2013 1040 US Topical Index

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ORGANIZER Page 2 Tax Organizer 2013 1040 US **Tax Return Appointment** MASLER & ASSOCIATES 1 Jenner Suite 230 **IRVINE, CA 92618** Date: Telephone number: (949) 857-0404 Time: (949) 266-8019 Fax number: Location: sharon@maslercpa.com E-mail address: This tax organizer will assist you in gathering information necessary for the preparation of your 2013 tax return. Please enter all pertinent 2013 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 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..... Work extension..... E-mail address In care of Street address.... Apartment number. Address State ZIP code..... **DEPENDENTS** Dependent No. Dependent No. First name Last name..... Title/suffix..... Date of birth (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) Social security number... Relationship..... Months lived at home . . .

ORGANIZER Page 3 Tax Organizer 2013 1040 US Please enter all pertinent 2013 information. If you have attached a government form for an item, check the box and do not enter a 2013 amount. WAGES, SALARIES AND TIPS Employer name: 2013 Amount 2012 Amount Attach Forms W-2 **INTEREST INCOME** Payer name: Attach Forms 1099-INT **DIVIDEND INCOME** Payer name: Attach Forms 1099-DIV PENSIONS, IRA AND GAMBLING INCOME Payer name: Attach Forms 1099-R & W-2G Winnings not reported on W-2G..... OTHER GOVERNMENT FORMS - INCOME Form 1099-B - Sales of stock (also include transaction history). Attach Forms 1099 Form 1099-K - Merchant card and third party network payments. . . . Form 1099-S - Sales of real estate (also include closing statements) Attach Forms 1099 Form 1099-G - State tax refunds Taxpayer: Form SSA-1099 - Social security benefits..... Attach Forms 1099 Spouse: Form SSA-1099 - Social security benefits.... Attach Forms 1099 MISCELLANEOUS INCOME Taxpayer: Alimony received.....

ORGANIZER Page 4 US 2013 1040 Tax Organizer RETIREMENT PLAN CONTRIBUTIONS 2013 Amount 2012 Amount Taxpayer: Traditional IRA contributions (1=maximum)..... Self-employed, SEP, SIMPLE, & qualified plan contributions (1=maximum)..... Traditional IRA contributions (1=maximum)..... Spouse: Roth IRA contributions (1=maximum)..... Self-employed, SEP, SIMPLE, & qualified plan contributions (1=maximum)..... OTHER GOVERNMENT FORMS - DEDUCTIONS Form 1098-E - Student loan interest Attach Forms 1098 Form 1098-T - Tuition and related expenses..... 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..... Insurance premiums..... Long-term care premiums - taxpayer. Long-term care premiums - spouse..... Other: **TAXES PAID** State income taxes - 1/13 payment on 2012 state estimate..... State income taxes - paid with 2012 state return..... State income taxes - paid for prior years and/or to other states.....

ORGANIZER Page 5 Tax Organizer 2013 1040 US TAXES PAID (continued) 2013 Amount 2012 Amount City/local income taxes - 1/13 payment on 2012 city/local estimate...... City/local income taxes - paid with 2012 city/local extension..... Use taxes paid on 2013 purchases..... Use taxes paid on 2012 state return Sales tax on autos not included above..... Real estate taxes - principal residence..... Real estate taxes - property held for investment..... Foreign income taxes..... **Attach Tax Notice** Personal property taxes (including automobile fees in some states) . . . INTEREST PAID Home mortgage interest and points paid: Attach Forms 1098 Home mortgage interest not on Form 1098 (include name, SSN, & address of payee): Points not reported on Form 1098: Mortgage insurance premiums on post 12/31/06 contracts..... Investment interest (interest on margin accounts): Passive interest CASH CONTRIBUTIONS NOTE: No deduction is allowed for cash or check contributions unless the donor maintains a bank record, or a written communication from the donee, showing the name of the organization, contribution date(s), and contribution amount(s). Volunteer expenses (out-of-pocket)..... Number of charitable miles..... NONCASH CONTRIBUTIONS NOTE: No deduction is allowed for contributions of clothing and household items that are not in good used condition or better, in addition, a deduction for any item with minimal monetary value may be denied. MISCELLANEOUS DEDUCTIONS Tax return preparation fee Investment expenses Estate tax, section 691(c)..... Unreimbursed employee expenses: Other:

ORGANIZER				Page	6
2013	1040	US	Client Information	1	

MASLER & ASSOCIATES

1 Jenner Suite 230 **IRVINE, CA 92618**

Telephone number: (949) 857-0404 Fax number: (949) 266-8019

E-mail address: sharon@maslercpa.com **Tax Return Appointment**

Date: Time: Location:

This tax organizer will assist you in gathering information necessary for the preparation of your 2013 tax return. Please add, change, or delete information as appropriate.

CLIENT INFORMATION

Eiling	Filing status (table)
Filing Status	1=married filing separate and lived with spouse
	Year spouse died, if qualifying widow(er) (2011 or 2012)
	First name and initial
	Last name
	Title/suffix
Taxpayer	Social security number
тахрауст	Occupation
	Date of birth (m/d/y)
	Date of death (m/d/y)
	1=blind
	First name and initial
	Last name
	Title/suffix
Spouse	Social security number
Spouse	Occupation
	Date of birth (m/d/y)
	Date of death (m/d/y)
	1=blind
	In care of
	Street address
Address	Apartment number
/ ladi ess	City
	State
	ZIP code
Foreign	Region
Foreign Address	Postal code
	Country

Filing Status

- 1 = Single 2 = Married filing joint 3 = Married filing separate 4 = Head of household 5 = Qualifying widow(er)

1 p2

2013 1040 US Dependents

Please add, change or delete information for 2013.

DEPENDENTS

First name. Last name. Title/suffix. Date of birth (m/d/y).		Dependent	
Title/suffix Date of birth (m/d/y)			
Date of birth (m/d/y).			Type of Dependent
-			
Cooled accomits accomits an			1 = Child living w/taxpayer
Social security number			2 = Child not living w/taxpayer 3 = Dependent other than child
Relationship			4 = Head of household only, not a dependent
Months lived at home			5 = Earned income credit only,
Type of dependent (see table)			not a dependent
Earned income credit (see table)			
Claimed by: 1=taxpayer, 2=spouse			
	ependent	Dependent	Earned Income Credit
First name			
Last name			1 = When applicable (default) 2 = Student age 19 to 23
Title/suffix			3 = Disabled
Date of birth (m/d/y)			4 = Force 5 = Suppress
Social security number			5 = Suppliess
Relationship			
Months lived at home			
Type of dependent (see table)			NOTE: If you claim the earned income credit, please provide
Earned income credit (see table)			proof that your child is a res-
Claimed by: 1=taxpayer, 2=spouse			ident of the U.S. This proof is typically in the form of:
	ependent	Dependent	
First name			1. School records or statement 2. Landlord or property man-
Last name			agement statement
Title/suffix			3. Health care provider statement
Date of birth (m/d/y)			4. Medical records
Social security number			5. Child care provider records6. Placement agency statement
Relationship			Social service records or
Months lived at home			statement 8. Place of worship statement
Type of dependent (see table)			Indian tribe office statement
Earned income credit (see table)			10. Employer statement
Claimed by: 1=taxpayer, 2=spouse			
	ependent	Dependent	
First name		·	NOTE: If your child is disabled, please provide one of the fol-
Last name			lowing forms of proof of disa-
Title/suffix			bility:
Date of birth (m/d/y)			1. Doctor statement
Social security number			 2. Other health care provider statement
Relationship			Social services agency or
Months lived at home			program statement
Type of dependent (see table)			
Earned income credit (see table)			

2

ORGANIZER			Page 9
2013	1040	US	Miscellaneous Questions
	If ar	ny of the fo app	ollowing items pertain to you or your spouse for 2013, please check the ropriate box and provide additional information if necessary.
YES	NO		ONAL INFORMATION marital status change during the year?
		Did your	address change during the year?
		Could you	u be claimed as a dependent on another person's tax return for 2013?
			NDENTS re any changes in dependents?
		Were any older if st	of your unmarried children who might be claimed as dependents 19 years of age or older (or 24 years or tudent) at the end of 2013?
		Did you h income ir	have any children under age 19 or full-time students under age 24 at the end of 2013, with interest and dividend in excess of \$1,000, or total investment income in excess of \$2,000?
		INCON	ME eceive unreported tip income of \$20 or more in any month?
		Did you c yourself,	ash any Series EE U.S. savings bonds issued after 1989 and pay qualified higher education expenses for your spouse, or your dependents?
		Did you re	eceive any disability income?
		Did you h	nave any foreign income or pay any foreign taxes?
		PURC	HASES, SALES AND DEBT
			start a business or farm, purchase rental or royalty property, or acquire an interest in a partnership, ation, trust, or REMIC?
			ourchase or dispose of any business assets (furniture, equipment, vehicles, real estate, etc.), or convert any assets to business use?
		Did you b	ouy or sell any stocks, bonds or other investment property in 2013?
		Did you p	ourchase, sell, or refinance your principal home or second home, or did you take a home equity loan?
			nake any residential energy-efficient improvements or purchases involving solar, wind, geothermal or fuel
		Did you h	nave any debts cancelled or forgiven?
		Does any	one owe you money which has become uncollectible?

ORGANIZER			Page 10							
2013	1040	US	Miscellaneous Questions (continued)							
If any of the following items pertain to you or your spouse for 2013, please check the appropriate box and provide additional information if necessary.										
YES	NO	RETIREMENT PLANS								
		Did you re	eceive a distribution from a retirement plan (401(k), IRA, SEP, SIMPLE, Qualified Plan, etc.)?							
		Did you m	ake a contribution to a retirement plan (401(k), IRA, SEP, SIMPLE, Qualified Plan, etc.)?							
		Did you tr	ansfer or rollover any amount from one retirement plan to another retirement plan?							
		EDUC								
		-	eceive a distribution from an Education Savings Account or a Qualified Tuition Program?							
		Did you, y vocationa	rour spouse, or a dependent incur any tuition expenses that are required to attend a college, university, or school?							
			ZED DEDUCTIONS							
		-	cur a loss because of damaged or stolen property?							
		Did you w	ork out of town for part of the year?							
		Did you u	se your car on the job (other than to and from work)?							
			ATED TAXES oply an overpayment of 2012 taxes to your 2013 estimated tax (instead of being refunded)?							
			e an overpayment of 2013 taxes, do you want the excess applied to your 2014 estimated tax (instead of being							
		refunded)	?							
		Do you ex	spect your 2014 taxable income and withholdings to be different from 2013?							
			LLANEOUS ant to allocate \$3 to the Presidential Election Campaign Fund?							
		Does your	spouse want to allocate \$3 to the Presidential Election Campaign Fund?							
		May the II	RS discuss your tax return with your preparer?							
		Did you ha	ave an interest in or signature or other authority over a financial account in a foreign country, such as a bank securities account, or other financial account?							

ORGANIZER Page 11 Miscellaneous Questions (continued) 2013 1040 US If any of the following items pertain to you or your spouse for 2013, please check the appropriate box and provide additional information if necessary. MISCELLANEOUS (continued) NO YES Did you receive a distribution from, or were you the grantor of, or transferor to, a foreign trust? Was your home rented out or used for business? Did you have a medical savings account (MSA), a Medicare Advantage MSA, or acquire an interest in an MSA or a Medicare Advantage 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? Did you incur moving expenses due to a change of employment? 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 \$14,000, or any gifts to a trust?

ORGANIZER Page 12 2013 1040 US **Miscellaneous Questions** If any of the following items pertain to you or your spouse for 2013, please check the appropriate box and provide additional information if necessary. Did your marital status change during the year? Did your address change during the year? Could you be claimed as a dependent on another person's tax return? Were there any changes in dependents? Did you receive unreported tip income of \$20 or more in any month? Did you receive any disability income? Did you buy or sell any stocks, bonds or other investment property? 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 receive a distribution from or make a contribution to a retirement plan (401(k), IRA, etc.)? Did you transfer or rollover any amount from one retirement plan to another? Did you convert part or all of your traditional/SEP/SIMPLE IRA to a Roth IRA? Did you, your spouse, or a dependent incur any tuition expenses that are required to attend a college, university, or vocational school? Did you incur a loss because of damaged or stolen property? Did you use your car on the job (other than to and from work)? May the IRS discuss your tax return with your preparer? Was your home rented out or used for business? Were you notified or audited by either the IRS or the State taxing agency?

ORGANIZER Page 13 Direct Deposit & Estimates (Form 1040 ES) 2013 1040 US 3, 6 Please enter all pertinent 2013 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** Percent to Type of Type of Deposit Account Invest. Name of Bank **Routing Number Account Number** (Table 1) (Table 2) $(x\dot{x}.xx)$ 2013 ESTIMATED TAX / 1040-ES (6) 2013 **Federal Amount Paid** Date Paid Voucher Amount TS Overpayment applied from 2012..... 3rd quarter payment..... 4th quarter payment. Additional Estimated Tax Payments Paid with extension..... 2013 State **Amount Paid Date Paid Voucher Amount** Overpayment applied from 2012..... 2nd quarter payment 3rd quarter payment..... 4th quarter payment. Additional Estimated Tax Payments Paid with extension..... 2 Type of Account Type of Investment Checking or savings (default) Taxpayer's IRA (next year limits) Spouse's IRA (next year limits) Health savings account (HSA) Archer MSA 6 = Coverdell savings account (ESA) 7 = Other 8 = Taxpayer's IRA (current year limits) 9 = Spouse's IRA (current year limits) 1 = Savings 2 = Checking

<u>Page</u> 14 ORGANIZER Direct Deposit & Estimates (Form 1040 ES) (cont.) 2013 1040 US 7.1 Please enter all pertinent 2013 information. APPLICATION OF 2013 OVERPAYMENT (7.1) If you have an overpayment of 2013 taxes, do you want the excess refunded? or applied to 2014 estimate?... Other (please explain): 2014 ESTIMATED TAX INFORMATION Do you expect your 2014 taxable income to be different from 2013? Yes If "yes" explain any differences in income, deductions, dependents, etc.: Do you expect your 2014 withholding to be different from 2013?..... Yes If "yes" explain any differences: 7.1

ORGANIZER

Wages, Pensions, Gambling Winnings 10, 13.1, 13.2 2013 1040 US Please enter all pertinent 2013 amounts & attach all W-2, W-2G and 1099-R forms. Last year's amounts are provided for your reference. WAGES, SALARIES, TIPS (10) 1=retirement Tax Withheld Wages, Tips, plan (Box 13) Other 2012 Social No. Name of Employer (Box c) Federal Medicare State Local Compensation Wages Security (Box 4) (Box 2) (Box 6) (Box 17) (Box 19) 1=spouse (Box 1) PENSIONS, IRA DISTRIBUTIONS (13.1) Distribution code #2 Tax Withheld Value of Distribution code #1 Gross Taxable all IRAs 2012 No. Name of Payer Distribution Amount I=IRA/SEP/SIMPLE Federal State at Distribution (Box 2a) (Box 1) (Box 4) (Box 12) 12/31/13 =spouse GAMBLING WINNINGS (W-2G) (13.2) Tax Withheld **Gross Winnings** 2012 No. Name of Payer 1=spouse Winnings (Box 1) Federal (Box 4) State (Box 15) GAMBLING LOSSES & WINNINGS (NON W-2G) (13.2)2013 Amount 2012 Amount Total gambling losses Winnings not reported on Form W-2G.....

10, 13.1, 13.2

						_
2013	1040	US	Interest & Dividend Income	11	. 12	<u>)</u>

Please enter all pertinent 2013 amounts & attach all 1099-INT, 1099-OID and 1099-DIV forms. Last year's amounts are provided for your reference.

INTEREST INCOME (11)

				Interest Income	:	Tax-Exem	pt Interest	Farly	
No.	Name of Payer (also enter SSN & address for seller-financed mortgage)	1=taxpayer 2=spouse	Banks, S&Ls, C/Us, etc. (Box 1)	Seller- Financed Mtg. (Box 1)	U.S. Bonds, T-Bills (Box 3)	Total Municipal Bonds	In-state Municipal Bonds	Early Withdrawal Penalty (Box 2)	2012 Interest

DIVIDEND INCOME (12)

				Dividend	Income		Tax-Exem	pt Interest		
No.	Name of Payer		Total Ordinary Dividends (Box 1a)	Qualified Dividends (Box 1b)	Total Capital Gain Distrib. (Box 2a)	U.S. Bonds (% or amt.)	Total Municipal Bonds	In-state Muni-bonds (% or amt.)	Foreign Tax Paid (Box 6)	2012 Dividends

2013	1040	US	Miscellaneous Income	14.1

Please enter all pertinent 2013 amounts and attach all 1099-MISC, SSA-1099, and RRB-1099 forms. Last year's amounts are provided for your reference.

MISCELLANEOUS INCOME	2013 A	mount	2012 Amount		
	Taxpayer	Spouse	Taxpayer	Spouse	
Social security benefits (SSA-1099, box 5)				-	
Medicare premiums paid (SSA-1099)					
Tier 1 RR retirement benefits (RRB-1099, box 5)					
1=lump-sum election for SS benefits					
Alimony received					
Taxable scholarships and fellowships					
Jury duty pay					
Household employee income not on W-2					
Excess minister's allowance					
Alaska permanent fund dividends					
Income from rental of personal property					
Income subject to S/E tax:					
, i					
Other income (1099-MISC, box 3, 8)					
TAX WITHHELD (not entered elsewhere)					
Federal income tax withheld					
State income tax withheld					
Local income tax withheld					
Local income tax withheld					

ORGANIZER				Page I
2013	1040	US	State & Local Tax Refunds / Unemployment Compensation	14.2

Please add, change or delete 2013 information as appropriate. Be sure to attach all 1099-G forms.

