



2020 Tax Year

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PLEASE READ

Dear Client,

Thank you for choosing Flying Filers. This easy-to-use organizer will help you organize all your 2020 tax information.

There have been a lot of tax law changes this past year, many in response to COVID-19. Under the Coronavirus Aid, Relief, and Economic Security (CARES) Act, most Americans received a stimulus check in 2020. Technically, your stimulus check was an advance payment of a special 2020 tax credit - the recovery rebate credit - and **it is not taxable**. However, you do have to reconcile the stimulus check with the recovery rebate credit. In most cases they should equal, but some may be entitled to an additional refund. If your stimulus check was more than your credit amount, you generally won't have to repay the difference to the IRS.

There are a lot of changes in 2020 for retirement plans. Most of the changes come from the SECURE Act, which was signed into law late in 2019. However, the CARES Act also includes provisions affecting retirement accounts. It waives the 10% penalty on pre-age-59½ payouts for up to \$100,000 of coronavirus-related payouts. A coronavirus-related distribution can also be included in income in equal installments over a three-year period, and you have three years to put the money back into your retirement account and undo the tax consequences of the distribution. If you've taken advantage of this coronavirus-related easing, you must attach Form 8915-E to your return to spread out the tax on the distributions.

More donations to charity can be deducted for 2020 under the CARES Act. Non-itemizers can write off up to \$300 of charitable cash contributions. This is a new deduction for 2020 only. It only applies for people who don't file Schedule A. This write-off is per return, meaning married couples who file jointly can only deduct \$300, not \$600.

A number of expired or expiring tax breaks were revived late last year. They include deductions for mortgage insurance premiums, college tuition, and credit for certain energy-saving improvements to your home.

There are two expansions to 529 college savings plans starting in 2020, too. First, funds can now be used to pay for fees, books, supplies and equipment for certain apprenticeship programs. In addition, up to \$10,000 in total (not annually) can be withdrawn to pay off student loans.

And finally, two bits of IRS gotcha news. The IRS wants you to know that refund interest payments are taxable and must be reported on your federal income tax return. In January 2021, the IRS will send Form 1099-INT to anyone who received interest totaling \$10 or more. Make sure you report it on your 2020 return. Secondly, the fine for filing late returns is going up. The minimum penalty for returns filed 60 or more days after the due date is now the lesser of \$435 (up from \$215) or 100% of the required tax shown on the return.

This year the official filing date is April 15th. We will keep you posted on the progress of your return via email. Please be sure to include your valid email address and a phone number so that we can contact you with any questions. I want to remind everyone the need for Driver's License info for filing, and if previously provided information has changed, I will need updated information. Once your return is complete, the authorization form(s) will be emailed to you for signature. They can be faxed back to 866-293-1320 for e-filing. As a reminder, all completed returns will be returned to you electronically. For a mailed copy, there will be a \$10 additional fee.

Be sure to fully complete all applicable sections of the organizer, and send it to us along with all W-2 forms, 1099 forms, and any other forms pertinent to your return. Be sure to use a service in which you can track the package and please make sure to send legible copies of your filing paper work as well as keeping legible copies for yourself. Note: Envelopes are securely left inside the building - **REQUESTING A SIGNATURE AT DELIVERY SLOWS US FROM GETTING THE RETURN**. The address is:

Flying Filers Attn: Michael Bowen
5715 W. Grace St.
Chicago IL 60634

Sincerely,
Michael S. Bowen -- Flying Filers Tax Service

2020 Flying Filers Tax Service – Tax Organizer

Name (as it appears on your social security card)	Social Security Number	Date of Birth
Taxpayer:		
Spouse:		
Spouse's Maiden Name:		
Taxpayer's Occupation:	Spouse's Occupation:	

Filing Status – (check one only)

- Single Married filing separately (please supply spouse's name and SSN above)
 Married (if either spouse itemizes, both must itemize when filing MFS)
 Widow/er Head of Household (must be unmarried and give more than 50% support for dependent)
 Date of Spouse's Death _____ RDP or Civil Unionized for State purposes (complete info above)

Mailing Address

Tax Filing Address (if different from mailing address)

Street		Street	
City		City	
State	Zip Code	State	Zip Code
County (careful, not country)		County (careful, not country)	
Phone Number(s)- Home		Phone Number(s) - Home	
Fax -	Cell -	Fax -	Cell -
Email Address:		* Did you use this same filing address for your 2019 return?	

