

PHONE 612.824.2829 **FAX** 612.331.3670 FOXTAXSERVICE.COM



Prep. Initials

WHAT TO BRING TO YOUR APPOINTMENT

IN	CO	ME Or Upload to Portal HERE
YES	N/A	W-2s
		1099-R (Distributions from IRAs/401ks/other retirement accounts)
		1099-INT (Interest Income)
\Box		1099-DIV (Dividend and Capital Gain Income)
\Box		1099-B (Sale of Stocks/Mutual Funds) - Check to see if all sales have corresponding cost info
		1099-MISC (Self Employment Income) - FILL OUT BUSINESS INCOME/EXPENSE WORKSHEET
	П	1099-K (If you accept credit cards or Paypal from customers your credit card company will issue this)
		1099-G (Unemployment Received)
		1099-A/1099-C (Cancellation of Debt or Property Foreclosures)
		K1 (Income from Partnership, Estate, Trust or S Corporation)
		SSA-1099 (Social Security Income)
		Alimony/Spousal Maintenance Received AMOUNT \$
		Rental Income - FILL OUT RENTAL WORKSHEETS
		Did you own or have signature authority over any foreign financial assets (bank, brokerage, etc) during the tax year?
		If yes, bring info on foreign investment income and max. account values during tax year
		Do you have any other sources of income (bartering, hobbies, sales of property etc)? If so, please bring information
DE	EDU	ICTIONS/CREDITS
YES	N/A	
		1098-T (Tuition Statement for College Education) - Please ALSO bring transcript showing actual tuition payments.
		1098-E (Student Loan Interest Paid) - NEW MN CREDIT! See page 4 for details of what to bring.
		1098 (Mortgage Interest Paid)
		Did you buy, sell or refinance any property this year? Bring all Settlement Statements / Closing Disclosure Charitable Departure. Pring required plus itempined list of personal interest (values. See acceptable departure).
		Charitable Donations - Bring receipts plus itemized list of non-cash items/values. See www.itsdeductible.com for valuation
		Proof that children live with you - Bring school, health records or other documents. This is for ALL dependents this year. Quarterly Estimated Tax Payments - Bring list of date and amount of each payment made
		1095-A, 1095-B and/or 1095-C (Proof of Health Insurance from government, insurance company, or employer, respectively)
		Did your dependent have investment income? - Bring tax forms
		All Adoption Papers and proof of expenses for Adoption Credit
		MN Long Term Care Insurance & 529 plans - bring account numbers and amounts paid.
		MN K-12 Education Expenses - Click Here for eligible costs and bring itemized list
ш	Ш	WIN 172 Education Expenses Collect Note on Signal Costs and Shing Itemized list
01	ГНЕ	R IMPORTANT ITEMS
YES	N/A	Cinned Delegae of Everyntian Form 9222 if you are plaining a shild that does not live with you
		Signed Release of Exemption Form 8332 if you are claiming a child that does not live with you
		Signed 2017 Tax Preparation Agreement FILL OUT WORKSHEETS Tax CD from last year if we didn't use email or portal.
		Tax CD from last year if we didn't use email or portal For NEW clients: Copy of last year's taxes
		For Corporations: Year End Balances on all accounts and loans - If you have Quickbooks or other accounting software,
Ш	Ш	email bookkeeping to your accountant before scheduling an appointment
		Would you like to make a donation to the Nongame Wildlife Fund? AMOUNT \$
	ш	





2017 TAX PREPARATION AGREEMENT						
Date	Date					
Taxpayer Name	Spouse's N	lame				
Address	City		State	Zip		

PREPARATION OF YOUR 2017 TAX RETURNS

Thank you for choosing **Fox Tax, LLC** to assist you with your 2017 taxes. This letter confirms the terms of our engagement with you and outlines the nature and extent of the services we will provide. In order to ensure an understanding of our mutual responsibilities, we ask all clients for whom returns are prepared to confirm the following arrangements by signing below.

We will prepare your 2017 federal and requested state income tax returns. We will depend on you to provide the information we need to prepare complete and accurate returns. We may ask you to clarify some items but will not audit or otherwise verify the data you submit. An Organizer is enclosed to help you collect the data required for your return. The Organizer will help you avoid overlooking important information. By using it, you will contribute to efficient preparation of your returns and help minimize the cost of our services.

