



ENGAGEMENT LETTER FOR TAX CLIENTS

WELCOME: Thank you for allowing Administrative Bookkeeping Co., Inc. (AdminBooks) to prepare your tax return. We appreciate your business and will work hard to make sure you are satisfied with our services. Our goal is to get you the best result possible and provide you with financial services that set us apart from any other preparer.

This letter will outline what you can expect from us as well as what we need from you to provide you with excellent service and accurate results; it will also cover our policies, procedures and services. The signatures you provide will be a record of your understanding of the letter and your selection of AdminBooks to prepare your returns.

RESPECT FOR YOUR PRIVACY: AdminBooks knows your privacy is important to you, and we recognize that the information we must collect from you to prepare your tax return is sensitive and personal. As a result, we do not disclose any information about you to anyone and we maintain safeguards to ensure this protection. For more details, please contact us.

It is important you know that Federal law does not extend the Accountant-Client privilege with respect to tax preparation services. What this means is that if we are questioned by any Federal and/or State authorities, we are required to provide the information requested.

TAX SERVICES – OUR PART, YOUR PART:

Our commitment to you: AdminBooks will prepare your tax return(s) in a professional manner for a reasonable price. For our new Clients, we do a thorough interview to learn the details of your financial life that will affect your taxes. For our returning Clients, we update current information and ask questions of any changes that might have occurred during the year.

AdminBooks uses advanced technology in preparing your return. Our software provides us with constant tax updates and allows us to e-file your return. This relieves you from the hassle of mailing in your return and also provides a faster refund. Our software also allows us to provide you with an electronic copy of your return via PDF format.

We will maintain copies of your submitted documents for the Federal period of the statute of limitations – 3 years. After that, your files and documents will be destroyed. It will be your responsibility to maintain any records that may have an impact on your future. All original documents will be returned to you after the tax return is prepared.

Our work does not include any procedures to discover fraud, theft, embezzlement or irregularities, should any exist. We will not audit or verify the data you submit, although we may ask you to clarify or furnish us with additional data.

AdminBooks will use its professional judgment in resolving questions in your favor where the tax law is unclear or where there may be conflicts between the taxing authorities' interpretation of the law and other supportable positions. We will explain the possible positions that may be taken on your return. AdminBooks will follow whatever position you request, as long as it is consistent with the law. If a tax authority should later contest this issue, there may be an assessment of additional tax, interest and penalties. We assume no liability for any such assessment. AdminBooks is not responsible for the

governmental authorities' disallowance of doubtful deductions or deductions unsupported by adequate documentation or for resulting taxes, penalties and interest.

Your commitment to us: Our fee structure assumes that you gather your tax information in an orderly manner and you complete ALL documents given to the best of your ability. Your use of the forms provided will assist us in keeping our fee to a minimum.

We will ask you for supporting documents (W-2's, 1099's, etc.) that will help us accurately record your income, credits and deductions. You agree to provide this needed information to the best of your ability.

As you can imagine, the weeks leading up to the tax deadline are very busy for us. We operate on a first-in/first-out basis. If you want to file your return by the deadline, **we require that you provide all documentation 30 days prior to any tax deadline** (March 15th, April 15th, September 15th or October 15th.) If you do not submit the requested documents by this 30-day deadline AND wish to file the return by the IRS deadline, AdminBooks may impose **a rush fee of \$150** in addition to your tax prep fee. No work will begin until ALL documentation is received.

If you need more time to organize your documentation, you can request an extension to the IRS. In doing so, you will avoid paying any failure to file penalties. However, if you owe taxes, you will be charged interest and penalties for filing after the initial due date. We encourage mailing an estimated tax payment before the deadline. If you would like AdminBooks to file the extension on your behalf, you will be charged a fee of \$75. A written request for the extension is all that is needed to show your consent.

To our business Clients: You are required to keep adequate records regarding your business. Please understand that "adequate records" is a diary or log book that gives details about expenses. Understand that a log is required for travel, meals, entertainment, vehicles and miles, computers, home office, gifts, sales promotions and education. This log includes date, place, and purpose with the name of the person you may have purchased the item for. If you lack receipts for these expenditures, then the IRS will not allow the deduction. The IRS will almost always ask questions about bartering transactions. It is your responsibility to have all the receipts and documentation required.

