



**GLOBAL TAX**

**GLOBAL TAXES LLC**

**CLIENT TAX NOTES – TY 2017**

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](mailto: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 TY 2017.

**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)	RAVI KUMAR				
Middle Name (per SSN/ITIN)					
Last Name (per SSN/ITIN)	KOTI				
SSN/ITIN Number	807 26 4074				
Date of Birth (MM/DD/YY)	05/30/1978				
Relationship with Primary Taxpayer	SELF				
Occupation	Programmer Analyst				
Current Address	914, VENERO IRUVE CA-92614				
Cell Number	657 346 8973				
Alternative Number (Home)					
Work Number (with)	714 246 2585				

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Extension)					
Email address	RAVI KUMAR.KOTTA@gmail.com				
First port of entry Date (MM/DD/YY)	04/09/2017				
Visa status on 31 <sup>st</sup> Dec 2017	H1B				
Any change in visa status during the year 2017 (if yes pls. specify)	NO				
Marital status as on Dec 31,2017	MARRIED				
Date of Marriage (if applicable)	08/03/2012				
Filing Status (Single/Married/Head of Household)	SINGLE				
No. of months stayed in US during 2017	9				
Will you stay in US for more than 183 days in year 2018 – (Yes or No)	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](mailto: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 Child Care Expenses section only if Both Taxpayer & Spouse are working.

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**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)	121000358
Bank Account Number	325077982836
Checking / Saving Account	Checking
Account Holder Name	Ravi Kumar Koh

**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)
2017	CA	04/09/2018		2017			
2016				2016			
2015				2015			

Employment Details						
	Employer Name & Address (State & City)	Designation	Employment Start Date (MM/DD/YY)	Employment End Date (MM/DD/YY)	Visa Status	Worked at Employer Location (EL) or Client Location (CL)
Taxpayer	Wipro Ltd 2 Tower Center Bldg	Programmer	04/09/2017	-	H1B	CL
Taxpayer	WIFE 2200					
Spouse	CASH REUSE WITH MS-DEAL					
Spouse						

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If you/your spouse worked/are working at Client Location, Please fill this table:

	Taxpayer Project 1	Project 2	Project 3	Spouse Project 1	Project 2
Client Name	Allergon Sales LLC				
Client Project Location ( City & State )	Irvine / California				
Project Start date (MM/DD/YY)	06/22/2016				
Project End date/ expected date (MM/DD/YY)	05/30/2019				
Mode of commuting (Bus, train, rental or own car, others)	BUS				
Monthly Bus, Train, Cab Fare, Car Rent if leased vehicle is used	264				
Daily Project Miles on Vehicle (one way) using own car					
Monthly Rent / Stay Expenses	2400				
Daily Meals Expenses while on Client Projects					
One way distance between your employer location & client location	27 to miles				
One way distance between your Home location & client location	2 miles				

Note: Project start date and End date should be as per your deputation letter/Transfer memorandum/Email correspondence given by your employer while deputing you on the specific project.

**MOVING EXPENSES**

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(Eligible expenditure: Airfare+Transportation charges+ Onward meals and tips temporary lodging and Boarding to the extent not reimbursed by your Employer)

Description of the relocation	Distance	Expenditure
a)Have you moved from Employer location to Client Location during the TY-2017		—
b)Have you moved from one client location to another Client location during the TY-2017		—
c)Have you moved from one Employer to another Employer Location during the TY-2017		—

**ITEMIZED DEDUCTIONS – Schedule A**

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 (TY2017).

Home Mortgage Interest

Home mortgage interest paid in US - * FORM 1098 Mandatory	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)		

CHARITY CONTRIBUTIONS

S.n	Charitable Institution Name	Donated Amount	Property Donated	FMV of Property Donated	No. of trips driven and one way distance
0					
1					
2					

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**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 2017	One-way distance from Home to Office	Parking and toll	Purchase date
Taxpayer						
Taxpayer						
Spouse						

Business Assets purchased:

Name of the Asset Purchased in 2017	Cost	Purchase date	Receipt Available or not
Laptop			
Cell Phone			

Other Miscellaneous Unreimbursed Job related Expenses (Client Location)