STATE AND LOCAL TAX REFUNDS /

		2013 1099-G Amount	
	Name of payer		
	1=spouse.		
	Unemployment compensation:		
	Total received (Box 1)		
	2013 Overpayment repaid		
	State and local refunds:		
	State and local income tax refund, credit or offsets (Box 2)		
	1=city or local income tax refund		
	I =		
	Tax year for box 2 if not 2012 (Box 3)		
No.	Federal income tax withheld (Box 4)		
NO.	RTAA payments (Box 5)		
	Taxable grants:		
	Federal taxable amount (Box 6)		
	State taxable amount, if different		
	Farm amounts:		
	Agriculture payments (Box 7)		
	1=agriculture payments are from conservation reserve program		
	Market gain (Box 9)		
	Number of farm		
	1=box 2 is trade or business income (Box 8)		
	State income tax withheld (Box 11)		
	,		
	Name of payer		
	1=spouse		
	Unemployment compensation:		
	Total received (Box 1)		
	2013 Overpayment repaid		
	State and local refunds:		
	State and local income tax refund, credit or offsets (Box 2)		
	T		
	1=city or local income tax refund		
	1=city or local income tax refund		
No.	1=city or local income tax refund		
No.	1=city or local income tax refund Tax year for box 2 if not 2012 (Box 3). Federal income tax withheld (Box 4). RTAA payments (Box 5).		
No.	1=city or local income tax refund		
No.	1=city or local income tax refund Tax year for box 2 if not 2012 (Box 3). Federal income tax withheld (Box 4). RTAA payments (Box 5). Taxable grants: Federal taxable amount (Box 6).		
No.	1=city or local income tax refund Tax year for box 2 if not 2012 (Box 3). Federal income tax withheld (Box 4). RTAA payments (Box 5). Taxable grants: Federal taxable amount (Box 6). State taxable amount, if different.		
No.	1=city or local income tax refund Tax year for box 2 if not 2012 (Box 3). Federal income tax withheld (Box 4). RTAA payments (Box 5). Taxable grants: Federal taxable amount (Box 6). State taxable amount, if different. Farm amounts:		
No.	1=city or local income tax refund Tax year for box 2 if not 2012 (Box 3). Federal income tax withheld (Box 4). RTAA payments (Box 5). Taxable grants: Federal taxable amount (Box 6). State taxable amount, if different. Farm amounts: Agriculture payments (Box 7).		
No.	1=city or local income tax refund Tax year for box 2 if not 2012 (Box 3). Federal income tax withheld (Box 4). RTAA payments (Box 5). Taxable grants: Federal taxable amount (Box 6). State taxable amount, if different. Farm amounts: Agriculture payments (Box 7). 1=agriculture payments are from conservation reserve program.		
No.	1=city or local income tax refund Tax year for box 2 if not 2012 (Box 3). Federal income tax withheld (Box 4). RTAA payments (Box 5). Taxable grants: Federal taxable amount (Box 6). State taxable amount, if different. Farm amounts: Agriculture payments (Box 7). 1=agriculture payments are from conservation reserve program. Market gain (Box 9).		
No.	1=city or local income tax refund Tax year for box 2 if not 2012 (Box 3). Federal income tax withheld (Box 4). RTAA payments (Box 5). Taxable grants: Federal taxable amount (Box 6). State taxable amount, if different. Farm amounts: Agriculture payments (Box 7). 1=agriculture payments are from conservation reserve program. Market gain (Box 9). Number of farm		
No.	1=city or local income tax refund Tax year for box 2 if not 2012 (Box 3). Federal income tax withheld (Box 4). RTAA payments (Box 5). Taxable grants: Federal taxable amount (Box 6). State taxable amount, if different. Farm amounts: Agriculture payments (Box 7). 1=agriculture payments are from conservation reserve program. Market gain (Box 9).		

14.2

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2013	1040	US	Education Distributions (ESA's and QTP's)	14.3
2013	1070	03		17.5

Please enter all pertinent 2013 amounts and attach all 1099-Q forms. Enter qualified education expenses below that are not entered elsewhere. Last year's amounts are provided for your reference.

ESA S AI	ND QTP'S (Form 1099-Q)	2013 Amount	2012 Amount
	Name of payer		
	1=spouse.		
	Qualified expenses:		
	Higher education (net of nontaxable benefits).		
	Elementary & secondary education (net of nontaxable benefits).		
	Form 1099-Q:		
No.	Gross distributions (Box 1)		
	Earnings (Box 2) Basis (Box 3).		
	Rollover: 1=nontaxable, 2=taxable (Box 4)		
	Distribution type: 1=private 529, 2=state 529, 3=Coverdell ESA (Box 5)		
	ESA's only:		
	2013 contributions to this ESA		
	Value of this account at 12/31/13 (plus outstanding rollovers)		
	Basis in this ESA as of 12/31/12		
	Dasis III tilis ESA as 01 12/3/1/2		
	Name of payer		
	1=spouse.		
	Qualified expenses:		
	Higher education (net of nontaxable benefits)		
	Elementary & secondary education (net of nontaxable benefits).		
	Form 1099-Q:		
NI -	Gross distributions (Box 1)		
No.	Earnings (Box 2)		
	Basis (Box 3).		
	Rollover: 1=nontaxable, 2=taxable (Box 4)		
	Distribution type: 1=private 529, 2=state 529, 3=Coverdell ESA (Box 5)		
	ESA's only:		
	2013 contributions to this ESA		
	Value of this account at 12/31/13 (plus outstanding rollovers) Basis in this ESA as of 12/31/12		
	Dasis III tilis E.SA as 0i 12/31/12.		
	Name of payer		
	1=spouse.		
	Qualified expenses:		
	Higher education (net of nontaxable benefits)		
	Elementary & secondary education (net of nontaxable benefits).		
	Form 1099-Q:		
	Gross distributions (Box 1)		
No.	Earnings (Box 2)		
	Basis (Box 3)		
	Rollover: 1=nontaxable, 2=taxable (Box 4)		
	Distribution type: 1=private 529, 2=state 529, 3=Coverdell ESA (Box 5)		
	ESA's only:		
	2013 contributions to this ESA		
	Value of this account at 12/31/13 (plus outstanding rollovers)		
	Basis in this ESA as of 12/31/12		

14.3

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)13	1040	US	Business Income (Sche	dule C)	No.	16
	Please e	enter all per	tinent 2013 amounts. Last year's a	mounts are provided for y	our reference.	
GEN	NERAL IN	IFORMA1	TON			
			Form 1040			
			m Form 1040			
-						
			0			
Emplo	yer identifica	tion number				
Other	accounting m	nethod				
			accrual			
	=		ver cost/market, 3=other.			
1=spo	use, 2=joint .					
			usiness			
			will you file all required Form(s) 1099: 1=yes, 2=no t tax			
1=did	not "material	ly participate".				
-			erial income producing factor			
1=sing	gle member li	mited liability	company			
INC	OME			2013 Amount	2012 Amou	ınt
	-		99-MISC, box 7)			
	income:	11003			I	
-						
-						
-						
-						
· -						
- -						
cos	ST OF GO	OODS SO	LD			
Invent	tory at beginn	ing of the yea	r			
Invent Purcha	tory at beginn	ing of the yea	r			
Invent Purcha Cost o	tory at beginn asesof items for pe	ing of the yea	r			
Invent Purcha Cost o Cost o Materi	tory at beginn ases	ing of the yea	r			
Invent Purcha Cost o	tory at beginn ases	ing of the yea	r			
Invent Purcha Cost o Cost o Materi	tory at beginn ases	ing of the yea	r			
Invent Purcha Cost o Cost o Materi	tory at beginn ases	ing of the yea	r			
Invent Purcha Cost o Cost o Materi	tory at beginn ases	ing of the yea	r			
Invent Purcha Cost o Cost o Materi Other	ases of items for peof labor ials and supp costs:	ersonal use	r			

_____Page 21

					1490 2	
2013	1040	US	Business Income (Schedule C) (cont.)	No.	16 p2	

Diagon amtor all	noutinout 2012 one occupto	1 a a t a m' a	a manuidad fan	6
Please enter all	pertinent 2013 amounts.	Last year's amounts ar	e provided for	your reference.

EXPENSES	2013 Amount	2012 Amount
Accounting		
Advertising		
nswering service		
Bad debts from sales or service		
Bank charges		
Car and truck expenses (not entered elsewhere).		
· · · · · · · · · · · · · · · · · · ·		
Commissions		
Delivery and freight.		
Dues and subscriptions		
Employee benefit programs		
nsurance (other than health)		
Nortgage interest (paid to banks, etc.)		
Other interest (not entered elsewhere)		
anitorial		
aundry and cleaning		
egal and professional		
/liscellaneous		
Office expense		
Outside services.		
Parking and tolls		
Pension and profit sharing plans - contributions		
Pension and profit sharing plans - admin. and education costs		
Postage		
Printing		
Rent - vehicles, machinery, & equipment (not entered elsewhere)		
Rent - other		
Repairs		
Security		
Supplies		
axes - real estate		
axes - payroll		
axes - sales tax included in gross receipts		
axes - other (not entered elsewhere)		
elephone		
ools		
ravel		
otal meals and entertainment in full (50%)		
Department of Transportation meals in full (80%)		
Iniforms.		
Itilities		
Vages		
All an armony		
other expenses:		

2013 | 1040 | US | Capital Gains & Losses (Schedule D)

17

If you sold any stocks, bonds, or other investment property in 2013, please list the pertinent information for each sale below or provide a spreadsheet file with this information.

Be sure to attach all 1099-B forms and brokerage statements.

No.	Quantity	Description of Property (Box 8)	Date Acquired (Box 1b)	Date Sold (Box 1a)	Sales Price (gross or net) (Box 2)	Cost or Basis (Box 3)	Blank=basis rep. to IRS, 1=nonrec. security (Box 6)	Expenses of Sale (if gross sales price entered)	Federal Income Tax Withheld (Box 4)
									17

13	1040	US	Installment Sales (For	m 6252)		17
	Please	enter all p	ertinent 2013 amounts. Last year's	s amounts are provided fo	or your reference.	
RIO	R YEAF	INSTAL	LMENT SALE	2013 Amount	2012 Amount	
Description of property.						
No.			(m/d/y)		_	
		ross profit rat	io (.xxxx)	:		
			incipal payments (-1 if none)			
			property			
No.	[ate acquired	(m/d/y)		4	
NO.		ate sola (m/a Gross profit rat	/y)			
			rincipal payments (-1 if none)			
			property			_
Na E		ate acquired	(m/d/y)		_	
No.			/y)			
			io (.xxxx)rincipal payments (-1 if none)			
			property			
N - F			(m/d/y)		_	
No.			/y)			
			incipal payments (-1 if none)			
	•					
		escription of	property			
N - F			(m/d/y)		_	
No.			/y)			
			io (.xxxx)rincipal payments (-1 if none)			
		y p-		1		
		escription of	property			
–			(m/d/y)			
No.			/y)			
			io (.xxxx)rincipal payments (-1 if none)			
		dirent year pi	meipai payments (-1 ii none)	1		
		escription of	property			
		ate acquired	(m/d/y)			
No.			/y)			
			io (.xxxx)			
	IC	urrent year pi	rincipal payments (-1 if none)	1	1	

Page 24

2013	1040	US	Sale of Home & Moving Expenses	17.	27

For the sale of home, please provide Form 1099-S and closing stateme the purchase and sale of your home.	nts from
SALE OF HOME (17)	
Description of property (Box 3)	
Date acquired (m/d/y).	
Date sold (m/d/y) (Box 1)	
Sales price (Box 2).	
1=sale of home	
1=owned and used property as main home for at least 2 of 5 years before sale	
1=first-time homebuyer credit was previously taken on this home	
1=business use in year of sale	
Number of days after December 31, 2008 that home was not used as principal residence	
Adjusted Basis	
Original cost	
mprovements:	
Adjusted basis	
Expenses of Sale (Commissions, advertising fees, legal fees, and loan charges paid by the seller)	
Total expenses of sale.	
Reduced Exclusion	
Please complete the following information if due to a change in health, place of employment, or unforeseen c a) Did not meet the ownership and use tests *, or b) Excluded gain on the sale of another home after May 6,	ircumstances you either: 1997.
f excl. gain from another home after May 6, 1997 & within 2 yrs. of current sale, enter date of sale (m/d/y)	
1=sale due to change in health, employment or unforeseen circumstances	
Days used as main home - taxpayer	
Days used as main home - spouse	
Days property owned - taxpayer.	
Days property owned - spouse	
MOVING EXPENSES (27) (If you moved because of a change in the location of your job)	
=spouse, 2=joint	
I = armed forces move due to permanent change of station.	
Aliles from old home to new work place	
Miles from old home to old work place	
Expenses for transportation and storage of household goods and personal effects	
Lodging and travel (excluding meals):	
Lodging and travel (excluding automobile)	
Parking fees and tolls	
Gas and oil	
Miles driven to new home	
(* owned and used property as main home for at least 2 of 5 years before sale)	

17, 27

ORGANIZER Page Rental & Royalty Income (Schedule E) 2013 1040 US No. 18 Please enter all pertinent 2013 amounts. Last year's amounts are provided for your reference. **GENERAL INFORMATION** 2013 Amount 2012 Amount Description of property..... Type of Property Street address 1 = Single Family Residence 2 = Multi-Family Residence 3 = Vacation/Short-Term Rental State..... 4 = CommercialZIP code..... 5 = Land6 = Royalties Type of property (see table).... 7 = Self-Rental Other type of property Number of days rented..... Percentage of ownership if not 100% (.xxxx). Percentage of tenant occupancy if not 100% (.xxxx). 1=did not actively participate. 1=real estate professional 1=spouse, 2=joint 1=rental other than real estate. 1=qualified joint venture...... 1=nonpassive activity, 2=passive royalty..... 1=investment 1=single member limited liability company If required to file Form(s) 1099, did you or will you file all required Form(s) 1099: 1=yes, 2=no. **INCOME** 2013 Amount 2012 Amount Rents or royalties received..... DIRECT EXPENSES NOTE: Direct expenses are related only to the rental activity. These include rental agency fees, advertising, and office supplies. Auto and travel (not entered elsewhere)..... Cleaning and maintenance..... Commissions Legal and professional fees..... Management fees Mortgage interest (paid to banks, etc.)..... Qualified mortgage insurance premiums

NOTE: If you purchased or disposed of any business assets, please complete Sheet 22

18

Other:

Wages and salaries.....

ORGANIZER Page 26

40					
13	1040	US	Rental & Royalty Income (Sch. E) (cont.)	No.	18 p
Dloa	so ontor al	l nortinont	2013 amounts. Last year's amounts are provided for your re	ference The in	ndirect
e:	xpense co	lumn shou	ld only be used for vacation homes or less than 100% tenant	occupied rent	als.
	AND GAS				
Produc	ction type (pr	eparer use or	nly)		
Percer	ntage depletion	on rate or am	ount		
			(-1 if none)		
	·		t, if different (-1 if none)		
	ATION H			<u> </u>	
			al method elected)		
	-	•			
		(PENSES			
NOIE	These includ	de repairs, ins	ated to operating or maintaining the dwelling unit. surance, and utilities.		
			ewhere)		
			, etc.)		
			emiums		
Other	interest (not	entered elsew	/here)		
Paintir	ng and decora	ating			
Pest c	ontrol				
Plumb	ing and elect	rical			
Repair	S				
	,		here)		
•					
5					
Other:					
-					
-					
-					
-					
-					
-					
-					
-					

ORGANIZER Page 27 Farm Income (Schedule F/Form 4835) 2013 1040 US No. 19 Please enter all pertinent 2013 amounts. Last year's amounts are provided for your reference. **GENERAL INFORMATION** Principal product Employer ID number..... Accounting method: 1=cash, 2=accrual 1=spouse, 2=joint 1=crop insurance proceeds election. Received applicable subsidy this year: 1=yes, 2=no..... If required to file Form(s) 1099, did you or will you file all required Form(s) 1099: 1=yes, 2=no. 1=did not "materially participate" (Schedule F only)..... 1=did not actively participate (Farm rental only) 1=real estate professional (Farm rental only)..... 1=single member limited liability company..... % of ownership if not 100% (.xxxx) (Farm rental only) FARM INCOME Cash method: 2013 Amount 2012 Amount Sales of livestock and other resale items..... Cost or basis of livestock or other resale items..... Sales of products raised..... Accrual method: Sales of livestock, produce, etc. Beginning inventory of livestock, etc..... Cost of livestock, etc. purchased..... Ending inventory of livestock, etc..... Other farm income: Taxable cooperative distributions Total agricultural program payments (other than CRP)..... Taxable agricultural program payments (other than CRP)..... Taxable conservation reserve program payments Commodity credit loans reported under election..... Total commodity credit loans forfeited or repaid..... Taxable commodity credit loans forfeited or repaid..... Total crop insurance proceeds received in 2013. Taxable crop insurance proceeds received in 2013..... Taxable crop insurance proceeds deferred from 2012..... Custom hire (machine work) income not included above.....

ORGANIZER Page 28

2013	1040	US	Farm Income (Sch. F/For	m 4835) (cont.)	No.	19 p2
	Please e	enter all pe	rtinent 2013 amounts. Last year's ar	nounts are provided for y	our reference.	
FAR	RM INCOM	ME (conti	inued)			
		(,	2013 Amount	2012 Amo	unt
Otrici	income.	Please enter all pertinent 2013 amounts. Last year INCOME (continued) come: A EXPENSES truck expenses (not entered elsewhere). als. vation expenses. hire (machine work). ee benefit programs. irchased. rs and lime. and trucking. e, fuel, and oil. ce (other than health). ee interest (paid to banks, etc.). iterest (not entered elsewhere). ired. and profit sharing - contributions. and profit sharing plans - admin. and education costs. ehicles, machinery, and equipment (not entered elsewhere). where (land, animals, etc.). and maintenance. ind plants purchased. and warehousing. s purchased. not entered elsewhere). ary, breeding, and medicine. zed preproductive period expenses (also enter below).	Γ	2013 Amount	2012 AIII0	ant
FAR	RM EXPE	NSES	L			
			ered elsewhere)			
	•					
Emplo	yee benefit p	orograms				
Feed	purchased					
Fertili:	zers and lime					
J	`	9	–			
	•	•				
_	_	•				
	•		·			
Rent -	other (land,	animals, etc.))			
-						
,	•	-				
-	expenses:				l	
		NOTE	f you purchased or disposed of any business	accate planes complete Cheet	ີ	
		NOTE: I	f you purchased or disposed of any business a	assets, piease complete Sneet	∠ ∠.	
					т	
						19 p2

ORGANIZE	R	,				Page 29
2013	1040	US	Partnersh	nip and S corpora	tion Information	20.1,20.2
PAI			r delete 2013 iı ЛАТІОN (20.		te. Be sure to attach all S	Schedule K-1s.
No.		ne of Partnersh		Employer Identification Number	Tax Shelter Registration Number	Additional Amounts Invested in Partnership
S C			PRMATION (Employer Identification	Tax Shelter	Additional Amounts Invested in
NO.	Maine	e of S corporat	1011	Number	Registration Number	S corporation
						20.1,20.2

Page 30 **ORGANIZER Estate or Trust and REMIC Information** US 2013 1040 Please add, change or delete 2013 information as appropriate. Be sure to attach all Schedule K-1s and Schedule Qs. **ESTATE OR TRUST INFORMATION (20.3)** Employer Tax Shelter Registration Number No. Name of Estate or Trust Identification Number **REMIC INFORMATION (20.4)** Employer Identification No. Name of REMIC Number

20.3,20.4

ORGANIZER				Page 31
2013	1040	US	Asset Disposition List	22

If you disposed of any business assets in 2013, please enter date sold, sales price, and expenses of sale. For real estate transactions, be sure to attach all 1099-S forms and closing statements.

