

TAX YEAR: 2015



## CLIENT INFORMATION SHEET

*\* We are asking that all of our clients fill this out as we have implemented a new software. This will help us ensure that all of your information is current and up-to-date. Thank you in advance for your attention to this matter.\**

TAXPAYER NAME: \_\_\_\_\_  
SPOUSE NAME: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

**Taxpayer** Phone: \_\_\_\_\_ Taxpayer Email: \_\_\_\_\_

Taxpayer Social Security Number: \_\_\_\_\_

Taxpayer Date of Birth: \_\_\_\_\_ Taxpayer Occupation: \_\_\_\_\_

**Spouse** Phone: \_\_\_\_\_ Spouse Email: \_\_\_\_\_

Spouse Social Security Number: \_\_\_\_\_

Spouse Date of Birth: \_\_\_\_\_ Spouse Occupation: \_\_\_\_\_

Preferred Method of Contact: Email \_\_\_\_\_ Phone \_\_\_\_\_ Text \_\_\_\_\_ Mail \_\_\_\_\_

Would you like a client portal? Yes \_\_\_\_\_ Client Copy of Return: Paper \_\_\_\_\_ Portal \_\_\_\_\_

Refund Type: Check \_\_\_\_\_ Direct Deposit \_\_\_\_\_ (attach voided check)

Whom may we thank for referring you to us? \_\_\_\_\_

### DEPENDENTS:

NAME	BIRTHDATE	SSN
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

\*\*\*Please include a copy of your driver's license (for both taxpayer and spouse) and Social Security cards for all taxpayers and dependents.\*\*\*

### Office Use Only:

Voided check on file \_\_\_\_\_ Driver's License on file \_\_\_\_\_ Social Security Cards on file \_\_\_\_\_  
Engagement Letter \_\_\_\_\_ If new client, prior 2 years return on file \_\_\_\_\_ Client created in Axxess \_\_\_\_\_  
Paper file created \_\_\_\_\_ Delivery Method \_\_\_\_\_ Questionnaire \_\_\_\_\_ Healthcare info \_\_\_\_\_  
Planned finish \_\_\_\_\_



### **REQUIRED DOCUMENTS**

Complete the pages stapled behind this sheet (front & back) and return them to us with your tax paperwork. Include all W-2's, 1099's, or other reporting forms you have received.

If we receive your information after **March 21, 2016**, it may be necessary to file an extension.

### **TAX SEASON SCHEDULE**

**Office Hours:** Monday – Friday: 8:00AM – 5:00PM

**Lauren will be available by appointment only.**

Contact our office to speak with Shina to schedule your appointment.

### **CONTACT INFORMATION**

**Phone:** 501-499-9665

**Fax:** 501-325-3550

**Website:** [laurenerion.com](http://laurenerion.com)

**Email:** [info@laurenerion.com](mailto:info@laurenerion.com)

### **OFFICE POLICIES**

- All fees for services rendered are due upon the completion of your returns. All fees must be paid before we will electronically file or otherwise release your tax returns.
- If you need an electronic copy of your return provided to your banker, or other third party, we are required by law to have a signed authorization on file authorizing this disclosure. Please let us know if you will be needing this authorization on file.
- We must have a signed engagement letter on file before we begin preparing your tax returns.
- We will not begin preparing your returns without official government forms (i.e. will not start preparing return with a paystub).
- We will begin accepting tax season appointments on February 1<sup>st</sup>.
- Returns are prepared on a first-come, first-serve basis. It is extremely important that ALL documents and information are included. If not, it goes back in line once we receive the remainder of the information. We will contact you if we have questions, need more information or when the return is complete. We cannot guarantee completion within a specific time frame, however, we strive to have a two - three week turn around during tax season.

