CAMEO WEALTH & CREATIVE MANAGEMENT, INC.
A Prager Metis Company

Welcome Aboard!

In order to prepare your taxes efficiently and effectively, we need you to gather as much information as possible. Please submit the following materials at one time:

- Completed tax returns from the prior two (2) years, both Federal & all states.
- All **W-2's**, **1099s** (Int, Div, B, G, K, R, Misc.), **K-1's**, etc.
- Additional records of income from all sources such as self-employment, rentals, royalties, jury duty, state tax refunds, unemployment, per diem, etc.
- **1098s** (Mortgage interest, Coop Deductions, Tuition, etc.) and any letters included with them. **Real Estate Taxes paid**, if any.
- **1095, 5498, and 1099-SA** (Health Insurance forms issued by your Health Insurance Provider or HSA).
- A summary of Charitable Donations including acknowledgements.
- For any stock or mutual fund sales (excluding IRA & Retirement accts), please furnish us with the **COST BASIS** (what you paid) **OF THE SHARES SOLD as well as the dates purchased/sold** (see Policies & Guidelines for further instructions).
- A copy of your **Social Security Card**.
- **EXPENSE WORKSHEET!** You must have your Expense Worksheet completed. The best thing is to submit all the totals with your questions and let us review it in context of the overall return.
  A sensible way of gathering this information is to go through your records - check register, receipts, credit card statements, etc. Use the back of the form for any additional categories, information or questions. For all items, there must be proof to back up your expenses: receipts, cancelled checks, etc. (credit or debit card statements are *not* sufficient).
- Please note we can provide you with a login to *Netclient*, our firm's secure web portal, as a safer method to upload information to us and also gives you access to your tax returns 24/7.

The more prepared you are, the more we can do for you.

We look forward to working with you this year and for many years to come.

PragerMetis

<u>POLICIES & GUIDELINES</u>

* * * **PRIVACY**: Any and all nonpublic information received from you will not be shared or released to any third party, except as permitted by law. In order to protect your personal information from unauthorized access, we use measures including computer safeguards and secure holding locations. If you wish for us to disclose any of your information to a third party, a *signed written notification* is required from you in advance.

* * * **MAIL & DROP OFF RETURNS:** If you are unable to come in for an appointment, are out of town, or simply prefer not have one please inform our offices that you plan to **mail-in or drop-off** your information. In order to complete the return on time, all information must be received by **Wednesday, March 14th**.

* * * **EXTENSIONS:** If you cannot complete your taxes by April 15th, we can file for an extension until Oct. 15th. This is only an extension of time to file the tax return, not to pay any taxes you may owe. If you think you will owe, you must send in money with the extension. The price for this service is $50. Appointments may then be scheduled from May 1 through Oct 1 to complete the return.

* * * **FEES & PAYMENT:** The fee for preparing TAX RETURNS will depend on the <u>work</u> and complexity involved in your return. For CONSULTATIONS, LETTERS, and OTHER SERVICES, the fees depend on the <u>time</u> involved. You will be made aware of these costs at the time the service is requested.

We accept checks, cash, money orders, Amex, Visa, and MC. Please make checks payable to: **<u>Prager Metis CPAs, LLC</u>.** Payment is due at the time of the appointment or with your mailed-in information.

* * * **CANCELLATION POLICY.** There is a $50 charge to reschedule confirmed appointments that have been canceled with less than 24 hours notice. This fee goes up to $100 after April 1.

* * * **CHANGING A COMPLETED RETURN**. If you think there may be a change, let us know at the appointment and we will hold off completing the return until we hear from you. If a TAX RETURN has been completed and we are asked to re-do the return, there will be a $100 fee.

* * * **KEEP YOUR COPIES**. Our copies of returns are only kept for 3 years. There is a $25 charge for additional copies or to have the return faxed or emailed. Please note we cannot send your information to any third party without your signed authorization.

*** * * COST BASIS INFORMATION**: This information must be furnished by the client! If you sell securities/assets (mutual funds, stocks, bonds, real estate, etc.), you must come prepared with the cost basis **(what you paid)** for the shares/assets sold as well as the purchase and sale dates. This information can be determined from your own records, from your broker, or from monthly and annual statements. If you cannot make these calculations and need us to do so, we will need to have *the entire history of the security* (all statements from the beginning purchase). There will be an additional fee for this labor-intensive and time consuming process.

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ENGAGEMENT LETTER

To ensure a complete understanding between both parties, this *engagement letter* sets forth the pertinent information about the nature and extents of the tax preparation services we propose to render for you.

We will prepare your federal and requested state income tax returns with supporting schedules from information that you will furnish to us. We will make no audit or other verification of the data you submit, although we may need to ask you for clarification of some of the information. We furnish you with a letter and information organizer to help you in gathering the necessary information for us. Your use of this organizer will assist us in keeping your fee to a minimum.

It is your responsibility to provide all the information required for the preparation of complete and accurate returns. You should retain all the documents, cancelled checks and other data that form the basis of income and deductions. These may be necessary to prove the accuracy and completeness of the returns to a taxing authority. **You have the final responsibility for the income tax returns and, therefore, you should review them carefully before you sign them**. The law provides various penalties that may be imposed when taxpayers understate their tax liability.

Your returns may be selected for review by the taxing authorities. Any proposed adjustments by the examining agent are subject to certain rights of appeal. In the event of such government tax examination, we will be available upon request to represent you and will render additional invoices for the time and expenses incurred.

If the above fairly sets forth your understanding, please sign this letter in the space indicated and return it to our office. Even if you do not sign this letter, by sending us the information to prepare your income tax returns you shall be deemed to and we shall proceed as if you have accepted the terms of the engagement letter.

This agreement shall be governed by, and construed in accordance with, the laws of the State of New York.

