



*Building  
Relationships  
That Last  
Generations.*

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Dear New Client:

Thank you for choosing Molen & Associates for your tax preparation needs. Attached is our introductory packet. In order to begin preparation of your tax return(s), please review and complete the following pages as it applies to your tax situation. This tax organizer will assist you in gathering information necessary for the preparation of your tax return.

The pages are numbered as follows:

**Essential Information.** (page 2) Only the essentials: name, address, phone numbers, etc.

**Questionnaire.** (page 3) Questions that need to be asked on every tax return. Please answer yes or no to all questions.

**Engagement Letter.** (page 4) The purpose of this letter is to help you understand the service that Molen & Associates is performing for you and your part in receiving that service. Because of our more than thirty years of tax experience, you can feel confident in receiving quality and timely tax preparation.

**List of Tax Documents.** (page 5) This list includes the forms and documents that are important to provide during tax preparation. It also has things that are not important to bring.

**Information Consent Form.** (pages 6-7) While this form is optional, it will allow us to better assist you outside the preparation of your tax return. If you have any questions, please ask your tax professional during your appointment.

Please note that phone appointments require a \$200.00 deposit. If you are using traditional services, your fee will be collected at the conclusion of your appointment. Thank you again for choosing to do business with us.  
Thank you again for choosing to do business with us.

Very truly yours,

A handwritten signature in black ink that reads "Clark Boyd". The signature is written in a cursive, flowing style.

Clark Boyd  
General Manager

Molen & Associates



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## Essential Information

<b>Tax Payer</b>	<b>Spouse</b>
First and Last Name:	First and Last Name:
Social Security Number:	Social Security Number:
Title/Suffix (Dr., Jr., Sr.):	Title/Suffix (Dr., Jr., Sr.):
Dates of Birth & Death (if applicable):	Dates of Birth & Death (if applicable):
Occupation:	Occupation:
Cell:	Cell:
Home:	Home:
Email:	Email:
<b>Primary Residential Mailing Address:</b>	
<b>Dependent 1</b>	<b>Dependent 2</b>
First and Last Name:	First and Last Name:
Title/Suffix (Dr., Jr., Sr.):	Title/Suffix (Dr., Jr., Sr.):
Social Security Number:	Social Security Number:
Date of Birth:	Date of Birth:
Date of Death (if applicable):	Date of Death (if applicable):
<b>Dependent 3</b>	<b>Dependent 4</b>
First and Last Name:	First and Last Name:
Title/Suffix (Dr., Jr., Sr.):	Title/Suffix (Dr., Jr., Sr.):
Social Security Number:	Social Security Number:
Date of Birth:	Date of Birth:
Date of Death (if applicable):	Date of Death (if applicable):



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# Questionnaire

If any of the following items pertain to you or your spouse for 2020, please check the appropriate box and provide additional information if necessary.

- | Yes                      | No                       |  |
|--------------------------|--------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> | Has your address changed?  |
| <input type="checkbox"/> | <input type="checkbox"/> | Did your marital status change during the year?  |
| <input type="checkbox"/> | <input type="checkbox"/> | Were there any changes in dependents?  |
| <input type="checkbox"/> | <input type="checkbox"/> | Did you have any government subsidized health insurance? (Marketplace, Obamacare, The Exchange, etc.)?                                   |
| <input type="checkbox"/> | <input type="checkbox"/> | Did you incur significant out-of-pocket medical expenses during the year?  |
| <input type="checkbox"/> | <input type="checkbox"/> | Did you buy or sell any stocks, bonds, or other investment property?   |
| <input type="checkbox"/> | <input type="checkbox"/> | Did you purchase, sell, or refinance your principal home or second home, or did you take out a home equity loan?                         |
| <input type="checkbox"/> | <input type="checkbox"/> | Did you receive a distribution from a retirement plan such as a 401(k) or IRA?   |
| <input type="checkbox"/> | <input type="checkbox"/> | Did you make any contributions to a retirement plan outside of your regular paycheck contributions?                                      |
| <input type="checkbox"/> | <input type="checkbox"/> | Did you pay, or use student loans to pay, for tuition, books or supplies required to attend a college, university, or vocational school? |
| <input type="checkbox"/> | <input type="checkbox"/> | Was your home rented out or used for business (e.g. a dedicated home office)?  |
| <input type="checkbox"/> | <input type="checkbox"/> | Do you have any employer reimbursed day care expenses?   |
| <input type="checkbox"/> | <input type="checkbox"/> | Did you use your car on the job (other than your commute)?   |
| <input type="checkbox"/> | <input type="checkbox"/> | Did you receive any IRS correspondence in the last year?   |
| <input type="checkbox"/> | <input type="checkbox"/> | Did you own, or have signature authority over, any bank accounts held outside of the United States?                                      |
| <input type="checkbox"/> | <input type="checkbox"/> | Do you have any other income from any other sources than is represented in your tax documents?   |
| <input type="checkbox"/> | <input type="checkbox"/> | Did you purchase or trade in any cryptocurrency such as bitcoin, litecoin, ethereum, etc.?   |
| <input type="checkbox"/> | <input type="checkbox"/> | Did you receive any stimulus funds? If Yes, how much? _____  |
| <input type="checkbox"/> | <input type="checkbox"/> | Were you referred? If Yes, by whom? _____  |

\_\_\_\_\_  
Client Signature



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## Engagement Letter

The purpose of this letter is to confirm that you (and your spouse) have retained Molen & Associates to prepare your 2020 Individual Federal Income Tax Return. This letter sets forth the terms and conditions upon which this undertaking is based.