Dependents that you are claiming this year – list youngest to oldest

Name (as written on Social Security Card)	Social Security #	Months Dependent Was Living at Home	Relationship (son/daughter/etc.)	Birth Date	If over age 19, Full Time Student and income? Y or N \$
					Y or N \$
					Y or N \$
					Y or N \$

Filing and Refund Methods

ALL returns are e-filed as required by law. Please check a refund method. For direct deposit, please include a voided blank check to ensure we get the needed account and routing numbers so that we can get your refund deposited into your account (returning clients with the same account information from last year can skip sending a voided check).

- Direct Deposit to your checking account (approx. 2 weeks)
 Check mailed to your tax address (approx. 3-8 weeks)

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Bank Routing Number Bank Account Number Name as it appears on Account
 (1st set of numbers on your checks) (2nd set of numbers on your checks)

If you owe the IRS a payment, you can pay by debiting the amount directly from your checking account on or before April 15th. If you would like this service, we will need your checking account number and will contact you with your payment amount.

Would you like to use this service? Yes or No

Tax Refund Information and History

***Please note:** All sections marked with * require an additional form and are subject to an additional fee. Fees for additional forms are detailed on the website under the [Fees and Services](#) section. Feel free to contact us with any questions.

Please answer ALL questions – Circle Yes or No [Include Form 1099-G if applicable]	Yes	No	Dollar Amount
Did you receive a Federal refund in 2020 for the 2019 tax year?	Y	N	\$
Did you receive a State refund in 2020 for a prior tax year? Name of State(s) _____	Y	N	\$
Did you have to pay additional state taxes last year? If so, how much and name of State(s) _____?	Y	N	\$
Did you make Federal estimated tax payments for the 2020 tax year?	Y	N	include amounts and date paid on back →
Did you make State estimated tax payments for the 2020 tax year?	Y	N	
Did you live and/or pay taxes in more than one state last year (check your W2's) State ____ From ____/____/____ To ____/____/____ Please give dates and states you lived and/or paid taxes in: State ____ From ____/____/____ To ____/____/____			
Did you withdraw any funds from your IRA? If yes, include 1099-R	Y	N	\$
Was it a Roth IRA or a Traditional IRA (circle one). Include additional details as necessary.			
Did or will you or your spouse contribute to an IRA for 2020? Date(s) and amount(s):			
Did or will you or your spouse contribute to a Roth IRA for 2020? Date and amount:			
If Yes to IRA contributions in 2020, list total amount contributed to IRA(s) for previous years:			
Did you withdraw funds from your 401(k) or other retirement acct. in 2020? Include 1099-R	Y	N	\$
Was it a - Rollover - Loan - Distribution (circle one)			
If your 401(k) withdrawal was a Distribution, please list date and amount of withdrawal.		Date:	\$
If it was a Rollover – please list institution and date of rollover		Date:	Institution:
State reason for withdrawal if an exception to the 10% early withdrawal penalty.			
Did you make any disaster distribution repayments? Include additional details as necessary.*	Y	N	\$
Other income and filing information.			
Did you receive Unemployment? If Yes, list amount and include 1099-G.	Y	N	\$
Did you have Gambling Winnings that exceeded your loses? If Yes include all W-2G.	Y	N	\$
Did you receive Alimony? If so, how much for 2020? <i>Tax treatment of alimony varies.</i>	Y	N	\$
Did you pay alimony for 2020? List recipient(s):Name: _____ SS# _____	Y	N	\$
If you received a 1099 MISC include it and fill out “Self Employment – Small Business – Schedule C” section (p.8) if applicable. \$			
Did you get married or divorced in 2020 by December 31 st ? (If yes, circle one.)	Y	N	Married/Divorced
If you were domiciled outside of the U.S. during any part of 2020, how long? From: / / To: / /			
If domiciled outside the U.S., provide a statement of earnings from your employer with income made and foreign taxes paid, if any.			
Did you receive a Child Tax Credit* in 2020? If so, how much?	Y	N	\$
Did you pay interest on a student loan in 2020? If so, please send a copy of the 1098-E.	Y	N	\$
Did you receive a Schedule K-1 statement from any source? If yes please include a copy.*		Y	N
Did you receive social security benefits? Include a copy of form SSA-1099.*		Y	N
Are you or your spouse a retired public safety officer (law enforcement officer, firefighter, chaplain, or member of a rescue squad or ambulance crew)?		Y	N
Did you receive a distribution from a health savings account (HSA), Archer Medical Savings Account (MSA), or Medicare+Choice Savings Account (M+C MSA)? Please include a copy of form 1099-SA.*		Y	N
Do you have any other sources of income that need to be reported on your return, including reporting your child's income on your return? If “yes,” we will contact you for further information. *		Y	N
Health Insurance information – INCLUDE ANY FORM 1095-A YOU RECEIVE			
Did you have full year coverage for all members of your tax household?		Y	N
Was any part of the coverage purchased from other than your employer – exchange/broker/etc.?		Y	N
Did you receive an exemption granted by the Marketplace (also called the “Exchange”)?		Y	N
Are you claiming an exemption for any other reason? See Form 8965.		Y	N

