2024 Engagement Letter and Tax Questionnaire

prepared for:

____

Bottom Line Accounting
P.O. Box 40935
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Your 2024 Engagement Letter MUST be signed and the Tax Questionnaire MUST be completed to the best of your ability and returned with your tax documents.

If you have any questions, be sure to call or email your questions.

Bottom Line Accounting
P.O. Box 40935
Fayetteville, NC 28309

2024 Engagement Letter for Tax Return Preparation

Dear _______________________________:

We appreciate the opportunity to work with you and to assist and advise you regarding your 2024 income tax return. This engagement letter is designed to confirm the terms and conditions under which we will provide you with tax services. It also outlines the responsibilities for each of us in this process. It is important that you read, sign, and return this engagement letter with your tax documents. Without a signed engagement letter, we will be unable to begin your tax filing.

Tax Preparation:

1) We will prepare your federal and state tax return(s) with supporting schedules for the applicable tax year based upon information you provide.
2) You will provide any requested records needed to complete the tax return(s) preparation. Original records will be returned upon completion of the tax return(s). Photocopies or scanned copies will be accepted if <u>all pages</u> and <u>both sides</u> of documents are included. We are not responsible for lost, damaged, or stolen records.
3) Our policy is to process all tax returns in the order that they are received.
4) If we are unable to complete your tax return by the due date, or if we receive your documents after March 31, 2025, you give us permissionto file a tax extension (Form 4868) on your behalf with no further notice. *Please be aware that an extension to file your return does not extend your tax payment liability date.*
5) We will not be responsible for any penalties and/or interest charges that you might incur if you have not met your tax liability by the due date of the return. Whenever possible, we will attempt to advise you if we project that you may have an unpaid tax liability.
6) We will not audit or otherwise verify your records to discover errors or omissions, should any exist. However, if we find irregularities or unusual items, we will bring them to your attention and/or ask for clarification.
7) We will provide bookkeeping assistance necessary to complete the tax preparation at an additional charge.
8) You confirm that income and expense items you claim are substantiated by proper records and receipts, and can furnish such documentation in the event of an audit.
9) You confirm that the information you provide is accurate and complete to the best of your knowledge.
10) You are ultimately responsible for the accuracy of the tax return(s) and should review all documents carefully before signing.

Important Notices:

1) Where tax law is ambiguous or unclear; we will use our best judgment. Unless otherwise instructed by you, we will resolve such questions, when possible, in your favor.
2) Penalties can be imposed when taxpayers understate their tax liability.
3) If an extension to file taxes is required, any estimated taxes owed should be paid when the extension is filed. And while we may assist you in determining the amount of estimated tax payment you should make; *we are not responsible if the estimate we recommend does not cover your tax liability.* Any amounts not paid by the original filing deadline are subject to interest and late payment penalties. *We are not responsible for any penalties and interest charges you may incur if estimated tax payments are not timely made.*
4) The IRS does not permit us to discuss your tax return except if authorized by the client by checking a specific box on your tax return. Unless otherwise instructed by you, we will check the box which authorizes the IRS to discuss your tax return with us. Additionally, we may ask you to sign a Form 8821-Tax Information Authorization Form . Signing these forms will ensure that we receive any notices you might receive thus ensuring timely responses as needed.
5) Your tax return(s) may be selected for audit by tax authorities. We are available to assist you in response to correspondence. However, we reserve the right to invoice for additional time and expenses incurred.
6) One printed and one electronic copy of your tax return(s) will be provided to you for your files. Additional copies, paper or electronic, are available for a minimum $25.00 fee. This fee will apply to all additional electronic or paper copies you may request in the future.
7) If you require us to release a copy of your tax return(s) to a 3rd party (e.g. ,mortgage lender) we require documented permission and a minim fee of $25.00 must be paid prior to delivery.
8) The IRS recommends that you keep your tax return and documentation for a minimum of three years. We recommend seven years.

