



## Individual Tax Questionnaire

This Questionnaire is **REQUIRED BEFORE** we start your tax return.  
Please check the appropriate boxes and include all necessary details and documentation.

### **Taxpayer-REQUIRED**

Full Name: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

Birthdate: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_ Occupation: \_\_\_\_\_

☐ Primary Contact Preferred Contact Method: \_\_\_\_\_

### **Spouse**

Full Name: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

Birthdate: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_ Occupation: \_\_\_\_\_

☐ Primary Contact Preferred Contact Method: \_\_\_\_\_

### **Primary Address Information-REQUIRED**

Street Address: \_\_\_\_\_ City, State, Zip: \_\_\_\_\_

County: \_\_\_\_\_ School District: \_\_\_\_\_

Do you: ☐ Rent ☐ Own

Did you live in Kansas at the same address all year?

☐ Yes ☐ No

If you were not at the same address, what other address(s) and state(s) did you live at?

Street Address: \_\_\_\_\_ City, State, Zip: \_\_\_\_\_

Street Address: \_\_\_\_\_ City, State, Zip: \_\_\_\_\_

**If necessary, add additional address information on the back of these pages or add additional pages.**

Did you live in the United States all year?

☐ Yes ☐ No

## **General Information-REQUIRED**

What was your marital status on December 31, 2023? \_\_\_\_\_

If you were divorced in 2023, what was the date it was finalized? \_\_\_\_\_

If you were married, did you live apart from your spouse for the last 6 months of the year?

☐ Yes ☐ No

Can anyone else claim you as a dependent on their tax return (i.e., Parents)?

☐ Yes ☐ No

Did you have health insurance through the **MARKETPLACE** coverage with **healthcare.gov** and **NOT** through your employer?

☐ Yes (**Form 1095A REQUIRED**) ☐ No

In the context of tax preparation, it's crucial to inquire about a client's veteran status and disability percentage for several reasons. Firstly, for Kansas state tax returns, an extra exemption is available to veterans, which can directly impact their tax liability. By identifying clients who are veterans and knowing their disability percentage, we can ensure they receive the appropriate tax benefits and deductions, ultimately helping them save money. Additionally, being aware of a client's veteran status allows us to assist them in claiming any property tax rebates available to homeowners who are veterans. This attention to detail ensures compliance with tax laws and maximizes potential savings for our clients while providing them with accurate and tailored tax services.

Are you an Honorably Discharged Veteran?

☐ Yes ☐ No

Are you a disabled Veteran?

☐ Yes ☐ No

If yes, what percentage? \_\_\_\_\_% (You **must** provide proof if 100%)

## **General Dependent Information-REQUIRED IF YOU HAVE DEPENDENTS**

**You must also fill out a due diligence questionnaire**

Are you claiming a dependent between 19 and 23 years of age who was a student for more than five calendar months of the tax year?

☐ Yes ☐ No

Please list the school and months attended:

School: \_\_\_\_\_ Months Attended: \_\_\_\_\_

School: \_\_\_\_\_ Months Attended: \_\_\_\_\_

School: \_\_\_\_\_ Months Attended: \_\_\_\_\_

School: \_\_\_\_\_ Months Attended: \_\_\_\_\_

Are you claiming a child who lived with any other adult relative for more than half of the year?

☐ Yes ☐ No

If yes, list each relative, their relationship, and their income for the last tax year.

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Income: \_\_\_\_\_

Are you claiming any dependents who did not live with you for the entire year?

☐ Yes ☐ No

If yes, how many months in 2023 did the dependent live in your home? \_\_\_\_\_

**Dependent Information-REQUIRED IF YOU HAVE DEPENDENTS**

**We will need proof of residency, birth certificate, and social security card. If the dependent is between 19 and 23 years of age and a student, we will need 1098T. We REQUIRE this information for EACH dependent.**

**Dependent 1**

Full Name: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

Birthdate: \_\_\_\_\_ Relationship: \_\_\_\_\_ Months in home in 2023: \_\_\_\_\_

If between 19 and 23, was this dependent a full-time student?

☐ Yes ☐ No

Did you provide over half the financial support for this dependent?

☐ Yes ☐ No

Does anyone other than you qualify to claim this dependent?

☐ Yes ☐ No

Was this dependent disabled in 2023?

☐ Yes ☐ No

If the dependent is under the age 13 or disabled, did you pay for dependent care?

☐ Yes ☐ No

If yes, provide the dependent care provider's name, the provider's ID number, and the amount you paid.

Name: \_\_\_\_\_ ID number: \_\_\_\_\_ Amount Paid: \_\_\_\_\_

**Dependent 2**

Full Name: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

Birthdate: \_\_\_\_\_ Relationship: \_\_\_\_\_ Months in home in 2023: \_\_\_\_\_

If between 19 and 23, was this dependent a full-time student?

☐ Yes ☐ No

Did you provide over half the financial support for this dependent?

☐ Yes ☐ No

Does anyone other than you qualify to claim this dependent?

☐ Yes ☐ No

Was this dependent disabled in 2023?

☐ Yes ☐ No

If the dependent is under the age 13 or disabled, did you pay for dependent care?

☐ Yes ☐ No

If yes, provide the dependent care provider's name, the provider's ID number, and the amount you paid.

Name: \_\_\_\_\_ ID number: \_\_\_\_\_ Amount Paid: \_\_\_\_\_

**If necessary, add additional dependent information on the back of these pages or add additional pages.**

### **Cryptocurrency and Foreign Income**

Did you exchange property, goods, or services using Cryptocurrency?

☐ Yes ☐ No

Did you buy, sell, invest, or mine any Cryptocurrency?

☐ Yes ☐ No

Did you have any forks or airdrops with your Cryptocurrency account?

☐ Yes ☐ No

**For tax purposes, a foreign account is any financial account held outside of the United States by a U.S. taxpayer. This includes bank accounts, investments, and assets in foreign financial institutions. Examples can be a bank account in Canada, a Swiss investment account, or holdings in an offshore mutual fund. Reporting these accounts is essential for tax compliance, as the IRS requires accurate disclosure to prevent tax evasion. It is also essential to avoid penalties for non-compliance**

Did you have foreign income or signature authority on a foreign account?

☐ Yes ☐ No

Did you have foreign accounts or investments with an aggregate value of more than \$10,000?

☐ Yes ☐ No

Do you have any foreign accounts where the aggregate value was higher than \$50,000 on the last day of the tax year?

☐ Yes ☐ No

Do you have any foreign accounts where the aggregate value exceeded \$75,000 at any time during the year?

☐ Yes ☐ No

**Sources of Income-REQUIRED**

Please check boxes corresponding to ALL your sources of income:

- |  |  |
|--|--|
| <input type="checkbox"/> Wages (W2)                        | <input type="checkbox"/> Interest (1099-INT)                   |
| <input type="checkbox"/> Dividends (1099-DIV)              | <input type="checkbox"/> Stock/Asset Sales (1099-B)            |
| <input type="checkbox"/> Social Security (SSA-1099)        | <input type="checkbox"/> Canceled Debt (1099-C)                |
| <input type="checkbox"/> Partnership/S-corp (K1)           | <input type="checkbox"/> Gambling (W2G, Win/Loss Statement)    |
| <input type="checkbox"/> Alimony Received (Divorce Decree) | <input type="checkbox"/> Farming *                             |
| <input type="checkbox"/> Self-Employment *                 | <input type="checkbox"/> Distribution from Retirement (1099-R) |
| <input type="checkbox"/> Pension, or IRA (1099-R)          | <input type="checkbox"/> Unemployment                          |
| <input type="checkbox"/> Rental *                          | <input type="checkbox"/> Home/Real Property Sale (1099-S)      |

***\* If you have Self-Employment, Farming, and/or Rental income, you must complete a separate organizer.***

If you answered yes to the sale Home Sale/Real Property, what was the address of the property that was sold?

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Did you inherit or purchase the property?

☐ Inherit ☐ Purchase

When was the property acquired? \_\_\_\_\_ When was the property sold? \_\_\_\_\_

If you purchased the property, what was the purchase price? \_\_\_\_\_

If you inherited the property, what was the Fair Market Value when you inherited it? \_\_\_\_\_

What was the sale price of the property? \_\_\_\_\_

Was the property your main home in 2 of the last 5 years?

☐ Yes ☐ No

What were the dates you lived in the home?

☐ Yes ☐ No

Have you ever rented this property out?

☐ Yes ☐ No

If you said yes, what were the rental periods? \_\_\_\_\_

Did you receive a 1099-S?

☐ Yes ☐ No

Did you make improvements to the property during the time you owned it?

☐ Yes ☐ No

If you said yes, can you provide the amounts paid for the improvements?

☐ Yes ☐ No

Can you substantiate the improvements?

☐ Yes ☐ No

When was the last time you sold a personal residence? \_\_\_\_\_

Have you ever taken the homeowner exclusion on the sale of a residence?

☐ Yes ☐ No

**We will need the closing disclosure statements for BOTH the purchase and sale of this property.**

### **Deductions**

Please check boxes that correspond to your possible deductions

- |  |   |
|--|---|
| <input type="checkbox"/> Property Taxes                          | <input type="checkbox"/> Mortgage Interest (1098)                   |
| <input type="checkbox"/> Student Loan Interest (1098-E)          | <input type="checkbox"/> Retirement Account Contribution(Not on W2) |
| <input type="checkbox"/> Health Savings Contribution (not on W2) | <input type="checkbox"/> PMI (1098)                                 |
| <input type="checkbox"/> Tuition (1098-T)                        |   |

If you paid medical expenses during the year, what were your total expenses for the following?

Insurance (Not on W2): \_\_\_\_\_ Other medical expenses: \_\_\_\_\_

Medical mileage: \_\_\_\_\_

Can you substantiate these expenses?

☐ Yes ☐ No

***If you are unsure about what qualifies, we can give you a form to show you what is deductible.***

If you made charitable contributions, what were the amounts in the following categories?

Cash Donations: \_\_\_\_\_ Donations of Goods (i.e., Goodwill donations): \_\_\_\_\_

Charitable Mileage: \_\_\_\_\_

Can you substantiate these expenses?

☐ Yes ☐ No

If you had educator expenses, answer the following questions.

What was the amount you spent? \_\_\_\_\_

What is the name of the school you work at? \_\_\_\_\_

Can you substantiate these expenses?

☐ Yes ☐ No

If you paid alimony in 2023, we need the following information.

Was your divorce decree before 1/1/2019?

☐ Yes ☐ No

If yes, what was the name of the recipient? \_\_\_\_\_

What is the recipient's social security number? \_\_\_\_\_

What amount did you pay? \_\_\_\_\_

**We need a copy of the divorce decree.**

**Estimated Tax Payments:**

Did you pay Federal Estimated Tax Payments?

☐ Yes ☐ No

If yes:

Date Paid: \_\_\_\_\_ Amount Paid: \_\_\_\_\_

Date Paid: \_\_\_\_\_ Amount Paid: \_\_\_\_\_

Date Paid: \_\_\_\_\_ Amount Paid: \_\_\_\_\_

Date Paid: \_\_\_\_\_ Amount Paid: \_\_\_\_\_

Did you pay State Estimated Tax Payments?

☐ Yes ☐ No

If yes:

State: \_\_\_\_\_ Date Paid: \_\_\_\_\_ Amount Paid: \_\_\_\_\_

State: \_\_\_\_\_ Date Paid: \_\_\_\_\_ Amount Paid: \_\_\_\_\_

State: \_\_\_\_\_ Date Paid: \_\_\_\_\_ Amount Paid: \_\_\_\_\_

State: \_\_\_\_\_ Date Paid: \_\_\_\_\_ Amount Paid: \_\_\_\_\_

### **Energy Questions**

Did you purchase an electric or plug-in Hybrid vehicle in 2023?

☐ Yes ☐ No

What was the year of the vehicle? \_\_\_\_\_ Vehicle Make and Model: \_\_\_\_\_

Vehicle Identification Number (VIN): \_\_\_\_\_

Was this vehicle used for business purposes, for rentals, or self-employed?

☐ Yes ☐ No

When date was the vehicle placed in service? \_\_\_\_\_

Did you make any energy-related improvements to your home (i.e., HVAC, solar panels, etc.)?

☐ Yes ☐ No

If yes, we will need invoices showing the cost of improvement showing the cost of the item, the cost of installation, and the model number of equipment.

### **Direct Deposit**

**If you answer "same as last year," you must initial off on it, acknowledging that we are not responsible if your information on file is incorrect for some reason.**

If you are entitled to a refund, would you like direct deposit?

☐ Yes ☐ No

Name of your financial institute: \_\_\_\_\_ If same as last year initial: \_\_\_\_\_

Routing number: \_\_\_\_\_ Account Number: \_\_\_\_\_

☐ Checking ☐ Savings

### **Direct Debit**

**If you answer "same as last year," you must initial off on it, acknowledging that we are not responsible if your information on file is incorrect for some reason.**



If you owe taxes, would you like it paid through direct debit?

☐ Yes ☐ No

What taxes would you like paid through direct debit?

☐ Federal ☐ State ☐ Estimates

Name of your financial institute: \_\_\_\_\_ If same as last year initial: \_\_\_\_\_

Routing number: \_\_\_\_\_ Account Number: \_\_\_\_\_

☐ Checking ☐ Savings

What date do you want to pay Federal (Can not be later than 4/15)? \_\_\_\_\_

What date do you want to pay State (Can not be later than 4/15)? \_\_\_\_\_

What dates do you want to pay Estimates?

Due date: 4/15 Date: \_\_\_\_\_

Due date: 6/17 Date: \_\_\_\_\_

Due date: 9/16 Date: \_\_\_\_\_

Due date: 1/15/25 Date: \_\_\_\_\_

### **Tax Return Copy Choices**

Do you want us to print a copy of your tax return for you (\$25 fee)?

☐ Yes ☐ No

How would you like to receive your physical copy?

☐ Mail (\$25 Fee) ☐ Pick up at the office

<b>Please note, any paperwork not picked up before November 1, 2024, will be shredded.</b>
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Signature

Date

Our work relationship is a partnership. At times, we will request documents and information from you. We require responses to our questions relatively quickly to ensure that work is completed to a high level of quality. Should we not hear back from you, we will remind you **ONE** time. Should we not hear back, your file will be moved to the bottom of the queue, which can result in late completion of your work. Note that adverse consequences such as interest or penalties from government agencies may apply in these situations.



## 2023 Tax Engagement Letter

### Scope of Services

- **Tax Return Preparation:** We will prepare your 2023 federal and state individual tax returns based on the information you provide. Note that our service excludes auditing or verification of the supplied information.
- **No Audit Support:** This engagement does not include any audit or record examinations. In the event of an audit, you will be responsible for verifying all reported items.
- **Exclusions:** The fee for tax preparation does not cover bookkeeping or responses to correspondence from tax authorities. Audit representation is also not included.
- **Change of Scope:** If it is determined that there is a change in scope of services, for example, if you require bookkeeping services, this will require a separate engagement letter and fee. Work will not be started until the required engagement letter is signed.
- **Engagement Termination:** Our obligation to prepare your 2023 tax return concludes when we deliver your completed returns and original documents. We recommend retaining these records for at least seven years.
- **Documentation Requirement:** We will commence preparation only after receiving all required documents, signed contracts, questionnaires, and organizers from you.
- **Documentation Deadline:** If ALL of the required documents are not in the office or uploaded to the portal by March 1, 2024, we will not guarantee your return will be completed by the tax deadline of April 15, 2024. We can, however, file an extension. This requires a separate engagement letter.
- **Substantive Determinations:** There may be instances where the tax law is unclear. In these instances, we will outline each of the reasonable alternatives, including the risks and consequences of each alternative. We will adopt the alternative that you select.
- **Fees:** Our fees for this engagement are not contingent on the results of our service. Our fees will be based on a number of factors including, but not limited to, time spent on a return and complexity of services provided.
- **Withdrawal from Engagement:** Both parties reserve the right to suspend services or withdraw from this engagement. Upon termination of the engagement, if we have your physical documents, they will be returned to you. You will be obligated, through the date of termination, to compensate us for all fees and reimbursements owed.

### Client Responsibilities

- **Information Supply:** You commit to providing all necessary income and deductible expense information. If additional details emerge after the commencement of the work, notify us immediately for accurate tax return completion.
- **Accuracy of Information:** We will depend on the information provided by you to prepare your tax return. In the event that we become obligated to pay any judgment or penalty as a result of inaccurate or incomplete information provided to us during the course of this engagement. You agree to indemnify us, defend us, and hold us harmless against such obligations, agreements, and/or costs.
- **Expense Verification:** You affirm the accuracy of all expenses and deduction amounts, retaining all essential written records. We reserve the right to request documentation for review.
- **Audit Preparedness:** Should an audit occur, you must be ready to present written evidence for all items on your return. We can guide you on what constitutes acceptable proof.

- **Return Review:** Prior to signing, it is your responsibility to carefully review the return for accuracy.
- **Payment:** All fees must be settled before the tax return is either delivered to you or filed on your behalf. Should you terminate the engagement before its completion, a fee for the work already performed will be due.
- **Recordkeeping:** You are advised to store a copy of your tax return and related documents securely. A fee will be charged for any future copies you request.

## Signature

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. For a joint return, both taxpayers must sign.

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*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. Do not hesitate to contact us with any questions regarding our privacy policy.