Unreimbursed Medical Expenses

Please list last year's out-of-pocket medical and dental expenses. Do not include any amounts that were covered by insurance. You may only write off out-of-pocket expenses that exceed 7.5% of your total gross annual income. Most insured individuals can skip this section.

Doctor Visits: \$	Vision: \$	Prescriptions: \$	X-Rays: \$
Hospital Costs: \$	Co-Pays: \$	Lab Fees: \$	Psychotherapy: \$
Insurance Premiums (not paid with pretax \$): \$		Counseling/Stop Smoking Expense: \$	

Did you travel last year for medical purposes? If so, how many miles? _____

Homeowner Information Section

INCLUDE THIS INFORMATION EVEN IF NOT PLANNING TO ITEMIZE SO WE CAN REVIEW YOUR BEST CHOICE

Please provide all Form 1098 statements for interest and taxes paid on your home. If you purchased or sold your primary residence or a vacation home in 2020, we also need a **copy of the settlement statement** & closing costs. Complete any section that applies to you.

* If capital gains taxes are due on the sale of your primary residence there will be a fee to file this form.

Purchase date of your home	/ /	Real Estate Taxes Paid in 2020	\$
Mortgage Interest Paid in 2020	\$	Points Paid	
Mortgage Insurance Paid in 2020	\$	Purchase Price of Home	\$
Sale Price of Home*	\$	Improvements to property	\$
Sales Date of Home/Property	/ /	Other property related deductible amounts \$	
If you purchased, refinanced, or sold your home, please include a copy of your HUD-1 from your closing documents.			
Was your home or property foreclosed upon or did you receive a cancellation of debt on your home or property? Y or N			
If you are repaying the 1st Time Homebuyer Credit taken in 2008 please include your 2008 Form 5405.			

Theft or Casualty Expenses – Form 4684*

Provide police or insurance report. This figure generally must be at least 10% of your adjusted gross income plus \$100 to be a deductible loss. *If the loss occurred to property within a federally declared disaster area please contact us for additional information.*

Date of Theft or Loss	Item Description	Original Purchase Date	Original Cost of Each Item	FMV at the time of Theft or Loss	FMV after Theft or Loss
/ /		/ /	\$	\$	\$
Amount reimbursed by your insurance company, if any = \$					

Miscellaneous Expenses

Personal Property taxes (not your Real Estate tax)	\$	Vehicle Excise Tax	\$
Adoption Fees/Expenses paid in 2020	\$	K-12 Educator Expense (\$250 max deduction)	\$

Child Care Expenses – Form 2441*

To deduct Child Care costs, complete all boxes below. You may only deduct Child Care costs for children under 13 years of age.

Amounts of child care costs reimbursed by your employer: \$ _____

Name of Caretaker or Day Care	SSN or Federal ID #	Address of Caretaker/Day Care	Total Amount Paid
			\$
			\$
			\$

Earned Income Credit

If you are eligible for the earned income credit additional information and forms will be requested from you.

Virtual Currency (Bitcoin)

At any time in 2020, did you receive, sell, exchange or otherwise acquire any financial interest in any virtual currency? Additional information will be requested.	Y	N
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Charitable Contributions

****Form 8283 needed if total donations value exceed \$500****

You cannot deduct a cash contribution, regardless of the amount, unless you keep as a record of the contribution a bank record (such as a canceled check, a bank copy of a canceled check, or a bank statement containing the name of the charity, the date, and the amount) or a written communication from the charity. By claiming donations below, you are indicating that you have the written record required by the IRS. Please indicate the total of amounts donated in which **each** donation was under \$250 (total can exceed \$250). Then list the Organization and amount donated over \$250 for each instance.

