

TAX YEAR: \_\_\_\_\_

# METROPOLITAN TAX SERVICES

12761 Darby Brooke Ct Ste 201  
Woodbridge, VA 22192

ARE YOU A NEW CLIENT? YES  NO  IF YES, HOW DID YOU HEAR ABOUT US? \_\_\_\_\_

PLEASE INCLUDE A COPY OF LAST YEAR'S RETURN

## CLIENT INFORMATION

FILING STATUS:  SINGLE  MARRIED FILING JOINTLY  MARRIED FILING SEPARATELY  WIDOW/ER

FULL NAME: \_\_\_\_\_

SSN: \_\_\_\_\_ DOB: \_\_\_\_\_ OCCUPATION: \_\_\_\_\_

SPOUSE FULL NAME: \_\_\_\_\_

SSN: \_\_\_\_\_ DOB: \_\_\_\_\_ OCCUPATION: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

COUNTY: \_\_\_\_\_ PHONE NUMBER: \_\_\_\_\_

EMAIL: \_\_\_\_\_ SPOUSE EMAIL: \_\_\_\_\_

REFERRED METHOD OF CONTACT: PHONE  EMAIL

DO YOU WANT DIRECT DEPOSIT? YES  NO  **INCLUDE CURRENT BANK INFORMATION**

IDENTITY PROTECTION PIN? YES  NO  **INCLUDE AGENCY LETTER**

**INCLUDE DRIVER'S LICENSE FOR FILER AND SPOUSE [EVERY YEAR]**

## DEPENDENT INFORMATION

FULL NAME WITH MIDDLE INITIAL      DOB      SSN      RELATIONSHIP TO YOU      MONTHS IN HOME

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## INCOME INFORMATION

TYPE OF INCOME	FORM REQUIRED	HOW MANY?
WAGES	W-2	_____
INTEREST INCOME	1099-INT	_____
DIVIDEND INCOME	1099-DIV	_____
STOCKS OR BOND	1099-B BROKERAGE STATEMENT	_____
CRYPTOCURRENCY TRANSACTIONS	GAIN/LOSS SUMMARY	_____
RETIREMENT/PENSION INCOME	1099-R	_____

PLEASE FILL THIS OUT AND RETURN WITH YOUR TAX INFORMATION

SOCIAL SECURITY INCOME	SSA-1099 OR RRB-1099	_____
UNEMPLOYMENT INCOME	1099-G	_____
GAMBLING WINNINGS	1099-G	_____
NON-EMPLOYEE INCOME	1099-NEC OR 1099-MISC	_____
SELF-EMPLOYED EARNINGS	PROFIT AND LOSS STATEMENT	_____
PARTNERSHIP/CORPORATION	K-1	_____
SOLD YOUR PRIMARY RESIDENCE	CLOSING DOCUMENTS	_____
HAVE A FOREIGN BANK ACCOUNT	YEAR END STATEMENT	_____
SOLD RENTAL PROPERTY	CLOSING DOCUMENTS	_____
CREDIT CARD/3rd PARTY PAYMENTS	1099-K	_____
OTHER INCOME, PLEASE EXPLAIN		_____

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## DEDUCTION INFORMATION

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TYPE OF DEDUCTION	FORM REQUIRED/AMOUNT PAID	
UMREIMBURSED MEDICAL EXPENSES	\$ _____	<input type="checkbox"/>
HEALTH INSURANCE PREMIUMS	POST TAX COST \$ _____	<input type="checkbox"/>
LONG-TERM CARE PREMIUMS	\$ _____	<input type="checkbox"/>
REAL ESTATE TAXES	\$ _____	<input type="checkbox"/>
PERSONAL PROPERTY TAXES	\$ _____	<input type="checkbox"/>
MORTGAGE INTEREST	1098-MORTGAGE INTEREST STATEMENT	<input type="checkbox"/>
CHARITY DONATIONS	CASH \$ _____	<input type="checkbox"/>
	NON-CASH \$ _____	<input type="checkbox"/>
UNREIMBURSED TUITION EXPENSES	1098-T	<input type="checkbox"/>
EXPENSES NOT REFLECTED ON 1098-T	\$ _____	
CHILD/DEPENDENT CARE EXPENSES	\$ _____	<input type="checkbox"/>
HEALTH SAVINGS ACCOUNT DISTRIBUTIONS	1099-SA	<input type="checkbox"/>
529 CONTRIBUTIONS	YEAR END STATEMENT	<input type="checkbox"/>
ESTIMATED TAX PAYMENTS	ATTACH SUMMARY, INCLUDING DATES & AMOUNTS PAID	<input type="checkbox"/>
ADDITIONAL INFORMATION/NOTES/QUESTIONS		_____

# ENGAGEMENT LETTER

Thank you for choosing our firm to prepare your income tax returns for tax year 2024. This letter confirms the services we will provide and the responsibilities you have for preparation of your tax return.

We will prepare your federal and state returns for the tax year based on the 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.

In the event your return is audited, you will be responsible for verifying the items reported.

The tax return preparation fee does not include bookkeeping, audit representation or preparing materials to respond to correspondence from taxing authorities. In the event of a negative audit or dispute, our liability will not extend beyond the fees paid for our service.

We provide cloud storage for your tax returns and any documents you have provided for five years; however, you should download and store your supporting documents along with copies of your tax returns in a secure place for at least five years.

Preparation fees include limited assistance and consultation during the year. In depth tax review or analysis are available for additional fee.

#### Taxpayer Responsibilities:

- You agree to provide 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. You further affirm you can provide written records of all items included on your return if audited by either the IRS or state tax authority. We can provide guidance concerning what evidence is acceptable.
- You affirm you will review the return carefully before signing to make sure the information is correct.
- Submitting your information timely to ensure you can file your returns by the due dates is your responsibility.
- Our 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 the preparation of late returns.

Your signature below indicates this letter accurately summarizes your understanding of our agreement relating to the preparation of your tax returns.

Thank you again for choosing our firm to prepare your 2024 tax returns. We appreciate your business.

Sincerely,

#### **METROPOLITAN TAX SERVICES**

Accepted by:

Signature	Print Name	Date
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Spouse's Signature	Print Name	Date
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Return Original Documents? (\$10), or	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
Hard Copy of Tax Return? (\$25)	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No

Metropolitan Tax Services      12761 Darby Brooke Court, Suite 201      Woodbridge, VA 22192