

Dear Valued Client,

Thank you for allowing Kowalski Financial Inc. the opportunity to prepare your 2022 income tax returns. Your 2022 Tax Organizer is now available! Please follow the outline below to complete your organizer.

Methods to complete your 2022 Tax Organizer:

- Print out the organizer and enter your data by hand. Please do not use highlighters, staples or post-it notes.
- Complete the organizer digitally. **PLEASE NOTE:** If you choose to complete the organizer on your computer, please be aware that you will need to use Adobe Acrobat version 10, 11, or DC. To obtain Adobe Acrobat Reader, while on your computer, please <u>CLICK HERE</u>. Even though you may be able to display this document in your web browser it may not save the completed document using that plug-in. For best results follow these instructions:
 - 1. Save this PDF to your desktop before completing any section.
 - 2. Open the file that you saved to your desktop with Adobe Acrobat.
 - 3. Enter all relevant your data in this organizer.
 - 4. Save and close the document.
- Submit all documents to us at one time using one of the following methods:
 - Drop off the tax organizer and your source documents at our office.
 - Mail the tax organizer and source documents to our office.
 - Use our Secure Upload portal: Click Here to upload files

Please send all your source documents (W-2's, 1099's, etc.) as well as the organizer at least two weeks prior to your appointment. Failure to comply with this procedure may result in a postponement of your appointment.

We wish you the very best and a prosperous 2023!

Warm regards,

Kowalski Financial Inc.

600 Highway 169 South, Suite 655, Minneapolis, MN 55426 • Phone: (952) 297-8589 • Fax: (952) 426-1549

CHECKLIST - TAX YEAR 2022

TAXPAYER NAME(S):	&	
` '		

Please gather the following and submit all items at one time at least two weeks prior to your appointment.

A signed copy of the 2022 Client Engagement Letter. (**REQUIRED**) We will not begin working on your return until we receive this signed letter. See page 3.

The completed checklist, due diligence questionnaire, and data sheets from this tax organizer.

All W-2 forms for wages, salaries, and tips.

All 1099 forms for interest, dividends, stock sales, miscellaneous income, rents, unemployment, etc.

If you sold stocks, bonds, or transferred mutual funds, we need brokerage statements showing the investment transactions. We also need the cost basis for all investments sold in 2022. Most brokerage statements/1099 contain all necessary information. If cost basis is not provided on your statements, please provide the date purchased and price paid for each transaction for which the cost basis is missing. You may need to review statements prior to 2022 or contact your broker to obtain this information. We are unable to complete your return until we receive this information.

All K-1 schedules showing income from partnerships, S-corporations, estates, and trusts.

All 1098 forms for mortgage interest.

All HUD-1/Settlement Statements if you PURCHASED, SOLD or REFINANCED real estate in 2022.

Property tax statements for 2022 and 2023 for all real estate owned. *Current year statements may not be available until the middle or end of March.

All CRP (Certificates of Rent Paid) forms if you paid rent for your home.

A list of all estimated tax payments made for 2022. Be sure to also include the Q4 payment which is paid in January of 2023. See page 7.

A categorized list of income and expenses for rental property and sole proprietorships and single member LLCs. See pages 8, 9, 10 & 11.

If you use QuickBooks, please send us a QuickBooks backup file. (.QBB files include all necessary data)

A categorized list of unreimbursed employee business expenses. See page 16.

Any tax notices recently sent to you by the IRS, MN Revenue or other taxing authority.

If you had health insurance through a healthcare exchange such as MNSure, attach form 1095-A.

Attach all receipts for dependent care, including all info listed on page 14 of this organizer.

CLIENT ENGAGEMENT LETTER – TAX YEAR 2022

I have engaged Kowalski Financial Inc. ("KF") to prepare Federa	l and State income tax r	eturns for the year
ended December 31, 2022:	, 1 1		,

Individual Taxpayer(s)	Name(s):	
Corporation / LLC / Partnership	Name(s):	
Other forms to file: (See item 9 below)	Form(s): _	

I understand that it is my responsibility to provide KF with all of the required information in order to complete my tax returns. In that regard, I state that, to the best of my knowledge and belief:

- 1. I have provided true, correct and complete information regarding all of my income, including the Forms W-2, 1099 and written summaries, to KF I understand that it is my responsibility to provide all necessary information to complete the return(s). I will retain for a minimum of seven years all documents, receipts, canceled checks and other records required to substantiate the items of income and expense claimed on my return.
- 2. I have provided true, correct and complete information regarding amounts claimed as tax deductions, and have maintained written documentation supporting all deductions, including calendars, logbooks and receipts. I understand that if a question arises regarding the interpretation of tax law, and a conflict exists between the tax authorities' interpretation of the law and other supportable positions, KF will use professional judgment in resolving the issues. I understand that KF will follow whatever position I request, so long as it is consistent with the codes and regulations and interpretations that have been promulgated. If the IRS or state tax authorities should later contest the position taken, there may be an assessment of additional tax plus interest and penalties. I further understand that KF will have no liability for such additional taxes, penalties or interest.
- 3. I understand that taxing authorities may examine the return(s), therefore documentation should be retained to support the information I provide to KF especially business travel and entertainment deductions, business use percentage of autos and other assets, barter activities, and charitable contributions. I understand that penalties may be imposed on return(s) that are late, underpaid, or incorrect. If you have any questions on these penalties, please ask. I further understand that if I have any questions as to the type of records and documents required, I can ask KF for advice in that regard.
- 4. I understand that KF will not verify any information I provide, however KF may require clarification or additional information, and that KF will not be responsible for disallowed deductions or the inclusion of additional unreported income or any resulting taxes, penalties, or interest.
- 5. I understand I will be charged an additional fee if KF is asked to assist or represent me in a tax examination or inquiry. I understand that, in the event of preparer error, I am responsible for additional tax and any interest that may be due, and the extent of KFs responsibility is to pay any penalty the IRS or state tax authority may assess due to its error.
- 6. I will contact KF immediately if I discover additional information that will lead to a change in my return(s), or if I receive any letters from the IRS or state tax authorities.
- 7. I understand that upon request, KF will put all tax advice in writing. Any unwritten advice may be tentative, incomplete, or not fully reviewed.
- 8. I understand that my bill from KF is due and payable immediately upon completion of these returns, and that returns will not be filed until the bill for these services is paid in full. If KF prepares a return for an entity (such as a corporation, LLC, or partnership), I am also responsible to pay for those services. I understand that all outstanding balances must be paid before my 2022 returns are prepared. In the event that any bills are not paid, I will pay collection costs including reasonable attorney fees.
- 9. If there are other services or tax returns that I expect KF to prepare, such as estate, gift, sales and use, fiduciary, property, payroll, or other states or cities, I will note them at the top of this letter.
- 10. I understand that KF must receive all of my tax information as soon as possible, but not later than March 24, 2023 to ensure that KF will have adequate time to review my data by April 18, 2023. If KF has not received all of my information by March 24, 2023, my return may not be completed by April 18, 2023 and my return may be extended and I may be subject to late filing or late payment penalties.
- 11. I understand that it is the policy of KF to electronically file all individual tax returns. I will return Form 8879 as well as any additional required forms deemed necessary for electronic processing of the return in a timely manner, as my return cannot be sent to the proper agencies until KF receives the above-mentioned forms.
- 12. I understand that it is my responsibility to carefully examine and approve my completed tax returns.

The terms described in this letter	r are acceptable and are hereb	y agreed to and shall r	remain in effect until	terminated by
either party in writing.	•			•
1 /				
		_	_	

Accepted by:	Taxpayer:	_ Date:
- ,	Spouse:	_ Date:
	Kowalski Financial Inc.:	Date:

2022 DUE DILIGENCE QUESTIONNAIRE (REQUIRED)

Tax preparers are required to have documentation regarding filing status and dependents. This questionnaire is required to be completed in order for us to prepare your 2022 tax return.

Please answer the following questions: 1. Is there a change in the number of dependents you can claim? (If yes, please update Page 8 with new dependent's personal information) Yes No 2. Did all dependents live with you in the US for the entire year (except temporary absences)? Yes No If no, list dependent(s) and number of days they lived with you below: Dependent: _____ Days: _____ Dependent: _____ Days: _____ 3. Did you (and your spouse if you MFJ) provide over half of each dependent's support? Yes No If no, list the dependent(s) who you did not provide over half of their support: Dependent: ____ Dependent: 4. Did any dependent have income over \$4,400 in 2022?

