General Engagement Letter for Individual Tax Preparation



Welcome to 2024!

On the following pages you will find your Engagement Letter as well as an Organizer and Due Diligence form to help make the tax return process as easy as possible.

Due to increase requirements for Due Diligence of information verification you may be asked for additional information that we may not have asked for in the past. We apologize for any inconvenience, but it is important for the purposes of Identity Protection that we now need to request this additional information, the fines for not completing our Due Diligence requirements are hefty and we are wanting to avoid any issues for the future.

Please do not hesitate to contact us with any concerns or questions - we look forward to working with you to fulfill your federal and state filing requirements.

For your convenience you can schedule an appointment either in person, Zoom or phone, with these calendar links:

| Rene' Hayes, EA | https://calendly.com/rene-busybookkeeper |
|------------------|---|
| Kari Reyes, EA | https://calendly.com/kari-busybookkeeper |
| Hannah Holmberg | https://calendly.com/hannah-busybookkeeper |
| Valeria Bond, EA | https://calendly.com/valeria-busybookkeeper |

Privacy Policy. The nature of our work requires us to collect certain nonpublic personal information about you from various sources. We collect financial and personal information from applications, work-sheets, reporting statements, and other forms, as well as interviews and conversations with our clients and affiliates. We may also review banking and credit card information about our clients in the perfor-mance of receipt of payment. Under our policy, all information we obtain about you will be provided by you or obtained with your permission.

Our firm has procedures and policies in place to protect your confidential information. We restrict access to your confidential information to those within our firm who need to know in order to provide you with services. We will not disclose your personal information to any third party without your express written permission, except where required by law. We maintain physical, electronic, and procedural safeguards in compliance with federal regulations that protect your personal information from unau-thorized access. Please contact us with any questions regarding our privacy policy.



This letter is to inform you, the taxpayer, of the services we will provide you, and the responsibilities you have for preparation of your tax return.

Tax Return Preparation Services

- We will prepare your 2023 Form 1040, *U.S. Individual Income Tax Return*, and applicable state tax return(s)based on information you provide. Services for preparation of your returns do not include auditing or verification of information provided by you.
- This engagement does not include any audit or examination of your books or records. In the event your return is audited, you will be responsible for verifying the items reported.
- Assisting you with your compliance with the Corporate Transparency Act, including beneficial owner-ship information reporting, is not within the scope of this engagement. Please do let us know if you have not filed this MANDATORY filing requirement as we can file this for you under a separate engagement.
- The tax return preparation fee does not include bookkeeping. Additional fees apply for these services.
- Fees charged for tax return preparation do not include audit representation or preparing materials to respond to correspondence from taxing authorities.
- Preparation fees do cover limited assistance and consultation during the year.
- The engagement to prepare your 2023 tax returns terminates upon delivery of your completed returns and original documents to you. Please store your supporting documents and your tax returns in a secure place for at least seven years. You may be assessed a fee if you request a duplicate copy in the future.

Taxpayer Responsibilities

- You agree to provide us all income and deductible expense information. If you receive additional information after we begin working on your return, you will contact us immediately to ensure your completed tax returns contain all relevant information.
- You affirm that all expenses or other deduction amounts are accurate and that you have all required supporting written records. In some cases, we will ask to review your documentation.
- You must be able to provide written records of all items included on your return if audited by either the IRS or state tax authority. We can provide guidance concerning what evidence is acceptable.
- You must review the returns carefully before signing to make sure the information is correct.
- Fees must be paid before your tax returns are delivered to you or filed for you. If you terminate this engagement before completion, you agree to pay a fee for work completed.
- A retainer of \$250 is required for scheduling of the preparation of your returns.
- Payment can be made by contacting the office or https://paypal.me/busybookkeeper

Signatures. By signing below, you acknowledge that you have read, understand, and accept your obligations and responsibilities and that you understand our responsibilities in preparing your tax returns as explained above. For a joint return, both taxpayers must sign.

