

OU Credit Union Financial Services

90 S Shafer St
Athens, OH 45701
tax@oucu.org

Phone: (740)597-2820 | Fax: (740)597-2827

Welcome New Client!

Subject: Preparation of Your 2020 Tax Returns

We are glad you have chosen Ohio University Credit Union to assist you with the preparation of your 2020 tax returns. We look forward to assisting you.

Attached you will find a personal information page, a questionnaire and an engagement letter. We will need you to fill out and sign each of these items in order for us to provide you with the highest quality of service. Please return these forms when you return your tax information; this is required by the IRS. ***We will NOT be able to start on your return until we have completed documents.***

Your options for getting your documents to us include:

- Locked drop box at Financial Services entrance at our Shafer Street location (between doors, monitored and secure)
- Drop off at our reception desk
- Email your documents securely through the ZIX link at www.oucu.org/tax to tax@oucu.org
- Mail your documents to 90 S. Shafer St. Athens, OH 45701

You may request a consultation for assistance in completing the enclosed questionnaire. You may also schedule a time to discuss the tax documents you have sent to us. Call (740) 597-2820 or email tax@oucu.org to schedule an appointment for a phone consultation. Limited in person appointments are also available.

Things we need to know specific to 2020 (provide answers on your questionnaire):

- Amount of your Economic Impact Payment (stimulus check)? We will need the amounts of all EIPs you received (mid 2020 and Dec/Jan 20/21 second payment) Please provide copies of your IRS forms 1444 if available. However, this is **NOT** required.
- Were you (or your spouse) out of work and received unemployment? Please provide 1099-G
- Did you withdraw funds from a retirement account in 2020?
- If you own a farm or business did you receive a Paycheck Protection Program loan? Please provide the amount. If so, was it forgiven in 2020?
- If your business had employees did you receive FFCRA or Employee Retention Credits?
- Did you employ a household employee that was paid over \$2,200 during the year?

When your return is complete, you have the following options to sign and file your return:

- Receive, review, and sign your return electronically through your email using DocuSign
- Pick up and sign in person at our reception desk (limited capacity, maintain social distancing)
- Receive and sign your return through the mail (a return envelope will be provided)

Original documents and/or returns sent by mail will be charged a \$10 priority mail fee.

As an additional service to our valued tax clients, we offer Federal and Ohio Dependent returns with W-2 documentation only free of charge (with paid parents return). More complex dependent returns are \$30 and up depending on complexity.

Thank you for your business! We appreciate you choosing OUCU Financial Services and look forward to serving you this tax season.

Sincerely,

The OUCU Tax Preparation Service Team

Your privacy is important to us. Read the following privacy policy.

We collect nonpublic personal information about you from various sources, including:

- * Interviews regarding your tax situation
- * Applications, organizers, or other documents that supply such information as your name, address, telephone number, Social Security Number, number of dependents, income, and other tax-related data
- * Tax-related documents you provide that are required for processing tax returns, such as Forms W-2, 1099R, 1099-INT and 1099-DIV, and stock transactions

We do not disclose any nonpublic personal information about our clients or former clients to anyone, except as requested by our clients or as required by law.

We restrict access to personal information concerning you, except to our employees who need such information in order to provide products or services to you. We maintain physical, electronic, and procedural safeguards that comply with federal regulations to guard your personal information.

If you have any questions about our privacy policy, contact our office at (740)597-2820.

Additional Taxpayer Information

Name: _____

SSN: _____

Estimates

	Federal		Resident state		Resident city	
	Date paid	Amount	Date paid	Amount	Date paid	Amount
Overpayment applied from 2019	_____	_____	_____	_____	_____	_____
First quarter	_____	_____	_____	_____	_____	_____
Second quarter	_____	_____	_____	_____	_____	_____
Third quarter	_____	_____	_____	_____	_____	_____
Fourth quarter	_____	_____	_____	_____	_____	_____
Additional payments	_____	_____	_____	_____	_____	_____

Account Information for Deposits or Withdrawals

Name of bank	Bank routing number	Bank account number	Type of account		Use this account for	
			Checking	Savings	Deposits	Withdrawals