Travel expenses or miles driven for charitable purposes: \$ _____ miles

Total amount of all donations under \$250. \$ _____	
List organizations and amount donated below for each donation over \$250 for which you have receipts.	

If your combined non cash donations TOTAL over \$500, please give the address of the organizations. Also include the dates you donated each item and the date that you purchased the items. ACCURATE VALUATIONS MUST BE MADE.

Non Cash Goods Donations: Receipts needed for items over \$500.			(\$15 add'l form fee applies)		
Description of items	Organization & Address	Resale value of donation	Purch Price	Dates: Donation & Purchase	
		\$	\$	/ /	/ /
		\$	\$	/ /	/ /
		\$	\$	/ /	/ /
		\$	\$	/ /	/ /
		\$	\$	/ /	/ /

Dividend Income & Interest Income*

Please provide us with all of your 1099 statements

Name of Bank or Institution	Interest / Dividend Amount	Name of Bank or Institution	Interest / Dividend Amount
	\$		\$
	\$		\$
	\$		\$
	\$		\$
	\$		\$
	\$		\$

Residential Energy Credits

Eligible Residential Energy Property Expenses: HVAC Insulation Roofs (Metal & Asphalt) Water Heaters (non-solar) Windows & Doors	Qualified electric heat pump, natural gas, propane, or oil water heaters, or geothermal heat pumps Qualified small wind energy property Qualified fuel cell property Biomass Stoves <i>(Additional info will be requested)</i>	\$
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Moving Expenses – Form 3903*

THIS IS VERY LIMITED STARTING 2020.

List each move and expenses separately. *Each qualifying move requires a form.*

Date that you moved	/ /	Moving & Shipping Costs	\$
City and State you moved from		City and State you moved to	
Total Distance Traveled	Miles	Lodging Expenses during move	

If you need more space to include additional information for any category, place an * next to the line and attach another page.

Self Employment – Small Business – Schedule C*

1099 Miscellaneous Income Section

Be sure to provide all 1099 forms. Please keep all your business records in your possession. We'll contact you if we need any verification or more detailed information.

Did you start your business in 2020? **Y** or **N** Describe the type of business. _____
 If No, please be sure to send a copy of 2019 tax return if prepared somewhere else.

Name of Business		Type of Business	
Gross Income (Sales/Receipts)	\$	Cost of Labor (other than self)	\$
Returns and Refunds given	\$		
Inventory Cost at start of year	\$	Inventory Cost at end of year	\$
Business Equipment Information			
Date Equipment was Purchased	Cost of Equipment	Description or Type of Equipment	Percentage used for Business
	\$		%
	\$		%
	\$		%
	\$		%

Other Business Expenses			
Advertising	\$	Bank Related Charges	\$
Unpaid debts from sales	\$	Commissions and Fees Paid	\$
Depletion Costs	\$	Interest Paid	\$
Employee Benefit Costs	\$	Insurance Costs (other than health)	\$
Professional Services Costs	\$	Legal Costs	\$
Office Space Expenses	\$	Maintenance Costs	\$
Utilities (not home)	\$	Pension Plans Costs	\$
Profit Sharing Plans Costs	\$	Office Supplies Expenses	\$
Licenses and Tax Costs	\$	Machinery/Equipment Rental	\$
Other Business Property Rental Costs	\$	Entertaining Costs & Meals	\$
Business Traveling Expenses	\$	Wages paid – less employment credits	\$
Health Insurance Costs	\$	Business Vehicle Expenses (gas, ins. Etc)	\$
If vehicle is also for personal use, what percentage was for business use?			%
Type of Vehicle:	Year:	Date vehicle first used for business: / /	
Monthly payment for leased vehicle	\$	Number of Miles driven for business	Miles
Number of Miles driven for personal	Miles	Number of Miles driven for commuting	Miles
Do you have written evidence to support your vehicle deduction amounts? Y N			
Were expenses for this vehicle deducted in 2019 also? Y N			
If yes, was the actual expenses or the standard mileage deduction taken? (please circle)			
Did you dispose of any business property in 2020? If yes describe the property and complete the information for it below.			
Date Acquired	Date Sold	Gross Sales Price	Depreciation taken
____/____/____	____/____/____	\$	\$
		Cost or other basis (plus expense of sale)	\$
Did any use of business property fall below 50%. If "yes" we will contact you for further information. Y N			
Form 8829* - Expenses for Business Use of Home (Primary residence used as business office)			
Square footage of home:	Square feet	Square footage of Office:	Square feet
Total utilities and insurance	\$	Total rent or mortgage paid	\$
# of months office was in home		Was space used exclusively for home office?	Y N

Stocks and Bonds Sold – Schedule D*

By law, you are required to provide all dates of purchases and sales of stocks and bonds. All sales MUST be reported on your tax return. Please provide all 1099's.

Description (e.g., ABC Stock)	Quantity (# sold)	Date of Purchase	Purchase Price (basis)	Sales Date	Sales Price
		/ /	\$	/ /	\$
		/ /	\$	/ /	\$
		/ /	\$	/ /	\$
		/ /	\$	/ /	\$
		/ /	\$	/ /	\$
		/ /	\$	/ /	\$

Rental Income & Expenses – Schedule E*

If you had a Schedule E prepared for your 2019 tax return by someone other than us, please be sure to send last year's return.

Property	Description	Address	Date of Purchase	Purchase Price
1				\$
2				\$
3				\$
4				\$

Property	1	2	3	4	Property	1	2	3	4
Rent Income	\$	\$	\$	\$	Advertising	\$	\$	\$	\$
Cleaning	\$	\$	\$	\$	Commissions	\$	\$	\$	\$
Maintenance	\$	\$	\$	\$	Insurance	\$	\$	\$	\$
Mgmt. Fee	\$	\$	\$	\$	Auto/Travel	\$	\$	\$	\$
Repairs	\$	\$	\$	\$	Mort Interest	\$	\$	\$	\$
Utilities	\$	\$	\$	\$	Supplies	\$	\$	\$	\$
Taxes	\$	\$	\$	\$	Other Costs	\$	\$	\$	\$

Education Credits**

FOLLOW-UP INFORMATION WILL BE REQUIRED FOR THESE CREDITS. The following are questions regarding Education credits for tuition. These credits do NOT include: room, board, transportation, student activities, equipment and personal expenses. The American Opportunity Credit includes qualifying course materials (books). Certain restrictions apply to claim these credits – we will contact you for additional information.

To use the Lifetime Learning Credit, please list the name, SSN and amount of expenses incurred in 2020 and the number of months attended in 2020 (list all persons eligible – use additional sheets if necessary).
 Name of Student: _____ SSN: _____ Months = _____ \$ _____
 2020 Year in School: 1st 2nd 3rd 4th or Graduate

To use the American Opportunity Credit (Modified Hope Credit) please list the name, SSN and amount of expenses incurred in 2020 and the number of months attended in 2020 (list all persons eligible – use additional sheets if necessary).
 Name of Student: _____ SSN: _____ Months = _____ \$ _____

If you contributed to or took a payment from an educational savings plan, please circle whether it was a:
 State 529 College Savings or Coverdell Education Savings Fund and the amount. \$
 Also, list the name of the Student/Beneficiary:

Please indicate **which education credit(s) you (or any student) have taken and **in what tax year** it occurred.

State Specific Information

More and more states are requiring a "Use" tax be added for internet or out-of-state purchases. We will calculate the standard tax for you. If you wish to total your exact tax based on all purchases for the entire year contact us to discuss. If your state is listed below, you may have additional deductions available or have additional information to include with your return. The most common questions are presented, but there may be other information that we will request for you specific state once we begin your return. We will contact you with further requests.

CALIFORNIA			
Did you pay rent at the tax filing address?		Y	N
		Amount	
		\$	
If so, Name and Address of Landlord:			
Number of months rented in 2020:		Months	
ILLINOIS			
K-12 EDUCATION CREDITS – Tuition, fees (band/lab), and book rental paid directly to public, private, or religious school.			
Student(s) Name & Grade (in 2020)		Eligible Expenses	
Name & Address of School		Circle: Public / Private / Home	
If you can take a credit for your property (real estate) taxes paid please include your property's PIN			
INDIANA			
Did you pay rent at the tax filing address?		Y	N
		Amount	
		\$	
If so, Name and Address of Landlord:			
Number of months rented in 2020:		Months	
IOWA			
K-12 EDUCATION CREDITS – Tuition and book fees to Iowa accredited not for profit school, and fees for club activity, school sports, etc.			
Student Name	Name & Address of School		Eligible Expense
LOUISIANA			
List the amount of the Louisiana Citizens Property Insurance assessment that was included in your homeowner's insurance premium. You must attach a copy of the declaration page of your insurance policy in order to claim the credit.			
MASSACHUSETTS			
Did you pay rent at the tax filing address?		Y	N
		Amount	
		\$	
If so, Name and Address of Landlord:			
Number of months rented in 2020:		Months	
Provide your qualified commuter expenses (for public transportation).			\$
Provide your Form 1099-HC (required to claim health coverage exemption and avoid penalty).			
MICHIGAN			
Provide taxable value of 2020 from property tax form.			\$
MINNESOTA			
Did you pay rent at the tax filing address?		Y	N
You must send a CRP (Certificate of Rent Paid)		Amount	
		\$	
If so, Name and Address of Landlord:			
Number of months rented in 2020:		Months	
Provide property taxes payable statement in 2020.			
K-12 EDUCATION CREDITS – Tuition and fees paid to public or private school. Education supplies for purchase of home computer and educational software up to \$400.			
Student Name	Name & Address of School		Eligible Expense

Each state has its own tax laws and not every question for every state can be listed here. If you know of specific materials needed for your state please include them with your organizer. If additional information is needed to complete your state return, we will contact you for the needed information.

****NEW REQUIREMENTS** Filing Details and Information **NEW REQUIREMENTS****

Mandatory for e-filing in the hopes to help prevent identity fraud. The following info must be included:

IF MARRIED FILING JOINT, UPDATED INFORMATION MUST BE INCLUDED FOR BOTH FILERS

Driver's License or State ID Card Number (including state of issuance) _____

Date Issued: _____

Expiration Date: _____

You can include a scan of your license as part of your packet. Without this information your refund will be delayed.

We file your federal and state return electronically. In order for us to do so you must fill out Form 8879 with a self-selected PIN number. **WE WILL EMAIL YOU FORM 8879 ONCE WE HAVE PREPARED YOUR RETURN. If you are a past client, your previously selected PIN will be used** (unless you select a new number). If you are a new client, please include a 5 digit PIN with your signature below (PIN must be numbers only). Everyone will receive instructions for completing Form 8879 when we email the form to you.

If you must paper file (mail in) your return, we will return the signature pages of your completed return to you for you to sign and return to us, and then we will return your completed return to you for you to sign and mail to the IRS and to your state.

In order for us to complete your return based on the information you have provided to us, please sign and date below.

Signature of Taxpayer Signature of Taxpayer's Spouse Date

5 digit PIN: _____ 5 digit PIN: _____ (separate# from spouse's)

IF YOU HAVE BEEN ASSIGNED AN IDENTITY PROTECTION PIN FROM THE IRS PLEASE PROVIDE _____

Do you allow us to communicate with the IRS and your state if they have questions regarding your 2020 return, circle **YES** or **NO**

Payment and Fees

Basic Return – Only \$99!!!

\$119 after 3-1-2021

Additional forms costs are listed below and are indicated throughout the organizer by an * and also include other forms listed below. Please visit www.flyingfilers.com, under the Fees and Services section, for a complete description and detailed explanation of most of these forms to help clarify any questions you may have regarding their relevance to your tax return. This will help you determine if you should include them in your payment. Please add the price of each additional form you'll need to the basic return price to calculate the total cost of your return. I will contact you for any form needed and not listed.