Due Dates:

	<u>No extension</u>	<u>With extension</u>
Form 1120S (S-corp)	March 15th	Sept 15th
Form 1120 (C-corp)	March 15th	Sept 15th
Form 1065 (Partnership)	April 15th	Sept 15th
Form 1041 (Trust/Estate)	April 15th	Sept 15th
Form 1040 (Individual)	April 15th	Oct 15th



### **HELPFUL TIPS**

- We have implemented new software in our office. Because of this, the "2015 Tax Return Checklist" included in this package may not indicate all of the documents used in preparing your 2014 tax return (i.e. mortgage interest Form 1098 may not be checked when in fact we used it to prepare your return). Please review your prior year tax files in addition to this organizer to ensure you are providing us with all of your documentation.
- Please make every effort to have all of your documents at the time you drop off your tax information. Incomplete information received slows our preparation process and can cause our fees to increase as the time it takes to prepare your return is greater.
- Please remove all staples from your documents
- Please remove your tax information from envelopes. You may keep envelopes for your records but we do not need these for our records.
- Summarize your income and expenses for your businesses, unreimbursed employee expenses, etc. If you have questions re: how to classify your expenses, we will be happy to offer guidance.
- If you made any non-cash contributions (i.e. Goodwill, Salvation Army, etc.), please include the value of the contributions on the receipt provided. It is your responsibility to determine the value of the items donated. Guidance is published on the Salvation Army to help determine the value donated. [www.salvationarmy.com](http://www.salvationarmy.com). If the value of your non-cash contribution is not included, we are not responsible for determining this amount.
- Has your bank or bank account information changed from prior year? Please verify your banking information. Include a voided check if your information has changed.
- Standard deduction amounts for 2015 are: Single - \$6,300; Married Filing Jointly - \$12,600; Head of Household - \$9,250. Personal exemptions are \$4,000 per taxpayer and dependent.

### **REMINDERS**

- Client portal: Email [info@laurenierion.com](mailto:info@laurenierion.com) if you would like to have an online portal set up for sending and receiving your information.
- Do you have a business, rental property or farm and pay any vendor over \$600 per calendar year? Did you issue 1099's to them to satisfy the 1099 filing requirements for 2015? If so, please provide copies.
- Cost of stock and real estate sold, as well as acquisition date
- IRA Contributions, IRA Rollovers or IRA Transfers
- Real Estate & Personal Property tax paid
- Child care expenses: include- Name, address, SSN/EIN and amount paid per child
- Mortgage interest paid
- Contributions made – cash & non cash
- College or higher education expenses
- Any contributions to or distributions from a Health Savings Accounts (HSA) or Medical Savings Account (MSA)
- Quarterly estimated taxes paid (Amount paid and dates paid)
- Changes in dependents? Need name, DOB and SSN of new dependents
- Any notices received or correspondence with the IRS or State



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

Subject: Preparation of Your 2015 Tax Returns

We are pleased to provide you with professional services. Our firm will prepare your individual Federal and State of Arkansas 2015 Income Tax returns. We will not audit or verify the data you submit to us; however, we may ask you to clarify some of the data. If you desire, we will be available to assist and guide you in gathering the necessary tax information for an additional fee.

Your income tax return is your responsibility. You should provide us with complete and accurate information at least 45 days before it is due. You must retain all documents and records to substantiate the items claimed on your tax return. It is your responsibility to provide written receipts for all charitable deductions and documentation for all deductible vehicle expenses. We highly recommend that you review the tax returns before signing them since you have the final responsibility for the information and the associated tax liabilities including income, payroll, and quarterly estimated taxes. We will return your original records to you at the end of this engagement. **It is your responsibility to maintain, in your records, the documentation necessary to support the data used in preparing your tax return.** You should securely store these records, along with all supporting documents, canceled checks, receipts, etc., as these items may later be needed to prove accuracy and completeness of a return. We are not responsible for the disallowance of doubtful deductions or inadequately supported documentation, nor for resulting taxes, penalties and interest. We will retain copies of your records and our work papers for your engagement for seven years, after which these documents will be destroyed.

The preparation fees will be our firm's calculated per-schedule rate. We will also be entitled to reimbursement for excessive out-of-pocket expenses (including computer processing and copying costs.) Our invoices are due and payable upon presentation. Additional services will not be performed until fees for prior services are paid in full. Any unpaid balance over 30 days will be subject to a late fee. Any accounts determined to be delinquent will be forwarded to our collection agent.