Fees & Payment:

1) Tax preparation fees are due at the time the return is complete and, in all cases, must be paid within 30 days of return acceptance by the IRS unless a written payment arrangement has been signed and approved prior to tax preparation.
2) We reserve the right to ask for a retainer to be paid in advance of tax return preparation.
3) We accept Cash, Personal Checks, MasterCard, Visa, or Zelle payments as a courtesy to our clients.
4) Our fees are based on a per form fee with additional fees added based upon the complexity of your tax return(s) and any additional out-of-pocket expenses we may incur.
5) If you terminate this engagement before completion, you agree to pay the HIGHER of a $50.00 termination fee OR for actual time and expenses incurred prior to the date of termination, even if the tax return(s) are not completed.
6) In the event the client has any past due balances, we reserve the right to cease working on your tax return(s) or providing any other services until the balance has been paid in full or other acceptable payment arrangements have been made.
7) Past due balances of more than 30 days may be subject to mimimum late fee of $25.00.
8) At any time after 90 days past due, your account may be sent to collections. You are responsible for any court costs, attorneys' fees, and any costs resulting from collection attempts.

Privacy Policy Notice:

It has always been the policy of Bottom Line Accounting to keep all information that we collect from you confidential from all sources. We restrict access to all nonpublic personal information about you to members of our firm who need to know that information to provide services to you. We maintain physical, electronic, and procedural safeguards to guard your nonpublic personal information. We do not disclose any nonpublic personal information about our clients or former clients to anyone, except as instructed by you in writing or as required by law as listed below:

Requirements to comply with federal, state, or local law.
Requirements to comply with national, state, or local licensing rules.
Requirements to disclose information in response to legal subpoenas.
Items you permit or request us to disclose, as authorized by you in writing.
Information that you authorize us to disclose by signing this engagement letter to electronically file your tax return.

*IF, however, during our relationship, I am made aware of physical, mental, or financial abuse, I will invoke the **"Good Samaritan Law"** and report the issue to the proper authorities. The Good Samaritan Laws offer legal protection to individuals who give reasonable assistance to those who are, or who they believe to be, injured, ill, in peril, or otherwise incapacitated.

We appreciate the opportunity to serve you. If you have any questions, be sure to contact us for further explanation by phone at (910) 424-0004 or by e-mail at NonaFisher@aol.com.

By signing below, you agree that you have read, understand, and accept your obligations and responsibilities stated above, plus you understand our responsibilities and limit of liabilities as explained above. By signing, you also acknowledge receipt of our Privacy Policy. For a joint return, both the taxpayer and spouse should sign (except for a surviving spouse).

2024 Engagement Accepted by Taxpayer(s):

______________________	______________________
Taxpayer's Signature	Spouse's Signature
______________________	______________________
Taxpayer's Printed Name Date	Spouse's Printed Name Date

Accepted by BLA Representative:

____

BLA Representative Signature   Date

____

BLA Representative   Printed Name

2024	1040	US	Client Information	1

Bottom Line Accounting
P.O. Box 40935
Fayetteville, NC 28309
Telephone number: (910) 424-0004
Fax number: (910) 424-1803
E-mail address:

Tax Return Appointment

Date:
Time:
Location:

This tax organizer will assist you in gathering information necessary for the preparation of your 2024 tax return. Please add, change, or delete information as appropriate.

CLIENT INFORMATION

Filing Status	Filing status (table)	2
	1=married filing separate and lived with spouse	
	Year spouse died, if qualifying surviving spouse (2022 or 2023)	
Taxpayer	First name and initial	
	Last name	
	Title/suffix	
	Social security number	
	Occupation	
	Date of birth (m/d/y)	
	Date of death (m/d/y)	
	1=blind	
Spouse	First name and initial	
	Last name	
	Title/suffix	
	Social security number	
	Occupation	
	Date of birth (m/d/y)	
	Date of death (m/d/y)	
	1=blind	
Address	In care of	
	Street address	
	Apartment number	
	City	
	State	NC
	ZIP code	
Foreign Address	Region	
	Postal code	
	Country	

Filing Status

1 = Single
2 = Married filing joint
3 = Married filing separate
4 = Head of household
5 = Qualifying surviving spouse (QSS)

2024	1040	US/NC	Client Information (continued)	1 p2

Please add, change or delete information for 2024.

