# 2021 Tax Organizer Personal Information

Personal Information									
		Name			SSN	N	Has IP PIN	Dat	e of birth
Taxpayer	r				***_*	**-6789			
Spouse									
Name of pe	erson to w	hom all information should be addressed, if not the	e taxpayer			'			
Street ad	ldress, cit	ey, state, and ZIP							
		Occupation		Daytime phone	Evening p	hone		Cell p	hone
Taxpayer	r								
Spouse									
Taxpayer	r email	kszlaw@gmail.com					•		
Spouse e	email	January Santana							
Filing status at the end of 2021  Single Married Widowed - If widowed and your spouse died in 2021, enter the date of death  Married filing separately - If married but filing separately, did you live apart from your spouse for the last six months of 2021?  Yes No  Are you or your spouse blind?  Are you or your spouse disabled?  Are you or your spouse a full-time student?  Do you or your spouse want to designate \$3 to go to the Presidential Election Campaign Fund?  At any time during 2021 did you receive, sell, exchange, or otherwise dispose of any financial interest in any virtual currency?  If you were 18 years of age, or under 24 and a student, at the end of 2021, were you in foster care on or after tuming 14 years of age and agree this status can be disclosed to the IRS?  If you were 18 years of age, or under 24 and a student, at the end of 2021, were you homeless or at risk of becoming homeless and supporting yourself?  Was your earned income in 2021 less than your earned income in 2019?  If "Yes," enter the amount of your 2019 earned income.  Did you receive the third stimulus payment (Economic Impact Payment or EIP) in 2021?  If "Yes," enter the amount received for each taxpayer and provide Notice 1444-C or Letter 6475 from the IRS.  Taxpayer Spouse						3			
	r <b>'s type o</b> ver's lice	of photo ID nse State-issued photo ID		Spouse's type of photo ID  Driver's license  State-issued photo ID					
Photo ID	number			Photo ID number					
State photo ID was issued				State photo ID was issued	l				
Date photo ID was issued				Date photo ID was issued					
Date photo ID expires				Date photo ID expires					
Account Information for Deposits and Withdrawals									
Name of bank			Bank	Bank	Type of acc	ount	Use	e this ac	count for
		Of Marin	routing number	account number	Checking	Savings	Depo	osits	Withdrawals
Appoin	ntment l	nformation							
Your 2021	1 appoint	ment is scheduled for							

ist dependents required to file a retum  Yes No  Did you receive advance payments of the Child Tax Credit from the IRS at any time from July through December 2021?  If "Yes," enter the amount each taxpayer received and the number of children taken into account to determine the amount received as shown on IRS Letter 6419, box 2. Or, provide Letter 6419 from the IRS.  Taxpayer  Spouse  If you were married last year and filed a joint return with your spouse, are you filing a joint return with the same spouse this year?  Child and Other Dependent Care Expenses  Name of care provider  Address  Resident State  Resident City			Dependent	and Other In	tormatic	on			
First and last name SSN    P PN   Relationship   Months   Date of birth   Disable   Full-time Expenses	ame:							SSN	<b>1</b> :
SSN   IP PIN   Relationship   In nome   Date of birth   Disabled   district   Expenses	Dependent Information	1							
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Did you receive advance payments of the Child Tax Credit from the IRS at any time from July through December 2021?   If "Yes," enter the amount each taxpayer received and the number of children taken into account to determine the amount received as shown on IRS Letter 6419, box 2. Or, provide Letter 6419 from the IRS.   Taxpayer									
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Spouse If you were married last year and filed a joint return with your spouse, are you filing a joint return with the same spouse this year?    Mame of care provider	the amount	received as show	wn on IRS Letter 6419	, box 2. Or, provide	Letter 6419	from the IRS.	o dolorriii		
If you were married last year and filed a joint return with your spouse, are you filing a joint return with the same spouse this year?    Address									
Name of care provider  Address  SSN or EIN  Amount Parameter  Federal  Date paid  Amount  Date paid  Date paid  Date paid  Amount  Date paid  Da	<u> </u>	-							
Name of care provider  Address  SSN or EIN  Amount Particles  Stimates  Federal  Date paid  Amount  Date paid  Dat			•	n your spouse, are	you filing a	joint return with t	ne same s	pouse th	ıs year?
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Date paid Amount Date paid Amount Date paid Amount Date paid Amount perpayment applied m 2020 st quarter cond quarter irid quarter urth quarter	Name of care provider	ident Care Ex	penses	Address			SSN or E	EIN	Amount Pai
rst quarter econd quarter uird quarter	Name of care provider				sident State				
econd quarter  purth quarter  purth quarter	Name of care provider		Federal	Res		Amount	F		
urth quarter	Name of care provider  Sstimates		Federal	Res		Amount	F		City
urth quarter	Name of care provider  Stimates  Verpayment applied m 2020		Federal	Res		Amount	F		City
	Name of care provider  Estimates  verpayment applied m 2020 est quarter econd quarter		Federal	Res		Amount	F		City
lditional payments	Name of care provider  Setimates  Verpayment applied m 2020  Test quarter econd quarter aird quarter		Federal	Res		Amount	F		City
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	Name of care provider  Estimates  verpayment applied om 2020 rst quarter econd quarter aird quarter burth quarter		Federal	Res		Amount	F		City
	Name of care provider  Estimates  Verpayment applied on 2020  rst quarter econd quarter aird quarter buth quarter		Federal	Res		Amount	F		City
	Name of care provider  Estimates  verpayment applied om 2020  rst quarter econd quarter aird quarter burth quarter		Federal	Res		Amount	F		City

