



# Flores Multi Services

## TAX SERVICES FORM

**New Clients:** Please fill out this entire form, gather your tax documents and information, and upload it to your FMS Members account so we can accurately and efficiently calculate and process your Federal & State Tax Returns.

**Returning Clients:** Please provide updated information if your address, dependents, ID and/or banking information changed from last year. Otherwise, please upload your tax documents and information to your FMS Members account.

Taxpayer SSN \_\_\_\_\_ DOB (mm/dd/yy) \_\_\_\_\_ Occupation \_\_\_\_\_

First Name \_\_\_\_\_ Middle \_\_\_\_\_ Last \_\_\_\_\_

Spouse SSN \_\_\_\_\_ DOB (mm/dd/yy) \_\_\_\_\_ Occupation \_\_\_\_\_

First Name \_\_\_\_\_ Middle \_\_\_\_\_ Last \_\_\_\_\_

Address (as of Dec. 31) \_\_\_\_\_ Apt \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

### **DEPENDENTS**

Name (First & Last)	SSN	DOB (mm/dd/yy)	Relation (Son/Daughter)
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1) _____	_____	_____	_____
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2) _____	_____	_____	_____
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3) _____	_____	_____	_____
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4) _____	_____	_____	_____
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### **INCOME (all sources of income)**

Please indicate 'Yes' for the below items if they apply (use the space on page 3 for comments/questions)

- ☐ Wages, salary, tips, etc. (W-2)
- ☐ Interest from banks, bonds, securities, etc. (1099-INT) (requires Schedule B)
- ☐ Dividends from stocks (1099-DIV) (requires Schedule B)
- ☐ State refunds from last tax year by filing Itemized (1099-G)
- ☐ Business Net Income/(Loss) (Summary of income & expenses by category) (requires Schedule C)
- ☐ Capital gains & losses (1099-B) (requires Schedule D)
- ☐ IRA, Pension or Annuity Distributions (1099-R), HSA/FSA/Archer Distributions (1099-SA)
- ☐ Passive Income (rental property, royalties, and K-1s) (requires Schedule E)
- ☐ Unemployment compensation (1099-G)
- ☐ Social Security Benefits (SSA-1099)
- ☐ Other Income (1099-MISC), Non-employee Compensation (1099-NEC), Cancelled Debt (1099-C)

#### **ADJUSTMENTS (deductions from income)**

Please indicate 'Yes' for the below items if they apply (use the space on page 3 for comments/questions)

- ☐ Educator Expenses
- ☐ Health Savings Account (5498-SA)
- ☐ Self-Employed Retirement Contributions to SEP-IRA and/or SIMPLE-IRA
- ☐ Self-Employed Health Insurance
- ☐ IRA Deduction (subject to income limits)
- ☐ Student Loan Interest Paid (1098-E) (subject to income limits)

#### **STANDARD vs. ITEMIZED DEDUCTION (requires Schedule A)**

Please indicate 'Yes' for the below items if they apply (use the space on page 3 for comments/questions)

- ☐ Medical and/or Dental Expenses (did you have out-of-pocket expenses)
- ☐ State & Local Taxes (Income or General Sales), Real Estate Taxes, New Vehicle Taxes, Other Taxes
- ☐ Home Mortgage Interest & Qualified Mortgage Insurance Premiums (1098) (special restrictions)
- ☐ Investment Interest (on a property held for investment, not securities)
- ☐ Charitable Contributions (by Cash, Check, or Property) (special restrictions)
- ☐ Other Miscellaneous

#### **CREDITS (credits to reduce tax)**

Please indicate 'Yes' for the below items if they apply (use the space on page 3 for comments/questions)

\_\_\_\_\_ Child Tax Credit (do you have a qualifying child age 16 and younger)

\_\_\_\_\_ Child & Dependent Care (babysitter, nursery school, day care expenses for dependents under age 13?)

\_\_\_\_\_ Elderly/Permanent Disabled (do you care for a taxpayer 65 or older OR under 65 and retired due to permanent disability)

\_\_\_\_\_ American Opportunity/Lifetime Learning (do you pay tuition for a dependent student?) (1098-T)

\_\_\_\_\_ Electric Vehicle (did you purchase a new & eligible electric vehicle) Please upload documentation

### **OTHER**

Please indicate 'Yes' for the below items if they apply (use the space on page 3 for comments/questions)

\_\_\_\_\_ Health Care Law Did you have at least basic health insurance coverage for the entire year?

**Please provide Form 1095-A, B, or C**

\_\_\_\_\_ Estimated Tax Payments Did you make you estimated tax payments?

**Please upload documentation of Federal and/or State tax payment**

If you have a 1099-NEC and/or 1-member LLC, all business revenue & expenses must be reported on Schedule

C. Use this link and download the spreadsheet to enter all revenue & expenses and upload to the portal:

[Sole Prop or LLC - Income & Expense Worksheet - Schedule C](#)

If you have a rental property in your name, all revenue & expenses must be reported on Schedule E. Use this link and download the spreadsheet to enter all revenue & expenses and upload to the portal:

[Rental Property - Income & Expense Worksheet - Schedule E](#)

**ID Verification** – Please provide details from your Driver's License or State ID:

Taxpayer State: \_\_\_\_\_ Number: \_\_\_\_\_ Issue Date: \_\_\_\_\_  
Expiration Date: \_\_\_\_\_ Spouse State: \_\_\_\_\_  
Number: \_\_\_\_\_ Issue Date: \_\_\_\_\_  
Expiration Date: \_\_\_\_\_

**Direct Deposit** – Please provide the following information:

Bank Name: \_\_\_\_\_  
Checking or Savings: \_\_\_\_\_  
Routing #: \_\_\_\_\_  
Account #: \_\_\_\_\_

**Security Question/Answer** – Please choose a security question below and provide the answer.

Question: 1- What is your mother's maiden name?

Answer: \_\_\_\_\_

Comments/Questions:

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## **TAX SERVICES ENGAGEMENT LETTER**

Dear Client:

Thank you for choosing Flores Multi Services LLC to calculate & process your tax returns. 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 and state income tax returns.** We will depend on you 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. The Intake Form is enclosed to help you collect the data required for your return. The Intake Form will help you avoid overlooking important information. By using it, you will contribute to efficient preparation of your returns and help minimize the cost of our services.

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, of course, inform you of any material errors, fraud, or other illegal acts we discover.

The law imposes penalties when taxpayers underestimate their tax liability. Please email/call 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.

We will use the FMS Members page to download/upload your documents. We will retain copies of your records and our work papers for your engagement for seven years, after which these documents will be destroyed.

To affirm that this letter correctly summarizes your understanding of the arrangements for this work, please sign the enclosed engagement letter in the space indicated. We appreciate your confidence in us. Please email/call if you have questions.

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