# 2024

# Checklist

## METZGER MANCINI & LACKNER LLP

**CERTIFIED PUBLIC ACCOUNTANTS** 

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## 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 <u>annually</u>. Please read, answer, and return this checklist. We cannot begin until you complete, <u>sign</u>, <u>date</u> (<u>page 8</u>) and <u>return this checklist</u>, along with your signed "<u>Letter of Engagement</u>". <u>PLEASE PRINT CLEARLY</u>. Skipping questions <u>will</u> delay preparation.

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

		<u>Taxpayer</u>					
Preferred #:	:						
Email:							
Date of Bir	th:						
		<u>Spouse</u>					
Preferred #:	:						
Email:							
Date of Bir	th:	0.2					
Home:							
Driver license s	tate (IN, MI, etc.)	Taxpayer State			te		
DL / state ID#		<i>T</i>		S			
Date issued		T		5			
Date expires		T		S			
Did you pay <b>qu</b>	arterly estimated t	ax payments for tax y	ear <u>2024</u> ?	(CIRCLE ONE)		Yes	No
		anceled checks or oth amounts paid when y				3 <u>extens</u>	ion
<u>Due Date</u>	Date <b>YOU</b> Actually Paid	Amount <u>Paid to IRS</u>		nount id to Indiana	List any other States		
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) Please provide us with a copy, if you have not already done so.	Yes	No
В.	Did you or any of your dependents receive an Identity Protection PIN (IP PIN) from the IRS for 2024? If yes, please provide the IRS letter for 2024.	Yes	No
C.	At any time during 2024, did you: (a) receive (as a reward, award, or payment for property or services); or (b) sell, exchange, or otherwise dispose of a digital asset (or a financial interest in a digital asset)?	Yes	No
D.	Did you / spouse work remotely for an employer located in another state? You may have additional state filing requirements. Please contact us.	Yes	No
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 <u>required</u> 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, which is issued by the marketplace. You may receive more than one Form 1095-A for 2024. We need all the forms you receive.	Yes	No

#### 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?

<u>Include</u> accounts shared with dependents that may be temporarily abroad (a college student studying overseas), or a parent living in another country. <u>Exclude</u> 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, or transferor of money to, a foreign trust?

Yes No

C. To the best of your knowledge, do you own any foreign property, hold a business interest in an entity located in a foreign country, or have retirement accounts in a foreign country? If yes, please describe.

Yes No

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

A. Are there any changes in dependents to be claimed from last year?
 If yes, please provide name, <u>date of birth</u>, copy of social security card AND relationship (son, daughter, parent, etc.)

Yes No

#### Section 3. - Dependent Information (continued)

В.	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?	Yes	No
	If yes, has a tax return already been filed for the dependent?	Yes	No
	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?	Yes	No
	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 Yes	No No

If your dependent already filed their tax returns, <u>please provide us a copy.</u> 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
В.	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
Ε.	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

section	4 Income (continuea)		
H.	Did you have any other income to be reported, such as: - unemployment income - gambling or lottery earnings - company awards income (trips, prizes, etc.) - jury duty - VENMO, CASH APPS, PayPal, EBay, etc other? Indicate  If yes, provide documentation (W2-G, 1099s, etc.)	Yes Yes Yes Yes Yes Yes	No No No No No
Section	5 - Self Employed / Commercial & Residential Rental / Farm (if N/A, draw line through	gh sect	ion)
Α.	Did you start a new business in 2024? If yes, call our office to discuss, if you have not already done so.	Yes	No
В.	Did you acquire a new interest in any partnership or S Corporation?  Are you the partner/shareholder responsible for the preparation of the	Yes	No
	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 Yes Yes	No No No
E.	If you drove your personal vehicle to conduct business, please indicate the following	; <b>:</b>	
	Business miles Commuting, Personal Non Business Miles	<u>and</u>	
	January 1 - December 31, 2024		
deduct	tions 6 and 7 below, we ask that you provide the following, even if you plan to use to ion. Some of these items may qualify for state deductions and credits.  6 Medical, Mortgage Interest, Taxes and Casualty Losses	he sta	ndarđ
Α.	Did you list and summarize your 2024 <u>out-of-pocket</u> medical, dental, vision and prescription expenses?	Yes	No
В.	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 Yes	No 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

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

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

#### Casualty losses

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

<u>Please provide your list of donations, even if you do not plan to itemize your deductions.</u> 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 Yes No distribution called a Qualified Charitable Distribution?
  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 Yes No Indiana Neighborhood Assistance Program, (NAP)?
   If yes, provide the certification letter from the organization. We must attach the letter to the Indiana return and paper file the Indiana return.

Castian	O. Other Information	Page	6 of 8			
Section 8 Other Information						
A.	Did you pay student loan interest during 2024? If yes, provide Form 1098E	Yes	No			
В.	Did you gift a total of \$17,001 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 <u>deposit into</u> any Traditional IRA accounts in 2024? Do <u>not</u> 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 <u>deposit into</u> any Roth IRA accounts in 2024? Do <u>not</u> include retirement plan contributions through your employer or Simple Plans. If yes, please provide a statement from the IRA company.	Yes	No			
Ε.	Did you <u>deposit into</u> a health savings account (HSA) in 2024? If yes, is the HSA a single or family plan? Please provide Form 5498-A <u>OR</u> a year end statement from your HSA provider	Yes Single I	No 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	Yes bills.	No			
Н.	Did you incur child care expenses during 2023? 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					
В.	Did you <u>deposit into</u> 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)?  If yes, enter total purchase price \$	Yes	No .		
Section	10 Michigan Residents Only Indicate Michigan School District				
A.	Homeowners - Please provide the real estate taxes paid on your residence, the Michiproperty tax statements and the dates you made your payments.	gan			
В.	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)?  If yes, enter total purchase price \$	Yes	No		
Section	n 11 Final Review				
A.	Did you read and answer all the questions in this checklist?	Yes			
В.	Did you read and sign the "Letter of Engagement"? Please return the "Letter of Engagement" with this checklist.	Yes			
C.	Did you provide <u>all</u> your documents (W-2s, 1099's, etc.) with this checklist necessary to complete your tax return?  If <u>no</u> , please indicate any additional information you believe is missing.	Yes	No		

### 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.

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

D.	If you want refunds deposited	directly to your bank, please provide t	he following.	
	Credit Union / Bank name			
	Routing number			
	Checking Account number			
	OR Savings Account number		11	
E.	copy of your completed return additional fee of \$35.00 per ta tax returns as an attachment to	tax returns and return your original do s, for your files. Only when requested x return year, will we provide you a so o an email using an email address that ye your signature on the e-file forms b	l by you in writing, ar canned copy of your f cyou designate <u>or</u> on	d <u>for an</u> ederal and state a USB device
	Do you wish to have a scan	ned copy of your return for an addition	onal \$35? Yes	No
F.		y service (UPS, FEDEX, etc.) to return for an additional charge when they a		No
	IF YES Check one [ ] below an	print the address where you want y	our package delivere	ed.
	[ ] No signature required, <u>defa</u>	ult [ ] Signature re	quired	
	Street:			
	City, State, Zip:			<u> </u>
Section	12 Looking ahead to 2025			
	anticipate a significant change in please provide details.	income, deductions or dependents in	n 2025? Yes	No
I (we), t on my (	the undersigned, have read the a our) behalf, and on behalf of all	bove checklist and answered each qu persons claimed on my (our) income t	estion to the best of I ax return in 2024.	my (our) ability
		Date		
		 Date		

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