

NEW CLIENT INFORMATION SHEET ______ TAX YEAR

PLEASE PRINT CLEARLY SO ALL INFORMATION CAN BE EASILY READ

Primary Taxpayer Information:		Spouse Information:	Spouse Information:			
Last Name:		Last Name:				
First Name:	M.I	First Name:	M.I			
SSN or T.I.N. #:	_	SSN or T.I.N. #:				
Birthdate:		Birthdate:	_			
US Citizen: Y N		US Citizen: Y	N			
Job title for tax year:		Job title for tax year:	Job title for tax year:			
E-Mail:		E-Mail:	E-Mail:			
Work Phone:	Ext:	Work Phone:	Ext:			
Cell Phone:		Cell Phone:	Cell Phone:			
Home Phone:	Best Contact Phone #:					
Street Address:			Apt #			
City:		State:				
Bank Account Changes: Y N_	If YES , ple	ase make changes. Account type	e: Checkina Savinas			
-	, 0.0	rase make changes. Account type	5Criccking3avirigs			
Bank Name:		-				
-	Routing #	t:Accou	nt #:			
Bank Name:	Routing #	t: Accou	nt #:			
Bank Name: Foreign Bank Account/s: Y N	Routing # N? Do yo	#: Accou ou have a foreign wallet: Y I N?	nt #:?			
Bank Name: Foreign Bank Account/s: Y Did you buy &/or sell virtual current	Routing # N? Do yo cy in 2022: Y N If N	Account to the second s	nt #:? N? & supply SS card if possible.			
Bank Name: Foreign Bank Account/s: Y Did you buy &/or sell virtual currence Change of Dependents: Y	Routing # N? Do yo cy in 2022: Y N If N	Account to the second s	nt #:? N? & supply SS card if possible.			
Bank Name: Foreign Bank Account/s: Y Did you buy &/or sell virtual currence Change of Dependents: Y	Routing # N? Do yo cy in 2022: Y N If \ SS #	Account to the second s	nt #:? N? & supply SS card if possible. elationship Add or Remove			
Bank Name: Foreign Bank Account/s: Y Did you buy &/or sell virtual currence Change of Dependents: Y	Routing # N? Do yo cy in 2022: Y N If \ SS #	Account in the second s	nt #:? N? & supply SS card if possible. elationship Add or Remove			
Bank Name: Foreign Bank Account/s: Y Did you buy &/or sell virtual currence Change of Dependents: Y	Routing # N? Do yo cy in 2022: Y N If \ SS #	Account in the second s	nt #:? N? & supply SS card if possible. elationship Add or Remove			
Bank Name: Foreign Bank Account/s: Y Did you buy &/or sell virtual currence Change of Dependents: Y	Routing # N? Do yo cy in 2022: Y N If N SS #	#:Accou	nt #:? N? & supply SS card if possible. elationship Add or Remove			
Bank Name: Foreign Bank Account/s: Y I Did you buy &/or sell virtual currence Change of Dependents: Y Dependent Name/s (Refer to SS card) *Any additional dependent change By signing below, you understand your pers	Routing # N? Do yo cy in 2022: Y N If N SS #	DOB M/F Re DOB M/	nt #:? Supply SS card if possible. Elationship Add or Remove			
Bank Name: Foreign Bank Account/s: Y I Did you buy &/or sell virtual currence Change of Dependents: Y Dependent Name/s (Refer to SS card) *Any additional dependent cha	Routing # N? Do yo cy in 2022: Y N If N SS #	bu have a foreign wallet: Y I N? (ES, please make changes below 8 DOB M/F Re //	nt #:? Supply SS card if possible. Elationship Add or Remove that you provide to us. It is our e you have come to expect from			



STATEMENT OF UNDERSTANDING

2022. In doing so, you are personally telling us that you have received all of your tax information (W-2s, 1099s, etc.) & that your tax return is ready to be filed. Please be aware that payment is due upon completion of your tax return. We will not be able to e-file or release your copies until all payments are collected. If you receive additional information after we file your return, this document is your official notification that should you request our services in filing the required amended return; we will be charging you a minimum of \$100+ for this additional service. If there is a state return involved with the amendment, an additional charge of \$50 will be added to the total cost of the amended return.

All clients will be given one hard copy of their tax return and may request a PDF copy at the time of the appointment. Should you need additional copies at a later date, we will happily provide them to you; however, there will be a \$5 charge per copy per return. We retain copies of your tax return and supporting documents for a period of 5 years. Proof of identification will be requested before tax information is released to you or a third party. You should keep your original records in secure storage for a minimum of 7 years.