GUARANTEES:

AdminBooks guarantees that if you are audited for a return we prepared, we will assist you by answering questions about how we arrived at the amounts in your return. This agreement is not for assistance to neither represent you in an audit nor advise you on how to represent yourself.

If you owe penalties or interest due to our error on the return we prepared, we will pay those penalties and interest and you would owe the tax due. However, this guarantee does not apply to the penalties and interest due for information you did not supply to us or inaccurate information you supplied. In this case you will owe the taxes, penalties and interest.

If you are audited by the Federal or State agency, please know that the IRS shares information with the FTB and vice versa. Since AdminBooks cannot control that the Client replies timely or pays timely, AdminBooks will only pay penalties and interest up to the date of the first notification from the governmental authority if AdminBooks made an error as described above.

AdminBooks is not responsible for the Client's failure to file or resolve the issue. AdminBooks will not be responsible for any technical difficulties. This would include computer problems with electronically filing or returns lost in the mail. If returns are e-filed three business days prior to the deadline, we can address and correct the situation. Returns electronically file or mailed after this date are not guaranteed. Also, the

Client assumes responsibility if their bank does not permit a direct deposit of joint refunds into an individual bank account.

It is your responsibility to carefully examine and approve your completed tax return before signing it. In the event of an audit or other inquiry, you may be requested to produce documents, records, or other evidence to substantiate the items of income and deduction shown on your tax return. AdminBooks does not maintain copies of your original documents. It is your responsibility to retain possession of your completed tax return and all documents and records substantiating this information for a period of seven years and provide such information, if required, for an audit examination.

PAYMENT: Our fees are based upon a combination of our standard rates for the type of forms and schedules required to be filed, the time incurred to prepare the return, how organized you provide the data, and out-of-pocket expenses. If business clients do not provide the appropriate financial statements, AdminBooks will charge for bookkeeping services. Your tax preparation fee does not cover additional services requested by you, such as tax planning, projections, research, responding to notices, drafting letters to lenders, IRS/FTB correspondence, or audit representation. AdminBooks will charge the client the hourly rate of \$165/hour. The entire tax preparation fees will be due in full prior to filing your return electronically.

If the return will be mailed, payment is due when you pick up your return or before AdminBooks mails the return to you. If payment is received with non-sufficient funds, a \$30 bank fee will be added, and AdminBooks has the right to be reimbursed for any cost of collection of funds. If for any reason the payment for our invoice has not been received within 10 days of receipt, AdminBooks may impose a 12% financial charge annually.

Additional fees may be charged if the Client submits information several times (changing the same numbers previously submitted). AdminBooks is in no way responsible for the origin or amount of any of the figures that you supplied. For efficiency purposes, we request that clients provide us electronic copies of their information. If AdminBooks needs to copy/scan any documents provided, we will charge the client an additional \$25 fee. There is an additional fee for mailing original documents of \$25.

MISCELLANEOUS: In order to “go paperless”, it will NOT be our policy to mail out a hardcopy of your return. Instead we will provide access to a secure client portal where you will have 24/7 access to your tax return information. If you would prefer a hardcopy in addition to the portal access, please let us know in advance, and we would be glad to provide the hard copy for an additional assembling/printing fee of \$25. Electronic copies are provided free of charge. If the Client selects or is required to paper file, there is a \$50 fee per year fee.

If for any reason the Client chooses not to have AdminBooks finalize the return, the Client will be liable for time (\$165/hour) and expenses as of the date of notification. The Client will be responsible in paying AdminBooks within 10 days of receiving the invoice. All original documents will be returned to the Client. Any notes, calculations or a copy of the tax return will be given to the Client after payment is received.