Particulars	Taxpayer	Spouse	Particulars	Taxpayer	Spouse
Union and Professional Dues			Last Year Tax Preparation Fees paid		
Internet Charges per month	51		Job Hunting Expenses		
Cell Phone Charges per month	25		Safe Deposit Box Rental		
Employment Visa Processing Fees			Cost of Energy Saving Equipment		
Professional Books and Supplies and Magazines			Casualty or theft loss(es)		
Uniforms expenses			Parking and Toll Fees		
Job Training or Higher Education Expenses			Any other expenses (Pls.give the description)		

**Note: As per the IRS publication 463, All unreimbursed job related expenses can be claimed only on Temporary Client project assignment, which is generally expected to last for 12 Months or Less. And If you have received Per diem allowance from your employer, then you are not, eligible or supposed to claim the above expenses.**



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HEALTH INSURANCE:

Are you and your dependents covered under Health Coverage as per Federal laws???	<b>YES/NO</b> ✓
<b>Mandatory</b>	
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 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)				

<u>Other Deductions – Adjustments to Income</u>	
Particulars	Taxpayer
Educator expenses – only for Teaching profession (\$ 250)	Spouse
Health savings account Contribution	
Penalty on early withdrawal of saving	
Contribution towards Traditional IRA for 2017	
Student loan interest deduction – Provide Form 1098 E	
Tuition & Fees Provide Form 1098-T	



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Gambling Losses

**FOR FBAR/FATCA**

Did you have more than \$10,000 in your Foreign Accounts at any time during the Tax Year 2017	Tax Payer(Yes/No)	Spouse (Yes/No)
Did you have more than \$50,000 in your Foreign Accounts at any time during the Tax Year 2017		

Note: You may have to FBAR (Foreign Bank Account Report) before April 17, 2017 if the aggregate of your Bank Accounts/Securities Accounts/Other Financial Accounts exceeded \$10,000 at any time during the tax year 2017. You may have to file FATCA (Foreign Account tax Compliance Act) before April 17, 2017 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 2017.

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

Duly Filled TY-2017 Tax Organizer	
<b>W-2's</b> : Wages/salaries from ALL employers – Upload Documents	
<b>1099-INT &amp; 1099-DIV</b> : Interest & Dividends for All Accounts	
<b>1099-B</b> : Sales of Securities, Mutual Funds, etc.	
<b>Year-End</b> : Investment statements, Mutual Fund supplemental information	
<b>1099-R</b> : Income from Pension, IRAs and Annuities	
<b>1099-G</b> : Unemployment Compensation/state income tax refund	
<b>K-1</b> : Partnerships, Trusts, Estates and S-Corporations	
<b>Last Paystubs</b> of the year from ALL Employers	
<b>1099-SSA / 1099-RRB</b> : Social Security and Railroad Retirement benefits	
<b>Scholarships, Fellowships and Grants Form 1042 S</b>	
<b>Foreign Tax certificate (if you made any income from foreign country during 2017)</b>	
<b>Disability and Sick Pay</b>	
<b>Gambling Winnings</b>	
<b>Form W-2G – Income from Gambling</b>	
<b>Prizes and Awards</b>	
<b>Rental Income (if any) INDIA or USA</b>	

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Alimony Received (if any)	
Others	

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 TY2017	
<b>Filing Status:</b> Single   MFJ   MFS   HOH   QWDC	
Particulars	Federal
Federal – Standard Return (Form 1040)	\$ 19.99
Each State Tax Return	\$ 29.99
Federal – Non Resident Tax Return (Form 1040NR)	\$ 49.99
Federal – Itemized Return (Schedule A)	\$ 89.99
Federal – ITIN Case (Paper filing)- Form 1040	\$ 89.99
Federal – Non Resident Spouse Election (Paper Filing) (6013G & H)	\$ 99.99
Federal – Schedule C, E & 1099 Misc	\$ 119.99
FBAR Processing ( Up To Two Bank Accounts-Free)	\$5 For Each Additional Bank Account
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	Page 1 Free, Page 2 is \$ 10 each
FATCA Processing - Form 1040	Free
Tax Representation	Unlimited (Up to 8 Succeeding Years)

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- **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](mailto:support@gtaxfile.com), [info@gtaxfile.com](mailto:info@gtaxfile.com)**

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