



PLEASE PROVIDE US WITH THE FOLLOWING DOCUMENTS

INCOME

- W2s
- 1099s: 1099-R (Retirement Distributions)
1099-INT (Interest Income)
1099-DIV (Dividend and Capital Gain Income)
1099-B (Stock Proceeds) - Please check to see if all sales have corresponding cost info
1099-MISC (Self Employment Income - ALSO FILL OUT BUSINESS INCOME/EXPENSE WORKSHEET)
1099-K (If you accept credit cards or Paypal from customers your credit card company will issue this)
- SSA (Social Security Income)
- 99G (Unemployment Received)
- K-1 (income from a partnership, s-corporation, estate, or trust)
- Alimony Received
- 1099-A and 1099-C (Debt Cancellation and Property Foreclosures)
- Rental Income – FILL OUT RENTAL WORKSHEET

Did you have > \$10,000 in foreign assets at any time during 2014? Please bring info on income and account values

- Yes No

DEDUCTIONS/CREDITS

- 1098-T (Tuition Statement for College Education)
- Bring all Adoption Papers and proof of expenses for new Adoption Credit
- Charitable Donations - Receipts are needed for all Charitable Donation Deductions Now
- Form 1098 Mortgage Interest Paid
- 1098-E Student Loan Interest Paid
- 1095-A Health Insurance Marketplace Statement**

OTHER IMPORTANT ITEMS

- Settlement Statements for any Sale, Purchase or Refinance of properties
- Signed Release of Exemption Form 8332 if you are claiming a child that does not live with you.
- Signed Engagement Letter and Filled out Worksheets (keep scrolling to find those!)
- Political Contribution Credit
- Copy of last year's taxes (if new client)
- For Corporations: Don't forget to bring Year End Balances on all Accounts and Loans. If you have Quickbooks or other accounting software, you can email this ahead of appointment

ESTIMATED TAX PAYMENTS: DATE, PAYEE, AMOUNT

ESTIMATED TAX PAYMENTS: DATE, PAYEE, AMOUNT



Date		
Taxpayer Name		Spouse's Name
Address		
City	State	Zip

SUBJECT: Preparation of Your 2014 Tax Returns

Thank you for choosing Math LLC to assist you with your 2014 taxes. This letter confirms the terms of our engagement with you and outlines the nature and extent of the services we will provide. In order to ensure an understanding of our mutual responsibilities, we ask all clients for whom returns are prepared to confirm the following arrangements by signing below.

We will prepare your 2014 federal and requested state income tax returns. We will depend on you to provide the information we need to prepare complete and accurate returns. We may ask you to clarify some items but will not audit or otherwise verify the data you submit. An Organizer is enclosed to help you collect the data required for your return. The Organizer will help you avoid overlooking important information. By using it, you will contribute to efficient preparation of your returns and help minimize the cost of our services.

We will perform accounting services only as needed to prepare your tax 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 information you submit. We will, of course, inform you of any material errors, fraud, or other illegal acts we discover. The law imposes penalties when taxpayers underestimate their tax liability. Please 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 risks and consequences of each. We will ultimately adopt, on your behalf, the alternative you select.

Our fee will be based on the forms required plus out-of-pocket expenses. Invoices are due and payable upon presentation. We will require payment prior to the completion of electronic filing of your tax return.

We will return your original records to you at the end of this engagement. You should securely store these records, along with all supporting documents, canceled checks, etc., as these items may later be needed to prove accuracy and completeness of a return. We will retain copies of your records and our work papers for your engagement for seven years, after which these documents will be destroyed.

Our engagement to prepare your 2014 tax return will conclude with the delivery of the completed returns to you (if paper filing) or your signing, and the subsequent submittal of your tax return (if e-filing). Review all tax return documents carefully before signing them.

If completing tax return at our office, we will be using the Practitioner PIN method of signing returns with a self-selected PIN number that acts as your electronic signature. Signing below verifies that you understand that you will be signing by this electronic and tree-saving method and will not physically sign the actual tax return. We will also provide a copy of your tax return via electronic methods or a paper copy depending on the method requested.

To affirm that this letter correctly summarizes your understanding of the arrangements for this work, please sign the enclosed copy of this letter in the space indicated and return it to us with your tax info.

