

# CORNERSTONE

## TAX SERVICE

*Firm Foundation, Solid Solutions*



Taxpayer's Full Name: \_\_\_\_\_

Spouse's Full Name (if married): \_\_\_\_\_

Taxpayer's Social Security Number: \_\_\_\_\_

Spouse's Social Security Number: \_\_\_\_\_

Taxpayer's Date of Birth: \_\_\_\_\_

Spouse's Date of Birth: \_\_\_\_\_

Taxpayer's Occupation Title: \_\_\_\_\_

Spouse's Occupation Title: \_\_\_\_\_

Taxpayer's Mobile Phone Number: \_\_\_\_\_

Spouse's Mobile Phone Number: \_\_\_\_\_

Taxpayer's Email Address: \_\_\_\_\_

Spouse's Email Address: \_\_\_\_\_

Mailing Address (including zip code):  
\_\_\_\_\_

Home Phone Number: \_\_\_\_\_

What County did you and your spouse live in as of January 1, 2024? \_\_\_\_\_

### **(Indiana Residents only)**

What County did you and your spouse work in as of January 1, 2024?

Taxpayer \_\_\_\_\_ Spouse \_\_\_\_\_

On December 31st were you: Single, Married, or if Married but living apart since what date \_\_\_\_\_

Is there a signed Form 8332 or a divorce decree that allows someone else to claim your children? \_\_\_ YES \_\_\_ NO

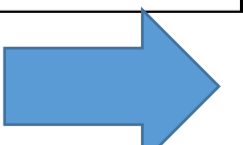
If you claim Head of Household, do the children live with you more than 6 months of the year? \_\_\_ YES \_\_\_ NO

Can your parents or someone else claim you on their return? \_\_\_ YES \_\_\_ NO

List all dependents (not your spouse) living with you last year. Enter DOB & SSN only for new additions only.

First Name	Last Name	Birth Date (Mo/day/year)	SSN	Relationship to you	Lived with you all year Y/N	Childcare/ Preschool Y/N	College Y/N	Private School Y/N

PLEASE CONTINUE ON BACK



Did you pay Real Estate Taxes last year?  YES  NO

Do you have a home equity loan or line of credit?  YES  NO (If it was not used solely for home improvement, it is not deductible)

Did you pay any amounts to an Ex-Spouse for alimony AND/OR maintenance for a divorce prior to 12/31/18?  YES  NO

If yes then enter your Former Spouse's Name & SSN \_\_\_\_\_

Did you receive any income in the form of alimony or maintenance from a divorce prior to 12/31/18?  YES  NO

Did you pay any Child Care Expenses (Nanny, Pre-school, before/after care)  YES  NO If yes, how much? \_\_\_\_\_

Name \_\_\_\_\_ Provider EIN# or SSN# \_\_\_\_\_

Provider's Address \_\_\_\_\_

Did you make any of the following Energy Improvements to your MAIN home in 2024?  YES  NO

QUALIFIED Doors, Windows, Skylights, Insulation, Water Heater, Furnace, AirConditioner - See Energy Star's website for requirements  
QUALIFIED Solar Electric Systems, Solar Water Heaters, Fuel Cell Property, Small Wind Energy Property, or Geothermal Heat Pumps

Will you be claiming any education credits?  YES  NO (You must have a 1098-T)

Will you be claiming any interest paid on student loans?  YES  NO (You must have a 1098-E)

Any Personal Property Taxes? (Ex. Excise tax on license plates, this does not apply in IL)  YES  NO

Any unearned income? (Ex. Dividends from stocks, Bank Interest from savings)  YES  NO

Did you have Medical, Dental, or Vision expenses in excess on 7.5% of your income?  YES  NO

Did you make any cash contributions or non-cash donations to charities and have receipts?  YES  NO

Did you contribute to an IRA (Individual Retirement Account) in 2024 or will you before 4/15/2025?  YES  NO

If yes, was it a Roth IRA or a Traditional IRA? \_\_\_\_\_

Did you have any 1099-R Retirement Distributions?  YES  NO

Did you have any self-employment income?  YES  NO

Did you sell any stocks or bonds?  YES  NO

Did you receive, sell, exchange, or dispose of any financial interest in digital assets (ie. Cryptocurrency, BitCoin?)  YES  NO

Did you have any rental property income?  YES  NO

Did you have any Social Security income?  YES  NO

Are there any years that you did not file your taxes?  YES  NO

If Yes, what years haven't been filed? \_\_\_\_\_

Did you send in Quarterly Estimated Federal or State tax payments?  YES  NO

Did you buy a vehicle, building materials, boat or make any other LARGE purchase incurring a LARGE amount of sales tax?  YES  NO

### **(Indiana Residents only)**

Did you pay rent?  YES  NO If yes, how many months did you pay rent? \_\_\_\_\_

How much was your monthly rent? \$ \_\_\_\_\_

Landlord's Name \_\_\_\_\_

Landlord's Address \_\_\_\_\_

**Cornerstone Tax Service, Inc. (Accountant) will prepare our personal or corporate income tax returns based on information we will present to the accountant. Cornerstone Tax Service, Inc. will perform due diligence but will not audit or otherwise verify the data we submit. The accountant may ask us for clarification of some of the information, or for additional information. It is the accountants responsibility to prepare our tax return correctly according to the law and the information that we have provided. It is our responsibility to provide the accountant with all the information required to prepare complete and accurate returns. Our tax return cannot be filed until all forms are signed and returned to the office. I declare that to the best of my knowledge and belief what is stated above is correct, complete and is truly stated.**

Taxpayer's Signature \_\_\_\_\_ Date \_\_\_\_\_

Spouse's Signature \_\_\_\_\_ Date \_\_\_\_\_