ANDERSON, LARKIN & CO. P.C.
Certified Public Accountants
"Your Success Is Our Business."

Kenneth E. Crosser, CPA
April D. Crosser, CPA
Michael J. Podliska, CPA
Alexander T. Barr, CPA
Adam L. Sturm, CPA

Dear Client:

We hope you had a wonderful year! It is that time of the year again! It will be our pleasure to assist you in the preparation and filing of your federal and state income tax returns.

Enclosed is the income tax data sheet which should be completed, and the Audit Protection Plan for you to sign and accept or decline. Please return both to our office when you bring your information.

There are many ways for our office to obtain tax information from you. You are welcome to call us at 641-684-5489 and schedule an appointment to go over your tax information. If you do not need a face-to-face appointment, you may drop off, mail in, email, or utilize the drive-thru window, located on the west side of our building, to drop off your information. We also have a secure portal on our website that you can upload and receive your documents through. If this is something you are interested in, please contact our office to set that up. We will contact you with any questions that come up. Please make sure we have your current contact information. We have partnered with SafeSend Returns which is a secure portal that allows us to review your return with you remotely. We will also be sending you your copy of the tax return through this portal, so you will have easy access to it throughout the year. There have been a lot of changes in the tax law in the last couple of years so it is possible we will not be able to finish all work during your appointment. We will email your final copy and signature page to you for review.

Our tax season office hours are as follows:

January 2, 2025, through April 15, 2025

Monday through Friday, 8:00 a.m. to 6:00 p.m.

Saturday, 8:00 a.m. to 12:00 p.m.

We also have a drop box by the front door for after hours. We look forward to serving you!

Very truly yours,

ANDERSON, LARKIN & CO., P.C.

221 N. Wapello Street • Ottumwa, Iowa 52501 • (641) 684-5489

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Re: Life Insurance: Important Review of coverages and beneficiaries needed.

Dear Client,

It is common knowledge that life changes. However, what may not be common knowledge is the need to have your life insurance reviewed on a regular basis. Even subtle changes in your personal life could have a dramatic impact on the results you expected when you first put your life insurance policy into force.

A careful life insurance checkup might indicate that your policy requires no modification, because it still provides adequate protection to meet your current and future financial objectives. On the other hand, a checkup may also suggest that your current coverage is no longer meeting your needs. In that case, we can show you options suitable for your situation, such as modifying an existing policy or supplementing it with additional coverage. Primarily, we want to make sure that you have the coverage to protect those that are important to you, as well as assist you with meeting future financial goals.

April Crosser, CPA and Ken Crosser, CPA are both licensed for life insurance. We would be happy to review your personal and or business life insurance portfolio as soon as possible. A life insurance checkup is one of the easiest and most important things you can do to help ensure that you and your family or business have the financial security you deserve.

Please call today to learn if your life insurance policy is keeping up with your changing life needs.

Sincerely,

Anderson, Larkin & Co. P.C.

221 N. Wapello Street • Ottumwa, Iowa 52501 • (641) 684-5489

ANDERSON, LARKIN & CO., P.C.
2024 AUDIT PROTECTION PLAN FOR
INDIVIDUAL INCOME TAX RETURNS

The number of notices generated by the IRS and State Departments of Revenue and Finance to taxpayers has increased dramatically. This is the result of their increasing ability to use computers to crosscheck information from a variety of sources. This has allowed government agencies to generate an overwhelming number of questions for taxpayers in addition to nuisance mail. Many of the notices are incorrect; however, it still takes a considerable amount of time to respond to the notices and determine their validity. As you may already know the resolution of these inquires and audits can be costly to you as a taxpayer.

To alleviate this cost burden, we are offering the 2024 Audit Protection Plan (For individual income tax returns only). For a fee of $120, we will handle all correspondence to resolve letters of inquiry relating to your 2024 federal and state individual tax returns on your behalf at no charge.