	Yes
	No
5. Di	d you (and your spouse if MFJ) pay over half of the cost of you and your dependent's home in 2022?
	Yes
	No
	If no, explain:
6. Di	d you release any dependent(s) to someone else?
	Yes
	No
	If yes, list the dependent(s) whose claim was released below:
	Dependent:
	Dependent:
7. Do	o any of your college attending dependents have a felony drug conviction?
	Yes
	No
	If yes, list those dependent(s)
	Dependent:
	Dependent:

Yes No

QUESTIONNAIRE – TAX YEAR 2022 (REQUIRED)

Did your marital status change?

If yes, how?

and update page 7.

Is there a change in the number of dependents you can claim? If yes, update page 7.

Did you have health insurance through a marketplace like MNSure? Attach Form 1095A

Did you contribute to an IRA (outside of work) for 2022? If yes, update page 12.

If you haven't already contributed to a Traditional or Roth IRA for 2022, do you plan to? If yes, update page 12.

Did you pay any student loan interest? Include Form 1098-E's and update page 12.

Did you or your dependents incur any higher-education expenses?

Include Form 1098-T and update page 12.

Did you make a contribution to a 529 plan?

If yes, update page 12.

Did you make a withdrawal from an eduction savings/529 Plan?

If yes, include Form 1099-Q.

Did you make a withdrawal or contribution to an HSA or MSA? If yes, include Form 1099-SA and update page 13.

Did you have any non-reimbursed employee business expenses? If yes, update page 16.

Did you have an allowance or expense account at work? If yes, update page 16.

Did you incur any job-seeking expenses? If yes, update page 16.

Did you make a donation directly from a Traditional IRA account: If yes, update page 12.

Did you sell, exchange, purchase, abandon, or foreclose on any real estate? If yes, include all 1099's & settlement statements.

Did you purchase a home in 2008 and claim the First-Time Homebuyer Credit? If yes, include that return unless we prepared it.

Did you refinance or take out a home equity loan during 2022?

If yes, include all 1098's forms and closing statements.

Did you sell or dispose of any stock in 2022?

If yes, include all 1099 forms, brokerage statements, and cost basis info

Did you own any stock that became worthless in 2022? If yes, include brokerage statements.

Did you sell an existing business or rental property? If yes, include closing statements.

Did you start a new business or purchase rental property? If yes, update & include any closing statements.

QUESTIONNAIRE – TAX YEAR 2022 (...CONTINUED)

Did you have ownership interest in a partnership or S-Corporation? If yes, include all K-1 schedules. Did you receive any payments from property sold prior to 2022? Do you have children that earned investment income? If yes, include their Form 1099's. Did you incur a casualty or theft loss? If yes, describe: Did you make gifts of more than \$16,000 to any individual? If yes, describe: Did you own any foreign assets other than through a US brokerage account or are you a signer on any foreign accounts? If yes, include all documentation and speak with your preparer about these assets. Did you have any affiliation with a foreign bank or brokerage account in 2022? If yes, include documentation. Did you receive a payment and/or make a withdrawal from a retirement account? If yes, include Form 1099-R. Did you receive any disability income? If yes, include income documentation. Did you receive any gambling winnings? If yes, Total losses were: \$ include all W-2G(s) forms and documented losses. Did any of your life insurance policies mature, or did you surrender a policy? Did you cash any Series EE or I Series U.S. Savings bonds issued after 1989? If yes, include all documentation. Did you have any debt canceled or forgiven in 2022? If yes, include all 1099-A forms or 1099-C forms. Did you make any purchases in 2022 for which sales or use tax was not paid? If yes, amount: \$ Do you want to allocate \$3 to the Presidential Election Campaign Fund? Do you want to contribute to the MN Wildlife Fund? If yes, amount: \$ Did you make any energy saving home improvements to your home? Cost: \$ If yes, describe: Did you receive correspondence from the IRS or state tax authorities? If yes, include a copy of any correspondence received. Are you a public safety benefit recipient who has insurance premiums withheld directly from your PERA benefits?

Did you 'mine', buy, sell, or exchange a crypto currency (for example, bitcoin). If sold, include a list in the format: Sale Date/Qty Sold/Sale Amount/Date Acquired/Base Value with totals for the year.

Personal & Contact Information

*If you are a new client or if any information has changed, please complete or update.

All information is the same as it appears on my 2021 return.

