

CLIENT TAX NOTES – TY2020

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 TY2020.

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.

PARTICULARS	PRIMARY TAXPAYER	SPOUSE	DEPENDENT 1 (CHILD1)	DEPENDEN T 2 (CHILD -2)	DEPENDENT 3 (OTHER DEPENDENT PERSON)
SFIRST NAME (PER SSN/ ITIN)	ARUNKUMAR	JEGADHEES WARI	MITHRAN		
MIDDLE NAME (PER SSN/ITIN)					
LAST NAME (PER SSN/ ITIN)	GANESAN	NALLASAMY	ARUNKUMAR		
SSN/ITIN NUMBER	842-61-5246	728-96-6883	295-65-0001		
DATE OF BIRTH (MM/ DD/YY)	07/18/1985	04/10/1988	05/13/2016		
RELATIONSHIP WITH PRIMARY TAXPAYER		SPOUSE	SON		
OCCUPATION	SOFTWARE ENGINEER				

PERSONALINFORMATION



CURRENT ADDRESS	12345 ALAMEDA TRACE CIR, APT 825, AUSTIN TX - 78727			
CELL NUMBER	682-351-7865			
ALTERNATIVE NUMBER (HOME)				
WORK NUMBER (WITH EXTENSION)				
EMAIL ADDRESS	ARUNKUMAR.CSE@GM AIL.COM		5	
FIRST PORT OF ENTRY DATE (MM/DD/YY)	01/10/2013			
VISA STATUS ON 31 st DEC 2020	H1B			
ANY CHANGE IN VISA STATUS DURING THE YEAR 2020 (IF YES PLS. SPECIFY)				
MARITAL STATUS AS ON DEC 31,2020	MARRIED			
DATE OF MARRIAGE (IF APPLICABLE)	8			
FILING STATUS (SINGLE/ MARRIED/HEAD OF HOUSEHOLD)	MARRIED			
NO. OF MONTHS STAYED IN US DURING 2020	12 MONTHS	12 MONTHS	12 MONTHS	
WILL YOU STAY IN US FOR MORE THAN 183 DAYS IN YEAR 2020 – (YES OR NO)	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	BANK OF AMERICA			
BANK ROUTING NUMBER (PAPER OR ELECTRONIC)	111000025			
BANK ACCOUNT NUMBER	488041587560			
CHECKING / SAVING ACCOUNT	CHECKING			
ACCOUNT HOLDER NAME	ARUNKUMAR GANESAN			



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)	
2020	TX	01/01/20	12/31/20	2020	ТХ	01/01/20	12/31/20	

MEDICAL EXPENSES:

PRESCRIPTION MEDICATIONS	HEALTH INSURANCE PREMIUMS	DOCTORS, DENTISTS, ETC.	HOSPITALS, CLINICS, ETC.	EYEGLASSES AND CONTACT LENSES	MATERNITY EXPENSES, IF ANY

TAXES PAID:

REAL ESTATE TAXES	STATE AND LOCAL PERSONAL PROPERTY TAXES	OTHER TAXES, IF ANY	ADDITIONAL STATE TAXES PAID WHILE FILING LAST YEAR TAXES (TY2019).

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
		BANK NAME (FOREIGN)	BANK ADDRESS (FOREIGN)	

Note: Are you planning to purchase any House Property In Tax Year 2021 In United States Of America

Yes

Please Mention Yes Or No

_____ No

	CHARITY CONTRIBUTIONS						
S.N O	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						

	VEHICLE INFORMATION								
	NAME OF THE VEHICLE	MAKE & MODEL	TOTAL MILES DRIVEN IN YEAR 2020	ONE-WAY DISTANCE FROM HOME TO OFFICE	PARKING AND TOLL	PURCHASE DATE			
TAXPAYER	CAR	MAZDA CX5	10000	5 MILES					
TAXPAYER									
SPOUSE									



BUSINESS ASSETS OR ENVIRONMENT SAVING ASSETS PURCHASED:

NAME OF THE ASSET PURCHASED IN 2020	COST	PURCHASE DATE	RECEIPT AVAILABLE OR NOT

HEALTH INSURANCE:

ARE YOU AND YOUR DEPENDENTS COVERED UNDER HEALTH COVERAGE AS PER FEDERAL LAWS??? MANDATORY	YES
IF NOT SO, PLEASE SPECIFY WHO ARE NOT COVERED AND FOR HOW MANY MONTHS	
IF YOU/YOUR SPOUSE RESIDENT OF MA STATE, COVERED BY MASSACHUSETTS HEALTH INSURANCE. PLEASE PROVIDE FROM 1099-HC.	

INVESTMENTS – SALE & PURCHASE OF STOCKS

PURCHASE DATE	DESCRIPTION OF STOCK	QTY	RATE PER	TOTAL =QTY*RATE	DESCRIPTION OF THE	QTY	RATE PER	TOTAL= QTY*RATE
			UNIT		STOCK		UNIT	

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)				



TO INCOME	
TAXPAYER	SPOUSE
	TAXPAYER

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 2020		
DID YOU HAVE MORE THAN \$50,000 IN YOUR FOREIGN ACCOUNTS AT ANY TIME DURING THE TAX YEAR 2020		

NOTE: YOU MAY HAVE TO FBAR (FOREIGN BANK ACCOUNT REPORT) BEFORE APRIL 15, 2021 IF THE AGGREGATE OF YOUR BANK ACCOUNTS/SECURITIES ACCOUNTS/OTHER FINANCIAL ACCOUNTS EXCEEDED \$10,000 AT ANY TIME DURING THE TAX YEAR 2020.YOU MAY HAVE TO FILE FATCA (FOREIGN ACCOUNT TAX COMPLIANCE ACT) BEFORE APRIL 15, 2020 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 2019.



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

DULY FILLED TY-2019 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 2019)	
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 01 st JAN TO 31 st 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)	



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 FO	DR TY2019		
FILING STATUS: SINGLE MFJ MFS HOH QWDC			
PARTICULARS	FEE(\$)		
FEDERAL – STANDARD RETURN (FORM 1040)	\$ 19.99		
EACH STATE TAX RETURN	\$ 34.99		
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:<u>SUPPORT@GTAXFILE.COM</u>, INFO@GTAXFILE.COM