



Alario & Associates

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To: Tax Return Client

This 2024 Client Organizer is designed to assist you in gathering your tax information. In order to minimize the chance of incorrect reporting, and receipt of an IRS notice, we encourage you to create an online account with the IRS at www.IRS.gov to confirm any estimated payments you made towards 2024.

Also available on our website and upon request for daycare providers, rental property owners and business owners, is a summary sheet to organize all of your income and expenses.

Tax Preparation Scheduling Options

Please provide your tax information anytime via secure email, mail or drop off. **Meetings with your preferred Alario & Associates team member to review your completed return will be available.**

Tax Season Hours begin **January 27, 2025**
Please visit our website for hours for each location -- www.alariocpa.com

Taxpayer Responsibilities

- You agree to provide us all income and deductible expense information. If you receive additional information after we begin working on your return, you will contact us immediately to ensure your completed tax returns contain all relevant information.
- You affirm that all expenses or other deduction amounts are accurate and that you have all required supporting written records. In some cases, we will ask to review your documentation.
- You must be able to provide written records of all items included on your return if audited by either the IRS or state tax authority. We can provide guidance concerning what evidence is acceptable.
- You must review the return carefully before signing to make sure the information is correct.
- **Payment is expected as services are rendered unless prior financial arrangements have been made.** Fees must be paid when your tax return is delivered to you or filed for you.

Our firm has procedures and policies in place to protect your confidential information. We restrict access to your confidential information to those within our firm who need access in order to provide you with services. We will not disclose your personal information to a third party without your permission, except where required by law. We maintain physical, electronic, and procedural safeguards in compliance with federal regulations that protect your personal information from unauthorized access. We look forward to serving you. We wish you a peaceful, healthy and prosperous New Year.

Very Truly Yours,

Alario & Associates, CPA, PC

I (We) acknowledge that I (we) have read, understand, and accept the obligations and responsibilities. If applicable, both Taxpayer and Spouse must sign.

Taxpayer Name: _____ **Spouse Name:** _____

Best Phone Number to be Reached at: _____

How would you like to receive your completed tax return? Paper _____ **Electronically** _____

Personal Information: Yes No

Did your address change during 2024? _____

Did your marital status change during 2024? _____

Dependents:

Were there any changes in dependents from the prior year? _____

If new dependents please provide the information below.

Name: _____ **SS#:** _____ **Date of Birth:** _____

Name: _____ **SS#:** _____ **Date of Birth:** _____

Did any dependent have earned income greater than \$14,600? _____

Did any dependent have unearned income greater than \$1,300? _____

Did you pay for child or dependent care while you worked, looked for work or while you were a full time student? _____

If yes, please provide the information below.

Name of Provider	Address	ID# of Provider	Amount Paid

Estimated Taxes Paid:

	FEDERAL			STATE	
Date Paid	Amount Paid	Check #	Date Paid	Amount Paid	Check #

Income:

Submit all applicable informational tax forms, if any, to support items of income.

	Yes	No
Salaries and Wages - Submit forms W-2	_____	_____
Interest Income - Submit forms 1099-INT	_____	_____
Dividend Income - Submit forms 1099-DIV	_____	_____
State Income Tax Refund - Submit forms 1099-G	_____	_____
Gains/Losses from Stock or Property Sales - Submit form 1099-B or 1099-S	_____	_____
Retirement Plan Distributions - Submit forms 1099-R	_____	_____
Unemployment Compensation - Submit forms 1099-G	_____	_____
Social Security Benefits - Submit forms SSA-1099	_____	_____
Gambling Winnings - Submit forms W-2G	_____	_____
Miscellaneous Income - Submit forms 1099-NEC or 1099-MISC	_____	_____
Rental Income and Expenses - Submit summary for each property	_____	_____
Self-Employment Income & Related Expenses - Submit summary for each business	_____	_____
Partnership, S-Corporation, Estate & Trust Income - Submit K-1 for each entity	_____	_____
<i>Ignore this request if we prepare the entity's tax return</i>		
Did you have any debts canceled, forgiven or refinanced? - Submit form 1099-C	_____	_____
Did you receive any alimony, under a divorce or separation agreement executed <u>before 2019</u> ? Amount: _____	_____	_____

Adjustments:

Have you or do you plan to make any IRA contributions for 2024? Yes ___ No ___
If yes, please provide amount and type. **Traditional** _____ **Roth** _____
Contribution deadline is 04/15/25.