No.	Description of Property (Box 3)	Date Placed in Service	Date Sold (Box 1)	Sales Price (Box 2)	Cost or Basis	Expenses of Sale

2013 1040 US Asset Acquisition List 22 p2

If you purchased any business assets (furniture, equipment, vehicles, real estate, etc.) or converted any personal assets to business use in 2013, please enter all pertinent information below.

			Dror	arer Use	Only	I		Preparer Us	sa Only
		Related	Prep		Offig	Data Dlacad	Cost		se Only
No.	Description of Property	Related Business or Activity	Form	No. of Form	Category	Date Placed in Service	or Basis	Current Section 179	Method
								22	2 p2

13	1040	US	Vehicle Expenses		No.	22
	Please e	nter all pe	ertinent 2013 amounts. Last year's am	ounts are provided fo	or your reference	
GEN	NERAL IN					
Descr	intion of vehic	-ام		2013 Amount	2012 Amo	unt
			deduction.			
1=no	written eviden	ice to suppo	rt your deduction.			
1=veh	nicle is availab	le for off-du	ty personal use			
1=no	other vehicle i	is available f	for personal use			
1=veh	nicle used prim	narily by mor	re than 5% owner			
Numb	er of months	of business	use if changed from 100% personal use			
AUT	ГОМОВІЬ	E MILEA	AGE			
			·····			
Busin	ess mileage					
Comn	nuting mileage	e (for the tax	: year)			
Avera	ge daily round	d-trip commu	ute			
AC1	TUAL EXF	PENSES				
			s portion only)			
			s portion only)			
Misce	llaneous					
Auto I	icense (other	than person	al property taxes)			
Perso	nal property ta	axes (based	on car's value)			
Intere	st (car Ioan) (for Schedule	e C, E & F)			
Vehic	le rent or leas	e payments.				
			tive)			
Value	of employer-p	orovided veh	nicle on Form W-2 (2106)			

RUANIZER				raye 34
2013	1040	US	Adjustments to Income	24

Please enter all pertinent 2013 information. Last year's amounts are provided for your reference.

	2013 Amount		2012 A	mount
TRADITIONAL IRA CONTRIBUTIO <u>NS </u>	xpayer	Spouse	Taxpayer	Spouse
RA contributions you made or expect to make 1=maximum) (\$5,500/\$6,500 if 50 or older)				
Contributions made to date				
=covered by plan, 2=not covered				
2013 payments from 1/1/14 to 4/15/14				
ROTH IRA CONTRIBUTIONS				
Roth IRA contributions you made or expect to nake (1=maximum) (\$5,500/\$6,500 if 50 or older).				
Contributions made to date				
<u></u>				
SEP, SIMPLE AND QUALIFIED PLANS (K	EOGH)			
Profit-sharing (25%/1.25) contributions you made or expect to make (1=maximum)				
Money purchase (25%/1.25) contributions you				
made or expect to make (1=maximum)				
Defined benefit contributions you expect to make.				
Self-employed SEP (25%/1.25) contributions you nade or expect to make (1=maximum)				
Plan contribution rate if not .25 (.xxxx)				
ndividual 401k: SE elective deferrals (except Roth) (1=max.)				
ndividual 401k: SE designated Roth contributions (1=max.)				
SIMPLE contributions:				
Self-employed SIMPLE contributions you				
made or expect to make (1=maximum)				
Employer matching rate if not .03 (.xxxx)				
1=nonelective contributions (2%)				
	I			
ADJUSTMENTS TO INCOME				
Self-employed health insurance:				
Total premiums (excluding long-term care)				
Long-term care premiums				
Educator expenses (kindergarten thru grade 12)				
lury duty pay given to employer				
Expenses from rental of personal property				
Other adjustments to income:				
strict dajactimente te income.				
Nimon, said.		Chaus		
Alimony paid: Taxpayer		Spouse		
Recipient's first name				
Recipient's last name		+		
Amount paid	mt·		2012 amt:	
Autoditi pala		J [μοτε aint.	

2013	1040	US	Itemized Deductions	25
2013	1040	US	Itemized Deductions	25

Please enter all pertinent 2013 amounts and attach all 1098 forms. Last year's amounts are provided for your reference.

MEDICAL	AND	DENTAL	. EXPE	NSES
---------	-----	--------	--------	------

NOTE: Enter self-employed health insurance premiums on Sheet 24 and Medicare insurance premiums on Sheet 14.	2013 Amount	TS	2012 Amount
Prescription medicines and drugs			
Doctors, dentists and nurses			
Hospitals and nursing homes			
Insurance premiums not entered elsewhere (excl. LT care & amts. paid w/pre-tax dollars)			
Long-term care premiums - taxpayer			
Long-term care premiums - spouse			
Insurance reimbursement (enter as a positive number)			
Lodging and transportation:			
Out-of-pocket expenses			
Medical miles driven			
Other medical and dental expenses:			
TAXES PAID (State and local withholding and 2013 estimates are a	automatic.)		
State income taxes - 1/13 payment on 2012 state estimate			
State income taxes - paid with 2012 state return extension			
State income taxes - paid with 2012 state return.			
State income taxes - paid for prior years and/or to other state			
City/local income taxes - 1/13 payment on 2012 city/local estimate			
City/local income taxes - paid with 2012 city/local extension			
City/local income taxes - paid with 2012 city/local return			
SALES AND USE TAXES PAID			
State and local sales taxes (except autos and special items)			
Use taxes paid on 2013 purchases.			
Use taxes paid with 2012 state return			
Sales tax on autos not included above.			
Sales tax on boats, aircraft, other special items			
OTHER TAXES PAID		I I	
Real estate taxes - principal residence:			
· · ·			
Real estate taxes - property held for investment			
Personal property taxes (including auto fees in some states. Provide a copy of tax notice)			
Foreign income taxes			
Other taxes:			

13	1040	US	Itemized Deductions	(continued)			25
	Please e	nter all pe	rtinent 2013 amounts. Last year	's amounts are provide	ed for y	our reference	
INITI	EREST PA	•	•	·	,		
			La ciuta (Day 2) ann arta day Farm 1000	2012 A		2012 A	
Home	mortgage int	. (Box 1) and	points (Box 2) reported on Form 1098:	2013 Amount	TS	2012 Amo	ount
•							
	_	_	ot reported on Form 1098:				
	Payee's name Payee's SSN						
	Payee's stree						
	Payee's city.						
	Payee's state						
	Payees ZIP C	tode L					
	not reported					L	
	·						
_	•	•	n post 12/31/06 contracts (Box 4) margin accounts):				
IIIvesi	ment interest	(Interest on	margin accounts).				
•							
Certai	n home morto	gage interest	included above (6251)				
	For these ty		er than to buy, build, or improve your ma also provide the dates and lives of the lo	ain nome are deductible over Dans.	tne lire	or the mortgage.	
	E: No deductio	n is allowed	for cash or check contributions unless the the name of the organization, contributions	e donor maintains a bank rec on date(s), and contribution a	cord, or amount(a written commun s).	nication
Churc	hes, schools,	hospitals, an	d other charitable organizations (50% lin	nitation):			
	ontributions by		· ·				
,							
			oocket)				
Νι	umber of char	itable miles.					
Veters	ans' organizat	ions fraterns	al societies, nonprofit cemeteries, and ce	rtain private nonoperating for	undation	ıs (30% limitation)	١٠
	ontributions by		•	rtain private nonoperating for	unuanon	13 (30% IIIIIItation)	
		,					
,							
•					+		
	nlunteer evner	nses (out-of-i	pocket)				
Vo	Jiuliteel expel						
			· · · · · · · · · · · · · · · · · · ·				

2012	1040	110	Itemized Deductions (continued)	25

			ertinent	2013 am	ounts. Last	year's amo	ounts are provided	d for voi	ur reference	
	Please e	enter all pe							ui reference	: .
NON	NCASH C	•					·	,		
					re over \$500. N	No deduction i	s allowed for contribut any item with minima	ions of clo	othing and hous	sehold iter
	that are not	in good used	l conditior	or better.	In addition, a	deduction for	any item with minima	I monetary	y value may be	e denied.
50% li	imitation (see	above):				_	2013 Amount	TS	2012 Amo	ount
-										
-										
30% li	imitation (see	above):								
	(***	,								
			-£!t-!			14 >				
30% C	capitai gain pr	roperty (girts	от саріта	gain prope	erty to 50% lim	it orgs.):				
-										
20% c	apital gain pr	roperty (gifts	of capital	gain prope	erty to non-50%	6 limit orgs <u>.):</u>				
-										
-										
-										
MIS	CELLANI	EOUS DI	EDUC	IONS (s	subject to 2% /	AGI limit)				
					subject to 2% A					
Jnion	and profession	onal dues								
Jnion	and profession	onal dues			-):			
Jnion	and profession	onal dues):			
Jnion	and profession	onal dues):			
Jnion	and profession	onal dues):			
Jnion	and profession	onal dues):			
Jnion Other profes	and profession	onal dues d employee e riptions, emp):			
Jnion Other profes	and profession	onal dues d employee e riptions, emp):			
Union Other profes	and profession	onal dues d employee e riptions, emp):			
Union Other profes	and profession	onal dues d employee e riptions, emp):			
Union Other profes	and profession	onal dues d employee e riptions, emp):			
Union Other orofes	and profession	onal dues d employee e riptions, emp):			
Union Other orofes	and profession	onal dues d employee e riptions, emp):			
Union Other Orofes Invest	and profession unreimburset sional subscr	e:	expenses loyment a	(uniforms a		clothing, du. expenses):			
Union Other	and profession unreimbursed sional subscription and subscription and subscription and subscription and subscription are expensed at the subscription and subscription are subscription and subscription and subscription are subscr	e: tion fee	expenses loyment a	(uniforms a	and protective on and certain e	clothing, du. expenses):			
Union Other	and profession unreimbursed sional subscribed with a subscribed wi	e: tion fee	expenses loyment a	(uniforms a	and protective on and certain e	clothing, du. expenses):			
Union Other	and profession unreimbursed sional subscription and subscription and subscription and subscription and subscription are expensed at the subscription and subscription are subscription and subscription and subscription are subscr	e: tion fee	expenses loyment a	(uniforms a	and protective on and certain e	clothing, du. expenses):			
Union Other	and profession unreimbursed sional subscription and subscription and subscription and subscription and subscription are expensed at the subscription and subscription are subscription and subscription and subscription are subscr	e: tion fee	expenses loyment a	(uniforms a	and protective on and certain e	clothing, du. expenses):			
Union Other	and profession unreimbursed sional subscription and subscription and subscription and subscription and subscription are expensed at the subscription and subscription are subscription and subscription and subscription are subscr	e: tion fee	expenses loyment a	(uniforms a	and protective on and certain e	clothing, du. expenses):			

25 p3

2012	1040	110	Hamilea d Dadwatiana (a antimo al)	25
2013	1040	LUS	Itemized Deductions (continued)	25 p4

te tax, section 691(c)r miscellaneous deductions:		2012 Amount
I miscenaneous deductions:		
-		
 	+ +	

2013 1040 US Itemized Deductions (continued) 25 p5

If either of the following conditions below apply to you, your home mortgage interest deduction may need to be limited and the input section provided below should be completed. If neither condition applies, enter home mortgage interest amounts on organizer sheet 25 p2.

- 1. Total home equity debt exceeded \$100,000 at any time during 2013 (\$50,000 if married filing separate). For this purpose, home equity debt is defined as any mortgages taken out after October 13, 1987 in which the proceeds were used for purposes other than to buy, build, or improve your home. An example of this type of mortgage is a home equity loan use to pay off credit card bills, buy a car, or pay tuition.
- 2. Total home acquisition debt exceeded \$1,000,000 at any time during 2013 (\$500,000 if married filing separate). For this purpose, home acquisition debt is defined as any mortgages taken out after October 13, 1987 in which the proceeds were used to buy, build, or improve your home.

NOTE: When completing the input section below, grandfather debt represents loans taken out prior to October 14, 1987.

Please enter all pertinent 2013 amounts and attach all 1098 forms. Last year's amounts are provided for your reference.

	2013 Amount	TS	2012 Amount
air market value of the property on the date that the last debt was secured			
ome acquisition and grandfather debt on the date that the last debt was secured			
OAN INFORMATION			
oan #1			
Lender's name.			
Form (see table)		+	
Number of form.		+	
1=taxpayer, 2=spouse, blank=joint			
Interest paid.			
Points paid.			
Total principal paid			
Lump sum principal payment (if paid off)			
Months outstanding (if not 12)			
Home acquisition debt balance - beginning of year			
Home acquisition debt borrowed in 2013			
Home equity debt balance - beginning of year			
Home equity debt borrowed in 2013			
Grandfather debt balance - beginning of year			
oan #2			
Lender's name			
Form (see table)			
Number of form.			
1=taxpayer, 2=spouse, blank=joint			
Interest paid			
Points paid			
Total principal paid			
Lump sum principal payment (if paid off)			
Months outstanding (if not 12)			
Home acquisition debt balance - beginning of year			
Home acquisition debt borrowed in 2013			
Home equity debt balance - beginning of year			
Home equity debt borrowed in 2013			
Grandfather debt balance - beginning of year			
3 3 3			

- 2 = Business use of home
- 3 = Schedule E

2013	1040	US	Noncash Contributions (Form 8283)

26

If your total noncash contributions are in excess of \$500 in 2013, please complete the information below for each donee using the following guidelines:

- * If you contributed a motor vehicle, boat, or airplane with a claimed value of more than \$500, attach Form 1098-C or other written acknowledgement received from the donee organization.
- * A deduction for contributions of clothing or other household items that are not in good used condition or better is not allowed. In addition, a deduction for any item with minimal monetary value may be denied. However, these rules do not apply to any contribution of a single item for which a deduction of more than \$500 is claimed, if a qualified appraisal for the donated property is provided.

DONATED) PROPE	RTY INFORMATION					
	Name of cha	aritable organization (donee)					
		ess					
	_						
		2=joint					
		scription (other than vehicle)					
	Froperty de	Identification number (VIN)					
No.							
110.	Vehicle	Year (yyyy)					
		Make and model					
		Mileage at time of donation					
		tribution (m/d/y)					
		ed by donor (m/y)					
		ed by donor (Table 1 or describe)					
	Donor's cos	t or basis					
	Fair market	value					
	Method use	d to determine FMV (Table 2 or descri	be)				
	Name of cha	aritable organization (donee)					
	Street addre	ess					
	City						
	State						
	ZIP code.						
		2=joint					
		scription (other than vehicle)					
	1 Toperty de	Identification number (VIN)					
No.							
140.	Vehicle	Year (yyyy)					
		Make and model					
		Mileage at time of donation					
		tribution (m/d/y)					
		ed by donor (m/y)					
		ed by donor (Table 1 or describe)					
	Donor's cos	t or basis					
	Fair market	value					
	Method use	d to determine FMV (Table 2 or descri	be)				
1	How Pro	perty was Acquired	2 Method Used to Determine FMV				
			Wiction Osca to Determine Five				
	= Purchase	3 = Inheritance 4 = Exchange	1 = Appraisal 3 = Catalog 4 = Comparable sales				
2	= Gift		2 = Thrift shop value				
			For other methods, see IRS Pub. 561.				

2013	1040	IIS	Business Use of Home (Form 8829)	No.	20
2013	1040	1 03	I DUSINESS USE OF HOTHE (FOLIT 0027)		1 29

Please enter 2013 indirect expenses in full. Nonbusiness portion will carry to Schedule A. Business percentage will be applied to indirect expenses only.