In connection with this engagement, we may communicate with you or others via email transmission. As emails can be intercepted and read, disclosed, or otherwise used or communicated by an unintended third party, or may not be delivered to each of the parties to whom they are directed and only to such parties, we cannot guarantee or warrant that emails from us will be properly delivered and read only by the addressee. Therefore, we specifically disclaim and waive any liability or responsibility whatsoever for interception or unintentional disclosure of emails transmitted by us in connection with the performance of this engagement. In that regard, you agree that we shall have no liability for any loss or damage to any

person or entity resulting from the use of email transmissions, including any consequential, incidental, direct, indirect, or special damages, such as loss of revenues or anticipated profits, or disclosure or communication of confidential or proprietary information.

By signing this agreement, clients agree to communicate with AdminBooks whether or not ALL the persons listed on the tax return were covered by health insurance as well as disclose which months of the tax year there was or was not coverage. With the new Affordable Care Act rules, clients should expect an increase in tax preparation fees.

Except for matters that fall in the jurisdiction of small claims court, if any disputes cannot be resolved between AdminBooks and the Client, AdminBooks may choose to contact the County of Santa Clara's Dispute Resolution Program: www.sccdrrps.org. With mediation, a neutral third party can help communicate and provide a resolution which can usually be more beneficial for all parties than the judgment of a court. And, damages will not exceed the total contract amount.

This agreement is governed by the laws of California, in the county of Santa Clara and the city of Morgan Hill. Signing below certifies that Administrative Bookkeeping Co., Inc. assisted you in preparing your tax return and demonstrates your understanding of this document. If filing a joint return, both spouses MUST sign below.

We are honored to have you as a client and hope this will begin a long and pleasant business relationship.

Every applicable field (If married filing jointly we need email addresses and phone numbers for BOTH spouses) must be filled out BEFORE we begin working on your tax return.

The information is REQUIRED even if there have been no changes or you provided it previously.

Client Signature Printed Name Date Signed Birth Date

Address

Email Address Phone Number Mobile Business Home
Check box if you would NOT like to receive text reminders

Spouse Signature Printed Name Date Signed Birth Date

Email Address Phone Number Mobile Business Home
Check box if you would NOT like to receive text reminders

Payment Authorization Form – Individual Tax Return

Terms and Conditions

I authorize Administrative Bookkeeping Company, Inc. to make an automatic draft/charge on my credit card OR bank account for services as described by the Service Agreement.

My Authorization will remain in effect until the terms of the agreement are completed. I understand that I can cancel the services at any time with a 30 day advance *written* notice.

Admin Books will keep my credit card or bank information confidential. The charge on my credit card and/or bank account will show from Administrative Bookkeeping Co., Inc.

I agree to pay the prevailing service fee plus any merchant account charge back fees levied against Admin Books in the event a charge is returned to Admin Books for any reason.

General Information

Name:		
Address:	Phone:	
	Email:	
Signature:		Date:

Choose ONE Payment Method Below

<u>CREDIT CARD PAYMENT</u>		
Credit Card Type: <input type="checkbox"/> Visa <input type="checkbox"/> MasterCard Expiration Date: _____ Validation Code: _____		
<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>		
Amount: \$ _____ Frequency: <input type="checkbox"/> One-Time <input type="checkbox"/> Monthly		
<u>BANK ACCOUNT PAYMENT</u>		
Bank Account Type: <input type="checkbox"/> Personal <input type="checkbox"/> Business <u>AND</u> <input type="checkbox"/> Checking <input type="checkbox"/> Savings		
Account Number: _____ Routing Number: _____		
Amount: \$ _____ Frequency: <input type="checkbox"/> One-Time <input type="checkbox"/> Monthly		



Client Name _____

Tax Organizer

**If AdminBooks ONLY prepares your business tax return, proceed to the last section of this document

Mark filing status as of 12/31:

- Single
- Married Filing Jointly
- Married Filing Separate
- Head of Household
- Qualified Widow(er)
- Need Advice? _____

Did your address change during the year?

- Yes—list new address: _____
- No

If your address changed, was your move due to a job change?

- Yes
- No

If your move was due to a job change, did you have any moving expenses?

- Yes---provide amount spent on:
 - Storage: \$ _____
 - Travel: \$ _____
 - Lodging: \$ _____
 - Meals en route: \$ _____
 - Number of miles from **old home** to **old work** location: \$ _____
 - Number of miles from **old home** to **new work** location: \$ _____
- No

Did you live or work outside the state you call home last year for an extended period of time?