Last 4 of SSN:

# R & J Salina Tax Service, Inc. Tax Support Packages

Bronze Tax Packages	Silver Tax Packages	Gold Tax Package
<ul style="list-style-type: none"> <li>• Completion of personal income tax return (federal 1040 plus states)</li> <li>• Dependent's income tax returns done with 70% discount</li> <li>• Estimated tax payments calculated with completion of tax return only</li> <li>• Basic phone or email questions not requiring research or calculations</li> <li>• Two 15-minute scheduled phone appointments or one 30-minute scheduled phone/video appointment</li> <li>• Review and explain notices received for a tax return that we prepared.                         <ul style="list-style-type: none"> <li>• Does not include response to letter.</li> <li>• Does not include refund research and tracking</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>• Completion of personal income tax return (federal 1040 plus states)</li> <li>• Dependent's income tax returns done with 70% discount</li> <li>• Recalculation of estimated tax payments based on client input one time. (Not a formal projection.)</li> <li>• Basic phone or email questions not requiring research or calculations</li> <li>• Four 15-minute scheduled phone appointments or two 30-minute scheduled phone/video appointment or one 1-hour video appointment (or formal projections consuming part of that time)</li> <li>• Reply to IRS notices such as CP-2000 income matching (i.e., unreported income) errors (over \$200 value)                         <ul style="list-style-type: none"> <li>○ Recalculation of correct tax with missing income may be an extra charge depending on specifics</li> <li>○ Does not include formal exams (aka audits)</li> <li>○ Does not include going to Appeals</li> <li>○ Does not include refund research and tracking</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>• Completion of personal income tax return (federal 1040 plus states)</li> <li>• Dependent's income tax returns done with 70% discount</li> <li>• Recalculation of estimated tax payments based on client input, including formal projection (limit of 3)</li> <li>• Basic phone or email questions not requiring research or calculations</li> <li>• Four 15-minute scheduled phone appointments or two 30-minute scheduled phone/video appointment or one 1-hour video appointment (or formal projections consuming part of that time)</li> <li>• Amended tax returns (includes base amendment fee but not the fees for new/additional forms)</li> <li>• Monthly IRS transcript monitoring (identify IRS issues before exam/audit process begins, potentially avoiding penalties)<sup>1</sup></li> <li>• Respond to IRS or state government letters:                         <ul style="list-style-type: none"> <li>○ Reply to IRS notices such as CP-2000 income matching (i.e., unreported income) errors – does not include going to Appeals</li> <li>○ Up to 3 hours of audit representation work including new tax calculation for missing income (e.g., CP2000), exams, Appeals, Collections (over \$600 value)</li> <li>○ Installment Agreement <b><u>NO</u></b> Financials Required</li> <li>○ Does include 3 hours of refund research and tracking</li> </ul> </li> </ul>
<b>Cost: Regular Tax Return Fee</b>	<b>Cost: Regular Tax Return Fee +Plus+ \$199 paid with Tax Return Fee</b>	<b>Cost: Regular Tax Return Fee +Plus+ \$399 paid with Tax Return Fee</b>

1. Requires taxpayers to sign Form 8821; monitoring does not commence until the IRS has processed the Form 8821(s) granting us access to your tax records.

## R & J Salina Tax Service, Inc. Tax Support Packages

Additional Service Prices:	Cost
W-4 Calculations or Withholding Check-Up (Included as 1 hour appointment in Silver and Gold Package)	\$150
First Time Penalty Abatement (FTA) (Included in the Gold Package)	\$150 min or 10% of Penalty Abated
Installment Agreement with <b><u>NO</u></b> Financials Required (Included in the Gold Package)	\$150
Installment Agreement with Financials (Deposit waived with purchase of Gold package, but hourly charge still applies)	\$300 Deposit to Start \$150 per hour after the First Hour
Representation for Audit/Appeals/Responding to IRS Letter (Deposit waived with purchase of Gold package, but hourly charge still applies)	\$150 Deposit to Start \$200 per hour after the First Hour
Research your IRS Account about what is needed to bring taxpayer and spouse, if applicable, into compliance  Additional work that is required will be billed accordingly based on \$150/hour  <b><u>Refund research services</u></b> (Included in the Gold Package)	\$200 Deposit before Work is Started.  \$150 per hour after the First Hour  \$150 per hour

Please select the option by check box next to the plan name that you would like to have for the tax year:

☐ **Bronze No Additional Cost**    
 ☐ **Silver Package \$199**    
 ☐ **Gold Package \$399**

X

Taxpayer Signature

X

Spouse Signature

- Requires taxpayers to sign Form 8821; monitoring does not commence until the IRS has processed the Form 8821(s) granting us access to your tax records.