

Information Packet for Preparing 2023 Income Tax Returns

We look forward to working with you to prepare your 2023 Income Tax Returns. Enclosed please find a packet of material to help make your tax filing as smooth as possible, while taking full advantage of allowable deductions and credits.

| Please | complete and return to us the following with your tax documents: |
|--------|---|
| | Engagement Letter for Tax Preparation Services (pages 2-3) |
| | Tax Questionnaire (page 4) |
| | Reminder Checklist (page 5) |
| | Record of Estimated Income Tax Payments Made (page 6) |
| _ _ | Direct Deposit/Debit Verification for refunds or direct debit of balance due payments (page 6) Foreign Bank Account Report (FBAR) (Complete only if you have a Foreign Bank Account) (page 7) Supplemental Identification Form (Complete only if you are required to file a NY, AL, OH, or NM State Income Tax Return, including non-resident returns) (page 8) |
| Please | retain the following for your information: |
| | Client Vault information |
| | Privacy Policy |
| you to | ule your appointment today. If you would like to review your return with your tax advisor, we strongly encourage schedule your virtual appointment as soon as possible. Even if you do not have all your documents ready, call for pointment today to reserve a time that works best for you. |
| our se | ng us your tax information in advance of your appointment really helps! You can upload your tax documents via acure portal, send them via: mail, fax or overnight courier. You can even drop them off in person - please call - in ce. If we do not have your documents at least 2 weeks prior to the appointment the appointment will be required. |
| Thank | you for the opportunity to serve you, |
| The Al | liance Team |
| | |



Please <u>complete</u> and return.

TAX RETURN PREPARATION SERVICES

This letter is to specify the terms of our engagement with you, to clarify the nature and extent of the services we will provide, and to confirm an understanding of our mutual responsibilities.

Our Services:

- We will prepare your 2023 Federal and State individual income tax returns based upon timely information you submit to us. We will not audit or otherwise independently verify the data you submit, although we may ask you to clarify certain items. As such, the data included in your returns is your representation. You have the final responsibility for the income tax returns and, therefore, you should review them carefully prior to signing and filing them.
- We will adopt whatever position you request on your returns so long as it is consistent with our professional standards and ethics. If you desire a legal opinion before choosing between alternative tax positions, you should retain legal counsel for this purpose.
- The engagement does not include any services not specifically within the scope of services provided for in this letter. However, under the rules of professional responsibility governing our practice, we may have to provide additional accounting or research services which are incidental to preparing your tax return. Incidental services of this nature will be included with the billing for your tax return. At your request, we would be pleased to consult with you regarding other income tax matters, such as proposed or completed transactions, income tax projections, and for research in connection with such matters. We will render additional invoices for such additional services at our standard billing rates.

Electronic Filing:

Your return may be electronically filed with the Internal Revenue Service Center and one or more state
authorities through a secured third-party filing service. Electronic filing of your return does not affect
your responsibility to review and approve the return before it is submitted. It is your responsibility
to timely provide the signed e-file authorization form to us in order for us to timely e-file your return.

Your responsibilities:

- Confirm that you did not have an interest in or signature or other authority over a financial account in a
 foreign country, such as a bank account, securities account, or other financial account. If you do have
 such an account, you agree to inform us of the balances and earnings in your accounts, as you are
 required to file Treasury Form FinCEN 114 if your aggregate balance is \$10,000 or greater at any point
 during the tax year. You may also be required to file form 8938 under certain circumstances. Please
 bring any foreign financial accounts to our attention, as failure to do so could result in severe civil and
 criminal penalties to be assessed against you.
- Inform us as to the status of health insurance coverage for your household.
- Confirm that any amounts claimed for Education Credits or Earned Income Tax Credits were properly incurred.
- If an extension of time to file is required, any tax due with these returns must be paid with that extension.

 Any amounts not paid by the filing deadline may be subject to interest and late payment penalties.

Our fees:

- Our fees for preparation of your returns are based upon our standard billing rates plus out-of-pocket expenses. Our invoices are due and payable upon presentation.
- Fees for professional services rendered, including but not limited to income tax return preparation and planning, tax research and inquiries, and extension filing assistance, will be billed as incurred. Fees and expenses are due and payable upon presentation of our invoice to you. Our fee for representing you will be based upon time spent, billed at our standard rates. If we have not received payment in accordance with the stated terms, we reserve the right to terminate this engagement upon written notification to you.