- Yes
- No

What is your occupation?

Taxpayer: _____

Spouse: _____

Are you or your spouse blind?

- Yes—indicate taxpayer or spouse: _____
- No

Are you or your spouse permanently and totally disabled?

- Yes---indicate taxpayer or spouse: _____
- No

Could you be claimed as a dependent on another person's tax return last year?

- Yes
- No

Do you want your return e-filed? Federal & CA law required paid tax preparers to file returns electronically.

- Yes
- No

Did you make estimated tax payments during 2016?

- Yes—please fill in chart below
- No

Federal		State	
Date	Amount	Date	Amount

If you receive a **refund**, do you want the money directly deposited to your bank account?

- Yes—provide routing # _____, account #: _____
Is this a checking account or a savings account? _____
- No

If you **owe** taxes, would you like to have the payment paid electronically?

- Yes— provide routing # _____, account #: _____
Is this a checking account or a savings account? _____
- No

If you owe estimated tax payments for the upcoming year, would you like the payments to be automatically withdrawn from your bank account? Drafts occur in April, June, Sept., and Jan.

- Yes
- No

Does AdminBooks have your permission to deduct the tax preparation fees from your bank account?

- Yes
- No

If you have an overpayment of last year's taxes, do you want the excess applied to this year's estimated tax instead of being refunded?

- Yes
- No

Did you receive a letter or were you audited by either the Internal Revenue Service or the State taxing agency?

- Yes—upload letter along with your supporting tax documents
- No

At any time, were you required to make a tax payment electronically to the State of California?

NOTE: if you have ever been required to pay CA taxes through the FTB website and owe CA taxes this year, you are required to make the payment electronically going forward. New clients, please alert AdminBooks if this applies to you.

- Yes
- No

If you are a **returning** client, list only the names of your **dependents** and income amount. **New Clients**-please fill out each column for all dependents

Child's Name	Relationship	Date of Birth	Social Security Number	Income Amount	Full time Student?	Months in Home

Do any of your dependents need to file a tax return?

- Yes
- No

Will AdminBooks be completing your dependent's return?

- Yes
- No

Did you pay for day care expenses (including preschool) to allow you to work or attend school full time?

- Yes
- No

If yes, please complete for **each** child:

Child's Name	Name of Daycare Provider	Address	Phone Number	SSN or EIN of Provider	YTD Amount Paid

Did you receive W-2 income this year?

- Yes—upload W-2(s)
Indicate number of W-2s: _____
- No

Did you receive bank interest income this year?

- Yes—upload 1099-INT(s)
Indicate number of 1099-INT(s): _____
- No

Did you receive dividend income this year?

- Yes—upload 1099-DIV(s)
Indicate number of 1099-DIV(s): _____
- No

Did you receive non-employee income (independent contractor) this year?

- Yes—upload 1099-MISC(s)
Indicate number of 1099-MISC(s): _____
- No

Did you sell stocks or have any stock options?

- Yes—upload 1099-B(s)
Indicate number of 1099-B(s): _____
- No

Did you receive a distribution from a retirement plan?

- Yes—upload 1099-R(s)
Indicate number of 1099-R(s): _____
- No

Did you transfer or rollover any amount from one retirement plan to another?

- Yes—upload 1099-R(s)
- No

Have you already made a contribution to a retirement account this tax year?

- Yes—indicate how much per taxpayer/spouse, and what type of retirement account:

- No

If you haven't made a contribution to a retirement account yet, do you want to?

- Yes—indicate type of account: _____

Did you convert all or part of your traditional IRA, SEP, or SIMPLE IRA to a Roth IRA?

- Yes—indicate amount and date converted: _____
- No

If you were 70 ½ years of age or older, did you withdraw the required minimum distribution amount from your retirement plan?

- Yes
- No

Are you a shareholder or a beneficiary from an S-Corp, Partnership, or Trust?

- Yes—upload K-1(s)
- Indicate number of K-1(s): _____
- No

Did you receive Social Security Benefits?