Your tax return is subject to review by the Internal Revenue Service or the state tax department. Should an examination or inquiry occur, we will be able to represent you or answer the notice for an additional fee. When a question arises or a conflict in law exists, we will use our professional judgment in resolving such issues. Whenever possible, we will resolve said questions in your favor. You will be responsible for any additional assessments by the taxing authorities, including penalties and interest. Income derived from a foreign country is a reportable event. You are responsible for meeting tax or reporting requirements of a foreign country.

Please notify our firm if you discover any information that may change your tax return or if you receive a letter from the IRS or state taxing authority.

It is your responsibility to request any federal or state extension. You acknowledge we may request an extension for your returns, if time limitations and work load dictate such immediate action by our firm. The law provides for penalties and interest for any underpaid tax, regardless of whether an extension has been filed. The extension is good only through October 15 of the filing year.

You acknowledge that verbal tax advice is tentative and not binding as the facts and circumstances may be incomplete or not fully reviewed. Our firm will provide a written tax opinion if you desire.

In consideration of the relative risks and benefits, we agree to the fullest extent of law, to limit the liability of Lauren Erion, Certified Public Accountant, and the employees, agents, insurers, shareholders, and successors in all claims, losses, and damages to the total fee for services under this annual agreement. We also agree to a one year limitation period to bring claims against the parties for errors and omissions beginning on the date the tax return or tax forms are signed, which are covered by this engagement letter.

If there are additional services that you wish to request (additional fees may apply) please list or describe below:

- 1.
- 2.

The potential for conflicts of interest exists in any engagement. In the event that we in our sole discretion believe that a conflict has arisen affecting our ability to service your account in accordance with either ethical standards of our firm or the ethical standards of our profession, we may be required to suspend or terminate our services.

We are available to discuss or clarify any part of this letter with you.

Lauren E. Erion, CPA, P.A.

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#### PRIVACY POLICY OF LAUREN E. ERION, CPA, P.A.

We do not disclose any non-public personal information about our customers or former customers to anyone, except as instructed to do so by such customers. We restrict access to non-personal information to those professionals necessary to prepare tax and other financial condition documents generated by this office or as required by law, our state licensing board, or court subpoena, or to collect delinquent accounts. We maintain physical, electronic, and procedural safeguards to protect your non-public information. We may use outside processing companies for electronic filing and back-up storage purposes. We do not use foreign third parties for preparation of your tax returns.

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#### COPIES OF YOUR TAX RETURNS

You will receive a copy of your tax return. Keep this copy in a safe place where you can find it easily throughout the year. You may need your copy for bankers, mortgage companies, etc. The fee for each additional copy of a tax return that is requested during the year will be \$20. You may request additional copies of your tax return on a CD in PDF format or in paper form. After 7 years, our work papers and files will no longer be available.

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#### IRS CP2000 LETTERS

The minimum fee to resolve tax issues presented by Internal Revenue Service CP2000 letters will be \$50. Additional fees will apply for services exceeding an initial phone call to the IRS and initial submission of documentation requested by the CP2000 letter.

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### CLIENT'S ACKNOWLEDGMENT

I have provided true, correct, and complete income and expenses information and possess written documents to support any deductions claimed. I have read and understand and hereby accept the terms and conditions of this engagement and the privacy policy of Lauren E. Erion, CPA, P.A.

Read and accepted by:

Signed: \_\_\_\_\_

Date: \_\_\_\_\_

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### 1099 INFORMATION AND BUSINESS MILEAGE

Please fill in your 2015 mileage for your rental property, farm or self-employment income.

Business miles for 2015 \_\_\_\_\_ Total miles for 2015 \_\_\_\_\_

Please answer the following questions. We will use these answers to prepare your 2015 tax return.

