

**Please provide the following information for the client intake form.**

(If this form is not completed or the information is missing, this will result in your tax return being delayed.)

<p><b><u>Taxpayer</u></b></p> <p>*First _____ MI ____ Last _____</p> <p>Social Security Number _____ - _____ - _____</p> <p>Date of Birth ____ / ____ / ____</p> <p>*Email _____</p> <p>*Phone Number _____ - _____ - _____</p> <p>Occupation _____</p>	<p><b><u>Spouse</u></b></p> <p>*First _____ MI ____ Last _____</p> <p>Social Security Number _____ - _____ - _____</p> <p>Date of Birth ____ / ____ / ____</p> <p>*Email _____</p> <p>*Phone Number _____ - _____ - _____</p> <p>Occupation _____</p>
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**\*Address**

\_\_\_\_\_ Street \_\_\_\_\_ Apt # \_\_\_\_\_

\_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

**\*Preferred Tax Return Format**

- Hard Copy
- Electronic Copy
- Both

**\*Driver's License**

	Type	Number	State	Issued	Expiration
Taxpayer	<input type="checkbox"/> DL <input type="checkbox"/> ID				
Spouse	<input type="checkbox"/> DL <input type="checkbox"/> ID				

**\*Bank Information**

Prefer check option

	Bank Name	Routing Number	Account Number	Type
<input type="checkbox"/> Refund				<input type="checkbox"/> Checking
<input type="checkbox"/> Balance Due				<input type="checkbox"/> Savings

**Estimated Payments**

	Federal Amount	Date Paid (Fed)	State Amount	Date Paid (State)
1 <sup>st</sup> Quarter				
2 <sup>nd</sup> Quarter				
3 <sup>rd</sup> Quarter				
4 <sup>th</sup> Quarter				

**\*Additional Comments/Questions:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Please check off any that apply and provide the corresponding forms.**

**Income Sources**

Same as previous year

Wages or Salary (Form W-2)	Received Alimony from Divorce
Earned Interest (Form 1099-INT)	Gambling (Form W2-G)
Received Dividends (Form 1099-DIV)	Royalties
Retirement Plan Withdraw (Form 1099-R)	Farm Income
Social Security Benefits (Form SSA-1099)	Disability Income
Sold Stocks or Investments (Form 1099-B)	Owned Rental Property
State or Local Tax Refund (1099-G)	Distribution from Coverdell ESA or 529 Plan
Self-Employment (1099-MISC, 1099-NEC, 1099-K)	Distribution from HSA or MSA
Unemployment (1099-G)	Income from Property Sold (Installment Sales)
Received a K-1 from Partnership, S-Corp, Trust	Other Misc. Income

**Expenses**

Same as previous year

Interest Payments (Form 1098-M, investments)	Contribution to Educational Saving Plan
State and Local Taxes	Contribution to Qualified Tuition Program
Real Estate	Contribution to HSA or MSA
Business Use of Home	Home Services (Housekeeper, Caregiver)
Contribution to Retirement Plan	Penalty for Early Withdraw (retirement/savings)
Student Loan Interest	Armed Forces Moving Expenses
Tuition and Fees for High Education (Form 1098-T)	Paid Alimony for Divorce Prior to 12/31/2018

**Do you have any medical expenses?** *(Deductible medical expenses must exceed 7.5% of your AGI)*

Medical \$ _____	Prescriptions \$ _____	Vision \$ _____	Dental \$ _____
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**Other Information**

*(Please check all that apply and provide documentation if applicable)*

Are you blind?	Taxpayer/spouse/dependent is a non-U.S. citizen?
Did you have/adopt a child?	Can you be claimed as a dependent by someone else?
Did you change your residence?	Have an Identity Protection Number from the IRS?
Did you change marital/filing status?	Did your spouse/dependent pass away?
Are you in the military?	Did you make a charitable contribution? \$ _____
Did you sell/trade/invest in any virtual currency?	Do you have assets in a foreign country?
Do you have an interest or signing authority over a financial account in a foreign country? (Bank accounts, brokerage accounts, or investments) Please provide the highest balance for the year \$ _____	

**If you have Dependents, please continue to the next page.**

If you do not have dependents, please continue to the **Engagement Letter.**

**\*Dependents (Including Non-Child Dependents)** *Please attach information for additional dependents.*

First, Middle Initial, Last	Date of Birth	SSN	Relationship	Student	Day Care	Months in Home