BUSINESS USE OF HOME	2013 Amount	2012 Amount
Form		
Number of form (e.g., enter 2 for Schedule C number 2)		
Business use area (square footage).		
Total area of home (square footage)		
Total hours facility used (for daycare facilities only)		
Total hours available (if not 8,760).		
% (.xx) or amount of gross income from home if not 100% (-1 if none)		
% (.xx) or amount of expenses from home if not 100% (-1 if none)		_
INDIRECT EXPENSES		
NOTE: Indirect expenses are for keeping up and running your entire home. They benefit both the business and personal parts of your home.		
Mortgage interest		
Real estate taxes		
Qualified mortgage insurance premiums		
Casualty losses		
Insurance		
Miscellaneous		
Rent		
Repairs and maintenance		
Utilities		
Excess mortgage interest		
Other indirect expenses:		
Other indirect expenses.		
DIRECT EXPENSES		
DIRECT EXPENSES NOTE: Direct expenses benefit only the business part of your home. They include painting or repairs made to specific areas or rooms used for business.	e	
NOTE: Direct expenses benefit only the business part of your home. They include painting or repairs made to specific areas or rooms used for business.	е	
NOTE: Direct expenses benefit only the business part of your home. They include painting or repairs made to specific areas or rooms used for business. Mortgage interest.	е	
NOTE: Direct expenses benefit only the business part of your home. They include painting or repairs made to specific areas or rooms used for business. Mortgage interest. Real estate taxes.	е	
NOTE: Direct expenses benefit only the business part of your home. They include painting or repairs made to specific areas or rooms used for business. Mortgage interest. Real estate taxes. Qualified mortgage insurance premiums	ie	
NOTE: Direct expenses benefit only the business part of your home. They include painting or repairs made to specific areas or rooms used for business. Mortgage interest. Real estate taxes. Qualified mortgage insurance premiums Casualty losses.	'e	
NOTE: Direct expenses benefit only the business part of your home. They include painting or repairs made to specific areas or rooms used for business. Mortgage interest. Real estate taxes. Qualified mortgage insurance premiums Casualty losses.	e	
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NOTE: Direct expenses benefit only the business part of your home. They include painting or repairs made to specific areas or rooms used for business. Mortgage interest. Real estate taxes. Qualified mortgage insurance premiums Casualty losses.	e	
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NOTE: Direct expenses benefit only the business part of your home. They include painting or repairs made to specific areas or rooms used for business. Mortgage interest. Real estate taxes. Qualified mortgage insurance premiums Casualty losses Insurance Miscellaneous Rent.	e	
NOTE: Direct expenses benefit only the business part of your home. They include painting or repairs made to specific areas or rooms used for business. Mortgage interest. Real estate taxes. Qualified mortgage insurance premiums Casualty losses Insurance Miscellaneous Rent. Repairs and maintenance Utilities Excess mortgage interest	e	
NOTE: Direct expenses benefit only the business part of your home. They include painting or repairs made to specific areas or rooms used for business. Mortgage interest. Real estate taxes. Qualified mortgage insurance premiums Casualty losses. Insurance Miscellaneous Rent. Repairs and maintenance. Utilities	e	
NOTE: Direct expenses benefit only the business part of your home. They include painting or repairs made to specific areas or rooms used for business. Mortgage interest. Real estate taxes. Qualified mortgage insurance premiums Casualty losses Insurance. Miscellaneous. Rent. Repairs and maintenance. Utilities Excess mortgage interest Excess casualty losses Allowable casualty losses.	e	
NOTE: Direct expenses benefit only the business part of your home. They include painting or repairs made to specific areas or rooms used for business. Mortgage interest. Real estate taxes. Qualified mortgage insurance premiums Casualty losses Insurance. Miscellaneous Rent. Repairs and maintenance. Utilities Excess mortgage interest Excess casualty losses.	e	
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NOTE: Direct expenses benefit only the business part of your home. They include painting or repairs made to specific areas or rooms used for business. Mortgage interest. Real estate taxes. Qualified mortgage insurance premiums Casualty losses Insurance. Miscellaneous. Rent. Repairs and maintenance. Utilities Excess mortgage interest Excess casualty losses Allowable casualty losses.	e	
NOTE: Direct expenses benefit only the business part of your home. They include painting or repairs made to specific areas or rooms used for business. Mortgage interest. Real estate taxes. Qualified mortgage insurance premiums Casualty losses Insurance. Miscellaneous. Rent. Repairs and maintenance. Utilities Excess mortgage interest Excess casualty losses Allowable casualty losses.	e	

Page 42 ORGANIZER US Employee/Vehicle Bus. Exp. (Form 2106) No. 2013 1040 30 Please enter all pertinent 2013 amounts. Last year's amounts are provided for your reference. **GENERAL INFORMATION** Occupation, if different from Form 1040..... Number of form (1=first Schedule C, 2=second, etc.).... 1=performance artist, 2=handicapped, 3=fee-basis government official...... **EMPLOYEE BUSINESS EXPENSES** 2013 Amount 2012 Amount Reimbursements for meals and entertainment not on W-2, box 1..... 1=Department of Transportation (80% meal allowance)..... Local transportation (bus, taxi, train, etc.)..... Reimbursements not included on Form W-2, box 1..... Other business expenses:

30

013	1040	US	Vehicle Expenses (Form	2106) (cont.)	No.	30 p2		
	Please e	nter all per	rtinent 2013 amounts. Last year's a	mounts are provided for y	our reference			
VEH	ICLE INF	FORMATI	ON	2013 Amount	2012 Amo	ount		
1=vehi	icle used prin	narily by more	e than 5% owner					
1=vehi	Please enter all pertinent 2013 amounts. Last year' CHICLE INFORMATION ehicle used primarily by more than 5% owner. ehicle is available for off-duty personal use. o other vehicle is available for personal use. o other vehicle is available for personal use. o other vehicle is available for personal use. o ovidence to support your deduction. CHICLE 1 cription of vehicle. e placed in service (m/d/y). al mileage (for the tax year). iness mileage. mutting mileage (for the tax year). rage daily round-trip commute. hebr of months of business use if changed from 100% personal use. king fees and tolls (business portion only). ual expenses: Gasoline, lube, oil. Repairs. Tires. Insurance. Miscellaneous. Auto license (other than personal property taxes). Personal property taxes (based on car's value) Interest (car loan) (for Schedule C, E & F). Vehicle rent or lease payments. Inclusion amount (enter as positive). Value of employer-provided vehicle on Form W-2 (2106). CHICLE 2 cription of vehicle. e placed in service (m/d/y). al mileage (for the tax year). iness mileage mutting mileage (for the tax year). iness mileage mutting mileage (for the tax year). iness mileage of months of business use if changed from 100% personal use. king fees and tolls (business portion only) ual expenses: Gasoline, lube, oil.							
			· ·					
1=no v	written evider	nce to support	your deduction					
VEH	IICLE 1							
Descri	ntion of vehic	·le]					
	•		l l					
		-	The state of the s					
	=	=	The state of the s					
	=		ľ					
Numbe	er of months	of business u	se if changed from 100% personal use					
Parkin	g fees and to	olls (business	portion only)					
Actual	expenses:		,		T			
Ga	isoline, lube,	oil						
Re	pairs							
			†					
			l l					
		-	· · · · -					
		-						
VEH	IICLE 2		•					
Descri	ption of vehic	:le						
	•							
		=	The state of the s					
Busine	ess mileage							
Comm	uting mileage	e (for the tax	year)					
	_	olls (business	portion only)					
	•		Г		T			
			The state of the s					
			onal property taxes)					
			ed on car's value)					
			lule C, E and F)					
			nts					
			ositive).					
			vehicle on Form W-2 (2106).					
va	or omplo.	, -, p , idou (2 (2100)		ı			

						rage
13	1040	US	Foreign Income Exclu	ısion (Form 2555)	No.	31.1
			Please enter all pertinent	2013 information.		
\sim EN			TION			
GEN	NERAL IN	IFURIVIA	HON			
			lifferent from Form 1040.			
_	=	· -	different from Form 1040:			
Re	egion					
Po	ostal code					
	•					
Emplo						
U.	.S. ZIP code .					
Fo	oreign street a	address				
	0 0					
	0 0					
3=	-self, 4=foreig	gn affiliate of	entity, 2=U.S. company, U.S. company, 5=other			
Er	mployer type,	if other				
Туре	of exclusion r	evoked if revo	oked in earlier year (if applicable):	Tax year revocation was effective		
				<u> </u>		
Count	try of citizensh	hip				
Citv a	nd country of	separate for	eign residence if maintained due to	Number of days during tay year at congrete		
advers	se living cond	litions (if appl	licable):	Number of days during tax year at separate foreign address (if applicable)		
Tax h	omes(s) durir	ng tax year:		Dates tax home(s) were established (m/d/y)		
				<u> </u>		
						24.4
						31.1

	1040	US	Foreign Inc	come Exclu	ısion (255	5)	No.	\ 2.	1 1
TRAV					101011 (2000	· /			1.1
TRAV				ter all pertinent	2013 informat	ion.			
		ORMATIO							
	Please enter Type (table)		2013 as well as trave country (if not Unite		o date. Date arrived	Date lef	it Day	rs in U.S. on busi	ness
			-						
		1					I		
BONA	A FIDE F	RESIDEN	CE TEST AND	PHYSICAL	PRESENCE	TEST			
•	•		idence (m/d/y)						
			nce (m/d/y)						
			y: 1=purchased home equarters furnished by						
Names o	of family livi	ng abroad wi	th taxpayer (if application	able):		Period family	lived abroad		
			y of bona fide resider country of bona fide						
Contracti	tual terms re	elating to len	gth of employment al	oroad					
	-	_	country under oyment in country (if applic						
Address	of home in	U.S. maintai	ned while living	1=U.S. home rented	Names of occup	pants in U.S.	Relationship	of occupants	 s in
abroad (i	(if applicable	e):		(if applicable)	home (if ap	plicable)	U.S. home	e (if applicable	<u>})</u>
Principal	I country of	employment							
			EXPENSES		2013 A	Amount	20	12 Amount	
	of housing	-			Qualifying	days in location	(multiple loca	ations only)	
				_					
				Travel Typ					
			2	= Travel to U.S. (d = Travel to foreign	country				
			3	= Travel to restricte	ed country				
									1.1

2013	1040	US	Foreign Income Excl	usion (Form 2555)	No.	31.2
Name of	Enter EIGN WA r number	amounts i	ertinent 2013 amounts and atta n U.S. dollars only. Last year's LARIES, TIPS	ch all W-2 forms, or other wag amounts are provided for you 2013 Amount	e statements. r reference. 2012 Amo	ount
Name of Wages, Federal Social s Medicard	f employer (B tips, other co income tax w ecurity tax wi e tax withheld come tax with	ox c)	3ox 1)			
Nonca Home (I Meals Car	odging)		ES, REIMBURSEMENTS A	AND OTHER EARNED INC	OME	
Cost of Family.	living and ove		ments ntial			
Quarters Other pu	surposes:					
		under section	convenience of the n 119)			
Total nu Total da	imber of days lys worked be	worked (if no fore and after	on Information t 240)foreign assignmentter foreign assignment			

31.2

2013 1040 US Health Savings Accounts (8889) 32.1

Please enter all pertinent 2013 amounts & attach all 1099-SA forms. Last year's amounts are provided for your reference.

HSA CONTRIBUTIONS

NOTE: Contributions to an HSA are only eligible to persons covered under a high deductible health plan. For tax year 2013, a high deductible health plan is one with an annual deductible that is not less than \$1,250 for self-only coverage or \$2,500 for family coverage, and the annual out-of-pocket expenses (deductibles, co-payments, and other amounts, but not premiums) do not exceed \$6,250 for self-only coverage or \$12,500 for family coverage.

	2013 A	mount	2012 A	mount
	Taxpayer	Spouse	Taxpayer	Spouse
1=self-only coverage, 2=family coverage				
HSA contributions you made or expect to make, except rollovers, employer contributions, and contributions made to an employee account through a cafeteria plan (1=maximum)				
Contributions included above that were made after you became eligible for Medicare				
Contributions made to date				
HSA DISTRIBUTIONS				
Total HSA distribution received (1099-SA, box 1)				
Distributions included above that were rolled over to another HSA				
Total unreimbursed qualified medical expenses				

							Lage
)13	1040	US	Child and Depe	ndent Care	Expenses (F	orm 2441)	33.1,3
		•	•				•
				_		_	
Please	enter al	pertinent 2	2013 information. Last ye or more dependents ena	ar's amounts are	e provided for you	ir reference. You	must have
paid	ioi the c	are or one	or more dependents ena	billig you to wor	k or attend school	i to quality for the	is credit.
DED	ENDE	IT CADE	EXPENSES (33.1)	2013 /	Amount	2012 Am	ount
			` _	Taxpayer	Spouse	Taxpayer	Spouse
-			urred but not paid in 2013			_	
Emplo	yer-provid	ed benefits for	feited in 2013				
PER	SONS	AND EXP	ENSES QUALIFYING	FOR DEPEN	DENT CARE C	REDIT	
	-						
			m/d/y)				
No.			number				
	(Qualified depe	endent care expenses paid in 2013			2012 amt:	
						2012 dilit.	
			oint				
	L	. spouse, 2 j	Ont				
		-irst name					
			m/d/v)				
No.			number				
_							
	ľ	ncurred and p	endent care expenses paid in 2013			2012 amt:	
		1=spouse, 2=j	oint				
No.							
NO.		social security	number				
	(Qualified depe	endent care expenses			2012	
			oaid in 2013			2012 amt:	
			oint				
		1=spouse, 2= <u>j</u>	oint				
PER	SONS	OR ORG	ANIZATIONS PROVID	DING CARE (3	3.2)		
		Name of provi	der				
		· ·	5				
No.			code				
<u></u>			number (SSN or EIN)				
			iden in 2012			2012 amt:	
			oint				
		Name of provi	der				
	!	Street address	S				
No.			code				
			number (SSN or EIN)				
			o care provider in 2013			2012 amt:	
			oint				

33.1,33.2

NIZER					Page
13 1	040 l	JS	Qualified Adoption Expens	ses (Form 8839)	37
Ple	ase enter a	ıll per	tinent 2013 information. Last year's amo	ounts are provided for yo	our reference.
ELIGIB	LE CHILE	REN	I	2013 Amount	2012 Amount
No.	Last nan Identifica Date of I 1=born t 1=specia 1=foreig 1=adopt Qualific Adoptic Expens Paid i	ne birtion nu birth (m before 1 il needs n child on was ed on Pri es n 20 20 20 20	umber I/d/y). I 996 and was disabled Is child. Is not final in 2013. In adoption not finalized by end of 2013. It years for adoption of foreign child finalized in 2013. In and 2013 for adoption finalized in 2013. In and 2013 for adoption finalized in 2013. It is the second of the second		
	1=spous	e, 2=jo	int		
No.	Last nan Identifica Date of I 1=born t 1=specia 1=foreig 1=adopt Qualifit Adoptit Expens Paid i	ne birtion nu birth (m before 1 il needs n child on was ed on Pri es 1	umber I/d/y) I/996 and was disabled I/one in the control of the		
No.	Last nan Identifica Date of I 1=born t 1=specia 1=foreig 1=adopt Qualific Adoptic Expens Paid i	ne ation nu birth (m before 1 al needs a child. on was ed on Pri es 1	Jumber Jumber		

2013 1040 US **Education Credits / Tuition Deduction** No. 38 Please complete the information below if you paid qualified education expenses in 2013 for you, your spouse, or your dependents enrolled in an accredited postsecondary institution. Last year's amounts are provided for your reference. STUDENT INFORMATION NOTE:Due to the change to the 1098-T question (reversing the default), we should not print the 2012 entry. 1=taxpayer, 2=spouse Last name Social security number..... **EDUCATIONAL INSTITUTION ATTENDED (#1)** Street address 1=2013 Form 1098-T was NOT received..... 1=2012 Form 1098-T received with Box 2 & 7 completed..... Federal ID number from Form 1098-T..... **EDUCATIONAL INSTITUTION ATTENDED (#2)** State 1=2013 Form 1098-T was NOT received..... 1=2012 Form 1098-T received with Box 2 & 7 completed.... Federal ID number from Form 1098-T..... QUALIFIED EDUCATION EXPENSES 2013 Amount 2012 Amount Qualified tuition & fees paid in 2013 (net of refund or assistance, & not entered elsewhere). Books & supplies required to be purchased from institution..... Books & supplies not entered above..... * Refund of qualified expenses and tax-free educational assistance received after you file your return for the year in which the expenses were paid.

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					_	-
2013	1040	LIS	Household Employment Taxes (Schedule H)	4	2	

Please enter all pertinent 2013 information. Last year's amounts are provided for your reference.

HOUSEHOLD EMPLOYMENT TAXES

	f you paid a															
l	nousehold e	employee	; or paid to	otal cash	wages	of \$1,00	or r	nore i	n any	calendar	quarter	of 2012	or 2013	to hous	ehold	employees,
1	olease com	plete the	following:								·					

household employee; or paid total cash wages of \$1,000 or more in any caplease complete the following:	alendar quarter of 2012 or 2	2013 to household employees,
Employer identification number.		
1=spouse, 2=joint		
Social security, Medicare and income taxes:	2013 Amount	2012 Amount
1=paid any one employee cash wages of \$1,800 or more		
1=withheld federal income tax for household employee		
Total cash wages subject to social security taxes		
Total cash wages subject to Medicare taxes		
Federal income tax withheld		
Taxes withheld from state disability payments		
Federal unemployment tax:		
1=paid total cash wages of \$1,000 or more in any calendar quarter of 2012 or 2013		
Total cash wages subject to FUTA tax		
1=paid unemployment contributions to only one state		
1=paid all state unemployment contributions by 4/15/14		
1=all wages taxable for FUTA were also taxable for state unemployment		
Name of state		
Contributions paid to state unemployment fund		

Page 52 ORGANIZER Parent's Election to Report Child's Inc. 2013 1040 US No. 44 Please enter all pertinent 2013 amounts & attach all 1099-INT and 1099-DIV forms. Last year's amounts are provided for your reference. CHILD'S INFORMATION Social security number..... Date of birth (m/d/y)..... 1=nontaxable to federal..... 1=nontaxable to state..... **INTEREST INCOME (Form 1099-INT)** Banks, credit unions, etc. (Box 1): 2013 Amount 2012 Amount U.S. bonds, T-bills, etc. (nontaxable to state) (Box 3): Tax-exempt interest: Total municipal bonds..... Adjustments: Tax-exempt interest (1099-INT in error)..... OID adjustment..... ABP adjustment Foreign: 1=interest in or authority over foreign account Name of foreign country..... 1=grantor/transferor or received distribution from foreign trust Post 8/7/86 private activity bond interest (included above) (6251)..... **DIVIDEND INCOME (Form 1099-DIV)**

Total ordinary dividends (Box 1a):	
Qualified dividends (Box 1b)	
Total capital gain distributions (Box 2a):	
Unrecaptured section 1250 gain (Box 2b)	
Section 1202 gain (Box 2c)	
Collectibles (28%) gain (Box 2d).	
Nontaxable distributions (Box 3)	
Tax-exempt interest:	
Total municipal bonds	
In-state municipal bonds	
Nominee distributions:	
Ordinary dividends	
Qualified dividends	
Capital gain distributions	
Alaska permanent fund dividends included above	

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ORGANIZER Page 55 Tax Organizer 2013 1040 US **Tax Return Appointment** MASLER & ASSOCIATES 1 Jenner Suite 230 **IRVINE, CA 92618** Date: Telephone number: (949) 857-0404 Time: (949) 266-8019 Fax number: Location: sharon@maslercpa.com E-mail address: This tax organizer will assist you in gathering information necessary for the preparation of your 2013 tax return. Please enter all pertinent 2013 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 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..... Work extension..... E-mail address In care of Street address.... Apartment number. Address State ZIP code..... **DEPENDENTS** Dependent No. Dependent No. First name Last name...... Title/suffix..... Date of birth (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).... Social security number... Relationship..... Months lived at home . . .

ORGANIZER Page 56 2013 1040 US Tax Organizer Please enter all pertinent 2013 information. If you have attached a government form for an item, check the box and do not enter a 2013 amount. WAGES, SALARIES AND TIPS Employer name: 2013 Amount 2012 Amount Attach Forms W-2 **INTEREST INCOME** Payer name: Attach Forms 1099-INT **DIVIDEND INCOME** Payer name: Attach Forms 1099-DIV PENSIONS, IRA AND GAMBLING INCOME Payer name: **Attach Forms** 1099-R & W-2G Winnings not reported on W-2G..... OTHER GOVERNMENT FORMS - INCOME Form 1099-B - Sales of stock (also include transaction history). Attach Forms 1099 Form 1099-K - Merchant card and third party network payments. . . . Form 1099-S - Sales of real estate (also include closing statements) Attach Forms 1099 Form 1099-G - State tax refunds Taxpayer: Form SSA-1099 - Social security benefits..... Attach Forms 1099 Spouse: Form SSA-1099 - Social security benefits.... Attach Forms 1099 MISCELLANEOUS INCOME Taxpayer: Alimony received.....

