

Lambe, Tuter & Associates, APC  
189 South Binkley Street, Suite 201  
Soldotna, AK 99669

Dear Client:

Thank you for selecting Lambe, Tuter & Associates, APC to assist you with the preparation of your tax return(s). Please sign page 3 (*Engagement Confirmation*) of this letter and return it to this office to enable us to begin preparing your tax return. (Minor children who receive an organizer will, also, receive this letter, which is to be signed by the parent or legal guardian.) The 2021 Tax Organizer will assist you in collecting and reporting information necessary for us to properly prepare your 2021 income tax return. Please complete the appropriate organizer sections and provide supporting documentation where necessary. Please refrain from using staples to secure documents. Rather, the use of paper clips is appreciated. Filling out the questionnaire will streamline our tax preparation services. Please provide us with the following additional information:

- A copy of your 2020 tax return, if not prepared by this office
- Form(s) W-2 (wages, etc.)
- Form(s) 1099 (interest, dividends, etc.)
- Schedule(s) K-1 (income/loss from partnerships, S corporations, etc.)
- Form(s) 1098 (mortgage interest) and property tax statements
- Brokerage statements from stock, bond or other investment transactions
- Closing statements pertaining to real estate transactions
- Form(s) 1099-K (Merchant Card and Third Party Network Payments)
- All other supporting documents (schedules, checkbooks, etc.)
- Form 1095-A (Health Insurance Coverage Statements provided by Marketplace)
- Any tax notices received from the IRS or other taxing authorities
- **IRS Letter 6419 - 2021 Total Advance Child Tax Credit Payments**
- **IRS Letter 6475 - 2021 Economic Impact Payment (third stimulus issued after March 12, 2021)**

In order to have your tax return prepared by April 15, 2022, we will need to have your information in our office no later than Monday, **March 21, 2022**. We can still prepare your return if you get us your information after March 21, 2022 but we may find it necessary to extend your return. If you would like us to extend the filing date of your return, please give our office a call at 907-262-9123 by Monday, April 4, 2022. **IF YOU ELECT TO EXTEND YOUR RETURN'S FILING DATE**, be advised that all information must be submitted to our office **NO LATER THAN Monday, September 26, 2022** to ensure timely filing.

Lambe, Tuter & Associates, APC  
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Soldotna, AK 99669  
907-262-9123

**CLIENT COPY**

### ENGAGEMENT SCOPE OF SERVICES

When you submit your tax information to us, you acknowledge and agree to these terms and conditions for our services:

We will prepare your 2021 federal and state of residence (based on domicile) individual income tax returns from information you provide. We will prepare other state/local returns based on those that we prepared for you last year, along with any additional returns you specifically request. We understand that you will be responsible for the preparation of any required filings not specifically listed herein.

Your returns will be prepared from information you provide. We may ask for an explanation or clarification of some items, but we will not audit or otherwise verify your data. You are responsible for the completeness and accuracy of information used to prepare the returns. Our responsibility is to prepare the returns in accordance with applicable tax laws.

Those laws impose penalties on you for substantial understatements of tax, items in the return for which there is not substantial authority, and failure to maintain records required by law. Federal regulations impose significant penalties on us if we are associated with a return that takes a position that has no realistic possibility of success, if audited. Some items may require special disclosure to protect you and us from penalties. We will consult with you about any special disclosures we believe necessary.

We may observe opportunities for tax savings that require planning or changes in the way you handle some transactions. While an engagement for tax return preparation does not include significant tax planning services, we will share any ideas we have with you and discuss terms for any additional work that may be required to implement those ideas.

Our fees for preparing your return will be based on the time required at our standard rates for such services. Invoices are due when submitted to you. Late charges may be added to past due amounts in accordance with state law.

Your return may be selected for examination by tax agencies. In that event, we will be available to assist you in defending and explaining the return. That service is not part of our engagement to prepare your return and would be the subject of a separate agreement for services.

Sincerely,

*Lambe, Tuter & Associates, APC*

Lambe, Tuter & Associates, APC  
189 South Binkley Street, Suite 201  
Soldotna, AK 99669  
907-262-9123

ENGAGEMENT CONFIRMATION

Lambe, Tuter & Associates, APC values your business and looks forward to many years of providing quality professional services to you.

Very truly yours,

*Lambe, Tuter & Associates, APC*

I have read and agree to the engagement terms and conditions as identified in the Engagement Scope of Services.

Client: \_\_\_\_\_ Date: \_\_\_\_\_

**Sign**

Client: \_\_\_\_\_

**Print**

**Please sign and return** to the office of Lambe, Tuter & Associates, APC along with your tax documents.

2021	1040	US	Tax Organizer
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**LAMBE TUTER & ASSOCIATES APC**

**189 S. Binkley Ste 201**

**Soldotna AK 99669**

Telephone number: **907-262-9123**

Fax number: **907-262-3855**

E-mail address: **info@akcpas.com**

This tax organizer will assist you in gathering information necessary for the preparation of your 2021 tax return. Please enter all pertinent 2021 information.

NOTE: If you claim the earned income credit, please provide proof that your child is a resident of the United States. This proof is typically in the form of: school records or statement, landlord or property management statement, health care provider statement, medical records, child care provider records, placement agency statement, social service records or statement, place of worship, Indian tribal office statement, or employer statement.

NOTE: If your child is disabled, please provide one of the following forms of proof of disability: doctor statement, other health care provider statement, or social services agency or program statement.

**CLIENT INFORMATION**

Taxpayer

Spouse

First name and initial . . . . .		
Last name . . . . .		
Title/suffix . . . . .		
Social security number . . . . .		
Occupation . . . . .		
Date of birth (m/d/y) . . . . .		
Date of death (m/d/y) . . . . .		
1=blind . . . . .		
Home phone . . . . .		
Work phone . . . . .		
Work extension . . . . .		
Cell phone . . . . .		
E-mail address . . . . .		

Address	In care of . . . . .	
	Mailing address . . . . .	
	Apartment number . . . . .	
	City . . . . .	
	State . . . . .	
	ZIP code . . . . .	

**DEPENDENTS**

Dependent No.

Dependent No.

First name . . . . .		
Last name . . . . .		
Title/suffix . . . . .		
Date of birth (m/d/y) . . . . .		
Date of death (m/d/y) . . . . .		
Date of adoption (m/d/y) . . . . .		
Social security number . . . . .		
Relationship . . . . .		
Months lived at home . . . . .		

Dependent No.

Dependent No.

First name . . . . .		
Last name . . . . .		
Title/suffix . . . . .		
Date of birth (m/d/y) . . . . .		
Date of death (m/d/y) . . . . .		
Date of adoption (m/d/y) . . . . .		
Social security number . . . . .		
Relationship . . . . .		
Months lived at home . . . . .		

If any of the following items pertain to you or your spouse for 2021, please check the appropriate box and provide additional information if necessary.

### PERSONAL INFORMATION

Yes No

- Did your state of residency change?
- Did your marital status change during the year?
- Did your address change during the year? Please update the "Client information" section of this organizer.
- Could you be claimed as a dependent on another person's tax return for 2021?

### DEPENDENTS

- Were there any changes in dependents?
- Were any of your unmarried children, who might be claimed as dependents, 19 years of age or older at the end of 2021?
- Did you have any children under age 19 or full-time students under age 24 at the end of 2021 with interest and dividend income in excess of \$1,100, or total investment income in excess of \$2,200?
- Could you provide documentation to substantiate eligibility for the credit(s) and/or HOH filing status and the amount(s) of any credit(s) claimed on the return if your return is selected for audit?
- Have any of these credits been disallowed or reduced in a previous year?

### HEALTH CARE

- Did you and your dependents have health care coverage for the full year?
- Did you receive IRS document Form 1095-A (Health Insurance Marketplace Statement), if so, the Form 1095 is required to prepare your return.
- Did you open or contribute to a Health Savings Account (HSA)? If so, is it a JOINT or SINGLE plan? (Please CIRCLE ONE.)
- Did you receive a distribution from a Health Savings Account (HSA)?
- Were the distributions used for eligible medical expenses?
- Did you have a medical savings account (MSA), a Medicare + Choice MSA, or acquire an interest in an MSA or a Medicare + Choice MSA because of the death of the account holder? Or, were you a policyholder who received payments under a long-term care (LTC) insurance contract or received any accelerated death benefits from a life insurance policy?

2021

1040

US

**Miscellaneous Questions****INCOME**

Yes No

- Did you receive unreported tip income of \$20 or more in any month?
- Did you cash any Series EE U.S. savings bonds issued after 1989 and pay qualified higher education expenses for yourself, your spouse, or your dependents?
- Did you receive any disability income?
- Did you have any foreign income or pay any foreign taxes?
- Did you receive a 2021 Alaska Permanent Fund?
- Did your spouse receive a 2021 Alaska Permanent Fund?
- Did your dependents receive a 2021 Alaska Permanent Fund?
- If you are reporting self employment income, does the submitted support reflect a complete and correct record of activity?

**PURCHASES, SALES AND DEBT**

- Did you start a business or farm, purchase rental or royalty property, or acquire an interest in a partnership, S corporation, trust, or REMIC?
- Did you purchase or dispose of any business assets (furniture, equipment, vehicles, real estate, etc.), or convert any personal assets to business use?
- Did you buy or sell any stocks, bonds or other investment property in 2021?
- Did you sell or do you plan to sell any dividend generating stocks or mutual funds during the first 60 days of 2022?
- Did you purchase, sell, or refinance your principal home or second home, or did you take a home equity loan?
- Did you make any residential energy-efficient improvements or purchases involving solar, wind, geothermal or fuel cell energy sources?
- Did you have any debts canceled or forgiven?
- Does anyone owe you money which has become uncollectible?

**EDUCATION**

- Did you receive a distribution from an Education Savings Account or a Qualified Tuition Program?
- Did you, your spouse, or a dependent incur any tuition expenses that are required to attend a college, university, or vocational school? Please include Form 1098.
- Are you making payments towards a student loan debt?

2021

1040

US

**Miscellaneous Questions****RETIREMENT PLANS**

Yes No

- Did you receive a distribution from a retirement plan (401(k), IRA, SEP, SIMPLE, Qualified Plan, etc.)?
- Did you make a contribution to a retirement plan (401(k), IRA, SEP, SIMPLE, Qualified Plan, etc.)?
- Did you transfer or rollover any amount from one retirement plan to another retirement plan?
- Did you convert part or all of your traditional, SEP, or SIMPLE IRA to a Roth IRA in 2021?

**ITEMIZED DEDUCTION**

- Did you incur a loss because of damaged or stolen property?
- Do you have receipts for 2021 charitable donations? What was the total charitable giving you have documentation for? \_\_\_\_\_
- Is any portion of your home mortgage debt not used for acquisition or improvements?

**ESTIMATED TAXES**

- Did you apply an overpayment of 2020 taxes to your 2021 estimated tax (instead of being refunded)?
- If you have an overpayment of 2021 taxes, do you want the excess applied to your 2022 estimated tax (instead of being refunded)?
- Do you expect your 2022 taxable income and withholdings to be different from 2021?

**FOREIGN BANK ACCOUNTS**

- Did you 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 so, did the total balance of all accounts exceed \$10,000 at any time during the year? Please circle YES or NO.
- Did you receive a distribution from, or were you the grantor of, or transferor to, a foreign trust or did you have an interest in any foreign assets or accounts?

2021

1040

US

## Miscellaneous Questions

### CORONAVIRUS AID, RELIEF AND ECONOMIC SECURITY ACT (CARES ACT)

Yes No

- Did you receive the third economic impact payment? If so, how much? \_\_\_\_\_
- Did your spouse receive the third economic impact payment? If so, how much? \_\_\_\_\_
- Did your dependents receive the third economic impact payment? If so, how much? \_\_\_\_\_
- Did your business have any PPP loan amounts forgiven or expecting to be forgiven?
- Did you and your spouse receive any child tax credit advance payments? Please provide the IRS Letter 6419 showing the total payments received for 2021.

### MISCELLANEOUS

- Do you want to electronically file your tax return?
- Do you want to allocate \$3 to the Presidential Election Campaign Fund?
- Does your spouse want to allocate \$3 to the Presidential Election Campaign Fund?
- May the IRS discuss your tax return with your preparer?
- Was your home rented out or used for business?
- Did you work out of town for part of the year?
- Did you use your car on the job (other than to and from work)?
- Are you a member of the Armed Forces of the United States on active duty who moved pursuant to a military order related to a permanent change of station?
- Did you engage the services of any household employees?
- Were you notified or audited by either the Internal Revenue Service or the State taxing agency?
- Did you or your spouse make any gifts to an individual that total more than \$15,000, or any gifts to a trust?
- Did your bank account information change within the last twelve months? Please update the "Direct Deposit & Estimates" section of this organizer.
- Did you receive, sell, send, exchange or otherwise acquire any financial interest in virtual currency?



Please enter all pertinent 2021 information. If you have attached a government form for an item, check the box and do not enter a 2021 amount.

**WAGES, SALARIES AND TIPS**

Employer name:

<input type="checkbox"/>	_____
<input type="checkbox"/>	_____
<input type="checkbox"/>	_____
<input type="checkbox"/>	_____

2021 Amount	2020 Amount
Attach Forms W-2	

**INTEREST INCOME**

Payer name:

<input type="checkbox"/>	_____
<input type="checkbox"/>	_____
<input type="checkbox"/>	_____
<input type="checkbox"/>	_____

Attach Forms 1099-INT	

**DIVIDEND INCOME**

Payer name:

<input type="checkbox"/>	_____
<input type="checkbox"/>	_____
<input type="checkbox"/>	_____
<input type="checkbox"/>	_____

Attach Forms 1099-DIV	

**PENSIONS, IRA AND GAMBLING INCOME**

Payer name:

<input type="checkbox"/>	_____
<input type="checkbox"/>	_____
<input type="checkbox"/>	_____
<input type="checkbox"/>	_____

Attach Forms 1099-R & W-2G	

Winnings not reported on W-2G.....  
Total gambling losses.....

**OTHER GOVERNMENT FORMS - INCOME**

<input type="checkbox"/>	Form 1099-B - Sales of stock (also include transaction history) .....
<input type="checkbox"/>	Form 1099-MISC - Miscellaneous income .....
<input type="checkbox"/>	Form 1099-K - Merchant card and third party network payments .....
<input type="checkbox"/>	Form 1099-S - Sales of real estate (also include closing statements) .

Attach Forms 1099	
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<input type="checkbox"/>	Form 1099-G - State tax refunds.....
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Attach Forms 1099	
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Taxpayer:

<input type="checkbox"/>	Form SSA-1099 - Social security benefits .....
<input type="checkbox"/>	Form 1099-G - Unemployment compensation .....
<input type="checkbox"/>	Form 1099-Q (529 Plan) .....
<input type="checkbox"/>	Form 1099-QA/5498-QA (ABLE Accounts) .....

Attach Forms 1099	
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Spouse:

<input type="checkbox"/>	Form SSA-1099 - Social security benefits .....
<input type="checkbox"/>	Form 1099-G - Unemployment compensation .....
<input type="checkbox"/>	Form 1099-Q (529 Plan) .....
<input type="checkbox"/>	Form 1099-QA/5498-QA (ABLE Accounts) .....

Attach Forms 1099	
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**MISCELLANEOUS INCOME**

Taxpayer: Alimony received .....  
 Spouse: Alimony received .....

Other: \_\_\_\_\_


**RETIREMENT PLAN CONTRIBUTIONS**

Taxpayer: Traditional IRA contributions (1=maximum) .....  
 Roth IRA contributions (1=maximum) .....  
 Self-employed, SEP, SIMPLE, & qualified plan contributions (1=maximum) .....  
 Spouse: Traditional IRA contributions (1=maximum) .....  
 Roth IRA contributions (1=maximum) .....  
 Self-employed, SEP, SIMPLE, & qualified plan contributions (1=maximum) .....

	2021 Amount	2020 Amount

**OTHER GOVERNMENT FORMS - DEDUCTIONS**

Form 1098-E - Student loan interest .....  
 Form 1098-T - Tuition and related expenses .....

Attach Forms 1098	

**AFFORDABLE CARE ACT**

Form 1095-A - Health Insurance Marketplace Statement .....  
 Form 1095- B - Health Coverage .....  
 Form 1095-C - Employer-Provided Health Insurance Offer and Coverage .....

Attach Forms 1095	

**ADJUSTMENTS TO INCOME**

Taxpayer:  
 Self-employed health insurance premiums .....  
 Educator expenses .....  
 Other adjustments to income:  
 \_\_\_\_\_  
 \_\_\_\_\_


Alimony paid - Recipient name & SSN .....  
 \_\_\_\_\_  
 \_\_\_\_\_


Spouse:  
 Self-employed health insurance premiums .....  
 Educator expenses .....  
 Other adjustments to income:  
 \_\_\_\_\_  
 \_\_\_\_\_


Alimony paid - Recipient name & SSN .....  
 \_\_\_\_\_  
 \_\_\_\_\_


**MEDICAL AND DENTAL EXPENSES**

Prescription medicines and drugs .....  
 Doctors, dentists and nurses .....  
 Hospitals and nursing homes .....  
 Insurance premiums .....  
 Long-term care premiums - taxpayer .....  
 Long-term care premiums - spouse .....  
 Insurance reimbursement .....  
 Out-of-pocket lodging and transportation expenses .....  
 Number of medical miles .....  
 Other: \_\_\_\_\_  
 \_\_\_\_\_


**TAXES PAID**

State income taxes - 1/21 payment on 2020 state estimate .....

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Please enter all pertinent 2021 information.

**DIRECT DEPOSIT / ELECTRONIC PAYMENT (3)**

1=direct deposit of federal tax refund into bank account .....		
1=electronic payment of balance due .....		
1=electronic payment of estimated tax .....		

**BANK INFORMATION**

Name of Bank	Percent to Deposit (xx.xx)	Routing Number	Account Number	Type of Account (Table 1)	Type of Invest. (Table 2)

**2021 ESTIMATED TAX / 1040-ES (6)**

**Federal**

	Amount Paid	Date Paid	TS	2021 Voucher Amount
Overpayment applied from 2020 .....				
1st quarter payment .....				
2nd quarter payment .....				
3rd quarter payment .....				
4th quarter payment .....				
Additional Estimated Tax Payments				
Paid with extension .....				
Former spouse SSN if joint estimates .....				

**State**

	Amount Paid	Date Paid	TS	2021 Voucher Amount
Overpayment applied from 2020 .....				
1st quarter payment .....				
2nd quarter payment .....				
3rd quarter payment .....				
4th quarter payment .....				
Additional Estimated Tax Payments				
Paid with extension .....				

**1**      **Type of Account**

1 = Savings  
2 = Checking

**2**      **Type of Investment**

1 = Checking or savings (default)	6 = Coverdell savings account (ESA)
2 = Taxpayer's IRA (next year limits)	7 = Other
3 = Spouse's IRA (next year limits)	8 = Taxpayer's IRA (current year limits)
4 = Health savings account (HSA)	9 = Spouse's IRA (current year limits)
5 = Archer MSA	