Taxpayer

Spouse

Date

| Taxpayer | | | | | | Tax ID # * | | | |
|---|--------------------|---------|--------------------|----------|---------------|--|------------------|--------------|---------------------|
| First Name | M.I. | Last | Name | Emai | 1 | I | IP PIN | | |
| Occupation | | Date of | of birth | | | Are you nev | v to our firm | ? Ye | es No |
| Address | | City | City | | | State | Zip | | |
| County | | Prima | ry phone | | | Secondary p | hone | | |
| Driver's License No. | | | | State | Issue | Date | Exp. Dat | 2 | |
| Spouse | | | | | | Tax ID # * | | | |
| First Name | M.I. | Last | Name | Emai | 1 | 1 | IP PIN | | |
| Occupation | | Date o | of birth | | | Are you nev | v to our firm | ? Ye | es No |
| Address (If different from Taxpayer) | | City | | | | State | Zip | | |
| County | | Prima | ry phone | | | Secondary p | hone | | |
| Driver's License No. | | | | State | Issue | Date | Exp. Dat | 2 | |
| If you moved during 2023, enter your | previous address | 3. | | | | Date of mov | 'e | | |
| Were you divorced or separated durin <i>Note:</i> Individuals in registered domes <i>Notices:</i> Have you received any notic | tic partnerships (| RDPs) | and civil unior | ns are r | not consider | | 2 | No rposes | |
| Names of dependent children Child's full name | Tax ID # | ÷ * | IP PIN | | Date of birth | Months lived home in 202. | | | College student? |
| Did any of the children have unearned Is it anticipated that a different taxpay | | | • | | 5 | of the children ha ent for tax year 2 | | ty? No | Yes No |
| Other dependents or people who liv | ed with you | | | | | | | | |
| Name | <i>Tax ID</i> # * | | IP PIN | Da | te of birth | Months lived in home in 2023 | Relationshi | <i>в</i> . | Іпсоте |
| | | | | | | | | | |
| Bank information: Use for Direct d | eposit of refund | Direc | ct debit of bala | nce du | e Name of | bank | | | |
| Checking Savings Routing tra | - | | | | Account nu | | | | |
| Ask your tax preparer for information | | / | | | | 0 1 | | | |
| *A Tax ID # is either a Social Security Numb | er (SSN), adoption | taxpaye | r identification r | number | (ATIN), or a | n individual taxpay | er identificatio | on num | ber (ITIN). |

