

1000 S Cleveland-Massillon Rd Ste 119, Fairlawn, OH 44333 (330) 665-9405 (Phone) (330) 937-9140 (Fax) www.davisnagycpa.com

Please make sure this questionnaire is saved to your computer before you fill it out.

Davis, Nagy & Company LLC holds the right to ask for paper documentation of any or all of the information provided.

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neral Information			
	TAXPAYER		SPOUSE
		Complete the app	olicable spouse fields if married as of Dec. 31, 2023
Last Name:		Last Name:	
First Name:		First Name:	
Middle Initial:		Middle Initial:	
Social Security #:		SSN or ITIN:	
Date of Birth:		Date of Birth:	
Current Employer:		Current Employer:	
Occupation in 2024:		Occupation in 2024:	
		_	<u></u>
Filing Status:	Married Filing Joint N	Married Filing Separate Head o	f Household Single
(Select one)			
Deductions:	Standard Itemized		
(Select one)	- Ctaridata - Itomizoa		
Referred By:		(new clients)	
ntact Information			
Primarily, you will	be contacted by email.		
Email	next to primary email address	Telephone:	
	Thext to plinlary email address		
Email Work:		Work	
Email Personal:		Mobile	
Email Other:		Home	
Current Address:	(street, city, state, zip)		From (mm/dd/yy) To (mm/dd/yy)
Garront / taurooor	(etroot, etc), etato, z.p)		Tom (mm/adayy)
Maddin a Adda a fa	- IDO		
Mailing Address for	r IRS correspondence, it diπere	nt (i.e., PO Box, work address, etc.)	1
			_
idency & Employe	rs		
Complete if you live	ed at any other location during 2	2024:	
Taxpayer (T), Spous	se (S), Joint (J)		
T/S/J Address (st	reet, city, state, zip)		From (mm/dd/yy) To (mm/dd/yy)
Emplement	2024		
Employers during 2			,
Taxpayer (T), Spous			Where worked
T/S Employer:	Occupation	From	To (state or country)

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Dependents										
(Do not list spouse) First Name, Initial, Last Name	SSN or ITIN	Date of Birth (mm/dd/yy)	Relationship to You	Childcare Expenses While You Are At Work* (incurred & paid in 2024)						
Dependent Childcare Expenses Incurred while you [and spouse] were working or looking for work  Care Provider's Name Care Provider's Address SSN or EIN Amount Paid										
Check to indicate that you have be	een claimed as a depende	ent on <b>someone else</b>	's tax return this year							
Check to indicate that you have been claimed as a dependent on <b>someone else's</b> tax return this year.  If you have a dependent child for whom you paid <b>college/university tuition</b> , please refer to the <u>education worksheet</u>										
Direct Deposit & Electronic Funds Wit	thdrawal									
Name of US Bank		st be a US bank)								
Routing Number Account Number	) Savings (9-digit number on the b	bottom left of a check)								
OR Voided Check Attached										
Electronic Withdrawal of any Tax Ba Please select a withdrawal date.	lance Due									
Note: If no date is selected, you w April 15 The date the t	ill have to mail in a check ax return is e-filed	for any tax balance du	ıe							
RA Contributions										
Tax Year 2024, maximum contribution A 2024 IRA contribution can be made	up to April 15, 2025.	age 49), and \$8,000 (a	age 50 and older).							
IRA Traditional \$	\$			s. An IRA is something set						
or IRA Roth \$	\$	up by you persona	lly, not through your woi	rk. )						
Mortgage Interest & Property Tax										
Amounts for up to two residences (can be in the U.S. or abroad) that you lived in during 2024.  For rental properties, please list separately on the Rental worksheet.  Reported on										
Mortgage Interest Primary residence and second home only \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$										
Points Paid (if any) \$	\$	\$								
Property Tax (primary residence) \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$										



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Property Tax (additional homes) \$ 0	0 0								
Additional Information: Please check if any of these sit	tuations apply to you.								
Mortgage origination prior to December 16, 2017, the (including primary home plus second home)	Mortgage origination prior to December 16, 2017, the total of your mortgage balance(s) was more than \$1,100,000 during 2024 (including primary home plus second home)								
Mortgage origination after December 15, 2017, the primary home plus second home)	total of your mortgage balance(s) was more than \$750,000 during 2024 (including								
You sold a home during 2024									
Charitable Contributions									
Must be to a Qualified U.S. Charity									
Charitable contributions must be supported with a donat Contributions of clothing and household goods must be	in good used condition or better.								
Cash, Checks, or Credit Cards Noncash  TAXPAYER  \$ \$ \$ \$ \$ \$ \$ \$									
*If noncash charity totals more than \$500, please eith	her email or fax us your receipts <u>OR</u> provide the following:								
Name of Charity Address of Charity	Goods Donated (clothes, etc.) Date Donated Used Value								
For values, go to: Salvation Army Donation Value Gu	uide								
Note: Donation of stock/securities is a non-cash donation									
Other Deductions/Expenses									
Deductions: TAXPAYER Total Medical Expense \$ 0 \$	SPOUSE JOINT 0								
Prescription \$ \$ Doctor visits \$ \$									
Hospitals & Nursing homes \$ \$									
Margin Interest \$ \$ \$ \$ \$ \$ \$ \$ \$ \$									
Adoption Expenses \$ \$	\$								
Early Withdrawal Penalties \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$									
TAXPAYER	SPOUSE								
Student Loan Interest Paid: \$									
Tuition & Scholarships									
If you or your spouse were a student during 2024, or you please complete the <a href="Education"><u>Education</u></a> worksheet.	ou paid for your dependent child's college/university tuition,								
Checklist of Forms to Send Davis, Nagy & Company	VIIC								