We will perform accounting services only as needed to prepare your tax returns. Our work will not include procedures to find defalcations or other irregularities. Accordingly, our engagement should not be relied upon to disclose errors, fraud, or other illegal acts, though it may be necessary for you to clarify some of the information you submit. We will, of course, inform you of any material errors, fraud, or other illegal acts we discover. The law imposes penalties when taxpayers underestimate their tax liability. Please call us if you have concerns about such penalties.

Should we encounter instances of unclear tax law, or of potential conflicts in the interpretation of the law, we will outline the reasonable courses of action and the risks and consequences of each. We will ultimately adopt, on your behalf, the alternative you select.

Our fee will be based on the forms required plus out-of-pocket expenses. Invoices are due and payable upon presentation. We will require payment prior to electronic filing of your tax return.

We will return your original records to you at the end of this engagement. You should securely store these records, along with all supporting documents, canceled checks, etc., as these items may later be needed to prove accuracy and completeness of a return. We will retain copies of your records and our work papers for your engagement for seven years, after which these documents will be destroyed.

Our engagement to prepare your 2017 tax returns will conclude with the delivery of the completed returns to you (if paper filing) or your signing, and the subsequent submittal, of your tax return (if e-filing). Review all tax-return documents carefully before signing them.

In an effort to save trees, we will provide your copy of the tax return electronically unless a paper copy is specifically requested.

If you and/or your business entity have a financial interest in any foreign accounts or assets, you may be responsible to file Form FinCen 114 (formerly known as "FBAR") with the Department of Treasury by April 15th. This engagement for income tax does not cover this additional separate filing requirement. If you have any foreign assets and want help with such filings, a separate engagement needs to be explicitly requested and agreed to in writing. If you do not inform your preparer of any foreign assets, we will presume you do not have any and will hold no responsibility for failure to file required disclosures.

To affirm that this letter correctly summarizes your understanding of the arrangements for this work, please sign the enclosed copy of this letter in the space indicated and return it to us with your tax info.

We appreciate your confidence in us. Please call if you have questions.

Sincerely,

Mark Fox Alyssa Fox



ACCEPTED BY (Both spouses must sign for preparation of joint returns)				
Taxpayer Signature	Date			
Spouse Signature	Date			



TAX PREPARATION WORKSHEET						
PERSONAL DATA						
Taxpayer Name		Spouse's Name				
SSN		SSN				
DOB		DOB				
Phone		Phone				
Email		Email				
Occupation		Occupation				
Address	City		State	Zip		
DEPENDENT ONE*	DEPENDENT TWO*		DEPENDENT THR	EE*		
Name	Name		Name			
SSN	SSN		SSN			
DOB	DOB		DOB	DOB		
Relationship	Relationship		Relationship	Relationship		
K-12 Education Expense	K-12 Education Expense		K-12 Education E	K-12 Education Expense		
Daycare Expense	Daycare Expense		Daycare Expense	Daycare Expense		
Daycare Name	Daycare Name		Daycare Name			
Daycare SSN/Fed ID#	Daycare SSN/Fed ID#		Daycare SSN/Fed	ID#		
Daycare Address	Daycare Address		Daycare Address			
DEDUCTIONS						
Student Loan Interest****	IRA Contributions	□IRA □RC □SEP	Moving Expenses	S**		
College Tuition/Fees (bring tuition statement)	Investment Exp		Employee Expens	SES (use business expense worksheet)		
Mortgage Interest Paid	Property Tax		Mortgage Insurar	nce (PMI)		
Medical Expenses	Health Insurance		Car Tabs			
Charity by Cash/Check	Non-Cash Charity***	:	Tax Prep Fees			
Alimony Paid	HSA Contributions		Union Dues			
529 Contributions	Long Term Care Ins.	Prem.	Educator Expense	es		

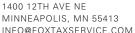
ADDITIONAL NOTES OR QUESTIONS					

^{*}Bring proof that dependent(s) live with you - school, health records or other documents. If they do not live with you, bring signed Form 8332.

^{**}For move of 50 miles or more due to job, please bring detailed list of Moving Costs and Employer Reimbursement (if any).

^{***}Bring itemized donation receipts if non-cash donations exceed \$500. For help valuing your non-cash donations, look at www.itsdeductible.com

^{*** *}See Page 4 for detailed information needed to claim NEW MN CREDIT



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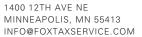
2017 HEALTHCARE VERIFICATION

SELECT **ONE** OF THE CATEGORIES BELOW

- Bring Form 1095-A if you had coverage from Exchange (Bronze, Silver, Gold type plans), NOT if you had MNCare or Medical Assistance.
- Bring 1095-B and/or 1095-C if you received from insurance company, employer or MNCare/Medical Assistance provider.

