



CHECKLIST

Items Needed For Income Tax Preparation (Please check each individual box that applies to you or your household when gathering necessary forms)

Personal Information:

- Names, Dates of Birth, and Social Security Numbers of any dependents
- VOIDED check for refund direct deposits
- Driver's License or State Issued ID

Records for Income:

- Previous last 2 years Income Tax Returns
- W-2 for any employment over last year
- Any 1099 received for interest and dividend income
- Statement of Capital Gain/Loss Transactions with transaction history of purchase price and date (sales of investments, property, etc.)
- End of Year Brokerage Account / Mutual Fund Statements
- Any 1099 for pension, annuity, or IRA income received or rolled-over
- Rental Property Information
- Social Security statement
- IRS Form 5498 – IRA Contribution Information (if necessary)
- Alimony Received (if necessary)
- Information on any investment, property, etc. that paid income to you

Records for Deductions:

- Form 1098 – Mortgage Interest Paid
- Records of Medical Cost incurred
- Records of Cost of Medical
- Real Estate and Property Taxes
- Alimony Paid (if necessary)
- Cost of college tuition and student loan interest
- Statements of any IRA or Retirement Savings Plan contribution showing account balance
- Record of any management / planning fee paid for financial services
- Receipt of any Charitable contributions
- Record of Child Care Expenses (if necessary)

ALL ITEMIZED DEDUCTION AMOUNTS MUST BE TOTALED PER DEDUCTION TYPE ON A COVER PAGE (Example: All RX's must have a grand total and be clipped together) For the \$ 99.00 price, the preparer will not be calculating excessive individual receipts.

NOTES:

If you should receive any type of information that is not listed above and question if it is needed for your income tax preparation, please bring it to the appointment. Your tax professional will assist you in determining if the information is pertinent to your income tax return. If you have any questions please do not hesitate to contact our office.



Please complete prior to your tax preparation appointment

I am a returning tax client

	LEGAL First Name and MI	Last Name (Spouse if different)	Social Security #
Taxpayer.....			
Spouse.....			
Street Address.....			Apt No.
City.....			County
State.....			ZIP Code
Phone.....	Home:	Cell:	<input type="checkbox"/> Yes- This is a new address

E-mail address.....
**Email address for electronic copy*

	Taxpayer	Spouse
Occupation.....		
Date of Birth.....		
Over Age 65.....		
Blind.....		
If died this year, enter date of death.....		

DEPENDANTS

First Name and MI	Last Name (if different)	Relationship	Social Security Number	Date of Birth	Child Care Expenses
					<input type="checkbox"/> Yes
					<input type="checkbox"/> Yes
					<input type="checkbox"/> Yes
					<input type="checkbox"/> Yes

FILING STATUS

Single
 Married Filing Jointly
 Married Filing Separate
 Head of Household
 Qualifying Widower with Dependant Child

Office Use Only: Scanned? Y/N Dr Lic Copy: Y/N Entered in SF? Y/N Dropped Off? Y/N Date: _____ Intake Date: _____
 Delivery Date: _____ Pick Up Date: _____ Uploaded: Y/N Notes: _____ Initials: _____

INTAKE QUESTIONNAIRE

Last Name: _____ First _____

- | | | |
|--|-----|----|
| Did your marital status change during 2017? | Yes | No |
| Do you or your spouse retire in 2017? | Yes | No |
| Did spouse pass away in the last two years? If so enter date of death _____ | Yes | No |
| Were you or your spouse permanently and totally disabled in 2017? | Yes | No |
| Do you have dependents? | Yes | No |
| If so, did you incur any childcare expense? | Yes | No |
| Did you qualify for earned income credit last year? | Yes | No |
| Did you provide support for any other person during 2017? | Yes | No |
| Did you receive payments from a pension or profit-sharing plan? | Yes | No |
| Did you contribute to a 401k plan in 2017?
How much did you contribute? _____ Estimated Value _____ | Yes | No |
| Is your employer matching? | Yes | No |
| Did you contribute to a pension plan in 2017?
How much did you contribute? _____ Estimated Value _____ | Yes | No |
| Did you contribute to a 401k plan in 2017?
How much did you contribute? _____ Estimated Value _____ | Yes | No |
| Have you ever contributed to an IRA, KEOH, 403B or SEP Plan?
How much did you contribute in 2017? _____ Estimated Value _____ | Yes | No |
| Did you receive a distribution from an IRA or other qualified plan that was Partially or totally rolled over into another IRA or qualified plan? | Yes | No |
| Did you receive any disability payments in 2017? | Yes | No |
| Did you buy, sell abandon, or refinance a principal residence or other real property in 2017? | Yes | No |
| Did your itemized deductions exceed your standard deduction? | Yes | No |
| Did you incur any business bad debts, casualties, or stock becoming worthless? | Yes | No |
| Did you buy or sell any stocks or bonds? | Yes | No |
| Did you pay interest on a student loan for yourself, your spouse, or your dependents? | Yes | No |
| Did you incur any moving expenses? | Yes | No |
| Did you pay alimony or collect alimony in 2017? | Yes | No |
| Did you own a business, rental property, or interest in partnerships or corporations? <i>If so, Provide details, P & L schedule, and asset purchases.</i> | Yes | No |
| Did you make FEDERAL quarterly estimated tax payments? If so, provide dates & amounts | Yes | No |
| Did you make STATE quarterly estimated tax payments? If so, provide dates & amounts | Yes | No |
| Do you have records to support your expenses? For deductions on travel and entertainment, Information must contain amount, date, place & purpose, description of gifts, and business relationship. | Yes | No |

NOTES:

TAX CLIENT AGREEMENT- Tax Year 2017

Complete Tax Preparation for individuals is \$99.00 (**Electronic Delivery**) includes e-filed personal, single or joint, federal, and NC state return for one tax year. *You will NOT receive a paper copy of this return in the \$ 99.00 price but a secured email copy. Paper copy booklet add an additional \$ 20.00* ***WE ACCEPT CASH OR CHECK ONLY! NO CREDIT CARDS! ALL PAYMENTS MUST BE RECEIVED BEFORE TAXES ARE E-FILED! NO EXCEPTIONS!**

Additional charges would include:

- Each Additional State Return - \$69.00
- City Return - \$25.00
- File by Mail (no e-file) - \$49.00
- Copy of current year tax return - \$20.00 (\$25.00 mail/fax)
- Copy of previous year tax return - \$25.00 (\$30.00 mail/fax)
- Copy of supporting documentation - \$25.00 (\$30.00 mail/fax)
- Business - Negotiable with tax preparer
- Trust - Negotiable with tax preparer

The estimated cost of your return will be _____

***** IMPORTANT NOTE *****

If I bring in new or revised information (e.g., 1099s, W-2s, additional deductions or other tax information) after the original submission of my supporting tax documents, I will be charged the following in addition to the above listed prices:

\$ 10.00 fee PER document (If received BEFORE taxes have been prepared but after original submission).

\$ 69.00 fee if my taxes have been e-filed or printed to be filed by mail, I agree to pay Capital Advisory Group an additional \$69.00 to re-file or re-print my return(s). We will not e-file your return without your signed consent. Initials

My 2015 Tax Return will be filed electronically to allow faster processing by the IRS.

Tax returns will be electronically e-filed every Monday at 3:00 pm. It is my responsibility to review it for accuracy. If I find changes are needed, I will contact Capital Advisory Group by no later than Monday by 1:00 p.m.

I understand the electronic filing process and will contact my Tax Preparer should I have any questions or changes to my return.

NOTE: For Joint Returns, **both spouses must pick up** the tax return and sign the IRS e-file forms.

*In order to complete these services, you will be asked to provide certain information. It is your responsibility to make sure the provided information is complete and accurate. *The services do not include any verification of the information you provide.* It is also your responsibility to maintain records of this information since you may need to satisfy tax authority inquiries.

Signature: Print Name: Date: _____

Spouse Signature: Print Name: Date: _____

**Capital Advisory Group & Tax Planners of Lake Norman
Privacy Policy**

Capital Advisory Group and Tax Planners of Lake Norman, Inc, like all providers of insurance and personal income tax preparation services, is required by law to inform our clients of our policies regarding privacy and client information. We are always committed to protecting your personal information and right to privacy.

Types of Nonpublic Personal Information We Collect

We collect nonpublic personal information about you that is provided to us by you, or obtained with your authorization. We collect and use this information to service your accounts and respond to your requests.

Parties to Whom We Disclose Information

For current and former clients, we do not disclose any non-public 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 that information to assist us in providing services to you. We may refer this information to an affiliated financial or tax professional where such referral is thought to be in your interest. Please advise us if instead you would require us to hold all information, including basic directory information, confidential under any circumstance. We restrict access to non-public personal information to those professionals necessary to helping you achieve your goals and we maintain physical, electronic and procedural safeguards that comply with federal standards to guard your non-public information.

How Do We Collect Data and How Long Will It Be Stored?

Whenever we collect personal data in our office via paperwork, during a personal interview or via our website systems, this policy informs you about the extent to which we collect. We will not collect personal data without explicit consent via this signed privacy form. All personal data will normally be stored until it has fulfilled the purpose for which it was collected. However, if a prospective client wants his/her personal data removed from our databases, we will delete that data upon written request in accordance with applicable laws.

Policies Regarding Our Website Systems

Capital Advisory Group & Tax Planners of Lake Norman, Inc. is committed to continuous improvement. We may gather and analyze non-personal data regarding the use of our websites - including domain names, number of hits, pages visited, length of user sessions etc., to evaluate the usefulness of our sites. These numbers are used for statistical purposes only and are not shared with any organizations outside of Capital Advisory Group and Tax Planners of Lake Norman, Inc. The personal information gathered may be transferred to areas within Capital Advisory Group, Inc. and will not be shared with any organizations outside of Capital Advisory Group and Tax Planners of Lake Norman, Inc, Inc except where permitted by law. It will only be used according to the purpose described on the respective page where the data is collected. We will not share the personal information.

Keeping up to date with our Privacy Policy

As required by law, Capital Advisory Group and Tax Planners of Lake Norman, Inc will provide notice of our policy annually as long as you maintain an ongoing relationship with us. To receive a copy of the most up to date Privacy Policy, call us at (704) 947-6985. We may make changes to this policy at any time and will inform you of changes as required by law.

Confidentiality and Security

Our employees are required to follow procedures with respect to maintaining the confidentiality of our clients' non-public personal information.

If at any time you are not satisfied with our procedures to protect your privacy, or if you have questions regarding the collecting and/or use of your personal data, please contact us. We will use all reasonable efforts to promptly address your concern. Your privacy, our professional ethics and the ability to provide you with quality insurance and tax preparation services are very important to us.

Client Name (please print)

Client Name (please print)

Client Signature

Client Signature

Date

Date

Directions to: Capital Advisory Group, 403 Gilead Road, Suite H, Huntersville, NC 28078



Directions from Mooresville/Statesville/Troutman/Davidson/Cornelius Area

Merge onto I-77 South towards Charlotte, Take Exit 23, Gilead Road exit, turn left onto Gilead Road, Destination will be on the right in 0.5 miles, (Directly across from the Huntersville Post Office that is located on your left)

Directions from Concord/Salisbury/Kannapolis Area

Merge onto I-85 S towards Charlotte, Take Exit 52 – Poplar Tent Road Exit, Turn right onto Poplar Tent Road, go 3.7 miles and turn left onto Huntersville-Concord Road, go 2.3 miles and turn left to stay on Huntersville-Concord Road for 3.6 miles then road changes to Gilead Road as you enter into Huntersville and cross the railroad tracks. Continue onto Gilead Road and destination will be on the left. If you cross over the I-77 over pass you have gone too far. (Our office is located directly across from the Huntersville Post Office located on your right)

Directions from Charlotte Area

Merge onto I-77 North towards Statesville, take exit 23-Gilead Road towards Huntersville, Turn right onto Gilead Road and continue 0.3 miles and destination will be on your right. (Directly across from the Huntersville Post Office that is located on your left)

Directions from Gaston/Belmont Area

Merge onto I-85 North towards Charlotte, take Exit 30 toward I-485 S/I-77 S/Pineville, Keep left at the fork, follow signs for Interstate 485 Inner N and merge onto Interstate 485 Inner go 11.7 miles, Take exit 23B to merge onto I-77 N towards Statesville, once on I-77 North take exit 23 for Gilead Rd toward Huntersville, Turn right onto Gilead Road and continue 0.3 miles and destination will be on your right. (Directly across from the Huntersville Post Office that is located on your left)

Please feel free to map our address directly from your home address if needed for any short cuts or back roads you wish to travel. If you get lost please contact our office at (704) 947-6985