If your 2024 federal or state income tax returns should be audited, Anderson, Larkin & Co., P.C. will represent you up to and including the appeals level at no charge.

Whenever you receive an audit notice or letter of inquiry from the federal or state government relating to your 2024 income tax returns, simply send it to us and authorize us to represent you. If you chose not to purchase audit protection, Anderson, Larkin & Co. P.C. will still represent you, but there will be a fee.

Our audit protection plan could save you a substantial amount of money in terms of services and fees. This is optional, so regardless if you do or do not take advantage of the plan, as a valued client, we will still service these audits and inquires. However, if we do provide the services specified above and you have not purchased the 2024 Audit Protection Plan, you will be charged based on our standard hourly rates for our services. Fees for representation at an average audit will generally total $1,000 to $10,000.

HOW TO PURCHASE THE PLAN:

To elect the plan simply sign this form and check the accept box, and return it to Anderson, Larkin & Co. P.C. If you do not wish to take advantage of this plan simply check the decline box, and sign and return the form. This ensures that all clients have been informed of the 2024 Audit Protection Plan.

Upon accepting the plan you will see a $120 fee for the Audit Protection Plan on your next invoice. When you pay the $120, you are automatically enrolled in the plan. Your payment constitutes a binding agreement for this service. The deadline for enrolling this plan is October 15, 2025.

Signature ____

Print Name ____

Accept ☐

Decline ☐

Please note: You are, of course, responsible for maintaining adequate records and making them available to us so that we can properly represent you before the taxing authorities. Similarly, you are liable for any additional taxes, penalties or interest that may eventually be assessed. This Audit Protection Plan applies only to individual income tax returns for 2024 and does not cover corporate, partnership, payroll or other tax returns.

ANDERSON, LARKIN & CO. P.C

221 NORTH WAPELLO ST OTTUMWA, IA 52501
ACROSS FROM SONIC
TELEPHONE 641-684-5489
EMAIL FRONTOFFICE@ANDERSONLARKIN.COM

2024 INCOME TAX INFORMATION SHEET

This data sheet will aid you in organizing your federal and state income tax information. The list is by no means all-inclusive; therefore, any unusual income or expenditures should be brought to our attention. If you think any event or activity might have a possible influence on your tax return, tell us about it so we may consider it.

I understand that I am responsible for the accuracy of the information contained on these forms and other information provided to you. I further understand that the responsibility of Anderson, Larkin & Co. P.C. is limited to information contained herein or any other data supplied by me. I further maintain that a careful review of the completed tax return will be made by me before the return is filed. By signing the completed tax returns, I am confirming these conditions.

PERSONAL INFORMATION

TAXPAYER		SPOUSE	
Name	____________	Name	____________
S.S. Number	____________	S.S. Number	____________
Occupation	____________	Occupation	____________
Date of Birth	____________	Date of Birth	____________
Cellphone No.	____________	Cellphone No.	____________
E-Mail Address	____________	E-Mail Address	____________

Address____________________ **City**____________ **State**____ **Zip Code** ______
School District ____________________ **County** __________________

Information Sheet Preference **Mail** ☐ **Email** ☐ **None** ☐

IF I get a refund from Federal or State, I would like:

☐ **A mailed check** ☐ **DIRECT DEPOSIT into bank account listed below**

IF I owe Federal or State, I would like:

☐ **To write a check** ☐ **AUTO WITHDRAWAL from bank account listed below**

I would like to receive my tax return by:

☐ **SafeSend*** ☐ **Paper Copy**

*****For SafeSend returns we will need email addresses and phone numbers for taxpayer and spouse, if applicable. This is how you will receive notifications, and your return. You will NOT receive a paper copy of your return or workpapers. This is a paperless system.**

****PAYMENTS WILL BE PROCESSED WHEN RETURN IS READY TO BE PICKED UP OR SENT***
When you provide us with information you are authorizing Anderson, Larkin & Co. P. C. to charge your checking/savings account for your Tax Preparation Fee.

Bank Account: ☐ **Checking** ☐ **Savings**
Routing Number: ____________________
Account Number: ____________________
Signature: ______________________________

***If you prefer to pay cash or by credit card please let us know and provide credit card information if applicable.**

ITEMIZED DEDUCTIONS

Medical and Dental Expenses

Medicare Insurance	$ ________
*Other **Medical Insurance**	________
*Nursing Home Insurance	________
Medical Miles	________
Medical Expenses	________

Interest You Paid

Home Mortgage (Form 1098)	________
Other Home Mortgage	________
Investment Interest	________
Private Mortgage Insurance	________

Charitable Contributions

Total Paid Cash or Check	$ ________
Contributions greater than $250 must be supported by a receipt	
Non-Cash Contributions	________
(If over $500 Attach Receipts) (If $5,000 or more Attach Appraisal)	

Taxes You Paid

Real Estate Taxes	________
Car Registration	________

Gambling Losses ________

*only with gambling income

Note: Home Equity Interest is now only deductible if you used the loan funds on your home.

K - 12 EDUCATOR EXPENSES

Educator expenses of $300 or more?

ESTIMATE INFORMATION

List payments of 2024 estimated income tax. Include the fourth payment which is not due until January 2025

Federal Date	Federal Amount	State Date	State Amount
________	$ ________	________	$ ________
________	$ ________	________	$ ________
________	$ ________	________	$ ________
________	$ ________	________	$ ________

Did you pay any additional tax on any prior returns? $ ________

Did you buy, sell, or exchange any virtual currency this year (ex:bitcoin)? YES NO

Do you have financial interest or signature or other authority over any foreign financial bank accounts with an aggregate YES NO

Are you a volunteer firefighter, EMS or Reserve Peace officer? YES NO
If yes, please obtain a written statement from your supervisor.

RESIDENTIAL ENERGY CREDITS

Qualified solar, wind, solar water, fuel cell, and geothermal energy system costs for your main home located in the United States paid during the year. $ ________

Qualified energy efficient improvements to the home: Exterior doors, windows, skylights, insulation, central air, water heater, furnaces, boilers, heat pumps, biomass stove, boiler, and home energy audits for your main home located in the United States paid during the year. Itemize what expense was for. $ ________

IRA(s):

You	Traditional	$ ________	Roth	$ ________
Spouse	Traditional	$ ________	Roth	$ ________

COLLEGE EDUCATION TAX CREDITS AND DEDUCTIONS

Name	Tuition	Books and Materials	Check one of the following: First 4 Years	4+ Years
	$	$		

STUDENT LOAN INTEREST

Please attach Form 1098-E. Limited to interest required to be paid by taxpayer. $______________

Dependent Information

Dependents (We must have social security numbers for all dependents).

Name	Date of Birth	S. S. Number	# of months lived w/ you this year	Can you claim them?

If any of the above dependents did not live with you due to divorce or separation, you must provide a Form 8332 (Custodial Parent Release Form)

CHILD CARE CREDIT

Work Related Child and Dependent Care Expenses. List Persons or Organizations Providing Care:

Name	Address	(SSN or EIN)	Amount Paid

IOWA DEDUCTIONS

Iowa Tuition and books (Registration, Activity fees) $______________
(K-12 only) Separate Amounts Per Child

Early Childhood Dev. Credit Ages 3-5 (Preschool, books, supplies & activities) Per Child $______________

If claiming dependents:

* Are you single, divorced or legally separated, married, or married but spent the last 6 months separated?
* Is the person your child, brother, sister, any of their descendants, or eligible foster child?
* Do you provide more than 50% of the cost of keeping up your home that the child lives in?

ADDITIONAL INFORMATION

____

____

If you have a self-employed business or rental activity our office has worksheets we will provide you if requested.