MARK ONE

A EVERYONE IN MY HOUSEHO	OLD WAS COVERED BY INSURAN	CE ALL YEAR	
Insurance Company Name:		Policy #	
Insurance Company Name:		Policy #	
B I WAS COVERED FOR ONLY I	PART OF THE YEAR		
Insurance Company Name:		Policy #	
Insurance Company Name:		Policy #	
ENTER THE NUMBER OF HO	USEHOLD MEMBERS INSURED E	ACH MONTH	
JAN	MAY	SEP	
FEB	JUN	OCT	
MAR	JUL	NOV	
APR	AUG	DEC	
Name	MN RES	SIDENTS ONLY	
STUDENT LOAN INTEREST CREDIT			
	LOAN 1	LOAN 2	LOAN 3
Total Loan Payments during Year			
Total Interest Paid (See 1098E)			
Original Loan Balance (Contact your loan provider for this information before	re your appt!))		
LONG TERM CARE			
Insurance Co. Name	Policy #	Ins Prems Paid	
529 CONTRIBUTIONS		· 	
Account #	T-	otal Contributions	



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REN	TAL	PROPER	RTY V	VORK	SHEE	T			
RENTAL PROPERTY ADDRESS (Fill out one s.	heet for	each rental prop	erty — Do	not comb	oine)				
Address	City			State			Zip		
Date Rental Started (If new)		Property Type	Single Fam	Duplex	Apt Bldg	Land	Commercial	Room Rental	Other
RENTAL INCOME								AMOUNT	
Total Rents Received (Do not include refundab	le depos	its)							
EXPENSES								AMOUNT	
Advertising & Promotions (Advertising for rent	al proper	ty)							
Business Miles Driven (Miles driven for rental	business)							
Cleaning and Maintenance (Any cleaning or m	aintenan	ce costs)							
Commissions (Paid to rental agencies, etc.)									
Insurance (PMI, liability and/or umbrella policies,)								
Legal and Accounting									
Management Fees (Paid for management by se	Management Fees (Paid for management by someone else)								
Interest - Mortgage (Bring Form 1098)									
Interest - Other (Credit cards/other loans just fo	r rental)								
Repairs (Repairs to rental property)									
Supplies (General supplies for rental property)									
Taxes (Property taxes)									
Utilities (Paid by you for rental property)									
Association Dues									
Rental License Fees									
Bank Charges (Bounced check fees, etc.)									
Appliances (Use Equipment Worksheet to list m	ultiple ite	ems)							
Improvements (Major improvements - Use Equ	ipment V	Vorksheet to list r	multiple ite	ms)					
Furnishings (Use Equipment Worksheet to list n	nultiple it	rems)							
TOTAL EXPENSES									

NET INCOME

- Bring Settlement Statement/Closing Disclosure for any purchase, sale or refinance
- Fill out one of these pages for **EACH RENTAL PROPERTY**
- If converting property to rental, we need Fair Market Value of property at time of conversion as well as your cost of buying and improving property

AIRBNB, VRBO & SHORT TERM RENTAL		
How many days was property rented during the year?		
Sales Tax Collected/Paid		
Fees Paid to Online Services		
Was average stay of guests 7 days or less?	☐ Yes ☐ No	05