You may terminate your engagement of our services at any time. Should you do so, however, you remain liable for all unpaid fees as discussed above. We reserve the right to withdraw from this engagement at any time because of unpaid fees, the guidance of our Professional Standards, or for any other reason. We will notify you in advance of any decision by us to withdraw, and will take all reasonable steps to assist in the orderly transfer of your tax services.

Your returns may be selected for review by the taxing authorities, and in the event adjustments are proposed by the taxing authorities, you may have a right to appeal that conclusion. In the event of such governmental tax examination, we will be available to represent you under a separate engagement letter.

If the foregoing fairly sets forth your understanding for tax return preparation services, please sign the enclosed copy of this letter in the space indicated and return it to our office. In the event you provide us with some of the information necessary to prepare tax returns, either your signing of a tax organizer, or the commencement of our services constitutes your acceptance of the terms of this letter, even if this engagement agreement is not signed.

| Alliance Accounting Group | |
|---------------------------|-------|
| Accepted by: | Date: |



Thank you for the opportunity to be of service to you,

2023 TAX YEAR QUESTIONNAIRE

| For | tax year 2023: | YES | NO | Comment (if yes, provide details) |
|-----|--|-----|----|--|
| 1 | Did your home address, preferred email or phone number change? | | | |
| 2 | Did you sell and/or purchase a home? | | | Please provide HUD-1 statements |
| 3 | Were you a resident of or did you receive income from another state? | | | |
| 4 | Did your marital status change? | | | |
| 5 | Did you (or your spouse/partner) change employment? | | | |
| 6 | Were there any changes to the # of dependents you are claiming? | | | Name: DOB: SS#: |
| 7 | Did you perform any Roth conversion? | | | |
| 8 | If self-employed- did you use an area of your home for business? | | | Please provide: Office SQ FT: TOTAL HOUSE SQ FT: |
| 9 | Did you make or do you intend to make any retirement plan contributions? | | | 401K/403B: IRA/SEP/SoloK: |
| 10 | Did you make estimated tax payments? | | | Please complete the attached <i>Record of Estimated Tax</i> (page 6) |
| 11 | Do you want direct deposit of your return or a direct debit of any tax due? | | | Please complete the attached <i>Direct</i> Deposit/Direct Debit Verification Form (page 6) |
| 12 | Did you have any foreign income or foreign bank accounts? | | | Please complete the attached FBAR Form (page 7) |
| 13 | Did you receive any amounts from an inheritance? | | | Please confirm that the cost basis of any assets you received is accurate |
| 14 | Are you a NY resident or will we be filing a NY state tax return for you? (including non-resident) | | | Please complete the attached Supplemental Identification Form (page 8) |
| 15 | Did you sell or transfer any virtual currency (e.g. Bitcoin)? | | | |
| 16 | Are you a Veteran who was honorably discharged from service? | | | |
| 17 | Did you contribute to a qualified education program (i.e. 529 plan)? | | | Provide donee's name, SSN, amount. |
| 18 | Did you purchase a qualified electric vehicle? | | | Please provide supporting purchase documentation. |
| 19 | Did you make energy efficient home improvements (i.e. wind or solar powered)? | | | Please provide supporting purchase documentation. |

| Please | complete | |
|---------|----------|---|
| and | return. | - |

| Your | Name | S | ١ |
|------|------|---|---|
| | | / | , |

2023 TAX YEAR REMINDER CHECKLIST

Spouse/Partner

Income Items to Provide Please submit all necessary source documentation possible.

You

| W-2s | |
|-----------------------------|--|
| 1099s/K-1s and other income | |

Deduction and Credit Items to Provide Please submit all necessary source documentation possible.

| | Medical | Amount/Form Needed |
|------------------------------|---|-----------------------------|
| Medical Insurance Pre | miums Paid (If not already pre-tax) | |
| Doctor Visits Paid (NOT | T from HSA or FSA) | |
| Prescription Expenses | (NOT from HSA or FSA) | |
| Dental/Vision Expense | es (NOT from HSA or FSA) | |
| Medical Miles Driven | | |
| HSA Contributions | | Please provide Form 5498-SA |
| HSA Distributions | | Please provide Form 1099-SA |
| | Home | Amount |
| Real Estate Taxes Paid | for 2023 | |
| Mortgage Interest Pai | d | Please provide Form 1098 |
| Private Mortgage Insu | rance | Please provide Form 1098 |
| Rent Expense (if NJ resid | dent) | |
| | Charitable | Amount |
| Cash/Check Charitable | e Contributions | |
| (if amount greater that \$2 | 50 please provide letter from organization) | |
| Non-Cash Contribution | ns (ex. Goodwill) (amounts over \$500 require receipts) | |
| | Education | Amount |
| Tuition Paid | | Please provide Form 1098-T |
| Student Loan Interest | Paid | Please provide Form 1098-E |
| Distribution from Qua | lified Education Plan | Please provide Form 1099-Q |
| | Work | Amount |
| Unreimbursed Job-rela | ated Expenses (PA residents only) | |
| Ch | ildcare Expenses per Child | Amount |
| Child Name | Provider: Name/Address/Tax ID# | Amount |
| | | |
| | | |
| | | |

RECORD OF ESTIMATED INCOME TAX PAYMENTS MADE

| | FEDERAL | | STA | ATE |
|--|------------------|-------------|-----------|-------------|
| | Date Paid | Amount Paid | Date Paid | Amount Paid |
| 2022 applied to 2023 | | | | |
| 1st Quarter | | | | |
| 2nd Quarter | | | | |
| 3rd Quarter | | | | |
| 4th Quarter | | | | |
| DIRECT DEPOSIT/DEBIT VERIFICATION | | | | |
| If you wish to provide Direct Deposit or Direct Debit instructions, please enclose a VOIDED check from the account you wish to use <i>OR</i> complete the information below: Direct Deposit or Debit Direct Deposit a refund Direct Debit of owed No Direct Deposit or Debit of refund or owed Direct Debit | | | | |
| Bank Name: | | | | |
| Account Number: | | | | |
| Account Type (Check | ing or Savings): | | | |
| Routing Number: | | | | |

| Your Name(s) | | Please <u>complete</u> and return. |
|--|---|---|
| Foreign Bank Account Report (FBAR) | | |
| Complete This Fo | orm Only If You Have Fore | eign Bank Accounts |
| which, at any point during the year, research Account Report (FBAR) with the obligation and individuals who qualify FBAR, instituted in the 1970s, becarfinancing and failure to comply could Please provide us with the information | reached a combined balance of overhee US Treasury Department. FBA ymust file an FBAR regardless of with more actively enforced post I result in severe civil and criminal tion listed below for any foreign | on one or more foreign bank accounts or \$10,000 are obliged to file a Foreign of the R is not a tax, but rather a reporting whether such individual owes US taxes. 9/11 given the attention to terrorist penalties assessed against you. bank accounts that you own or have or more at any point during the year. |
| | Account 1 | Account 2 |
| Account Holder(s) | | |
| Foreign Bank Name | | |
| Street, City, and Postal Code of Bank Branch | | |
| Country of Bank Branch | | |
| Type of Account | | |

(Bank Acct or Securities Acct)

Additional FBAR related notes:_____

Account Number

Highest Balance in \$US During the Calendar Year

| Vour Nama(s) | Please <u>complete</u> |
|--------------|------------------------|
| Your Name(s) | and return. |
| | and return: |

Supplemental Identification Form for NY/AL/OH/NM Tax Returns (Including non-resident Income Tax Returns)

| Please provide us with | a photo copy of your Driver's License <u>or</u> complete this form. |
|----------------------------|--|
| Taxpayer: | |
| Driver's Name | |
| Driver's License Number | |
| Issuing State | |
| Issuing Date | |
| Expiration Date | |
| Document Number* | |
| *(For NY issued docum | ents only. Not required for non-NY issued documents) |
| Spouse (if joint retu | urn): |
| Driver's Name | |
| Driver's License Number | |
| Issuing State | |
| Issuing Date | |
| Expiration Date | |
| Document | |

The above states require a primary taxpayer's and (if applicable) spouse's driver's license or state identification. Taxpayers must provide the ID number, issuing state, issuing date, and expiration date for all licenses or identification cards. If the taxpayer license/ID is a driver license or non-driver ID, the document number must also be entered. The states are requiring the information and not providing the information will cause delays.

CLIENT VAULT

Due to the increased demand to securely exchange documents that contain sensitive information, we are encouraging you to use the Client Vault, our secure portal, to exchange income tax documents. The Client Vault is our secure online repository for storing your important financial and tax documents, as well as a secure means to exchange documents with you.

Rather than mailing, faxing, or emailing us your tax documents, we encourage you to scan and upload documents to the **Shared Documents** folder of your Client Vault. Once uploaded, we will organize them in a PDF file that will be available to you wherever you have internet access. With the Client Vault, you have a secure online location to store your important documents and you will have 24/7 access to them anywhere you have internet access.

To Access the Client Vault, go to www.AllianceWMG.com/account-access and click the image for Wealth Management System & Client Vault. It looks like this:



Your password expires after 1 year so you may be prompted to change it when you login.

If you have not used the Client Vault before, it is not a problem.

Please send an email to: info@alliancewmg.com we will send you an email invitation to set up your Client Vault.

Once you are logged in, you will see a tab at the top of the page labeled **Vault**. This is what you use to store, send and receive documents. To send a file to us, simply choose the **Shared Documents** folder, click **Upload Files** and follow the prompts. We will automatically receive notification of any documents uploaded into the **Shared Documents** folder.

Please note we cannot see or retrieve the documents placed in the My Documents folder we can only see the documents in the Shared Documents folder. Please don't place your tax documents in My Private Documents folder; this folder is being provided for you to safely and securely store your personal documents.

If you are unable to login to the Client Vault or have any other issues, please call or send an email to: info@alliancewmg.com.



Maintaining the trust and confidence of our clients is a high priority. That is why we want you to understand how we protect your privacy when we collect and use information about you, and the steps that we take to safeguard that information. This notice is provided to you on behalf of Alliance Wealth Management Group, LLC ("AWMG").

Information We Collect: In connection with providing investment products, financial advice, or other services, we obtain non-public personal information about you, including:

- Information we receive from you on account applications, such as your address, date of birth, Social Security Number, occupation, financial goals, assets and income;
- Information about your transactions with us, our affiliates, or others; and

Categories of Information We Disclose: We may only disclose information that we collect in accordance with this policy. AWMG does not sell customer lists and will not sell your name to telemarketers.

Categories of Parties to Whom We Disclose: We will not disclose information regarding you or your account at AWMG, except under the following circumstances:

- To entities that perform services for us or function on our behalf, including financial service providers, such as a clearing broker-dealer, investment company, or insurance company, other advisers;
- To third parties who perform services or marketing, client resource management or other parties to help manage your account on our behalf;
- To your attorney, trustee or anyone else who represents you in a fiduciary capacity;
- To our attorneys, accountants or auditors; and
- To government entities or other third parties in response to subpoenas or other legal process as required by law or to comply with regulatory inquiries.

How We Use Information: Information may be used among companies that perform support services for us, such as data processors, client relationship management technology, technical systems consultants and programmers, or companies that help us market products and services to you for a number of purposes, such as:

- **To protect your accounts/non-public information** from unauthorized access or identity theft;
- **To process your requests** such as securities purchases and sales;
- To establish or maintain an account with an unaffiliated third party, such as a clearing broker-dealer providing services to you and/or AWMG;
- To service your accounts, such as by issuing checks and account statements;
- **To comply** with Federal, State, and Self-Regulatory Organization requirements;
- **To keep you informed** about financial services of interest to you.

Regulation S-AM: Under Regulation S-AM, a registered investment adviser is prohibited from using eligibility information that it receives from an affiliate to make a marketing solicitation unless: (1) the potential marketing use of that information has been clearly, conspicuously and concisely disclosed to the consumer; (2) the consumer has been provided a reasonable opportunity and a simple method to opt out of receiving the marketing solicitations; and (3) the consumer has not opted out. AWMG does not receive information regarding marketing eligibility from affiliates to make solicitations.

Regulation S-ID: Regulation S-ID requires our firm to have an Identity Theft Protection Program (ITPP) that controls reasonably foreseeable risks to customers or to the safety and soundness of our firm from identity theft. We have developed an ITPP to adequately identify and detect potential red-flags to prevent and mitigate identity theft.

Our Security Policy: We restrict access to nonpublic personal information about you to those individuals who need to know that information to provide products or services to you and perform their respective duties. We maintain physical, electronic, and procedural security measures to safeguard confidential client information.

Closed or Inactive Accounts: If you decide to close your account(s) or become an inactive customer, our Privacy Policy will continue to apply to you.

Complaint Notification: Please direct complaints to: Steven M. Fox at AWMG, 23 Royal Road, Suite 101, Flemington, NJ 08822; 908-751-7093.

Changes to This Privacy Policy: If we make any substantial changes in the way we use or disseminate confidential information, we will notify you. If you have any questions concerning this Privacy Policy, please contact us at: AWMG, 23 Royal Road, Suite 101, Flemington, NJ 08822; 908-751-7093.