Were you required to make alimony payments, under a divorce or separation agreement executed before 2019? Yes ___ No ___
If yes, please provide the information below if not on last year's return.
Amount paid: _____ **Recipient's social security number:** _____

Student Loan Interest - Submit 1098-E Yes ___ No ___
Were you self-employed and paid health insurance premiums? Yes ___ No ___
Amount: _____

Itemized Deductions:

Medical Expenses - Enter the amounts you paid and were not reimbursed for the following (include amounts for dependents you claim on your return)

Doctors, dentists, nurses, hospitals, prescription medicines: _____
Insurance premiums for medical and dental care (including those paid to _____
the Health Insurance Marketplace, but not paid through S125 plan: _____
Auto mileage _____
Travel, lodging, parking, tolls: _____
Misc. (ie - hearing aids, dentures, eyeglasses, contact lenses) _____
Long Term Care Insurance Premiums: **Taxpayer** _____ **Spouse** _____

Taxes

Real Estate Taxes _____
Excise Tax _____

Interest Expense

Home mortgage/equity interest and points - Submit Form 1098 _____
Home mortgage interest not reported on Form 1098 _____
Did you refinance a mortgage or take a home equity loan during the year? Yes ___ No ___
Investment interest (not investment fees) _____
Are you making any loan payments on a boat or recreational vehicle that has basic living accommodations such as a sleeping space, a toilet, and cooking facilities? Yes ___ No ___

Charitable Contributions

Donations by cash, check and credit card _____
Property Donations (Please attach list if over \$500) _____
Volunteer work - number of miles driven for which you have written record _____

Education Expenses:

Please submit the following information for each individual that had higher education expenses during the year, along with Form 1098-T.

Student(s) _____
Fr. ___ Soph. ___ Jr. ___ Sr. ___ Grad. ___
Full-Time or Part-Time _____
Tuition, Fees & Required Expenses Paid _____
Amount contributed to Massachusetts Section 529 plan _____
Amount withdrawn from Qualified Education Program (include Form 1099-Q) _____

Yes No

Miscellaneous Questions

If you do NOT want to authorize Alario & Associates, CPA PC to discuss the processing of your returns with the IRS and DOR check here. _____

If receiving a refund would you like to request direct deposit?

If you have a balance due would you like electronic withdrawal?

If yes, please provide the following: Bank Name: _____

Checking or Savings Routing #: _____ Account #: _____

Owner of bank account: Taxpayer _____ Spouse _____ Joint _____

Did you receive an identity protection PIN from the IRS?

If yes, please provide a copy of the letter received in 2025.

Did you purchase health insurance through the Marketplace / Exchange?

If yes, please provide Form 1095-A.

Did you receive any distributions from your health savings account (HSA)?

Did you make any contribution to your health savings account (HSA)?

Did you retire or change jobs in 2024?

If applicable, have you taken your annual Required Minimum Distribution?

If you are a retired public safety officer, did your pension plan make a direct payment to your insurance company for health, accident or long term care insurance?

If yes, please provide amount. _____

Do any bank or investment accounts reported in your name belong to a dependent or other individual?

Did you acquire, receive, sell, send, exchange or dispose any financial interest in digital asset, including Bitcoin?

Did you have any foreign bank accounts or foreign assets?

Did you or your spouse have financial accounts maintained by a foreign institution that totaled more than \$50,000 on the last day of the year or more than \$75,000 at any time during the year (\$100,000 and \$150,000, respectively, if married filing a joint return)?

Did you sell your personal residence in 2024?

Did you engage in any put or call transactions or close any short sales or any other transaction not 1099-B reported?

Do you own any securities or hold any debts that became worthless during the year?

Did you acquire or sell a business in 2024?

Did you pay a babysitter, housekeeper, driver, yard worker, health aide or other \$2,700 or more to work for you?

Were you notified by the IRS or other taxing authority of any changes in prior year returns? (Provide us with notices)

Did you have expenditures on an alternative technology vehicle?

Did you have expenditures for alternative energy source items such as solar, wind or geothermal to heat, cool or provide hot water for a residence?

Did you install any energy efficiency improvements or property, such as exterior doors or windows, insulation, heat pumps, furnaces, central air conditioners, or water heaters?

Did you incur casualty or theft losses during the year, related to a federally declared disaster? *Provide detail including insurance reimbursement.*

Do you have a will?

Would you be interested in estate planning?

Would you be interested in financial planning?

Would you be interested in retirement planning?

Any question left unanswered we will assume the response is NO.