1. Did you make any payments in 2015 that would require you to file Form(s) 1099? \_\_\_\_\_
2. If "yes," did you or will you file all required Forms 1099? \_\_\_\_\_

Please sign and date:

\_\_\_\_\_  
Taxpayer

\_\_\_\_\_  
Date

## Questions (Page 1 of 5)

The following questions pertain to the 2015 tax year. For any question answered Yes, include supporting detail or documents.

### Personal Information:

Yes No

Did your marital status change?

\_\_\_\_\_

Are you married?

\_\_\_\_\_

If Yes, do you and your spouse want to file separate returns?

\_\_\_\_\_

If No, are you in a domestic partnership, civil union, or other state-defined relationship?

\_\_\_\_\_

Can you or your spouse be claimed as a dependent by another taxpayer?

\_\_\_\_\_

Did you or your spouse serve in the military or were you or your spouse on active duty?

\_\_\_\_\_

Have you or your spouse been a victim of identity theft and have you contacted the IRS?

\_\_\_\_\_

If Yes, furnish the 6-digit identity protection PIN issued to you by the IRS. \_\_\_\_\_ Taxpayer \_\_\_\_\_ Spouse

### Dependents:

Were there any changes in dependents from the prior year?

\_\_\_\_\_

Note: Include non-child dependents for whom you provided more than half the support

Did you or your spouse pay for child care while you or your spouse worked or looked for work?

\_\_\_\_\_

Do you have any children under age 18 with unearned income more than \$1,050?

\_\_\_\_\_

Do you have any children age 18 or student children, aged 19 to 23, who did not provide more than half of their cost of support with earned income and that have unearned income of more than \$1,050?

\_\_\_\_\_

Did you adopt a child or begin adoption proceedings?

\_\_\_\_\_

Are any of your dependents non-U.S. citizens or non-U.S. residents?

\_\_\_\_\_

### Healthcare:

Did you have healthcare coverage (health insurance, including Medicare, Medicaid, CHIP, and TRICARE) for you, your spouse, and any dependents for the entire year?

\_\_\_\_\_

If Yes, include all Forms 1095-A, 1095-B, and 1095-C. If you did not receive Forms 1095-A, 1095-B or 1095-C, attach information detailing each month you, your spouse, and your dependents had coverage.

If No, there are several exemptions from the mandate requiring health insurance coverage. Examples include membership in a healthcare sharing ministry, membership in a federally recognized Indian tribe, incarceration, membership in certain religious sects, and enrollment in certain Medicaid and TRICARE programs that do not provide minimum essential coverage. If any of these provisions apply, provide information regarding the exemption, the individual(s) (taxpayer, spouse, dependents) to which the exemption(s) may apply, and the month(s) for which the exemptions apply.

Are you claiming the exemption for someone having healthcare coverage purchased in the Marketplace and for whom you did not receive Form 1095-A?

\_\_\_\_\_

Did you receive Form 1095-A for someone for whom another taxpayer will claim the personal exemption on their tax return?

\_\_\_\_\_

Did you apply for an exemption through the Marketplace?

\_\_\_\_\_

If Yes, provide the Exemption Certificate Number. \_\_\_\_\_

Are any of your dependents required to file a tax return?

\_\_\_\_\_

## Questions (Page 2 of 5)

### Healthcare (continued):

**Yes      No**

Was anyone covered on your health insurance policy also covered on another health insurance policy for any part of the year? \_\_\_\_\_

Were you eligible for employer-sponsored healthcare coverage? \_\_\_\_\_

If you received advance premium tax credit or enrolled in coverage through the Marketplace, are married, and are filing separately from your spouse, are you a victim of domestic abuse or spousal abandonment? \_\_\_\_\_

Did you or your spouse have any transactions pertaining to a health savings account (HSA)? \_\_\_\_\_

If you received a distribution from an HSA, include all Forms 1099-SA.

Did you or your spouse have any transactions pertaining to a medical savings account (MSA)? \_\_\_\_\_

If you received a distribution from an MSA, include all Forms 1099-SA.

Did you or your spouse receive any distributions from long-term care insurance contracts? \_\_\_\_\_

If Yes, include Form 1099-LTC.