**Marital Status**

	Never married
	Spouse deceased
	Divorced or separated
	Separation agreement
	Married but lived apart from spouse during the last 6 months of the year

**If you are divorced or legally separated, can you provide either of the following documents?**

Divorce Decree                       Separate maintenance agreement or separation agreement

**If you are married, but did not reside with your spouse from the last 6 months of the tax year, can you provide any of the following documents?**

	Not applicable
	Lease agreement
	Utility bills
	Letter from a clergy member
	Letter from social services
	Other: _____

**Can you provide documentation to show that you provide more than 50% of the household's support?**

	Utility bills
	Property tax bills
	Grocery receipts
	Rent receipts or mortgage interest statements
	Maintenance and repair bills
	Other household bills: _____

**Did you receive any nontaxable support/income?**

	Family Support
	Food stamps
	Housing Assistance
	Childcare assistance
	Other: _____

**If anyone else lives in the home, please provide:**

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

Relationship: \_\_\_\_\_

Do they provide any financial support?     Yes                       No

## ENGAGEMENT LETTER

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We appreciate the opportunity of serving you and advising you regarding your income taxes and/or accounting needs. To ensure a complete understanding between us, we are setting forth pertinent information about the services that we propose to provide for you.

### **Tax Work:**

We will prepare your federal and state income tax returns based on information you furnish to us. We will not audit or otherwise verify the data you submit to us, although we may ask you to clarify some of it. In order to file your tax returns in a timely manner, ***we need all required information no later than 21 days prior to the tax filing deadline.*** You may be required to request an extension if we do not receive all required information by the above date.

***Files received in full within the 21 days prior to the filing deadline but not less than 10 days prior will be subject to a \$100 late submission fee if you wish to make the filing by the deadline.*** Should you fall into this time frame (21 days) you will have the option of paying the late submission fee or filing an extension. Any files received within the 10 days prior to the filing deadline will be required to file an extension. Files with extension will be completed in the order they were received with complete documentation. Extensions will be billed at \$75 for personal returns and \$125 for business returns and payment is due at the time of the extension. Extension fees are non-refundable but will be credited in full to the final bill upon completion of the tax return.

If you need accounting services, such as adding up receipts or reviewing bank statements to create a spreadsheet, there will be a surcharge of \$175 per hour if you provide the records between January 1st and April 15th. This is due to the time it takes to work through the records.

We will use our judgment in resolving questions where the tax law is unclear, or where there may be conflicts between the taxing authorities' interpretation of the law and other supportable positions. Unless otherwise instructed by you, we will resolve such questions in your favor whenever possible.

It is your responsibility to provide all the information required for the preparation of complete and accurate returns. You represent that there is adequate substantiation to support deductions for any expenses claimed on the return. ***You are ultimately responsible for the accuracy of your return and should review it carefully before signing it.***

You should retain all the documents, canceled checks, and other data which form the basis of income and deductions. These may be necessary to prove the accuracy and completeness of the returns to a taxing authority.

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 request a retainer before performing such services.

If there is an error on the return resulting from incorrect information supplied by you, or due to your subsequent receipt of amended or corrected tax forms (W-2's, 1099's, K-1's), you are responsible for the payment of any additional taxes which would have been properly due on the original return(s), along with any interest and penalties charged by the IRS.

### **Accounting and Consulting:**

Our services come in the form of a tax return preparation and accounting services, and those may include consultations, meetings and/or phone calls. Our tax preparation fees are based upon several factors. We have spent many years becoming very knowledgeable and educated in tax and accounting matters. In addition, we are required to continue our education annually to maintain our licenses. When you contact us,

it is because you need our knowledge and assistance with something, this is when our time becomes billable. If you contact us with a "general" question that we can quickly answer, we consider this a courtesy service and you will not be billed for our time. Phone calls requiring research, business or personal planning, tax compliance, etc. will be billed in accordance with our billing policy.

**Billings:**

Any estimate we give is based upon information you *initially* provide to us. Actual fees may vary as circumstances change and/or new corrected information is made available. All fees and costs incurred to prepare your income tax returns are due and payable before the returns are released from our office.