# Kollmorgen, Schlue & Zahradnik PC 2021 Tax Year Return Checklist

 1) Signed Engagement Letter
 2) Completed Client Questionnaire
 3) Driver's License for Taxpayer & Spouse
 4) Direct Deposit Information
 5) Notice 1444-C or Letter 6475 showing Economic Impact Payment
 6) Letter 6419 if you received Advance Child Tax Credit Payments
 7) Dependent Information if you have children

# 2021 Information Pertaining to the American Rescue Plan Act (ARPA)

On March 11, 2021, the President of the United States signed into law the American Rescue Plan Act (ARPA) that authorized a third round of stimulus payments and advanced payment of the Child Tax Credit. The IRS issued notices that provided the amounts you received for these payments. This information is necessary to accurately complete your 2021 individual tax return. Information provided below explains what notice you received and how to obtain the information if you no longer have the notice or have yet to receive a letter.

### Stimulus Payment (Economic Impact Payment (EIP)

The third round of EIP or stimulus payments began mid-March 2021. Individuals could have received up to \$1,400 (\$2,800 for married couples filing a joint return). Qualifying dependents may have also received \$1,400. Unlike the first two payments, EIP3 was not limited to children under 17. Families may have received the payment based on all of the qualifying dependents claimed on the tax return. Most families received \$1,400 per person, meaning, a single person with no dependents may have received \$1,400 while a family of four may have received \$5,600. Notice 1444-C was sent following the payments and Letter 6475 will be issued in January 2022 with a combined total.

If you no longer have Notice 1444-C, or have not received Letter 6475, log in to your IRS Online Account to get the accurate amount of EIP3 received.

- 1. Go to irs.gov.
- 2. Select "View Your Account Information."
- 3. Select "Log in to your Online Account" and follow the prompts provided.

## **Advance Child Tax Credit Payments**

Under ARPA, the maximum amount for the Child Tax Credit (CTC) was increased from \$2,000 to \$3,600 for each child 5 years old and under. For children ages 6 - 17, the maximum increased to \$3,000. In July 2021, eligible families that did not opt out began receiving advanced CTC payments up to \$300 per month for each child age 5 and under and up to \$250 for each child between the age of 6 and 17. IRS will issue Letter 6419 to provide the amount received per taxpayer and how many children were taken into account to determine the amount received.

If you no longer have Letter 6419, or have not yet received it, follow the directions above to log in to your online account to access the Child Tax Credit Update Portal or log directly in to the portal using the instructions below. For married couples filing a joint return, the taxpayer and spouse will both need to log in to get the amount apportioned to each taxpayer.

- 1. Go to irs.gov.
- 2. Select "Child Tax Credit Update Portal."
- 3. Select "Manage Advance Payments" and follow the prompts provided.

# Kollmorgen Schlue and Zahradnik PC

920 12th St PO Box 283
Belle Plaine, IA 52208
Jennifer@kszlaw.net
Phone: (319)444-3285 | Fax: (319)444-2644

Subject: Preparation of Your 2021 Tax Returns

:

Thank you for choosing Kollmorgen Schlue and Zahradnik PC to assist you with your 2021 taxes. This letter confirms the terms of our engagement with you and outlines the nature and extent of the services we will provide.

We will prepare your 2021 federal and state income tax returns. We will depend on you to provide the information we need to prepare complete and accurate returns. We may ask you to clarify some items but will not audit or otherwise verify the data you submit. An Organizer is enclosed to help you collect the data required for your return. The Organizer will help you avoid overlooking important information. By using it, you will contribute to the efficient preparation of your returns and help minimize the cost of our services.

We will perform accounting services only as needed to prepare your tax returns. Our work will not include procedures to find defalcations or other irregularities. Accordingly, our engagement should not be relied upon to disclose errors, fraud, or other illegal acts, though it may be necessary for you to clarify some of the information you submit. We will inform you of any material errors, fraud, or other illegal acts we discover.

The law imposes penalties when taxpayers underestimate their tax liability. Call us if you have concerns about such penalties.

Should we encounter instances of unclear tax law, or of potential conflicts in the interpretation of the law, we will outline the reasonable courses of action and the risks and consequences of each. We will ultimately adopt, on your behalf, the alternative you select.

Our fee is based on the time required at standard billing rates plus out-of-pocket expenses. Invoices are due and payable upon presentation. All accounts not paid within thirty (30) days are subject to interest charges to the extent permitted by state law.

We will return your original records to you at the end of this engagement. Store these records, along with all supporting documents, in a secure location. We retain copies of your records and our work papers from your engagement for up to seven years, after which these documents will be destroyed.

If you have not selected to e-file your returns with our office, you will be solely responsible to file the returns with the appropriate taxing authorities. Review all tax-return documents carefully before signing them. Our engagement to prepare your 2021 tax returns will conclude with the delivery of the completed returns to you, or with e-filed returns, with your signature and our subsequent submittal of your tax return.

To affirm that this letter correctly summarizes your understanding of the arrangements for this work, sign the enclosed copy of this letter in the space indicated and return it to us in the envelope provided.

Thank you for the opportunity to be of service. If you have any questions, contact our office at (319)444-3285.

Sincerely,

Jennifer L Zahradnik	
Kollmorgen Schlue and Zahradnik PC	
(Both spouses must sign for preparation of joint returns.)	
Accepted By:	
Taxpayer	_
Spouse	_
•	
Date	_

# Checklist

Name:	SSN:

# Checklist

ne tax return. Return ges from your 2020

This check list is provided to help you gather necessary information for us to prepare your 2021 income this list, along with the supporting documentation, to our office and let us know of any significant characteristic tax year.					
	(Economic Impact Payment - IRS Notice 1444-C or Letter 6475) s Payment				
[] Taxpay	t of Child Tax Credit (IRS Letter 6419) er				
-	nds and other government payments (Form 1099-G) loyment compensation				
[ ] Onemp	loyment compensation				
[ ] Sale of [ ] Cancel	vide supporting documentation for income received for the following items) assets or property lation of debt ncome				
[ ] Educate [ ] Employ [ ] Contribute [ ] Alimon [ ] Studen [ ] Tuition [ ] Expens [ ] Contribute [ ] Medicate [ ] Real expens [ ] Mortgate [ ] Investrum [ ] Cash of [ ] Unreim [ ] Investrum [ ] Gambli	t loan interest and fees for higher education ses related to child or dependent care utions to a Retirement Savings Account I and dental expenses state taxes state and local taxes ge interest nent interest ontributions sh contributions bursed employee expenses nent expenses				

	Questionnaire
Name:	SSN:
Questionnaire	
5	
Personal Inform Yes No	ation
[][]	Did your marital status change during the year?
[][]	If "Yes," explain
[][]	If your filing status is married, but you are filing separately from your spouse, did you and your spouse
	live apart for the last six months of 2021?
[][]	Can you or your spouse be claimed as a dependent by someone else?
[][]	If you were 18 years of age, or under 24 and a student, at the end of 2021, were you in foster care on or
	after turning 14 years of age and agree this status can be disclosed to the IRS?
[][]	If you were 18 years of age, or under 24 and a student, at the end of 2021, were you homeless or at risk
1111	of becoming homeless and supporting yourself?  Did your address change during the year?
[][]	Were you, your spouse, or any dependents a victim of identity theft?
[][]	If "Yes," explain
[][]	Were you, your spouse, or any dependents issued an Identity Protection PIN (IP PIN)?
	If "Yes," provide Notice CP01A from the IRS.
Provide p	proof of identity to be eligible to e-file your tax return (driver's license or state-issued photo ID)
<b>D</b>	
Dependent Info	rmation
[][]	Did you have any changes in dependents during the year?
[ ] [ ]	If "Yes," explain
[][]	Can another person qualify to claim any of your dependents?
[][]	Did you receive advance payments of the Child Tax Credit from the IRS at any time from July through
	December 2021?
	If "Yes," provide Letter 6419 from the IRS. Or, enter the amount each taxpayer received and the
	number of children taken into account to determine the amount received as shown on IRS Letter 6419,
	box 2. If you were married last year and filed a joint tax return with your spouse, are you filing
	a joint return with the same spouse this year?
	Taxpayer Spouse
[][]	Did you have any childcare expenses during the year?
( ) ( )	Did you have any adoption expenses during the year?
[][]	Did you have any children under age 19 or a full-time student under age 24 with more than \$2,200 of
	unearned income?
Provide o	documentation for proof of dependent credits (school records, medical records, daycare records, etc.)
Health Care Info	sumation.
Yes No	madon
[][]	Did any member of your household have healthcare coverage through the Marketplace (Obama Care)?
	If "Yes," provide copies of Form 1095-A.
[][]	Did you receive any distributions from a Health Savings Account (HSA), Archer MSA, or Medicare Advantage
	MSA during the year?
	ses, Sales, and Debt Information
Yes No [ ] [ ]	Did you receive any tips not reported to your employer?
[][]	Did you receive any disability income during the year?
[][]	Did you cash in any U.S. savings bonds during the year?
[][]	Did you start a new business or purchase any rental property during the year?
[][]	Did you sell an existing business, rental property, or other property during the year?
[][]	Did you purchase any business assets or convert any assets to business use?

#### Questionnaire

Name:	SSN·

Name:	SSN:
Questionnaire	
	If "Yes," provide the cost of the asset, the date it was placed in service, and business use
	percentage.
[][]	Did you purchase any gasoline, diesel, or special fuels for off-road business use?
[][]	Did you buy or sell any stocks, bonds, or other investments during the year?
[][]	Did you sell a principal residence during the year?
	If "Yes," provide closing documentation for the purchase and sale of the home.
[][]	Did you have a principal residence or a piece of real property foreclosed on during the year?
[][]	Did you abandon a principal residence or a piece of real property during the year?  Did you refinance your principal home or second home or take out a home equity loan during the year?
[][]	If "Yes," provide all escrow, closing, and other pertinent documentation and information.
[][]	Did you receive any principal or interest during this year from property sold in prior years?
[][]	Did you rent out your home or use it for business?
[][]	Did you sell, exchange, or purchase any real estate during the year?
[][]	Did you acquire a new or additional interest in a partnership or S corporation?
[][]	Did you have any debts canceled or forgiven this year?
[][]	Does anyone owe you money that has become uncollectible?
[][]	Did you purchase a new hybrid, alternative motor, or electric motor energy-efficient vehicle during the year?
	If "Yes," provide the year, make, model, VIN, and date the vehicle was placed in service.
[][]	Did you receive income or incur expenses associated with a fantasy sport league?  If "Yes," provide documentation.
[][]	Did you receive income or incur expenses associated with car sharing (e.g., Lyft or Uber)?  If "Yes," attach Form 1099-MISC, Form 1099-NEC, and Form 1099-K.
[][]	Did you receive income or incur expenses associated with freelancing (e.g., Upwork or TaskRabbit)?  If "Yes," attach Form 1099-K or Form W-2.
[][]	Did you receive income or incur expenses associated with fashion sharing (e.g., Poshmark or thredUP)?  If "Yes," provide documentation.
[][]	Did you receive income or incur expenses associated with crowdfunding (e.g., Kickstarter or Indiegogo)?  If "Yes," attach Form 1099-K.
[][]	Did you receive income or incur expenses associated with a short-term rental (e.g., Airbnb or HomeAway)? If "Yes," provide documentation.
[][]	Did you receive any other income you have not provided information for with this organizer?  If "Yes," explain
Itemized Deduc	tion Information
Yes No	
[][]	Did you pay out-of-pocket medical or dental expenses (premiums, prescriptions, mileage, etc.) during the year?
[][]	Did you pay any long-term care premiums for yourself, your spouse, or a dependent during the year?
[][]	Did you receive any state or local income tax refunds from prior years?
[][]	Did you make any major purchases (vehicle, boat, etc.) during the year?
[][]	Did you pay any real estate property taxes or personal taxes during the year?
[][]	Did you pay mortgage interest during the year?  Did you make cash donations to charity during the year?
[][]	Did you make noncash donations to charity (clothes, furniture, etc.) during the year?
[][]	Did you donate a boat or vehicle during the year?  If "Yes," attach Form 1098-C.
[][]	Did you have gambling winnings or losses during the year?
[][]	Did you have any job-related expenses that were not reimbursed by your employer (uniforms, safety equipment, etc.)?
[][]	Did you use your vehicle on the job other than for commuting to work?
[][]	Did you work out of town at any time during the year?

#### **Retirement Information**

#### Questionnaire

SSN: Name: Questionnaire Yes No  $[\ ]\ [\ ]$ Did you receive any payments from a pension, profit sharing, or 401(k) plan during the year? Did you make any contributions to, withdrawals from, or execute any rollovers from an IRA, Roth, Keogh, SIMPLE, SEP, 401(k), or other qualified retirement plan during the year? Did you receive any Social Security benefits during the year? [][] **Education Information** Yes No Did you pay tuition expenses that were required for attending college, university, or vocational school [][]for yourself, your spouse, or a dependent during the year (even if classes were attended in another [][] Did anyone in your household attend a post-secondary school during the year?  $[\ ]\ [\ ]$ Did you make a contribution to or receive a distribution from an Education Savings Account or Qualified Tuition Program during the year? Did you pay student loan interest for yourself, your spouse, or your dependents during the year? **Miscellaneous Information** Yes No Did you receive the third stimulus payment (Economic Impact Payment or EIP) in 2021? [][]If "Yes," enter the amount received for each taxpayer and provide Notice-1444-C or Letter 6475 from the IRS. Taxpayer \_\_ Spouse Was your earned income in 2021 less than your earned income in 2019? [ ] [ ]If "Yes," enter the amount of your 2019 earned income. [][] Did you receive, sell, exchange, or otherwise dispose of any financial interest in any virtual currencies? [][] Did you incur a gain or loss due to damaged or stolen property? If "Yes," provide the incident date, value of the property, and amount of insurance reimbursements. [][]Did you pay wages to any household employees (babysitter, nanny, housekeeper, etc.)? Did you make gifts to any one person in excess of \$15,000 during the year? Yes No If "Yes," are you splitting the gift with your spouse? [][][][]Did you incur moving expenses during the year?  $[\ ]\ [\ ]$ Did you make any energy-efficient improvements to your main home during the year? Are you a business owner who paid health insurance premiums for your employees during the year? [][]Did you own interest or shares in a Qualified Opportunity Fund? [] Did you apply an overpayment of your 2020 taxes to your 2021 estimated taxes? If you have an overpayment of 2021 taxes, do you want the refund applied to your 2022 estimated taxes? [][]Did you make any estimated payments toward your 2021 taxes? Do you want to have any refund or balance due directly deposited or withdrawn? [][]If "Yes," provide a canceled checking or savings slip. [][]Do you anticipate your income or withholdings to be different for 2022? Did you make any purchases subject to Use Tax? [][] If "Yes," provide details. [][]Did you receive any notices from the IRS or state taxing authority? If "Yes," explain May the IRS discuss your tax return with your preparer? [][] Would you like a copy of your tax return sent to you electronically instead of receiving a printed copy?  $[\ ]\ [\ ]$ **Foreign Tax Information** Yes No