CLIENT INFORMATION

Taxpayer Contact Information	Home phone	
	Work phone	
	Work extension	
	Daytime phone (table)	3
	Mobile phone	
	Fax number	
	E-mail address	
Spouse Contact Information	Home phone	
	Work phone	
	Work extension	
	Daytime phone (table)	3
	Mobile phone	
	Fax number	
	E-mail address	
Taxpayer Authentication	Driver's license no.	
	Driver's license state	
	Issue date (m/d/y)	
	Expiration date (m/d/y)	
	Theft protection PIN	
Spouse Authentication	Driver's license no.	
	Driver's license state	
	Issue date (m/d/y)	
	Expiration date (m/d/y)	
	Theft protection PIN	
State Info.	County name	

Daytime Phone

1 = Work
2 = Home
3 = Mobile

2024	1040	US	Dependents	2

Please add, change or delete information for 2024.

DEPENDENTS

	Dependent 1	Dependent
First name		
Last name		
Title/suffix		
Date of birth (m/d/y)		
Date of death		
Date of adoption		
Social security number		
Relationship		
Months lived at home	12	
Type of dependent (see table)	1	
Earned income credit (see table)	1	
Claimed by: 1=taxpayer, 2=spouse	1	
IRS theft protection PIN		

	Dependent	Dependent
First name		
Last name		
Title/suffix		
Date of birth (m/d/y)		
Date of death		
Date of adoption		
Social security number		
Relationship		
Months lived at home		
Type of dependent (see table)		
Earned income credit (see table)		
Claimed by: 1=taxpayer, 2=spouse		
IRS theft protection PIN		

	Dependent	Dependent
First name		
Last name		
Title/suffix		
Date of birth (m/d/y)		
Date of death		
Date of adoption		
Social security number		
Relationship		
Months lived at home		
Type of dependent (see table)		
Earned income credit (see table)		
Claimed by: 1=taxpayer, 2=spouse		
IRS theft protection PIN		

Type of Dependent

1 = Child living w/taxpayer
2 = Child not living w/taxpayer
3 = Dependent other than child
4 = Head of household or qualifying surviving spouse (QSS) only. not a dependent
5 = Earned income credit only, not a dependent

Earned Income Credit

1 = When applicable (default)
2 = Student age 19 to 23
3 = Disabled
4 = Force
5 = Suppress

NOTE: If you claim the earned income credit, please provide proof that your child is a resident of the U.S. This proof is typically in the form of:

1. School records or statement
2. Landlord or property management statement
3. Health care provider statement
4. Medical records
5. Child care provider records
6. Placement agency statement
7. Social service records or statement
8. Place of worship statement
9. Indian tribe office statement
10. Employer statement

NOTE: If your child is disabled, please provide one of the following forms of proof of disability:

1. Doctor statement
2. Other health care provider statement
3. Social services agency or program statement

2024	1040	US	Miscellaneous Questions

This Tax Organizer is meant to assist you in gathering the appropriate information necessary to prepare a complete and accurate tax return(s). Please review and update the Client Information and Dependents pages (if applicable). It is extremely important that we have answers to the following questions as we work to complete your 2024 tax return and insure that we are meeting the IRS Due Diligence requirements for your 2024 tax return.

PERSONAL INFORMATION

On December 31, 2024, were you ___Married? ___Single? ___Legally Seperated? ___Divorced? ___Widow/Widower?

Do you plan to file: _____Married Filing Jointly? _____Married Filing Separate? _____Single? _____Head of Household (which requires that you have a qualifying child or dependent)

If filing Married Filing Separately, please give your spouse's full name and social security number, as it appears on their Social Security Card:
Full Name: ___________________________________ SS#__________________
Date of Birth: ______________________

Yes ☐ No ☐ If you are married and filing separately from your spouse, do you know if your spouse will itemize deductions?

