



MITCH BOLEWARE, CPA, LLC

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STEP 1 TAX RETURN QUESTIONS

The following items may affect your tax return. Please answer carefully.

If you answer "yes" to any of the following questions, please be sure to complete the corresponding tab of organizer.

YES	NO	
		1 Did your marital status change during the year? If yes, explain in notes.
		2 Did your resident state change during the year? If yes, explain in notes.
		3 Did you make any estimated payments for either your federal or state 2023 tax liabilities? TAB 1
		4 Were there any changes in dependents? TAB 2
		5 Did you pay any care expenses for a dependent who was either disabled or under age 13? TAB 2
		6 Did you pay any college tuition or other expenses for yourself or your dependents? TAB 2
		7 Did you contribute to a state college tuition program for yourself, spouse or dependent? TAB 2
		8 Did you own a foreign bank account or foreign investment account at any time during 2023? TAB 2 (Add'l Fees May Apply)
		9 Did you receive any miscellaneous income, such as from interest, dividends, gambling winnings, etc? TAB 3 (PROVIDE FORMS)
		10 Did you sell any stocks, bonds or other investment property? (PROVIDE FORMS)
		11 Did you receive, sell, send, exchange, or otherwise acquire any financial interest in any virtual currency? If sold, (PROVIDE 1099 OR CRYPTO GAIN AND LOSS FORMS)
		12 Did you pay any taxes to a foreign country during 2022? TAB 4
		13 Did you purchase, refinance or sell your principal home, second home, or rental property? (PROVIDE CLOSING DOCUMENTS and Form 1098)
		14 Did you have a foreclosure? (PROVIDE 1099-C and/or 1099-A)
		15 Did you have any debt canceled? (PROVIDE 1099-C)
		16 Did you have any out-of-pocket medical expenses that were not covered by insurance? Include medical, dental, and vision. TAB 5
		17 Did you purchase insurance through the Health Insurance Marketplace? If yes, (PROVIDE 1095-A) .
		18 Did you contribute to or receive a distribution from an HSA? If yes, explain in notes.
		19 Did you make any cash contributions to a charitable organization? TAB 5
		20 Did you pay sales tax on any major purchases, such as a new vehicle, boat, ATV, or building materials? TAB 5
		21 Did you own a business this tax year? (Add'l Fees May Apply) TAB 6
		22 Did you own a rental property this tax year? (Add'l Fees May Apply) TAB 7
		23 Did you have a farm in 2022? If yes, please contact us for a farm schedule. (Add'l Fees May Apply)
		24 Are you a National Guard member or an Armed Forces Reservist and travel more than 100 miles and stay overnight to fulfill your duty? If yes, provide travel expenses.
		25 Did you make any purchases online or out-of-state on which no sales tax was charged?
		26 Did you qualify for residential solar or electric vehicle tax credit? If yes, send documentation.

Social Media Google Radio Employer TV Magazine Friend/Co-Worker (If so, enter name below)

REFERRAL PROGRAM - Please tell us who referred you to our company: _____

Basic Expat Fee is \$525 and Basic U.S. Return (no foreign income) is \$375. These fees include Federal and single State tax return preparation, e-filing, federal extensions (state upon request) and limited year-round planning and support.

Additional Fees:

Schedule C, E, or F (per form) **\$175**

Additional State or Local Tax Returns - **\$100**

Second Overseas Presence Test (Form 2555) **\$150**

Separate Filing of Tax Returns for Taxpayer and Spouse **\$300**

Foreign Bank Account Reporting (Form 114) **\$100**

Foreign Asset Reporting (Form 8938) **\$150**

Foreign Corporation or Partnership (Forms 5471 or 8865) **\$500**

Foreign Trust Reporting (Form 3520-A) **\$250**

[PAY ONLINE](#)

Depreciation Issues (Form 3115) **\$100**

Significant Stock & Crypto Transactions **\$100/hr**

Transcript Fee **\$75**

Fee to Mail Returns **\$50**

IRS/ State Issues **\$150/hr**

Power of Attorney **\$100**

Expedite Fee **\$250**

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Questionnaire Payment is due upon submission of forms - Pay online now - it's secure, fast and easy - or call 228-396-8800

