

# EZ Tax Services

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call/text with questions **646-704-7166**

**WWW.EZTAXSERVICES18.COM <FOR PORTAL ACCESS>**

## TAX PREPARATION CHECKLIST FOR 2021 TAXES

\*Please upload all documents to portal prior to virtual appointment\*

### BASICS

- Photo ID License Front and Back, Passport
- Social Security Cards (yourself and any dependents)
- Copy of last year's return (only if you are a newclient)
- Bank routing and account number

### Income

- W2's from employer, W2-G gambling winnings
- Unemployment compensation 1099-G, you may need to print from your unemployment account
- 1099's that you collect. Read each one carefully and upload them with all your other tax documents.

#### Most common 1099's

1099-B, Proceeds from Broker and Barter Exchange Transactions

1099-C, Cancellation of Debt

1099-DIV, Dividends and Distributions

1099-G, Certain Government Payments

1099-INT, Interest Income

1099-K, Merchant Card and Third-Party Network Payments

1099-MISC, Miscellaneous Income

1099-NEC Non-employee compensation

1099-OID, Original Issue Discount

1099-Q, Payments from Qualified Education Programs (Under Sections 529 and 530)

1099-R, Distributions from Pensions, Annuities, Retirement or Profit-Sharing Plans, IRAs, Insurance Contracts, etc.

1099-SA, Distributions From an HSA, Archer MSA, or Medicare Advantage USA

- Social Security Income Form SSA-1099

### Home & Rental Properties

- 1098 Mortgage interest statement
- Real estate taxes paid
- Purchase or refinanced home, Closing Disclosure needed
- Rental Income
- Rental Expenses - upgrades, repairs, etc.

### Deduction – most common

- Medical/Dental expenses
- IRA/HSA contributions
- Childcare expenses: I need the full name, address, telephone number and tax ID number of your care providers, and the total paid per child to each caregiver.
- College Tuition. Form 1098-T lists tuition paid. These forms are generally available electronically to the student. Make sure that the "student" checks for these forms and gives them to you.
- Charitable contributions - You must have receipts, or your deduction could be challenged and denied! If you are missing a receipt, contact the charity to see if you can get the document(s) needed.
- Amount paid for last year tax prep – *new client only*
- Estimated Federal Tax Payments - Find the date and amount of payments

### Misc.

- IRS Notice 6475 - Economic Stimulus Payment
- IRS Notice 6419 – Advance Child Tax Credit
- Form 1095-A – Health Insurance Marketplace

The above are just the basic items, if you have additional items, please upload to portal for me to review.

THANK YOU for your trust in me!

# WELCOME TO EZ TAX SERVICES!

73 Market Street 3<sup>rd</sup> Floor Suite 376, Yonkers, NY 10710

**Tel: 646-704-7166**

Email: [Eztaxservices18@gmail.com](mailto:Eztaxservices18@gmail.com)

Website: [eztaxservices18.com](http://eztaxservices18.com)

Returning Client?

New Client?

*Please provide prior year(s) tax returns*

## CLIENT INFORMATION:

Primary Taxpayer Name: \_\_\_\_\_  
Date of Birth: \_\_\_\_\_  
SSN or ITIN: \_\_\_\_\_  
Marital Status: { }Single { }Married { }Widowed  
Address: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_  
Moved during the year? Date of Move \_\_\_\_\_  
Best Phone Number: \_\_\_\_\_  
Work Number: \_\_\_\_\_  
Email: \_\_\_\_\_  
Occupation: \_\_\_\_\_  
Attended College or Graduate School { }Yes { }No  
Received an Identity Protection Pin this year? { }Yes

Spouse Name: \_\_\_\_\_  
Date of Birth: \_\_\_\_\_  
SSN or ITIN: \_\_\_\_\_  
Address: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_  
Moved during the year? Date of Move \_\_\_\_\_  
Best Phone Number: \_\_\_\_\_  
Work Number: \_\_\_\_\_  
Email: \_\_\_\_\_  
Occupation: \_\_\_\_\_  
Attended College or Graduate School { }Yes { }No  
Received an Identity Protection Pin this year? { }Yes

Have you received any notices from the IRS or State Revenue department within the past year? { }Yes { }No

## DEPENDENT(S) INFORMATION\*:

Name:	Relationship:	Date of Birth:	SSN:	Health Insurance Coverage?	In College?	Disabled?

