DataView TAX SERVICE INC.

4379 Cleveland Road
Wooster, Ohio 44691
(330) 345-8635
or (800) 852-0313

Dear Client,

Here are the forms you will need for your upcoming tax appointment:

- Please fill out the Blue Client Information Sheet, Page 1 and Page 2, completely. Be sure to read each question carefully.
- On the Tax Credit Questionnaire, answer Yes, No, or N/A to all questions.
- Please complete the Notice 1444 Substitute form if you have misplaced your Economic Impact Payment Notice 1444. Just enter zeros if you didn't receive a payment.
- I have also included information about our "Sleep At Night" IRS Protection Guarantee Program-please read this and determine if you want to take advantage of this program.

If you have any questions as you are filling out these forms, please make a note and we will assist you when you come in. There may also be a couple additional forms that we will have you sign upon your arrival at the office.

Along with the completed forms, don't forget to bring to your appointment:

- Your tax information
- Current ID for taxpayer and spouse
- If you are choosing direct deposit to receive your refund, bring a voided check

We look forward to meeting with you soon!

Thanks,

Terry M. Sustar

Terry M. Sustar, EA

Please Print

DataView TAX SERVICE

Office Use Only
Disclosures?
YES NO
Init:

2020 TAX YEAR CLIENT INFORMATION

I. PRIMARY TAXPAYER INFORMATION

PRIMARY TAXPAYER NAME (**Usually husband**)
(record name as shown on Social Security card):

____
(First Name) (Middle) (Last)

Social Security #: __________-________-___________

Date of Birth: MM_____DD______YEAR___________

Occupation: ___________________________________

Day Ph # (_____) _________________ ☐Work ☐ Home

Eve Ph # (_____)_________________ ☐Work ☐ Home

Cell Phone # (_____)________________Provider_________

Email Address: _______________________________

Your email address will never be sold or rented out. It is for our internal use only.

II. SPOUSE INFORMATION

SPOUSE NAME (**Usually wife**)
(record name as shown on Social Security card):

____
(First Name) (Middle) (Last)

Social Security #: __________-________-___________

Date of Birth: MM_____DD______YEAR ___________

Occupation: ___________________________________

Day Ph # (_____) __________________ ☐Work☐Home

Eve Ph # (_____)__________________ ☐Work☐Home

Cell Phone # (_____)______________Provider_________

Email Address: _______________________________

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III. STATUS (circle one): Single / Head of Household / Married / Married Filing Separate / Separated / Widowed

IV. ADDRESS

STREET ADDRESS: ____

CITY____STATE____________ZIP___________________________

COUNTY_______________ SCHOOL DISTRICT______________ **DO YOU LIVE IN CITY LIMITS? (Circle One): YES NO**

V. DEPENDENTS (Children & Others)

Please complete the following as applicable:

Name (as shown on SS card)	Social Security Number	Relationship to taxpayer	# Months lived in home during 2020	Date of Birth	Claiming for 2020? Y or N

Did You, Your Spouse, & Your Dependents have Health Insurance all 12 months of 2020? YES / NO

If yes was it purchased through www.HealthCare. Gov (The Exchange) **YES / NO**

How do you want to receive your Refund:

☐ **Fees Taken Out of Check** (**extra $ fee**) **OR** ☐ **Direct Deposit** (**Need voided check**) **OR** ☐ **IRS Mail It To Me**

VI. SIGNATURE

ALL INFORMATION I HAVE GIVEN IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE. I ACKNOWLEDGE THAT I HAVE SIGNED CONSENT TO USE AND CONSENT TO DISCLOSE FORMS AND THEY WILL REMAIN ON FILE. THEY ARE IN EFFECT UNTIL I NOTIFY YOU IN WRITING OR AM NO LONGER YOUR CLIENT. IF I CHOOSE NOT TO COMPLETE THE RETURN AFTER TAX INFORMATION HAS BEEN ENTERED INTO THE COMPUTER BY A TAX PREPARER, I UNDERSTAND THAT I WILL BE CHARGED A $50.00 CONSULTATION FEE.