STEP 3 CLIENT INFORMATION

	Marital Status as of 12/31/2024		
Taxpayer	First Name and initial		
	Last Name		
	SSN - New Clients Only		
	Occupation		
	Date of birth (MM/DD/YY)		
Spouse	First Name and initial		
	Last Name		
	SSN - New Clients Only		
	Occupation		
	Date of birth (MM/DD/YY)		
Current Mailing Address	Street Address		
	Apartment Number		
	City		
	State		
	Zip Code		
Taxpayer Contact Information	Mobile Phone - Required		
	Email Address - Primary		
	Email Address - Secondary		
	IRS Identity Protection PIN #		
Spouse Contact Information	Mobile Phone - Required		
	Email Address - Primary		
	Email Address - Secondary		
	IRS Identity Protection PIN #		
State Info	Resident State		
	Resident County		
	School District or Locality		

Note: Our tax professionals will determine your most correct and beneficial filing status.

STEP 4 DIRECT DEPOSIT OF REFUND / ELECTRONIC PAYMENT - CURRENT YEAR ONLY

Do you want your refund directly deposited?		Strongly Recommend Auto Draft of Balances Due
Do you want your tax balance directly drafted?		
Bank Name		
Routing Number (9 Digits)		
Account Number		
Type of Account-Checking or Savings		

STEP 5 ESTIMATED TAX PAYMENTS

Federal	Amount Paid	Date Paid	Quarterly Payments Only
Overpayment applied from 2023			
1st quarter payment (due 4/15/24)			
2nd quarter payment (due 6/15/24)			
3rd quarter payment (due 9/15/24)			
4th quarter payment (due 1/16/25)			
Additional estimated tax payments			
State	Amount Paid	Date Paid	
Overpayment applied from 2023			
1st quarter payment (due 4/15/24)			
2nd quarter payment (due 6/15/24)			
3rd quarter payment (due 9/15/24)			
4th quarter payment (due 1/16/25)			
Additional estimated tax payments			

STEP 6 DEPENDENTS

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	Dependent 1	Dependent 2	Dependent 3
First name			
Last name			
Date of birth (MM/DD/YY)			
SSN - Only for New Clients or New Dependents			
Relationship			
Months lived with you this year			
Was a dependent adopted in 2024?			
Claimed by taxpayer or spouse?			
Dependent Care Expense Amount (daycare)			
Disabled?			

STEP 7 HIGHER EDUCATION INFORMATION

	Student 1	Student 2	Student 3
First name			
Last name			
Social security number			
Completed 4 years of college before 2024?			
Amount of qualified tuition and fees paid			
Amount paid for course-related materials**			
Amount of scholarships/grants/GI Bill rec'd			
Student Loan Interest Paid in 2024			
Contributions to state prepaid tuition program			
Distributions from education account			

***Course-related materials are those materials required to be purchased by the school.*

STEP 8 (RESERVED FOR FUTURE USE)

	Taxpayer	Spouse

STEP 9 INDIVIDUAL RETIREMENT PLAN CONTRIBUTIONS (TRADITIONAL IRA, ROTH, SEP)

Account Type	Taxpayer or Spouse	Amount of contribution	These retirement plans may provide tax deductions but are subject to eligibility requirements and contribution limits. 2024 contributions are allowed through 4/15/2025.

STEP 10 FOREIGN ASSETS

List the information below if the aggregate of your foreign assets was valued at \$10,000 or more at any time during 2024. Include checking, savings, retirement, investment accounts, and ownership in foreign corporations.

Asset Type	Individual/Joint Ownership	Account Number	Name of Financial Institution/Corporation	Address of Financial Institution/Corporation	Max Value During 2024	Value as of 12/31/2024

STEP 11 WAGES, SALARIES, AND TIPS

PLEASE PROVIDE COPIES OF ALL W-2s AND 1099s

List All Employers For 2024	Taxpayer or Spouse	Income Earned in US or Overseas?	Wages (Box 1)

STEP 12 PENSION AND IRA DISTRIBUTIONS

PLEASE PROVIDE COPIES OF ALL 1099-Rs

Name of Payer	Taxpayer or Spouse	Gross Distribution (Box 1)	Taxable Amount (Box 2)	Distribution Code

STEP 13 GAMBLING WINNINGS (W-2G) - PROVIDE COPY OF W-2G

Name of Payer	Taxpayer or Spouse	Gross Winnings (Box 1)	Federal Tax Withheld (Box 2)	State Tax Withheld (Box 5)

STEP 14 GAMBLING LOSSES & WINNINGS (NON W-2G)

	Taxpayer	Spouse
Total Gambling Losses		
Gambling winnings not reported on Form W-2G		

STEP 15 INTEREST INCOME

PROVIDE ALL 1099-INT FORMS

Name of Financial Institution	Taxpayer, Spouse, or Joint	1099-INT Box 1	Foreign Bank Account?

STEP 16 DIVIDEND INCOME

PROVIDE ALL 1099-DIV FORMS

Name of Financial Institution	Taxpayer, Spouse, or Joint	1099-DIV Box 1

STEP 17 MISCELLANEOUS INCOME

	Taxpayer	Spouse
Social Security benefits (SSA-1099, box 5) - (Provide Form)		
Medicare premiums paid (SSA-1099)		
Alimony received		
Jury duty pay		
Alaska permanent fund dividends		
Royalties		

STEP 18 STATE REFUNDS / UNEMPLOYMENT COMPENSATION

Name of Payer (PROVIDE 1099-G)	Taxpayer or Spouse	Unemployment Compensation (Box 1)	State or Local Refund (Box 2)

STEP 19 FOREIGN EARNED INCOME EXCLUSION (FORM 2555)

GENERAL INFORMATION FOR TAXPAYER

Taxpayer Overseas Address	
Street Address or APO Address	
City	
Postal Code	
COUNTRY (FOREIGN)	
Name of Employer	
First full day overseas?	

TAXPAYER

TRAVEL INFORMATION - TRIPS TO USA OR US POSSESSION OR TERRITORY (SEND FLIGHT ITINERARIES)

Please enter all travel for 2024 as well as travel for 2025, known to date and estimated. Use MM/DD/YY format for all dates entered. *The IRS counts full foreign days, NOT full US days	Date left foreign country	Date arrived in USA	Date left USA	Date arrived in foreign country

GENERAL INFORMATION FOR SPOUSE (USE ONLY IF SPOUSE WORKED OVERSEAS)

Spouse Overseas Address	
Street Address or APO Address	
City	
Postal Code	
COUNTRY	
Name of Employer	
First full day overseas?	

SPOUSE

TRAVEL INFORMATION - TRIPS TO USA OR US POSSESSION OR TERRITORY (SEND FLIGHT ITINERARIES)

Please enter all travel for 2024 as well as travel for 2025, known to date and estimated. Use MM/DD/YY format for all dates entered. *The IRS counts full foreign days, NOT full US days	Date left foreign country	Date arrived in USA	Date left USA	Date arrived in foreign country

FOREIGN HOUSING EXPENSES AND FOREIGN TAXES PAID

Description	Amount
Foreign Housing Expenses (Rent, Utilities, Repairs, Furniture Rental, and Parking)	
Foreign Taxes Paid in 2024	Country Paid

Go to next tab

STEP 20 ITEMIZED DEDUCTIONS

MEDICAL AND DENTAL EXPENSES	TAXPAYER	SPOUSE
Prescription medicines		
Doctors, dentists and nurses		
Hospital and nursing homes		
Insurance-health/vision/dental (after tax dollars only)		
Insurance-long term care		
Medical lodging and transportation		
Medical miles driven		
DEDUCTIBLE TAXES	TAXPAYER	SPOUSE
Sales tax paid on major purchases (auto, boat, RV, etc.)		
Real estate taxes - principal residence		
Real estate taxes - property held for investment		
Personal property taxes (car tags)		
Other taxes		
INTEREST PAID (For Rental Property - See TAB 7)	TAXPAYER	SPOUSE
Primary home mortgage interest (Box 1) on form 1098		
Primary home mortgage points (Box 6) on form 1098		
Primary mortgage interest NOT reported on form 1098		
Points NOT on form 1098		
Primary mortgage insurance premiums (Box 5) on form 1098		
CHARITABLE CONTRIBUTIONS	TAXPAYER	SPOUSE
Contributions by cash or check		
Volunteer expenses (out-of-pocket)		
Number of charitable miles		
Noncash Donations under \$500		
Noncash Donations over \$500 - Provide Receipts or Summary		

Note: It is not necessary to split out taxpayer & spouse amounts if you plan on filing a joint return. List under one or the other, but do not duplicate amounts

STEP 21 ALIMONY

Alimony Divorce Agreements prior to 2019	Paid by Taxpayer	Paid by Spouse
Recipient's first name		
Recipient's last name		
Recipient's SSN		
Date of Divorce/Separation Agreement		
Amount Paid		

STEP 22 BUSINESS INCOME

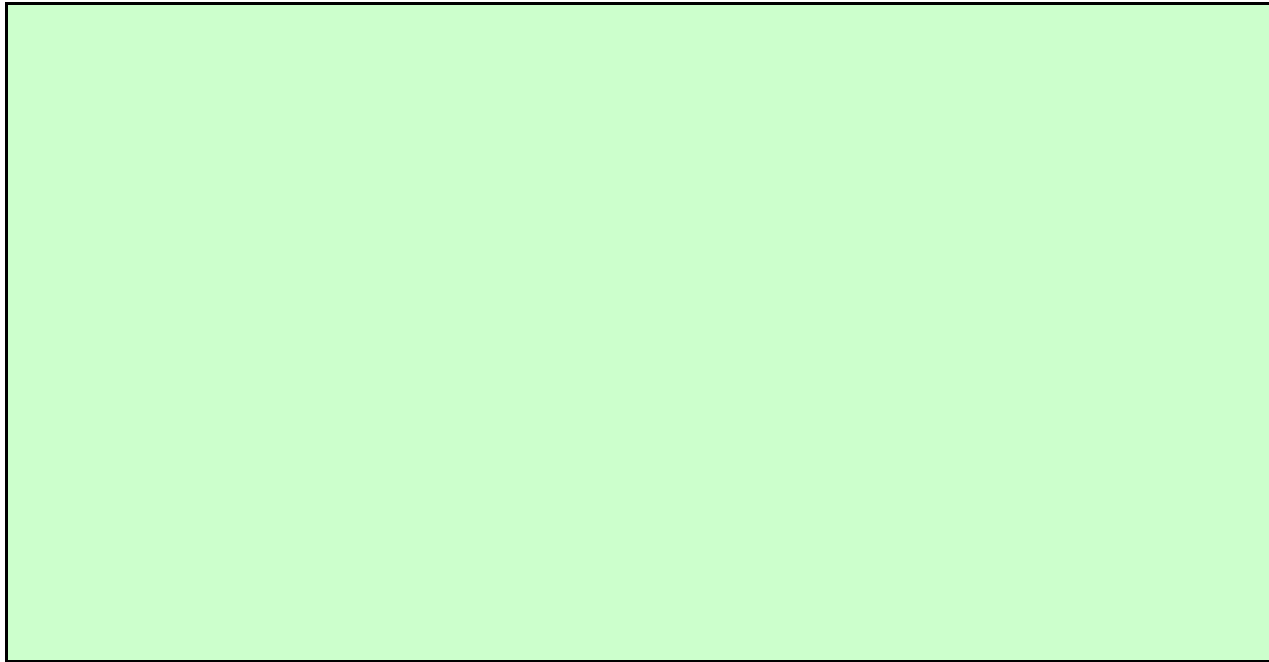
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GENERAL INFORMATION	
Principal business / profession	
Business name	
Business address	
City, state, zip code	
Employer identification number	
Taxpayer, Spouse or Joint ownership	
First schedule C filed for business?	
Did you issue 1099s or W2s for 2024?	
Did you maintain an inventory of products for resale during 2024?	
INCOME	
Gross Receipts	
EXPENSES	
Accounting	
Advertising	
Answering service	
Bad debts from sales or service	
Bank charges	
Commissions	
Contract Labor	
Delivery and freight	
Dues and subscriptions	
Employee Benefit Programs	
Insurance (other than health)	
Mortgage Interest (paid to banks, etc.)	
Other Interest (not entered elsewhere)	
Janitorial	
Laundry and cleaning	
Legal and Professional Services	
Office Expense	
Outside services	
Parking and tolls	
Pension and Profit Sharing Plans - Contributions	
Pension and profit sharing plans - admin. and education costs	
Postage	
Printing	
Rent - Vehicles, Machinery, & Equipment	
Rent - Other Business Property	
Repairs and Maintenance	
Security	
Self-Employed health insurance	
Supplies	
Taxes - Real Estate	
Taxes - Payroll	
Taxes - Sales Tax Included in Gross Receipts	
Taxes - Other (not entered elsewhere)	
Telephone	
Tools	
Travel	
Uniforms	
Utilities	
Wages	
Other expenses: (List below)	
Total Expenses	\$ -
Automobile Information (Business-Use Only)	
Description of vehicle (year, make, model)	
Car and truck expenses (not entered elsewhere)	
Number of business miles driven in 2024	
Total number of miles driven in 2024 (business & personal)	
Assets Purchased:	
Description	
Date placed in service	
Cost	

STEP 23 RENTAL PROPERTY

GENERAL INFORMATION		
Property 1		
Kind of property		
Location of property - address		
City, state, and ZIP code		
Percentage of ownership		
Purchase price		
Value of land included in purchase price		
Date first available for rent		
Fair market value on this date		
Number of days rented in 2024		
Date Purchased		
Taxpayer, spouse or joint ownership		
Property 2		
Kind of property		
Location of property - address		
City, state, and ZIP code		
Percentage of ownership		
Purchase price		
Value of land included in purchase price		
Date first available for rent		
Fair market value on this date		
Number of days rented in 2024		
Date purchased		
Taxpayer, spouse or joint ownership		
NOTE: Provide total rent income received, even if not on a form 1099-MISC.		
INCOME	Property 1	Property 2
Rents Received (See form 1099-MISC, box 1)		
DIRECT EXPENSES		
Advertising		
Association dues		
Auto and travel (not entered elsewhere)		
Cleaning and maintenance		
Commissions		
Gardening		
Insurance		
Legal and professional fees		
Licenses and permits		
Management fees		
Mortgage interest (paid to banks, etc.)		
Qualified mortgage insurance premiums		
Excess mortgage interest		
Other interest (not entered elsewhere)		
Painting and decorating		
Pest control		
Plumbing and electrical		
Repairs		
Security/Alarm System		
Supplies		
Taxes - real estate		
Taxes - other (not entered elsewhere)		
Telephone		
Utilities		
Wages and salaries		
Other expenses: (List below)		
Total Expenses	\$ -	\$ -
Assets Purchased:		
Description		
Date placed in service		
Cost		

For expenses greater than \$500, please provide an explanation on TAB 8

**PRIVACY NOTICE**

THIRD PARTY SERVICE PROVIDER - We DO NOT use third-party service providers. Confidentiality of your information is maintained under agreements that meet professional and government guidelines, as well as our privacy policy.

BOLEWARE CPA, LLC PRIVACY POLICY - Like all providers of personal financial services, we are now required by law to inform our clients of our policies regarding privacy of client information. We have been and continue to be bound by professional standards of confidentiality that are even more stringent than those required by law. Therefore, we have always protected your right to privacy.

TYPES OF NONPUBLIC PERSONAL INFORMATION WE COLLECT - We collect nonpublic personal information about you that is provided to us by you or obtained by us from third parties with your authorization.

PARTIES TO WHOM WE DISCLOSE INFORMATION - For current and former clients, we do not disclose any nonpublic personal information obtained in the course of our practice except as required or permitted by law. Permitted disclosures include, for instance, providing information to our employees or to unrelated third parties who need to know that information to assist us in providing services to you to complete your tax return. In all such situations, we stress the confidential nature of information being shared.

PROTECTING THE CONFIDENTIALITY AND SECURITY OF CURRENT AND FORMER CLIENTS' INFORMATION - We retain records relating to professional services that we provide so that we are better able to assist you with your professional needs and, in some cases, to comply with professional guidelines. In order to guard your nonpublic personal information, we maintain physical, electronic, and procedural safeguards that comply with professional standards.

Please email if you have any questions because your privacy, our professional reputation, and the ability to provide you with quality professional domestic US and Expatriate tax planning and preparation services are very important to us.