- Yes—upload 1099-SSA(s)
- No

Did you receive Unemployment Compensation?

- Yes—upload 1099-G(s)
- No

Did you receive a state tax refund?

- Yes—upload 1099-G
- No

Did you receive alimony?

- Yes—list amount: \$ _____
- No

Did you have any gambling winnings?

- Yes—upload 1099-G(s)
Indicate number of 1099-G(s): _____
- No

Did you have any debt forgiven?

- Yes—upload 1099-C(s)
- No

Did you have any unreported tip income of \$20 or more?

- Yes—list amount: \$ _____
- No

Did you have a withdrawal from an Education Savings or 529 Plan?

- Yes—upload 1099-Q
- No

Were you a teacher/teacher's aide for grades K-12 and used personal money for school supplies?

- Yes—Amount: \$ _____
- No

Did you, your spouse, or a dependent incur any tuition expenses that are required to attend a college, university, or vocational school?

- Yes—upload 1098-T(s)
If yes, how much did you spend on books and supplies? \$ _____
How many years in college? _____
- No

Did you pay interest on a student loan?

- Yes—upload 1098-E(s)
- No

Did you PAY alimony?

- Yes—please answer the following:
Recipient's Name: _____
Recipient's SSN: _____
Amount Paid to Recipient: \$ _____
- No

Did you make a contribution to an HSA (not FSA) account?

- Yes—upload 1099-SA
If yes:
Is the contribution reflected on your W-2? _____
OR did you make it yourself? _____
- No

Did you make a withdrawal from an HSA (not FSA) account?

- Yes—upload 1099-SA
If yes, was the entire amount used for qualified medical purposes? _____
- No

Does anyone owe you money that has become uncollectible (personal loan you gave)?

- Yes—provide the following:
Borrower's name: _____
Amount: \$ _____
Description of the debt: _____
- No

Did you claim the first-time homebuyer credit in 2008, 2009, 2010, or 2011 when you purchased your home?

- Yes
If yes, did the home cease to be your main home last year? _____
- No

Do you have an interest in or signing authority over a **financial bank account in a foreign country**, such as a bank account, brokerage account, or investments? ****This includes online gambling accounts****

- Yes---list highest balance for the year \$ _____
- No

Do you have any assets in a foreign county? ****Note: All foreign questions have a high penalty (\$10,000) if not disclosed to the IRS**

- Yes—list each asset and value: _____
- No

Did you have any medical expenses that you incurred?

Note: Deductible medical expenses must exceed 10% of your adjusted gross income.

Example: If your income is \$100,000 and you paid \$10,001 of medical expenses out of your pocket, you will only be able to deduct \$1 (Taxpayers over 65 can deduct medical expenses if they exceed 7.5% of adjusted gross income).

- Yes—please fill in chart below
- No

Doctor Costs		Hospital Costs	
Health Insurance Premiums		Long Term Care Costs	
Medical Miles Driven		Prescriptions (not over the counter medications)	
Acupuncture		Chiropractor	
Glasses/Contacts		Dental	
Lab & X-Ray Fees		Hearing Aids	
Nursing Home		Addiction Treatment	

Did you pay DMV license fees (the deductible portion of the total amount paid) for your personal vehicle(s)?

- Yes—amount paid: \$_____
- **If you don't know the amount you paid, and your vehicle is registered in CA, provide license plate and last 5 digits of VIN # _____
- No

Did you pay real estate taxes (property taxes) on your personal residence (NOT rental)?

- Yes
- If yes, provide parcel number: _____
- County: _____
- No

Did you pay mortgage interest on your personal residence (NOT rental)?

- Yes—upload 1098(s)
- Indicate number of 1098(s): _____
- No

If you paid mortgage interest, did you borrow more than 1.1 million dollars on your home?

- Yes—upload December statement to show loan balance at end of year
- No

Did you pay mortgage interest that was NOT reported to you on a Form 1098?

- Yes—provide the following:
Lender's name: _____
Tax ID# _____
Address: _____
- No

Did you purchase, sell, or refinance your mortgage on your personal residence (NOT rental) last year?

