Curran's Tax Service

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CLIENT INFORMATION SHEET

TAX YEAR 2019

YOUR INFORM	ATION						P.	AGE 1	
Your Full Name	Name			urity Number	Birth Dat	e Occ	upation in 2019		
SPOUSE'S INF	ORMATION								
Spouse's Full Name	urity Number	Birth Dat	e Occ	upation in 2019					
ADDRESS & CONTACT INFORMATION									
Address				City			State Zip		
Best Phone	2 nd I	Phone		Email Add	dress				
County of Posidonco I	2010 1 2010			aa in Stata		tinon / Docidont Al	ion/Non ros	Alian	
County of Residence January 1, 2019 Please provide D filings and identit							t Alien/Non-res. Alien That Which Applies*		
FILING STATU	IC								
Marital status at the									
				Did you pay fo	r over half	the cost of keeping	up your home du	iring	
		orced: year		2019?					
If married, did you li months of 2019?	ve apart from yo	our spouse during th	e last 6	Yes					
Yes 🔲 No				mortgage inter	est, real e	ude rent, utilities, f state taxes, and insu	ance on the hom	e. If you	
By answering "Yes	s," you are confi	rming that if reques	ted by the	for part of the	cost of kee	ed under any public a eping up your home,	you cannot count	them as	
IRS, you can provide documentation that verifies your spouse did not live with you during the last 6 months of the year, such as a lease weeping up your home to figure if you paid over half the cost.									
agreement, utility bills, a letter from a clergy member, or a letter from social services. By answering "Yes," you are confirming that if requested by the IF you can provide documentation that verifies you paid for over half t						the IRS,			
Can you be claimed a	as a dependent o	on someone else's ta	x return?	cost of keeping	g up your	home, such as rent r			
Yes 🔲 No				cery receipts, a	and other n				
DEPENDENTS									
			•			.	# Months Lived	Claiming for	
First Name	Last Na	me Birth	Date	Social Security N	Number	Relationship to You	with You 2019	2019 ?	
If requested by the IRS, can you provide documentation that shows evidence of the relationship between you and each of your dependents									
listed above (birth certificates, marriage certificates, court documents, letters from authorized placement agencies, etc.)?									
Yes No									
If requested by the IRS, can you provide evidence that each of your dependents lived with you for the number of months stated above during 2019 (school, medical, childcare provider, social service records, etc.)?									
Yes No I have daycare expenses Care provider name & Fed ID #									
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REQUIRED INFORMATION FOR DEPENDENTS

If you are claiming a dependent child on your tax return, in order for us to meet certain requirements set forth by the IRS, you are required to accurately and thoroughly answer all questions listed below. If applicable, be sure to provide a detailed explanation for each child you are claiming. Your tax preparer will review each question that pertains to your situation during the preparation of your tax return.

Are you claiming a child who was between 19 and 23 years of age at the end of 2019 and a full-time student for any part of five calendar months during 2019? If yes, please list the educational institution and the months attended by the child as a full-time student.

Yes No If "Yes", which ones? Year in College (Freshman, Sophomore, etc) 1098	Was a student convicted of a felony for possession or distribution of a controled substance in 2019?						
Are you claiming a child who is permanently and totally disabled? If requested by the IRS, can you provide documentation that verifies the child is permanently and totally disabled, such as a note from a doctor, healthcare provider, or social service program?							
Yes No							
Did any of the dependents you are claiming earn more than \$4200 in wages in 2019?							
Yes No If "Yes", which ones?							
Can anyone else claim any of your dependents? * Indicate if someone else can claim any of your dependents for Earned Income Credit							
Yes No If "Yes", which ones?	Will they try to claim this dependent? \square Yes \square No						
Are you claiming a child who lived with any other adult relative, including other parent for more than half the year during 2019? If yes, please list each adult relative who lived in the same home as the child for more than half the year, their relationship to the child. TIE- BREAKER RULES MAY APPLY							
Yes Vo							
Are you claiming a child who is not your own son or daughter? If yes, please	e explain why the parents of the child are not claiming the child.						
Yes No *Proof of residence may be required* Please ma	ke note of step-children.						
Have you ever had Earned Income Credit, Child Tax Credit, Additional Child Ta	x Credit, or American Opportunity Credit disallowed or reduced in a						
previous year? Have you filled out the required recertification form?							
TAX PREPARER'S NOTES							

HEALTHCARE COVERAGE INFORMATION

The shared responsibility payment has been reduced to "\$0" (zero) for all taxpayers. Form 8965 is no longer used and no health insurance information will be shown on the tax return unless the taxpayer received Form 1095-A from the marketplace.

If any person listed on this return had healthcare coverage through the marketplace (Exchange) for even one month of 2019, please submit form 1095-A.

RECEIVING YOUR REFUND		
If you are due a REFUND would you pref Bank Name Routing #	_	Direct deposit to my bank Checking Savings
DURING 2019, DID YOU OR YOUR SPC	DUSE	
 Unemployment compensation Social Security benefits Interest Disability from Insurance/VA Do you have any other world-wide income you need to report? Make payments for any of the following? Real estate taxes Student Home mortgage Charitable donations Vehicle e 	g winnings annuity, IRA, or retirement income on savings or stock dividends tion of debt by a lender Do you have signature control of any foreign accounts with a balance of \$10,000 or more? Ioan interest RENTERS: tuition xcise tax imated taxes ter:	Number of months in 2019 Landlord Name & Address
BUSINESS USE OF AUTOMOBILE MILE	AGE	
When did you place your vehicle into service for business purpos	es? Year onal Commute NO	ence to support your deduction? YES NO

We will prepare your Federal and State income tax returns using information that you provide.

We may ask for clarification of some items, but we will not audit or otherwise verify the information you give to us.

YOUR RESPONSIBILITIES

It is your responsibility to provide all the information required for the preparation of complete and accurate tax returns. You should retain all documents, cancelled checks, and other data that support your reported income and deductions. These may be necessary to prove the accuracy and completeness of the returns to a taxing authority. You have the final responsibility for your income tax returns, and therefore, you should review them carefully before you sign them.

OUR RESPONSIBILITIES

We are responsible for taking the information given to us by you and ensuring your tax returns are accurate to the best of our knowledge. We are also responsible for the timely electronic filing of your tax returns.

During our engagement with you, we may provide you with an estimated refund date. We do not however have any influence over the IRS or State issuing your refunds. These taxing authorities do not guarantee a specific date that a tax refund will be issued.

Your tax returns may be selected for audit by a taxing authority. In the event of a tax examination, we can arrange to assist you with any correspondence or communication that is initiated by the IRS or State.

It is our policy to keep records related to this engagement for 3 years. However, we do not keep any of your original records, so you should retain these records in secure storage. Upon the expiration of the 3 year period, we are free to destroy our records.

In the event of a complaint related to the services we provide, we agree to discuss the complaint, and if necessary, to take action in a good faith effort to resolve the complaint.

All information I have given is true and correct to the best of my knowledge. I also agree to and accept the Terms of Engagement. Your Signature Spouse's Signature Date