

2024 Annual Check List - Required to Begin Page 1 of 8

Due diligence regulations require that we, your income tax return preparer, obtain the following information from you **annually**. Please read, answer, and return this checklist. **We cannot begin until you complete, sign, date (page 8) and return this checklist, along with your signed "Letter of Engagement". PLEASE PRINT CLEARLY. Skipping questions will delay preparation.**

Section 1. - Personal Information - Please provide missing information / make corrections, as needed.

[tp first name] [tp last name] Taxpayer

Preferred #: [Client Mobile] _____

Email: [tp email] _____

Date of Birth: [tp date of birth] _____

[sp first name] [sp last name] Spouse

Preferred #: [sp Mobile] _____

Email: [sp email] _____

Date of Birth: [sp date of birth] _____

Home: [client street] [client apt] _____

[client city], [client state] [client zip] _____

Driver license state (IN, MI, etc.) Taxpayer State _____ Spouse State _____

DL / state ID# T _____ S _____

Date issued T _____ S _____

Date expires T _____ S _____

Did you pay **quarterly estimated tax payments** for tax year **2024**? (CIRCLE ONE) Yes No

Please list and provide copies of canceled checks or other confirmation. **DO NOT include tax year 2023 extension payments made in April 2024 or amounts paid when you filed your 2023 tax return.**

<u>Due Date</u>	<u>Date YOU Actually Paid</u>	<u>Amount Paid to IRS</u>	<u>Amount Paid to Indiana</u>	<u>List any other States</u>
April 15, 2024:	_____	\$ _____	\$ _____	\$ _____
June 15, 2024:	_____	\$ _____	\$ _____	\$ _____
Sept 15, 2024:	_____	\$ _____	\$ _____	\$ _____
Jan 15, 2025:	_____	\$ _____	\$ _____	\$ _____

Section 1. - Personal Information (continued)

- A. Did you receive any notice or correspondence from the IRS or state (**CIRCLE ONE**) Yes No
Please provide us with a copy, if you have not already done so.
- B. Did you or any of your dependents receive an Identity Protection PIN (IP PIN) Yes No
from the IRS for 2024? If yes, please provide the IRS letter for 2024.
- C. At any time during 2024, did you: (a) receive (as a reward, award, or payment Yes No
for property or services); or (b) sell, exchange, or otherwise dispose of a
digital asset (or a financial interest in a digital asset)?
- D. Did you / spouse work remotely for an employer located in another state? Yes No
You may have additional state filing requirements. Please contact us.
- E. Did your marital status change during the year? Yes No
- F. Did you pay or receive alimony in 2024? Yes No

Please provide the total amount of alimony paid or received in 2024: \$ _____

The date of your original divorce or separation agreement is

now **required** on tax returns. Please provide the date: _____

- G. **Did you or your spouse have health care coverage through the government marketplace (Obamacare) during 2024?** If yes, you should receive Form 1095-A, Yes No
which is issued by the marketplace. You may receive more than one Form 1095-A
for 2024. We need all the forms you receive.

Section 2. - Foreign Assets and Foreign Income

- A. At any time during 2024 did you, your spouse or your dependents own an interest in, or have signature authority over, any financial account (checking, savings, securities or a brokerage account) located in a foreign country?

Include accounts shared with dependents that may be temporarily abroad (a college student studying overseas), or a parent living in another country.
Exclude foreign assets/stocks in a US administered broker account, even if your broker account says foreign taxes were paid. Yes No
- B. During 2024, did you receive a distribution from, or were you the grantor of, Yes No
or transferor of money to, a foreign trust?
- C. To the best of your knowledge, do you own any foreign property, hold a business Yes No
interest in an entity located in a foreign country, or have retirement
accounts in a foreign country? If yes, please describe.

Section 3. - Dependent Information (if N/A, draw line through section)

- A. Are there any changes in dependents to be claimed from last year? Yes No
If yes, please provide name, date of birth, copy of social security card **AND**
relationship (son, daughter, parent, etc.)

