

FRIENDLY ACCOUNTING & TAX SERVICE INC.

3616 18 Mile Rd. Cedar Springs, MI 49319

Phone: (616) 263-9036

Fax: (616) 263-9037

www.friendlytaxaccounting.com

info@friendlytaxaccounting.com

January 7, 2024

Subject: Preparation of your 2023 tax return

Thank you for choosing FRIENDLY ACCOUNTING AND TAX SERVICE INC to prepare your 2023 tax return. This letter confirms the terms of our engagement and outlines the nature and extent of the services we will provide.

We will prepare your 2023 federal and state income tax returns. We depend on you to provide accurate information, which will allow us to complete your return. We may ask you to clarify items but will not audit or otherwise verify the data you submit. An Organizer will help you avoid overlooking important information and will contribute to the efficient preparation of your return and help minimize the cost of our services.

We will perform accounting services only as needed to prepare your return. Our work will not include procedures to find defalcations or other irregularities. Accordingly, our engagement should not be relied upon to disclose errors, fraud, or other illegal acts, though it may be necessary for you to clarify some of the data you submit. We will inform you of any material errors, fraud, or other illegal acts we discover.

The law imposes penalties when taxpayers underestimate their tax liability. Call us if you have concerns about such penalties.

Should we encounter instances of unclear tax law, or of potential conflicts in the interpretation of the law, we will outline the reasonable courses of action and the each. We will adopt, on your behalf, the alternative you select.

Our fee is based upon the time required at standard billing rates plus out-of-pocket expenses. Invoices are due and payable at the time of presentation. All accounts not paid within thirty (30) days are subject to interest charges to the extent permitted by state law.

We will return your original records at the end of this engagement. Store these records, along with supporting documents, in a secure location. We retain copies of your records for up to seven years, after which these documents will be destroyed.

If you have not selected to e-file your return with our office, you will be responsible for filing the return with the appropriate tax authorities by the deadline. Review all tax return documents before signing. Our engagement will conclude with the delivery of the completed return to you, or with e-filed returns, with your signature and our submittal of said return.

If you believe that your tax return information has been disclosed or used improperly in a manner unauthorized by law or without your permission, you may contact the Treasury Inspector General for Tax Administration (TIGTA) by telephone at 1-800-366-4484, or by email at complaints@tigta.treas.gov.

To affirm that this letter correctly summarizes your understanding of the arrangements for this work, please sign in the space provided. Thank you for the opportunity to be of service. If you have any questions, please contact our office at 616-263-9036.

Sincerely,

Accepted date _____

Taxpayer _____

Spouse _____

FRIENDLY ACCOUNTING AND TAX SERVICE INC.

Tax professional

Please answer the following questions and turn into our office with all your tax documents. We will not be able to begin your taxes until we have this information. You may drop off, mail, fax or upload it electronically. Thank you.

Taxpayers name: _____ D.O.B. _____ Occupation: _____

Spouse name: _____ D.O.B. _____ Occupation: _____

FILING STATUS: ___ SINGLE ___ HEAD OF HOUSEHOLD ___ MARRIED JOINT ___ MARRIED SEPARATE
___ DEPENDENT OF ANOTHER Name of person who can claim you _____

CONTACT INFORMATION IS THE SAME AS LAST YEAR (write updates below)

Address: _____ City: _____ State: ___ Zip: _____ County: _____

Phone: _____ Email _____ Preferred method of communication _____

PERSONAL INFORMATION-CHECK THOSE THAT APPLY

- Disabled Veteran percentage: _____
Insurance through the Marketplace [include Form 1095-A]
Virtual Currency [include documentation if sold or exchanged]
Receive payments as a land contract holder [amount: _____ interest paid: _____]
Foreign accounts [include documentation]
Received unemployment [include documentation]
Cash charitable donations [must include documentation]
Interest payment from IRS [include Form 1099-INT]
Home heating credit [list heat provider: _____]
College student that needs FAFSA worksheet [name of student; _____]

PLACE OF RESIDENCE INFORMATION: CHECK THOSE THAT APPLY

Own Home [provide mortgage interest and property tax documents]. An extra \$10 fee will be applied for each property we look up online. Township/City limit of home _____

Rent

Table with 4 columns: Monthly cost, # of months, Landlord's name, Landlord's address

Live in a mobile home park

Live in a subsidized or retirement facility [Facility name _____]
Heat included? _____ Meals included? _____ Medical included? _____ Amount of medical? _____

Retirement/Assisted living facility-Property Tax Percentage (document provided by facility): _____

REFUND OPTIONS

- Check in the mail - Mailing address _____
Direct Deposit - Banking information is the same as last year ___ New banking information is written below.
Bank name _____ Checking ___ Savings
Routing number _____ Account Number _____

Table with 6 columns: Received, Entered, Reviewed, Printed, Notified, Picked up

DEPENDENT INFORMATION

Proof of Residency required via a document stating the dependent's name and your address for the tax year or a Form 8332.

List each dependent's name, DOB, gender, Social Security Number, and relationship to taxpayer:

- 1. _____
- 2. _____
- 3. _____
- 4. _____
- 5. _____
- 6. _____

Did you have any out-of-pocket childcare expenses? Yes No Total Amount Paid for Daycare: \$ _____

If yes, provide Name, EIN/SS # and address: _____

Please answer the following questions reflecting on the entire year of 2023:

- How many months out of the year did the child(ren) live with you? _____
- Can anyone else claim the child? Yes No If yes, Who? _____
 - If yes, do you have Form 8332 giving you permission to claim the dependent? Not needed if you can provide proof of residency and have met the IRS requirements.
- Are you and your dependents considered U.S. Citizens, National, or resident and reside in the U.S. for more than 6 months out of the year? Yes No _____
- What school does your child(ren) attend? _____
- Are any of your dependents disabled? Yes No Who? _____
- If you are not the parent of the dependent, are either of the parents in the home? Yes No
- Did you receive any state assistance?
 Food Assist. Cash Assist. Housing Medical childcare other
- Did any of your dependents receive SSID? Disability or Survivor Benefits? If yes, how much did you receive for the year? \$ _____ (not taxable but must be reported to the State for household income).
- Can you provide documentation to prove your eligibility to claim the dependent? Yes No
- Marital status Never married Spouse Deceased Divorced or separated Married but live apart from spouse during the last 6 months of the year Separation Agreement Divorce Decree
- If you were self-employed, how many years have you been in business? _____
 - Do you travel for business? _____ How often? _____ Where? _____
- If anyone else lives in home, provide: Name _____
Relationship _____ Do they provide financial support? _____

Notes