ORGANIZER Page 57 US 2013 1040 Tax Organizer RETIREMENT PLAN CONTRIBUTIONS 2013 Amount 2012 Amount Taxpayer: Traditional IRA contributions (1=maximum)..... Self-employed, SEP, SIMPLE, & qualified plan contributions (1=maximum)..... Traditional IRA contributions (1=maximum)..... Spouse: Roth IRA contributions (1=maximum)..... Self-employed, SEP, SIMPLE, & qualified plan contributions (1=maximum)..... OTHER GOVERNMENT FORMS - DEDUCTIONS Form 1098-E - Student loan interest Attach Forms 1098 Form 1098-T - Tuition and related expenses..... 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. Hospitals and nursing homes..... Insurance premiums..... Long-term care premiums - taxpayer. Long-term care premiums - spouse..... Other: **TAXES PAID** State income taxes - 1/13 payment on 2012 state estimate..... State income taxes - paid with 2012 state return..... State income taxes - paid for prior years and/or to other states.....

ORGANIZER Page 58 Tax Organizer 2013 1040 US TAXES PAID (continued) 2013 Amount 2012 Amount City/local income taxes - 1/13 payment on 2012 city/local estimate...... City/local income taxes - paid with 2012 city/local extension..... Use taxes paid on 2013 purchases..... Use taxes paid on 2012 state return Sales tax on autos not included above..... Real estate taxes - principal residence..... Real estate taxes - property held for investment..... Foreign income taxes..... **Attach Tax Notice** Personal property taxes (including automobile fees in some states) . . . INTEREST PAID Home mortgage interest and points paid: Attach Forms 1098 Home mortgage interest not on Form 1098 (include name, SSN, & address of payee): Points not reported on Form 1098: Mortgage insurance premiums on post 12/31/06 contracts..... Investment interest (interest on margin accounts): Passive interest CASH CONTRIBUTIONS NOTE: No deduction is allowed for cash or check contributions unless the donor maintains a bank record, or a written communication from the donee, showing the name of the organization, contribution date(s), and contribution amount(s). Volunteer expenses (out-of-pocket)..... Number of charitable miles..... NONCASH CONTRIBUTIONS NOTE: No deduction is allowed for contributions of clothing and household items that are not in good used condition or better, in addition, a deduction for any item with minimal monetary value may be denied. MISCELLANEOUS DEDUCTIONS Tax return preparation fee Investment expenses Estate tax, section 691(c)..... Unreimbursed employee expenses: Other:

					Page	3 5
2013	1040	US	Client Information		1	
	_	ER & ASS r Suite 230	SOCIATES	Tax Return Ap	pointment	
	IRVINE,	CA 92618		Date:		
	Telepho	ne number	: (949) 857-0404	Time:		
	Fax num		(949) 266-8019	Location:		
	E-mail a	ddress:	sharon@maslercpa.com			
CLIEN	IT INFORI	MATION				
E.I.	Filing status	s (table)				
Filing			and lived with spouse			
Status						
	Year spouse	e died, if qual	ifying widow(er) (2011 or 2012)		Filing Status	
		e died, if quali and initial			Filing Status	
	First name					
	First name a	and initial			1 = Single 2 = Married filing joint 3 = Married filing sepa	rate
	First name a Last name . Title/suffix . Social secur	and initial			1 = Single 2 = Married filing joint 3 = Married filing sepa 4 = Head of household	
Status	First name a Last name . Title/suffix . Social secur Occupation.	and initial			1 = Single 2 = Married filing joint 3 = Married filing sepa	

2013	1040	US/CA	Client Information (continued)	1 p2
			Please add, change or delete information for 2013.	
CLIEN	IT INFO	RMATION		
Taxpayer Contact Information	Work phon Work exter Daytime phon Mobile phon	ne	Daytin 1 = 2 = 3 =	ne Phone Work Home Mobile
	Fax number	er Iress		
Spouse Contact Information	Home phon Work phon Work exter Daytime phon Mobile phon Pager num Fax number	nensionnone (table)		
CA State Information	1=PMB no NOTE: If th	lress mestic partner ee table) in address e taxpayer's m w and enter th nt Information.	ailing address includes a private mail box number (PMB), indicate this e PMB number in the "Apartment Number" field in the Address area of	
				1 p2

2013 1040 US Dependents 2

Please add, change or delete information for 2013.

DEPENDENTS

Dependent	Dependent	
		Type of Dependent
		1 Obital their south and a
		1 = Child living w/taxpayer 2 = Child not living w/taxpayer
		2 = Child not living w/taxpayer 3 = Dependent other than child
		4 = Head of household only, not a dependent
		5 = Earned income credit only,
		not a dependent
Dependent	Dependent	Earned Income Credit
		1 = When applicable (default) 2 = Student age 19 to 23
		3 = Disabled
		4 = Force 5 = Suppress
		5 = Suppless
		NOTE: If you claim the earned income credit, please provide
		proof that your child is a res-
		ident of the U.S. This proof is typically in the form of:
Dependent	ı Dependent	
	,	 School records or statement Landlord or property man-
		agement statement
		3. Health care provider statement
		4. Medical records
		5. Child care provider records6. Placement agency statement
		Social service records or
		statement 8. Place of worship statement
		Indian tribe office statement
		10. Employer statement
Dependent	. Dependent	
Веренцент	Веренцент	NOTE: If your child is disabled,
		please provide one of the fol- lowing forms of proof of disa-
		bility:
		~ty.
		1. Doctor statement
		1. Doctor statement 2. Other health care provider
		1. Doctor statement 2. Other health care provider statement 3. Social services agency or
		Doctor statement Other health care provider statement
		1. Doctor statement 2. Other health care provider statement 3. Social services agency or
		1. Doctor statement 2. Other health care provider statement 3. Social services agency or
	Dependent Dependent Dependent	Dependent Dependent

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2013	1040	US Miscellaneous Questions	
	lf aı	ny of the following items pertain to you or your spouse for 2013, please che appropriate box and provide additional information if necessary.	ck the
YES	NO	PERSONAL INFORMATION Did your marital status change during the year?	
		Did your address change during the year?	
		Could you be claimed as a dependent on another person's tax return for 2013?	
		DEPENDENTS Were there any changes in dependents?	
		Were any of your unmarried children who might be claimed as dependents 19 years of age older if student) at the end of 2013?	or older (or 24 years or
		Did you have any children under age 19 or full-time students under age 24 at the end of 20 income in excess of \$1,000, or total investment income in excess of \$2,000?	13, with interest and dividend
		INCOME	
		Did you receive unreported tip income of \$20 or more in any month?	
Ш		Did you cash any Series EE U.S. savings bonds issued after 1989 and pay qualified higher yourself, your spouse, or your dependents?	education expenses for
		Did you receive any disability income?	
		Did you have any foreign income or pay any foreign taxes?	
		PURCHASES, SALES AND DEBT Did you start a business or farm, purchase rental or royalty property, or acquire an interest S corporation, trust, or REMIC?	in a partnership,
		Did you purchase or dispose of any business assets (furniture, equipment, vehicles, real espersonal assets to business use?	state, etc.), or convert any
		Did you buy or sell any stocks, bonds or other investment property in 2013?	
		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, v cell energy sources?	vind, geothermal or fuel
		Did you have any debts cancelled or forgiven?	
		Does anyone owe you money which has become uncollectible?	

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2013	1040	US	Miscellaneous Questions (continued)
	lf aı	ny of the fo appi	Ilowing items pertain to you or your spouse for 2013, please check the opriate box and provide additional information if necessary.
YES	NO	RETIR	EMENT PLANS
		Did you re	eceive a distribution from a retirement plan (401(k), IRA, SEP, SIMPLE, Qualified Plan, etc.)?
		Did you m	nake a contribution to a retirement plan (401(k), IRA, SEP, SIMPLE, Qualified Plan, etc.)?
		Did you tr	ansfer or rollover any amount from one retirement plan to another retirement plan?
		EDUC	ATION
		,	eceive a distribution from an Education Savings Account or a Qualified Tuition Program?
		Did you, y vocationa	rour spouse, or a dependent incur any tuition expenses that are required to attend a college, university, or I school?
			ZED DEDUCTIONS
		Did you ir	ncur a loss because of damaged or stolen property?
		Did you w	ork out of town for part of the year?
		Did you u	se your car on the job (other than to and from work)?
			ATED TAXES
		Did you a	pply an overpayment of 2012 taxes to your 2013 estimated tax (instead of being refunded)?
		If you hav refunded)	re an overpayment of 2013 taxes, do you want the excess applied to your 2014 estimated tax (instead of being ?
		Do you ex	spect your 2014 taxable income and withholdings to be different from 2013?
			LLANEOUS ant to allocate \$3 to the Presidential Election Campaign Fund?
		Does your	spouse want to allocate \$3 to the Presidential Election Campaign Fund?
		May the II	RS discuss your tax return with your preparer?
		Did you had	ave an interest in or signature or other authority over a financial account in a foreign country, such as a bank securities account, or other financial account?

ORGANIZER Page 64 Miscellaneous Questions (continued) 2013 1040 US If any of the following items pertain to you or your spouse for 2013, please check the appropriate box and provide additional information if necessary. MISCELLANEOUS (continued) NO YES Did you receive a distribution from, or were you the grantor of, or transferor to, a foreign trust? Was your home rented out or used for business? Did you have a medical savings account (MSA), a Medicare Advantage MSA, or acquire an interest in an MSA or a Medicare Advantage 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? Did you incur moving expenses due to a change of employment? 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 \$14,000, or any gifts to a trust?

ORGANIZER Page 65 2013 1040 US **Miscellaneous Questions** If any of the following items pertain to you or your spouse for 2013, please check the appropriate box and provide additional information if necessary. Did your marital status change during the year? Did your address change during the year? Could you be claimed as a dependent on another person's tax return? Were there any changes in dependents? Did you receive unreported tip income of \$20 or more in any month? Did you receive any disability income? Did you buy or sell any stocks, bonds or other investment property? 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 receive a distribution from or make a contribution to a retirement plan (401(k), IRA, etc.)? Did you transfer or rollover any amount from one retirement plan to another? Did you convert part or all of your traditional/SEP/SIMPLE IRA to a Roth IRA? Did you, your spouse, or a dependent incur any tuition expenses that are required to attend a college, university, or vocational school? Did you incur a loss because of damaged or stolen property? Did you use your car on the job (other than to and from work)? May the IRS discuss your tax return with your preparer? Was your home rented out or used for business? Were you notified or audited by either the IRS or the State taxing agency?

ORGANIZER Page 66 US/CA Direct Deposit & Estimates (Form 1040 ES) 3,6 2013 1040 Please enter all pertinent 2013 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..... 1=direct deposit CA refund to one account, 2=split deposit between two accounts. 1=electronic payment of CA state tax balance due..... **BANK INFORMATION** Type of Type of Percent to Account Invest. Deposit Name of Bank **Routing Number** (Table 1) (Table 2) $(x\dot{x}.xx)$ **Account Number** 2013 ESTIMATED TAX / 1040-ES (6) 2013 **Federal Amount Paid Date Paid Voucher Amount** Overpayment applied from 2012..... 3rd quarter payment..... 4th quarter payment... Additional Estimated Tax Payments Paid with extension..... 2013 State **Amount Paid Date Paid Voucher Amount** Overpayment applied from 2012..... 2nd quarter payment. 3rd quarter payment..... 4th quarter payment. Additional Estimated Tax Payments Paid with extension Type of Account Type of Investment Checking or savings (default)
Taxpayer's IRA (next year limits)
Spouse's IRA (next year limits)
Health savings account (HSA)
Archer MSA 6 = Coverdell savings account (ESA) 7 = Other 8 = Taxpayer's IRA (current year limits) 9 = Spouse's IRA (current year limits) 1 = Savings 2 = Checking

3, 6

ORGANIZER Page 67 Direct Deposit & Estimates (Form 1040 ES) (cont.) 2013 1040 US 7.1 Please enter all pertinent 2013 information. APPLICATION OF 2013 OVERPAYMENT (7.1) If you have an overpayment of 2013 taxes, do you want the excess refunded? or applied to 2014 estimate?... Other (please explain): 2014 ESTIMATED TAX INFORMATION Do you expect your 2014 taxable income to be different from 2013? Yes If "yes" explain any differences in income, deductions, dependents, etc.: Do you expect your 2014 withholding to be different from 2013?..... Yes If "yes" explain any differences: 7.1

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US/CA Wages, Pensions, Gambling Winnings 10, 13.1, 13.2 2013 1040 Please enter all pertinent 2013 amounts & attach all W-2, W-2G and 1099-R forms. Last year's amounts are provided for your reference. WAGES, SALARIES, TIPS (10) 1=retirement Tax Withheld Wages, Tips, plan (Box 13) Other 2012 Social No. Name of Employer (Box c) Federal Medicare State SDI Compensation Wages Security (Box 4) (Box 2) (Box 6) (Box 17) (Box 14) 1=spouse (Box 1) PENSIONS, IRA DISTRIBUTIONS (13.1) Distribution code #2 Tax Withheld Value of Distribution code #1 Gross Taxable all IRAs 2012 No. Name of Payer Distribution Amount I=IRA/SEP/SIMPLE Federal State Distribution (Box 2a) (Box 1) (Box 4) (Box 12) 12/31/13 =spouse GAMBLING WINNINGS (W-2G) (13.2) Tax Withheld Gross Winnings 2012 No. Name of Payer 1=spouse Winnings (Box 1) Federal (Box 4) State (Box 15) GAMBLING LOSSES & WINNINGS (NON W-2G) (13.2)2013 Amount 2012 Amount Total gambling losses Winnings not reported on Form W-2G.....

2013	1040	US	Interest & Dividend Income	11 12
			initorost a biviacita intocino	

Please enter all pertinent 2013 amounts & attach all 1099-INT, 1099-OID and 1099-DIV forms. Last year's amounts are provided for your reference.

INTEREST INCOME (11)

				Interest Income	:	Tax-Exem	pt Interest	Farly	
No.	Name of Payer (also enter SSN & address for seller-financed mortgage)	1=taxpayer 2=spouse	Banks, S&Ls, C/Us, etc. (Box 1)	Seller- Financed Mtg. (Box 1)	U.S. Bonds, T-Bills (Box 3)	Total Municipal Bonds	In-state Municipal Bonds	Early Withdrawal Penalty (Box 2)	2012 Interest

DIVIDEND INCOME (12)

	No. Name of Payer		Dividend Income				Tax-Exem	pt Interest	ı	ı
No.			Total Ordinary Dividends (Box 1a)	Qualified Dividends (Box 1b)	Total Capital Gain Distrib. (Box 2a)	U.S. Bonds (% or amt.)	Total Municipal Bonds	In-state Muni-bonds (% or amt.)	Foreign Tax Paid (Box 6)	2012 Dividends

2013	1040	US	Miscellaneous Income	14 1	

Please enter all pertinent 2013 amounts and attach all 1099-MISC, SSA-1099, and RRB-1099 forms. Last year's amounts are provided for your reference.

MISCELLANEOUS INCOME	2013 A	mount	2012 Amount		
	Taxpayer	Spouse	Taxpayer	Spouse	
Social security benefits (SSA-1099, box 5)					
Medicare premiums paid (SSA-1099)					
Tier 1 RR retirement benefits (RRB-1099, box 5)					
1=lump-sum election for SS benefits					
Alimony received					
Taxable scholarships and fellowships					
Jury duty pay					
Household employee income not on W-2					
Excess minister's allowance					
Alaska permanent fund dividends					
Income from rental of personal property					
Income subject to S/E tax:					
Other income (1099-MISC, box 3, 8)			· <u></u>		
			· <u></u>		
TAY MITHIELD ()					
TAX WITHHELD (not entered elsewhere)					
Federal income tax withheld					
State income tax withheld					
Local income tax withheld					

2013	1040	US	State & Local Tax Refunds / Unemployment Compensation	14	4.2

Please add, change or delete 2013 information as appropriate. Be sure to attach all 1099-G forms.

STATE AND LOCAL TAX REFUNDS / UNEMPLOYMENT COMPENSATION (Form 1099-G)

UNEMPLO	DYMENT COMPENSATION (Form 1099-G)	2013 1099-G Amount	
	Name of payer		
	1=spouse.		
	Unemployment compensation:		
	Total received (Box 1)		
	2013 Overpayment repaid		
	State and local refunds:		
	State and local income tax refund, credit or offsets (Box 2)		
	1=city or local income tax refund		
	Tax year for box 2 if not 2012 (Box 3).		
	Federal income tax withheld (Box 4).		
No.			
110.	RTAA payments (Box 5)		
	Taxable grants:		
	Federal taxable amount (Box 6)		
	State taxable amount, if different		
	Farm amounts:		
	Agriculture payments (Box 7)		
	1=agriculture payments are from conservation reserve program		
	Market gain (Box 9)		
	Number of farm		
	1=box 2 is trade or business income (Box 8)		
	State income tax withheld (Box 11)		
	Name of payer		
	1=spouse		
	Unemployment compensation:		
	Total received (Box 1)		
	2013 Overpayment repaid		
	State and local refunds:		
	State and local income tax refund, credit or offsets (Box 2)		
	1=city or local income tax refund		
	Tax year for box 2 if not 2012 (Box 3)		
	Federal income tax withheld (Box 4)		
No.			
	RTAA payments (Box 5)		
	RTAA payments (Box 5)		
	Taxable grants:		
	Taxable grants: Federal taxable amount (Box 6)		
	Taxable grants: Federal taxable amount (Box 6) State taxable amount, if different		
	Taxable grants: Federal taxable amount (Box 6) State taxable amount, if different Farm amounts:		
	Taxable grants: Federal taxable amount (Box 6) State taxable amount, if different Farm amounts: Agriculture payments (Box 7)		
	Taxable grants: Federal taxable amount (Box 6) State taxable amount, if different Farm amounts: Agriculture payments (Box 7). 1=agriculture payments are from conservation reserve program		
	Taxable grants: Federal taxable amount (Box 6) State taxable amount, if different. Farm amounts: Agriculture payments (Box 7). 1=agriculture payments are from conservation reserve program Market gain (Box 9).		
	Taxable grants: Federal taxable amount (Box 6) State taxable amount, if different. Farm amounts: Agriculture payments (Box 7). 1=agriculture payments are from conservation reserve program. Market gain (Box 9). Number of farm.		
	Taxable grants: Federal taxable amount (Box 6) State taxable amount, if different. Farm amounts: Agriculture payments (Box 7). 1=agriculture payments are from conservation reserve program Market gain (Box 9).		