Section 3. - Dependent Information (continued)

- | | | | |
|----|---|-----|----|
| B. | In cases of divorced/separated families where you are the Non-Custodial parent, do you have Form 8332 signed allowing you to claim the child as your dependent?
If yes, provide signed Form 8332. | Yes | No |
| C. | Did any dependent children earn income from a summer job, a part-time job work study while at college, or as a 1099 payee in 2024?
If yes, has a tax return already been filed for the dependent?
If no, would you like us to prepare them for an additional fee? | Yes | No |
| D. | Do you have any dependent children under the age of 19, or a full-time student under age 24, with interest, dividends, and capital gains, etc. greater than \$2,600 in 2024?
If yes, has a tax return already been filed for the dependent? | Yes | No |
| E. | Did any of your dependents have income from a trust in 2024?
If yes, has a tax return been filed for the dependent? | Yes | No |

If your dependent already filed their tax returns, please provide us a copy. If your dependent's return was prepared incorrectly, it may delay preparation and e-filing of your tax returns and, more importantly, the family as a whole may pay more tax than required!

Section 4. - Income

To assist in gathering your information, please review the attached organizer and cross out any items that no longer apply. Perhaps you changed jobs, banks, credit unions, investment brokers, etc. Please let us know so that we can ask better follow up questions. You may either return the organizer to us with your notes or list the items that no longer apply on a separate sheet of paper. Thank you.

- | | | | |
|----|--|-----|----|
| A. | Did you receive installment payments in 2024 from real estate you originally sold in a prior year?
If yes, we will need details of the sale, if not already provided. | Yes | No |
| B. | Did you sell an existing business, rental, or other property in 2024?
If yes, attach a signed copy of the closing papers. | Yes | No |
| C. | Did you sell any stocks, bonds, etc. in 2024?
If yes, provide purchase cost and purchase date(s) | Yes | No |
| D. | Did you receive payments from a pension, profit sharing or 401(k) plan, Traditional IRA, Roth IRA, Keogh, SIMPLE or SEP in 2024?
If yes, provide all Form 1099Rs | Yes | No |
| E. | Did you convert a traditional IRA to a Roth IRA, including a "back door" Roth in 2024? | Yes | No |
| F. | Did you receive any disability income during 2024?
If yes, provide documentation | Yes | No |
| G. | Did you cash out any Series EE or U.S. Savings bonds in 2024 that were originally issued after 1989? If yes, provide documentation | Yes | No |

Thank you for allowing us to serve you this year. We appreciate you!

Section 4. - Income (continued)

- | | | |
|---|-----|----|
| H. Did you have any other income to be reported, such as: | | |
| - unemployment income | Yes | No |
| - gambling or lottery earnings | Yes | No |
| - company awards income (trips, prizes, etc.) | Yes | No |
| - jury duty | Yes | No |
| - VENMO, CASH APPS, PayPal, EBay, etc. | Yes | No |
| - other? Indicate _____ | Yes | No |

If yes, provide documentation (W2-G, 1099s, etc.)

Section 5 - Self Employed / Commercial & Residential Rental / Farm (if N/A, draw line through section)

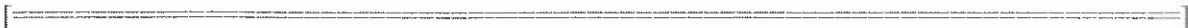
- | | | |
|--|-----|----|
| A. Did you start a new business in 2024?
If yes, call our office to discuss, if you have not already done so. | Yes | No |
| B. Did you acquire a new interest in any partnership or S Corporation?
Are you the partner/shareholder responsible for the preparation of the company's tax return?
If yes, please call us immediately for assistance.
If no, please provide Schedule K-1 from the partnership or S Corp. | Yes | No |
| C. Please provide an electronic backup of your accounting records, or printed balance sheet and profit and loss statement, if you have not already done so. | | |
| D. Did you make payments in 2024 that would require you to file Form(s) 1099?
If yes, will you prepare and file Form(s) 1099 as required?
If no, do you want our office to prepare Form(s) 1099 for you for an additional fee? | Yes | No |
| E. If you drove your personal vehicle to conduct business, please indicate the following: | | |

	<u>Business miles</u>	<u>Commuting, Personal and Non Business Miles</u>
January 1 - December 31, 2024	_____	_____

For Sections 6 and 7 below, we ask that you provide the following, even if you plan to use the standard deduction. Some of these items may qualify for state deductions and credits.

