

PERSONAL INFORMATION		TAXPAYER		SPOUSE		
Name (On File w/ Soc. Sec.)						
Date of Birth (mm/dd/yy)						
E-mail Address						
Occupation/Job Title						
Best Contact Number						
Additional Contact Number						
Current Address		Street				
		City	State	Zip Code		
Active Vol. Firefighter or Ambulance Worker?    Taxpayer Yes <input type="checkbox"/> No <input type="checkbox"/> Spouse Yes <input type="checkbox"/> No <input type="checkbox"/>						
<b>REFUND OR AUTOMATIC WITHDRAWAL OF AMOUNTS DUE</b> <input type="checkbox"/> Check   or <input type="checkbox"/> Direct deposit - <b>Voided Check -Enclosed</b> <input type="checkbox"/> Did your account change from Last Year?   Yes <input type="checkbox"/> No <input type="checkbox"/>						
In 2024 did you: (a) receive (as a reward, award, or payment for property or services); or (b) sell, exchange, gift, or otherwise dispose of any digital asset (or a financial interest in a digital asset)?                      Yes <input type="checkbox"/> No <input type="checkbox"/> Digital assets include (but are not limited to): Convertible virtual currency; cryptocurrency; Stablecoins						
<b>DEPENDENT INFORMATION - Children - Age 18 or younger (age 19-23 if attending school full time for at least five months during year).    If your dependent filed their own tax return please note and provide a copy.</b>						
First, Middle Initial and Last Name	*Filed a tax return-Y/N	DOB	Soc. Sec. No.	# Months Resided in your home in 2024	Child Care Expenses paid in 2024	
<b>CHILD CARE EXPENSES - Provide Child Care Expenses paid for each child in 2024 and provide the child care provider's name address and identification number for a dependent child under age 13, or costs of caring for a handicapped individual, so you could work, attend school or look for a job. Includes day camps, preschool and nursery school.</b>						
<b>BEYOND HIGH SCHOOL EDUCATION TUITION AND FEES/PROFESSIONAL COURSE</b>						
Provide us with form 1098T and a printout of the student account for 2024 from your college or other accredited higher educational institution and listing dates and amounts of tuition paid, year in school, FT or PT attendance, list amounts paid for Room and Board, include amounts paid with financial aid or student loans. Do not include amounts paid with scholarship money. Students year of College _____ <b>529 Distribution in 2024 -</b> Yes <input type="checkbox"/> No <input type="checkbox"/> <b>Student Felony Conviction -</b> Yes <input type="checkbox"/> No <input type="checkbox"/>						
<b>2024 HEALTH INSURANCE</b> <input type="checkbox"/> Did you or your dependent receive health insurance from the Marketplace? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, enclose copies of Form 1095-A, 1095-B, or 1095-C				<b>Casualty, Disaster, Theft in 2024</b> Yes <input type="checkbox"/> No <input type="checkbox"/>  *Provide Documents		
<b>2024 ESTIMATED TAX PAYMENTS</b>	<b>Federal</b>	<b>Date Paid</b>	<b>NYS</b>	<b>Date Paid</b>	<b>Other- state</b>	<b>Date Paid</b>
Due 4/15/24	\$		\$		\$	
Due 6/17/24	\$		\$		\$	
Due 9/16/24	\$		\$		\$	
Due 1/15/25	\$		\$		\$	
<b>PERSONAL RESIDENCE</b>						
Did you sell or purchase your main residence in 2024? Yes <input type="checkbox"/> No <input type="checkbox"/> (If yes, provide us with the Settlement Statement- HUD-1). Did you own and use it as a principal residence for at least two of five years before the sale?    Yes <input type="checkbox"/> No <input type="checkbox"/> Did you sell a previous residence within two years before the sale date and exclude any gain? Yes <input type="checkbox"/> No <input type="checkbox"/> After 2008, was the property ever used for anything other than as a principal residence (for example, as a vacation home or rental property)? Yes <input type="checkbox"/> No <input type="checkbox"/> Did you refinance your mortgage and take out a home equity loan? Amount of proceeds used for something other than acquiring or improving your home \$ _____.						