**You (and your spouse)** will be responsible for the following actions and information:

1. Providing complete information for the preparation of the tax return. If you are unable to provide all required information by **April 1<sup>st</sup>** an extension may be required.
2. Reviewing the completed tax return documents carefully to verify that the information contained in the return is true and correct.
3. Keeping adequate records and receipts to substantiate all items of income, deductions and credits. These records should be retained for three years from the filing date of the tax return.
4. Should the Internal Revenue Service contact you for any reason in connection with this tax return, please call us so that we may discuss the appropriate action to be taken.

**Molen & Associates** will be responsible for the following actions and information:

1. Preparing the return based on information and documentation provided by you. The documentation you provide will not be independently verified.
2. Using our professional judgment in resolving questions where the law is unclear. We will resolve such questions in your favor whenever possible.
3. Treating any information received from you as confidential and subject to disclosure only at your written request or as compelled by law.

Molen & Associates **fee policy** is as follows:

1. In Office Tax Service: Tax preparation fees are based on the complexity of the return prepared and each form is individually priced. Payment is due at the time services are rendered for Traditional Services. Drop-Off Service and Phone Appointments require a \$200.00 deposit prior to scheduling appointments and the balance is due once the return has been completed.
2. A complete copy of your tax return will be provided at delivery. **All** of your corresponding information is returned to you at the conclusion of your initial appointment.
3. Molen and Associates retains a copy of your tax return and tax related documents in their electronic storage system. Should it become necessary to provide you with a copy of either your tax return or any tax related documents, a retrieval fee of \$25.00 will be charged.

### **NO TAX RETURN WILL BE RELEASED WITHOUT FULL PAYMENT.**

Our services are rendered on the foregoing basis. If you have any objections or any questions, please discuss them with me. We appreciate and value your business and feel all aspects of our representation are appropriate subjects for discussion.

RECEIVED & UNDERSTOOD:

\_\_\_\_\_

Signature

Please Print Your Name: \_\_\_\_\_

AGREED: – Molen & Associates: by \_\_\_\_\_

## List of Tax Documents

### Necessary

Please bring all yearly tax forms provided or mailed to you. Some statements may need to be downloaded from different sources such as your school or bank online.

Examples:

- Form(s) W-2 (wages, etc.)
- Form(s) 1099 (interest, dividends, miscellaneous income, etc.)
- Schedule(s) K-1 (income/loss from partnerships, S corporations, etc.)
- Form(s) 1098 (mortgage interest) and property tax statements
- Brokerage statements from stock, bond or other investment transactions
- Closing statements pertaining to real estate transactions
- Any tax notices received from the IRS or other taxing authorities.
- Profit & Loss statement per business or rental location. (Annual sums of expenses in categories)

For a more complete list visit... [www.molentax.com/taxdocuments](http://www.molentax.com/taxdocuments)

### Important

Please bring a copy of your **prior year tax return** as well as annual sums of deductions by category.

### Not Important

Please maintain these documents for your own records, but you do not need to bring them to your tax appointment.

- Birth / death certificate
- Receipts



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Consent to Use of Tax Return Information

Federal law requires this consent form be provided to you. Unless authorized, by law, we cannot use, without your consent, your tax return information for purposes other than the preparation and filing of your tax return.

You are not required to complete this form. If we obtain your signature on this form by conditioning our services on your consent, your consent will not be valid. Your consent is valid for the amount of time that you specify. If you do not specify the duration of your consent, your consent is valid for one year. If you do not consent, then you may still have your tax return prepared and electronically filed by us for a fee.

Because we know that taxes are only part of your complete financial picture, signing this form will allow us to answer questions year-round and refer directly to your tax return information. Common uses for this form are for tax advice, tax planning, retirement planning and investment advice. It also allows us to notify you of special offers and promotions we may be holding based on your tax information.

This form does not give us permission to disclose any tax return information to any third party outside of Molen & Associates or its staff. If you are interested in participating in investment advisory services through Majors & Mondragon, LLC we will only provide pertinent information to them with a separate signed agreement titled, "RIA Solicitor's Disclosure Document".

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I hereby acknowledge that I/we have read and understood the information contained in this document. Furthermore, I acknowledge receipt of this required disclosure.

Duration of Consent (Optional):

\_\_\_ Until revoked
\_\_\_ Until a specified date: \_\_\_\_\_

Taxpayer Signature \_\_\_\_\_ Date \_\_\_\_\_

Spouse Signature \_\_\_\_\_ Date \_\_\_\_\_

Tax Professional Signature \_\_\_\_\_ Client Code \_\_\_\_\_

If you believe your tax return information has been disclosed or used improperly in a manner unauthorized by law or without your permission, you may contact the Treasury Inspector General for Tax Administration (TIGTA) by telephone at 1-800-366-4484, or by email at complaints@tigta.treas.gov.