Questions — All Taxpayers (Provide related statements or other documentation.) "You" refers to both taxpayer and spouse—ask your preparer if unsure about a question. Yes No Are either you or your spouse legally blind? Yes No Did you pay or receive alimony in 2023? Recipient's SSN Date of divorce or separation Paid Received \$ Did you purchase health insurance through a public exchange/marketplace? (Provide Form 1095-A.) Yes No Yes No Will there be any significant changes in income or deductions next year, such as retirement? LIFESTYLE & TAXES Yes Did you pay anyone for domestic services (e.g., nanny, housekeeper, cook, caretaker) in your home? No Did you purchase a new or used energy-efficient, hybrid, or electric car, truck, or van? Yes No Are you involved in bankruptcy, foreclosure, repossession, or had any debt (including credit cards) cancelled? Yes No State of residency Yes No Are you a member of the military? Yes No Were you a citizen of or lived in a foreign country? Foreign country Do you own or have financial interest in a foreign bank or financial account? Maximum value \$ Yes No Yes No Would you like to allow your tax preparer or another person to discuss your return with the IRS? Designee's name Phone number PIN (any five digits) Were any children born or adopted in 2023? (Provide statement for other expenses.) Yes No Yes No Were any children attending college? (Provide Form 1098-T and Form 1098-E.) Year in college Paid by you: Tuition \$ Books \$ Student loan interest \$ Paid by student: Tuition \$ Books \$ Student loan interest \$ CHILDREN & EDUCATION Yes Did you pay any tuition for a private school for a dependent or take classes yourself? No Student Amount paid \$ Name and address of school Yes No Did you pay for child or dependent care so you could work or go to school? (Provide statement if applicable) Name of provider EIN or SSN Address Amount paid \$ Do you have any children who have unearned income of \$1,250 or more? No Yes Yes No Did you make any contributions to a 529 plan in 2023? Yes No Did you, or will you, contribute any money to an IRA for 2023? Traditional IRA Roth IRA Yes Did you roll over any amounts from a retirement account in 2023? No Yes No Did you sell or transfer any stock or sell rental or investment property? INVESTMENTS Did you receive any income from an installment sale? Yes No Yes Did you have any investments become worthless or were you a victim of investment theft in 2023? No Yes No Were you granted, or did you exercise, any employee stock options during 2023? Did you (a) receive (as a reward, award, or payment for property or services); or (b) sell, exchange, or otherwise dispose Yes No of a digital asset (or a financial interest in a digital asset)? (Digital assets include cryptocurrencies, NFTs, and stablecoins) Yes Did you, or do you plan to, contribute money before April 15, 2024 to an HSA for 2023? If yes, provide details. No DEDUCTIONS Yes No Did you pay any interest on a loan for a boat or RV that has living quarters? If yes, provide details. Yes No Did you pay sales taxes on a major purchase in 2023, such as a vehicle, boat, or home? Did you make any charitable contributions in 2023? If yes, provide details Yes No Yes No Did you work from a home office or use your car for your business? BUSINESS Did you receive income from a sharing/gig economy activity (e.g. Airbnb, Uber, etc.)? Yes No Do you own a business or an interest in a partnership, corporation, LLC, farming activities, or other venture? Yes No Yes No Did you purchase or sell a main home during the year? If yes, provide closing statement. Yes No If you sold a home, did you claim the First-Time Homebuyer Credit when it was purchased? If yes, provide details. HOME Yes No Did you refinance a mortgage or take a home equity loan? If yes, provide closing statement. Did you use any mortgage loan proceeds for purposes other than to buy, build, or substantially improve your home? Yes No Yes No Did you make any new energy-efficient improvements to your home? If yes, provide details. Part-year resident State information Nonresident School district Full-year resident States of residence during 2023 and dates Do you rent or own your home? Rent Own

Total rent paid \$

Includes heat?

Yes

No

Income Worksheet

Provide to your preparer all Forms W-2, 1099-INT, 1099-DIV, 1099-R, 1099-MISC, 1099-NEC, 1099-K, and other income reporting statements. Do not list dollar amounts for the following forms. Your preparer will report the appropriate amounts.

| | e "T" for taxpayer, "S" for spouse, "J" for joi | nt | | | Pro | vide additional statemen | its if mo | ore room is needed | |
|---|--|-------------|-----------|------------|----------------|--------------------------|-----------|--------------------|--|
| | W-2—Wage and Tax Statement | | | 1 | 1 | | | | |
| T/S | Employer name | | | T/S | Employer name | | | | |
| | 1) | | | | 4) | | | | |
| | 2) | | | | 5) | | | | |
| | 3) | | | | 6) | | | | |
| Forms | 1099-INT — Interest Income | | | | | | | | |
| T/S/J | Name of issuer | | | T/S/J | Name of | fissuer | | | |
| | 1) | | | | 4) | | | | |
| | 2) | | | | 5) | | | | |
| | 3) | | | | 6) | | | | |
| Forms | 1099-DIV—Dividends and Distributions | | | | | | | | |
| T/S/J | Name of issuer | | | T/S/J | Name of | fissuer | | | |
| | 1) | | | | 4) | | | | |
| | 2) | | | | 5) | | | | |
| | 3) | | | | 6) | | | | |
| Forms | 1099-R—Distributions From Pensions, Ann | uities, Ret | irement | or Profit | -Sharing 1 | Plans, IRAs, Insurance C | ontract | s, Etc. | |
| T/S | Name of issuer | | | T/S | Name of issuer | | | | |
| | 1) | | | | 4) | | | | |
| | 2) | | | | 5) | | | | |
| | 3) | | | | 6) | | | | |
| If the d | istribution is before age 59½, give a reason to | o determin | e if an e | exception | to penalty | v applies. | | | |
| Tax-Ex | empt Interest (such as municipal bonds—in | clude state | ement) | | | | | | |
| Payer | | \$ | | Payer | | | | \$ | |
| Other I | ncome | | | - | | | | 1 | |
| State ta | x refund | | \$ | | | Unreported tips | \$ | | |
| Unemp | loyment compensation | | \$ | | | Other \$ | | | |
| Social Security (taxpayer)—provide SSA-1099 or RRB-1099 | | \$ | | | | \$ | | | |
| Social Security (spouse)—provide SSA-1099 or RRB-1099 | | \$ | | | | \$ | | | |
| Gambli | ng income—provide Form W-2G | | \$ | | | | \$ | | |
| Busines | ss income (see Sole Proprietorship Tax Organiz | er) | | | | Stock sales | See " | Sales and Exchange | |
| | income (see <i>Rental Property Tax Organizer</i>) | | | | | Sale of other property | | sheet" below. | |
| Sale | s and Exchanges Worksh | eet | | | | | | | |
| | e information about sales of stock, real estate | | | u alon a u | th E | 1000 P 1000 C | | the statements | |