*\*If any dependents listed did not live at the primary taxpayers address the entire year, we will need to discuss for accurate reporting.*

**ALL CLIENTS MUST PRESENT AN ID IN ORDER TO PROCESS YOUR TAX RETURN TIMELY.**

Turn Over →

### **INCOME:**

(Check all that apply & include documents.)

- } Employer (W-2)
- } Self-Employment\* receive (1099-Misc)
- } Own a Business
- } Interest (1099-Int)
- } Social Security/Retirement
- } Dividends (1099-Div)
- } Rental Property\*
- } Stock/Mutual Fund Sale/Bond (1099-B)
- } Unemployment

### **MISCELLANEOUS:**

(Check all that apply.)

- } Sell a home or refinance?
- } Take an IRA or 401(K) distribution?
- } Pay/Receive alimony?
- } Adopt a child?
- } Have gambling winnings/losses?
- } Contribute/Withdrawal from a 529 plan?
- } Covered by a qualified private or government health insurance plan?
- } Enrolled in a health insurance plan through the federal or state marketplace?

### **CREDIT & DEDUCTIONS:**

(Check all that apply & include documents.)

- } Donate cash or goods to a charity?
- } Pay Student Loan interest?
- } Pay Child/Dependent Care expenses?
- } Have a Mortgage Payment (1098)
- } Pay Property Taxes?
- } Made an IRA Contribution?
- } Made a major taxable purchase?
- } Paid estimated taxes?

### **EXPENSES:**

(Check all that apply & include documents.)

- } Self-Employment\*
- } Education
- } Rental Property\*
- } Medical/Dental Care
- } Union Dues
- } Un-reimbursed by your employer
- } \_\_\_\_\_
- } \_\_\_\_\_

#### **Tax Return Preparation:**

EZ Tax Services will prepare your tax return based on information you provide. In the event your return is audited, you will be responsible for verifying the items reported. It is important that you review the return carefully before signing to make sure the information is correct. Unless otherwise stated, the services for preparation of your return do not include auditing, review, or any other verification or assurance.

#### **Taxpayer Responsibilities**

- You agree to provide us all income and deductible expense information. If you receive additional information after we begin working on your return, you will contact us immediately to ensure your completed tax returns contain all relevant information.
  - You affirm that all expenses or other deduction amounts are accurate and that you have all required supporting written records. In some cases, we will ask to review your documentation.
  - You must be able to provide written records of all items included on your return if audited by either the IRS or state tax authority.
  - EZ Tax Services can provide guidance concerning what evidence is acceptable.
  - You must review the return carefully before signing to make sure the information is correct.
  - Fees must be paid before your tax return is delivered to you or filed for you. If you terminate this engagement before completion, you agree to pay a fee for work completed. A retainer is required for preparation of late returns.
  - You should keep a copy of your tax return and any related tax documents. You may be assessed a fee if you request a copy in the future.
- Signatures. By signing below, you acknowledge that you have read, understand, and accept your obligations and responsibilities.  
For a joint return, both taxpayers must sign.

\_\_\_\_\_  
*Taxpayer*

\_\_\_\_\_  
*Spouse*

\_\_\_\_\_  
*Date*

#### **Privacy Policy:**

We do not share any of your confidential tax return information with any third-party. That means we cannot disclose your identity, income, net worth, tax liabilities, or other protected information to the Internal Revenue Service, state tax authorities, unmarried partners, friends, relatives, real estate agents, banks, or any other person or company without your explicit authorization.

You may authorize us to disclose certain tax return information to third parties of your choice, we will advise you of the proper procedure using a Consent to Use and Disclose form.

Referrals are the foundation of any service business. I rely on satisfied clients as the primary source of new business. Your referrals are both welcome and most sincerely appreciated! Since your referrals are generally individuals you are well acquainted with, you can be assured that your personal, financial and tax data will not be shared with them.

## To file a complaint about a tax return preparer:

If your tax return preparer does not follow these requirements, you may file a complaint with the Office of Professional Responsibility by:

- visiting our website at [www.tax.ny.gov](http://www.tax.ny.gov) (search: complaint)
- calling 518-457-5181

You can also report tax evasion and fraud online or by calling 518-457-0578. The information is kept confidential. The Tax Department takes this type of illegal activity seriously, promptly reviews each complaint, and takes corrective action when appropriate.



## Office of Professional Responsibility

We're committed to holding tax return preparers to the highest standards of quality service. We work closely with professional societies, consumer advocacy groups, and law enforcement to ensure all tax preparers perform their duties in an ethical and legal manner.

New York is one of only seven states to regulate the tax preparer industry.

### Initiatives:

- require all non-exempt tax return preparers to register with the New York State Tax Department
- help consumers understand their rights when hiring a tax return preparer
- identify and discipline tax return preparers who fail to meet regulatory standards



Department of  
Taxation and Finance

[www.tax.ny.gov](http://www.tax.ny.gov)

Pub 135 (11/21)



Department of  
Taxation and Finance

# Consumer Bill of Rights

## Regarding Tax Preparers





### Know your rights before you hire a tax return preparer

Most tax return preparers act within the law and treat their clients fairly, but there are some who do not.

This brochure contains important information about how to protect yourself when you hire a tax return preparer.

For more information, call **518-457-5181**.

Scan this QR code for more information, including additional rights you have as a New York State taxpayer. Information is also available in Español, 中文版, Русский, বাংলা, יידיש, Kreyòl ayisyen, 한국어, Italiano, العربية, and Polski. (search: *language*).



### Tax return preparers must:

- post their New York State Tax Preparer Registration Certificate and price list;
- tell you up front whether they will represent you if your return is audited later;
- ask you about your income, expenses, family, and any other information or documents needed to accurately complete your return;
- allow you to review your completed return (including your bank account information) and ask questions before you sign it;
- give you a written statement of any interest and fees you will be charged if you choose a refund anticipation loan (refund advance) or a refund anticipation check (refund transfer) instead of having your refund deposited directly into your bank account;
- sign your tax return and enter the preparer tax identification number (PTIN) and New York tax preparer identification number (NYTPRIN), if applicable;
- e-File your tax return;
- give you a year-round address and phone number you can use if you have questions or concerns about your return; and
- give you a copy of your filed return.

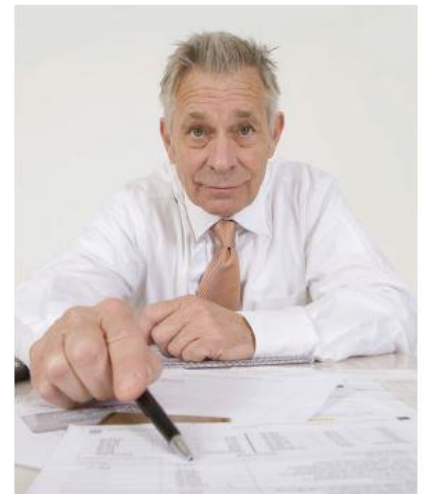
Pub 135 (11/21) (back)

### A tax return preparer should never ask you to sign:

- a blank return;
- an incomplete return;
- a return with false information on it; or
- a return with information that you don't understand.

### A tax return preparer should never charge a separate fee to e-file your New York return, and should never guarantee that:

- you'll receive a tax refund; or
- you won't be audited by the IRS or the New York State Tax Department.





## This is an explanation for the form that is below

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### ***E-ZRep Form TR-2000 will authorize EZ Tax Services to:***

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- Access your confidential tax information online,
- Speak to Tax Department representatives about your confidential tax information, such as filings, assessments, and notices; and
- Conduct transactions on your behalf through your EZ Tax Services Professional Online Services account.
- View your previously filed returns, outstanding tax liabilities, and prior and pending payments; and
- View notices you receive from the Tax Department through a client message center.

