

E-File Questionnaire 2019

PLEASE PRINT CLEARLY

All information pertaining to your current tax return must be filled in.

New IRS regulations beginning January 1, 2010 require us to notify our clients of the following information: We do not disclose any personal information to anyone and for your protection we will not release any information via phone, fax or mail without a written release form from you for each request. Check one answer for each question.

Yes	No	Question
		Do you have any foreign bank accounts?
		Does the paperwork turned in for income tax preparation include all income and expenses?
		Have you ever been denied Earned Income Tax Credit by the IRS in the last 3 years?
		Did you have insurance on each person in your family for this tax period?

Taxpayers - *All information must be identical to Social Security records.*

	Mr. Taxpayer	Ms Taxpayer
Name		
SS#		
Occupation		
Date of Birth		
Phone Number		
Filing Status – Single, Married filing Joint, Married Filing Separately, HOH (Circle One)		

Dependents - *All information must be identical to Social Security records.*

Name	SS Number	Date of Birth	Relationship

E-Mail Address: _____

Direct Deposit Information YES NO

Bank Name:	
Routing Number:	
Account Number:	

Tax Year: 2019

Because of the new requirements by the Internal Revenue Service, I understand that I must have receipts for all deductions claimed on my tax return in case of an audit. I also understand that I must have receipts to go with cancelled checks.

By signing this statement, I understand that I am responsible for all figures given to my tax preparer and he is waived of any liability from the figures that I have given him.

I have provided proof of all dependents that I am claiming Earned Income credit for.

I understand that my tax return will not be submitted to the IRS until my entire preparation fee has been paid. **NO CREDIT FOR ANYONE.**

Signed: _____ Date: _____

Your Current Address that you want on Tax Return

Address

City

State

Zip

A copy of your tax return will be emailed to you. The password is the taxpayer's complete social security number without the dashes. If I can not read your email address, you won't receive a copy. It will cost you \$50 for a printed copy.

Department of the Treasury
Internal Revenue Service

Return completed Form 8879 to your ERO. (Don't send to the IRS.)
Go to www.irs.gov/Form8879 for the latest information.

2019

Submitter identification number (SIN) _____
Taxpayer's name _____ Social security number _____
Spouse's name _____ Spouse's social security number _____

SIGN AT CHECKMARK ONLY

Part I Tax Return Information — Tax Year Ending December 31, 2018 (Whole dollars only)	
1	Adjusted gross income (Form 1040, line 7; Form 1040NR, line 7)
2	Total tax (Form 1040, line 15; Form 1040NR, line 61)
3	Federal income tax withheld from Forms W-2 and 1099 (Form 1040, line 16; Form 1040NR, line 62a)
4	Refund (Form 1040, line 20a; Form 1040-SS, Part I, line 13a; Form 1040NR, line 73a)
5	Amount you owe (Form 1040, line 22; Form 1040NR, line 75)

Part II Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your return)

Under penalties of perjury, I declare that I have examined a copy of my electronic individual income tax return and accompanying schedules and statements for the tax year ending December 31, 2018, and to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amounts in Part I above are the amounts from my electronic income tax return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution to debit the entry to this account. This authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate the authorization. To revoke (cancel) a payment, I must contact the U.S. Treasury Financial Agent at **1-888-353-4537**. Payment cancellation requests must be received no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I further acknowledge that the personal identification number (PIN) below is my signature for my electronic income tax return and, if applicable, my Electronic Funds Withdrawal Consent.

Taxpayer's PIN: check one box only

- I authorize Cranford Enterprises to enter or generate my PIN as my signature on my tax year 2018 electronically filed income tax return. Enter five digits, but don't enter all zeros
- I will enter my PIN as my signature on my tax year 2018 electronically filed income tax return. Check this box **only** if you are entering your own PIN **and** your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Your signature _____ Date ▶ _____

Spouse's PIN: check one box only

- I authorize Cranford Enterprises to enter or generate my PIN as my signature on my tax year 2018 electronically filed income tax return. Enter five digits, but don't enter all zeros
- I will enter my PIN as my signature on my tax year 2018 electronically filed income tax return. Check this box **only** if you are entering your own PIN **and** your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Spouse's signature _____ Date ▶ _____

Practitioner PIN Method Returns Only—continue below

Part III Certification and Authentication — Practitioner PIN Method Only

ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN. Don't enter all zeros

I certify that the above numeric entry is my PIN, which is my signature for the tax year 2018 electronically filed income tax return for the taxpayer(s) indicated above. I confirm that I am submitting this return in accordance with the requirements of the Practitioner PIN method and **Pub. 1345**, Handbook for Authorized IRS e-file Providers of Individual Income Tax Returns.

ERO's signature ▶ _____ Date ▶ _____

**ERO Must Retain This Form — See Instructions
Don't Submit This Form to the IRS Unless Requested To Do So**