Yes ☐ No ☐ Did you, or your spouse, ____pay or ____receive alimony in 2024?
Paid to or Received from:
Full Name of person paid or received from: _________________________________
Social Security Number of person paid: _____________________________________
Date of Birth: ____
Total Amount Paid or Received: $____

Yes ☐ No ☐ Did you, or your spouse, enter into this alimony agreement with the former spouse on or before December 31, 2018?

Yes ☐ No ☐ Can you, or your spouse, provide a copy of your separation or divorce agreement, if needed?

What was your occupation in 2024? _____________________________________

What was your spouse's occupation in 2024?_______________________________

Yes ☐ No ☐ May Bottom Line Accounting contact you by e-mail?
Taxpayer's preferred e-mail address:____

Spouse's preferred e-mail address: ____

2024	1040	US	Miscellaneous Questions

Yes ☐ No ☐ Could you, or your spouse, be claimed as a dependent on another person's tax return for 2024?

Yes ☐ No ☐ Did any of the taxpayers or dependents that were on last year's tax return become legally blind during the year? If yes, please name and explain:

____

____

____

DEPENDENTS (______Check here if this section does not apply.)

Yes ☐ No ☐ Were there any changes in dependents such as births, deaths, or dependents you are no longer claiming? If yes, please name and give dates of birth or death and update on Client Information page that follows:

____

____

____

Yes ☐ No ☐ Were any of your unmarried children, who might be claimed as dependents on your return, 19 years of age or older at the end of 2024?

Yes ☐ No ☐ Did any of your children under age 19 or who were full-time students under age 24 at the end of 2024 have a total investment income equal to, or in excess of, $2,600?

Yes ☐ No ☐ Do you, or your spouse, have dependents under age 24 who must file a tax return and would they like Bottom Line Accounting to prepare their tax return?
Name: ____

Yes ☐ No ☐ Did you, or your spouse, provide over half the support for any person(s) other than your dependent children during the year? If yes, explain:

____

____

____

Yes ☐ No ☐ Did you, or your spouse, pay for ___childcare for a child under age 13 or ___adult daycare while you worked or looked for work? We will need the name, Social Security Number or FEIN of the company or person providing care along with a breakdown by child of the amount paid.

Yes ☐ No ☐ Did you, or your spouse, pay any expenses related to the adoption of a child during 2024?

Yes ☐ No ☐ If you, or your spouse, are divorced or separated with child(ren), do you, or your spouse, have a divorce decree or other form of separation agreement which establishes custodial responsibilities and can you, or your spouse, provide a copy if requested?

2024	1040	US	Miscellaneous Questions

STATE RESIDENCY

Yes ☐ No ☐ Did your mailing address change? **If so, please update here and on Client Information Page:**

____

____

____

Please list State of Residence, County of Residence, and Township or School District (if applicable)
Taxpayer: ______________________________
Spouse: ______________________________

Yes ☐ No ☐ Did you, the taxpayer, live in North Carolina for the full 2024 year? If not, then what State residencey do you claim? __________ and what dates did you live in North Caroina in 2024? ______________________________

Yes ☐ No ☐ Did your spouse live in North Carolina for the full 2024 year? If not, then what State residency do they claim? __________ and what dates did they live in North Carolina in 2024?______________________________

Yes ☐ No ☐ Do you, or your spouse, need to file a State Tax Return other than North Carolina for any reason? If yes, which State(s)?

____

____

MILITARY-Taxpayer (______Check here if this section does not apply.)

Yes ☐ No ☐ Are you, the taxpayer, an active duty military member, retired from the military, or have you *ever served* in the military? Length of Service? ______
Date of enlistment?__________ Date of seperartion: __________
(If not already provided, a copy of DD-214 is required.)

Yes ☐ No ☐ Did you, the taxpayer, serve outside of the US at any time during 2024? If yes, can you please describe the location and dates?

____

____

Yes ☐ No ☐ Did you, the taxpayer, incur moving expenses due to a change of duty station that were not fully reimbursed?

2024	1040	US	Miscellaneous Questions

MILITARY-Spouse (______Check here if this section does not apply.)

Yes ☐ No ☐ Is your spouse an active duty military member, retired from the military, or *ever served* in the military? Length of Service? ______
Date of enlistment?________________ Date of seperartion: __________________
(If not already provided, a copy of DD-214 is required.)

