# 2024 Individual Taxpayer Organizer

(See next page for Organizer)



#### Thank you for taking the time to complete the following organizer.

These updates are necessary in order for us to better serve you.

Please note the following changes as of the 2024 Tax Year:

- Until further notice, there will be **NO IN-OFFICE** appointments. You may continue to drop your documents off to 137 National Plaza Suite 300 National Harbor, MD 20745.
- Any dropped off documents **MUST BE** free of staples, clip and envelopes. Copies are preferred.
- ALL Business returns, Including Schedule C, Schedule E, Corporate, S-Corp and Partnership returns, will be required to purchase Audit Protection provided by Protection Plus for an additional fee of \$50.
- Proper and Current **Identification** will be requested of all new and returning clients.
- **Payment is due when services are rendered** unless otherwise arranged in advance of your appointment. Please advise a member of the staff if arrangements need to be discussed. We are here to help! ASK ABOUT REFUND TRANSFERS AND ADVANCED REFUNDS.
- ALL balances must be paid in full or payment arrangements made before completed returns will be provided.



### New Clients - Please complete relevant information in its entirety.

### Returning Clients - Please update with new information and changes.

#### NO UPDATES

Taxpayer					Tax ID # *		
First Name	M.I.	Last	t Name	Email	I	IP PIN	
Occupation		Date	of birth		Are you new	v to our firm?	Yes No
Address		City			State	Zip	
County		Prima	ary phone		Secondary p	hone	
Driver's License No.				State Issue	e Date	Exp. Date	
Spouse					Tax ID # *		
First Name	M.I.	Last	t Name	Email	I	IP PIN	<u> </u>
Occupation		Date	of birth		Are you new	v to our firm?	Yes No
Address (If different from Taxpayer)		City			State	Zip	<u> </u>
County		Prima	ary phone		Secondary p	hone	<u> </u>
Driver's License No.				State Issue	e Date	Exp. Date	
If you moved during 2024, enter your	previous address	6.			Date of mov	e	
Marital status at 12/31/24: Single Were you divorced or separated durin Individuals who are in registered dor Have you received any notice from the	ng the year? Ye nestic partnership	s (RDI	o Ps) and civil uni	Were there any ons are not consi	d Domestic Partne 7 deaths in the fam dered married for Yes No	nily? Yes No	
<b>Names of dependent children</b> <i>Child's full name</i>	Tax ID #	*	IP PIN	Date of birt	Months lived a home in 2024		College student?
Did any of the children have unearned			2		of the children ha	•	Yes No
Is it anticipated that a different taxpay Other dependents or people who liv		aim a c	child listed abov	e as their depend	lent for tax year 20	)22? Yes No	)
Name	Tax ID # *		IP PIN	Date of birth	Months lived in home in 2024	Relationship	Income
	eposit of refund	Dire	ct debit of balan	ce due Name of			
	nsit number			Account ni			
Ask your tax preparer for information		-		-	· ·		
*A Tax ID # is either a Social Security Numb	er (331N), adoption	ахрау	er identification n	under (ATIN), or a	п пштица (ахрау	er identification nu	mber (1111).

## Questions—All Taxpayers

(Provide related statements or other documentation.)

"You" refers to both taxpayer and spouse—enter "?" if unsure about a question.

			it axpayer and spouse er							
	Yes	No	Are either you or your spor	0,	1		T			
	Yes	No	Paid Received \$							
	Yes	No	Did you purchase health insurance through a public exchange?							
E	Yes	No	Will there be any significant changes in income or deductions next year, such as retirement?							
LIFESTYLE & IAXES	Yes	No	Did you pay anyone for domestic services in your home?							
LLE &	Yes	No	Did you purchase a new er	vergy-efficient car, truck	k, or van?					
	Yes	No	Are you involved in bankre	uptcy, foreclosure, repo	ssession, c	r had any debt (including	g credit cards	) cancelled	!?	
5	Yes	No	Are you a member of the m	uilitary?		State of residency				
	Yes	No	Were you a citizen of or liv	ed in a foreign country	?	Foreign country				
	Yes	No	Do you own or have finance	cial interest in a foreign	bank or fi	nancial account? Maximu	m value \$			
	Yes	No	Would you like to allow yo <i>Designee's name</i>		her persor <i>ne number</i>	to discuss your return w	rith the IRS? PIN (any fi	ive digits)		
+	Yes	No	Were any children born or	adopted in 2024? (Provi	de statemer	it for other expenses.)		0		-
	Yes	No	Were any children attending	-						
	100	110		by you: <i>Tuition</i> \$	1000 10	Student loan interest \$		Books \$		
				by student: <i>Tuition</i> \$		Student loan interest \$		Books \$		
	Yes	No	Did you pay any tuition for		dependent			DOOKS \$		
	105	140	Student		acpenaem	of take classes yoursen.	Amount pai	d ¢		
5			Name and address of school				21mouni pui	иψ		
	Vac	No			uld work	or go to school? (add state	mont if noodo	1)		
	Yes	No	Did you pay for child or dependent care so you could work or go to school? (add statement if needed)							
			Name of provider				EIN or SSN			
┝		N.T.	Address	1 1 1.	6.01	150 0	Amount pai	a \$		
┝	Yes	No	Do you have any children who have unearned income of \$1,150 or more?							
+	Yes	No	Did you make any contributions to a 529 plan in 2024?							
┝	Yes	No	Did you, or will you, contribute any money to an IRA for 2024? Traditional IRA Roth IRA							
-	Yes	No	Did you roll over any amounts from a retirement account in 2024?							
	Yes	No	Did you sell or transfer any stock or sell rental or investment property?							
	Yes	No	Did you receive any income from an installment sale?							
	Yes	No	Did you have any investments become worthless or were you a victim of investment theft in 2024?							
	Yes	No	Were you granted, or did you exercise, any employee stock options during 2024?							
	Yes	No	Did you (a) receive (as a red dispose of a digital asset (o				ell, exchange	, gift, or ot	herwise	
	Yes	No	Did you, or do you plan to	, contribute money befo	ore April 1	8, 2025 to an HSA for 2024	4? If yes, prov	vide details	3.	
	Yes	No	Did you pay any interest of	n a loan for a boat or RV	V that has	living quarters? If yes, pro	ovide details.			
DEPOCIONS	Yes	No	Did you pay sales taxes on	a major purchase in 202	24, such as	a vehicle, boat, or home	,			_
2	Yes	No	Did you make any charitable contributions in 2024? If yes, provide details.							
2	Yes	No	Did you work from a home	e office or use your car f	for busines	ss?				
	Yes	No	Did you receive income fro	m a sharing/gig econo	my activit	y (e.g. Airbnb, Uber, etc.)	?			
	Yes	No	Do you own a business or a	an interest in a partners	hip, corpo	ration, LLC, farming acti	vities, or othe	er venture?	2	
	V	No	Do you own a business or an interest in a partnership, corporation, LLC, farming activities, or other venture? Did you purchase or sell a main home during the year? If yes, provide closing statement.							
2	Yes									-
		No	YesNoIf you sold a home, did you claim the First-Time Homebuyer Credit when it was purchaseYesNoDid you refinance a mortgage or take a home equity loan? If yes, provide closing stateme							
-	Yes					ves, provide closing state	ement.	1		
HUME	Yes Yes	No	Did you refinance a mortga	age or take a home equi	ity loan? If			-		,
-	Yes Yes Yes	No No	Did you refinance a mortga Did you use any mortgage	age or take a home equi loan proceeds for purp	ity loan? If oses other	than to buy, build, or sub	ostantially im	-		,
HUME	Yes Yes Yes Yes	No No No	Did you refinance a mortga Did you use any mortgage Did you make any new ene	age or take a home equi loan proceeds for purp ergy-efficient improvem	ity loan? If oses other nents to yo	than to buy, build, or sub ur home? If yes, provide	ostantially im	-		<u>}</u>
Stat	Yes Yes Yes Yes e infor	No No No matio	Did you refinance a mortga Did you use any mortgage Did you make any new ene Full-year resident	age or take a home equi loan proceeds for purp ergy-efficient improvem	ity loan? If oses other	than to buy, build, or sub ur home? If yes, provide nt School district	ostantially im details.	prove you	r home?	<b>&gt;</b>
Stat	Yes Yes Yes Yes e infor	No No No matio	Did you refinance a mortga Did you use any mortgage Did you make any new ene	age or take a home equi loan proceeds for purp ergy-efficient improvem	ity loan? If oses other nents to yo	than to buy, build, or sub ur home? If yes, provide	ostantially im details. n your home	prove you		?

