

CLIENT TAX NOTES – TY2018

Dear Tax Payer,
Greetings!

Please fill the below Tax Organizer form and upload it in your secured login or even you can E-mail it to us at info@gtaxfile.com along with your Form W2 & any other income statement and any other relevant documents to prepare and analyze your taxes and share you a Free Tax return Draft Copy for TY2018.

Simple 5 Steps to file your taxes with IRS.

- Step 1:** Fill this Tax Notes form and upload it in your login or email it to us
- Step 2:** upload all income related documents like W2, 1099 INT, DIV, MISC, 1099 B, Etc...
- Step 3:** we will prepare your tax return estimation and send you the documents for your review
- Step 4:** once you review your documents, you have to pay our service charges.
- Step 5:** Give confirmation to file your taxes.

PERSONAL INFORMATION

Particulars	Primary Taxpayer	Spouse	Dependent 1 (Child1)	Dependent 2 (Child -2)	Dependent 3 (Other dependent person)
First Name (per SSN/ITIN)	Adel	Marwa	Mohamed	Amr	Yara
Middle Name (per SSN/ITIN)	Ahmed Elsayed	Mahmoud Ahmed	Adel Ahmed	Adel Ahmed	Adel Ahmed
Last Name (per SSN/ITIN)	Elfayoumy	Mohamed Siam	Elfayoumy	Elfayoumy	Elfayoumy
SSN/ITIN Number	766-98-0548	345-35-3058	835-18-0553	320-97-6852	768-02-1668
Date of Birth (MM/DD/YY)	11/22/1973	08/14/1977	12/07/2002	03/14/2004	04/12/2011
Relationship with Primary Taxpayer	Self	Spouse	Son	Son	Daughter
Occupation	Engineer	NA	Student	Student	Student
Current Address	5165 Brian Dr. Klama th Falls, OR, 97603	5165 Brian Dr. Klama th Falls, OR, 97603	5165 Brian Dr. Klama th Falls, OR, 97603	5165 Brian Dr. Klama th Falls, OR, 97603	5165 Brian Dr. Klama th Falls, OR, 97603
Cell Number	205-396-8173	205-396-9748	-	-	-
Alternative Number (Home)	904-525-7879	-	-	-	-
Work Number (with Extension)	-	-	-	-	-
Email address	aafayoumy@gmail.com	-	-	-	-
First port of entry Date (MM/DD/YY)	12/25/2010	12/25/2010	12/25/2010	12/25/2010	Citizen
Visa status on 31 st Dec 2018	Green Card Holder	Green Card Holder	Green Card Holder	Green Card Holder	Citizen
Any change in visa status during the year 2018 (if yes pls. specify)	At 6/26/2018 Changed from H1-B to GC	At 6/26/2018 Changed from H4-B to GC	At 6/26/2018 Changed from H4-B to GC	At 6/26/2018 Changed from H4-B to GC	Citizen
Marital status as on Dec 31,2018	Married	Married	Single	Single	Single



GLOBAL TAX

Date of Marriage (if applicable)	07/13/2001	NA	NA	NA	NA
Filing Status (Single/Married/Head of Household)	Married	Married	NA	NA	NA
No. of months stayed in US during 2018	12	12	12	12	12
Will you stay in US for more than 183 days in year 2019 – (Yes or No)	Yes	Yes	Yes	Yes	Yes
If any other information	-	-	-	-	-

Note: if you do not have an SSN for your spouse/Dependents we can apply for ITIN. For ITIN application processing please reach us on (415)-373-1661 or write to itin@gtaxfile.com

Child and Dependent Care Expenses Provider Details -

Dependent Name	Name of the Organization	Address with Phone Number	Federal ID Number (EIN / SSN) of the Organization / Person who provided the care.	Amount Paid

1. Dependents under age 24 with unearned income (e.g. interest or dividends earned, stock sale proceeds) greater than \$950 may need to file a return.

NOTE: Dependents with unearned income greater than \$1,900 are subject to their parent's tax rate. Coordination of returns between parent and child is very important.

2. Please complete Childcare Expenses section only if Both Taxpayer & Spouse are working.

BANK ACCOUNT DETAILS

Bank Details for Direct Deposit of Refund Amount/Auto withdrawal of owe amount(Optional)	
Bank Name	Wells fargo
Bank Routing Number (Paper or Electronic)	062000080
Bank Account Number	8814469683
Checking / Saving Account	Checking
Account Holder Name	Adel Elfayoumy6ylop;

RESIDENCY DETAILS:

States Residency Details				States Residency Details			
Taxpayer				Spouse			
Year	State(s)	From (MM/DD/YY)	To (MM/DD/YY)	Year	State(s)	From (MM/DD/YY)	To (MM/DD/YY)
2018	Oregon	1/12018	12/31/2018	2018	Oregon	1/12018	12/31/2018
2017	Oregon	1/12018	12/31/2018	2017	Oregon	1/12018	12/31/2018
2016	Oregon	1/12018	12/31/2018	2016	Oregon	1/12018	12/31/2018

Medical Expenses:

Prescription medications	Health insurance premiums	Doctors, Dentists, etc.	Hospitals, clinics, etc.	Eyeglasses and contact lenses	Maternity expenses, if any
Medications	-	194	-	236	-

Taxes Paid:

Real estate taxes	State and local Personal property taxes	Other taxes, If any	Additional State taxes paid while filing last year taxes (TY2017).
3256.36			

Home Mortgage Interest

Home mortgage interest paid in US - *FORM 1098Mandatory	Points, if any	Home mortgage interest paid in INDIA - *Below details required	Mortgage insurance premiums paid, if any	Investment interest. Attach Form 4952
9023.25				
		Bank Name (Foreign)	Bank Address (Foreign)	

CHARITY CONTRIBUTIONS

S.no	Charitable Institution Name	Donated Amount	Property Donated	FMV of Property Donated	No. of trips driven and one way distance
1					
2					
3					

Note: 1) Cash Contribution more than \$ 250 receipts are Mandatory
2) Non - Cash Contribution more than \$ 500 receipts are Mandatory

HEALTH INSURANCE:

Are you and your dependents covered under Health Coverage as per Federal laws??? Mandatory	No
If not so, please specify who are not covered and for how many months	Spouse, 3 kids
IF you/your spouse resident of MA state, Covered by Massachusetts Health Insurance. Please provide Form 1099-HC.	

