

Expert Tax & Accounting

1700 E Elliot Rd Ste 4

Tempe, AZ 85284

480-831-6565

We are excited to have you as a new client.

Enter 2019 information on the Tax Organizer pages provided. If any information does not apply to you or is incorrect, please draw a line through it or make the necessary corrections.

The Client Questionnaire asks about pertinent tax items necessary for preparing the most accurate tax return possible. Please answer all questions and attach a statement when necessary for additional information not provided in the Client Organizer.

You will also need to provide the following information:

- Forms W-2 for wages, salaries and tips.
- All Forms 1099 for interest, dividends, retirement, miscellaneous income, Social Security, state or local refunds, gambling winnings, etc.
- Brokerage statements showing investment transactions for stocks, bonds, etc.
- Schedule K-1 from partnerships, S corporations, estates and trusts.
- Statements supporting educational expenses, deductions or distributions, including any Forms 1098-T, 1098-E, or 1099-Q.
- All Forms 1095-A, 1095-B, and/or 1095-C related to health care coverage or the Premium Tax Credit.
- Statements supporting deductions for mortgage interest, taxes, and charitable contributions (including any Form 1098-C).
- Copies of closing statements regarding the sale or purchase of real property.
- Legal papers for adoption, divorce, or separation involving custody of your dependent children.
- Any tax notices sent to you by the IRS or other taxing authority.
- A copy of your income tax return from last year, if not prepared by this office.

Thank you for the opportunity to serve you.

Sincerely,
Expert Tax & Accounting

Preparer - Enter on Screen Contact

Tax matters person (Indicate which spouse handles tax return related questions) (Blank = Both, T = Taxpayer, S = Spouse) _____

Taxpayer email address _____

Spouse email address _____

	Taxpayer	Spouse
Fax telephone number	_____	_____
Mobile telephone number	_____	_____
Mobile telephone #2 number	_____	_____
Pager number	_____	_____
Other:	_____	_____
Telephone number	_____	_____
Extension	_____	_____
Preferred method of contact:	_____	_____
Email, Work phone, Home phone, Fax, Mobile phone, Mobile phone #2	_____	_____

NOTES/QUESTIONS:

2019 Federal Estimated Tax Payments:

	Date Due	Date Paid	Amount Paid
1st Qtr Payment	4/15	_____	\$ _____
2nd Qtr Payment	6/15	_____	\$ _____
3rd Qtr Payment	9/15	_____	\$ _____
4th Qtr Payment	1/15	_____	\$ _____
Additional Payments:		_____	\$ _____
		_____	\$ _____

2019 State Estimated Tax Payments: Which State? _____

	Date Due	Date Paid	Amount Paid
1st Qtr Payment	4/15	_____	\$ _____
2nd Qtr Payment	6/15	_____	\$ _____
3rd Qtr Payment	9/15	_____	\$ _____
4th Qtr Payment	1/15	_____	\$ _____
Additional Payments:		_____	\$ _____
		_____	\$ _____

1 Preparer use only

	2019 Information	Prior Year Information
Taxpayer/Spouse/Joint (T, S, J)	_____	
Employer identification number	_____	
Business name	_____	
Principal business/profession	<u>WHAT DO YOU DO?</u>	
Business code	_____	
Business address, if different from home address on Organizer Form ID: 1040		
Address	_____	
City/State/Zip	_____	
Accounting method (1 = Cash, 2 = Accrual, 3 = Other)	_____	
If other:	_____	
Inventory method (1 = Cost, 2 = LCM, 3 = Other)	_____	
If other enter explanation:	_____	

Enter an explanation if there was a change in determining your inventory:		

Did you "materially participate" in this business? (Y, N)	_____	
If not, number of hours you did significantly participate	_____	
Mark if you began or acquired this business in 2019	_____	
Did you make any payments in 2019 that require you to file Form(s) 1099? (Y, N)	_____	
If "Yes", did you or will you file all required Forms 1099? (Y, N)	_____	
Mark if this business is considered related to qualified services as a minister or religious worker	_____	
Did you receive wages as a statutory employee or as a minister? (1 = Statutory employee, 2 = Minister)	_____	
Medical insurance premiums paid by this activity	+ _____	
Long-term care premiums paid by this activity	+ _____	
Amount of wages received as a statutory employee	+ _____	

Business Income

	2019 Information	Prior Year Information
Gross receipts and sales		
_____	+ _____	
_____	+ _____	
_____	+ _____	
_____	+ _____	
Returns and allowances	+ _____	
Other income:		
_____	+ _____	
_____	+ _____	
_____	+ _____	

