

Date _____

Please fill in your response	es as best y	you can.	We wil	l begin with ta	ахра	yer's info.	
Marital Status as of 12/31/	2017) Life Part	ner	Separated		O Divorced	
Taxpayer	Č	Married		Single		O Widowed	
First Name			Last N	ame			
Social Security #	DOB		Occup	ation			
Street Address			City			State	Zip
Home Phone	Mo	bile Pho	ne		\ ^V	Vork Phone	
Email					IJ Ļ	'ov	
Email					一广	ax	
IRS Issued PIN			Blind	/Disabled?	0,	Yes C) No
Spouse							
First Name:			Last N	lame			
Social Security #	DOB		Occup	ation			
]			01.1	
Street Address			City			State	Zip
Home Phone	Ma	bile Pho	JL ne		\/	——↓ Vork Phone	
Tiome i none		Jone 1 He) I C		٦Ľ	VOIR I HOHE	
Email					—)'_ F	ax	
						-	
IRS Issued PIN			Blind	/Disabled?	0,	Yes C) No
If we have questions who see Preferred method of common reference to your taxes.			_	•	nail y	○ Spouse ou prefer to b	
Call		Ema	il				
Are you a new or returning	client?	○ New			() F	Returning	_
If you are a new client how	did you he	ear abou	t us?				
O Internet		O Net	_		_	Newspaper	
O Drive By		O Refe	erral		O	Other	
Delivery Option Our firm will provide you w upon completion and recei minimal additional fee of \$ it is paid at the time extra of How would you like to receive	pt of full pa 10.00. How copy is requ	ayment. S vever if y uested.	Should ou requ	you request l uest a copy la	both ater i	options then t n the year the	here will be a fee is \$25.00 and

Dependents						
	•	•	laim for 2017. If v	•		
them.			taking this year,		No. of months lived	Add or
Name	Birti	ndate / Age	Social Security #	Relationship	in your home in 2017	remove
] [] []] []
]]	1
]	
Child Care I	Deductions			J (
		nses to rep	oort? (If yes, provi	ide statement)	○ Yes	○ No
Did you receive	e employer pr	ovided dep	endent care assis	stance benefits	? O Yes	○ No
How much? [
•		_	I you like to receiv Direct Deposit	_	Apply To Next Year	
What type of t	oank account?	0	Checking	0.5	Savings	
9 digit Bank R	outing Numbe	r				
Account Num	ber					
Direct Debit Payment is due to incur penalties a		n if you file ar	n extension. Paymen	ts made after the	15th are considered lat	e and will
If you owe tax	es, how would	you like to	pay them?	Direct Debit	O Mail Check	
9 Digit Bank F	Routing Numbe	er				
Account Num	ber					
When would y	ou like your di	rect DEBIT	to occur? O A	pril 15	The day after I signer-file authorization	
Estimated T	ax Payments	;				
	Federal	St	ate	City	Date	
1st Quarter		_				
2nd Quarter						
3rd Quarter]		
4th Quarter						
Total						

	d each statement below in its entirety and initial that you are in agreement and by the policy.
initial	Payment in full expected at the time the services are rendered. SmartPlan will not release or file any return until full payment is made.
initial	Any work submitted to our office April 1st or later or with a history of delinquency will be required to pay a retainer to get started; however, full payment is due before we can file anything. If payment is not made the taxpayer is responsible for any penalties and interest assessed by the IRS for late filing.
initial	A \$10.00 late fee will be assessed for each month the return goes unpaid. Initialing states that you understand and will abide by our payment policy.
initial	Our invoicing is done once the return or project is completed. Our fees are based on a wide variety of methods which are listed on our website for your review. We <u>DO NOT</u> give out quotes as we can not tell how much time will be required to accurately complete your return. However, our fees are inline with national averages, and we find our fees are very fair in comparison to our competitors. Initial that you understand and agree to our billing and payment policy.
	entPlan does our best to ask all necessary questions to file an accurate return for you, it is sibility of the taxpayer to make us aware of any situations they think may effect their return.
deductions	t of my knowledge the responses I have provided are correct and include all income and other information necessary for the preparation of this year's income tax returns for we adequate contemporaneous records.
Please sig	n that you are in agreement.
Today's Da	ate

Privacy Notice

AVACUT DOLLOV

As tax preparers, we have always protected your right to privacy. Like all providers of personal financial services, we are now required by law to inform our clients of our policies regarding privacy of client information.

Types of Nonpublic Personal Information I Collect

We collect nonpublic personal information about you that is provided to us by you or obtained by us with your authorization.

Parties to Whom I Disclose Information

For current and former clients, we do not disclose any nonpublic personal information obtained in the course of our practice except as required or permitted by law. Permitted disclosures include, for instance, providing information to our employees, and in limited situations, to unrelated third parties who need to know that information to assist us in providing services to you. In all such situations, we stress the confidential nature of information being shared.

Protecting the Confidentiality and Security of Current and Former Clients' Information

We retain records relating to professional services that we provide so that we are better able to assist you with your professional needs and, in some cases, to comply with professional guidelines. In order to guard your nonpublic personal information, we maintain physical, electronic, and procedural safeguards that comply with our professional standards. Please call if you have any questions, because your privacy, our professional ethics, and the ability to provide you with quality financial services are very important to us.

PART IV REPORTING OF FOREIGN ASSETS

Clien	t	lax Year
		Disclosure of Foreign Assets make further inquiries to ensure the \$10,000 penalty (or higher), and the loss of tax returnitation, will not affect you:
Yes	No	
		Do you own, <u>directly or with others</u> , any foreign stock or securities, financial instruments foreign-issued annuities or life insurance, or foreign hedge or private-equity funds? If so, what country? Estimated value of the stock 12/31/2017 \$
		Do you have a retirement or deferred compensation plan/account in another country? If so, what country?FMV on 12/31/2017 \$
		Highest estimated value of the retirement plan during the year \$
		Do you have a bank/brokerage account or a custodial account in another country? Highest value of the bank account during the year \$
		Do you have any other assets outside the U.S., such as land? If so, what country?
		If so, what country?
		OR
		At any time during 2017, did you have a financial interest in or signature authority over a financial account (such as a bank account, securities account, or brokerage account) located in a foreign country?
		If yes, you may be require to file form FinCEN 114 to report that financial interest or signature authority. Enter the name of the foreign country where the financial account is located:
		Highest value of the financial account during the year \$
		During 2017, did you receive a distribution from, or were you the granter of or transferee to, a foreign trust? If yes, you may have to file Form 3520.
The al	oove i	nformation is correct to the best of my knowledge
Signat	ure _	Date
Print N	lame	
Signat	ure _	Date
Print N	lame	