E-File Tax Services of Nevada, Inc wants to make it clear; if at any time our client/s is involved in a legal matter and E-File Tax Services of Nevada, Inc. is required to act, respond &/or appear for a deposition, court hearing &/or for any other legal matter, our client/s will be responsible for any and all legal costs and a daily fee of \$1500 per tax preparer, per accountant &/or office staff.

1040 INDIVIDUAL TAX RETURN LETTER OF ENGAGEMENT

Thank you for selecting E-FILE TAX SERVICES OF NEVADA, INC to assist you with your tax affairs. This letter confirms the terms of our engagement with you & the nature & extent of services we provide.

We will prepare your **2022** federal & all state income tax returns you request using information you provide to us. We may ask for clarification of some items, but we will not audit or otherwise verify the data you submit. We have a "Income Tax Organizer" that you can request to help you gather the information required for a complete return. If you use the "Income Tax Organizer", it will help you avoid overlooking important information & will contribute to efficient preparation of your tax returns. Taking the time to fill out the "Income Tax Organizer" can save us time & you money. The "Income Tax Organizer" is available upon request or on our website at www.efilenevada.com under the "Tax Guides" tab.

It is your responsibility to provide information required for preparation of complete & accurate returns. You should keep all documents, canceled checks & other data that support your reported income & deductions. This information may be necessary to prove accuracy & completeness of the returns to a taxing authority. You are responsible for the accuracy of your tax returns, so you should review them carefully before signing them or signing the e-file permission sheet/s.

Penalties of as much as \$100,000 can be imposed on you for failing to disclose participation in "reportable transactions", that is, certain arrangement the IRS has identified as potentially abusive. We will insist that all such transactions be properly disclosed. The law also imposes penalties when taxpayers understate their tax liability. If you have concerns about such penalties, Brent or Saundra can address it during your appointment.

Your returns may be selected for audit by a taxing authority. We do offer "IRS Assistance Assurance (IAA)" for an additional cost at the time of your appointment. Without this insurance, fees & expenses for the time involved will be incurred, depending on the terms of our engagement. An information sheet is available upon request.

We are Licensed Tax Return Preparers & Enrolled Agents, as EAs we can represent you on the local level and further if there is a tax examination. *Please note, we are not authorized to represent you in tax court. For Enrolled Agent representation there are additional fees (\$200/hr. 2 hr. minimum).*

Our fee for preparation of your tax returns will be based on the amount of time required at standard billing rates plus out-of-pocket expense. All invoices are due & payable upon presentation. To the extent permitted by state law, an interest charge may be added to all accounts not paid within thirty (30) days.

Only one signature is required Signature:	
---	--



IRS ASSISTANCE ASSURANCE (IAA)

PRICE: \$50.00	ACCEPTS FOR TAX Y	EAR 2022	DECLINES FOR TAX	YEAR 2022
tax agencies for tax charge a minimum o	rion offers you IRS assistanc return/s prepared by E-FILE of \$100 for IRS letter review, the IRS &/or local tax agen	TAX SERVICES OF NE \$100/hour for audit	EVADA, INC. Without th assistance and \$75/lette	is protection, we wil er for any written
	WHAT THIS	PROTECTION PROVID	DES YOU:	
IRS ASSISTANCE:				
,	e will assist you in answering qu you in what is required to face	0 0		1 /
IRS CP LETTERS & INQ	<u>UIRIES:</u>			
have reviewed the lett the IRS and/or doing a	tter of any kind, we ask that yo er, we will inform you if any ac n amended return <mark>(amendme ed above will apply without IA</mark>	ction is required. This coents are an additional o	ould include; paying the a	mount requested by
preparation to validate the lack of the aforem sure everything is give	, 1099s, Retirement & Unemplo e all claims. Any information of entioned forms is not the fault in to the Tax Preparer at the tim , mailing and/or e-filing.	omitted at the time of y of the Tax Preparer & th	our original tax preparatione IAA will not be impleme	n appointment, due to ented. So please mak
CLIENT'S PRINTED NAM	E	CLIENT'S SIGNATI	URE	DATE
TAX PREPARER'S PRINTI	ED NAME	TAX PREPARER'S	SIGNATURE	DATE
* A	MENDMENTS ARE \$100+ AN	D ARE NOT COVERED	WITH THE IAA INSURAN	CE*
** THE IAA DOES	NOT COVER ENROLLED AG	ENT REPRESENTATION	I BEFORE THE IRS (\$200/h	<mark>r. 2 hr. minimum)</mark>