2013	1040	US	Education Distributions (ESA's and QTP's)	14.3

Please enter all pertinent 2013 amounts and attach all 1099-Q forms. Enter qualified education expenses below that are not entered elsewhere.

Last year's amounts are provided for your reference.

LOH O AI	ND QTP'S (Form 1099-Q)	2013 Amount	2012 Amount
	Name of payer		
	1=spouse		
	Qualified expenses:		
	Higher education (net of nontaxable benefits)		
	Elementary & secondary education (net of nontaxable benefits).		
	Form 1099-Q:		
NI	Gross distributions (Box 1)		
No.	Earnings (Box 2)		
	Basis (Box 3).		
	Rollover: 1=nontaxable, 2=taxable (Box 4)		
	Distribution type: 1=private 529, 2=state 529, 3=Coverdell ESA (Box 5)		
	ESA's only:		
	2013 contributions to this ESA		
	Value of this account at 12/31/13 (plus outstanding rollovers)		
	Basis in this ESA as of 12/31/12		
	Name of payer		
	1=spouse.		
	Qualified expenses:		
	Higher education (net of nontaxable benefits)		
	Elementary & secondary education (net of nontaxable benefits).		
	Form 1099-Q:		
	Gross distributions (Box 1)		
No.	Earnings (Box 2)		
	Basis (Box 3).		
	Rollover: 1=nontaxable, 2=taxable (Box 4)		
	Distribution type: 1=private 529, 2=state 529, 3=Coverdell ESA (Box 5)		
	ESA's only:		
	2013 contributions to this ESA		
	Value of this account at 12/31/13 (plus outstanding rollovers)		
	Basis in this ESA as of 12/31/12		
	Name of payer		
	1=spouse		
	Qualified expenses:		
	Higher education (net of nontaxable benefits)		
	Elementary & secondary education (net of nontaxable benefits).		
	Form 1099-Q:		
No.	Gross distributions (Box 1)		
No.	Earnings (Box 2)		
	Basis (Box 3).		
	Rollover: 1=nontaxable, 2=taxable (Box 4)		
	Distribution type: 1=private 529, 2=state 529, 3=Coverdell ESA (Box 5)		
	ESA's only:		
	2013 contributions to this ESA		
	Value of this account at 12/31/13 (plus outstanding rollovers)		
	Basis in this ESA as of 12/31/12		

Page 73 ORGANIZER US/CA Business Income (Schedule C) 2013 1040 No. 16 Please enter all pertinent 2013 amounts. Last year's amounts are provided for your reference. **GENERAL INFORMATION** Principal business/profession..... Principal business code..... Business name, if different from Form 1040..... Business address, if different from Form 1040... City, if different from Form 1040..... State, if different from Form 1040..... ZIP code, if different from Form 1040..... Employer identification number..... Accounting method: 1=cash, 2=accrual..... Inventory method: 1=cost, 2=lower cost/market, 3=other..... 1=change of inventory method 1=spouse, 2=joint 1=first Schedule C filed for this business..... If required to file Form(s) 1099, did you or will you file all required Form(s) 1099: 1=yes, 2=no. 1=not subject to self-employment tax..... 1=did not "materially participate"..... 1=personal services is not a material income producing factor.....

1=minister's Schedule C		
1=single member limited liability company		
CA FTB Form 3805V:		
1=eligible small business		
Qualified new business year: 1=1st, 2=2nd, 3=3rd		
Principle business code (SIC 1987)		
INCOME	2012 Amazzut	2012 Amazunt
	2013 Amount	2012 Amount
Gross receipts or sales (Form 1099-MISC, box 7)		
Other income:		
Other income.		
0007.05.00000.001.0		
COST OF GOODS SOLD		
Inventory at beginning of the year		
Purchases		
Cost of items for personal use.		
Cost of labor		
Materials and supplies		
Other costs:		
Inventory at end of the year		

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2013	1040	IJς	Business Income (Schedule C) (cont.)	No.	16
ZUI3	1040	l US	Dusiness income (schedule C) (cont.)		1 10 n2

EXPENSES	2013 Amount	2012 Amount
Accounting.	2010741104114	2012 Juniodini
Advertising		
<u> </u>		
Answering service		
Bad debts from sales or service		
Bank charges		
Car and truck expenses (not entered elsewhere)		
Commissions		
Contract labor		
Delivery and freight		
Dues and subscriptions		
Employee benefit programs		
Insurance (other than health)		
Mortgage interest (paid to banks, etc.)		
Other interest (not entered elsewhere)		
Janitorial.		
Laundry and cleaning.		
Legal and professional.		
Miscellaneous.		
Office expense		
Outside services.		
Parking and tolls		
Pension and profit sharing plans - contributions		
Pension and profit sharing plans - admin. and education costs		
Postage		
Printing		
Rent - vehicles, machinery, & equipment (not entered elsewhere)		
Rent - other		
Repairs		
Security		
Supplies		
Taxes - real estate		
Taxes - payroll		
Taxes - sales tax included in gross receipts		
Taxes - other (not entered elsewhere)		
Telephone		
Tools		
Travel		
Total meals and entertainment in full (50%)		
Department of Transportation meals in full (80%)		
Uniforms		
Utilities		
Wages		
Other expenses:		
NOTE: If you purchased or disposed of any business ass		22

16 p2

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2013 | 1040 | US | Capital Gains & Losses (Schedule D)

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If you sold any stocks, bonds, or other investment property in 2013, please list the pertinent information for each sale below or provide a spreadsheet file with this information.

Be sure to attach all 1099-B forms and brokerage statements.

No.	Quantity	Description of Property (Box 8)	Date Acquired (Box 1b)	Date Sold (Box 1a)	Sales Price (gross or net) (Box 2)	Cost or Basis (Box 3)	Blank=basis rep. to IRS, 1=nonrec. security (Box 6)	Expenses of Sale (if gross sales price entered)	Federal Income Tax Withheld (Box 4)
									17

No.	escription of ate acquired ate sold (m/d ross profit raturrent year profit raturrent yea	Property. (m/d/y). Itio (.xxxx). rincipal payments (-1 if none). Property. (m/d/y). Itio (.xxxx). rincipal payments (-1 if none). Property. (m/d/y). Itio (.xxxx). rincipal payments (-1 if none). Property. (m/d/y). Itio (.xxxx). rincipal payments (-1 if none). Property. (m/d/y). Itio (.xxxx). rincipal payments (-1 if none). Property. (m/d/y). Itio (.xxxx). Itio (.xxxxx). Itio (.xxxxxx). Itio (.xxxxx). Itio (.xx	2013 Amount	ed for your reference 2012 Ar	
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		l/y)			
	ate sold (m/d				
[C	ate sold (m/d ross profit rat	rincipal payments (-1 if none)			

Page 77

				1490 //
2013	1040	US	Sale of Home & Moving Expenses	17, 27

If you sold your home or moved in 2013, please complete the information below. For the sale of home, please provide Form 1099-S and closing statements from the purchase and sale of your home.	
SALE OF HOME (17)	
Description of property (Box 3). Date acquired (m/d/y). Date sold (m/d/y) (Box 1). Sales price (Box 2). 1=sale of home. 1=owned and used property as main home for at least 2 of 5 years before sale. 1=first-time homebuyer credit was previously taken on this home. 1=business use in year of sale. Number of days after December 31, 2008 that home was not used as principal residence.	- - - -
Adjusted Basis Original cost	
Adjusted basis	}
Expenses of Sale (Commissions, advertising fees, legal fees, and loan charges paid by the seller) Total expenses of sale.	
Reduced Exclusion	
Please complete the following information if due to a change in health, place of employment, or unforeseen circumstances you either: a) Did not meet the ownership and use tests *, or b) Excluded gain on the sale of another home after May 6, 1997. If excl. gain from another home after May 6, 1997 & within 2 yrs. of current sale, enter date of sale (m/d/y) 1=sale due to change in health, employment or unforeseen circumstances. Days used as main home - taxpayer. Days property owned - taxpayer. Days property owned - spouse.	
MOVING EXPENSES (27) (If you moved because of a change in the location of your job)	
1=spouse, 2=joint	
(* owned and used property as main home for at least 2 of 5 years before sale)	

17, 27

Б.						
Plea	ase enter all per	tinent 2013 amour	nts. Last year's amounts ar	e provided fo	r your reference	э.
GENERA	AL INFORMAT	ION	201	3 Amount	2012 Am	ount
Description of	of property				Type of Pr	operty
	SS					
City					1 = Single Family 2 = Multi-Family F	Residence Residence
State					3 = Vacation/Shor	rt-Term Renta
					4 = Commercial 5 = Land	
Type of prope	erty (see table)				6 = Royalties 7 = Self-Rental	
					7 = Self-Refital	
Number of da	ays rented					
Percentage of owr if not 100% (.xxxx	nership x) ant occupancy		1=did not actively p	participate		
if not 100% (.xxxx	nant occupancy x)		1=real estate profe	ssional		
1=spouse, 2=	=joint		1=rental other than	real estate.		
			1=investment			
1=nonpassive acti 2=passive royalty	ivity,		1=single member limited liability company			
If required to	file Form(s) 1099, d	id you or will you file a	II required Form(s) 1099: 1=yes, 2	=no		
CA FTB Form	n 3805V:					
Qualified	new business year:	1, 2 or 3				
Principle	business code (SIC	1987)				
INCOME			201	3 Amount	2012 Am	ount
DIRECT I	EXPENSES at expenses are related	=	ctivity. These include rental agency	fees, advertisinç	g, and office supplie	9S.
DIRECT I NOTE: Direct Advertising. Association d	EXPENSES tt expenses are relat	ed only to the rental ad	ctivity. These include rental agency	fees, advertisinç	g, and office supplie	es.
DIRECT I NOTE: Direct Advertising Association d Auto and trav	EXPENSES It expenses are related It is a second to the sec	ed only to the rental ad	ctivity. These include rental agency	fees, advertisinç	g, and office supplie	es.
DIRECT I NOTE: Direct Advertising Association d Auto and trav Cleaning and	EXPENSES It expenses are related the state of the state o	ed only to the rental ad	ctivity. These include rental agency	fees, advertising	g, and office supplie	es.
DIRECT I NOTE: Direct Advertising. Association d Auto and trav Cleaning and Commissions	EXPENSES It expenses are related the second	ed only to the rental ad	ctivity. These include rental agency	fees, advertisinç	g, and office supplie	9S.
DIRECT I NOTE: Direct Advertising Association d Auto and trav Cleaning and Commissions Gardening	EXPENSES at expenses are related dues vel (not entered else maintenance	ed only to the rental ad	ctivity. These include rental agency	fees, advertisinç	g, and office supplie	es.
DIRECT I NOTE: Direct Advertising Association d Auto and trav Cleaning and Commissions Gardening Insurance	EXPENSES at expenses are related dues vel (not entered else maintenance	ed only to the rental ad	ctivity. These include rental agency	fees, advertisinç	g, and office supplie	es.
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DIRECT I NOTE: Direct Advertising. Association of Auto and trav Cleaning and Commissions Gardening. Insurance. Legal and pro- Licenses and Management	EXPENSES It expenses are related the expenses are related to expenses a	ed only to the rental ad	ctivity. These include rental agency	fees, advertisino	g, and office supplie	9S.
DIRECT I NOTE: Direct Advertising. Association d Auto and trav Cleaning and Commissions Gardening. Insurance. Legal and pro Licenses and Management Miscellaneous	EXPENSES It expenses are related lives It expenses are related lives It maintenance It maintenan	ed only to the rental ad	ctivity. These include rental agency	fees, advertisino	g, and office supplie	es.
DIRECT I NOTE: Direct Advertising. Association d Auto and trav Cleaning and Commissions Gardening. Insurance. Legal and pro Licenses and Management Miscellaneous Mortgage inter	EXPENSES It expenses are related lives It maintenance It maintenance It permits It per	ed only to the rental adwining where).	ctivity. These include rental agency	fees, advertisino	g, and office supplie	es.
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DIRECT I NOTE: Direct Advertising. Association d Auto and trav Cleaning and Commissions Gardening. Insurance. Legal and pro Licenses and Management Miscellaneous Mortgage inte Qualified mor Excess mortg Other interest Painting and Pest control.	EXPENSES It expenses are related to the second tension of the sec	ed only to the rental adwining where). etc.)	ctivity. These include rental agency	fees, advertising	g, and office supplie	es.
DIRECT I NOTE: Direct Advertising Association d Auto and trav Cleaning and Commissions Gardening Insurance Legal and pro Licenses and Management Miscellaneous Mortgage inte Qualified mor Excess mortg Other interest Painting and Pest control Plumbing and	EXPENSES It expenses are related to the second to the sec	ed only to the rental adwining where). etc.). miums	ctivity. These include rental agency	fees, advertising	g, and office supplie	es.
DIRECT I NOTE: Direct Advertising. Association d Auto and trav Cleaning and Commissions Gardening. Insurance. Legal and pro Licenses and Management Miscellaneous Mortgage inte Qualified mor Excess mortg Other interest Painting and Pest control. Plumbing and Repairs.	EXPENSES It expenses are related to the service of	ed only to the rental adwining where). etc.). miums.	ctivity. These include rental agency	fees, advertising	g, and office supplied	PS.
DIRECT I NOTE: Direct Advertising. Association d Auto and trav Cleaning and Commissions Gardening. Insurance. Legal and pro Licenses and Management Miscellaneous Mortgage inte Qualified mor Excess mortg Other interest Painting and Pest control. Plumbing and Repairs. Supplies. Taxes - real e	EXPENSES It expenses are related to the second content of the sec	ed only to the rental adwining where)	ctivity. These include rental agency	fees, advertising	g, and office supplied	PS.
DIRECT I NOTE: Direct Advertising. Association d Auto and trav Cleaning and Commissions Gardening. Insurance. Legal and pro Licenses and Management Miscellaneous Mortgage inte Qualified mor Excess mortg Other interest Painting and Pest control. Plumbing and Repairs. Supplies. Taxes - real e	EXPENSES It expenses are related to the second content of the sec	ed only to the rental adwining where). etc.). miums	ctivity. These include rental agency	fees, advertisino	g, and office supplied	PS.
DIRECT I NOTE: Direct Advertising. Association d Auto and trav Cleaning and Commissions Gardening. Insurance. Legal and pro Licenses and Management Miscellaneous Mortgage inte Qualified mor Excess mortg Other interest Painting and Pest control. Plumbing and Repairs. Supplies. Taxes - real e Taxes - other	EXPENSES It expenses are related lives It expenses are related lives It well (not entered else li maintenance) It permits It permits It permits It permits It (paid to banks, rtgage insurance pregage interest) It (not entered elsew decorating) It (not entered elsew destate)	ed only to the rental adwinds where)	ctivity. These include rental agency	fees, advertising	g, and office supplie	95.
DIRECT I NOTE: Direct Advertising Association d Auto and trav Cleaning and Commissions Gardening Insurance Legal and pro Licenses and Management Miscellaneous Mortgage inte Qualified mor Excess mortg Other interest Painting and Pest control Plumbing and Repairs Supplies Taxes - real e Taxes - other Telephone Utilities	EXPENSES It expenses are related less It expenses are related less It expenses are related less It maintenance It maintenance It permits It permits It permits It (not entered elsew decorating) It delectrical It estate It (not entered elsew decorating)	ed only to the rental adwining where). etc.). miums	ctivity. These include rental agency	fees, advertising	g, and office supplie	PS.
DIRECT I NOTE: Direct Advertising. Association d Auto and trav Cleaning and Commissions Gardening. Insurance. Legal and pro Licenses and Management Miscellaneous Mortgage inte Qualified mor Excess mortg Other interest Painting and Pest control. Plumbing and Repairs. Supplies. Taxes - real e Taxes - other Telephone. Utilities.	EXPENSES It expenses are related less It expenses are related less It expenses are related less It maintenance It maintenance It permits It permits It permits It (not entered elsew decorating) It delectrical It estate It (not entered elsew decorating)	ed only to the rental adwinds where). etc.). miums	ctivity. These include rental agency	fees, advertising	g, and office supplied	PS.

Page 79 ORGANIZER Rental & Royalty Income (Sch. E) (cont.) 2013 1040 US No. 18 p2 Please enter all pertinent 2013 amounts. Last year's amounts are provided for your reference. The indirect expense column should only be used for vacation homes or less than 100% tenant occupied rentals. **OIL AND GAS** Production type (preparer use only)..... Cost depletion..... Percentage depletion rate or amount State cost depletion, if different (-1 if none)..... State % depletion rate or amount, if different (-1 if none)..... **VACATION HOME** Number of days personal use Number of days owned (if optional method elected)..... INDIRECT EXPENSES NOTE: Indirect expenses are related to operating or maintaining the dwelling unit. These include repairs, insurance, and utilities. Association dues Auto and travel (not entered elsewhere)..... Cleaning and maintenance..... Gardening. Legal and professional fees..... Management fees Mortgage interest (paid to banks, etc.).... Qualified mortgage insurance premiums Other interest (not entered elsewhere)..... Painting and decorating..... Plumbing and electrical..... Repairs..... Taxes - real estate Taxes - other (not entered elsewhere)..... Wages and salaries. Other:

ORGANIZER Page 80 US/CA Farm Income (Schedule F/Form 4835) 2013 1040 No. 19 Please enter all pertinent 2013 amounts. Last year's amounts are provided for your reference. **GENERAL INFORMATION** Principal product Employer ID number..... Accounting method: 1=cash, 2=accrual 1=spouse, 2=joint 1=crop insurance proceeds election. Received applicable subsidy this year: 1=yes, 2=no..... If required to file Form(s) 1099, did you or will you file all required Form(s) 1099: 1=yes, 2=no. 1=did not "materially participate" (Schedule F only)..... 1=did not actively participate (Farm rental only) 1=real estate professional (Farm rental only)..... 1=single member limited liability company..... % of ownership if not 100% (.xxxx) (Farm rental only) CA FTB Form 3805V: 1=eligible small business..... Qualified new business year: 1=1st, 2=2nd, 3=3rd..... Principle business code (SIC 1987)..... **FARM INCOME** Cash method: 2013 Amount 2012 Amount Sales of livestock and other resale items..... Cost or basis of livestock or other resale items..... Sales of products raised..... Accrual method: Sales of livestock, produce, etc. Beginning inventory of livestock, etc..... Cost of livestock, etc. purchased..... Ending inventory of livestock, etc..... Other farm income: Taxable cooperative distributions Total agricultural program payments (other than CRP)..... Taxable agricultural program payments (other than CRP)..... Taxable conservation reserve program payments Total commodity credit loans forfeited or repaid..... Taxable commodity credit loans forfeited or repaid..... Total crop insurance proceeds received in 2013..... Taxable crop insurance proceeds received in 2013..... Taxable crop insurance proceeds deferred from 2012..... Custom hire (machine work) income not included above.....