#### **Income Worksheet**

Provide to your preparer all Forms W-2, 1099-INT, 1099-DIV, 1099-R, 1099-MISC, 1099-NEC, 1099-K, and other income reporting statements. Do not list dollar amounts for the following forms. Your preparer will report the appropriate amounts.

Indicat	e "T" for taxpayer, "S" for spouse, "J" for joint			_	Pro	wide additional statemen	ts if m	ore room is needed
Forms	W-2—Wage and Tax Statement							
T/S	Employer name			T/S	Employ	oyer name		
	1)				4)			
	2)				5)			
	3)				6)			
Forms	1099-INT—Interest Income							
T/S/J	Name of issuer			T/S/J	Name o	f issuer		
	1)				4)			
	2)				5)			
	3)				6)			
Forms	1099-DIV—Dividends and Distributions							
T/S/J	Name of issuer			T/S/J	Name o	f issuer		
	1)				4)			
	2)				5)			
	3)				6)			
Forms	1099-R—Distributions From Pensions, Annuities	s, Reti	irement	or Profit	-Sharing	Plans, IRAs, Insurance Co	ontrac	ts, Etc.
T/S	Name of issuer			T/S	Name of issuer			
	1)				4)	4)		
	2)				5)			
	3)				6)			
If the d	istribution is before age 59½, give a reason to det	ermin	e if an e	exception	to penalty	y applies.		
Tax-Exe	empt Interest (such as municipal bonds—include	e state	ement)					
Payer	\$			Payer				\$
Other I	income							
State ta	x refund		\$	\$ Unreported tips		\$		
Unemp	loyment compensation		\$			Other	\$	
Social Security (taxpayer)—provide SSA-1099 or RRB-1099			\$			\$		
Social Security (spouse)—provide SSA-1099 or RRB-1099			\$			\$		
Gambling income—provide W-2G			\$			\$		
Busines	ss income (see <i>Sole Proprietorship Tax Organizer</i> )					Stock sales	See "	Sales and Exchanges
Rental income (see <i>Rental Property Tax Organizer</i> )						Sale of other property		sheet" below.
	es and Exchanges Worksheet	t				· · · · ·		
	e information about sales of stock, real estate, or c		aronert	v along v	vith Form	= 1099-B 1099-S or other	suppo	rting statements

Description of property	Purchase date	Cost/basis	Sale date	Sale price
		\$		\$
		\$		\$
		\$		\$

#### Notes:

• When stock is sold, you will usually receive Form 1099-B, *Proceeds From Broker and Barter Exchange Transactions*, reporting the proceeds from the sale. However, your statement will not always provide the cost/basis information necessary to compute gain or loss. If the statement does not contain the cost/basis information, you must provide it. You may need to contact your broker for questions about cost/basis and purchase dates of your stock accounts.

• Often, "transfers" of stock or mutual funds within a brokerage account are actually sales of one type of stock and purchase of another. Even if you did not receive any cash from the transaction, you may have taxable gain or loss.