Yes ☐ No ☐ Did your spouse serve outside of the US at any time during 2024? If yes, can you please describe the location and the dates?

____
____

Yes ☐ No ☐ Did your spouse, incur moving expenses due to a change of duty station that were not fully reimbursed?

GENERAL INFORMATION

Yes ☐ No ☐ Do you, or your spouse, have ALL records to substantiate the PERSONAL deductions you are claiming on your 2024 tax return?

Yes ☐ No ☐ Do you know of any changes to a prior year's tax information which would require an amended tax return? If yes, please explain:

____
____
____

Yes ☐ No ☐ Have you, or your spouse, been a victim of tax related identity theft? If yes, have you received an Identity Protection Pin from the IRS? You will need to provide this IP PIN for electronic filing. __________________Taxpayer ________________Spouse

Yes ☐ No ☐ Did you, or your spouse, pay anyone, other than a business, $2,700 or more in 2024 for ___housekeeping, ___babysitting,___ nanny services ___home health care, ___yard work, etc.?

Yes ☐ No ☐ Did you, or your spouse, have bank accounts in foreign countries that together had a balance of over $10,000 at any time in 2024?

Yes ☐ No ☐ Did you, or your spouse, individually make gifts (cash or property) equal to or totaling more than $18,000 to any one individual(s) during 2024?

Yes ☐ No ☐ Are ___you, or ___your spouse, an educator for grades K-12 and did you have qualified educational expenses that you can document? If yes, please provide documentation for these expenses.

Yes ☐ No ☐ Did you ___purchase, ___sell, or ___refinance your principal home or second home during 2024?

2024	1040	US	Miscellaneous Questions

Yes ☐ No ☐ Did you take a home equity loan against your principal home or second home? If yes, please explain when and what the money was used for:

____

____

____

Yes ☐ No ☐ Did you make any residential energy-efficient improvements (must meet certification standards) or purchases involving exterior doors, windows, skylights, insulation materials, central air conditioners, water heaters, furnaces, boilers, heat pumps, biomass stoves and boilers, or have a home energy audit in 2024?

INCOME

Yes ☐ No ☐ Did you, or your spouse, work for an employer and receive a W-2(s)? Please provide final pay stub along with W-2's. There may be deductible items that can only be found on your final pay stub.

Yes ☐ No ☐ Did you, or your spouse, receive Unemployment Income in 2024?

Yes ☐ No ☐ Did you, or your spouse receive income from Jury Duty in 2024?

Yes ☐ No ☐ Did you, or your spouse, receive unreported Tip Income of $20 or more in any month during 2024?

Yes ☐ No ☐ Did you, or your spouse, cash any Series EE U.S. savings bonds issued after 1989 and pay qualified higher education expenses for yourself, your spouse, or your dependents with these funds?

Yes ☐ No ☐ Did you, or your spouse, receive any ___Social Security Benefits, ___unemployment benefits, ___disability income, or ___VA disability benefits during the year?

Yes ☐ No ☐ Did you, or your spouse, have any foreign income or pay any foreign taxes?

Yes ☐ No ☐ Did you, or your spouse, receive any ___awards, ___prizes, ___hobby income, ___gambling or ___lottery winnings?

Yes ☐ No ☐ Did you, or your spouse, have any debts canceled or forgiven? This would be reported to you on a Form 1099-C or Form 1099-A and must be included on your tax return in the year received.

Yes ☐ No ☐ Did you, or your spouse, have any interest or ownership in a ___partnership,___LLC, ___Corporation, or ___S Corporation?

2024	1040	US	Miscellaneous Questions

INTEREST, DIVIDENDS, AND CAPITAL FROM INVESTMENTS
(______Check here if this section does not apply.)

Yes ☐ No ☐
Did you, or your spouse, receive: ___interest, ___dividends,___capital gains distributions or did you sell ___stock or ___mutual funds in 2024? Please provide ALL pages of the related Form 1099's (These are the Year End Brokerage Statements.)

