INDIVIDUAL/PERSONAL WORKSHEET 2024

NAME	SOC. SEC. #	BIRTHDATE
OCCUPATION	CELL PHONE	
SPOUSE OCCUPATION	SOC. SEC. # CELL PHONE	BIRTHDATE
EMAIL	CELL PHONE	
EMAIL		
PHYSICAL ADDRESS		
CITY	STATEZ	IP CODE
TELEPHONE (DAY)	EVENING	
MAILING ADDRESS IF DIFFEREN		
DEPENDENTS: (MANDATORY FO		
NAME BIRTHI	DATE LIVE w/YOU? SOCIAL SECUR	ITY # RELATIONSHIP
ESTIMATED TAX PAYMENTS: (MADE EOD TAV VEAD 2024)	
	FED AMOUNT DUE DATE	DATE PAID STATE AMOUNT
	4/18/24	DATE TAID STATE AMOUNT
2ND QUARTER 3RD QUARTER 4 TH QUARTER	9/15/24	
4 TH QUARTER	1/16/25	
PLEASE PROVIDE ALL COPIES	OF W-2'S FOR WAGES RECEIVED	D DURING THE YEAR.
CALIEODNIA DESIDENT ALL V	EAR? IF NOT, DATES OF	DESIDENCV
What other states did you work in o	or have income from?	
what other states and you work in o		
INTEREST INCOME (PLEASE PR	ROVIDE ALL 1099's)	
	TYPE OF ACCOUNT	AMOUNT
	ROVIDE ALL 1099's FOR PROPER T	
FROM WHOM RECEIVED	TYPE OF ACCOUNT	AMOUNT
(DO <u>NOT</u> LIST INTEREST OR DIV	TIDENDS FROM IRA's, KEOGH's, SH	EP's, SIMPLE's or other TAX
DEFERRED PLANS)		
		S OR OTHER ASSETS WORTH OVEI
\$10,000 AT ANY TIME DURING TI		
***(NON-DISCLOSURE CA	N BE SUBJECT TO FBAR / FINCEN	REPORTING PENALTIES) ***
Any virtual currency transactions	Sell or exchange must now be report	ad-nlaasa nrovida crynto wallat
Include Services, Mining, Staking, I		eu please provide erypto wanet
Please provide holdings in any virtua		
		SELF SPOUSE
GRANTS FROM CITY, COUNTY O		
STATE REFUND (IF ITEMIZED IN		
ALIMONY RECEIVED (NOT C	CHILD SUPPORT)	
Date of Divorce		
FOREIGN EARNED INCOME (court		
PENSION OR ANNUITY (Retried Pu		
IRA DISTRIBUTIONS (SEE REVE) UNEMPLOYMENT COMPENSATION		<u> </u>
PURCHASE ANY SAVINGS BOND		
SOCIAL SECURITY (please provide		
	IOTING TUTT-SOAT	
LOTTERY AND GAMBLING WINN	URSEMENTS (NOT IN W-2)	
LOTTERY AND GAMBLING WINN TAXABLE DISABILITY NOT INCL	URSEMENTS (NOT IN W-2) NINGS (W-2G)	
LOTTERY AND GAMBLING WINN TAXABLE DISABILITY NOT INCL TIP INCOME NOT REPORTED TO	URSEMENTS (NOT IN W-2) NINGS (W-2G) LUDED ELSEWHERE	
TAXABLE DISABILITY NOT INCL	URSEMENTS (NOT IN W-2) NINGS (W-2G) .UDED ELSEWHERE EMPLOYER	

(PLEASE PROVIDE ALL 1099's, W-2P's OR OTHER DOCUMENTATION OF INCOME)

OTHER MISCELLANEOUS INCOME NOT REPORTED PREVIOUSLY:

SALE OF ASSETS:

FOR SALE OF STOCK, THE FOLLOWING INFORMATION WILL BE NECESSARY:

- 1. 1099-B'S, SALES, AND PURCHASE CONFIRMATIONS (or sales summary from broker)
- 2. PURCHASE DATE, PURCHASE PRICE (INCLUDING COMMISSION)
- 3. RECORDS OF PUT AND CALL ACTIVITY
- 4. SALES DATE, SALES PRICE (INCLUDING COMMISSION)
- 5. ANY <u>CRYPTOCURRENCY</u> INFORMATION MUST BE INCLUDED ALSO-Provide F-8949 and
- 1099-DA from virtual wallet INCLUDING SERVICES, MINING, STAKING AND HARD FORKS