You will receive a full pdf of your return. Any additional hard copies may incur a service charge of \$30.00. We reserve the right to hold the completed returns until your account is paid in full. **An E-file authorization signature and payment in full is required before any tax return can be electronically filed or released.**

If your return is for a closely held corporation, partnership, limited liability company, or other entity, the person signing that return agrees to be personally liable for our fees if the entity does not pay. Finance Charges will accrue at 2% per month after 30 days of the invoice date. Uncollected invoices will be subject to submittal with collections and incur a collection fee plus Finance Charges.

Credit Card transactions will be subject to a 2.75% transaction fee.

**Communication:**

We find communication to be a key element when we are working with any client, new or returning. An integral part of this is to lay out our expectations for our clients and ourselves.

Clients are expected to timely provide tax documents, statements and any other records at least 21 days prior to the tax deadlines. Clients will request an extension within a reasonable time frame of at least 14 days prior to filing deadline. If a request for additional information or documents is requested from client, client will provide requested information within 10 days, or provide an update. Client understands it is not the responsibility to provide additional requests for the same documentation after initial request has been made.

West Ridge Accounting Services will communicate with client regarding their tax filing by either a phone call or email. Clients may make an appointment to review tax return without incurring additional fees. We will communicate with clients if additional time is needed and an update of current status when available.

**Payments:**

We reserve the right to require retainers at our discretion. New clients may be requested to remit a retainer. New client status will remain in effect for the first twenty-four (24) months of service. The retainer is an estimate of work to be performed; and additional amounts may be due.

Accounts unpaid for 60 days will require that we cease rendering service until your account is brought current. In the event we stop work or withdraw from this engagement as a result of your failure to pay on a timely basis for services rendered, we shall not be liable for any damages/penalties incurred as a result of our ceasing to render services.

The client has ten (10) days from the invoice date, to voice any concerns or questions regarding the invoice or any portion or element thereof. After the ten (10) day period all invoices shall constitute acceptance of the invoice as submitted and payment in full will be expected within the required time frame. Any courtesy billing adjustments given are honored for fourteen (14) days. After fourteen (14) days, the invoice must be paid at the full rate and the courtesy adjustment shall be null and void. Any Non-Sufficient Funds check, paper or electronic, will be charged an additional \$40 fee.

Either party may terminate this agreement upon giving a (10) days written notice. Should this agreement be terminated prior to completion of services, we will prepare a final bill showing the total fees incurred for services rendered. This amount will be due and payable upon presentation.

**Dispute Resolution:**

If any dispute arises among the parties in this letter, the parties agree first to try in good faith to settle the dispute by mediation administered by the American Arbitration Association under its Rules for Professional Accounting and Related Services Dispute Resolution before resorting to litigation. Costs of any mediation proceeding shall be shared equally by all parties.

Please be advised that certain communications involving tax advice between you and our firm may be privileged and not subject to disclosure to the IRS. If you disclose the contents of those communications to anyone or turn over information about those communications to the government, you may be waiving this privilege. To protect your rights, please consult with us or your attorney prior to disclosing any information about our tax advice.

We would like to express our appreciation for this opportunity to serve you.

Yours very truly,

West Ridge Accounting Services, LLC

**Acknowledgment**

Having read and fully understood the engagement letter, I/we agree to engage West Ridge Accounting Services, LLC in accordance with the terms indicated. I/we understand the tax returns are to be prepared from information I/we provide and that the final responsibility for a complete and accurate return/services rests with me/us. It is also my/our responsibility to review and understand the information on the returns prior to signing and filing them.

*This Agreement may be accepted by return signature or by electronic confirmation. By accepting this Agreement, the Participant consents to the electronic delivery of prospectuses, annual reports and other information required to be delivered by U.S. Securities and Exchange Commission rules (which consent may be revoked in writing by the Participant at any time upon three business days' notice to the Company, in which case subsequent prospectuses, annual reports and other information will be delivered in hard copy to the Participant).*

_____	_____	_____
Print Name (Taxpayer)	Signature	Date
_____	_____	_____
Print Name (Spouse)	Signature	Date
_____	_____	_____
Company Name (if applicable)	Signature	Date

**We must have a signed Engagement Agreement on file in our records before we can commence the work requested.**

We may terminate our representation of you if you insist that we pursue objectives that we consider imprudent, unprofessional, or unethical or if we feel further representation is not warranted for personal reasons. Regardless of the reason for termination, you are obligated to pay for services provided and costs incurred through the date of termination.