

# **CLIENT TAX NOTES - TY2019**

#### 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 <a href="mailto:info@gtaxfile.com">info@gtaxfile.com</a> 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 TY2019.

# 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)	Khatija				
MIDDLE NAME (PER SSN/ITIN)					



LAST NAME (PER	Begum		
-	Deguiii		
SSN/ITIN)			
SSN/ITIN NUMBER	739503475		
DATE OF BIRTH	08/24/1983		
(MM/DD/YY)			
RELATIONSHIP WITH			
PRIMARY TAXPAYER			
OCCUPATION	Student		
CURRENT ADDRESS	8906		
	pennington place		
	Montgomery-Al		
	36117		
CELL NUMBER	334-220-1570		
ALTERNATIVE NUMBER			
(HOME)			
WORK NUMBER (WITH			
EXTENSION)			
EMAIL ADDRESS	bkhatija9871@gm		
	ail.com		
FIRST PORT OF ENTRY	08/14/2018		
DATE (MM/DD/YY)			
VISA STATUS ON 31 <sup>ST</sup> DEC			
2019			
ANY CHANGE IN VISA			
STATUS DURING THE			
YEAR 2019 (IF YES PLS.			
SPECIFY)			



MARITAL STATUS AS ON	married		
DEC 31,2019			
DATE OF MARRIAGE (IF	08/04/2009		
APPLICABLE)			
FILING STATUS			
(SINGLE/MARRIED/HEAD			
OF HOUSEHOLD)			
NO. OF MONTHS STAYED	11		
IN US DURING 2019			
WILL YOU STAY IN US FOR	yes		
MORE THAN 183 DAYS IN			
YEAR 2020 – (YES OR NO)			
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	Pnc			
BANK ROUTING NUMBER (PAPER OR ELECTRONIC)	083000108			
BANK ACCOUNT NUMBER	3033307459			
CHECKING / SAVING ACCOUNT				
ACCOUNT HOLDER NAME	khatija Begum			



# **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)
2019	Al			2019			
2018				2018			
2017				2017			



	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							

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,