Cost of Goods Sold

	2019 Information	Prior Year Information
Beginning inventory	+ _____	
Purchases	+ _____	
Labor:		
_____	+ _____	
_____	+ _____	
Materials	+ _____	
Other costs:		
_____	+ _____	
_____	+ _____	
_____	+ _____	
Ending inventory	+ _____	

T/S/J	2019 Information	Prior Year Information
Medical and dental expenses, such as: Doctors, Dentists, Hospital/nursing home fees, Lab/x-ray fees, Medical supplies, Hearing aids, Eyeglasses/contact lenses, and Insurance reimbursements received	+	
_____	+	
_____	+	
_____	+	
_____	+	
_____	+	
Medical insurance premiums you paid: <small>Do not include pre-tax amounts paid by an employer-sponsored plan or amounts entered elsewhere, such as amounts paid for your self-employed business (Sch C, Sch F, Sch K-1, etc.) or Medicare premiums entered on Form SSA-1099.</small>	+	
_____	+	
_____	+	
_____	+	
Long-term care premiums you paid: <small>Do not include pre-tax amounts paid by an employer-sponsored plan or amounts entered elsewhere, such as amounts paid for your self-employed business (Sch C, Sch F, Sch K-1, etc.)</small>	+	
_____	+	
Prescription medicines and drugs:	+	
_____	+	
_____	+	
Miles driven for medical items	_____	

Schedule A - Tax Expenses

T/S/J	2019 Information	Prior Year Information
State/local income taxes paid:	+	
_____	+	
_____	+	
_____	+	
_____	+	
2018 state and local income taxes paid in 2019:	+	
_____	+	
_____	+	
Real estate taxes paid:	+	
_____	+	
_____	+	
Personal property taxes:	+	
_____	+	
Other taxes, such as: foreign taxes and State disability taxes	+	
_____	+	
_____	+	
Sales tax paid on major purchases:	+	
_____	+	
Sales tax paid on actual expenses:	+	
_____	+	
_____	+	
_____	+	

T/S/J	2019 Information	Prior Year Information
Contributions made by cash or check (including out-of-pocket expenses)		
Any contribution of cash, a check or other monetary gift requires a written record of the contribution in order to claim the contribution on your return.		
Individual contributions of \$250 or more must be accompanied by a written acknowledgment from the charity to claim the contribution on your return.		
— _____	+ _____	
— _____	+ _____	
— _____	+ _____	
— _____	+ _____	
— _____	+ _____	
— _____	+ _____	
— _____	+ _____	
— _____	+ _____	
— _____	+ _____	
— _____	+ _____	
— _____	+ _____	
— _____	+ _____	
— _____	+ _____	
— _____	+ _____	
— _____	+ _____	
— _____	+ _____	
— Volunteer miles driven _____	_____	
— Noncash items, such as: Goodwill/Salvation Army/clothing/household goods		
— _____	+ _____	
— _____	+ _____	
— _____	+ _____	
— _____	+ _____	
— _____	+ _____	
— _____	+ _____	
— _____	+ _____	
— _____	+ _____	
— _____	+ _____	
— _____	+ _____	

**Mark if qualifying disaster relief contribution made in 2018 for relief efforts in the California wildfire disaster area

Miscellaneous Deductions

T/S/J	2019 Information	Prior Year Information
Other expenses, not subject to the 2% AGI limit:		
— _____	+ _____	
— _____	+ _____	
— _____	+ _____	
— _____	+ _____	
— _____	+ _____	
— _____	+ _____	
— _____	+ _____	
— _____	+ _____	
— _____	+ _____	
— _____	+ _____	
Gambling losses: (Enter only if you have gambling income)		
— _____	+ _____	
— _____	+ _____	
— _____	+ _____	
— _____	+ _____	

NOTES/QUESTIONS:

Questions

Please check the appropriate box and include all necessary details and documentation.

	Yes	No
Personal Information		
Did your address, marital status, dependents, etc. change during the year?	<input type="checkbox"/>	<input type="checkbox"/>
Did you change a bank accounts used for direct deposit or payments since last year?	<input type="checkbox"/>	<input type="checkbox"/>
Did you receive an Identity Protection PIN (IP PIN) from the IRS or have you been a victim of identity theft? If yes, attach the IRS letter.	<input type="checkbox"/>	<input type="checkbox"/>
Did you provide over half the support for any other person(s) other than your dependent children during the year?	<input type="checkbox"/>	<input type="checkbox"/>
Did you pay for child care while working, looking for work, or as a full-time student? <input type="checkbox"/>		<input type="checkbox"/>
Did you pay any expenses related to the adoption of a child during the year?	<input type="checkbox"/>	<input type="checkbox"/>
General Information		
Did you start/buy/sell a new business, rental property, etc during the year?	<input type="checkbox"/>	<input type="checkbox"/>
Did you purchase or sell a principal residence during the year?	<input type="checkbox"/>	<input type="checkbox"/>
Did you lend money with the understanding of repayment and this year it became totally uncollectable?	<input type="checkbox"/>	<input type="checkbox"/>
Did you purchase a qualified plug-in electric drive vehicle or qualified fuel cell vehicle this year?	<input type="checkbox"/>	<input type="checkbox"/>
Do you expect a large fluctuation in income, deductions, or withholding next year?	<input type="checkbox"/>	<input type="checkbox"/>
Did you retire or change jobs this year?	<input type="checkbox"/>	<input type="checkbox"/>
Did you have any sales of or other exchange transactions using virtual currencies?	<input type="checkbox"/>	<input type="checkbox"/>
Retirement Information		
Are you an active participant in a pension or retirement plan?	<input type="checkbox"/>	<input type="checkbox"/>
Did you make any withdrawals from an IRA or other qualified retirement plan?	<input type="checkbox"/>	<input type="checkbox"/>
Other than your employer's 401(k) did you make any contributions to an IRA, etc.?	<input type="checkbox"/>	<input type="checkbox"/>
Education Information		
Did you have any educational expenses during the year on behalf of yourself, your spouse, or a dependent? If yes, attach any Form(s) 1098-T and receipts for qualified tuition and related expenses	<input type="checkbox"/>	<input type="checkbox"/>
Did you make any contributions to an education savings or 529 Plan account?	<input type="checkbox"/>	<input type="checkbox"/>
Did you pay any student loan interest this year?	<input type="checkbox"/>	<input type="checkbox"/>
Would you like a worksheet to aid in the completion of a FAFSA form?	<input type="checkbox"/>	<input type="checkbox"/>
Itemized Deduction Information		
Did you pay any mortgage interest on an existing home loan? Attach Form(s) 1098.	<input type="checkbox"/>	<input type="checkbox"/>
Did you make any major purchases during the year (cars, boats, etc.)?	<input type="checkbox"/>	<input type="checkbox"/>
Did you utilize an area of your home for business purposes?	<input type="checkbox"/>	<input type="checkbox"/>
Did you make energy efficient improvements to your main home this year?	<input type="checkbox"/>	<input type="checkbox"/>
Miscellaneous Information		
Did you make gifts of more than \$15,000 to any individual?	<input type="checkbox"/>	<input type="checkbox"/>
Do you have any foreign financial accounts, foreign financial assets, or hold interest in a foreign country or foreign entity?	<input type="checkbox"/>	<input type="checkbox"/>
Did you receive correspondence from the State or the IRS? If yes, explain:	<input type="checkbox"/>	<input type="checkbox"/>

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Dear Client:

This letter is to confirm and specify the terms of our engagement with you and to clarify the nature and extent of the services we will provide. In order to ensure an understanding of our mutual responsibilities, we ask all clients for whom returns are prepared to confirm the following arrangements.

We will prepare your 2019 federal and state income tax returns from information which you will furnish to us. We will not audit or otherwise verify the data you submit, although it may be necessary to ask you for clarification of some of the information. We will furnish you with questionnaires and worksheets to guide you in gathering the necessary information. Your use of such forms will assist in keeping the fee to a minimum.

It is your responsibility to provide all the information required for the preparation of complete and accurate returns. You should retain all the documents, cancelled checks and other data that form the basis of income and deductions. These may be necessary to prove the accuracy and completeness of the returns to a taxing authority. You have the final responsibility for the income tax returns and, therefore, you should review them carefully before you sign them.

Our work in connection with the preparation of your income tax returns does not include any procedures designed to discover defalcations and/or irregularities, should any exist. We will render such accounting and bookkeeping assistance as determined to be necessary for preparation of the income tax returns.

The law provides various penalties that may be imposed when taxpayers understate their tax liability. If you would like information on the amount or the circumstances of these penalties, please contact us.

Your returns may be selected for review by the taxing authorities. Any proposed adjustments by the examining agent are subject to certain rights of appeal. In the event of such government tax examination, we will be available upon request to represent you and will render additional invoices for the time and expenses incurred.

Our fee for these services will be based upon the amount of time required at standard billing rates plus out-of-pocket expenses. All invoices are due and payable upon presentation.

If the foregoing fairly sets forth your understanding, please sign the enclosed copy of this letter in the space indicated and return it to our office. However, if there are other tax returns you expect us to prepare, please inform us by noting so at the end of the return copy of this letter.

We want to express our appreciation for this opportunity to work with you.

Very truly yours,
Expert Tax & Accounting

Accepted By: _____

Name: _____

Date: _____