Date of divorce or the date that it was last modified:

New/Updated Taxpayer Information		New/Updated Spouse Information
Full Name:		Full Name:
SSN:		SSN:
Date of Birth:/ /		Date of Birth: / /
Cell Phone:		Cell Phone:
Home Phone:		Home Phone:
Work Phone:		Work Phone:
Email:		Email:
New/Updated Address Home	Mailing	New/Updated Dependent Information
Street Address:		Full Name:
		SSN:
City:		Date of Birth://
State: Zip Code:		Relationship:
		*If additional space is needed, please attach a list.
Refur	nd Direct Depo	osit Information
I request that my refund be direct de	posited.	
Bank Name:		Routing #:
Type of Account: Checking Saving	S	Account #:
Est	imated Tax Pa	yments Made
Federal		State
1st Quarter:// 2022 \$		1st Quarter: / / 2022 \$
2nd Quarter:// 2022 \$		2nd Quarter: / / 2022 \$
3rd Quarter:// 2022 \$		3rd Quarter: / / 2022 \$
4th Quarter:/\$		4th Quarter:/\$
	Alimo	ny
Paid to:	SSN:	Amount: \$
Received from:	SSN:	Amount: \$

Sales/Revenue	Taxpayer	Spouse		Taxpayer	Spouse
Gross Revenue:	\$	\$	Materials:	\$	_ \$
Cost of Goods Sold:	\$	\$	Labor:	\$	_ \$
Purchases:	\$	_ \$	Other Incom	ne: \$	_ \$
		Invento	ry (at cost) 12/31/2022	\$	_ \$
Expenses	Taxpayer	Spouse		Taxpayer	Spouse
Advertising:	\$	\$	Travel:	\$	_ \$
Commissions/Fees:	\$	\$	Meals & Ent.:	\$	_ \$
Contract Labor:	\$	\$	Utilities:	\$	_ \$
Employee Benefits:	\$	\$	Wages:	\$	_ \$
Business Insurance:	\$	\$	Dues:	\$	_ \$
Interest:	\$	\$	Phone:	\$	_ \$
Legal/Professional:	\$	\$	Internet:	\$	_ \$
Office Supplies:	\$	\$	Business Gifts:	\$	_ \$
Pension/Profit-Share:	\$	\$	Subscriptions:	\$	_ \$
Rent:	\$	\$		\$	_ \$
Repairs/Maintenance:	\$	\$		\$	_ \$
Supplies:	\$	\$		\$	_ \$
Taxes/Licenses:	\$	_ \$		\$	_ \$
If you purchased any f	ixed assets, p	lease provide the f	following information:		
T S	Description	:	Date Acquir	ed:	Cost:
			/	/ 2022	\$
			/	/ 2022	\$
				-	\$onal lines are necess
If you received any 10	99 forms from	n your customers/	clients, please provide all to	your prepare	:
Did you make paymer	nts to any LLO	C or individual for	services rendered or rent for	or your busine	ss? Yes
If yes, did you issue a 2	2022 IRS For	m 1099 to each co	mpany/person that you paid	d \$600 or more	e? Yes
If you have a solo/indi	vidual 401(k)) plan, what was th	ne 12/31/2022 balance in tha	at account? \$	

COVID-19 Questionnaire - Self Employed

· -	
If yes, describe:	
Was your PPP loan(s) forgiven in 2022?	
Yes If yes, date(s) forgiven (provi	ide forgiveness documentation):
No	
sick leave or other reasons related to covid-19?	credit(s) for qualified leave wages paid to employees due to eturns for relevant quarters (if not prepared by KF).

Covid-19 Questionnaire - All Taxpayers

Are you a frontline worker who applied for and received Frontline Worker Pay benefits totaling \$487.45? Taxpayer: Yes No Spouse: Yes No

Rental Property						
	Property #1	Property #2	Property #3			
Property Address:						
Rental Income:	\$	\$	\$			
Rental Expenses						
Advertising:	\$	\$	\$			
Travel: (for the property)	\$	\$	\$			
# of Miles Driven:						
Cleaning/Maintenance:	\$	\$	\$			
Commissions Paid:	\$	\$	\$			
Insurance:	\$	\$	\$			
Legal/Professional Fees:	\$	\$	\$			
Management Fees:	\$	\$	\$			
Mortgage Interest:	\$	\$	\$			
Other Interest:	\$	\$	\$			
Repairs:	\$	\$	\$			
Supplies:	\$	\$	\$			
Property Taxes:	\$	\$	\$			
Utilities:	\$	\$	\$			
Asset Bought: (attach a list)	\$	\$	\$			
Improvements: (attach a list))\$	\$	\$			
Association Dues:	\$	\$	\$			
	\$	\$	\$			
	\$	\$	\$			
	\$	\$	\$			
	\$	\$	\$			

Did you make payments to any LLC or individual for services rendered or rent?