FOR REGULAR SALES, SHORT SALES, OR FORECLOSURES/REPOSSESSIONS OF RENTAL PROPERTY, PERSONAL OR SECOND RESIDENCES OR OTHER INVESTMENT PROPERTY, THE FOLLOWING WILL BE NECESSARY (*please provide all forms 1099-S, 1099-C and/or 1099-A*)

- 1. ORIGINAL PURCHASE ESCROW SETTLEMENT STATEMENT
- 2. TOTAL COST OF IMPROVEMENTS MADE ON ORIGINAL PROPERTY FOR
- PERIOD OF TIME OWNED BY YOU

3. SALES ESCROWS/REPOSSESSION OR FORECLOSURE SETTLEMENT PAPERS

- 4. PURCHASE ESCROW OF ANY REPLACEMENT PROPERTY IF APPLICABLE
- 5. TOTAL COST OF IMPROVEMENTS TO BE MADE TO NEW PROPERTY

WITHIN 2 YEAR PERIOD (FOR TAX DEFERRAL OR PERSONAL RESIDENCE)

IF INHERITED PROPERTY, NEED FAIR MARKET VALUE ON DATE OF DEATH OR APPRAISAL

PLEASE PROVIDE K-1'S FOR PARTNERSHIPS, LLC's, S CORPS AND ESTATES & TRUSTS.

OTHER MISCELLANEOUS DEDUCTIONS, TAXES AND CREDITS:

ACA - DID ALL MEMBERS OF YOURHOUSEHOLD HAVE HEALTH INSURANCE FOR THE ENTIRE YEAR?

Company? _____ Policy #_____

If no, list household members with dates who were not covered **PLEASE PROVIDE ALL FORMS 1095-A/B/C

RETIREMENT and BENEFIT PLANS:	AMOUNT	
	SELF	SPOUSE
IRA CONTRIBUTIONS (INCLUDE NON-WORKING SPOUSE)		
SEP-IRA-SIMPLE CONTRIBUTIONS		
KEOGH CONTRIBUTIONS		
HEALTH/MEDICAL SAVINGS ACCOUNT (MSA/HSA)		
QUALIFYING PENSION OR PROFIT-SHARING PLAN?		
SOLO 401k (SELF EMPLOYMENT)		
ROTH IRA CONTRIBUTIONS AND CONVERSIONS		
ROTH IRA CONTRIBUTION		
TOTAL INCOME FROM IRA CONVERTED TO A ROTH		
IN 2024, DID YOU CONTRIBUTE TO A NON-DEDUCTIBLE IRA THEN	IMMEDIATELY	CONVERT TO A
ROTH IRA?		
(PLEASE PROVIDE FORMS F1099R / 5498)		
STUDENT LOAN INTEREST EXPENSE (F-1098-E)		
<u></u> (
ALIMONY PAID: WILL NOT BE DEDUCTIBLE OR INCLUDED FOR A	GREEMENTS AF	TER 12/31/18
RECIPIENT'S NAME DA' AMOUNT PAID SOCIAL SECUR	ITY #	
DIRECT DEPOSIT INFORMATION:		
We recommend direct deposit - decreases time to receive refund and less	chance of check g	etting lost in the
mail. (IF REFUND IS TO BE DIRECTLY DEPOSITED TO YOUR ACCOUNT		
<u>CHECK</u> TO VERIFY ACCOUNT WHERE REFUND WILL BE DEPOSITED.		IS GENERALLY THE
FIRST 9 DIGITS OF THE NUMBER ON YOUR CHECK, THE DAN IS THE	SECOND SET)	
NAME OF FINANCIAL INSTITUTION		
ROUTING TRANSIT NUMBER (RTN)		
DEPOSITOR ACCOUNT NUMBER (DAN)		
TYPE OF ACCOUNT (savings or checking)		
WHO IS THE OWNER OF ACCOUNT? SELF SPOUS		
IS ANYONE ELSE BESIDES YOUR SPOUSE LISTED ON THE ACCOUN	NT? YES	NO

OTHER INFORMATION OR QUESTIONS: