#### 2025 TAX APPOINTMENT & QUESTIONNAIRE (for 2024 Taxes)

Dear che	:11ι,		
Your tax	appointment for	this year is:	
Day	Date	Time	am∖pm

This document digitally available at mckaytax.com (tools & checklists)



My Office	Mail	Portal	Drop Off	
If you are unab	ole to keep this	s appointment da	ate kindly give us as much advance	e notice as
possible so tha	t your time car	n be filled by so	meone else.	

### OPTIONS FOR SHARING YOUR TAX INFORMATION WITH US IN ORDER TO COMPLETE YOUR TAX RETURN

- Use our secure portal to upload your fillable questionnaire and tax documents to complete your taxes remotely. \$10 discount with completed questionnaire. Please contact us before your appointment date if you choose this option.
- Mail your information to me and I can complete your taxes and mail back to you
- After arriving at your scheduled appointment time call us and we will immediately secure your information and complete your taxes in our office with phone call(s) while you wait in your vehicle.
- Meet with us for your appointment if in our office.

# HOW TO ENSURE THAT YOU ARE GETTING THE MAXIMUM POSSIBLE DEDUCTIONS & CREDITS ALLOWED BY LAW:

- Please read and complete the "Information Checklist" (right) and all other parts of the questionnaire that apply before the appointment date.
- Bring a list of all other tax questions to the appointment.

## TO OPT OUT OF RECEIVING TEXT MESSAGES PLEASE CONTACT US TAX PREPARATION FEES:

• Minimum fees including state are \$110 or \$100 if filing through the portal (only with a completed questionnaire). Dependents prep fees are minimum \$40. The average fee is usually between \$130 and \$160 but can vary by the number of extra forms and their complexity. See the complete list of form prices at Mckaytax.com

QuickBooks.

Certified <u>ProAdviso</u>r

Desktop

• You may pay with cash, check, Visa, Master Card or Venmo

If you have any questions or need to change your appointment, please call (801) 731-1857. If I am not in the office then please leave a message and I will return your call promptly. Thanks for your business.

Richard V McKay E.A Rebecka P McKay

McKay Tax and Accounting 4431 S 2300 W Roy, UT 84067

Office 801-731-1857 (fax 731-6942) (text 801-540-5290) http://www.mckaytax.com/E-Mail Rmckay@mckaytax.com



www.Mckaytax.com
RV Software Inc.

#### Please have the following available for our appointment;

- Last years tax return (Only if done by someone else)
- All W-2's, 1099's, k-1's, 1098's
- Records of all other incomes and expenses
- Escrow statements of any property bought, sold or financed
- Health Insurance Form 1095-A if applicable
- State ID (Drivers License)

YES	NO	Unsure	INFORMATION CH	ECKLI	ST				
			Did you have any other sources of income	other than	from the W2s,				
			1099s, K1s, and other income information to	199s, K1s, and other income information that you have presented?					
			At any time during 2024, did you receive, s	any time during 2024, did you receive, sell, send, exchange					
			or otherwise acquire any financial interest in	n any virtu	ıal				
			Haremy?marital status, address, or depende	ents change	ed last year?				
			Did you support anyone other than your own	n children	or does anyone				
			live with you who is not your dependent?						
			Do you have any losses to carry forward fro	m previou	s years?				
			Did you sell any securities or has any become	ne worthle	ess during 2024?				
			Did you pay interest on a mobile home, mot	or home,	or boat that has				
			basic living accommodations?						
			Did you buy, sell, or refinance real estate?	Bring Hud	statements.				
			Did you pay for medical insurance that is no						
			Do you use a portion of your home as an of						
			on an ongoing and exclusive basis (Only if you have a small busines)?						
			Do you anticipate any <b>substantial</b> changes in income, deductions, or						
			tax withholding for the coming year?						
			Did you pay higher education expenses for you or your dependent this						
			year? (Tuition, Fees, Books, and interest).	List names	and amounts on				
			page two, section 6 under "Education Credi	ts". Bring	form 1098-T				
			Does anyone owe you money which has bec	ome a bac	l debt? (There				
			must be true debtor/creditor relationship)		·				
			Last year did you or your spouse purchase health insurar (Obamacare) to help you reduce your monthly health ins						
			Did you make energy efficent improvements to your hon	ne or purchas	sed an Electric Auto?				
			Did you receive alimony?	Amount					
			Did you pay alimon SS #	Amount					
			If you contribute to a retirement plan that w	as not a de	eduction from you				
			wages then enter below. Information for ret	tirement pl	lans deducted				
			from your wages are accounted for in your V	W2					
			ט	Amount					
			Did you contribute to a Roth IRA?	Amount					
			Do you have a health savings account? Brin		099-SA				
			In 2023 did you have interest in a foreign ac	count?					
			Do you use a home equity loan to buy or im please provide principal balances during the		r home? If so				
		1	1 1 1 1						

		IN	COME	2024					DI	EDUC	TIONS	2024			
	Section	n 1: PE	RSONA	AL INFOR	MATION				Section	7· ME	DICAL	EXPE	ISES_		
	CHECK IF NO PER					E DID	YOUR TAXES	Prescription drugs	OCCLIOI	/ . IVIL	DIOAL	LAILI	TOLO		
	nges it is not necessary to							Health insurance pren	niums /Medica	are					
Full Names(bo	oth)	-						Doctors/Dentists							
Address								Hospitals / Emergency	/ Care/X-ray/I	ab					
Home Phone		Work Pho	ne		email			Medical equipment	<u>,                                      </u>						
	Soc. Sec. Number		Occupati	on	Cell Pho	ne	Date of Birth	Glasses / Contacts /H	earing Aids						
You								Medical Miles (22¢)							
Spouse								Reimbursements for a	mounts abov	е		Cafeteria	a Plan Pay	/ments	
	So	ection 2	: DRIVE	ERS LICE					on 8: TAX		ah car f	ees no	t dedu	ctible)	
Vall	License nui	m	State	Issue da	ite	Expir	ration Date	State Tax Paid with 20					ate Resid		
You Spouse					-			Sales Tax on Auto,Tr Auto/Truck county tax					ate Tax La eal Estate		
Operate					<u> </u>			rate/ frack county tax	(IVOT Valid II	Otarry		Other rec	our Lotate		
Section	n 3: DEPENDEN	ITS		PLEASE LIST	TALL BIRTH D	ATES 8	RINCOME				<b>NTERE</b>	ST PA			
Fu	ıll Name	Relation-		Income	Social Sec		Months lived	Mortgage Interest (1st					Investme		<u> </u>
-		Ship	Birth		Numbe	r	in home 2024	Mortgage Interest (1st Mortgage Insurance (1						erest only mproving l	for buying or
								mengage meanance (			1			iipi o viiig i	TOTAL
									Sactio	n 10: (	CONTR	IBLITIC	אוכ		
								Donee	Amount:	11 10. \	Donee	יו טטו	/NO	Amount	
								Donee	Amount:		Donee			Amount	
								Donee	Amount:		Donee			Amount	
								Charitable Miles (14¢)							
								Donated Property Des	cription		•		•		•
	<b>TOTAL HOUSE</b>	HOLD F	RESIDE	NTS IN 20	24			Cost							
								Fair Market Value							
	Section 4: ALL	_ INTER	EST AN	ND DIVIDE	INDS REC	EIVE	D								
Interest Source	е	Amo	ount	Divide	nd Source	QU	Amount	Section 1 <sup>2</sup>	I: EDUCAT	TON CF	REDITS	(must h	nave foi	m 1098	3-T)
								Student Name		_	ge year oph,Jr,Sr	Tuitio	n/ Fees/	books	Loan Interest
				1											
									Section 1						
									d/Dependent	Care Exp		der 13) or			
	Section	. CALE	OE ST	ocke / e	ECURITIE	e		Care Provid	aer		Address		S.S.#	#/E.I.#	Amt. Paid
De	escription				Cost/ Basis		Selling Price								
	Soription	Date At	cquireu	Date Solu	OOSU DUSIS	<u>'</u>	Cenning i rice								
								Employer Provided (	Child Care Pa	vments	(Cafeteria	Plan)			1
								p.:0 }0. 1 10 11 10 11		.,	( - 0.1010110				
									Section	13. EST	IMATED	TAYES	PAID _		
		Soction	6. OTH	ER INCOI	ME			1st Quarter Date	- Section	13. L31	1st Quar			l	
State tay refund	ds received in 2023	Section	0. ОТП		<b>vi⊏</b> d-(unreported	only	1	2nd Quarter Date	+		2nd Qua			-	
	compensation - bring	statement	s	Hobby incor	<u> </u>	Jilly)		3rd Quarter Date	+		3rd Qua				
	/RR Tier 1 - bring state			,		.gamhl	I lina) brina info	4th Quarter Date	+		4th Quar				

### **BUSINESS INCOME and EXPENSES 2024**

Section 14: S	Section 14: SELF EMPLOYED INCOME/EXPENSES						
Product or Service							
Did you actively participate in the	business this	s year		YES		NO	
Did you file a Schedule C for this	business bef	ore		YES	1	NO	
Gross Income				Returns			
Beginning Inventory				Purchases			
Personal Use Items				Ending Inventory			
Advertising			Rent(othe	er)			
Bad Debts			Repairs/M	/laint.	i		
Bank Charges			Supplies		l		
Commissions/fees			Taxes/Lic	ense			
Cleaning			Travel		ī		
Depletion			Meals		i		
Dues/Publications			Medical In	ns.			
Employee Benefits			Utilities				
Insurance			Wages				
Business Interest			Job Credi	it			
Interest(mortgage)			Other:				
Legal/Professional			Other:				
Profit Sharing			Other:		i		
Rent(equip/veh)			Other:		 	_	

Section 15: VEHICLE EXPENSES-EMPLOYEE or SELF EMPLOYED					
	Veh 1 Desc:		Veh 2 Desc:		
Date placed in service					
Total mileage for year					
Business miles for year					
Distance from home to work					
Cost/Fair Market Value on date place in service					
Do you have another personal ve	hicle(Y/N)		YES	NO	
Do you have written evidence of business miles(Y/N)			YES	NO	

Section 16: VEHICLE ACTUAL EXPENSES (Not required for mileage rate)							
	Vehicle 1 Desc:		Vehicle 2 Desc:				
Gas/Oil/Repairs/Wash							
Tires/Batteries etc							
Insurance/License							
Taxes							
Interest							
Lease Payments							
Other:							

Section 18: OFFICE IN THE HOME SELF EMPLOYED							
Office Square Ft Home Square Ft							
Home Interest		Home taxes		Heating			
Electricity		Insurance		Rent			
Office Repairs		Office Maint.		Other			

Section 17: RENTAL INCOME/EXPENSES								
Property	Property Address							
Α								
В								
С								
Did vou or a	member of your family use ar	v of these properties						
-	purposes for the greater of fo	• • •						
	otal days rented at a fair rental	` , •	YES	NO NO				
	vely participate in the operation			NO NO				
Properties Properties	vory participate in the operation	A	В	C				
		^	ь	Ŭ				
Income								
Advertising								
Auto/travel								
Cleaning/Ma								
Commission	IS							
Insurance								
Legal/Profes								
Mortgage Int Other Interes								
	ST							
Repairs								
Supplies								
Taxes								
Electricity								
Heat	Heat							
Water/Garba	ge							
Phone								
Yard Care								
Other:								
ncomo from Partnorchine/S Corn/Ectatos/Truste: Attach K-1's								

Income from Partnerships/S Corp/Estates/Trusts: Attach K-1's

Section 18: TRANSACTIONS NOT REPORTED ON FORM 1099							
Description	Date Acquired	Date Sold	Receipts	Cost			

	Section 19: SECURITIES AND PROPERTY SOLD						
Description	Date Acquired	Date Sold	Receipts	Cost			

Section 20: ASSETS PURCHASED for BUSINESS/RENTAL						
Description(and which business)  Date Purchased  Cost						