

Gateway Tax Service

Client Engagement Letter & Tax Questionnaire

WELCOME TO TAX SEASON 2025!

Thank you for allowing Gateway Tax Service to prepare your tax return. I am honored to have you as a client and appreciate this opportunity to serve you.

My goal is to get you the best result possible. This letter will outline what you can expect from me, as well as what I expect from you, to provide you with excellent service and accurate results. It will also cover my policies, procedures and services. The signatures you provide indicate your consent to the terms outlined in this letter and your agreement to have Gateway Tax Service prepare your tax return(s).

Respect for Your Privacy

Gateway Tax Service knows your privacy is important to you. The nature of my work requires us to collect certain non-public personal information about you from various sources. I collect certain financial and personal information from applications, worksheets, reporting statements, and other forms, as well as interviews and conversation with my clients and affiliates. I may also review banking and credit card information about my clients. Under my policy, all information obtained about you will be provided by you or obtained with your permission. My firm has policies and procedures in place to protect your confidential information. I will not disclose your personal information to any third party without your express permission, except where required by law. I maintain physical, electronic and procedural safeguards in compliance with federal regulations that protect your personal information from unauthorized access.

Tax Services

Gateway Tax Service will prepare your tax return(s) in a professional manner for a reasonable price. I use advanced technology in preparing and e-filing your return which provides a faster refund. I will maintain PDF copies of your tax return for five (5) years. After that, your files and documents will be purged. All original documents will be returned to you. My work does not include any procedures to discover fraud, theft, embezzlement or irregularities. I will neither audit nor verify the data you submit.

Please Initial:

Your returns are subject to review by the taxing authorities. It is advisable to contact me immediately upon receiving correspondence from any taxing authority.

Your Commitment

My fee structure assumes that you gather your tax information in an orderly manner. I require copies of supporting documents. If you want to file by the deadline, provide all documentation by April 5th. Rush fees may apply for late documentation.

Please Initial:

Extensions

If you need more time to organize your documentation, I can file an extension on your behalf. However, the extension does NOT extend the time to pay your taxes. If you owe taxes, you will be charged interest and penalties for paying after the initial due date.

Please Initial:

Business Clients

You are required to keep adequate records and receipts regarding your business income and expenses. A contemporaneous mileage log is required.

Please Initial:

Guarantees

Gateway Tax Service guarantees that if you are audited for a return I prepared, I will assist you by answering questions about how we arrived at the amounts in your return. This does NOT include representation in an audit. If you owe penalties due to my error, I will pay those penalties and interest up to the date of first notification.

Please Initial:

Additional Services

My tax preparation fee does not cover additional services such as bookkeeping, tax planning, research, or audit representation. These will be invoiced separately.

Please Initial:

Review

It is your responsibility to review your tax return for accuracy before signing your e-file form.

Please Initial:

Payment

Payment is due upon completion. It is my policy not to e-file a return or provide copies until payment has been received.

Please Initial:

This agreement is governed by the laws of Oregon. Please sign page 2 to confirm your agreement to these terms.

All questions must be answered and all source documentation provided BEFORE I begin. If married filing jointly, we need email and phone for BOTH spouses.

THIS INFORMATION REQUIRED EVERY YEAR EVEN IF NO CHANGES

TAX PREPARATION ENGAGEMENT LETTER

This letter is to inform you, the taxpayer, of the services we will provide you and the responsibilities you have for preparation of your tax return.

TAX RETURN PREPARATION

We will prepare your Form 1040, U.S. Individual Income Tax Return, and applicable state and local taxes based on information you provide. Services for the preparation of your returns do not include:

- Auditing or verification of information provided by you.
- This engagement does not include any audit or examination of your books or records. In the event your return is audited, you will be responsible for verifying the items reported.
- Assisting you with your compliance with the Corporate Transparency Act, including beneficial ownership information reporting, is not within the scope of this engagement.
- The tax return preparation fee does not include bookkeeping. Additional fees apply for these services.
- Fees charged for tax return preparation do not include audit representation or preparing materials to respond to correspondence from taxing authorities.
- Preparation fees do cover limited assistance and consultation during the year.

The engagement to prepare your tax returns terminates upon delivery of your completed returns and original documents to you. Please store your supporting documents and tax returns in a secure place for at least seven years. A fee will apply for duplicate copies of tax returns or supporting documentation requested after initial delivery.