• If your stock dividends are automatically reinvested, the dividends will be taxable even though you did not receive any cash. The transaction is treated as if you had received cash and purchased additional stock. When the stock is sold, the amount reinvested over the years is taken into account. You may need to contact your broker for questions about the amount of reinvested dividends.

• If you sold property other than stock, your taxable gain or loss will be determined by your cost/basis. The cost/basis is usually the original purchase price plus improvements (the cost of repairs and maintenance are not taken into account for cost/basis).

#### **Itemized Deductions Worksheet**

Deductions must exceed \$14,600 Single, \$29,200 MFJ, \$21,900 HOH, or \$146,00 MFS to be a tax benefit.

<b>Medical Expenses.</b> Must exceed 7.5% of income to be a benefit— include cost for dependents—do not include any expenses that were reimbursed by insurance or paid with funds from an FSA, HSA, or HRA.			contributions, pro	<b>able Contributions.</b> If over \$500 in noncash charitable utions, provide details of contributions. Rules require that the er retain documentation for all contributions.					
Dentists	\$	Hospitals	\$	Monetary (cash, c	heck, credit card)	)	\$		
Doctors	\$	Insurance	\$			thing or household			
Equipment	\$	Prescriptions	\$	items must be in g	good used condit	ion or better.	\$		
Eyeglasses	\$	Other	\$	Did you transfer		A directly to a			
Medical miles	: Jan.–June	July-De	c	charity? Yes			\$		
		es paid for full or partia		Charitable mileag	, 				
-		usiness use of the hom	1	· · · · · · · · · · · · · · · · · · ·		ected damage or loss	of property, or		
State withhold	0		Reported on W-2	a theft in a federa	lly-declared disas	ster area, provide deta			
	d taxes—paid in	2024	\$	preparer. Yes	No				
Real estate tax			\$	Miscellaneous Itemized Deductions. Miscellaneous itemized					
Real estate tax			\$		deductions subject to the 2% AGI limitation are no longer deductible on the federal return. However, these expenses may still be deductibl				
Personal prop	, ,		\$	on your state return. For use of home, auto mileage, or other job-rela					
Property tax refund—received in 2024			\$( )	expenses, provide information on a separate sheet. Were any expenses					
Foreign tax paid \$			reimbursed by your employer? Yes No						
Other	Other \$			Dues	\$	Subscriptions	\$		
Other			\$	Investment expenses	\$	Supplies	\$		
Other			\$	Job education	\$	Tax prep fees	\$		
	in 2024 from prior		¢	Job seeking	\$	Tools	\$		
	le interest or pena		\$	Legal fees	\$	Uniforms	\$		
		tax paid during 2024? poat, or home in 2024?	Yes No Yes No	Licenses	\$	Union dues	\$		
Sales tax paid		se paid \$ Dat				Other	\$		
<b>Interest Paid.</b> Do not include interest paid for full or partial business or rental-use property, including business use of the home. Provide all Forms 1098 or lender information and ID numbers.			Safety equipment     \$     Other     \$       Other Deductions.     The following deductions are not subject to a 2% income limit.						
Main home	s	Equity loan	\$	Gambling losses	\$	Federal estate tax on IRD	\$		
	\$	Equity loan	\$	Impairment-	\$		¢		
Second home				Impairment-	- m	Other	\$		

Notes: • Gambling losses are deductible only up to the amount of gambling winnings reported. A log must be kept to verify losses.

• Work clothing is not deductible if adaptable for every day wear. Exception for safety equipment, such as steel-toe boots.

Expenses to enable individuals, who are physically or mentally impaired, to work are generally deductible.