If you or your spouse are self-employed, are you eligible to be covered under an employer's health plan at another job? \_\_\_\_\_

If Yes, how many months were you covered? \_\_\_\_\_

If you or your spouse are self-employed, are you eligible to be covered under an employer's long-term care plan at another job? \_\_\_\_\_

If Yes, how many months were you covered? \_\_\_\_\_

Did you or your spouse lose your job because of foreign competition and pay for your own health insurance? \_\_\_\_\_

### Education:

Did you or your spouse pay any student loan interest? \_\_\_\_\_

Did you or your spouse withdraw any amounts from your IRA to pay for higher education expenses incurred by you, your spouse, your children or grandchildren? \_\_\_\_\_

Did you or your spouse withdraw any amounts from a Coverdell Education Savings Account or Qualified Education Program (Section 529) plan? \_\_\_\_\_

If Yes, include all Forms 1099-Q.

Did you, your spouse, or your dependents incur any post-secondary education expenses, such as tuition? \_\_\_\_\_

### Deductions and Credits:

Did you or your spouse contribute property (other than cash) with a fair market value of more than \$5,000 to a charitable organization? \_\_\_\_\_

If Yes, provide the appraisal of property contributed. An appraisal is not required for contributions of publicly traded securities or contributions of non-publicly traded stock of \$10,000 or less.

Did you or your spouse incur any casualty or theft losses? \_\_\_\_\_

Did you or your spouse make any large purchases, such as motor vehicles and boats? \_\_\_\_\_

Did you or your spouse incur any casualty or loss attributable to a federally declared disaster? \_\_\_\_\_

Did you or your spouse purchase a new alternative technology vehicle, including a qualified plug-in electric drive motor vehicle? \_\_\_\_\_

Did you or your spouse use gasoline or special fuels for business or farm purposes (other than for a highway vehicle)? \_\_\_\_\_

If Yes, provide the number of gallons or special fuels used for off-highway business purposes.  
\_\_\_\_\_ Gallons      \_\_\_\_\_ Type

Did you or your spouse install any alternative energy equipment in your residence such as solar water heaters, solar electricity equipment (photovoltaic) or fuel cells? \_\_\_\_\_

Did you or your spouse install any energy efficiency improvement or energy property in your residence such as exterior doors or windows, insulation, heat pumps, furnaces, central air conditions, or water heaters? \_\_\_\_\_



## Questions (Page 3 of 5)

### Investments:

**Yes    No**

Did you or your spouse have any debts canceled, forgiven or refinanced? \_\_\_\_\_

Did you or your spouse start or purchase a business, rental property, or farm, or acquire any new interest in any partnership or S corporation? \_\_\_\_\_

Did you or your spouse sell an existing business, rental property, farm, or any existing interest in a partnership or S corporation? \_\_\_\_\_

Did you or your spouse sell, exchange, or purchase any real estate? \_\_\_\_\_

If Yes, include closing statements.

Did you or your spouse receive grants of stock options from your employer, exercise any stock options granted to you or your spouse or dispose of any stock acquired under a qualified employee stock purchase plan? \_\_\_\_\_

Did you or your spouse engage in any put or call transactions? \_\_\_\_\_

If Yes, provide the transaction details.

Did you or your spouse close any open short sales? \_\_\_\_\_

Did you or your spouse sell any securities not reported on Form 1099-B? \_\_\_\_\_

### Retirement or Severance:

Did you or your spouse contribute to a Roth IRA or convert an existing IRA into a Roth IRA? \_\_\_\_\_

Did you or your spouse roll into a Roth IRA any distributions from a retirement plan, an annuity plan, tax shelter annuity or deferred compensation plan? \_\_\_\_\_

Did you or your spouse turn age 70 ½ and have money in an IRA or other retirement account without taking any distribution? \_\_\_\_\_

Did you or your spouse retire or change jobs? \_\_\_\_\_

Did you or your spouse receive deferred, retirement or severance compensation? \_\_\_\_\_

If Yes, enter the date received (Mo/Da/Yr). \_\_\_\_\_

### Personal Residence:

Did your address change? \_\_\_\_\_

If Yes, provide the new address.