Yes ☐ No ☐
Did you, or your spouse, inherit any form of ___interest, ___dividend account(s), ___ stock, or ___ property in 2024?

Yes ☐ No ☐
Did you, or your spouse, buy or sell any stocks, bonds or other investment property in 2024?

Yes ☐ No ☐
Did you, or your spouse, sell or do you plan to sell any dividend generating stocks or mutual funds during the first 60 days of 2025?

VIRTUAL CURRENCY

Yes ☐ No ☐
At any time during 2024, did you or your spouse receive, sell, exchange, or otherwise dispose of any financial interest in any virtual currency? (Purchasing goods or services with virtual currency is considered a transaction.) If the answer to this question is "yes", we may need additional virtual currency information if not provided by your financial institution.

RETIREMENT PLANS

Yes ☐ No ☐
Did you, or your spouse, make a contribution to a retirement plan:
___401(k), ___403(b),___IRA, ___SEP, ___SIMPLE, ___Qualified Plan, ___other?

Yes ☐ No ☐
Did you, or your spouse, receive a distribution from a retirement plan:
___401(k), ___403(b),___IRA, ___SEP, ___SIMPLE, ___Qualified Plan,___disability, ___Military Retirement? If yes, you will receive a Form 1099-R which is needed to prepare your tax return.

Yes ☐ No ☐
If this was a distribution before age 59 1/2, was it due to: ___disability, ___death, ___divorce, ___first-time home purchase, ___education, ___medical expenses, ___unemployment, ___military service, ___separation from company (after age 55), ___domestic abuse, or___IRS levy?

Yes ☐ No ☐
If you, or your spouse, are age 73 and have an IRA or other retirement plan, have you taken your Required Minimum Distribution?

Yes ☐ No ☐
Did you, or your spouse, transfer or rollover any amount from one retirement plan to another retirement plan?

Yes ☐ No ☐
Did you, or your spouse, convert part or all of your ___traditional, ___SEP, or___ SIMPLE IRA to a Roth IRA in 2024?

Yes ☐ No ☐
Did you, or your spouse, inherit any form of retirement or pension account in 2024?

2024	1040	US	Miscellaneous Questions

BUSINESS INCOME-Taxpayer (______Check here if this section does not apply.)

Yes ☐ No ☐ Did you, the taxpayer, start or run a business in 2024? Is your business a:
____Sole-proprietorship, ___Single Member LLC, ___Multi-Member LLC,
____Partnership, or ____Investor in this business(es)?

Yes ☐ No ☐ Did you, the taxpayer, receive any Forms 1099 or Forms K-1 for your business ventures?

Yes ☐ No ☐ Do you, the taxpayer, have a Federal Employer Identification Number (FEIN) for this business? If yes, please provide FEIN and business name:

____

____

What type of service or product is sold or produced by this business(es)?

____

Yes ☐ No ☐ Did you, the taxpayer, purchase or dispose of any business assets (furniture, equipment, vehicles, real estate, etc.), or convert any personal assets to business use?

Yes ☐ No ☐ Do you, the taxpayer, have ALL records to substantiate the BUSINESS deductions you are claiming on your 2024 tax return?

Yes ☐ No ☐ Do you, the taxpayer, have or will you need the preparation of income and expense reports (bookkeeping) for this business(es) for tax preparation purposes?

BUSINESS INCOME-Spouse (______Check here if this section does not apply.)

Yes ☐ No ☐ Did your spouse start or run a business in 2024? Is their business a:
____Sole-proprietorship, ___Single Member LLC, ___Multi-Member LLC,
__Partnership, or ____Investor in this business(es)?

Yes ☐ No ☐ Did your spouse receive any Forms 1099 or Forms K-1 for their business ventures?

Yes ☐ No ☐ Does your spouse have a Federal Employer Identification Number (FEIN) for this business? If yes, please provide FEIN and business name:

____

____

What type of service or product is sold or produced by this business(es)?

____

2024	1040	US	Miscellaneous Questions

Yes ☐ No ☐ Did your spouse purchase or dispose of any business assets (furniture, equipment, vehicles, real estate, etc.), or convert any personal assets to business use?