Section 6. - Medical, Mortgage Interest, Taxes and Casualty Losses

- | | | |
|--|-----|----|
| A. Did you list and summarize your 2024 <u>out-of-pocket</u> medical, dental, vision and prescription expenses? | Yes | No |
| B. Did you include mortgage and property tax statements for all properties owned? | Yes | No |
| C. Did you take out a home equity loan this year?
If yes, did you use the proceeds to improve your principal residence? | Yes | No |
| D. Are the total mortgages on your first and/or second residence greater than \$750,000?
If yes, please provide the principal balance at the beginning and end of the year. | Yes | No |



Section 6. - Medical, Mortgage Interest, Taxes and Casualty Losses (continued)

- E. Did you attach copies of your 2024 registration cards for personal vehicles, boats trailers, etc.? Only the excise tax portion is deductible for Indiana residents. Yes No

Casualty losses

A list of 2024 federally declared disasters is available at <https://www.fema.gov/disasters/disaster-declarations>

Only casualty losses caused by fire, flood, wind, etc. in a federally declared disaster area are deductible in 2024. Please provide details on your casualty loss, if due to one of these disasters.

Section 7. - Charitable Donations

- A. If you donated to not-for-profit charities by check or credit card in 2024, please list below. **Do not include** amounts paid directly to individuals, "Go-fund-me" accounts, political parties, political action committees or political campaigns. **These payments are not deductible.**

Date Paid	Amount	Name of Charity
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Need more space? Please continue your list on separate sheet of paper or in the appropriate section of the Organizer. As always, keep receipts from the charity to prove your donation.

Please provide your list of donations, even if you do not plan to itemize your deductions. Certain donations qualify for state credits. **We don't want to miss any deductions!!**

- B. If you donated clothing, furniture, household items, shares of stock or other non-cash items in 2024, we are required to report all the following information for non-cash donations:

- Charity name and full address (street, city, state, zip)
- The date of your donation and a complete list of items donated
- Fair market value of donation (you must determine this)

Stating that you donated "6 bags of clothes" is no longer adequate. You are responsible for a detailed list of items and the dollar value of each item donated (example: 30 sweaters, \$3 each). Large value items may require an appraisal before a deduction is allowed. Please provide the letter from the charity showing receipt of the non-cash items.

- C. Did you make any charitable donations directly from your IRA required minimum distribution - called a Qualified Charitable Distribution? Yes No

If yes, please provide documentation from the IRA company and receipt from charity.

- D. Did you contribute to an Indiana Scholarship Granting Organization, (SGO) or an Indiana Neighborhood Assistance Program, (NAP) ? Yes No

If yes, provide the certification letter from the organization. We must attach the letter to the Indiana return and paper file the Indiana return.



Section 8. - Other Information

- A. Did you pay student loan interest during 2024? If yes, provide Form 1098E Yes No
- B. Did you gift a total of \$18,001 or more to any individual during 2024?
If yes, please provide name of individual, date and amount of gift.
Please note that "gifts" include money, cars, stocks, artwork, etc. Yes No
- C. Did you deposit into any Traditional IRA accounts in 2024? Do not include retirement plan contributions through your employer or Simple Plans.
If yes, please provide a statement from the IRA company. Yes No
- D. Did you deposit into any Roth IRA accounts in 2024? Do not include retirement plan contributions through your employer or Simple Plans.
If yes, please provide a statement from the IRA company. Yes No
- E. Did you deposit into a health savings account (HSA) in 2024?
If yes, is the HSA a single or family plan?
Please provide Form 5498-A OR a year end statement from your HSA provider Yes No
Single Family
- F. Did you withdraw from a health savings account (HSA) in 2024?
If yes, please provide Form 1099-SA from your HSA provider Yes No
- G. Did you pay college education expenses for you, your spouse, or a dependent during 2024?
If yes, provide Form 1098-T from the college/university & copies of the tuition bills. Yes No
- H. Did you incur child care expenses during 2024?
If yes, please include the individual or service provider's official name, address, and Tax ID and amount paid for care per child. Yes No