#### **Adjustments Worksheet** Educator expenses. Classroom expenses of teachers, counselors, and principals. Maximum \$300 each. \$ Health savings account (HSA). Contributions for 2024 may be made in 2025. (Only include contributions you made out-of-pocket). \$ \$ Self-employed SEP, SIMPLE, and qualified plans. Contributions for 2024 may be made in 2025. Self-employed health insurance. Sole proprietors, partners, and 2% S corporation shareholders if not eligible for employer \$ coverage. \$ Penalty on early withdrawal of savings. \$ IRA deduction. For traditional IRAs. Roth IRAs are not deductible. Contributions for 2024 may be made in 2025. \$ Student loan interest. Paid for taxpayers and dependents. Moving expenses. Available only to members of the Armed Forces (or their spouses or dependents) on active duty that move pursuant to a military order and incident to a permanent change of station. Ask preparer Business expenses of reservists, performing artists, and fee-based government officials. Ask preparer \$ Other adjustments. Include description.

#### Estimated Tax Payments — Tax Year 2024

Date paid	Federal	Date paid	State
	\$		\$
	\$		\$
	\$		\$
	\$		\$
	\$		\$
	\$		\$

### **Tax Preparation Checklist**

Please provide the following documentation:

All Forms W-2 (wages), 1099-INT (interest), 1099-DIV (dividends), 1099-B (proceeds from broker or barter transactions), 1099-R (pensions and IRA distributions), Schedules K-1 from partnerships, S corporations, estates and trusts, and other income reporting statements, including all copies provided from the payer.

Form 1095-A (for health insurance purchased through a public exchange), Form 1095-B (for health insurance purchased outside of a public exchange), or Form 1095-C (for employer-provided health insurance coverage).

If you are a new client, provide copies of last year's tax returns.

The completed Individual Income Tax Organizer. *Note:* If you choose not to fill out the organizer, you must at least answer the "Yes" or "No" questions under "Questions—All Taxpayers."

Copy of the closing statement if you bought, sold, or refinanced real estate.

Mileage figures for any automobile expenses claimed, including total mileage, commuting mileage, and business mileage. Detail of estimated tax payments made, if any.

Income and deductions categorized on a separate sheet for business or rental activities.

List of itemized deductions categorized on a separate sheet for medical, taxes, interest, charitable, and miscellaneous deductions. Copy of all acknowledgment letters received from charitable organizations for contributions made in 2024.

#### **Taxpayer Responsibilities**

- You agree to provide us all income and deductible expense information. If you receive additional information after we begin working on your return, you will contact us immediately to ensure your completed tax returns contain all relevant information.
- You affirm that all expenses or other deduction amounts are accurate and that you have all required supporting written records. In some cases, we will ask to review your documentation.
- You must be able to provide written records of all items included on your return if audited by either the IRS or state tax authority. We can provide guidance concerning what evidence is acceptable.
- You must review the return carefully before signing to make sure the information is correct.
- Fees must be paid before your tax return is delivered to you or filed for you. If you terminate this engagement before completion, you agree to pay a fee for work completed. A retainer is required for preparation of late returns.
- You should keep a copy of your tax return and any related tax documents. You may be assessed a fee if you request a copy in the future.

**Signatures.** By signing below, you acknowledge that you have read, understand, and accept your obligations and responsibilities. For a joint return, both taxpayers must sign.

Taxpayer Spouse Date	Duite and Dalian		
	Taxpayer	Spouse	Date

#### **Privacy Policy**

The nature of our work requires us to collect certain nonpublic information. We collect financial and personal information from applications, worksheets, reporting statements, and other forms, as well as interviews and conversations with our clients and affiliates. We may also review banking and credit card information about our clients in the performance of receipt of payment. Under our policy, all information we obtain about you will be provided by you or obtained with your permission.

Our firm has procedures and policies in place to protect your confidential information. We restrict access to your confidential information to those within our firm who need to know in order to provide you with services. We will not disclose your personal information to a third party without your permission, except where required by law. We maintain physical, electronic, and procedural safeguards in compliance with federal regulations that protect your personal information from unauthorized access.