- Yes—upload closing escrow statement and/or 1099-S
- No

Did you have a foreclosure or short sale on your personal residence?

- Yes—upload 1099-S or 1099-A
- No

Did you incur a major loss because of damaged or stolen property that was not covered by insurance?

- Yes—please explain: _____
- No

Did you have any adoption expenses last year?

- Yes—amount paid: \$ _____
- No

Did you have a safe-deposit box last year?

- Yes—amount paid: \$ _____
- No

Did you have investment fees?

- Yes—amount paid: \$ _____
- No

Did you pay for tax preparation last year (new clients only)?

- Yes—amount paid: \$ _____
- No

Did you pay for items to search for a job?

- Yes—amount paid: \$ _____
- No

Did you receive court awarded compensation *other than* alimony or child support?

- Yes—amount paid to attorney to fight for these funds: \$ _____
- No

Did you pay for expenses for your W-2 job (NOT self-employed) and not get reimbursed from your employer? Note: the amount will only affect your return if it *exceeds* 2% of your income

- Yes—please fill in chart below and list employer name: _____
- No

Mileage for work errands (not commuting)		Parking & Tolls		Education & Training	
Telephone		Travel/Airfare/Lodging		Professional/Union Dues	
Licenses		Entertainment/Meals		Postage	
Supplies/Books		Other Expenses		Other Expenses	

Did you contribute cash or check to charity?

- Yes—list charity name(s) and amounts(s):

- No

Did you contribute tangible (non-cash) items to charity? **If over \$500, fill in chart below**

- Yes—amount: \$ _____
- No

Organization		Address	
Date(s) of donation		Value	
Type of goods donated			

Organization		Address	
Date(s) of donation		Value	
Type of goods donated:			

Organization		Address	
Date(s) of donation		Value	
Type of goods donated			

Did you contribute a vehicle or a boat to charity?

- Yes—upload 1099 (if received)
- No

Did you drive your vehicle for charity purposes?

- Yes—list number of miles: _____
- No

Did you, your spouse, and all of your dependents have health care insurance for the entire calendar year?

- Yes
- No—list name of person(s) not covered and month(s) not covered:

Did you or your dependents have health insurance from the Health Insurance Marketplace (Obamacare)?

- Yes—upload 1095-A form
- No

If you or your dependent(s) did NOT have health care coverage during the year **AND** qualify for an exemption, which category do you fall into? Select one **and** upload your exemption certificate:

- Indian Tribe Membership
- Health Sharing Ministry Membership
- Religious Sect Membership
- Incarceration
- Exempt Non-Citizen
- Economic Hardship
- US Citizen Living Abroad

- Less Than 3 Consecutive Months of Coverage
- Enrolled in Medicaid

Did you purchase any qualified residential energy efficient items, such as solar, wind, central air conditioning, furnace, or water heater?

- Yes
List item(s): _____
Amount(s) paid: \$_____
- No

Did you purchase (not lease) a plug-in electric vehicle?

- Yes—upload purchase agreement
- No

Did you hire an individual (NOT a company) to do household services for you that exceeded \$2000/year?

- Yes—did you issue 1099-Misc or W-2? _____
Upload a copy of the 1099-Misc/W-2
- No

Did you purchase anything out of state or over the internet for which sales tax should have been paid but was not?

- Yes—amount \$_____
- No

Did you or your spouse make any gifts to an individual or a trust that totaled more than \$14,000?

- Yes
- Amount: \$_____
- Recipient: _____
- No

Do you have any questions/situations that need to be addressed?



Only continue if you have:

Rental Property

Business Activity

If you do NOT have rental property or business activity to report, you are done!

Do you have business income and expenses, but no rental real estate activity? Proceed to the section titled "Business Activity"

Rental Real Estate Activity

****This document provides space to report 3 rental properties. If you have more than 3 rentals, please duplicate this form for each additional rental**

Do you have a property manager?

- Yes—please provide annual reports
- No

Did you purchase or sell any rental real estate last year?

- Yes—upload Closing Disclosures and 1099-S
- No

Did any of your rental properties fall into foreclosure or short sale?