Form	Price	Form	Price
Schedule C – Profit and Loss from Business	\$30	Schedule D – Capital Gains or Losses	\$20
Schedule C-EZ – Net Profit from Business – Sole Proprietorship.	\$5	Schedule E – Supplemental Income and Loss (rental income, etc.)	\$20
Schedule F – Profit or Loss from Farming	\$30	Schedule EIC – Earned Income Credit	\$5
Schedule SE – Self Employment Tax	\$5	Form 2441 – Child and Dependent Care Expenses	\$5
Form 1116 – Foreign Tax Credit*	\$20	Form 2210 – Underpayment of Estimated Taxes	\$5
Form 2555 – Foreign Earned Income*	\$20	Form 3903 – Moving Expenses	\$15
Form 4137 – Social Security and Medicare Tax	\$5	Form 4562 – Depreciation and Amortization	\$20
Form 4684 – Casualties and Thefts	\$20	Form 4797 – Sale of Business Property	\$15
Form 4952 – Investment Interest Expense Deduction	\$20	Form 5329 – Additional Taxes for Qualified Retirement Plans	\$10
Form 5405 – First-Time Homebuyer Credit	\$5	Form 5695 – Residential Energy Efficient Property Credit	\$5
Form 6251 – Alternative Minimum Tax	Free	Form 6252 – Installment Sale Income	\$20
Form 8283 – Non Cash Charitable Contributions (over \$500)	\$15	Form 8582 – Passive Activity Loss Limitation	\$20
Form 8606 – Non Deductible ROTH IRA's	\$10	Form 8812 – Additional Child Care Tax Credits	\$5
Form 8829 – Expenses for Business Use of Home	\$5	Form 8839 – Qualified Adoption Expenses	\$5
Form 8863 – Education Credits	\$5	Form 8880 – Credit for Qualified Retirement Savings Contributions	\$5
Form 8962 – Premium Tax Credit	\$10	Form 8910 – Alternative Motor Vehicle Credit	\$10
Form 8915-E – Qualified 2020 Disaster Retirement Plan Distributions & Repayments (Use for Coronavirus-Related Distributions)	\$20	Form 8917 – Tuition and Fees Deduction	\$5
Married Joint Filing	\$20	Add Additional State Return (paid taxes in more than one state)	\$20
Schedule K1 – Beneficiary's Share of Income/Ded	\$30	For forms not listed, please contact us for pricing information.	

*If you have a foreign domicile please contact us prior to send in your information to determine if we will be able to assist you in your income tax preparation.

Estimating the Cost of your 2020 Tax Return

Basic Return (\$99/\$119 before/after 3-1-2021)	\$ 99.00 / 119.00	+
Married Joint Filing Add \$20	\$ _____	+
Total Cost of Additional Forms (from above chart)	\$ _____	+
Additional State Returns (if more than one state) Add \$20 each state	\$ _____	+
County and/or Local Income Tax Returns Add \$30 each	\$ _____	+
Mailing expense for hard copy completed returns Add \$10 (see cover sheet)	\$ _____	=
Total Payment for your return*	\$ _____	

* We are always available to help you figure the amount due or we can invoice you prior to filing your return. Due to the complexity of some returns, additional fees may apply.

Please make all checks or money orders payable to: **Flying Filers**

There is a \$25.00 fee for all returned checks.

Paying by Credit Card or E-Check

Flying Filers also accepts Visa, MasterCard, American Express, and E-Check using PayPal. You can prepay by following the steps below, or **we can invoice you** the amount and send you a link that will take you through payment instructions. To prepay, log on to www.flyingfilers.com and pay through the **Payment Options** link. This link will bring you to a page with all the forms listed in the chart above and the basic return. Simply click each item that corresponds to your return to add them to your PayPal shopping cart. When finished, proceed to checkout to finish the transaction. You do NOT need a PayPal account to pay with your credit card! After clicking "Checkout", click the link that says "I do not have a PayPal account". It will then allow you to enter your credit card information so that you may pay safely and securely. Rest assured, paying with credit card is safe and secure through PayPal. If you prefer, we can invoice you at your email address to pay with credit card online after your return is completed. Returns will be filed once the invoice is paid using your credit card online through PayPal.

*We recommend pre-paying for your return when you mail it to us to ensure the fastest possible filing!
Payment must be received and processed prior to the completion of your tax return.*

**If not paying by check, please remember to send us a VOIDED check for Direct Deposit of your refund.
(Returning customers with no changes to their accounts can skip sending a voided check.)**

Please Indicate Your Intended Form of Payment

Credit Card	Check	Money Order	E-Check
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Please mail this COMPLETED ORGANIZER along with any 1099's, Mortgage Statements, Stock Statements, Year-End Paystub, all W2's and payment for tax preparation. New clients please include a copy of your 2019 tax return.

Keep a copy of everything for your own records!!

Mail everything via UPS, FedEx, or USPS Certified/registered mail to:

**Flying Filers
5715 W. Grace St.
Chicago, IL 60634
Phone: 312.768.TAXX (8299)
Fax: 866.293.1320**

Website Address: www.flyingfilers.com

Email: mike.bowen@flyingfilers.com

Office visits available by appointment only.

Feel free to use the space on the back of the sheets for any questions
or to provide any additional information that would help with your return.