[Please completed part 1 and part 5 on form for authorization](#)



# E-ZRep

## Tax Information Access and Transaction Authorization Form

### Part 1 – Taxpayer information *(if married, each spouse must submit a separate form, even if the spouse files a joint return)*

Taxpayer's SSN or EIN	Taxpayer's name (first name, middle initial, last name, or legal name of business)
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### Part 2 – Tax professional information

Name of company providing tax professional services or individual's name if self-employed (hereinafter, the tax professional)
EZ TAX SERVICES

### Part 3 – Tax matters covered by this authorization *(select at least one)*

For the tax matters indicated below, the tax professional is authorized to (1) access the taxpayer's account information and perform transactions online through the Tax Department's Online Services, and (2) receive confidential information from the Tax Department.

Business	Individual/Fiduciary
<b>All current and future services</b> <i>(no other entry is required in Part 3 if this box is marked)</i> ..... <input type="checkbox"/>	<b>All current and future services</b> <i>(no other entry is required in Part 3 if this box is marked)</i> ..... <input type="checkbox"/>
Payments, bills, and notices ..... <input type="checkbox"/>	Payments, bills, and notices ..... <input type="checkbox"/>
Sales tax ..... <input type="checkbox"/>	Personal income tax ..... <input type="checkbox"/>
Employment and withholding taxes ..... <input type="checkbox"/>	Respond to department notice ..... <input type="checkbox"/>
Corporation tax ..... <input type="checkbox"/>	Change of address ..... <input type="checkbox"/>
Partnership tax ..... <input type="checkbox"/>	Casual sale tax ..... <input type="checkbox"/>
Other taxes ..... <input type="checkbox"/>	
Registrations and account updates ..... <input type="checkbox"/>	
Annual transaction information ..... <input type="checkbox"/>	
Respond to department notice ..... <input type="checkbox"/>	
File exchange ..... <input type="checkbox"/>	

### Part 4 – Expiration date

If the taxpayer wishes to limit the period of time for which this authorization is effective, enter the expiration date here. This date will be applied to all services selected above. If no date is entered, this authorization for the services selected above will remain in effect until revoked.

Expiration date (mm-dd-yyyy)
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### Part 5 – Signature

I certify that I am the individual named in Part 1 above, or, if the taxpayer named in Part 1 is other than an individual, I certify that I am acting on the taxpayer's behalf in the capacity of a corporate officer, partner (except a limited partner), member or manager of a limited liability company, or fiduciary, and that I have the authority to execute this *Tax Information Access and Transaction Authorization Form* on behalf of the taxpayer.

I understand and agree that by signing and providing this form to the tax professional, I am authorizing the tax professional to access the taxpayer's account information online and to receive confidential information from the Tax Department for the tax matters authorized on this document.

In addition, if I have authorized the tax professional to file returns or other documents and/or make payments on the taxpayer's behalf online, I understand and agree that the tax professional's submission of authorized transactions, together with this signed authorization, will serve as the

taxpayer's signature for such transactions. I further understand and agree that I must examine the information reported in those transactions and verify that the information submitted is true, correct, and complete. The tax professional has my consent to complete these transactions on the taxpayer's behalf. If the transaction includes authorization for electronic funds withdrawal, I certify that the New York State Tax Department, through its designated financial agents, is authorized to initiate such electronic funds withdrawal(s) from the financial institution account indicated in the transaction, and that the financial institution is authorized to debit the entry to the account. I understand and agree that payment transactions will be processed upon transaction submission and payment authorization cannot be revoked, unless otherwise stated at the point of submission of the payment transaction.

I further understand and agree that I can revoke the tax professional's access and authority to receive information and execute taxpayer transactions at any time.

Signature	Print name	Date
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### Retention information

The tax professional must retain a copy of this authorization form for the duration of the authorization plus three years, and make a copy available to the Tax Department upon request. **Do not mail this form to the Tax Department.**

### No revocation of prior tax information authorization(s)

Executing and providing this authorization to the tax professional does not automatically revoke any prior authorizations that have been completed. If the taxpayer wants to revoke a prior authorization, access our website at [www.tax.ny.gov](http://www.tax.ny.gov) or call us at (518) 485-7884.

The execution of Form TR-2000 does not revoke any power of attorney that is currently in effect for the same tax matters listed in Part 3 above. **This form is not a power of attorney (POA).**