- Yes—upload 1099-s or 1099-A
- No

Are you a real estate professional?

- Yes
- No

Rental property #1:

Number of days rented: _____

Type of Rental:

- Single family residence
- Multi-family residence
- Commercial

Full address of rental property: _____

County: _____

Parcel Number (APN): _____

Percentage of Ownership: _____

Income (list amount of rents received): \$ _____

List all expenses for rental property #1:

Advertising		Qualified Mortgage Insurance Premiums	
Association Dues		Landscaping	
Auto & Travel		Security	
Cleaning & Maintenance		Painting & Decorating	
Commissions		Pest Control	
Gardening		Plumbing & Electrical	
Insurance		Repairs (small)	
Legal & Professional Fees		Supplies	
Licenses & Permits		Taxes—Real Estate	
Management Fees		Flooring	
Improvements (large)		Telephone	
Mortgage Interest (provide your 1098)		Utilities	
Appliances		Bank Fees	
Inspection Fees		Windows	

Rental property #2:

Number of days rented: _____

Type of Rental:

- Single family residence
- Multi-family residence
- Commercial

Full address of rental property: _____

County: _____

Parcel Number (APN): _____

Percentage of Ownership: _____

Income (list amount of rents received): \$ _____

List all expenses for rental property #2:

Advertising		Qualified Mortgage Insurance Premiums	
Association Dues		Landscaping	
Auto & Travel		Security	
Cleaning & Maintenance		Painting & Decorating	
Commissions		Pest Control	
Gardening		Plumbing & Electrical	
Insurance		Repairs (small)	
Legal & Professional Fees		Supplies	
Licenses & Permits		Taxes—Real Estate	
Management Fees		Flooring	
Improvements (large)		Telephone	
Mortgage Interest (provide your 1098)		Utilities	
Appliances		Bank Fees	
Inspection Fees		Windows	

Rental property #3:

Number of days rented: _____

Type of Rental:

- Single family residence
- Multi-family residence
- Commercial

Full address of rental property: _____

County: _____

Parcel Number (APN): _____

Percentage of Ownership: _____

Income (list amount of rents received): \$ _____

List all expenses for rental property #3:

Advertising:		Qualified Mortgage Insurance Premiums	
Association Dues		Landscaping	
Auto & Travel		Security	
Cleaning & Maintenance		Painting & Decorating	
Commissions		Pest Control	
Gardening		Plumbing & Electrical	
Insurance		Repairs (small)	
Legal & Professional Fees		Supplies	
Licenses & Permits		Taxes—Real Estate	
Management Fees		Flooring	
Improvements (large)		Telephone	
Mortgage Interest (provide your 1098)		Utilities	
Appliances		Bank Fees	
Inspection Fees		Windows	



Only continue if you have:

Business Activity

If you do NOT have business activity to report, you are done!

****This document provides space to report a single business. If you have more than one type of business activity, please duplicate this portion of the organizer for each additional business.**

Name of Business: _____

Owner(s): _____

EIN: _____

Type of Industry: _____

First Year in business: _____

Type of Entity:

- Schedule C
- LLC—Single Member
- LLC—Multi Member
- S-Corp
- C-Corp

Do you use QuickBooks?

- Yes—Online or Desktop? _____ If Online, make sure you have invited bookkeeper@adminbooks.com to access your file.
If QuickBooks desktop, please upload a portable company back up file and provide version (ex: 2015 Pro) _____, Username _____ and password: _____
- No—please complete the income/expense information section

Did you have employees last year?

- Yes—upload copies of payroll reports (all W-2s and W-3s)
- No

Did you send 1099s to the required independent contractors?

- Yes

- No, I should have sent 1099s but I didn't
- No, I was not required to send 1099s

Did you trade your services for another service (bartering)?

- Yes—provide details: _____
- No

Was your home used for business purposes?