SIGNATURE: ____Date__________________

Turn Form Over For More Information

PLEASE READ AND ANSWER EVERY QUESTION

If you or your spouse at any time during 2020 had any of the following, please circle Yes or No - and inform your preparer:

	Circle:		If yes, please provide:
Can you be claimed as a dependent on someone else's tax return?	**YES**	**NO**	
Did you make any ROTH IRA (other than at work)contributions in 2020?	**YES**	**NO**	
Do you or your spouse have any *FOREIGN BANK* ACCOUNTS?	YES	NO	
Do you use or own Bitcoin or any Crypto currency?...	YES	NO	
Did you receive a 1095-A from the Healthcare Market Place?	YES	NO	

Did you purchase anything on the internet and **not** pay sales tax on the purchase?	YES	NO	Amount $_______
Pay college tuition expenses? …………………………………………………	YES	NO	All 1098-T's
Sell stock, mutual fund, or other securities?	YES	NO	All 1099-B forms
Own your own business or were you self-employed? …………………………...	YES	NO	Income Statemnt & All 1099-Misc
Use a portion of your home exclusively for business? …………………………...	YES	NO	Total Sq ft of house and Sq ft of exclusive office space
Do you own rental property?	YES	NO	
Receive royalties? ………………………………………………………………...	YES	NO	All 1099 forms
Sell your home? …………………………………………………………………..	YES	NO	All 1099-S forms
Sell any other property (equipment, land, etc.)? …………………………………	YES	NO	
Did you make estimated tax payments?	YES	NO	
Have an interest in a partnership, S-corporation, estate or trust?	YES	NO	All K-1 forms
Operate a farm? …………………………………………………………………..	YES	NO	
Receive installment payments on property sold?	YES	NO	
Have income as a minister? ...……………………………………………………	YES	NO	

Did you move into or out of any other city in 2020? …... YES/ NO

Date Moved: ____/____/________

Did you move into or out of any other states in 2020? .... YES/ NO

Date Moved: ____/____/________

Questions for possible Tax Credits:

	Question	Yes	No	N/A
1.	Are you providing us with all the income and expense information that you have?	☐	☐	
2.	Was your and your spouse's main home in the US for more than half the year?	☐	☐	
3.	Were you or your spouse a non-resident alien for any part of the year?	☐	☐	
4.	Could you or your spouse be a qualifying child of another person for the year?	☐	☐	
5.	Are you or your spouse eligible to be claimed as a dependent on anyone else?	☐	☐	
6.	If you qualify for Head of Household, or any of the following credits: Earned Income Credit, Child Tax Credit, Additional Child Tax Credit, or American Opportunity Tax Credit, can you provide documentation (Child's Birth Certificates, 1098-T's, proof of address, etc,), if needed by IRS, to verify that you are entitled to Head of Household status and/or to claim the dependents?	☐	☐	☐
7.	Do you understand that you may not claim the EIC if you haven't lived with the child for over half the year, even if you supported the child? (child support)	☐	☐	☐
8.	Were any credits disallowed or reduced in a prior year?	☐	☐	☐
9.	Is there a Form 8332 Release of Exemption by Custodial Parent? 9a. If yes, has the Form 8332 release been canceled? Yes ☐ No ☐	☐	☐	

Tie Breaker Rules: ***<u>Ignore this rule if you file a joint return.</u>***

Only one person can use the same qualifying child. If a child is the qualifying child of more than one person, only one person can claim the child as a qualifying child for any of the following tax benefits:

- EITC
- Dependency Exemption for the Child,
- Child tax credit,
- Head of household filing status,
- Credit for child and dependent care expenses, and
- Exclusion for dependent care benefits.

We have reviewed and understand the tie breaker rules. ☐ ☐ ☐

Taxpayer Signature:___________________________________Date**:** ___________

Spouse's Signature:___________________________________ Date:_ ______________________

DataView TAX SERVICE INC.

Now can include corrected returns!!

What if the IRS makes a mistake?
Or your Bank, City or Employer does?
What if you just simply *forget* a 1099 or w2?