Provide information about sales of stock, real estate, or other property, along with Forms 1099-B, 1099-S, or other supporting statements.

| Description of property | Purchase date | Cost/basis | Sale date | Sale price |
|-------------------------|---------------|------------|-----------|------------|
| | | \$ | | \$ |
| | | \$ | | \$ |
| | | \$ | | \$ |

Notes:

• When stock is sold, you will usually receive Form 1099-B, *Proceeds From Broker and Barter Exchange Transactions*, reporting the proceeds from the sale. However, your statement will not always provide the cost/basis information necessary to compute gain or loss. If the statement does not contain the cost/basis information, you must provide it. You may need to contact your broker for questions about cost/basis and purchase dates of your stock accounts.

• Often, "transfers" of stock or mutual funds within a brokerage account are actually sales of one type of stock and purchase of another. Even if you did not receive any cash from the transaction, you may have taxable gain or loss.

• If your stock dividends are automatically reinvested, the dividends will be taxable even though you did not receive any cash. The transaction is treated as if you had received cash and purchased additional stock. When the stock is sold, the amount reinvested over the years is taken into account. You may need to contact your broker for questions about the amount of reinvested dividends.

• If you sold property other than stock, your taxable gain or loss will be determined by your cost/basis. The cost/basis is usually the original purchase price plus improvements (the cost of repairs and maintenance are not taken into account for cost/basis).

Itemized Deductions Worksheet

Deductions must exceed \$13,850 Single, \$27,700 MFJ/QSS, \$20,800 HOH, or \$13,850 MFS to be a tax benefit.

