



Cube Tax Service
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2020 Individual Income Tax Preparation Engagement Letter

This letter is to confirm and specify the terms of Cube Tax Service's engagement with you and to clarify the nature and extent of the services Cube Tax Service will provide. The IRS imposes penalties on taxpayers and tax return preparers for failure to observe due care in preparing income tax returns. In order to ensure an understanding of our mutual responsibilities, we ask all clients to confirm the following arrangements.

We will prepare your 2020 U.S. Individual Income Tax Return with all necessary supporting Forms and Schedules from the information provided by you. It is your responsibility to provide us all the information required for the preparation of a complete and accurate income tax return. You represent that the information you are supplying to us is accurate and complete to the best of your knowledge and that any expenses claimed for meals, entertainment, travel, business gifts, dues and membership, vehicle usage, and/or charitable contributions are supported by records as required by law and that you have disclosed all known tax liabilities.

IRS guidelines require us to e file **all** income tax returns we prepare. Unless you feel e filing your income tax return will do you *undue hardship*, your income tax return will be filed electronically with the IRS. Prior to you signing the Form 8879, you will be provided a complete copy of your income tax return to review. We will provide you a Form 9325 signifying that the IRS has accepted your income tax return.

We will not audit or otherwise verify the data you submit, although it may be necessary to ask you for clarification of some of the information. You have the final responsibility for your income tax return and, therefore, you should review your tax return carefully.

We will use professional judgment in resolving questions where the tax law is unclear, or where there may be conflicts between the taxing authorities' interpretations of the law. We subscribe to a program of peer review for maintenance of quality control in our office. As part of this program, your return may be reviewed by other Cube Tax Service tax preparers under strict rules of confidentiality.

In the event you receive an IRS Notice CP2000 on an income tax return we prepared, we will assist you in resolving the issue with the IRS. You agree to provide us the IRS Notice CP2000 within 10 days of receipt of the letter. Fees may apply to undisclosed tax liabilities. If you receive an IRS audit request on this 2020 Tax Return, the initial consultation up to four (4) hours are at no cost to you; however, after the initial consultation you will be billed at our standard rate of \$250 per hour.

As a result, the Affordable Care Act regulations, we may need income information for all members of your tax household.

We will not disclose any of your privileged information, unless required by law, without written instructions from you.

Read and Circle your agreement to the following statements:

YES NO You have provided us all information that may affect your tax situation or tax filing. If you are unsure about an issue, we need to discuss it before you sign your federal and/or state income tax return.

YES NO You had Marketplace (Obamacare, Affordable Care Act) health insurance (1095A required).

YES NO NA All dependents claimed on your 2020 U.S. Individual Income Tax Return are your "qualified child(ren)" or qualified relative" who lived with you in the United States in 2020.

YES NO At any time in 2020 did you have a financial interest in or a signature authority over any financial account (such as a bank account, securities, brokerage, retirement or online gambling account) located in a foreign country.

If **YES** you are confirming that the total value of **ALL** accounts on any day in 2020 was (circle one) **LESS** **OR** **MORE** than \$10,000.

If you want Cube Tax Service to prepare any other federal or state documents or forms initial below.

| <u>Initial</u> | <u>Form</u> | <u>Cost</u> | <u>Filing Number</u> |
|-----------------------|-------------------------------|----------------------------|-----------------------------|
| _____ | W2s | \$ 10.00 each | |
| _____ | W3 | \$ 20.00 | |
| _____ | 1099s | \$ 10.00 each | |
| _____ | 1096 | \$ 20.00 each | |
| _____ | Texas Sales Tax Report | \$ 30.00 per period | <u>RT</u> |
| _____ | Franchise Tax Report | \$ 60.00 | <u>XT</u> |
| _____ | State Tax Return(s) | \$ 60.00 | |
| _____ | FBAR | \$ 75.00 each | |

Others: _____

Price to be determined.

If the foregoing fairly sets forth your understanding, please sign below.

We want to express our appreciation for this opportunity to work with you.

Sincerely yours,

Cube Tax Service

Taxpayer's Name _____

Taxpayer's Signature: _____ Date: _____

Spouse's Signature: _____ Date: _____