Yes ☐ No ☐ Does your spouse have ALL records to substantiate the BUSINESS deductions they are claiming on your 2024 tax return?

Yes ☐ No ☐ Does your spouse have or will they need the preparation of income and expense reports (bookkeeping) for this business(es) for tax preparation purposes?

Business Use of Home (Business owners only.)

Yes ☐ No ☐ Was your home rented out or used for business in 2024? If yes, what is the total square footage of your home? _______ What is the total square footage of the space used for business purposes? _______ (This space must be used used "regularly and exclusively" to be considered a business expense.)

RENTAL INCOME (______Check here if this section does not apply.)

Yes ☐ No ☐ Did you, or your spouse, own any rental property in 2024?

Please list Address of Property:

____

____

____

Yes ☐ No ☐ Did you use a rental management company for this property? If yes, you should have received a Form 1099-Rent or Income Statement along with a Cash Flow Statement showing all income and expenses. You will need to provide rental income and expense details for each rental property that will be claimed.

EDUCATION (______Check here if this section does not apply.)

Yes ☐ No ☐ Did you, your spouse, or a dependent receive a reimbursement in 2024 for student loan interst paid?

Yes ☐ No ☐ Did you, or your spouse, pay any student loan interest during 2024? If yes, you should receive a Form 1098-E for each student loan account. This form(s) will be needed to prepare your tax return.

2024	1040	US	Miscellaneous Questions

Yes ☐ No ☐ Did you, or your spouse, make any contributions to an Education Savings or 529 Plan Account?

Yes ☐ No ☐ Did you, or your spouse, receive a distribution from an Education Savings Account or a Qualified Tuition Program?

Yes ☐ No ☐ Did you, your spouse, or a dependent receive a Form 1098-T for tuition paid in 2024?

Yes ☐ No ☐ Did you, your spouse, or a dependent incur any educational expenses that were required to attend a college, university, or vocational school?

ITEMIZED DEDUCTIONS

Yes ☐ No ☐ Did you, or your spouse, pay for ___health care insurance, ___Medicare, ___Medicare supplement, or ___long term care insurance with after-tax dollars?

Yes ☐ No ☐ Did you, or your spouse, pay medical bills to include: ___doctors, ___dentists, ___prescriptions, ___insulin, ___eyeglasses, ___contact lenses and solution, ___medical supplies, ___hearing aids and batteries, ___other medically necessary expenses, and ___home renovations made for medical reasons.

Yes ☐ No ☐ Can you provide documentation for mileage driven for medical purposes?

Yes ☐ No ☐ Did you, or your spouse, buy a new or used motor vehicle(s) in 2024?

Yes ☐ No ☐ Did you, or your spouse, register and pay property taxes on a motor vehicle(s)?

Yes ☐ No ☐ Do you, or your spouse, own and pay property taxes on a ___home, ___second home (including ___motor-home or ___house boat that qualifies), ___or other property?

Yes ☐ No ☐ Have you or your spouse made cash contributions to charity? You MUST have receipts and provide.

Yes ☐ No ☐ Have you, or your spouse, made donations of property (i.e. clothes, furniture, computers, food, household items, etc.) You MUST have receipts.

Yes ☐ No ☐ Did you, or your spouse, incur a casualty loss that occurred in a presidentially declared disaster area as a result of disaster?

Yes ☐ No ☐ Did you, or your spouse, make any out-of-state purchases (by telephone, Internet, mail, or in person) for which the seller did not collect sales and use tax?

2024	1040	US	Miscellaneous Questions

HEALTH CARE COVERAGE (______Check here if this section does not apply.)

Yes ☐ No ☐

Did you, your spouse, and your dependents (that is anyone you claim on your tax return) have healthcare coverage, such as employer-sponsored coverage or government-sponsored coverage (i.e. Medicare/Medicaid/VA Benefits/Tri-Care) for the full-year?

Yes ☐ No ☐

Did you, or your spouse, receive a Form 1095-A (Health Insurance Marketplace Statement). If yes, you must provide this form for tax preparation purposes. Forms ___1095-B (Health Coverage) or ___Form 1095-C (Employer Provided Health Insurance Offer and Coverage) are no longer required for tax preparation.