We appreciate your confidence in us and want to thank you for the opportunity to prepare your return. Please call us with any questions.

Accepted by:

_________________________ Date: ________   _______________________ Date: ______
Taxpayer Signature   Spouse Signature

_________________________   _______________________
Print Name   Print Name

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CAMEO WEALTH & CREATIVE MANAGEMENT, INC.

Name: S.S.#: ______-______-_______ Direct Deposit Info on Back

Address: Telephone:

City, St, Zip: E-mail:

DOB: ____ /_____ /_____

NO DECIMALS PLEASE -- If Married, fill out separate Business Expenses sheets

Advertising, Publicity & Mailings ________

Agent & Manager Fees ________

Equipment Rental ________

Equipment Repairs & Maintenance ________

Office Expense ________

Professional Fees, Legal, Acctg (not tax prep) ________

Studio and Theatre Rental ________

Substitute Pay - or Pay to Freelancers ________

Supplies (Theatre, Touring, Dressing Room) ________

Business Meals & Entertaining ________

Dancewear, Costumes, Uniforms (Business use only) ________

Gifts (Prof only & $25 Maximum Per Recipient) ________

Lessons & Coaching ________

Local Transportation (not commuting) ________

Make-up, Wigs, Haircare (Prof Use Only) ________

Photos & Resumes ________

Prof Publications & Subscriptions (Web, Print, IMDB) ________

Research Viewing (Theatre, Film, Concerts, Netflix, etc.) ________

Research Material (Scripts, CDs, Tapes, Books, etc) ________

Tips (Backstage, Dressers, Stage Doormen, etc.) ________

Union Dues & Assessments (including working Dues) ________

Website (hosting, design, maintenance) ________

TELECOMMUNICATIONS Business Use only ________

OR Total Home _______ Total Cell _______

Internet Service Provider (If separate from cable) ________

Cable bundle (Total or Please break down below) ________

Cable _________ Phone _________ Internet _________

Any accounts in foreign countries **YES NO**

Unreimbursed Medical, Dental & Rx ________

Health Insurance Premiums ________

Real Estate Taxes ________

Mortgage Interest ________

Investment Fees ________

Safe Deposit Box ________

Charitable Contributions: Cash/Check/Credit ________

Non-cash Items (Clothing, books, etc) ________

(if **non cash** over $500 bring list with name & address)

IRA's: Traditional IRA Contribution ________

ROTH IRA Contribution ________

SEP/Solo 401(k) Contribution ________

529 College Savings Contribution ________

Tax Preparation ________

Tuition Paid ________

Student Loan Interest Pd ________

Estimated Tax Sent In By You:

Date paid	$Fed	$State (eg. NY)

Car Mileage for year _______ For Business ________

Equipment Purchase - Date: __ /___ /___ _________

Equipment Purchase - Date: __ /___ /___ _________

OUT OF TOWN EXPENSES (nights away from home for business)

Purpose or Description	Dates From	To	Nights Away	Names of Cities	How Paid W2, 1099, other
A)					
B)					
C)					
D)					
E)					
F)					

Expense Worksheet: (From above letters)

(Out of town only)	(A)	(B)	(C)	(D)	(E)	(F)	Total	Office Use
Per Diem Received								**A**
Food (Total of Receipts)								Travel
Hotels, Lodging, Rent								Meals
Tips to Porters, Maids, etc.								
Travel (Air, Rail, Bus)								**C**
Local Transportation								Travel
Laundry, Dry Cleaning								Meals
Car Rental for Business								
Other Out-of-town Expenses								

IMPORTANT: PLEASE COMPLETE BACK OF WORKSHEET

DRIVER'S LICENSE REQUIREMENT

NAME: ______________________________

LICENSE OR ID NUMBER: __________________________

ISSUING STATE: ______________________

ISSUE DATE: _________________________

EXPIRATION DATE: __________________

DOCUMENT NUMBER* (NYS-ISSUED LICENSES AND IDS ONLY): __________________________

*THE DOCUMENT NUMBER ON A NY ISSUED ID CAN BE TYPICALLY FOUND IN THE LOWER RIGHT HAND CORNER ON THE FRONT, OR ON THE BACK OF THE ID)

DIRECT DEPOSIT

BANK NAME: _________________________
ROUTING #: __________________________
CHECKING ACCT #: ____________________

IF REFUND: ☐ YES ☐ NO
IF BALANCE DUE: ☐ YES ☐ NO

IS THIS A JOINT ACCOUNT?
☐ YES ☐ NO

APPLY REFUND TO NEXT YEAR:
☐ YES ☐ NO

MANDATORY COMPLIANCE QUESTIONS FOR THE AFFORDABLE CARE ACT (ACA)

WHO IS YOUR MEDICAL INSURANCE PROVIDER? ______________________________________

WERE YOU COVERED FOR ALL OF 2017? (PLEASE CIRCLE) **YES NO**
IF NOT, HOW MANY MONTHS DID YOU HAVE COVERAGE? ______________________________

FROM WHERE DID YOU OBTAIN HEALTH INSURANCE?
(CIRCLE ONE) **EMPLOYER UNION HEALTH EXCHANGE MEDICAID MEDICARE**

ARE YOUR CHILDREN OR DEPENDENTS (IF ANY) COVERED? (PLEASE CIRCLE) **YES NO**
IF SO, HOW MANY? ________________

DID YOU APPLY ON HEALTHCARE.GOV FOR A HARDSHIP EXEMPTION?
(PLEASE CIRCLE) **YES NO**
IF SO, WHAT IS THE CERTIFICATE NUMBER? ____

****MAKE SURE YOU GET FORM 1095 FROM YOUR HEALTH INSURANCE PROVIDER ****