| Medical Expenses. Must exceed 7.5% of income to be a benefit— include cost for dependents—do not include any expenses that were reimbursed by insurance or paid with funds from an FSA, HSA, or HRA. | | Charitable Contributions. If over \$500 in noncash charitable contributions, provide details of contributions. Rules require that the taxpayer retain documentation for all contributions. | | | | | |
|---|----------------------|--|-----------------------|--|---|--|---------------------------------|
| Dentists | \$ | Hospitals | \$ | Monetary (cash, c | heck, credit card) | | \$ |
| Doctors | \$ | Insurance | \$ | Noncash contribu | tions (FMV). Clot | thing or household | |
| Equipment | \$ | Prescriptions | \$ | items must be in g | good used conditi | on or better. | \$ |
| Eyeglasses | \$ | Other | \$ | Did you transfer f | | A directly to a | <i>.</i> |
| Medical miles | : | @ 22¢ | 1 | | No | @ 14¢ | \$ |
| | | es paid for full or partia | | Charitable mileag | | @ 14¢ | |
| State withhole | | usiness use of the hom | e. Reported on W-2 | If you suffered an | y sudden, unexpe | ected damage or loss | |
| | d taxes—paid in 2 | 2023 | \$ | | lly-declared disas No | ter area, provide deta | ails to your tax |
| Real estate tax | - | | \$ | | | • | 1 |
| Real estate ta | | | \$ | | | ions. Miscellaneous : mitation are not dedu | |
| Personal prop | | | \$ | federal return. Ho | federal return. However, these expenses may be deductible | | |
| 1 1 | efund—received i | n 2023 | \$() | return. For use of home, auto mileage, or other job-related ex provide information on a separate sheet. Were any expenses | | | ed expenses, nses reimbursed |
| Foreign tax pa | | | \$ | by your employer? Yes No | | | |
| Other | | | \$ | Dues | \$ | Subscriptions | \$ |
| Other | | | \$ | Investment | \$ | Supplies | \$ |
| Other | | | \$ | expenses | | | |
| Balance paid | in 2023 from prior | year state returns | | Job education | \$ | Tax prep fees | \$ |
| (do not includ | le interest or penal | ties) | \$ | Job seeking | \$ | Tools | \$ |
| | | ax paid during 2023? | Yes No | Legal fees | \$ | Uniforms | \$ |
| Did you purc. Sales tax paid | | oat, or home in 2023? Se paid \$ Date | Yes No | Licenses | \$ | Union dues | \$ |
| , | | , | | Safety equipment | \$ | Other | \$ |
| use or rental- | use property, inclu | nterest paid for full or p ding business use of th ation and ID numbers. | e home. Provide | Other Deduction AGI limit. | ns. The following | deductions are not s | ubject to the 2% |
| Main home | \$ | Equity loan | \$ | Gambling losses | \$ | Federal estate tax on IRD | \$ |
| Second home | \$ | Equity loan | \$ | Impairment- | \$ | Other | \$ |
| | | | | related expenses | Ψ | Unier | Ψ |

other Deductions of Questions

Notes: • Gambling losses are deductible only up to the amount of gambling winnings reported. A log must be kept to verify losses.

• Work clothing is not deductible if adaptable for every day wear. Exception for safety equipment, such as steel-toe boots.

• Expenses to enable individuals, who are physically or mentally impaired, to work are generally deductible.

| Adjustments Worksheet | |
|---|--------------|
| Educator expenses. Classroom expenses of teachers, counselors, and principals. Maximum \$300 each. | \$ |
| <i>Health savings account (HSA).</i> Contributions for 2023 may be made up until April 15, 2024. (<i>Only include contributions you made out-of-pocket</i>). | \$ |
| Self-employed SEP, SIMPLE, and qualified plans. Contributions for 2023 may be made up until April 15, 2024. | \$ |
| <i>Self-employed health insurance.</i> Sole proprietors, partners, and 2% S corporation shareholders if not eligible for employer coverage. | \$ |
| Penalty on early withdrawal of savings. | \$ |
| IRA deduction. For traditional IRAs. Roth IRAs are not deductible. Contributions for 2023 may be made up until April 15, 2024. | \$ |
| Student loan interest. Paid for taxpayers and dependents. | \$ |
| <i>Moving expenses.</i> Available only to members of the Armed Forces (or their spouses or dependents) on active duty that move pursuant to a military order and incident to a permanent change of station. | Ask preparer |
| Business expenses of reservists, performing artists, and fee-based government officials. | Ask preparer |
| Other adjustments. Include description. | \$ |

Estimated Tax Payments — Tax Year 2023

| Installment | Date paid | Federal | Date paid | State |
|--------------------------------------|-----------|---------|-----------|-------|
| First | | \$ | | \$ |
| Second | | \$ | | \$ |
| Third | | \$ | | \$ |
| Fourth | | \$ | | \$ |
| Amount applied from 2022 overpayment | | \$ | | \$ |
| Total | | \$ | | \$ |
| Tour Duomouration Chaptelist | | | • | |

Tax Preparation Checklist

Please provide the following documentation:

All Forms W-2 (wages), 1099-INT (interest), 1099-DIV (dividends), 1099-B (proceeds from broker or barter transactions), 1099-R (pensions and IRA distributions), Schedules K-1 from partnerships, S corporations, estates and trusts, and other income reporting statements, including all copies provided from the payer.

