campaign Fund    Y    N  
 Presidential Campaign Fund-Spouse    Y    N

<b>Iowa Residents</b>	<b>Amount</b>
Fish/Wildlife	_____
Firefighter/Veteran	_____
State Fair	_____
Child Abuse	_____
<b>Minnesota Residents</b>	
Non-game Wildlife	_____

**CHILD CARE PROVIDER NAME & ADDRESS**

**ID NUMBER**

**AMOUNT**

_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

**ITEMIZED DEDUCTIONS:**

**MEDICAL**

Medicine \_\_\_\_\_  
 Health Insurance \_\_\_\_\_  
 Nursing Home Ins -Taxpayer \_\_\_\_\_  
 Nursing Home Ins- Spouse \_\_\_\_\_  
 Nursing Home Care \_\_\_\_\_  
 Doctor/Dentists/Etc. \_\_\_\_\_  
 Medical Miles (\$0.22/mile) \_\_\_\_\_

**INTEREST:**

Home Mortgage \_\_\_\_\_  
 Investment Interest \_\_\_\_\_

**CHARITABLE CONTRIBUTIONS**

By check or receipt \_\_\_\_\_  
 Non-cash (please list) \_\_\_\_\_  
 Charitable Mileage (\$0.14/mile) \_\_\_\_\_

**TAXES:**

Real Estate Tax-Home \_\_\_\_\_  
 Car License (IA & MN) \_\_\_\_\_  
 Sales Tax on major purchase \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**OTHER:**

Tax Preparation Fee \_\_\_\_\_  
 Union Dues \_\_\_\_\_  
 Gambling Losses \_\_\_\_\_  
 Other Expense \_\_\_\_\_

**COLLEGE EXPENSES:**

**Interest Paid on College Loans**

**Please Provide Form 1098-E for Verification:**

Paid To	ID #	Paid
_____	_____	_____
_____	_____	_____
_____	_____	_____

**Tuition/Books (Do Not Include Room/Board)**

**Please include Student's 1098-T**

Student's Name	Year in School	Paid
_____	_____	_____
_____	_____	_____
_____	_____	_____

**ESTIMATED TAXES PAID**

<b>IRS</b>		<b>State #1</b>		<b>State #2</b>	
Date	Paid	Date	Paid	Date	Paid
Apr 15, 2023	_____	_____	_____	_____	_____
Jun 15, 2023	_____	_____	_____	_____	_____
Sept 15, 2023	_____	_____	_____	_____	_____
Jan 15, 2024	_____	_____	_____	_____	_____

**OTHER:**

Did you install a geothermal heating system in your home in 2023? If so, please provide us with a copy of the manufacturer's certification credit statement as well as a detailed cost for each item. Yes No

If you have any questions, or want to talk about any item of income or deductions, please write them down. Yes No

Were you or your spouse (if applicable) an Iowa volunteer firefighter or EMS member during 2023? If so, please include a letter from your fire chief/supervisor documenting your period of service. Yes No

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? Yes No

At any time during 2023, did you receive, sell, send, exchange, or otherwise acquire any financial interest in any virtual currency? Yes No