Yes ☐ No ☐

Did you, or your spouse, make any contributions to a Health Savings Account (HSA) or Archer MSA? If you did, you should receive a Form 5498-SA which is needed to prepare your tax return.

Yes ☐ No ☐

Did you, or your spouse, receive any distributions from a Health Savings Account (HSA) or Archer MSA? If you did, you should receive a Form 1099-SA which is needed to prepare your tax return.

Yes ☐ No ☐

Did you, or your spouse, pay long-term care premiums for yourself or your family? (This is normally thought of as nursing care insurance.)

ESTIMATED TAXES (______Check here if this section does not apply.)

Yes ☐ No ☐

Did you, or your spouse, make estimated Federal or State income tax payments? Please provide proof of all amounts paid and dates paid.

Paid to/Amount Paid/Date Paid:

____
____
____
____

Yes ☐ No ☐

Did you, or your spouse, apply an overpayment of 2023 taxes to your 2024 estimated tax (instead of receiving a refund for the previouse tax year)?

Yes ☐ No ☐

If you have an overpayment of 2024 taxes, do you and your spouse want the excess applied to your 2025 estimated tax (instead of being refunded)?

2024	1040	US	Miscellaneous Questions

MISCELLANEOUS

Yes ☐ No ☐ Do you, and your spouse, want to electronically file your tax return?

Yes ☐ No ☐ May the IRS discuss your tax return with your tax preparer?

Yes ☐ No ☐ Would you like to sign an IRS Form 8821-Tax Information Authorization which would allow Bottom Line Accounting to receive the same notices and/or letters from the IRS that you might receive for this tax filling? Signing this form gives us the ability to talk to the IRS, on your behalf, beyond the normal one year per return. This means that we can be aware and assist you sooner should your receive a notice or letter from the IRS.

Yes ☐ No ☐ Were you, or your spouse, notified or audited by either the Internal Revenue Service or a State taxing agency?

Yes ☐ No ☐ Do ____you, or ____your spouse, want to allocate $3 to the Presidential Election Campaign Fund? If yes, the funds are budgeted from the National Budget and do not come out of your tax refund. Funds are divided equally between political parties.

Yes ☐ No ☐ How did you learn about Bottom Line Accouting?_____Internet Search ____Friend or Family (Please share:_______________________________)

FINANCIAL INSTITUTION

Yes ☐ No ☐ Do you want to have any 2024 Federal refund deposited directly into your financial account?

Please supply financial information:

Type of financial account: ___Savings Account or ___Checking Account:

Name of financial institution:____
Routing Number: ____
Account Number:____

GOOD SAMARATAN LAW

Yes ☐ No ☐ * Good Samaritan Laws offer legal protection to people who give reasonable assistance to those who are, or whom they believe to be injured, ill, in peril, or otherwise incapacitated. Components of Good Samaritan law are generally: 1) Acting in good faith: The person helping must act without expecting compensation or reward. 2) Providing reasonable care: The person helping must act as a reasonably prudent person would in similar circumstances. 3) Immunity from liability: The person helping is protected from civil liability if they act within the scope of their training or abilities.

2024	1040	US	Miscellaneous Questions

Should my tax return preparer determine a need to invoke the Good Samaratin Law in mine or my spouses behalf, the following person(s) should be contacted:

For Taxpayer:
Contact: ____________________________Phone #: ________________

For Spouse:
Contact: ____________________________Phone #: ________________

I/We have completed this tax organzier to the best of my/our ability and believe this information to be correct.

Signature: ____

Printed Name: ______________________________________ Date:______________

****

If you know, or believe, that you may have a tax liability, I strongly encourage you make payment to the IRS and/or your State so that should it become necessary to file an extension for your tax filing, you have met the highest tax payment that you believe to be your liability.

Bottom Line Accounting is not responsible for paying your taxes and/or any related penalties and interest charges you may incure if you have underwithheld or underpaid our tax liabiltiy even if an extension to file is required or requested.