1	Questionnaire
Name:	SSN:
Questionnaire	
[] [] [] [] [] [] [] [] [] []	Did you have a financial interest in or signature authority over a financial account or asset located in a foreign country?  Did you receive a distribution from, or were you a grantor of, or transferor to, a foreign trust?  Did the aggregate value of your foreign accounts exceed \$10,000 at any time during the year?  Did you have any income from, or pay taxes to, a foreign country?  Did you own property in a foreign country?
Preparer Notes	
Preparer Notes	

#### **Schedule A - Itemized Deductions**

Name:	SSN:
Medical and Dental Expenses	Charitable Contributions
Health insurance premiums (paid by you)	Donations to charity Cash Noncash Amount
Long-term care premiums (you)	Church
Long-term care premiums (your spouse)	Boy or Girl Scouts
Long-term care premiums (dependents)	Goodwill
Mileage driven for medical purposes	Red Cross
Medical & dental expenses	Salvation Army
Doctor, dental, etc	United Way
Prescription medicines	Veterans
Insulin	Hospital
Glasses & contacts	University
Hearing aids	Other
Braces	Miles driven for charitable purposes
Medical equipment & supplies	Other Miscellaneous Deductions
Hospital services	Amortizable bond premiums
Laboratory services	Federal estate tax
Nursing services	Gambling losses
Other	Impairment-related work expenses
Taxes Paid	Claim repayments
State and local income taxes	Unrecovered pension investments
General sales tax (vehicle, boat, home, etc.)	Loss from other activities from Schedule K-1
Real estate taxes	Ordinary loss debt instrument
Personal property taxes	Excess deduction on termination
Other taxes (list)	Job Expenses & Certain Miscellaneous Deductions  Necessary job expenses you paid that were not reimbursed by your employer
	Safety equipment, tools, & supplies
Interest Paid	Uniforms
Home mortgage interest paid (attach Form 1098)	=
Some of your home mortgage loan was not used to buy, build, or improve your home.	Dues to professional organizations
Home mortgage interest paid to an individual	Books & subscriptions
Paid to: Name	Other
	Tax preparation rees
City, State, ZIPSSN or EIN	Other nonpersonal expenses related to taxable income
	Safe deposit box fees
Home mortgage insurance premiums	Investment expenses not entered elsewhere
Investment interest	Other
	Home equity interest · · · · · · · · · · · ·

# Kollmorgen Schlue and Zahradnik PC

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January 25, 2022

Your privacy is important to us. Read the following privacy policy.

We collect nonpublic personal information about you from various sources, including:

- \* Interviews regarding your tax situation
- \* Applications, organizers, or other documents that supply such information as your name, address, telephone number, Social Security Number, number of dependents, income, and other tax-related data
- \* Tax-related documents you provide that are required for processing tax returns, such as Forms W-2, 1099R, 1099-INT and 1099-DIV, and stock transactions

We do not disclose any nonpublic personal information about our clients or former clients to anyone, except as requested by our clients or as required by law.

We restrict access to personal information concerning you, except to our employees who need such information in order to provide products or services to you. We maintain physical, electronic, and procedural safeguards that comply with federal regulations to guard your personal information.

If you have any questions about our privacy policy, contact our office at (319)444-3285.

Sincerely,

Jennifer L Zahradnik Kollmorgen Schlue and Zahradnik PC