Identification Information

Taxpayer

Type of photo ID Driver's license State-issued photo ID

Driver's license or state-issued photo ID number _____

State the driver's license or state-issued photo ID was issued in _____

Issue date of the driver's license or state-issued photo ID _____

Expiration date of the driver's license or state-issued photo ID _____

Spouse

Type of photo ID Driver's license State-issued photo ID

Driver's license or state-issued photo ID number _____

State the driver's license or state-issued photo ID was issued in _____

Issue date of the driver's license or state-issued photo ID _____

Expiration date of the driver's license or state-issued photo ID _____

Questionnaire

Name: _____

SSN: _____

Questionnaire**General Information****Yes No**

- Did your marital status change during the year? If "yes" please explain including dates _____
- Can you or your spouse be claimed as a dependent by someone else?
- Did your address change during the year? If "yes" please provide dates _____
- Are you a U.S. Citizen or a Permanent Resident (Green Card Holder?) If "no" please fill out NR form

Dependent/Education Information

- Are you claiming any dependents on your return? If "yes" please fill out section A on opposite side of form
- Did anyone in your household attend college last year? If "yes" please fill out section B on opposite side

Health Care Information

- Do you have subsidized health insurance (Affordable Care Act?) If so please provide us with your 1095A
- Are you currently on Medicare or will you be within the next year?

Income, Purchases & Sales

- Did you have a change in employment or new employment in 2020? If "yes" please provide details _____
- Did you receive an Economic Impact (Stimulus) Payment? If yes please provide us with the amounts you received. First amount (mid summer) _____ Second amount (late Dec/early Jan) _____
- Did you receive any retirement income _____ or Social Security _____?
- Did you delay your required minimum distribution (RMD) from an IRA or qualified plan in 2020?
- Did you receive any interest or dividends last year?
- Did you buy or sell any stocks, bonds or other investments during the year?
- Does OUCU Financial Services manage your investment and/or retirement accounts?
- Do you have bank accounts in a foreign country?
If yes was the amount on any single day in 2020 more than \$10,000 USD? Yes _____ No _____
- Did you have any income from, or pay taxes to a foreign country?
- At any time during 2020, did you receive, sell, send, exchange or otherwise acquire any financial interest in any virtual/crypto currency?
- Did you sell your personal residence during the year? If yes please provide original purchase date & amount
- Did you receive or pay alimony in 2020? If yes, please provide date of final divorce (mo/yr) _____ and amount paid/received _____
- Did you receive any income that will not be provided with the forms and documents you are submitting today?
(Example: Tips) If so, please note here _____

Business/Rental Property

- Do you own a business or rental property? If "yes" please fill out section C on next page

Itemized Deductions. If YES, please provide documentation.

- Did you pay any out of pocket medical or dental expenses (premiums, prescriptions, mileage etc?) If yes, and itemizing, please fill out medical expense worksheet. Note we are not staffed to total receipts.
- Did you pay long-term health insurance (nursing home) premiums for you, your spouse or dependents in 2020?
- Did you pay any real estate property tax _____ or mortgage interest _____ during the year?
- Did you make any contributions to charity during the year? Cash/Check/CC\$ _____ Non-Cash\$ _____

Miscellaneous

- Did you make any contributions to a Traditional or Roth IRA? (please circle type) Amount _____
- Did you make any contributions to an Ohio Qualified Tuition program during the year?
- Did you pay wages of \$2,200 or more to any household employees? (babysitter, nanny, tutor, housekeeper etc.)
- Did you make gifts to anyone in excess of \$15,000 during the year?
- Did you receive a first time home buyer credit in 2008?
- Did you make any estimated payments toward your 2020 taxes?
- Did you receive any notices from the IRS or a state taxing authority? If "yes" please provide copy
- Have you ever been disallowed an Earned Income, Child Tax or American Opportunity credit?
- May we communicate with you via text regarding the status of your tax return?
- Would you prefer to sign your return electronically _____ or in person _____?