Even if *you or someone else* makes a mistake that causes you to get a letter or notice from the IRS, State, or City - you're covered with our IRS Protection Guarantee!!*

Sleep At Night Protection!!

Any written response needed by you for the tax year is covered -- *even if you're not audited*. We'll respond for you to the **IRS, the State, and/or the City** for the covered tax year that we prepared your return. We will write the necessary letters and prepare them for your signature - ready to mail - including addressed envelopes. Any corrected return preparation can be covered now too! ***You don't have to deal with the IRS!***

Also, if your return has already been completed for the year, but you receive or forget about *another* tax statement (1099, w2, etc), any amended return that needs done can be covered too!

Our clients call this our "Sleep at Night" guarantee program. And, best of all, you can get the IRS Protection Guarantee Program for as little as 7 cents a day!!!**

The IRS Protection Guarantee Program Costs:

Type of Client		IRS Protection**
Personal	A client that has W2's, interest or dividends, pensions, Social Security income, etc.	Letters Only: — $ 30.00 Letters & Any Corrected Tax Forms Needed: — $ 60.00
Small Bus. Or Rentals	A client who, in addition to any W2's has a small business with 1 Sch C, 4 rentals or fewer with Sch E, Royalty Income, etc.	Letters Only: — $ 55.00 Letters & Any Corrected Tax Forms Needed: — $ 115.00
Others	Ask Your Preparer For More Info	

**Of course, if anything we do causes a letter or needs a response, you're always covered.*

***The cost of the IRS Protection Guarantee Program is paid one-time annually and covers tax work done for the current tax year. These charges are in addition to your regular tax preparation fees & charges and are paid at the time of your tax preparation.*

Ask your tax preparer to include the *IRS Protection Guarantee Program* on your return this year so you can "Sleep at Night" too!!

General Engagement Letter for Individual Tax Return Preparation

This letter is to inform you, the taxpayer, of the services we will provide you, and the responsibilities you have for preparation of your tax return.

Tax Return Preparation

- We will prepare your federal and state tax returns based on information you provide. Services for preparation of your return do not include auditing or verification of information provided by you.
- This engagement does not include any audit or examination of your books or records. In the event your return is audited, you will be responsible for verifying the items reported.
- The tax return preparation fee does not include bookkeeping.
- Fees charged for tax return preparation do not include audit representation or preparing materials to respond to correspondence from taxing authorities.
- Preparation fees do cover limited assistance and consultation during the year.
- The engagement to prepare your tax returns terminates upon delivery of your completed returns and original documents to you. Please store your supporting documents and copies of your tax returns in a secure place for at least seven years.

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.
- **We can withdraw as your preparer, without penalty or cost, if you are deemed to be non-compliant to the above.**

Signatures

By signing below, you acknowledge that you have read, understand, and accept your obligations and responsibilities and that you understand our responsibilities in preparing your tax returns as explained above. You acknowledge that you have read and signed both the Consent to Use and the Consent to Disclose forms and they are in effect until you notify us in writing or you are no longer our client. For a joint return, both taxpayers must sign.

- 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.

Taxpayer *Spouse* *Date*

Privacy Policy. The nature of our work requires us to collect certain nonpublic personal information about you from various sources. 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 any third party without your express 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. Please contact us with any questions regarding our privacy policy.

Notice 1444 Substitute Information Form

I/We have lost or misplaced our Notice 1444 from my Economic Impact Payment(s) for 2020.

The amounts of our Economic Impact Payment checks are:

	Joint	OR	Taxpayer	Spouse
1st - Stimulus Check	$__________		$_________	$_________
2nd - Stimulus Check	$__________		$_________	$_________

(2nd check could have come Jan of 2021.)

These checks are not taxable but we need to have the amounts. Check your bank accounts for the correct amounts you received.

____
Taxpayer Printed Name

_______________________________________Date ___/___/_____
Taxpayer Signature

____
Spouses Printed Name

_______________________________________Date ___/___/_____
Spouses Signature