We appreciate your confidence in us. Please call if you have questions.

Sincerely,

Emily Kingan/Jenna Goldin
Math LLC

(Both spouses must sign for preparation of joint returns.)

Accepted By: _____
Taxpayer _____ Spouse _____
Date _____ Date _____

TAX PREPARATION WORKSHEET								
PERSONAL DATA								
Taxpayer Name			Spouse's Name					
SSN			SSN					
DOB			DOB					
Phone			Phone					
Email			Email					
Occupation			Occupation					
Address								
City		State		Zip				
DEPENDENTS**								
DEPENDENT ONE	Name		DEPENDENT TWO	Name		DEPENDENT THREE	Name	
	SSN			SSN			SSN	
	DOB			DOB			DOB	
	Relationship			Relationship			Relationship	
	Daycare Expense			Daycare Expense			Daycare Expense	
	Daycare Name			Daycare Name			Daycare Name	
	Daycare SSN/Fed ID#			Daycare SSN/Fed ID#			Daycare SSN/Fed ID#	
	Daycare Address			Daycare Address			Daycare Address	
DEDUCTIONS								
Student Loan Interest:		IRA Contributions: <input type="checkbox"/> IRA <input type="checkbox"/> ROTH <input type="checkbox"/> SEP		Moving Expenses :***				
College Tuition/Fees:		Investment Exp:		Employee Expenses: <small>(list on next page)</small>				
Mortgage Interest:		Property Tax:		Mortgage Insurance:				
Medical Expenses:		Health Insurance: <small>paid by employer</small>		Political Contribution:				
Charity by Cash/Check:		Non-Cash Charity* :		Tax Prep Fees:				
Alimony Paid:		HSA Contributions:		Union Dues:				

*Please Bring Itemized Donation Receipts if Non-Cash Donations exceed \$500. For help valuing your donations, please look at itsdeductible.com

** May be your child, or other person living with you whom you support. If you support a parent, they do not need to live with you.

*** Only Applicable if you move more than 50 miles because of a job.

DIRECT DEPOSIT INFORMATION
NAME OF BANK _____
9 DIGIT RTN# _____ ACCOUNT# _____
<small>*I have verified that the routing and account numbers listed above are where I want my Federal and State refunds directly deposited.</small>
CUSTOMER SIGNATURE _____

ADDITIONAL INFORMATION



SELF-EMPLOYMENT INFORMATION SHEET

FOR CONTRACTORS, SMALL BUSINESS OWNERS, PARTNERS, OR EMPLOYEES WITH UNREIMBURSED EXPENSES:

NAME:

SSN/EIN:

BUSINESS NAME & ADDRESS:

INCOME

TOTAL INCOME (BEFORE EXPENSES, DO NOT INCLUDE W-2 INCOME):

COST OF GOODS SOLD

*IF YOU HAVE INVENTORY, PLEASE ANSWER THE FOLLOWING QUESTIONS:

INVENTORY ON JANUARY 1ST:

TOTAL PURCHASES:

OTHER COSTS DIRECTLY RELATED TO INVENTORY(i.e.packaging)

INVENTORY ON DECEMBER 31ST:

EXPENSES

HOW MUCH DID YOU SPEND ON THE FOLLOWING?:

ADVERTISING (i.e. business cards, website, print ads, gifts)

COMMISSIONS & FEES(i.e. paypal fees, bank fees, etc)

CONTRACT LABOR (i.e. paying someone to help you)

DID YOU ISSUE ANY 1099S? Y/N

INSURANCE (Non-health i.e. liability, worker's comp, bonds)

RESEARCH AND DEVELOPMENT

BUSINESS INTEREST (i.e. business credit card, business loan)

LEGAL & PROFESSIONAL SERVICES (i.e. tax prep, lawyer fees, etc)

OFFICE EXPENSES (i.e. paper, pens, printing, etc.)

RENT OR LEASE (equipment, machinery, vehicles, etc.)

RENT (business property/office)

REPAIRS & MAINTENANCE (i.e. computer, plumbing, etc.)

SUPPLIES (items that have less than 1 year life)

TAXES & LICENSES (i.e. real estate, employer paid payroll taxes, permits, etc.)