TAXPAYER RESPONSIBILITIES

- You agree to provide us with all income and deductible expense information. If you receive additional information after we begin working on your return, you will contact us immediately to ensure your completed tax returns contain all relevant information.
- You affirm that all expenses or other deduction amounts are accurate and that you have all required supporting written records. In some cases, we will ask you to review your documentation.
- You must be able to provide written records of all items included on your return if audited by either the IRS or state tax authority. We can provide guidance concerning what evidence is acceptable.
- You must review the returns carefully before signing to make sure the information is correct.
- Fees are paid before your tax returns are delivered to you or filed for you. If you terminate this engagement before completion, you agree to pay a fee for work completed. A retainer may be required.

By signing below, you acknowledge that you have read, understand, and accept your obligations and responsibilities, and that you understand our responsibilities in preparing your tax returns, as explained above. For a joint return, both taxpayers must sign.

Taxpayer Name (print)

Date

Taxpayer Signature

Spouse Name (print)

Date

Spouse Signature

PRIVACY POLICY

The nature of our work requires us to collect certain nonpublic personal information. We collect financial and personal information from applications, worksheets, reporting statements, and other forms, as well as interviews and conversations with our clients and affiliates. We may also review banking and credit card information about our clients in the performance of receiving payment. Under our policy, all information we obtain about you will be provided by you or obtained with your permission. Our firm has procedures and policies in place to protect your confidential information. We restrict access to your confidential information to those within our firm who need to know in order to provide you with services. We will not disclose your personal information to any third party without your express permission, except where required by law. We maintain physical, electronic, and procedural safeguards in compliance with federal regulations that protect your personal information from unauthorized access. Please contact us with any questions regarding our privacy policy.

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TAXPAYER GENERAL INFORMATION

Taxpayer

First M.I. Last SSN # (Last 4) IP PIN New? Y N
Email Occupation Date of birth
Address City State Zip County
Home # Work # Cell # Driver's License # St Issue Date Expiration Date

Spouse

First M.I. Last SSN # (Last 4) IP PIN New? Y N
Email Occupation Date of birth
Address City State Zip County
Home # Work # Cell # Driver's License # St Issue Date Expiration Date

If moved before 12/31, previous address: Move date

Marital status 12/31:

Single Married Separated Widow(er) RDP Unsure
Divorced/separated this year? Y N Deaths in family? Y N IRS/state notice past year? Y N

DEPENDENT CHILDREN

Name SSN # (Last 4) IP PIN DOB Mos Relationship College Y N
Y N
Y N
Y N
Y N
Child income >\$1,050? Y N Child disability? Y N Other taxpayer claim child? Y N

OTHER DEPENDENTS

Name SSN # (Last 4) IP PIN DOB Relationship

DIRECT DEPOSIT

Refund deposited? Y N Checking Savings
Bank Name Routing # Account #

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INCOME SOURCES

W-2 income?	YES	NO	Stocks sold?	YES	NO
Tips?	YES	NO	Stock options?	YES	NO
Interest (1099-INT)?	YES	NO	Digital assets?	YES	NO
Dividends (1099-DIV)?	YES	NO	Home purchased?	YES	NO
Pension/IRA (1099-R)?	YES	NO	Home sold?	YES	NO
Social Security?	YES	NO	Rental/Airbnb?	YES	NO
Unemployment?	YES	NO	Gambling?	YES	NO
Self-employment?	YES	NO	Alimony?	YES	NO
Business?	YES	NO	Debt forgiven?	YES	NO

ADJUSTMENTS & DEDUCTIONS

Teacher expenses (K-12)?	YES	NO
Student loan interest (1098-E)?	YES	NO
Medical expenses?	YES	NO

TAXPAYER

Prescriptions: \$
Hospital: \$
Dental: \$
Vision: \$
Insurance: \$

SPOUSE

Prescriptions: \$
Hospital: \$
Dental: \$
Vision: \$
Insurance: \$

Property taxes?	YES	NO
Mortgage interest (1098)?	YES	NO
Charity - cash/check/credit card?	YES	NO
Charity - non-cash items?	YES	NO
Charity - vehicle/boat?	YES	NO
Political contribution?	YES	NO

FOREIGN ACCOUNTS & HSA

Foreign bank account?	YES	NO
Account 1 - Bank/address:		
Account 2 - Bank/address:		
HSA contribution?	Y	N
HSA withdrawal?	Y	N

DAYCARE

Child 1:	Amount:	\$	Provider:
Child 2:	Amount:	\$	Provider:
Child 3:	Amount:	\$	Provider:

FINAL CERTIFICATION

By signing below, I/we certify that all information provided in this questionnaire is true, correct, and complete to the best of my/our knowledge.

SIGNATURE

DATE

Thank you for choosing Gateway Tax Service!
We appreciate your trust and look forward to serving you.