2013	1040	US	Farm Income (Sch. F/For	No.	19 p2				
	Please enter all pertinent 2013 amounts. Last year's amounts are provided for your reference.								
FAR	RM INCOM	ME (conti	nued)						
	income:	(**************************************		2013 Amount	2012 Amo	unt			
Other	income.		Г	2013 AMOUNT	2012 AIII0	unt			
E 4 E		NOFO							
	RM EXPE								
	•	· ·	ered elsewhere)						
	•	•							
		•							
	•								
Freigh	nt and trucking	g							
Gasol	ine, fuel, and	oil							
Insura	ance (other th	an health)	· · · · · · · · · · · · · · · · · · ·						
_	-	-	, etc.)						
Other	interest (not	entered elsev	vhere)						
			tributions						
			- admin. and education costs equipment (not entered elsewhere)						
)						
	•	-							
Suppl	ies purchased								
Taxes	(not entered	elsewhere)							
			ne						
-		luctive period	expenses (also enter below)						
Other	expenses:		Г						
				-					
		NOTE: I	f you purchased or disposed of any business a	assets, please complete Sheet	22.				
				, , , , , , , , , , , , , , , , , , , ,					
						19 p2			

ORGAN	RGANIZER Page 82									
20	13	1040	040 US Partnership and S corporation Information 20.1,20.							
F				or delete 2013 in		ate. Be sure to attach all So	chedule K-1s.			
No.	Employer Tax Shelter Add						Additional Amounts Invested in Partnership			
S No.	S CO		ON INFO	DRMATION (2	Employer Identification	Tax Shelter Registration	Additional Amounts Invested in			
					Number	Number	S corporation			
							20.1,20.2			

Page 83 ORGANIZER **Estate or Trust and REMIC Information** US 2013 1040 Please add, change or delete 2013 information as appropriate. Be sure to attach all Schedule K-1s and Schedule Qs. **ESTATE OR TRUST INFORMATION (20.3)** Employer Tax Shelter Registration Number No. Name of Estate or Trust Identification Number **REMIC INFORMATION (20.4)** Employer Identification No. Name of REMIC Number

20.3,20.4

JRGANIZER				Page 04
2013	1040	US	Asset Disposition List	22

If you disposed of any business assets in 2013, please enter date sold, sales price, and expenses of sale. For real estate transactions, be sure to attach all 1099-S forms and closing statements.

<u> </u>	·					
No.	Description of Property (Box 3)	Date Placed in Service	Date Sold (Box 1)	Sales Price (Box 2)	Cost or Basis	Expenses of Sale

22

2013 1040 US Asset Acquisition List 22 p2

If you purchased any business assets (furniture, equipment, vehicles, real estate, etc.) or converted any personal assets to business use in 2013, please enter all pertinent information below.

				-		•			
			Prep	arer Use	Only		0 1	Preparer Us	se Only
No.	Description of Property	Related Business or Activity	Form	No. of Form	Category	Date Placed in Service	Cost or Basis	Current Section 179	Method
								22	2 p2

13	1040	US	Vehicle Expenses		No.	22 p
	Please e	nter all pe	ertinent 2013 amounts. Last year's amo	ounts are provided fo	or your reference	
GEN	NERAL IN	FORMA	TION	2013 Amount	2012 Amo	unt
Descr	iption of vehic	:le				
			deduction			
			rt your deduction.			
			ty personal use			
			re than 5% owner.			
			use if changed from 100% personal use			
AUT	ΓΟΜΟΒΙL	E MILEA	AGE			
Total	mileage (for the	he tax year).				
	_	-				
Comn	nuting mileage	e (for the tax	gyear)			
Avera	ige daily round	d-trip commu	ute			
AC1	TUAL EXF	PENSES				
Parkir	ng fees and to	lls (business	s portion only)			
Gasol	ine, lube, oil.					
			al property taxes)			
			on car's value)			
			e C, E & F)			
			tive)			
Value	of employer-	orovided veh	iicle on Form W-2 (2106)			

				1490 07
2013	1040	US	Adjustments to Income	24

Please enter all pertinent 2013 information. Last year's amounts are provided for your reference.

	2013 Amount		2012 A	mount
TRADITIONAL IRA CONTRIBUTIO <u>NS </u>	xpayer	Spouse	Taxpayer	Spouse
RA contributions you made or expect to make 1=maximum) (\$5,500/\$6,500 if 50 or older)				
Contributions made to date				
=covered by plan, 2=not covered				
2013 payments from 1/1/14 to 4/15/14				
ROTH IRA CONTRIBUTIONS				
Roth IRA contributions you made or expect to nake (1=maximum) (\$5,500/\$6,500 if 50 or older).				
Contributions made to date				
<u></u>				
SEP, SIMPLE AND QUALIFIED PLANS (K	EOGH)			
Profit-sharing (25%/1.25) contributions you made or expect to make (1=maximum)				
Money purchase (25%/1.25) contributions you				
made or expect to make (1=maximum)				
Defined benefit contributions you expect to make.				
Self-employed SEP (25%/1.25) contributions you nade or expect to make (1=maximum)				
Plan contribution rate if not .25 (.xxxx)				
ndividual 401k: SE elective deferrals (except Roth) (1=max.)				
ndividual 401k: SE designated Roth contributions (1=max.)				
SIMPLE contributions:				
Self-employed SIMPLE contributions you				
made or expect to make (1=maximum)				
Employer matching rate if not .03 (.xxxx)				
1=nonelective contributions (2%)				
	I			
ADJUSTMENTS TO INCOME				
Self-employed health insurance:				
Total premiums (excluding long-term care)				
Long-term care premiums				
Educator expenses (kindergarten thru grade 12)				
lury duty pay given to employer				
Expenses from rental of personal property				
Other adjustments to income:				
strier asjactmente te income.				
Nimon, said.		Chaus		
Alimony paid: Taxpayer		Spouse		
Recipient's first name				
Recipient's last name		+		
Amount paid	mt·		2012 amt:	
Autoditi pala		J [μοτε aint.	

				<u> </u>	
2013	1040	US	Itemized Deductions	25	

Please enter all pertinent 2013 amounts and attach all 1098 forms. Last year's amounts are provided for your reference.

MEDICAL AND DENTAL EXPENSES

NOTE: Enter self-employed health insurance premiums on Sheet 24 and Medicare insurance premiums on Sheet 14.	2013 Amount	TS	2012 Amount
Prescription medicines and drugs.			
Doctors, dentists and nurses			
Hospitals and nursing homes.			
Insurance premiums not entered elsewhere (excl. LT care & amts. paid w/pre-tax dollars).			
Long-term care premiums - taxpayer			
Long-term care premiums - spouse			
Insurance reimbursement (enter as a positive number)			
Lodging and transportation:		1 1	
Out-of-pocket expenses			
Medical miles driven			
Other medical and dental expenses:			
			
TAXES PAID (State and local withholding and 2013 estimates are aut	tomatic.)		
State income taxes - 1/13 payment on 2012 state estimate			
State income taxes - paid with 2012 state return extension			
State income taxes - paid with 2012 state return.			
State income taxes - paid for prior years and/or to other state			
City/local income taxes - 1/13 payment on 2012 city/local estimate			
City/local income taxes - paid with 2012 city/local extension			
City/local income taxes - paid with 2012 city/local return			
SALES AND USE TAXES PAID			
State and local sales taxes (except autos and special items)			
Use taxes paid on 2013 purchases			
Use taxes paid with 2012 state return			
Sales tax on autos not included above			
Sales tax on boats, aircraft, other special items			
OTHER TAXES PAID			
Real estate taxes - principal residence:			
Real estate taxes - property held for investment			
Personal property taxes (including auto fees in some states. Provide a copy of tax notice)			
Foreign income taxes.			
Other taxes:			

NIZER			T				Page
13	1040	US	Itemized Deductions (continued)			25
INTE	Please e	•	rtinent 2013 amounts. Last year	s amounts are p	rovided for	your referend	ce.
Home	mortgage int	. (Box 1) and	points (Box 2) reported on Form 1098:	2013 Amou	unt TS	s 2012 Aı	mount
_			·				
-			•				
F F F F	Payee's name Payee's SSN Payee's stree Payee's city. Payee's state	or FEIN t address.	ot reported on Form 1098:				
, ,	Amount paid.						
Points	not reported	on Form 109	8:				
_	•		n post 12/31/06 contracts (Box 4) margin accounts):				
			included above (6251)				
	SH CONT :: No deduction from the do	n is allowed	NS for cash or check contributions unless the the name of the organization, contribution	e donor maintains a on date(s), and contr	bank record, or ibution amoun	r a written comm t(s).	unication
	nes, schools, intributions by	-	d other charitable organizations (50% limck:	itation):			
_							
<u>-</u>							
-							
			pocket)				
	ns' organizat Intributions by		al societies, nonprofit cemeteries, and ce ck:	tain private nonoper	ating foundatio	ons (30% limitation	on):
<u>-</u> -							
-				_			
			pocket)				

2013 1040 US/CA Itemized Deductions (continued) 25 p3

Please enter all pertinent 2013 amounts.	Last year's amounts are	e provided for your reference.
--	-------------------------	--------------------------------

ľ	V	O	۸	IC	1.2	21	Н	C	(Ν	ΙT	RI	R	U	ΤI	10	١S
ı	v	v	m	u v	J	ソン		\sim	\cdot	I۷		1	$\mathbf{\nu}$	v		\sim 1	v۷

NOTE: Use Sheet 26 if total noncash contributions are over \$	\$500. No deduction is a	Illowed for contributions of c	lothing and household items
that are not in good used condition or better. In addi-	tion, a deduction for an	y item with minimal moneta	ry value may be denied.

6 limitation (see above):	2013 Amount	TS	2012 Amount
limitation (see above):		l l	
capital gain property (gifts of capital gain property to 50% limit orgs.):			
capital gain property (girts of capital gain property to 50% limit orgs.):			
·			
capital gain property (gifts of capital gain property to non-50% limit org	s.):		
<u>, </u>			
SCELLANEOUS DEDUCTIONS (subject to 2% AGI limit)			
SCELLANEOUS DEDUCTIONS (subject to 2% AGI limit) on and professional dues			
on and professional dues			
on and professional dues	nses):		
on and professional dues	nses):		
on and professional dues	nses):		
on and professional dues	nses):		
on and professional dueser unreimbursed employee expenses (uniforms and protective clothing, fessional subscriptions, employment agency fees, and certain edu. expe	nses):		
on and professional dueser unreimbursed employee expenses (uniforms and protective clothing, fessional subscriptions, employment agency fees, and certain edu. expe	nses):		
on and professional dueser unreimbursed employee expenses (uniforms and protective clothing, fessional subscriptions, employment agency fees, and certain edu. expe	nses):		
on and professional dueser unreimbursed employee expenses (uniforms and protective clothing, fessional subscriptions, employment agency fees, and certain edu. expe	nses):		
er unreimbursed employee expenses (uniforms and protective clothing, fessional subscriptions, employment agency fees, and certain edu. expenses estment expense:	nses):		
	nses):		
er unreimbursed employee expenses (uniforms and protective clothing, fessional subscriptions, employment agency fees, and certain edu. expensestment expense:	nses):		
er unreimbursed employee expenses (uniforms and protective clothing, ressional subscriptions, employment agency fees, and certain edu. expensestment expense: return preparation fee e deposit box rental ccellaneous deductions (2% AGI) (certain legal and accounting fees,	nses):		
er unreimbursed employee expenses (uniforms and protective clothing, ressional subscriptions, employment agency fees, and certain edu. expenses testment expense: return preparation fee deposit box rental cellaneous deductions (2% AGI) (certain legal and accounting fees,	nses):		
er unreimbursed employee expenses (uniforms and protective clothing, ressional subscriptions, employment agency fees, and certain edu. expenses testment expense: return preparation fee deposit box rental cellaneous deductions (2% AGI) (certain legal and accounting fees,	nses):		
er unreimbursed employee expenses (uniforms and protective clothing, ressional subscriptions, employment agency fees, and certain edu. expenses estment expense:	nses):		
er unreimbursed employee expenses (uniforms and protective clothing, ressional subscriptions, employment agency fees, and certain edu. expenses estment expense: return preparation fee deposit box rental cellaneous deductions (2% AGI) (certain legal and accounting fees, custodial fees):	nses):		
er unreimbursed employee expenses (uniforms and protective clothing, ressional subscriptions, employment agency fees, and certain edu. expenses estment expense: return preparation fee deposit box rental cellaneous deductions (2% AGI) (certain legal and accounting fees, custodial fees):	nses):		
er unreimbursed employee expenses (uniforms and protective clothing, fessional subscriptions, employment agency fees, and certain edu. expenses testment expense: return preparation fee e deposit box rental cellaneous deductions (2% AGI) (certain legal and accounting fees, custodial fees):	nses):		
er unreimbursed employee expenses (uniforms and protective clothing, ressional subscriptions, employment agency fees, and certain edu. expenses estment expense:	nses):		

2013	1040	US/CA	Itemized Deductions (continued)	25) p4

Please enter all pertinent 2013 amounts. Last year's amounts are provided for your reference.

THER MISCELLANEOUS DEDUCTIONS	2013 Amount	TS	2012 Amount
ate tax, section 691(c)			
er miscellaneous deductions:			
	_		
	_		
	_		
-	_		
-			
deral only:		1 1	
	_		
ate only:			

2013 1040 US Itemized Deductions (continued) 25 p5

If either of the following conditions below apply to you, your home mortgage interest deduction may need to be limited and the input section provided below should be completed. If neither condition applies, enter home mortgage interest amounts on organizer sheet 25 p2.

- 1. Total home equity debt exceeded \$100,000 at any time during 2013 (\$50,000 if married filing separate). For this purpose, home equity debt is defined as any mortgages taken out after October 13, 1987 in which the proceeds were used for purposes other than to buy, build, or improve your home. An example of this type of mortgage is a home equity loan use to pay off credit card bills, buy a car, or pay tuition.
- 2. Total home acquisition debt exceeded \$1,000,000 at any time during 2013 (\$500,000 if married filing separate). For this purpose, home acquisition debt is defined as any mortgages taken out after October 13, 1987 in which the proceeds were used to buy, build, or improve your home.

NOTE: When completing the input section below, grandfather debt represents loans taken out prior to October 14, 1987.

Please enter all pertinent 2013 amounts and attach all 1098 forms. Last year's amounts are provided for your reference.

	2013 Amount	TS	2012 Amount
air market value of the property on the date that the last debt was secured			
ome acquisition and grandfather debt on the date that the last debt was secured			
OAN INFORMATION			
oan #1			
Lender's name.			
Form (see table).			
Number of form.			
1=taxpayer, 2=spouse, blank=joint.			
Interest paid.			
Points paid			
Total principal paid			
Lump sum principal payment (if paid off)			
Months outstanding (if not 12)			
Home acquisition debt balance - beginning of year			
Home acquisition debt borrowed in 2013			
Home equity debt balance - beginning of year			
Home equity debt borrowed in 2013			
Grandfather debt balance - beginning of year			
oan #2			
Lender's name.			
Form (see table)			
Number of form			
1=taxpayer, 2=spouse, blank=joint			
Interest paid			
Points paid			
Total principal paid			
Lump sum principal payment (if paid off)			
Months outstanding (if not 12)			
Home acquisition debt balance - beginning of year			
Home acquisition debt borrowed in 2013			
Home equity debt balance - beginning of year			
Home equity debt borrowed in 2013			
Grandfather debt balance - beginning of year			
Form			
1 = Schedule A (defaul 2 = Business use of ho 3 = Schedule E			

25 p5

2013	1040	US	Noncash Contributions (Form 8283)

26

If your total noncash contributions are in excess of \$500 in 2013, please complete the information below for each donee using the following guidelines:

- * If you contributed a motor vehicle, boat, or airplane with a claimed value of more than \$500, attach Form 1098-C or other written acknowledgement received from the donee organization.
- * A deduction for contributions of clothing or other household items that are not in good used condition or better is not allowed. In addition, a deduction for any item with minimal monetary value may be denied. However, these rules do not apply to any contribution of a single item for which a deduction of more than \$500 is claimed, if a qualified appraisal for the donated property is provided.

DONATE) PROPE	RTY INFORMATION				
	Name of cha	aritable organization (donee)				
		ess				
	City					
	,					
		!=joint				
		scription (other than vehicle)				
	1 roperty des	Identification number (VIN)				
No.		Year (yyyy)				
	Vehicle	Make and model.				
		Mileage at time of donation				
	Data of cont	_				
		tribution (m/d/y)				
	-	ed by donor (m/y)				
		ed by donor (Table 1 or describe)				
		t or basis				
		value				
	Method used	d to determine FMV (Table 2 or descr	ibe)			
	Name of the					
		aritable organization (donee)				
		ess				
	,					
		!=joint				
	Property des	scription (other than vehicle)				
		Identification number (VIN)				
No.	Vehicle	Year (yyyy)				
	Verlicie	Make and model				
		Mileage at time of donation				
	Date of cont	ribution (m/d/y)				
	Date acquire	ed by donor (m/y)				
		ed by donor (Table 1 or describe)				
		t or basis				
		value				
		d to determine FMV (Table 2 or descr				
		•	<u>.</u>			
1	How Pro	perty was Acquired	2 Method Used to	o Determine FMV		
		•				
	= Purchase	3 = Inheritance 4 = Exchange	1 = Appraisal	3 = Catalog 4 = Comparable sales		
2	? = Gift		2 = Thrift shop value			
			For other methods, see IRS Pub. 561.			
			1 01 011101 11101110110	7 000 1110 1 401 0011		
				,, 6666 . 42. 661.		