Form 1095-A (for health insurance purchased through a public exchange/marketplace), Form 1095-B (for health insurance purchased outside of a public exchange), or Form 1095-C (for employer-provided health insurance coverage).

If you are a new client, provide copies of last year's tax returns.

The completed Individual Income Tax Organizer. *Note:* If you choose not to fill out the organizer, you must at least answer the "Yes" or "No" questions under "Questions—All Taxpayers."

Copy of the closing statement if you bought, sold, or refinanced real estate.

Mileage amounts for any automobile expenses claimed, including total mileage, commuting mileage, and business mileage. Detail of estimated tax payments made, if any.

Income and deductions categorized on a separate sheet for business or rental activities.

List of itemized deductions categorized on a separate sheet for medical, taxes, interest, charitable, and miscellaneous deductions. Copy of all acknowledgement letters received from charitable organizations for contributions made in 2023.

Taxpayer Responsibilities

- You agree to provide us all income and deductible expense information. If you receive additional information after we begin working on your return, you will contact us immediately to ensure your completed tax returns contain all relevant information.
- You affirm that all expenses or other deduction amounts are accurate and that you have all required supporting written records. In some cases, we will ask to review your documentation.
- You must be able to provide written records of all items included on your return if audited by either the IRS or state tax authority. We can provide guidance concerning what evidence is acceptable.
- You must review the returns carefully before signing to make sure the information is correct.
- Fees must be paid before your tax returns are delivered to you or filed for you. If you terminate this engagement before completion, you agree to pay a fee for work completed. A retainer may be required for preparation of returns.
- You should keep a copy of your tax return and any related tax documents. You may be assessed a fee if you request a duplicate copy in the future.

Signatures. By signing below, you acknowledge that you have read, understand, and accept your obligations and responsibilities. For a joint return, both taxpayers must sign.

| TaxpayerSpouseDate | Duine and Dalian | | |
|--------------------|------------------|--------|------|
| | Taxpayer | Spouse | Date |

Privacy Policy

The nature of our work requires us to collect certain nonpublic information. We collect financial and personal information from applications, worksheets, reporting statements, and other forms, as well as interviews and conversations with our clients and affiliates. We may also review banking and credit card information about our clients in the performance of receipt of payment. Under our policy, all information we obtain about you will be provided by you or obtained with your permission.

Our firm has procedures and policies in place to protect your confidential information. We restrict access to your confidential information to those within our firm who need to know in order to provide you with services. We will not disclose your personal information to a third party without your express written permission, except where required by law. We maintain physical, electronic, and procedural safeguards in compliance with federal regulations that protect your personal information from unauthorized access.

Rental Property Tax Organizer

Rental Income and Expenses

Indicate type of property as 1-Single Family Residence, 2-Multi-Family Residence, 3-Vacation/Short-Term Rental, 4-Commercial, 5-Land, 6-Self-Rental, or 7-Other (describe).

| | Prope | erty A | Prope | erty B | Property C Address of property: | |
|---------------------------------|---------------------|----------------------|---------------------|----------------------|-----------------------------------|----------------------|
| | Address o | f property: | Address of | f property: | | |
| | | | | | | |
| | Туре | | Туре | | Туре | |
| | Any personal us | se? Yes No | Any personal us | se? Yes No | Any personal use | ? Yes No |
| | Fair Rental Days | Personal Use Days | Fair Rental Days | Personal Use Days | Fair Rental Days | Personal Use Days |
| Date placed in service | | | | | | |
| Rents received | \$ | | \$ | | \$ | |
| Expenses | | | | | | |
| Advertising | \$ | | \$ | | \$ | |
| Auto and travel | \$ | | \$ | | \$ | |
| Cleaning and maintenance | \$ | | \$ | | \$ | |
| Commissions | \$ | | \$ | | \$ | |
| Insurance | \$ | | \$ | | \$ | |
| Legal and professional fees | \$ | | \$ | | \$ | |
| Management fees | \$ | | \$ | | \$ | |
| Mortgage interest paid to banks | \$ | | \$ | | \$ | |
| Other interest | \$ | | \$ | | \$ | |
| Repairs | \$ | | \$ | | \$ | |
| Supplies | \$ | | \$ | | \$ | |
| Taxes | \$ | | \$ | | \$ | |
| Utilities | \$ | | \$ | | \$ | |
| Other (list) | \$ | | \$ | | \$ | |
| | \$ | | \$ | | \$ | |
| | \$ | | \$ | | \$ | |
| | \$ | | \$ | | \$ | |
| | \$ | | \$ | | \$ | |
| | | | | | | |

Property Information

If this is your first year with our firm, please provide a depreciation schedule for all property placed in service before 2023.

Property Purchased. Treat the cost of improvements made to real property as the purchase of a new asset.

| Asset | Date purchased | Cost | Date placed in service |
|-------|----------------|------|------------------------|
| | | \$ | |
| | | \$ | |
| | | \$ | |
| | | \$ | |
| | | \$ | |

Property Sold or Taken Out of Service

| Asset | Date sold or taken out of service | Selling price | Trade in? |
|-------|-----------------------------------|---------------|-----------|
| | | \$ | |
| | | \$ | |
| | | \$ | |
| | | \$ | |
| | | \$ | |

Diligence Questionnaire



| Comoro | Questions |
|----------|--------------------|
| Genera | Ouestions |
| e chicha | quebelonio |

| * | What was your marital status on December 31st, 2023? | | | |
|---|--|---------|----|-----------|
| * | Is your primary residence in the United States? | Yes | No | |
| * | Is there anyone in the household who does NOT have a valid Social Security number? | Yes | No | |
| | To qualify for the EITC, everyone you claim on your taxes must have a valid Social Security number (SCN). To be a list the SCN we also be the list of the second security in the second security is a second security of the second security in the second security is a second security in the second security in the second security is a second security is a second security in the second security is a second security is a second security in the second security is a second security is a second security in the second security is a second security is a second second security is a second s | | | |
| | (SSN). To be valid, the SSN must be: Valid for employment. Issued before the due date of the tax you plan to claim (including extensions) | return | | |
| * | Is there any one in the household who is not a citizen, national or resident of the US? | Yes | No | |
| | To qualify for Child Tax Credit or the Other Dependent Credit, each qualifying person must be a c | | NO | |
| | national or resident | (12011, | | |
| * | Do you have any minor children or other dependents? | Yes | No | |
| * | Can anyone else claim your dependent(s) on their tax return? | Yes | No | |
| | Are there any custody sharing agreements in place? | Yes | No | |
| | If yes, has a form 8332 been filed in the past to release the claim on the exemption of the minor child? | Yes | No | |
| | A form 8332 Release/Revocation of Release of Claim to Exemption for Child by Custodial Parent form used when parents alternate years to claim their children | is a | | |
| | If the child is your biological child, the child will automatically be treated as your child. If the ch with both parents equally during the year, the IRS will treat the child as the qualifying child of th parent who had the higher adjusted gross income | | | |
| * | | Yes | No | |
| | How many months/days did the child(ren) live in your home during the tax year? | | | |
| | More than 183 days? Please verify that the dependents lived in the home greater than 6 months | s. You | | |
| | can not claim the Child Tax Credit if the child did not live with you unless the child's custodial par | ent has | | |
| | signed an 8332 to release the claim for exemption. | | | <u> </u> |
| | | Yes | No | |
| | To qualify for Head of Household or claim the exemption for a child, which may qualify you for c | | | |
| | tax credits or benefits, you will need to be able to prove that you have provided more half the concepting up the home and 50% of the total support of the dependent. | ost of | | |
| * | If still married, have you lived with your spouse during the last 6 months of the year? | Yes | No | |
| | To be considered "Unmarried" for Head of Household Status, you must have lived apart from yo | | NO | |
| | spouse for the last 6 months of the year and have provided more than half of the cost of keepin | | | |
| | home for the year for a qualifying person | | | |
| * | , , , , , , | Yes | No | |
| | If yes, who lives there and how much do they pay? | | | _ |
| * | | Yes | No | |
| * | Do you have any other type of supplemental non taxable income such as child support or Social Security benefits? | Yes | No | |
| * | | | N- | |
| | than \$4400? | Yes | No | |
| * | Do you have any non biological dependents on your return? | Yes | No | |
| | If yes, what is your relationship and how did they become a dependent? | | | |
| | | Yes | No | \square |
| * | , | Yes | No | |
| * | Will any of your dependents be filing a tax return? | Yes | No | |

