

JEAN A. CORDASCO, CPA

2024 GENERAL INCOME TAX INFORMATION

TAXPAYER: _____ SPOUSE: _____
NAME: _____ NAME: _____
SS#: _____ SS#: _____
OCCUPATION: _____ OCCUPATION: _____
DOB: _____ DOB: _____
PHONE: _____ PHONE: _____
ADDRESS: _____ COUNTY: _____
EMAIL: _____
DEPENDENTS: (NAMES, DOB, SS#) _____

TOTAL # OF W-2'S _____ TOTAL # OF 1099'S _____

PLEASE ANSWER THE FOLLOWING QUESTIONS (IF "YES" PLEASE PROVIDE DOCUMENTATION)

<i>DID YOU RECEIVE INCOME FROM:</i>	YES	NO
INTEREST OR DIVIDENDS (FORM 1099-INT/DIV)	___	___
YOUR OWN BUSINESS, PROFESSION, FARM? (SCH C OR CORPORATE PARTNERSHIP)	___	___
SALES OF STOCKS, BONDS?	___	___
INSTALLMENT SALES CONTRACTS?	___	___
PENSIONS, PROFIT-SHARING PLANS, ANNUITIES? (FORM 1099R)	___	___
RENTS OR ROYALTIES? (SCH E)	___	___
PARTNERSHIPS, ESTATES, TRUSTS? (FORM K-1)	___	___
S CORPORATIONS? (FORM K-1)	___	___
COMMISSIONS?	___	___
UNEMPLOYMENT COMPENSATION? (FORM 1098G)	___	___
SOCIAL SECURITY INCOME?	___	___
GAMBLING INCOME? (W2G)	___	___
ANY ALIMONY AGREEMENTS?	___	___

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YES NO

Did you change your address in 2024? _____

Did you sell your house in 2024? _____

Do You/Spouse/Dependents have a Identification Pin? YES/NO. If yes provide IRS letter for each person. _____

DID YOU HAVE ANY: YES NO

CONTRIBUTIONS TO AN IRA? TYPE _____ AMOUNT _____

CHILD OR DEPENDENT CARE EXPENSES? _____

DID YOU MAKE ANY 2024 ESTIMATED PAYMENTS? _____

(IF 'YES' , SHOW AMOUNTS & DATES)

FEDERAL \$ _____ \$ _____ \$ _____ \$ _____

STATE \$ _____ \$ _____ \$ _____ \$ _____

IF YOU HAVE AN OVERPAYMENT OF 2024 TAXES , DO YOU WANT THE EXCESS:

REFUNDED? _____ APPLIED TO YOUR 2025 ESTIMATED TAXES? _____

DO YOU WANT YOUR REFUND TO BE DEPOSITED DIRECTLY INTO YOUR BANK ACCOUNT? _____

IS THE DIRECT DEPOSIT INFORMATION THE SAME AS LAST YEAR? _____

If no, Bank Name: _____ Circle one: Checking/ Savings

Routing # _____ Account # _____

DID ANY OF YOUR DEPENDENT CHILDREN UNDER 24 YEARS OF AGE HAVE
UNEARNED INCOME OVER \$2300.00 _____

DID YOU PURCHASE, SELL, EXCHANGE YOUR PERSONAL RESIDENCE? _____

DID YOU HAVE ANY FOREIGN BANK OR TRUST ACCOUNTS? _____

HAS THE IRS AUDITED ANY OF YOUR TAX RETURNS DURING THE PAST YEAR? _____

DID YOU GIVE ANY GIFTS EXCEDDING \$18,000 IN 2024 TO ANY PERSON? _____

DID YOU RECEIVE, SELL, SEND, EXCHANGE OR OTHERWISE ACQUIRE ANY FINANCIAL
INTEREST IN ANY VIRTUAL CURRENCY IN 2024? _____

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DID YOU HAVE MEDICAL INSURANCE IN 2024? _____

DID YOU BUY MEDICAL INSURANCE THROUGH MARKETPLACE? IF YES, PROVIDE
FORM 1095-A) _____

DID YOU PURCHASE SOLAR ENERGY SYSTEM IN 2024? _____

DID YOU MAKE ANY ENERGY SAVING IMPROVEMENTS TO YOUR PRIMARY
HOME IN 2024? (DOORS, WINDOWS, INSULATION, HEATER/AC) _____

DID YOU PURCHASE AN ELECTRIC CAR IN 2024? _____

DID ANYONE IN FAMILY ATTEND COLLEGE? _____

WAS ANY STUDENT LOAN INTEREST PAID? _____

2024 ITEMIZED DEDUCTIONS

MEDICAL:

PRESCRIPTION MEDICINE \$ _____

MEDICAL & DENTAL INSURANCE PREMIUMS \$ _____

DOCTORS, DENTISTS \$ _____

HOSPITALS \$ _____

OTHER – PLEASE LIST _____

_____ \$ _____

TRANSPORTATION FOR MEDICAL ATTENTION _____ MILES

TAXES:

REAL ESTATE TAXES \$ _____

INTEREST:

HOME MORTGAGE 1ST _____ 2ND _____

TO WHOM PAID (FORM 1098) 1ST _____ 2ND _____

DID YOU TAKE OUT A HOME MORTGAGE OR ANY OTHER HOME DEBT IN 2024? _____

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DID YOU REFINANCE IN 2024? _____

CONTRIBUTIONS: (FOR WHICH YOU HAVE RECEIPTS OR CANCELLED CHECKS)

CHURCHES (SPECIFY CHURCH NAME) _____ \$ _____

OTHER: (PLEASE LIST)

_____ \$ _____

NON-CASH CONTRIBUTIONS: (PLEASE LIST ORGANIZATION, PROPERTY DONATED AND FAIR
MARKET VALUE)

_____ \$ _____

ITEMS FOR DISCUSSION: _____