WAGES (gross wages less employer paid payroll taxes)

LOCAL MEALS & ENTERTAINMENT (total):

UTILITIES (i.e. gas, electric, trash)

INTERNET

COST FOR YEAR:

BUSINESS-USE %:

CELL PHONE

COST FOR YEAR:

BUSINESS-USE %:

HEALTH INSURANCE:

OTHER EXPENSES:

EQUIPMENT AND TRAVEL ON BACK



TRAVEL

DATES	LOCATION	MEALS	AIRFARE	LODGING	BUS/CAB	OTHER EXPENSES (baggage, etc)
		\$	\$	\$	\$	\$

EQUIPMENT

(ITEMS THAT WILL LAST MORE THAN A YEAR INCLUDING SOFTWARE, FURNITURE, COMPUTER, ETC)

ITEM	DATE OF PURCHASE	COST	BUSINESS USE %

(IF 1st YEAR IN BUSINESS, INCLUDE VALUE OF ITEMS CONVERTED FROM PERSONAL TO BUSINESS USE)

BUSINESS USE OF HOME

DATE HOME OFFICE WAS PLACED IN SERVICE _____

TOTAL SQUARE FOOTAGE OF HOME _____ SQUARE FOOTAGE USED SOLELY FOR BUSINESS _____

EXPENSES	TOTAL AMOUNT FOR HOUSEHOLD
INSURANCE	
RENT	
REPAIRS AND MAINTENANCE	
UTILITIES (GAS, ELECTRIC, TRASH, WATER)	
OTHER EXPENSES	

OTHER EXPENSES RELATED DIRECTLY TO HOME OFFICE (i.e. painting the home office) AMOUNT AND TYPE OF EXPENSE



AUTO EXPENSE INFORMATION SHEET

(USE ONE SHEET PER VEHICLE)

Fill out either the mileage or actual expense section, or both, and we can decide which is better.

NAME:

TYPE OF VEHICLE:

DATE PLACED IN SERVICE

DO YOU HAVE ANOTHER VEHICLE AVAILABLE FOR PERSONAL USE?

WAS YOUR VEHICLE AVAILABLE FOR USE DURING OFF-DUTY HOURS?

DO YOU HAVE EVIDENCE TO SUPPORT YOUR DEDUCTION?

IF "YES," IS THE EVIDENCE WRITTEN?

MILES & EXPENSES

COMMUTING MILES (going back and forth to work):

BUSINESS MILES (meeting clients, picking up supplies, overnight business trips):

OTHER MILES (personal use, everything else):

PARKING

TOLLS

INTEREST

FOR ACTUAL EXPENSES ONLY

GARAGE RENT

GAS (total for year)

INSURANCE

LICENSES

OIL (total for year)

LEASE PAYMENTS

PROPERTY OR EXCISE TAX (for Oregon this is on a new vehicle)

TIRES

REPAIRS

OTHER EXPENSES



RENTAL INFORMATION

(USE ONE SHEET/RENTAL PROPERTY)

NAME:

PROPERTY ADDRESS:

DID YOU LIVE IN THE HOUSE THAT YOU RENTED?

IF YES, WHAT PERCENTAGE OF THE HOUSE DID YOU RENT?

INCOME

RENTAL INCOME

EXPENSES

IF THE PROPERTY IS EXCLUSIVELY A RENTAL, THEN THE EXPENSES ARE DIRECT. HOWEVER, IF THE RENTAL IS ALSO USED FOR PERSONAL-USE, THEN THE EXPENSES ARE INDIRECT.

	DIRECT	INDIRECT
ADVERTISING (CRAIGSLIST, SIGNS, ETC)		
AUTO (MILES DRIVEN FOR SUPPLIES, REPAIRS, ETC)		
TRAVEL		
CLEANING & MAINTENANCE		
COMMISSIONS		
INSURANCE		
LEGAL & PROFESSIONAL FEES		
MANAGEMENT FEES		
INTEREST - MORTGAGE		
INTEREST - OTHER		
REPAIRS		
SUPPLIES		
TAXES		
UTILITIES		
OTHER EXPENSES (I.E. HOMEOWNER'S DUES):		

MAJOR HOME IMPROVEMENTS (PLEASE EXPLAIN. i.e. APPLIANCES, FURNISHINGS, IMPROVEMENTS)

DATE	DESCRIPTION	COST