

**2024 Income Tax Guide****I. INCOME****1. Documentation:** Please provide the following documents as they apply.

Email, fax, or photocopies preferred:

- W-2 -wage income
- 1099-INT-interest income
- 1099-DIV-dividend income
- 1099-G-unemployment compensation/ Family leave
- 1099-B-stock sales (Include cost info)
- K-1s
- 1099-NEC-other income
- 1098-mortgage interest & property taxes
- 1095-Health Insurance

(This will not come in the mail; go to NJ website to retrieve: [myunemployment.nj.gov](http://myunemployment.nj.gov))**2a. Self-Employed:**

- a. Please provide a complete set of books that includes gross receipts and business expenses by category.
- b. If your business is home-based, is there an area that is used exclusively for business? Yes/No

**2b. Self Employed Earned Income Credit Candidates** – (Babysitters, tutors etc.) If you don't have a formal set of books, please provide:

- a. A log or a list of customers and their payments.
- b. A list of expenses by category.

**3. Rental Property:** If you own investment real estate (including basement rentals), please include the following for each property:

- a. Total rents received
- b. A list of expenses by category
- c. If you bought, sold, or refinanced the property in 2024, include a copy of the closing statement (HUD-1)
- d. If you bought the property in 2024, include the property tax postcard from the township.

**II. DEDUCTIONS AND CREDITS****1. Charity:**

- a. What amount did you give to charity? (Note: You are required to keep receipts of donations for your records.)\_\_\_\_\_
- b. What was the value of any non-cash contributions? (i.e. Car, Clothing, etc.)? (Please include the receipt from the organization.)\_\_\_\_\_

**2. Medical:** How much did you spend on medical expenses?

- a. Insurance premiums paid by you (do not include amounts paid by/through your employer)\_\_\_\_\_
- b. Unreimbursed medical expenses (i.e. Co-pays, deductibles, vision, dental, prescription drugs, therapy, special education tuition) \_\_\_\_\_

**3. Tuition Paid:** Did you pay any tuition to an accredited institution for post-high school education?

IMPORTANT: Please verify breakdown of payments into tuition/fees vs. room and board.

Please submit Form 1098-T if you received one.

Student \_\_\_\_\_ Tuition/fees Amount \_\_\_\_\_ Academic Year (Jr, Sr, masters ... )\_\_\_\_\_

**4. Are you an educator?** You can deduct up to \$300 of unreimbursed expenses related to your employment as an educator (ex.seforim, books, prizes.. does not include commute) \_\_\_\_\_

**5. Primary Residence**

**Renters:** How much did you pay for rent for the year? (Not including subsidies) \_\_\_\_\_

**Homeowners:** Property taxes paid? \_\_\_\_\_ Mortgage Interest? \_\_\_\_\_ (Include Form 1098)

If you moved during the year, what date did you move? (Break down rent by residence.)

If you purchased your personal residence in 2024, include a copy of the closing statement (HUD-1).

- 6. Child Care:** How much did you pay for childcare/day camp for a dependent under the age of 13? In order to qualify, both spouses must have worked or attended school. (School tuition and overnight camp do not qualify.)

Name of Child	Name/Address of care giver	SS# of care giver	Amount paid

**7. Health Insurance:**

a. Did you have health insurance/Jersey care for the entire 2024?  Yes  No

b. Did you purchase health insurance through the Health Insurance Marketplace (exchange)?  Yes  No (If yes, you must provide us with a Form 1095-A)

**III. MISC QUESTIONS**

- 1. Change in Dependent:** Add / Remove (circle one)

Legal Name \_\_\_\_\_ DOB \_\_\_ / \_\_\_ / \_\_\_ SSN \_\_\_ - \_\_\_ - \_\_\_

- 2. Change in Address:** \_\_\_\_\_

- 3. Receiving a Refund:**

I'd like my refund as a direct deposit into my account. I included a voided check from the account

I'd like my refund mailed to me as a check. I don't want it directly deposited into my bank account

- 4. IRA/Pension:** If you have taxable income, and would you like to contribute to an Individual Retirement Account (IRA) please discuss this with an associate. **Deadline to contribute is April 15<sup>th</sup>.**

- 5. Estimated Tax Payments:** Please list dates and amounts of any estimated tax payments you made.

Federal:	Date	Amount	State:	Date	Amount
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

- 6. Did you have any funds in a foreign bank account in 2024:**  Yes  No

- 7. Did you have any crypto currency income from 2024:**  Yes  No

- 8. Email:** Please provide your current email address: \_\_\_\_\_

- 9. Once prepared, how would you like to receive your tax return?**  Please email it to me to review and sign via docusign.  I would like to come into the office to review and sign a hard copy

**Please Note:** Kliger and Zoldan, PC will prepare your 2024 Federal and State income tax returns based on the information you provide us. We will not audit or otherwise verify the data you submit. It is your responsibility to provide all the information required for the preparation of complete and accurate returns. The IRS requires that you retain all documentation that form the basis of income and deductions. You have the final responsibility for the income tax returns and, therefore, you should review them carefully before you sign them. You represent that the information you are supplying to us is accurate and complete to the best of your knowledge. The fee to prepare your tax return does not include any additional services. Additional time/work will be charged accordingly.

**NOTES:** \_\_\_\_\_