BRIGHAM SERVICES

TAX ORGANIZER

Dear Sir or Madam,

Enclosed is your Tax Organizer for tax year 2017.

Your Organizer contains several sections that include common expenses and deductions that many taxpayers overlook. Please review these sections carefully. Depending upon your tax bracket, you may save as much as $35 for each $100 in deductible expenses you find in your 2017 records.

If our firm prepared your return last year, your prior year amounts are included in the Prior Year Amount column of your Organizer. Use this information to help you remember the types of income and deductions you reported last year.

To complete the Organizer, enter all relevant information in the designated areas on each page or if applicable provide the supporting document. Please add any notes or questions that will help us prepare a complete and accurate return for you and to plan with you how to manage your tax situation in future years.

If you answer 'Yes' to any of the General Business and Investment questions, please provide detailed information with your answer.

You may schedule an appointment through by calling 817-349-9313 but an appointment is not required.

Please provide this Organizer and any of the following that apply to your tax situation:

- Last year's tax return (if not in our possession)
- Original Form(s) W-2
- Schedule(s) K-1 from partnerships, S-corporations, estates or trusts
- Information about contributions to a pension or other retirement plan if this is the first year you received income from the plan
- Form(s) 1099 or statements reporting dividend, interest, retirement or other income
- Broker statements providing details of capital gains transactions
- Form(s) 1098 and copies of real estate tax bills, etc.
- Legal documents pertaining to the sale or purchase of real property

All documents and information can be sent via fax or email. If preferred you can mail or drop off at our office.

Sincerely,
Brigham Tax & Financial Services

Brigham Tax & Financial Services

3951 Sycamore School Road Suite 119

Fort Worth, Texas 76133

Dear Sir or Madam,

Thank you for choosing our firm to prepare your income tax returns for tax year 2017. This letter confirms the services we will provide.

We will prepare your federal and state returns for tax year 2017 based on information you provide. Although our work will not include procedures to discover irregularities or inaccuracies in the tax data you provide, we may ask for clarification of certain information, or additional information, so that we can prepare accurate and complete returns for you.

It is your responsibility to provide all necessary information related to income and deductions for tax year 2017, and to respond to our inquiries in a timely manner so that we are able to accurately complete your returns by the appropriate due dates.

You are responsible for maintaining appropriate records, such as official tax documents you receive, receipts and substantiation for your deductions, and purchase and sales information for assets.

It is your responsibility to review your returns before they are filed to determine that all income has been correctly reported and that you have substantiation for your deductions. Filing your returns by the due dates is your responsibility.

If your returns are later selected for review or audit by taxing authorities, we will be glad to assist or represent you if you desire. Our fees for preparing your returns do not include time that might be necessary to assist you during a taxing authority review.

We provided up-front pricing for the preparations of your return. Once we have all or most of the information needed to prepare your return we will send you an invoice. We require a 50% deposit before we begin any work and the balance to be paid when the draft is provided and before e-filing your returns. If after sending the invoice additional documentation and information is received from you that we were not aware of we will determine if additional time and therefore additional fees are required. If so we will stop all work and notify you. A few late official tax documents rarely impact the fee but large statements with significant activity can.

If this letter accurately summarizes your understanding of our agreement relating to the preparation of your tax returns, please sign the enclosed copy in the space indicated and return it to us.

Thank you again for choosing our firm to prepare your 2017 tax return. We appreciate your business.

Sincerely,

Monica Brigham, Brigham Tax & Financial Services

Accepted by:

____ Date __________________

____ Date __________________

PLEASE NOTE: THIS SHEET WILL DETERMINE HOW YOUR INFORMATION WILL APPEAR ON YOUR TAX RETURN.

1040 GENERAL INFORMATION SHEET

Filing Status (Circle One): Married Filing Jointly   Single   Married Filing Separate   Head of Household

	Taxpayer	**Spouse**
First name and Initial	____________________	____________________
Last Name	____________________	____________________
Social Security Number	____________________	____________________
Date of Birth (MM/DD/YY)	____________________	____________________
Date of Death (if applicable)	____________________	____________________
Occupation	____________________	____________________
Blind	Yes _______ No _________	Yes _________ No ________

Address, Telephone Numbers and Email

Present Street Address ____

Apt. Number ____

Present City of Residence ____

Present State ______________________ Zip Code: ________________

County ____

Taxpayer Cellphone No. ____

Spouse Cellphone No. ____

Taxpayer Email Address ____

Spouse Email Address ____

Home State ____

Did you move to/from a different state during this tax year? Yes _____________ No _________

Is the taxpayer claimed as a dependent on someone else's tax return? Yes__________ No _______

Did all family members have health insurance? Yes____No____Was health insurance bought through the market place? Yes__No__

Dependent Information

	Child 1	**Child 2**	**Child 3**	**Child 4**
First name & middle initial				
Last name				
Social Security #				
Date of Birth				
Relationship				
Months lived in your home				
X if disabled				
X if dependent had income				

Please provide the name of any person living with you who is claimed as a dependent on some else's tax return.

____

Please list years for which a release of claim to exemption is given for a dependent child not living with you.

____

Please provide name of anyone else you support

____

Please review this list, indicate what applies and bring all applicable documents with you for your appointment.

This list is a guide and is not all inclusive.

Personal information

- ❑ Social Security numbers and dates of birth for you, your spouse, your dependents
- ❑ Copies of last year's tax return for you and your spouse (new clients)
- ❑ Bank account number and routing number, if depositing your refund directly into your account

Information about your income

- ❑ WT2 forms for you and your spouse
- ❑ 1099-C forms for cancellation of debt
- ❑ 1099-G forms for unemployment income, or state or local tax refunds
- ❑ 1099-MISC forms for you and your spouse (for any independent contractor work)
- ❑ 1099-R, Form 8606 for payments/distributions from IRAs or retirement plans
- ❑ 1099-S forms for income from sale of a property
- ❑ 1099-INT,TDIV,TB, or KT1s for investment or interest income
- ❑ SSA-1099 for Social Security benefits received
- ❑ Alimony received

Business or farming income-profit/loss statement, capital equipment information

- ❑ Rental property income and expenses: profit/loss statement, suspended loss information
- ❑ Prior year installment sale information -Forms 6252, principal and interest collected during the year, SSN and address for payer Miscellaneous income: jury duty, gambling winnings, Medical Savings Account, scholarships, etc.

Adjustments to your income

- ❑ Form 1098-E for student loan interest paid (or loan statements for student loans)
- ❑ Form 1098-T for tuition paid (or receipts/canceled checks for tuition paid for post-high school)
- ❑ For teachers: Canceled checks or receipts for expenses paid for classroom supplies, etc.
- ❑ Records of IRA contributions made during the year
- ❑ Receipts for any qualifying energy-efficient home improvements (solar, windows, etc.)
- ❑ Records of Medical Savings Account (MSA) contributions
- ❑ Self-employed health insurance payment records
- ❑ Records of moving expenses
- ❑ Alimony paid
- ❑ Keogh, SEP, SIMPLE, and other self-employed pension plans

Please review this list, indicate what applies and bring all applicable documents with you for your appointment.

This list is a guide and is not all inclusive.

Deductions and Credits

- ❑ Child care costs: provider's name, address, tax ID, and amount paid
- ❑ Education costs: Form 1098TT, education expenses
- ❑ Adoption costs: SSN of child; records of legal, medical and transportation costs
- ❑ Forms 1098: Mortgage interest, private mortgage insurance (PMI), and points you paid
- ❑ Investment interest expenses
- ❑ Charitable donations: cash amounts, official charity receipts, canceled checks; value of donated property; miles driven and out-of-pocket expenses
- ❑ Medical and dental expense records
- ❑ Casualty and theft losses: amount of damage, insurance reimbursements
- ❑ Records/amounts of other miscellaneous tax deductions: union dues; unreimbursed employee expenses (uniforms, supplies, seminars, continuing education, publications, travel, etc.)
- ❑ Records of home business expenses, home size/office size, home expenses
- ❑ Rental property income/expenses: profit/loss statement, rental property suspended loss information

Taxes you've paid

- ❑ State and local income taxes paid (Not applicable if Full Year Texas resident)
- ❑ Sales tax paid on large purchases (IE car, boat, RV)
- ❑ Real estate taxes paid
- ❑ Personal property taxes

Other information

- ❑ Estimated tax payments made during the year (self-employed)
- ❑ Prior-year refund applied to current year and/or any amount paid with an extension to file
- ❑ Foreign bank account information: location, name of bank, account number, peak value of account during the year
- ❑ Did all family members have health insurance for the entire tax year? If so was the insurance purchased from the Market place? If so please provided form 1095A
- ❑ ____
- ❑ ____
- ❑ ____
- ❑ ____

BRIGHAM SERVICES

Name___________________________________ SSN______________________________________

Comments