INVESTMENTS – SALE & PURCHASE OF STOCKS

Purchase Date	Description of Stock	Qty	Rate per Unit	Total =Qty*Rate	Sale Date	Description of the Stock	Qty	Rate per Unit	Total= Qty*Rate

Note: If you have more than 10 transactions, Please send us the sale and purchase details in an Excel sheet with the columns listed above.

Foreign Income and Expenses (IF Any)

Particulars	Salary income	Rental Income	Interest Income	Others (If any)
a) Amount of Foreign Income				
b) Foreign Taxes Withheld (like Form-16/16A)				

Other Deductions – Adjustments to Income

Particulars	Taxpayer	Spouse
Educator expenses – only for Teaching profession (\$ 250)		
Health savings account Contribution		
Penalty on early withdrawal of saving		
Contribution towards Traditional IRA for 2018		
Student loan interest deduction – Provide Form 1098 E		
Tuition & Fees Provide Form 1098-T		
Gambling Losses		

FOR FBAR/FATCA

	Tax Payer(No)	Spouse (No)
Did you have more than \$10,000 in your Foreign Accounts at any time during the Tax Year 2018		
Did you have more than \$50,000 in your Foreign Accounts at any time during the Tax Year 2018		

Note: You may have to FBAR (Foreign Bank Account Report) before April 15, 2019 if the aggregate of your Bank Accounts/Securities Accounts/Other Financial Accounts exceeded \$10,000 at any time during the tax year 2018. You may have to file FATCA (Foreign Account tax Compliance Act) before April 15, 2019 with your tax return if the aggregate of your Bank Accounts/Securities/Other financial Accounts exceeded \$50,000 at any time during the tax year 2018.

UPLOAD /EMAIL THE FOLLOWING DOCUMENTS ALONG WITH THE THIS TAX ORGANISER

Duly Filled TY-2018 Tax Organizer	
W-2's: Wages/salaries from All employers – Upload Documents	
1099-INT &1099-DIV: Interest & Dividends for All Accounts	
1099-B: Sales of Securities, Mutual Funds, etc.	
Year-End: Investment statements, Mutual Fund supplemental information	
1099-R: Income from Pension, IRAs and Annuities	
1099-G: Unemployment Compensation/state income tax refund	
K-1: Partnerships,Trusts,Estates and S-Corporations	
Last Paystubs of the year from ALL Employers	
1099-SSA/ 1099-RRB: Social Security and Railroad Retirement benefits	
Scholarships, Fellowships and Grants Form 1042 S	
Foreign Tax certificate (if you made any income from foreign country during 2018)	
Disability and Sick Pay	
Gambling Winnings	
Form W-2G – Income from Gambling	
Prizes and Awards	
Rental Income (if any) INDIA or USA	
Alimony Received (if any)	
Home Mortgage Statement (India) (From 01st Jan To 31st Dec)	
Education Loan Interest Certificate (India) (From 01st Jan To 31st Dec)	
Form-1099HC-(Details Required From Tax Payer who is residing in MA)	
For New ITIN Or Renewal ITIN (Passport and VISA First and Last page is required)	



Refer a friend(s) to get Referral Bonus@ \$ 10 for Each paid client to us.**

S. No	Friend(s) Name	Friends E-mail ID	Contact Number
1			
2			
3			
4			
5			
6			

Feel Free to reach us at (212)-920-4151, (305)-359-3078
(Monday to Saturday 9:00 AM to 8:00 PM EST)

Tax Preparation Fee for TY2018	
Filing Status: Single MFJ MFS HOH QWDC	
Particulars	Fee(\$)
Federal – Standard Return (Form 1040)	\$ 19.99
Each State Tax Return	\$ 29.99
Federal – Non Resident Tax Return (Form 1040NR)	\$ 59.99
Federal – ITIN Case (Paper filing)- Form 1040	\$ 89.99
Federal – Non Resident Spouse Election (Paper Filing) (6013G & H)	\$ 119.99
Federal – Schedule C, E & 1099 Misc	\$ 119.99
FBAR Processing	\$29.99
For State Rental Credit Planning/OSTC Credit Planning	\$19.99
City Return (KY, MI, NY, OH, PA) / County Return	\$ 19.99 each city
Stock Transaction	\$ 10 Per Page
FATCA Processing - Form 1040	\$29.99
Tax Representation (Unlimited (Up to 8 Succeeding Years)	*Free*
Optimized Tax Planning Charges (Includes All Services of Value \$300)	\$150

- In case of any audit taxpayer need to furnish the documents as per IRS guidelines to substantiate the claim made on the tax return.
- Claim only those expenses that you have incurred while working at client location and which is necessary expenditure to work at client locations, not lavish by nature but should be supported by proper documentary evidence.

Thank you for completing this form and Pls. upload or email your w2 and other income related statements to prepare your taxes accurately.

Looking for your Business & Support!

Warm Regards,

Global Taxes LLC. (Global Taxes team)

Phone: (212)-920-4151,(305)-359-3078

Email: support@gtaxfile.com, info@gtaxfile.com