No

Yes

Yes

If yes, did you issue IRS Form 1099 to each company/person that you paid \$600 or more? No

			Busines	s Vel	nicle Expen	ses			
		Vehicle	e #1		Vehicle	e #2		Vehicle	e #3
Type:	Sc	h. C/Se	elf-Employed	Sch. C/Self-Employed			Sch. C/Self-Employed		
	W	7-2 Emp	oloyee		W-2 Emp	oloyee		W-2 Emp	oloyee
Description:				_					
Driven By:				_					
Date Placed In Service	e:			_					
Total Miles Driven:				_					
Business Miles Driver	n:			_					
Odometer (01/01/202	.2)			_					
Odometer (12/31/202	.2)			_					
Insurance:	\$			\$_			\$		-
Oil Changes:	\$			\$_			\$		-
Repairs:	\$			\$_			\$		-
Car Washes:	\$			\$_			\$		-
Fuel:	\$			\$_			\$		-
MPG:			mpg	_		mpg			mpg
Parking:	\$			\$_			\$		
Lease Payments:	\$			\$_			\$		
Loan Interest:	\$			\$_			\$		
License Tabs:	\$			\$_			\$		
			Home	Offi	ce Expense	SS			
Taxpayer	OR		Spouse						
*You can only deduct	a home	office i	f you do not h	ave a	ın office ava	ailable to you s	omev	vhere else.	
Total Square Feet of H	Iome:			To	tal Square F	Feet of Office:			
Rent:		\$		Re	pairs: (to th	e home office))	\$	
Improvements:		\$		As	sociation fe	ee:		\$	
Insurance·		\$		Utilities (water gas electric garbage) \$				\$	

Retirem	ent Plan Contribution	ons - Not Throug	h Employe	er (401k/403b)		
Taxpayer Contribution: \$_		Spor	use Contrib	oution: \$		
Traditional IRA Roth IRA			Traditional IRA Roth IRA			
Contribution alread	ly made		Contri	ibution already 1	made	
Planning to contrib	oute by 4/15/2023		Planni	ing to contribute	e by 4/15/2023	
	Student	Loan Payments &	k Interest			
Taxpayer Payments: \$	Spouse Pa	nyments: \$		Dependent Payı	ments: \$	
Taxpayer Interest: \$	Spouse In	terest: \$		Dependent Inte	rest: \$	
	Higher Education	(College/Post-Se	condary) E	Expenses		
Student #1:		Stud	lent #2:			
Freshman Soph	nomore Ju	nior	Freshm	an Sophom	ore Junior	
Senior Grad	d		Senior	Grad		
Tuition Paid: \$		Tuit	ion Paid:	\$		
Books: \$		Boo	ks:	\$		
Supplies, etc.: \$		Supp	plies, etc.:	\$		
	529 Plan / Qua	lified Tuition Pla	n Contribu	itions		
Amount: \$	Depender	nt:		Name of Fund:		
Amount: \$	Depender	nt:		Name of Fund:		
*If you need to include additional de	ependents or contributions,	please attach a list.				
		Medical Expense	S			
Please be aware, you canno	t begin deducting m	edical expenses u	inless they	exceed 7.5%* of	your AGI.	
Health Insurance ¹ :	\$	Medical Sup	oplies ³ :	\$	-	
Dental Insurance ¹ :	\$	Clinics/Hos	pitals ³ :	\$	-	
Cobra Premiums ¹ :	\$	Glasses/Cor	ntacts ³ :	\$	-	
Medicare Premiums	s ² : \$	Hearing Aid	ds ³ :	\$	-	
Doctor ³ :	\$	Prescription	ns ³ :	\$	-	
Dentist ³ :	\$	Miles driver	n for medic	cal reasons:		

¹Only list health or dental insurance if it is NOT withheld pre-tax from your paycheck.

²Medicare premiums are listed on Form 1099-SSA.

³Only list expenses that were NOT reimbursed by an FSA, HSA or MSA or health insurance.