Section 9. - Indiana Residents Only

- A. On January 1, 2024 which Indiana county did you: Live in Work in

Taxpayer _____ _____

Spouse _____ _____
- B. Did you deposit into an Indiana College Choice 529 Investment Plan in 2024?
If yes, please provide the December 31, 2024 statement showing the account number and the amount deposited. Yes No
- C. Did you withdraw from an Indiana 529 Investment Plan in 2024?
If yes, please provide Form 1099-Q. Yes No
- D. Did you incur education expenses (tuition, fees, books) for dependents who attended an Indiana private school or home school in grades K - 12?
If yes, provide costs paid for each dependent separately. Yes No

Section 9. - Indiana Residents Only (continued)

- E. Homeowners - Please provide the real estate taxes paid on your residence and the Indiana property tax statements.
- F. If you rented a house or apartment, provide the name and address of the landlord, the number of months rented and total rent paid.
- G. Did you purchase any items from out-of-state businesses on which sales tax was not charged (i.e. online purchases)? Yes No
 If yes, enter total purchase price \$ _____

Section 10. - Michigan Residents Only Indicate Michigan School District _____

- A. Homeowners - Please provide the real estate taxes paid on your residence, the Michigan property tax statements and the dates you made your payments.
- B. Renters - Please provide address of home you rented, Landlord's name and address, number of months rented and the total rent paid for the year.
- C. Did you pay tuition to a Michigan college? Yes No
- D. Did you purchase any items from out-of-state businesses on which sales tax was not charged (i.e. online purchases)? Yes No
 If yes, enter total purchase price \$ _____

Section 11. - Final Review

- A. Did you read and answer all the questions in this checklist? Yes
- B. Did you read and sign the "Letter of Engagement"? Yes
 Please return the "Letter of Engagement" with this checklist.
- C. Did you provide all your documents (W-2s, 1099's, etc.) with this checklist Yes No
 necessary to complete your tax return?
 If no, please indicate any additional information you believe is missing.

Sending your information back to us by EMAIL

***** When emailing your information to us, please scan all your documents as one or two large PDF files and send as one or two emails. Emails containing multiple PDF files do NOT always transmit properly, which slows preparation of your tax returns. *****

If you send more than one email, please number the emails (1 of 4, 2 of 4, etc.) so we can be sure we receive all of them - the volume of email we receive this time of year is very high and we don't want to miss any from you.

Section 11. - Final Review (continued)

DO NOT ASSUME we have the information above from last year. Print clearly. You will be required to verify this information on your return. Missing information will delay processing.

D. If you want refunds deposited directly to your bank, please provide the following.

Credit Union / Bank name _____

Routing number _____

Checking Account number _____

OR Savings Account number _____

E. We will electronically file your tax returns and return your original documents to you, along with a paper copy of your completed returns, for your files. Only when requested by you in writing, and **for an additional fee of \$35.00** per tax return year, will we provide you a scanned copy of your federal and state tax returns as an attachment to an email using an email address that you designate or on a USB device that you provide. We must have your signature on the e-file forms before the email can be sent.

Do you wish to have a scanned copy of your return for an additional \$35? Yes No

F. Do you want us to use a delivery service (UPS, FEDEX, etc.) to return your tax returns and documents to you **for an additional charge** when they are ready? Yes No

IF YES Check one [] below and print the address where you want your package delivered.

[] No signature required, default

[] Signature required

Street: _____

City, State, Zip: _____

Section 12. - Looking ahead to 2025

Do you anticipate a significant change in income, deductions or dependents in 2025? Yes No
If yes, please provide details.

I (we), the undersigned, have read the above checklist and answered each question to the best of my (our) ability on my (our) behalf, and on behalf of all persons claimed on my (our) income tax return in 2024.

[tp first name] [tp last name]

Date

[sp first name] [sp last name]

Date

Thank You!! It is our privilege to serve you!