Day's Tax Associates

DATE:	
CLIENT(S):	
BEST PHONE / EMAIL: _	

Subject: Preparation of Your Tax Returns

Valued Tax Client(s),

Thank you for choosing our firm to assist you with your income taxes. This letter confirms the terms of our engagement with you and outlines the nature and extent of the services we will provide. We will prepare your federal, state and local income tax returns. We will depend on you (or your management in the event of a business) 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 available to help you collect the data required for your return. The Organizer may help you avoid overlooking important information. By using it, you will contribute to the 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 returns. 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 inform you of any material errors, fraud, or other illegal acts we discover.

The law imposes penalties when taxpayers underestimate their tax liability. Call or email 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 is based on the time and forms required at standard billing rates plus out-of-pocket expenses. Invoices are due and payable upon 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 to you at the end of this engagement. Store these records, along with all supporting documents, in a secure location. We retain mandatory copies of your records and our work papers from your engagement for up to seven years, after which these documents will be destroyed.

If you have not selected, or are not permitted, to e-file your returns with our office, you will be solely responsible for filing the returns with the appropriate taxing authorities. Review all tax-return documents carefully before signing them. Our engagement to prepare your tax returns will conclude with the delivery of the completed returns to you, or with e-filed returns, with your signature and our subsequent submittal of your tax return.

For our records, please answer the two questions below as required by the IRS.

- 1. _____ YES or _____ NO: Did the taxpayer or spouse have any interest in or authority over any foreign account or trust?
- 2. _____ YES or _____ NO: At any time during the tax year, did the taxpayer or spouse receive (as a reward, award, payment) or sell, exchange, give or otherwise dispose of a digital asset (or any financial interest in a digital asset)?

IMPORTANT NOTICE to BUSINESS CLIENTS re: Corporate Transparency Act/Beneficial Ownership Reporting

Assisting you with your compliance with the Corporate Transparency Act ("CTA"), including beneficial ownership information ("BOI") reporting, is not within the scope of this engagement. You have sole responsibility for your compliance with the CTA, including its BOI reporting requirements and the collection of relevant ownership information. We shall have no liability resulting from your failure to comply with CTA. Information regarding the BOI reporting requirements can be found at https://www.fincen.gov/boi. Consider consulting legal counsel if you have questions regarding the applicability of the CTA's reporting requirements and issues surrounding the collection of relevant ownership information.

To affirm that this letter correctly summarizes your understanding of the arrangements for this work, sign this letter in the space indicated and return it to us so we may begin your tax preparation and filing.

Thank you for the opportunity to be of service. If you have any questions, contact our office at daysltd@daysltd.com or (419) 684-5425.

Sincerely,

Day's Tax Associates

Accepted By:

Taxpayer Signature (or Tax Matters Member of Business Entity)

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

Privacy Policy: It has always been the policy of Day's Tax Associates to keep all the information that we collect from you confidential from all sources. We restrict access to all non-public personal information about you to members of our firm who need to know that information to provide services to you. We do collect non-public personal information about you from the following sources: 1) Information we receive from you on tax preparation organizers, worksheets, Federal, State and Local tax reporting forms, and from other documents we use in tax preparation or other financial and related services. 2) Information about your transactions with us, our affiliates and others. 3) Information we may receive from outside agencies such as banks or brokerage houses. 4) We do not disclose any non-public personal information about our clients or former clients, except as permitted, required, or approved by you in writing as follows: a) Requirements to comply with federal, state, or local licensing rules. c) Requirements to disclose information in response to legal subpoenas. d) Items you permit or request us to disclose, as authorized by you in writing. e) Information that you authorize us to disclose by signing this engagement letter to electronically file your tax return, when applicable.

HELPFUL ITEMS FOR OUR FIRM:

Did you move during the tax year? If so, please provide the new address and date of move:

Did you, your spouse, or any dependents receive an IRS assigned PIN number? WE NEED THESE TO FILE!!!

Has your direct deposit changed? If so, please provide routing and account numbers:

Have you and/or spouse renewed driver's license in the tax year? If so, please provide new issue & expiration dates:

Did you add or need to remove any dependents in the tax year (18 and under or 19 - 23 college students):

DAYS Tax Associates . 6714 Parker Rd . Castalia . (419) 684.5425

ANNUAL PERSONAL TAX ORGANIZER

Name of Client(s): _____

Did taxpayer or spouse receive a PIN # from IRS: ______

Common Income Items:	Common Deductions / Credits:		
W2 Wage Statement	1098 Mortgage and Home Equity		
1099 INT Interest Income	Property Taxes		
1099 DIV Dividend Income	Sales Tax on Major Purchase		
1099 B Sale of Stocks, Bonds, Funds	State or Local Taxes Paid		
1099 G Unemployment Income	Charitable Donations (cash or check)		
1099 G State or Local Refund	Charitable Donations – noncash		
1099 R Pension / Retirement Income	Out of Pocket Medical Costs		
1099 SSA Social Security Income	Contributions to HSA		
1099 RRB Railroad Pension	Contributions to Retirement Accounts		
1099 MISC Miscellaneous Income	1098 E Student Loan Interest		
1099 NEC Self Employment Income	1098 T College Tuition*		
W2G Gambling Income	Daycare / Preschool Costs		
Rental Income (see our organizer)	Energy Related Home Upgrades		
Small Business Income (see our organizer)	Clean Energy Vehicles		
Royalty Income	Gambling Losses (capped at winnings)		
Jury Pay	Alimony Paid Out**		
Alimony Payments Received**	* 1098T and/or 1095A may be online.		
K1 Income (business . investments . inheritance) **Alimony began prior to 2019			
1095 A* Healthcare Subsidy from Marketplace (aka Obamacare)			
Sale or Exchange of Cryptocurrencies (sales date and proceeds . purchase date and cost)			

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ANNUAL SMALL BUSINESS ORGANIZER

Name and EIN of Business: _____ \$_____ Gross Income: \$____ Refunds: Materials Purchased: \$_____ Year End Materials Inventory: \$_____ Advertising: \$_____ Subcontractors: \$_____ Insurances (describe): \$_____ Interest Paid: \$ Legal & Professional Fees: \$_____ \$ Rent: Supplies: \$_____ Repairs & Maintenance: \$_____ \$_____ Taxes Paid: \$_____ Travel: \$_____ Telephone & Internet: Utilities: \$ _____ Other (describe): \$_____ **Business Mileage:** *Major purchases related to business (item, cost, month of purchase):

\$_____

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ANNUAL RENTAL ORGANIZER

Property Address:	
Rental Income:	\$
Advertising:	\$
Auto Mileage:	
Cleaning / Mtc.:	\$
Management Fees:	\$
Insurance:	\$
License / Permit:	\$
Legal / Professional Fees:	\$
Mortgage Interest:	\$
Pest Control:	\$
Lawn & Snow:	\$
Repairs*:	\$
Supplies:	\$
Property Tax:	\$
Utilities:	\$
Other (describe):	\$

*Repairs should not include major purchases such as remodels, new windows, roof, HVAC, etc... please list major purchases below (item, cost and month):

\$_____\$