Health Savings Accord	unt/Medi	cal Saving	s Accou	int Con	tributions &	Withdraw	vals
	Тахр	Taxpayer		Spouse			
Contributions:	\$				\$		
Withdrawals:	\$				\$		
Account Type:	HSA	MSA	FSA		HSA	MSA	FSA
Coverage Type:	Single	Fa	mily		Single	Fa	mily
Were all withdrawals used for me	edical exp	enses?		Yes	No		
		Long-Ter	m Care	Insura	nce		
	Taxp	ayer			Spouse		
Amount:	\$				\$		
Policy #: (REQUIRED)							
Insurance Company:							
		Real	Estate	Taxes			
Primary Residence:	\$			Cabin:		\$	
Secondary Residence:	\$					\$	
Personal '	Vehicles						
Vehicle Registration:	\$						
# of Vehicles in Above Fig	gure:						
		Inter	rest Exp	ense			
	Nam	e of Lend	er		Inte	erest Paid	
Primary Res 1st Mortgage:					_ \$		_
Primary Res 2nd Mortgage:					_ \$		_
Cabin:					_ \$		_
Margin Interest:					_ \$		_
Home Equity Loan/Line:					_ \$		_
Mortgage Insurance Premiums:	\$			*Only lis	t insurance for loa	ıns taken out	in 2007 or later
*Make sure you include Form 10	98 for eac	h mortga	ge listec	d here.			

Charitable Activities

Donations

Per IRS Guidelines: All donations must be substantiated by receipt/letter from recipient with the exception of donations less than \$250, which can be documented with a cancelled check or credit card statement instead. Receipt/letter must be received by date of tax-return filing. Non-cash contributions should be valued using garage-sale prices, and donations totaling over \$5,000 require an appraisal.

Total donations by cash, check or charge: \$_______

Total donations by cash, check or char	ge: \$	_	
Total value of property donated:	\$	_	
Description of what was donated:			
Name of Organization:			
Organization Address:			
Date of Donation(s):	//2022	/ / 2022;	//2022;
*Attach a list for additional property donations			
Volunteering			
Volunteer Expenses: **Only include actual out of pocket expenses (you	r time does not count)	Miles Driven:	

Daycare Expenses					
Child #1 Name:	Child #2 Name:				
Amount Paid:	Amount Paid:				
Provider's Name:	Provider's Name:				
Provider's Tax ID:	Provider's Tax ID:				
Provider's Address:	Provider's Address:				

^{*}If additional space is needed, please attach a list including all information above.

Minnesota K-12 Expenses

Student #1		Student #2
Student's Name:		
Grade:		
Tuition:	\$	\$
Books/Supplies:	\$	\$
Musical Instruments:	\$	\$
Type of Instrument:		
Gym Clothes:	\$	\$
Transportation Fees ¹ :	\$	\$
Tutoring:	\$	\$
Drivers Education:	\$	\$
Lessons:	\$	\$
Computer:	\$	\$
Education Software:	\$*If	\$additional space is needed, please attach a list including all information above

 $^{^{1}\}mathrm{Transportation}$ expenses must be paid to 3rd parties. This is not the same as mileage on your own vehicle.

				Taxpayer	Sį	ouse			
	Office Supplies:		\$		\$				
	Taxes	/License	s:	\$	\$_				
	Travel	l :		\$	\$_				
	Meals	& Enter	rtainment:	\$	\$_				
	Intern	iet:		\$	\$_				
	Subsc	riptions:	:	\$	\$_				
	Phone	: :		\$	\$_				
	Referi	al Fees:		\$	\$_				
	Busin	ess Gifts	:	\$	\$_				
	Union	Dues:		\$		\$			
				\$	\$_	\$			
				\$	\$_				
				\$	\$_				
				\$	\$_				
	Teach	ers (K-1	2) Educator Expenses:	\$	\$_				
If you	purcha	sed any	fixed assets, please prov	ride the followir	ng information:				
T S		S	Description	D		Date Acquired		Cost	
					/	_/2022	\$		
					/	_/2022	\$		
					/	_/2022	\$		
*If add	ditional	assets w	vere purchased, please a	ttach a list inclu	uding all informa	tion above.			
Does	our en	nployer l	nave a business expense	reimbursemen	t policy? Ta	axpayer	Yes	No	
					SI	pouse	Yes	No	
If you	get rein	nbursed	from your employer fo	r any of the exp	enses listed abov	e, please list	the amounts	below:	
			Auto / Mileage:						
			Meals & Entertainmen	nt: \$					
			Cell Phone:	\$					
			Other:	\$	*Attach a	list if you need r	nore space		

MN Residents Unreimbursed Employee Business Expenses (Not Entered Elsewhere)