Zuni Tax Services - Tax Client Information for Drop-Offs

Taxpayer(s) Name(s): ______________________ Date: __________

Returning from Last Year: ________ Yes ________ No Phone No(s): __________

If you are returning from last year, please specify changes below (if new dependents, we will need copies of SS Card, Birth Certificate, DL)

Email Address (s): ______________________

New Clients - Please fill out below

Taxpayer's Name ____________ Occupation ________ SSN: ________ DOB: ________

Spouse's Name ____________ Occupation ________ SSN: ________ DOB: ________

Address, City, State, Zip ______________________

Taxpayer Driver's License or ID Number & State ____________ Issue Date ________ Exp. Date ________

Spouse Driver's License or ID Number & State ____________ Issue Date ________ Exp. Date ________

Filing Status at 12/31/20: Please indicate below:
Single / / Married Filing Joint / / Married Filing Separately / / Widow(er) / / Head of Household / /

Name(s) of Children	*SSN*	*DOB*	*Months lived in home in 2020*	*Relationship*	*Still in School*	*College Student*

Other dependents or people who lived with you

Name(s)	*SSN*	*DOB*	*Months lived in home in 2020*	*Relationship*	*Income*

How will we process the return: ________ Receive paper check in mail ________ Halona Plaza

________ Direct Deposit ________ Fee Collect (Filing fees will be taken out when deposit is made)

Bank information: Use for Direct Deposit of refund and/or Direct Debit of balance due. Name of Bank: ____________

Routing Number: ____________ Account No. ____________ Checking / / Savings / /

PLEASE NOTE:

Attach all tax documents, ie. W2, Interest Income, Unemployment, Social Security (SSA-1099), Retirement Income (1099R),
1098-T (Tuition Statement), how much was paid out of pocket for tuition, books or fees, Still in first 4 yrs of college or beyond
1098-E (Student Loan Interest), 1099C (Cancellation of Debt), Child Care,
Business Income/Expenses for Sch C for Self employed, Farm Income/Expenses for Sch F - <u>Should be summarized with totals</u>

Federal Stimulus Payments Amount: 1st One: ________ 2nd One: ________

How will tax preparation fees be paid:					Fee Collect		Credit Card
Fed/St	$ 178.72	St for Elderly			Check		Cash
Fed	$ 130.67	& Students	$	14.64	***Filing Fees need to be paid prior to finalizing the tax return***		
State	$ 48.06						

Tax Return Preparation

We will prepare your tax return based on information you provide. In the event your return is audited, you will be responsible for verifying the items reported. It is important that you review the return carefully before signing to make sure the information is correct. Unless otherwise stated, the services for preparation of your return do not include auditing, review, or any other verification or assurance.

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 return carefully before signing to make sure the information is correct.
- Fees must be paid before your tax return is 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 is required for preparation of late 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 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.

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 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.

For Office Use Only:

Processed on: Date ____________ Fee ____________

Refund Amounts: Federal ____________ State ____________

Called client for Signatures ____________ Date ____________ Initial

Mailed to Client ____________ Date ____________ Initial

Comments: ____________