CLIENT 2024 Checklist

Not all items will apply to every taxpayer.

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| NAME | | SPOUSE: | |
|--|--------------------|-----------------------|------------|
| current phone number(s) | | | |
| current email addresss(es) | | | |
| For 2024, everyone answer: | | | |
| Did you hold or sell any Digital Assets (Have a foreign bank account? | (BitCoin, other | Crypto, etc)? | |
| Buy an Electric or Plug-in vehicle? | | | |
| Collect unemployment? | | | |
| Start or end a business? | | | |
| Move? get married/divorced? have/adopt a child? not live in CA | | | |
| Receive or exercise stock options? | | | |
| Have health insurance coverage for you Receive healh insurance premium as | | | |
| Estimated 2024 Tax payments mad | e Date Paid | Federal | California |
| Due April 15, 2024 Due June 15, 2024 | | \$ \$ | \$ \$ |
| Due Sept 15, 2024 | | \$ | \$ |
| Due Oct 16, 2024 | | \$ | \$ |
| Due Jan 15, 2025 | | \$ | \$ |
| <u>Income</u> | | | |
| Wages - provide all W-2s | | | |
| Independent contractor/consultant- p | orovide profit & | loss | |
| Interest/Dividends - provide 1099 INT | Γ/DIVs | | |
| <u>Sales of stocks,bonds, mutual fund</u> s - p | orovide 1099B a | and details of purch | ase/sale |
| Partnership/Corporate ownership - provi | ide K-1 Forms | | |
| Other Income (jury duty, tips, alimony | v. rovalties, gan | nbling, lottery, etc) | |

For 2024, the standard deduction is \$14,600 (single) & \$29,200 (married), so fewer taxpayers will itemize for Federal purposes, but for state purposes

Itemized DEDUCTIONS:

| <u>Taxes</u> | |
|---------------|---|
| \$ | Property Taxes paid on primary or secondary resident (NOT rental prop) |
| | DMV registration - deductible portion - all vehicles |
| | Vehicle/boat purchase - sales tax paid |
| <u>Persor</u> | nal Mortgage Interest (provide 1098 Forms) |
| Primai | ry (& secondary) residency mortgage interest - paid to financial institutions/individuals |
| \$ | 1st loan |
| \$ | 2nd loan |
| \$ | Equity Loan (***new: provide details of how borrowed funds spent) |
| <u>Charit</u> | able Contributions (not political) |
| \$ | Contributions paid by cash, check or credit card |
| \$ | Non cash contributions made (clothes, furniture, etc) \$500+ requires detailed receipt} |
| | Number of miles driven for chartiable or volunteer purposes |
| • | Out-of-pocket expenses for chartiable or volunteer purposes |
| Medica | al expenses (must exceed 7.5% of income to be deductible) |
| \$ | Office visits, prescriptions, hospitals, nursing homes |
| \$ | Other (eye glasses, therapists, chiropracrtors, etc) |
| \$ | Health & long term care insurance premiums |
| <u>Emplo</u> | yee Business Expenses (not reimbursed) - deductible for CA only |
| | Do not include self employment expenses here. |
| \$ | Job related licenses, conferences, subscriptions, uniforms, tools, office space |
| | laneous expenses - deductible for CA only |
| | Union dues, professional dues, safe deposit box rental |
| | Investment related expenses |
| \$ | Tax preparation fees |
| _ | |
| Casual | ty Losses - only for Federal Declared disasters: Describe: |

| | such paid (<i>using non-529 funds</i>): tuition, fees, books, suppplies, transportion \$ |
|----------|--|
| Studen | t Loan Interest paid: \$ |
| Child C | are Credit: Include Provider's Name/Address/Phone/Taxpayer ID#/Amount paid |
| | \$ |
| RENTAL I | <u>'roperty</u> |
| For each | property, provide RENTS RECEIVED and EXPENSES by type |
| Miles dr | iven to manage property |
| How mu | ch time spent each month managing? |
| | PLOYED BUSINESS rovide final P&L, cash basis. s Name: |
| | ı issue required 1099 Forms? ı pay any employees? |
| - | r pay any employees? |
| Did you | purchase any assets for over \$1,000? details: |

Do you use a portion of your personal residence on a REGULAR and EXCLUSIVE basis for your business, let's discuss a potential home office deduction.

Don't forget "mixed use" expenses - some personal and some business i.e, a cell phone. What is a reasonable personal/business use %?

Other information or Questions for Ann: