

## 2017 Summary Organizer Personal and Dependent Information

### Personal Information

	Name	SSN	Date of birth	Healthcare coverage ALL year
Taxpayer				
Spouse				
Street address, city, state, and ZIP				
	Occupation	Daytime phone	Evening phone	Cell phone
Taxpayer				
Spouse				
Taxpayer email				
Spouse email				

### Marital Status at end of 2017

- Married  
 Married filing separately  
 Single  
 Widow(er) If spouse deceased in 2017 enter the date of death \_\_\_\_\_

### Taxpayer

- Yes  No  
 Yes  No  
 Yes  No  
 Yes  No

### Spouse

- Yes  No Are you blind?  
 Yes  No Are you disabled?  
 Yes  No Are you a full-time student?  
 Yes  No Do you want \$3 to go to the Presidential Election Campaign Fund?

### Dependent Information

First and last name	SSN	Relationship	Months in home	Date of birth	Disabled	Full-time student	Healthcare coverage ALL year

List dependents required to file a return \_\_\_\_\_

### Estimates

	Federal		Resident state		Resident city	
	Date paid	Amount	Date paid	Amount	Date paid	Amount
Overpayment applied from 2016	_____	_____	_____	_____	_____	_____
First quarter	_____	_____	_____	_____	_____	_____
Second quarter	_____	_____	_____	_____	_____	_____
Third quarter	_____	_____	_____	_____	_____	_____
Fourth quarter	_____	_____	_____	_____	_____	_____
Additional payments	_____	_____	_____	_____	_____	_____

### Appointment Information & Notes

Your 2017 appointment is scheduled for \_\_\_\_\_

#### Notes

## Miscellaneous Information

Name:

SSN:

### Personal Information

**Yes**   **No**

- Did your marital status change during the year?

If "Yes," explain \_\_\_\_\_

- Can you or your spouse be claimed as a dependent by someone else?

- Did your address change during the year?

Provide proof of identity to be eligible to e-file your tax return (driver's license or state-issued photo ID)

### Dependent Information

- Did you have any changes in dependents during the year?

If "Yes," explain \_\_\_\_\_

- Can another person qualify to claim any dependents?

- Did you have any childcare expenses during the year?

- Did you have any adoption expenses during the year?

- Did you have any children under age 19 or a full-time student under age 24 with more than \$2100 of unearned income?

Provide documentation for proof of dependent related credits (school records, medical records, daycare records, etc.)

### Health Care Information

- Did any member of your household **NOT** have healthcare coverage for the entire year?

Provide copies of all Forms 1095-A, 1095-B, 1095-C for **ALL** members of your household.

If any member of your household received an exemption from the marketplace, provide the Exemption Certificate Number (ECN).

- Did you receive any distributions from a Health Savings Account (HSA), Archer MSA, or Medicare Advantage MSA during the year?

### Income, Purchases, Sales, and Debt Information

- Did you have a financial interest in or signature authority over a financial account or asset located in a foreign country?

- Did you receive a distribution from, or were you a grantor of, or transferor to, a foreign trust?

- Did you have any income from, or pay taxes to, a foreign country?

- Did you own property in a foreign country?

- Did you receive any tips not reported to your employer?

- Did you receive any disability income during the year?

- Did you cash any U.S. savings bonds during the year?

- Did you receive any other income not provided with this organizer?

If "Yes," explain \_\_\_\_\_

- Did you start a new business or purchase any rental property during the year?

- Did you sell an existing business, rental property, or other property during the year?

- Did you purchase any business assets or convert any assets to business use?

If "Yes," provide the cost of the asset, the date it was placed in service, and business use percentage.

- Did you purchase any gasoline, diesel, or special fuels for non-highway business use?

- Did you buy or sell any stocks, bonds, or other investments during the year?

- Did you sell a principal residence during the year?

If "Yes," provide closing documentation for the purchase and sale of the home

- Did you foreclose or abandon a principal residence or real property during the year?

- Did you refinance your principal home or second home or take out a home equity loan during the year?

If "Yes," provide all escrow, closing, and other pertinent documentation and information.

- Did you receive any principal or interest during this year from property sold in prior years?

- Did you rent out your home or use it for business?