BUSINESS INCOME / EXPENSE WORKSHEET

BUSINESS INFORMATION (FILL OUT ONE SHEET I	FOR EACH BUSINESS –	– Do not combine)	
Business Name / Profession		•	
INCOME		1099-MISC / SELF EMPLOYMENT	ATTRIBUTED TO W2
Income Received (List all self-employed income in 1099/	Self Employment column)		
Sales Tax Collected (If included in income above - only if y			
COST OF GOODS SOLD		1099-MISC / SELF EMPLOYMENT	ATTRIBUTED TO W2
Total Production Costs (Direct costs to make products)			
Ending Inventory (At your cost, not retail)			
EXPENSES		1099-MISC / SELF EMPLOYMENT	ATTRIBUTED TO W2
Advertising: Promo, Website costs, etc. (Anything for p	promotion of business)		
Auto Expenses (See auto and in home office worksheet by		SEE AUTO V	VORKSHEET
Commissions and Fees (Agents, managers, etc.)			
Subcontractors* (Total labor - did you pay any one person	more than \$600? Yes / No)		
Equipment Purchases (Items costing more than \$500 have	ve a useful life > 1 year)	SEE EQUIPMEN	IT WORKSHEET
Business Insurance			
Business Interest (Loans or 100% business credit cards)			
Legal and Accounting			
Office and Postage			
Equipment Rental (Equipment Rental and Car Rental — in	cluding gas)		
Business Rent (Rent for office or practice space)			
Equipment Repairs (Repairs on computers, equipment, et	c.)		
Supplies (Any small items needed for bus.)			
Taxes & Licenses (Business licenses and/or Misc. Busines	ss taxes-MNCare, etc.)		
Travel (Airfare, lodgingnot food or auto)			
Meals and Entertainment In Town (Business meals with	n others)		
Days Out of Town (For out of town meal per diems)		SEE PER DIEM	1 WORKSHEET
Wages Paid to Others (Bring details on payroll and payroll	l taxes)		
Bank and Credit Card Charges (On business accounts)			
Dues and Subscriptions (Memberships, magazines, etc.)			
Research and Development (Books, classes, activities in	your field)		
Telephone (Bus. line, 2nd line, and bus. % of cell phone)	Bus. Use %		
Internet (List % used for business)	Bus. Use %		
Computer Software			
Printing and Film Processing (For business photos)			
Business Gifts (Limited to \$25 per recipient per year)			
Costumes and Props (Performers - things only worn on st			
Personal Maintenance (Performers - direct costs for performers	ormance image)		
OTHER (List out any costs that didn't fit in the above cate	egories)		
Health Insurance Paid			
Quarterly Estimates Paid (Bring dates & amounts paid		BRING LIST OF DATES	AND AMOUNTS PAID
Retirement Account Contributions (What kind? Trad IRA	A, Roth, SEP, 401K?)		
Local Business Travel			
Other:		1	1

^{*} If you paid \$600 or more to subcontractors, you s file a form 1099-Misc for their labor costs by January 31st

^{*}You can create and file Form 1099-Misc online with 15% discount $\underline{\text{here}}$



AUTO EXPENSE WORKSHEET					
FILL OUT FOR MILEAGE OR ACTUAL	VEHICLE ONE	VEHICLE TWO			
Year and Make of Vehicle					
Date Purchased/Leased					
Odometer Reading on December 31					
Total Miles Driven in 2017					
Business Miles Driven (Only for Car that you Own)					
Commuting Miles Driven					
Parking and Tolls					
License Plate Taxes Paid					
Interest Expense					
FILL OUT BELOW IF CLAIMING ACTUAL EXPENSES	VEHICLE ONE	VEHICLE TWO			
Purchase Price / Lease Equivalent (If new purchase)					
Gas					
Repairs & Maintenance					
Insurance					
Lease Cost					
TOTALS					

IN-HOME OFFICE EXPENSE WORKSHEET					
	OFFICE ONE	OFFICE TWO			
Square Footage of Office					
Square Footage of Entire House					
Date Placed in Service					
Mortgage Interest Paid					
Property Taxes Paid					
Insurance on Home (Hazard and Private Mortgage Insurance)					
Repairs and Maintenance*					
Improvements* (Use Equipment Worksheet to list Separate Improvement Projects)					
Utilities					
Rent Paid					
Other					
Association Dues					
Cost of Home (If new: list purch + prior investments)					
TOTALS					

^{*}Expenses directly related to office space are 100% deductible - LIST SEPARATELY





	EQUIPMENT WORKSHEET						
ITEM	DATE PURCHASED	COST*	BUSINESS % OF USE	DATE SOLD	SALE PRICE		
TOTALS							

*If first year of business and you had personal equipment that became business, please list Fair Market Value rather than purchase price



PER DIEM WORKSHEET - DAYS OUT OF TOWN FOR BUSINESS

<u>Click Here</u> or see GSA Website for Continental U.S. M & IE Per Diem Rates <u>Click Here</u> or See U.S. Dept of State for Foreign M & IE Per Diem Rates

DATE	CITY, STATE	COUNTRY	NIGHTS STAYED	RATE*	TOTAL PER DIEM	ACTUAL MEAL COST**
TOTALS		•				

^{*} Use the "M&IE" column on PD websites. Do not use Lodging Per Diems.

^{**}List Actual Meal expenses for trips out of town IF actual costs exceed the Per Diem allowed for that trip