If Yes, did you move to a different home because of a change in the location of your job? \_\_\_\_\_

Did you or your spouse claim a homebuyer credit for a home purchased in 2008? \_\_\_\_\_

Did you or your spouse withdraw any amounts from your Individual Retirement Account (IRA) or Roth IRA to acquire a principal residence? \_\_\_\_\_

Are your total mortgages on your first and/or second residence greater than \$1,000,000? \_\_\_\_\_

If Yes, provide the principal balance and interest rate at the beginning and end of the year.

Did you or your spouse take out a home equity loan? \_\_\_\_\_

Did you or your spouse have an outstanding home equity loan at the end of the year? \_\_\_\_\_

If Yes, provide the principal balance and interest rate at the beginning and end of the year.

Are you claiming a deduction for mortgage interest paid to a financial institution and someone else received the Form 1098? \_\_\_\_\_

Did you or your mortgagee receive mortgage assistance payments? \_\_\_\_\_

If Yes, include all Forms 1098-MA.

## Questions (Page 4 of 5)

### Sale of Your Home:

Yes No

Did you sell your home?

\_\_\_\_\_

Did you receive Form 1099-S?

\_\_\_\_\_

If Yes, include Form 1099-S.

Did you or your spouse own and occupy the home as your principal residence for at least two years of the five-year period prior to the sale?

\_\_\_\_\_

Did you or your spouse ever rent out the property?

\_\_\_\_\_

Did you or your spouse ever use any portion of the home for business purposes?

\_\_\_\_\_

Have you or your spouse sold a principal residence within the last two years?

\_\_\_\_\_

At the time of the sale, the residence was owned by the: \_\_\_\_\_ Taxpayer \_\_\_\_\_ Spouse \_\_\_\_\_ Both

### Gifts:

Did you or your spouse make any gifts, including birthday, holiday, anniversary, graduation, education savings, etc., with a total (aggregate) value in excess of \$14,000 to any individual?

\_\_\_\_\_

Did you or your spouse make any gifts of difficult-to-value assets (such as non-publicly traded stock) to any person regardless of value?

\_\_\_\_\_

Did you or your spouse make any gifts to a trust for any amount?

\_\_\_\_\_

Did you or your spouse have a life insurance trust?

\_\_\_\_\_

Did you or your spouse assist with the purchase of any asset (auto, home) for any individual?

\_\_\_\_\_

Did you or your spouse forgive any indebtedness to any individual, trust or entity?

\_\_\_\_\_

### Foreign Matters:

Did you or your spouse perform any work outside of the U.S. or pay any foreign taxes?

\_\_\_\_\_

Were you or your spouse grantor or transferor for a foreign trust, have any interest in or a signature authority over a bank account, securities account or other financial account in a foreign country?

\_\_\_\_\_

Did you or your spouse create or transfer money or property to a foreign trust?

\_\_\_\_\_

Did you or your spouse own any foreign financial assets?

\_\_\_\_\_

## Questions (Page 5 of 5)

### Miscellaneous:

Yes No

Did you or your spouse pay in excess of \$1,000 in any quarter or \$1,900 during the year for domestic services performed in or around your home to individuals who could be considered household employees?

\_\_\_\_\_

\_\_\_\_\_

Did you or your spouse receive unreported tip income of \$20 or more in any month?

\_\_\_\_\_

\_\_\_\_\_

Have you or your spouse received a punitive damage award for damages other than for physical injuries or illness?

\_\_\_\_\_

\_\_\_\_\_

Did you or your spouse engage in any bartering transactions?

\_\_\_\_\_

\_\_\_\_\_

Were you or your spouse notified by the IRS or other taxing authority of any changes in prior year returns?

\_\_\_\_\_

\_\_\_\_\_

For any trust that you or your spouse created or are trustee, did any beneficiaries, grantors, or trustees die or move?

\_\_\_\_\_

\_\_\_\_\_

**Additional state pages have been included at the back of the organizer and should be reviewed.**