| | If yes, please verify that they have/will not claim the dependency for themselves | | | | |
|-------|---|-----|-----|----|--|
| * | Have you ever been disallowed the EITC/AOTC/CTC? If so, when? | Yes | | No | |
| * | If requested, can you provide school/medical/daycare to verify dependents living status? Can you provide verification of housing and support provided by you on behalf of your | Yes | | No | |
| * | dependents? Birth certificates to prove exemption? If you will be reporting any Self Employment Income, do you have books or other adequate and complete records to substantiate your income and expenses, including mileage logs? | Yes | | No | |
| Colle | ge Credits | | | | |
| * | Which dependent attended college? | | | | |
| * | What college did the dependent attend? | | | | |
| * | Did the student attend at least half time? | Yes | | No | |
| * | How many previous years has the Hope Scholarship or American Opportunity Credit been claimed for this student? | | | | |
| * | Did the student take courses as part of a postsecondary degree program or to acquire or | Yes | | No | |
| | improve job skills? | | | | |
| * | Did the student complete the first 4 years of postsecondary education before 2022?Has | Yes | Ш | No | |
| * | the student been convicted of a felony for possession or distribution of a controlled | Yes | | No | |
| | substance? | | | | |
| * | Did the student receive a tuition statement (1098) from the school? | Yes | Ш | No | |
| * | Do you have receipts for the qualified tuition and related educational expenses? | Yes | | No | |
| Disak | oled Any Age | | | | |
| * | Is any child over 19 disabled? Yes Can we get a doctor's note to substantiate? <i>What type of disability?</i> | | Yes | | |
| * | Are you currently caring for a parent or other relative who is not able to care for themselves? | | Yes | | |
| | If yes, who? | | | | |
| | Does this dependent receive social security/disability benefits? If yes, do you know how much the benefits are? | | Yes | | |
| Forei | gn Income | | | | |
| * | At any time in 2023 did you have a cumulative balance of greater than \$10k in foreign | Yes | | No | |
| | bank or investment accounts? | | | | |
| * | At any time in 2023 did you have signatory authority over any foreign financial or investment accounts? | Yes | | No | |
| * | Have you in the past ever been required to file FBAR (Foreign Bank Account Reporting)? | Yes | | No | |
| * | In 2023 did you receive a distribution from or were you the grantor of or transferor to a | Yes | | No | |
| | foreign trust? | | | | |
| Reco | rd Maintenance and Acknowledgement | | | | |

 Please know that you should maintain in your records any documentation used to produce and file your taxes. It is important that you keep these records for a minimum of 3 years. You will want to keep records which provide proof of your eligibility for tax credits. Keep your W2s, school, utility or medical records proving residency. Tuition statements and receipts for qualified educational expenses. Complete copies of your filed tax returns.

By signing or acknowledging below you are agreeing to keep required documentation and verifying that you filled this form out to the best of your knowledge truthfully and completely.