Generally, you do not need to fill out income amounts on the questionnaire as we can get them directly from tax forms that you have received from the payers. Please scan & email, fax, mail or drop off all such forms. For some items, additional information will be



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needed, see below.								
Check each you received (or should recei	ve) for 2024	You only n	eed to se	and the form:				
Officer cach you received for should receive	vc) ioi 2024.	rou only i	iccu to sc	and the form.				
TAXPA	AYER SF	POUSE	JOINT	_				
Wages (Form W-2)								
Self-Employment (Form 1099-NEC) *				*Also complete Self Employment worksheet				
Interest (1099-INT)				*Interest Income Statements				
Dividends (1099-DIV)*				*Dividend income statements				
Sales of Securities (Form 1099-B) *				*Also complete <u>Trades</u> worksheet				
Unemployment Compensation (1099-G)								
Tax Overpayment (1099-G)*				*State and local tax refunds received during 2024				
Partnership/S-Corp/Trust/Estate (Sch. K-1)								
Retirement Distributions (1099-R)*				*Pensions and annuities/Retirement plan distribution				
Prizes and Awards								
Mortgage Interest (Form 1098)								
Student Loan Interest (1098-E)								
Tuition Expense (Form 1098-T)								
HSA or Archer MSA (5498-SA or 1099-SA)	Ħ	Ħ						
2022 and 2023 Tax Return (New Clients Only)								
Other Form 1099				Specify:				
For these items, please <u>click on the link</u> to provide additional information:  TAXPAYER SPOUSE JOINT								
Rental Income								
Foreign Income and/or Accounts*								
*Note: Potential fines have increased for	r not reporting	g foreign ac	counts with	h combined balances in excess of \$10K.				
Tax Credits								
Check all that apply:  Elderly Credit Child Tax Credit Child & Dependant Care Adoption Credit Electric vehicle Other Specify:								
State Sales and Use Tax								
Total amount of sales tax you owe from out of state purchases:								
For example, you are an Ohio resident and lived in Akron all year which has a 6.75% sales tax rate. In 2024, you purchased, tax free, goods online or out of state totaling about \$1,000 (excluding the shipping and handling charges). You would report \$67.50 of sales tax.								

**TAXPAYER** 

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**SPOUSE** 

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## **Estimated Tax Payments**

Prepayments of tax that you sent in during the year, usually by check along with a voucher (e.g., Form 1040-ES for federal estimated tax payments). Do not enter taxes withheld here.

	17007					<u></u>					
FEDERAL PAYMENTS:			Date paid if			FEDERAL PAYMENTS:			Date paid if		
QTR	Due Date	I	ater than due date	Amoun	t	QTR	Due Date		later than due date	Amount	
1	04/15/24			\$		1	04/15/24			\$	
2	06/15/24			\$		2	06/15/24			\$	
3	09/16/24			\$		3	09/16/24			\$	
4	01/15/25			\$		4	01/15/25			\$	
STATE:						STATE:					
1	04/15/24			\$		1	04/15/24			\$	
2	06/15/24			\$		2	06/15/24			\$	
3	09/16/24			\$		3	09/16/24			\$	
4	01/15/25			\$		4	01/15/25			\$	
Locality:						Locality:					
1	04/15/24			\$		1	04/15/24			\$	
2	06/15/24			\$		2	06/15/24			\$	
3	09/16/24			\$		3	09/16/24			\$	
4	01/15/25			\$		4	01/15/25			\$	

EC.	iai piratious	
	If any of these apply, please indicate which ones and provide additional information:  You received a notice in 2024 of a tax adjustment or audit, or settled an audit.  You gave a gift of more than \$18,000 to any one donee during 2024 (in this case, you may need to complete a gift return).  You paid or received alimony.  You had income not otherwise indicated on the questionnaire  You installed property run by solar or geothermal in your home.  You employed a nanny or other household employee during 2024 to whom you paid more than \$1,600  You contribute to Ohio's 529 College Savings Program  You had Gambling and/or lottery winnings in 2024  You had farm-related expenses (please provide receipts, your records, and any other documents)  If you have other situations or questions, list them here, call, or send an email:	
	Note: To start a new line, press ALT-ENTER.	

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## PLEASE SAVE THIS QUESTIONNAIRE, THEN SEND IT AS AN E-MAIL ATTACHMENT OR UPLOAD TO OUR PORTAL

Thank you for completing the questionnaire. Please upload your tax documents to your secure client portal (if you need set up with a secure portal please email beth@davisnagycpa.com) or mail the infomation to our office. Paper items received by other means will be scanned and then returned to you with your completed return. If you're a new client, we also need a copy of your 2022 and 2023 tax returns, if filed. Please do not send expense receipts; only provide the totals for each type of expense which you should have already entered on the questionnaire.

Reminder: Your tax return cannot be filed without your signature.

## Davis, Nagy & Company LLC

**Certified Public Accounting Firm** 

1000 S Cleveland-Massillon Rd Ste 119, Fairlawn, OH 44333 Tel: 330.665.9405; Fax: 330.937.9140 <u>beth@davisnagycpa.com</u>