- Did you sell, exchange, or purchase any real estate during the year?

- Did you acquire a new or additional interest in a partnership or S corporation?

- Did you have any debts canceled or forgiven this year?

- Does anyone owe you money that has become uncollectible?

- Did you purchase a new hybrid, alternative motor, or electric motor energy-efficient vehicle during the year?

If "Yes," provide the year, make, model, VIN, and date the vehicle was placed in service.

### Itemized Deduction Information

- Did you pay out-of-pocket medical or dental expenses (premiums, prescriptions, mileage, etc.) during the year?

- Did you pay any long-term care premiums for yourself, your spouse, or a dependent during the year?

- Did you receive any state or local income tax refunds from prior years?

## Miscellaneous Information

Name:

SSN:

## Itemized Deduction Information (continued)

- | Yes                      | No                       |   |
|--------------------------|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | Did you make any major purchases (vehicle, boat, etc.) during the year?   |
| <input type="checkbox"/> | <input type="checkbox"/> | Did you pay any real estate property taxes or personal taxes during the year?                                       |
| <input type="checkbox"/> | <input type="checkbox"/> | Did you pay mortgage interest during the year?  |
| <input type="checkbox"/> | <input type="checkbox"/> | Did you make cash donations to charity during the year?   |
| <input type="checkbox"/> | <input type="checkbox"/> | Did you make noncash donations to charity (clothes, furniture, etc.) during the year?                               |
| <input type="checkbox"/> | <input type="checkbox"/> | Did you donate a boat or vehicle during the year?<br>If "Yes," attach Form 1098-C.                                  |
| <input type="checkbox"/> | <input type="checkbox"/> | Did you have any job-related expenses that were not reimbursed by your employer (uniforms, safety equipment, etc.)? |
| <input type="checkbox"/> | <input type="checkbox"/> | Did you use your vehicle on the job other than for commuting to work?   |
| <input type="checkbox"/> | <input type="checkbox"/> | Did you work out of town at any time during the year?   |
| <input type="checkbox"/> | <input type="checkbox"/> | Did you have gambling losses during the year?   |

## Retirement Information

- Did you receive any payments from a pension, profit sharing, or 401(k) plan during the year?
- Did you make any withdrawals from or contributions to an IRA, Roth, Keogh, SIMPLE, SEP, 401(k), myRA, or other qualified retirement plan during the year?
- Did you receive any Social Security benefits during the year?

## Education Information

- Did you pay tuition expenses that were required for attending college, university, or vocational school for yourself, your spouse, or a dependent during the year (even if classes were attended in another year)?
- Did anyone in your household attend a post-secondary school during the year?
- Did you make a contribution to or receive a distribution from an Education Savings Account or Qualified Tuition Program during the year?
- Did you pay student loan interest for yourself, your spouse, or your dependent(s) during the year?

## Miscellaneous Information

- Did you incur a loss due to damaged or stolen property?  
If "Yes," provide the incident date, value of the property, and amount of insurance reimbursements.
- Did you pay wages to any household employees (babysitter, nanny, housekeeper, etc.)?
- Did you make any gifts to any one person in excess of \$14,000 during the year?  
If "Yes," are you splitting the gift with your spouse? \_\_\_\_\_
- Did you incur moving expenses due to a change in employment?
- Did you make any energy-efficient improvements to your main home during the year?
- Are you a business owner who paid health insurance premiums for your employees during the year?
- Did you apply an overpayment of your 2016 taxes to your 2017 estimated taxes?
- If you have an overpayment of 2017 taxes, do you want the refund applied to your 2018 estimated taxes?
- Did you make any estimated payments toward your 2017 taxes?
- Do you want to have any refund or balance due directly deposited or withdrawn?  
If "Yes," provide a canceled checking or savings slip.
- Did you receive any notices from the IRS or state taxing authority?  
If "Yes," explain \_\_\_\_\_
- May the IRS discuss your tax return with your preparer?
- Would you like a copy of your tax return emailed to you instead of receiving a printed copy?

## Preparer Notes

## Miscellaneous Notes



# Richard Earl EA, Inc.

2215 Jordan Avenue

Juneau, AK 99801

rich@richard-earl.com

Phone: (907)-789-9898 Fax: (888)761-8613

## Engagement Letter

To: Richard Earl EA, Inc.

I have engaged your firm to prepare my individual (1040) Federal or State income tax return for the year ending December 31, 2017. I understand that it is my responsibility to provide you with all of the information required to complete my tax return. In that regard I state that, to the best of my knowledge and belief:

1. I have provided true, correct, and complete information regarding my income as listed on the attached Forms W-2, 1099 and/or attached written summaries. I understand that it is my responsibility to provide all information necessary to complete the returns. I will retain for four years all the documents, receipts, cancelled checks, and other records required substantiating the items of income and expense claimed on my return.
2. I have provided true, correct, and complete information regarding amounts I have presented to you to claim as tax deductions, and I have maintained written documentation supporting all amounts, including logbooks and receipts. I understand that if a question arises regarding the interpretation of tax law, and a conflict exists between the tax authorities' interpretation of the law, and other supportable positions, that you will use your professional judgment in resolving the issues.
3. I understand that because taxing authorities may examine (audit) the returns, that documentation should be retained to support the information provided to you, especially business travel and entertainment deductions, business use percentage of autos and other business assets and barter activities, and that penalties may be imposed on returns that are late, underpaid, or incorrect.
4. I understand that you will not audit or otherwise verify any information, that you may require clarification or additional information, that you are responsible for disallowed deductions, or the inclusion of additional unreported income or any resulting taxes, penalties or interest.
5. ***I understand that I will be charged an additional fee if you are asked to assist or represent me in a tax audit, examination, or inquiry.*** I understand that, in the event of preparer error, I am responsible for additional tax that may be due, but the extent of your responsibility is to pay for resulting penalties, up to, but not in addition to, \$1,000.00 that the IRS or the above stated revenue department may assess.
6. I will contact you immediately if I discover additional information that will lead to a change in my return, or within 30 days from the date on any letters from the IRS or state taxing authorities. Failure to do so will result in my forfeiture of any assistance regarding penalties.
7. I understand that your policy is to put all tax advice in writing, and that I will not rely upon any unwritten advice because it may be tentative, incomplete, or not fully reviewed.
8. *I understand that your bill will be due and payable upon completion of these returns, and that additional service will not be performed until the bill for these services is paid in full. I understand that your bill be based upon a schedule of tax forms prepared.*
9. I understand that you will not file any federal, state, or local tax extensions without my specific written request to do so.
10. If there are other services or tax returns that I expect you to prepare, such as estate, gift, sales, fiduciary, property, or other states or cities, I will note them at the bottom of this letter.
11. ***I understand that I will be charged \$125.00 per hour as a consultation fee if I decide not file my tax return through your firm after the work has been started.***

Client Signature \_\_\_\_\_ Date \_\_\_\_\_

Printed Name \_\_\_\_\_

Spouse Signature \_\_\_\_\_ Date \_\_\_\_\_

Printed Name \_\_\_\_\_

## Client Questionnaire 2017

Name: \_\_\_\_\_ SSN: \_\_\_\_\_

### Sharing Economy

Yes No

- ( ) ( ) Did you receive income or incur expenses associated with car sharing (e.g., Lyft or Uber)? If yes, attach Form 1099-MISC and Form 1099-K.
- ( ) ( ) Did you receive income or incur expenses associated with freelancing (e.g., Upwork or TaskRabbit)? If yes, attach Form 1099-K or Form W-2.
- ( ) ( ) Did you receive income or incur expenses associated with fashion sharing (e.g., Poshmark or thredUP)? If yes, provide documentation.
- ( ) ( ) Did you receive income or incur expenses associated with crowdfunding (e.g., Kickstarter or Indiegogo)? If yes, attach Form 1099-K.
- ( ) ( ) Did you receive income or incur expenses associated with a short-term rental (e.g., Airbnb or HomeAway)? If yes, provide documentation.

### Additional Questions

Yes No

- ( ) ( ) Did you receive income or incur expenses associated with a fantasy football league? If yes, provide documentation.
- ( ) ( ) Did you incur casualty losses due to a federally recognized natural disaster?
- ( ) ( ) Did you anticipate your income or withholdings to be different for 2018?