

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.

PERSONALINFORMATION

Particulars	Primary Taxpayer	Spouse	Dependent 1 (Child1)	Dependent 2 (Child -2)	Dependent 3 (Other dependent person)
First Name (per SSN/ITIN)	Prashanth				
Middle Name (per SSN/ITIN)					
Last Name (per SSN/ITIN)	Andoju				
SSN/ITIN Number					
Date of Birth (MM/DD/YY)	01/16/1993				
Relationship with Primary					
Taxpayer					
Occupation	Java D <mark>ev</mark> eloper				
Current Address	32 <mark>02 Dunwoo</mark> dy Gables Dunwoody, GA 30338	Dr,			
Cell Number	5515804636				
Alternative Number (Home)					
Work Number (with Extension)					
Email address	Kumar.prashanth1601@	gmail.com			
First port of entry Date (MM/DD/YY)	08/04/2015				
Visa status on 31st Dec 2018	F1				
Any change in visa status during the year 2018 (if yes pls. specify)	No				
Marital status as on Dec 31,2018	Single				
Date of Marriage (if applicable)					



Filing Status (Single/Married/Head	c: I		
of Household)	Single		
No. of months stayed in US during			
2018	12		
Will you stay in US for more than			
183 days in year 2019 – (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.

<u>NOTE</u>: 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	Chase bank			
Bank Routing Number (Paper	024202227			
or Electronic)	021202337			
Bank <mark>Acc</mark> ount Number	225153581			
Checking / Saving Account	Checking			
Account Holder Name	Prashanthandoju			

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RESIDENCY DETAILS:

					KESID	ENCY DE	AILS.				
		State	s Resi	dency Deta	ils		9	States	Residency	Detail	S
	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			2018								
2017						2017					
2016						2016					
					Me	dical Expen	ses:				
Prescription medications		Health insurance premiums		Doctors, Dentists, etc.	Hospi etc.	tals, clinics		Eyeglasses and contact lenses		Maternity expenses if any	
						Taxes Paid					1
Real estate taxes State and loc property taxes				onal Other taxes, If any			Additional State taxes paid while filing law year taxes (TY2017).				
					Home M	ortgage Inte	erest				
	_	ige intere	-	Points, if an	y Home mortgage INDIA – *Below	•		1	age insuranc ums paid, if a		Investment interest. Attach Form 4952
					Bank Name	(Foreign)		Bank (Fore	Address eign)		
					CHARITY	CONTRIR	UTIONS				
S.no Charitable Institution Name		Donated Amount	Donated Amount Property Donated		FMV of I	Property	No. of t	trips driven and one stance			
1										-	
2											
3					nan \$ 250 receip						

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	
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)				

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)	



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)	<mark>\$150</mark>

- 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