Signature: _____ Date: _____

Questionnaire

Name:

SSN:

Questionnaire

Yes No

Section A Dependents

- Is the child(ren) you are claiming your: son, daughter, stepchild, foster child, brother, sister, step-sibling, half-sibling or descendant of any of them?
- Does the child(ren) have valid social security numbers or ITINs?
- Did the child(ren) live with you in the United States for over half of the year?
- Was the child(ren) between the ages of 19 to 23 and a full time student?
- Were any of the children permanently and totally disabled? (please provide documentation)
- Did you pay any dependent care expenses (daycare, summer camps etc.) If so please provide amounts and provider EIN. _____
- Are any of the children married and filing a joint return?
- Did the child(ren) pay for more than half of their own support during the year?
- Do any of your dependents need their own tax return completed? If yes please ask for dependent tax return checklist.
- If you are the non-custodial parent do you have an active Form 8332? (If so please provide us with a copy)
- What documentation can you provide to substantiate the eligibility for your claim. Please check all that apply: School Records____, Medical Records____, Social Services Statement____, Other (specify) _____
- Unmarried or Separated Individuals - Did you pay for more half the cost of maintaining your home in 2020?
Note you may only include costs for rent, mortgage, property tax, home insurance, home repairs & maintenance, utilities and food eaten in the home.

Section B College Students

- Was the student enrolled at least half-time for one academic period in 2020?
- As of January 1, 2020 (beginning of last year) has the student completed their first bachelor's degree.
- Have you provided us with a copy of all Forms 1098-T?
- How many years have you claimed the American Opportunity Credit? _____
- Are there any other fees not listed on the Form(s) 1098-T? (ex books) _____
- Has the student ever been convicted of felony possession or distribution of a controlled substance (drugs?)
- Please provide us with an account statement from the school and book receipts if available.

Section C Business/Rental Property Owners

- If you received a payroll protection loan (PPP) please provide amount \$ _____
- Were you unable to work due to Coronavirus related care for yourself or a family member?
If yes, please indicate number of days: Self _____ Family _____
- Do you have a separate bank account for business transactions?
- For rental property owners: How many hours are you actively involved annually with your property(ies)? _____
- Do you have documentation to substantiate your business/rental income and expenses?
- Do you have automobile expenses/mileage relating to this activity? If yes please provide both 2020 business miles _____ & total vehicle miles _____ By providing mileage you agree you can provide written documentation such as a log of business miles & third party verification of total miles (ex: an oil change)
- Have you been issued a 1099-Misc to support the income for this business?
- For business owners: Please list all cities in which you earned income for this business

Section D Any Additional Information

Taxpayer Signature _____ Date _____

Spouse Signature _____ Date _____

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Engagement Letter for Preparation of Your 2020 Tax Returns

Thank you for choosing OU Credit Union Financial Services to assist you with your 2020 taxes. This letter confirms the terms of our engagement with you and outlines the nature and extent of the services we will provide.

We will prepare your 2020 federal and state income tax returns. We will depend on you to provide the information we need to prepare complete and accurate returns. We may ask you to clarify some items but will not audit or otherwise verify the data you submit. An Organizer is enclosed to help you collect the data required for your return. The Organizer will help you avoid overlooking important information. By using it, you will contribute to the efficient preparation of your returns and help minimize the cost of our services.

We will perform accounting services only as needed to prepare your tax returns. Our work will not include procedures to find defalcations or other irregularities. Accordingly, our engagement should not be relied upon to disclose errors, fraud, or other illegal acts, though it may be necessary for you to clarify some of the information you submit. We will inform you of any material errors, fraud, or other illegal acts we discover.

The law imposes penalties when taxpayers underestimate their tax liability. Call us if you have concerns about such penalties.

Should we encounter instances of unclear tax law, or of potential conflicts in the interpretation of the law, we will outline the reasonable courses of action and the risks and consequences of each. We will ultimately adopt, on your behalf, the alternative you select.

Our fee is based on the time required at standard billing rates plus out-of-pocket expenses. Invoices are due and payable upon presentation. All accounts not paid within thirty (30) days are subject to interest charges to the extent permitted by state law.

We will return your original records to you at the end of this engagement. Store these records, along with all supporting documents, in a secure location. We retain copies of your records and our work papers from your engagement for up to seven years, after which these documents will be destroyed.

If you have not selected to e-file your returns with our office, you will be solely responsible to file the returns with the appropriate taxing authorities. Review all tax-return documents carefully before signing them. Our engagement to prepare your 2020 tax returns will conclude with the delivery of the completed returns to you, or with e-filed returns, with your signature and our subsequent submittal of your tax return.

Thank you for the opportunity to be of service. If you have any questions, contact our office at (740)597-2820.

Amy Karr, CPA

Amy Karr CPA
OU Credit Union Financial Services

(Both spouses must sign for preparation of joint returns.)

Accepted By:

Taxpayer

Spouse

Date