

## Checklist

Name:

SSN:

### Checklist

This checklist is provided to help you gather necessary information for us to prepare your 2024 income tax return. Return this list, along with the supporting documentation, to our office and let us know of any significant changes from your 2023 tax year.

#### General Information 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.)
- Income tax returns from the prior two years  
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 Year 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)
- Credit card, debit card, and third-party network transactions (Form 1099-K)
- Reportable payment transactions
- Social Security benefits (Form SSA-1099)
- Railroad retirement benefits (Form RRB-1099)
- Income from partnerships, S corporations, estates, and trusts (Schedule K-1)
  - Basis information for any partnerships and S corporations
- Documentation of brokerage transactions and disposition of capital assets (Form 1099-B)
- Proceeds from real estate transactions (Form 1099-S)
- Self-employed business income (Schedule C)
- Farm income (Schedule F)
- Farm rental income (Form 4835)
- Income from rental real estates and royalties (Schedule E)

#### Other Income (provide supporting documentation for income received for the following items)

- Sale of assets or property
- Cancellation of debt
- Other income \_\_\_\_\_

#### Payments (provide supporting documentation for payments made for the following items)

- 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
- Medical and dental expenses
- Real estate taxes
- Other state and local taxes

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- Mortgage interest
- Investment interest
- Cash contributions
- Noncash contributions (provide organization name)
- Unreimbursed employee expenses
- Investment expenses
- Gambling losses
- Other payments \_\_\_\_\_

## Questionnaire

Name:

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### Questionnaire

#### Personal Information

**Yes No**

- Did your marital status change during the year? If "Yes," explain. \_\_\_\_\_
- Did your address change during the year?
- Were you, your spouse, or any dependents issued an Identity Protection PIN (IP PIN)?  
If "Yes," provide Notice CP01A from the IRS.

#### Dependent Information

**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?

#### Health Care Information

**Yes No**

- Did any member of your household have healthcare coverage through the Marketplace (Obamacare)?  
If "Yes," provide copies of Form 1095-A.
- Did you make any contributions to or receive any distributions from a Health Savings Account (HSA) during the year?

#### Income, Purchases, Sales, and Debt Information

**Yes No**

- Did you receive any disability income during the year?
- Did you start a new business or purchase any rental 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 use percentage.
- Did you buy or sell any stocks, bonds, or other investments during the year?
- Did you receive, sell, exchange, or otherwise dispose of any crypto currency or digital asset during the year?  
If "Yes," please provide a statement of gains and losses recognized for the year.
- Did you abandon any assets, business interest or piece of real property during the year?
- Did you sell, exchange, or purchase any real estate during the year?  
If "Yes," please provide closing documentation for the purchase and sale of the property.
- Did you acquire a new or additional interest in a partnership or S corporation?
- Did you have any debts canceled or forgiven this year? If so, please provide Form 1099-A or 1099-C
- Did you purchase a new Plug-in hybrid, or electric motor energy-efficient vehicle during the year?  
If "Yes," provide the report the dealer or seller is required to provide to you and the vehicle identification number (VIN).
- Did you receive any other income you have not provided information for with this organizer?  
If "Yes," explain. \_\_\_\_\_

#### Itemized Deduction Information

**Yes No**

- Did you pay substantial out-of-pocket medical or dental expenses (premiums, prescriptions, mileage, etc.) during the year? It must exceed 7.5% of your income.
- Did you pay any long-term care premiums for yourself, your spouse, or a dependent during the year?
- Did you pay any state income tax from prior years?
- Did you pay mortgage interest or property taxes during the year?
- Did you make cash or noncash donations to churches or charities during the year?

#### Retirement Information

**Questionnaire**

Name:

SSN:

**Questionnaire**

**Yes No**

- Did you make any contributions to an IRA, Roth, 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, SIMPLE, SEP, 401(k), or other qualified retirement plan during the year?
- Did you receive any Social Security benefits during the year?

**Education Information**

**Yes No**

- Did anyone in your household attend a post-secondary school during the year?
- Did you pay tuition expenses that were required for attending college, university, or vocational school for yourself, your spouse, or a dependent during the year (even if classes were attended in another year)?
- Did you make a contribution to or receive a distribution from an Education Savings Account such as a 529 account?
- Did you pay student loan interest for yourself, your spouse, or your dependents during the year?  
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 in a foreign country?
- 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 own property in a foreign country?

**Refund, Withholding, and Estimated Tax Information**

**Yes No**

- Did you make any estimated payments toward your 2024 taxes?  
If so, please list amounts paid:

| Date  | Amount |
|-------|--------|
| _____ | _____  |
| _____ | _____  |
| _____ | _____  |
| _____ | _____  |

- If you have an overpayment of 2024 taxes, do you want the refund applied to your 2025 estimated taxes?
- Do you want to have any refund directly deposited?  
If "Yes," provide a canceled checking or savings slip.
- Do you anticipate your income or withholdings to be different for 2025?

**Miscellaneous Information**

**Yes No**

- Did you pay wages to any household employees (babysitter, nanny, housekeeper, etc.)?
- Did you make gifts to any one person in excess of \$18,000 during the year?
- Did you make any energy-efficient or solar improvements to your main home during the year?
- Did you make any purchases subject to use tax during the year?  
If "Yes," provide Use Tax due.
- 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?

### Dependent and Other Information

Name: \_\_\_\_\_

SSN: \_\_\_\_\_

#### Dependent Information

| First and Last Name<br>SSN | Has<br>IP PIN | Relationship | Months<br>in<br>Home | Date of Birth | Disabled | Full-<br>time<br>Student | Childcare<br>Expenses |
|----------------------------|---------------|--------------|----------------------|---------------|----------|--------------------------|-----------------------|
|                            |               |              |                      |               |          |                          |                       |
|                            |               |              |                      |               |          |                          |                       |
|                            |               |              |                      |               |          |                          |                       |
|                            |               |              |                      |               |          |                          |                       |
|                            |               |              |                      |               |          |                          |                       |

List dependents required to file a return \_\_\_\_\_

#### Child and Other Dependent Care Expenses

| Name of Care Provider | Address | SSN or EIN | Amount Paid |
|-----------------------|---------|------------|-------------|
|                       |         |            |             |
|                       |         |            |             |
|                       |         |            |             |

#### Estimates

|                               | Federal   |        | Resident State |        | Resident City |        |
|-------------------------------|-----------|--------|----------------|--------|---------------|--------|
|                               | Date Paid | Amount | Date Paid      | Amount | Date Paid     | Amount |
| Overpayment applied from 2023 | _____     | _____  | _____          | _____  | _____         | _____  |
| First quarter                 | _____     | _____  | _____          | _____  | _____         | _____  |
| Second quarter                | _____     | _____  | _____          | _____  | _____         | _____  |
| Third quarter                 | _____     | _____  | _____          | _____  | _____         | _____  |
| Fourth quarter                | _____     | _____  | _____          | _____  | _____         | _____  |
| Additional payments           | _____     | _____  | _____          | _____  | _____         | _____  |