

[Date]

[Client Name]

[Client Address]

[City, State, Zip Code]

Re: Annual State and Local Tax (SALT) Retainer Engagement

Dear [Client Contact Name],

This letter confirms the terms and objectives of our engagement to provide annual State and Local Tax (SALT) advisory and compliance services to [Client Name] ("the Client") for the fiscal year ending [Date].

1. Scope of Services

We will provide the following services under this annual retainer:

- Monitoring of state nexus developments and legislative changes.
- Quarterly consultation meetings regarding multi-state tax positions.
- Preparation and filing of annual state income and franchise tax returns.
- Review of monthly/quarterly sales and use tax reports.
- Basic research and informal responses to general SALT inquiries.

2. Client Responsibilities

The Client is responsible for the following:

- Providing complete and accurate financial records and transaction data.
- Maintaining all documentation required by taxing authorities.
- Final approval of all tax returns and filings.
- Notifying us of any changes in business locations or activities.

3. Professional Fees

The annual retainer fee for these services is \$[Amount]. This fee will be billed in [Monthly/Quarterly] installments of \$[Amount]. This fee covers the scope defined above; any special projects, audits, or structural consulting will be billed separately at our standard hourly rates of \$[Rate].

4. Term and Termination

This agreement is effective from [Start Date] to [End Date]. Either party may terminate this agreement with [Number] days' written notice. All fees earned up to the date of termination shall be due and payable.

5. Limitation of Liability

Our liability for any claim arising out of this engagement shall be limited to the total amount of fees paid for the services giving rise to the claim.

Please sign and return a copy of this letter to indicate your acceptance of these terms.

Sincerely,

[Firm Name]

[Your Name/Title]

Accepted and Agreed:

Signature: _____

Printed Name: [Client Representative Name]

Date: _____