- Yes—I own my home
- Yes—I rent my home
- No

How many months was your home used for business last year? _____

What is the TOTAL square footage of your home? _____

What is the total square footage used **exclusively** for business? _____

Provide ANNUAL totals for the following:

- Rent (NOT personal mortgage): \$ _____
- Gas/Electric: \$ _____
- Water: \$ _____
- Garbage: \$ _____
- Insurance: \$ _____
- Cleaning: \$ _____
- HOA Dues: \$ _____
- Gardening: \$ _____
- General Repairs: \$ _____
- Repairs/Maintenance (done only to business area): \$ _____

Did you use your vehicle for business purposes? NOTE: If you do not have a home office, any miles driven from home to work are *personal* miles!

- Yes
- No

Provide ANNUAL totals for the following:

- Total personal miles driven: \$ _____
- Total business miles driven: \$ _____
- Year/Make/Model of Vehicle: \$ _____
- Purchase Price: \$ _____
- Purchase Date: _____
- Date First Used for Business: _____
- Cost of Gas: \$ _____
- Annual Cost of Insurance: \$ _____
- Cost of Repairs: \$ _____
- Cost of Registration: \$ _____

Was the vehicle available for personal use during non-business hours?

- Yes
- No

Do you have another vehicle available for personal use?

- Yes
- No

Do you have written documentation to support these expenses?

- Yes
- No

NOTE: All S-Corps, C-Corps, and LLCs must file a Statement of information with the Secretary of State. Failure to file will result in a \$250 penalty and suspension of entity with the State of California. Check your specific situation at: www.sos.ca.gov

Did you receive income through a merchant account?

- Yes—upload Form 1099-K
- No



If you provided us with your QuickBooks file, please do **NOT** fill out the following section!

What was your TOTAL INCOME amount? \$ _____

Accounting		Advertising/ Marketing		Bank Charges	
Business Gifts		Business License		Continuing Education	
Charitable Contributions		Delivery & Freight		Dues & Subscriptions	
Employee Benefits		Entertainment		Equipment Rental	
Incentives & Awards		Liability Insurance		Workers Comp	
Malpractice Insurance		Disability Insurance		Employee Medical Insurance	

Errors & Omissions Insurance		Owners Medical Insurance		Interest	
Internet		Janitorial		Job Materials	
Laundry & Cleaning		Legal & Professional		Meals	
Merchant Fees		Office Expense		Outside Services	
Parking & Tolls		Payroll Officer GROSS Wages		Payroll Employee GROSS Wages	
Payroll Taxes-Employer		Pension & Profit Sharing		Product Purchases	
Postage		Printing		Rent for Office (Not home)	
Repairs		Sales/ Presentations		Security	
Small Tools		Storage		Supplies	
Telephone		Travel (Airfare, Lodging)		Uniforms	
Utilities (not home)		Other		Other	
Other		Other		Other	

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Payment Authorization Form – Business Tax Return

Terms and Conditions

I authorize Administrative Bookkeeping Company, Inc. to make an automatic draft/charge on my credit card OR bank account for services as described by the Service Agreement.

My Authorization will remain in effect until the terms of the agreement are completed. I understand that I can cancel the services at any time with a 30 day advance *written* notice.

Admin Books will keep my credit card or bank information confidential. The charge on my credit card and/or bank account will show from Administrative Bookkeeping Co., Inc.

I agree to pay the prevailing service fee plus any merchant account charge back fees levied against Admin Books in the event a charge is returned to Admin Books for any reason.

General Information

Name:		
Address:	Phone:	
	Email:	
Signature:		Date:

Choose ONE Payment Method Below

<u>CREDIT CARD PAYMENT</u>		
Credit Card Type: <input type="checkbox"/> Visa <input type="checkbox"/> MasterCard Expiration Date: _____ Validation Code: _____		
<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>		
Amount: \$ _____ Frequency: <input type="checkbox"/> One-Time <input type="checkbox"/> Monthly		
<u>BANK ACCOUNT PAYMENT</u>		
Bank Account Type: <input type="checkbox"/> Personal <input type="checkbox"/> Business <u>AND</u> <input type="checkbox"/> Checking <input type="checkbox"/> Savings		
Account Number: _____ Routing Number: _____		
Amount: \$ _____ Frequency: <input type="checkbox"/> One-Time <input type="checkbox"/> Monthly		