2013	1040	US	Business Use of Home (Form 8829)	No.	29
	1010				

Please enter 2013 indirect expenses in full. Nonbusiness portion will carry to Schedule A. Business percentage will be applied to indirect expenses only.

	2013 Amount	2012 Amount
form		
lumber of form (e.g., enter 2 for Schedule C number 2)		
Business use area (square footage)		
otal area of home (square footage)		
otal hours facility used (for daycare facilities only)		
otal hours available (if not 8,760)		
6 (.xx) or amount of gross income from home if not 100% (-1 if none)		
6 (.xx) or amount of expenses from home if not 100% (-1 if none)		
NDIRECT EXPENSES		
NOTE: Indirect expenses are for keeping up and running your entire home. They benefit both the business and personal parts of your home.		
Nortgage interest		
Real estate taxes		
Qualified mortgage insurance premiums		
Casualty losses		
nsurance		
/liscellaneous		
Rent		
Repairs and maintenance		
Jtilities		
Excess mortgage interest		
Other indirect expenses:		
office indirect expenses.		
DIRECT EXPENSES		1
DIRECT EXPENSES NOTE: Direct expenses benefit only the business part of your home. They inclu painting or repairs made to specific areas or rooms used for business.	de	1
	de	
NOTE: Direct expenses benefit only the business part of your home. They inclu painting or repairs made to specific areas or rooms used for business. Mortgage interest.	de	
NOTE: Direct expenses benefit only the business part of your home. They inclu painting or repairs made to specific areas or rooms used for business. Nortgage interest.	de	
NOTE: Direct expenses benefit only the business part of your home. They inclupainting or repairs made to specific areas or rooms used for business. Nortgage interest. Real estate taxes. Qualified mortgage insurance premiums	de	
NOTE: Direct expenses benefit only the business part of your home. They inclupainting or repairs made to specific areas or rooms used for business. Mortgage interest. Real estate taxes. Qualified mortgage insurance premiums Casualty losses.	de	
NOTE: Direct expenses benefit only the business part of your home. They inclupainting or repairs made to specific areas or rooms used for business. Mortgage interest. Real estate taxes. Qualified mortgage insurance premiums Casualty losses.	de	
MOTE: Direct expenses benefit only the business part of your home. They inclupainting or repairs made to specific areas or rooms used for business. Mortgage interest. Real estate taxes. Qualified mortgage insurance premiums Casualty losses. Insurance. Miscellaneous.	de	
NOTE: Direct expenses benefit only the business part of your home. They inclupainting or repairs made to specific areas or rooms used for business. Nortgage interest. Real estate taxes. Qualified mortgage insurance premiums Casualty losses Insurance. Niscellaneous	de	
MOTE: Direct expenses benefit only the business part of your home. They inclupainting or repairs made to specific areas or rooms used for business. Mortgage interest. Real estate taxes. Qualified mortgage insurance premiums Casualty losses. Insurance. Miscellaneous. Repairs and maintenance.	de	
MOTE: Direct expenses benefit only the business part of your home. They inclupainting or repairs made to specific areas or rooms used for business. Mortgage interest. Real estate taxes. Qualified mortgage insurance premiums Casualty losses. Insurance. Miscellaneous. Repairs and maintenance. Utilities.	de	
MOTE: Direct expenses benefit only the business part of your home. They inclupainting or repairs made to specific areas or rooms used for business. Mortgage interest. Real estate taxes. Qualified mortgage insurance premiums Casualty losses. Insurance. Miscellaneous Rent. Repairs and maintenance. Utilities Excess mortgage interest	de	
NOTE: Direct expenses benefit only the business part of your home. They inclupainting or repairs made to specific areas or rooms used for business. Mortgage interest. Real estate taxes. Qualified mortgage insurance premiums Casualty losses. Insurance. Miscellaneous Rent. Repairs and maintenance. Utilities Excess mortgage interest Excess casualty losses.	de	
AOTE: Direct expenses benefit only the business part of your home. They inclupainting or repairs made to specific areas or rooms used for business. Mortgage interest. Real estate taxes. Qualified mortgage insurance premiums Casualty losses Insurance. Miscellaneous Rent. Repairs and maintenance. Ditilities Excess mortgage interest Excess casualty losses Mlowable casualty losses	de	
IOTE: Direct expenses benefit only the business part of your home. They inclupainting or repairs made to specific areas or rooms used for business. Mortgage interest. Real estate taxes. Dualified mortgage insurance premiums Casualty losses. Insurance. Repairs and maintenance. Repairs and maintenance. Repairs and maintenance. Respectively to the property of the property of the part of your home. They inclupation are all the painting of the part of your home. They inclupation are all the painting or repairs and suspenses.	de	
MOTE: Direct expenses benefit only the business part of your home. They inclupainting or repairs made to specific areas or rooms used for business. Mortgage interest. Real estate taxes. Qualified mortgage insurance premiums Casualty losses. Insurance. Miscellaneous Rent. Repairs and maintenance. Utilities Excess mortgage interest	de	
NOTE: Direct expenses benefit only the business part of your home. They inclupainting or repairs made to specific areas or rooms used for business. Mortgage interest. Real estate taxes. Dualified mortgage insurance premiums Casualty losses Insurance. Miscellaneous Rent. Repairs and maintenance Utilities Excess mortgage interest Excess casualty losses Milowable casualty losses	de	
NOTE: Direct expenses benefit only the business part of your home. They inclupainting or repairs made to specific areas or rooms used for business. Mortgage interest. Real estate taxes. Dualified mortgage insurance premiums Casualty losses Insurance. Miscellaneous Rent. Repairs and maintenance Utilities Excess mortgage interest Excess casualty losses Milowable casualty losses	de	

29

Page 95 ORGANIZER US Employee/Vehicle Bus. Exp. (Form 2106) No. 2013 1040 30 Please enter all pertinent 2013 amounts. Last year's amounts are provided for your reference. **GENERAL INFORMATION** Occupation, if different from Form 1040..... Number of form (1=first Schedule C, 2=second, etc.).... 1=performance artist, 2=handicapped, 3=fee-basis government official...... **EMPLOYEE BUSINESS EXPENSES** 2013 Amount 2012 Amount Reimbursements for meals and entertainment not on W-2, box 1..... 1=Department of Transportation (80% meal allowance)..... Local transportation (bus, taxi, train, etc.)..... Reimbursements not included on Form W-2, box 1..... Other business expenses:

30

2013	1040	US	Vehicle Expenses (Form	No.	30 p2			
	Please enter all pertinent 2013 amounts. Last year's amounts are provided for your reference.							
VEH	IICLE INF	ORMATI	ON	2013 Amount	2012 Amo	ount		
1=veh 1=no (1=no (icle is availab other vehicle evidence to s	ole for off-duty is available fo upport your d	e than 5% owner					
VEH	IICLE 1							
Date p Total i Busine Comm Averag Numbe Parkin Actual Ga Re Tir Ins Mi Au Pe	placed in services mileage (for the sessible mileage). In the sessible mileage general mileage	ther than persently taxes (basen) (for Schedelease paymer nt (enter as persent)	year). e. se if changed from 100% personal use. portion only). conal property taxes). ed on car's value). lule C, E & F). nts. ositive). vehicle on Form W-2 (2106).					
VEH	IICLE 2							
Date p Total r Busine Comm Averae Number	olaced in serv mileage (for t ess mileage. nuting mileage ge daily round er of months	he tax year) e (for the tax d-trip commut	year). e se if changed from 100% personal use portion only)					
Ga Re Tir Ins Mi Au Pe Int Ve	epairs	ther than pers rty taxes (bas an) (for Sched lease paymer	conal property taxes) ed on car's value) lule C, E and F)					
			ositive)					

013	1040	US	Foreign Income Exclusion (Form 2555)			31.1		
GEN	Please enter all pertinent 2013 information. GENERAL INFORMATION							
			lifferent from Form 1040:					
St	reet address.							
	•							
	Ü							
Emplo	,							
U.	S. city							
	J							
	0 9							
	0 0							
	٠.							
3=	self, 4=foreig	n affiliate of	ntity, 2=U.S. company, U.S. company, 5=other					
Er	mployer type,	if other						
Type	of exclusion r	evoked if revo	oked in earlier year (if applicable):	Tax year revocation was effective	_			
Count	ry of citizensh	nip						
City a	nd country of	separate for	eign residence if maintained due to icable):	Number of days during tax year at separate foreign address (if applicable)				
advers	se living cond	litions (if appi	icable):	foreign address (if applicable)				
					-			
				Dates tax home(s) were				
Tax h	omes(s) durin	ng tax year:		established (m/d/y)				
				<u> </u>				
						31.1		

Page 98 ORGANIZER Foreign Income Exclusion (2555) 2013 1040 US No. 31.1 p2 Please enter all pertinent 2013 information. TRAVEL INFORMATION NOTE: Please enter all travel for 2013 as well as travel for 2014 known to date. Days in U.S. on business Travel Type (table) Name of country (if not United States) Date left BONA FIDE RESIDENCE TEST AND PHYSICAL PRESENCE TEST Beginning date for bona fide residence (m/d/y)..... Ending date for bona fide residence (m/d/y)..... Living quarters in foreign country: 1=purchased home, 2=rented house or apartment, 3=rented room, 4=quarters furnished by employer..... Names of family living abroad with taxpayer (if applicable): Period family lived abroad 1=submitted statement to country of bona fide residence..... 1=required to pay income tax to country of bona fide residence...... Contractual terms relating to length of employment abroad..... Type of visa you entered foreign country under..... Explanation why visa limited stay or employment in country (if applicable). Address of home in U.S. maintained while living Names of occupants in U.S. Relationship of occupants in 1=U.S. home rented (if applicable) abroad (if applicable): home (if applicable) U.S. home (if applicable) Principal country of employment..... FOREIGN HOUSING EXPENSES 2013 Amount 2012 Amount Qualified housing expenses Location of housing expenses: Qualifying days in location (multiple locations only) Travel Type 1 = Travel to U.S. (default) 2 = Travel to foreign country 3 = Travel to restricted country 31.1 p2

2013	1040	US	Foreign Income Excl	No.	31.2				
	Please enter all pertinent 2013 amounts and attach all W-2 forms, or other wage statements. Enter amounts in U.S. dollars only. Last year's amounts are provided for your reference.								
FORE	EIGN WA	GES, SAI	_ARIES, TIPS	2013 Amount	2012 Amo	unt			
1=spous 1=retire Name o Wages, Federal Social s Medicar	ment plan (Bo f employer (B tips, other co income tax w ecurity tax wi e tax withhelo	ox 13)ox c)	30x 1)						
		` '	h						
Nonca Home (I Meals	sh Income odging)		ES, REIMBURSEMENTS A	AND OTHER EARNED INC	OME				
Cost of Family.	living and ove		ments ntial						
Home le	eave								
Meals a Employe	nd lodging pr er (excludable	ovided for the under sectio	convenience of the n 119)						
Other	Foreign Ea	rned Incor	ne						
Total nu Total da	imber of days lys worked be	worked (if no fore and after	on Information t 240) foreign assignment ter foreign assignment						

31.2

2013 1040 US Health Savings Accounts (8889) 32.1

Please enter all pertinent 2013 amounts & attach all 1099-SA forms. Last year's amounts are provided for your reference.

HSA CONTRIBUTIONS

NOTE: Contributions to an HSA are only eligible to persons covered under a high deductible health plan. For tax year 2013, a high deductible health plan is one with an annual deductible that is not less than \$1,250 for self-only coverage or \$2,500 for family coverage, and the annual out-of-pocket expenses (deductibles, co-payments, and other amounts, but not premiums) do not exceed \$6,250 for self-only coverage or \$12,500 for family coverage.

	2013 Amount		2012 A	mount
	Taxpayer	Spouse	Taxpayer	Spouse
1=self-only coverage, 2=family coverage				
HSA contributions you made or expect to make, except rollovers, employer contributions, and contributions made to an employee account through a cafeteria plan (1=maximum)				
Contributions included above that were made after you became eligible for Medicare				
Contributions made to date				
HSA DISTRIBUTIONS				
Total HSA distribution received (1099-SA, box 1)				
Distributions included above that were rolled over to another HSA				
Total unreimbursed qualified medical expenses				

013	1040 US/CA	Child and Dep	endent Care	Expenses (Fo	rm 2441)	33.1,33.2
Dloggo	ontor all portinget 20	12 information Last	uoarle amounte arc	provided for your	roforonco Voi	ı must havo
paid	enter all pertinent 20 for the care of one or	more dependents er	nabling you to wor	k or attend school t	o qualify for the	his credit.
			2013 A	mount	2012 Ar	mount
DEP	PENDENT CARE E	XPENSES (33.1)	Taxpayer	Spouse	Taxpayer	Spouse
	dent care expenses incurre					
Emplo	yer-provided benefits forfei	ted in 2013				
PER	SONS AND EXPE		1	DENT CARE CR	EDIT	
No.		umber:				
						
		ent care expenses I in 2013			2012 amt:	
	1=spouse, 2=join	t				
	First name					
	Last name					
١		d/y)				
No.		umber			<u> </u>	
	Qualified depend	ent care expenses I in 2013			2012 amt:	
					2012 difft.	
		t				
PERS	ONS OR ORGANI	ZATIONS PROVID	DING CARE (33.	2)		
			1	,		
	·					
	City, state, ZIP c	ode				
		are provided (if different):				
No.		2SS				
140.		ZIP code er				
		nber (SSN or EIN)				
		tax-exempt				
		s a person				
	•	are provider in 2013			2012 amt:	
		t :				
		ode				
		are provided (if different):				
No.		2SS				
INO.		ZIP code er				
		nber (SSN or EIN)				
		tax-exempt				
	1=care provider i	s a person				
		are provider in 2013			2012 amt:	
	1=spouse, 2=join	t				
						33.1,33.2

ORGANIZER				Page 102
2013	1040	US	Qualified Adoption Expenses (Form 8839)	37

Please enter all pertinent 2013 information. Last year's amounts are provided for your reference

ELIGIBLE	CHILDREN	2013 Amount	2012 Amount
	First name		
	Last name		
	Identification number		
	Date of birth (m/d/y)		
	1=born before 1996 and was disabled		
	1=special needs child		
No.	1=foreign child		
	1=adoption was not final in 2013		
	Qualified 2012 for adoption not finalized by end of 2013		
	Adoption Prior years for adoption of foreign child finalized in 2013		
	Expenses Paid in 2012 and 2013 for adoption finalized in 2013.		
	2013 for adoption finalized before 2013		
	1=spouse, 2=joint		
	First name		
	Last name		
	Identification number		
	Date of birth (m/d/y)		
	1=born before 1996 and was disabled		
—	1=special needs child		
No.	1=foreign child		
	1=adoption was not final in 2013		
	Qualified 2012 for adoption not finalized by end of 2013		
	Adoption Prior years for adoption of foreign child finalized in 2013		
	Expenses Paid in 2012 and 2013 for adoption finalized in 2013.		
	2013 for adoption finalized before 2013		
	1=spouse, 2=joint		
	Te		
	First name		
	Last name		
	Identification number		
	Date of birth (m/d/y).		
	1=born before 1996 and was disabled		
	1=special needs child		
No.	1=foreign child		
	1=adoption was not final in 2013		
	Qualified 2012 for adoption not finalized by end of 2013		
	Adoption Prior years for adoption of foreign child finalized in 2013		
	Expenses Paid in 2012 and 2013 for adoption finalized in 2013.		
	2013 for adoption finalized before 2013		
	1=spouse, 2=joint		

2013 1040 US **Education Credits / Tuition Deduction** No. 38 Please complete the information below if you paid qualified education expenses in 2013 for you, your spouse, or your dependents enrolled in an accredited postsecondary institution. Last year's amounts are provided for your reference. STUDENT INFORMATION NOTE:Due to the change to the 1098-T question (reversing the default), we should not print the 2012 entry. 1=taxpayer, 2=spouse Last name Social security number..... Number of years hope credit claimed **EDUCATIONAL INSTITUTION ATTENDED (#1)** Street address 1=2013 Form 1098-T was NOT received..... 1=2012 Form 1098-T received with Box 2 & 7 completed..... Federal ID number from Form 1098-T..... **EDUCATIONAL INSTITUTION ATTENDED (#2)** State 1=2013 Form 1098-T was NOT received..... 1=2012 Form 1098-T received with Box 2 & 7 completed.... Federal ID number from Form 1098-T..... QUALIFIED EDUCATION EXPENSES 2013 Amount 2012 Amount Qualified tuition & fees paid in 2013 (net of refund or assistance, & not entered elsewhere). Books & supplies required to be purchased from institution..... Books & supplies not entered above..... * Refund of qualified expenses and tax-free educational assistance received after you file your return for the year in which the expenses were paid.

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ORGANIZER <u>Page 104</u>

Household Employment Taxes (Schedule H) 2013 US 1040 42

Please enter all pertinent 2013 information. Last year's amounts are provided for your reference.

HOUSEHOLD EMPLOYMENT TAXES

	f you paid a															
l	nousehold e	employee	; or paid to	otal cash	wages	of \$1,00	or r	nore i	n any	calendar	quarter	of 2012	or 2013	to house	ehold	employées,
1	olease com	plete the	following:								•					, ,

NOTE: If you paid any one household employee cash wages of \$1,800 or more in household employee; or paid total cash wages of \$1,000 or more in any of please complete the following:	n 2013; withheld federal incl alendar quarter of 2012 or :	ome tax during 2013 for any 2013 to household employees,
Employer identification number.		
1=spouse, 2=joint		
Social security, Medicare and income taxes:	2013 Amount	2012 Amount
1=paid any one employee cash wages of \$1,800 or more		
1=withheld federal income tax for household employee		
Total cash wages subject to social security taxes		
Total cash wages subject to Medicare taxes		
Federal income tax withheld		
Taxes withheld from state disability payments		
Federal unemployment tax:		
1=paid total cash wages of \$1,000 or more in any calendar quarter of 2012 or 2013		
Total cash wages subject to FUTA tax		
1=paid unemployment contributions to only one state		
1=paid all state unemployment contributions by 4/15/14		
1=all wages taxable for FUTA were also taxable for state unemployment		
Name of state		
Contributions paid to state unemployment fund		

13	1040	US	Parent's Election to Repo	ort Child's Inc.	No.	44
	PI	ease enter	all pertinent 2013 amounts & attach Last year's amounts are provided to	all 1099-INT and 1099-D or your reference.	V forms.	
CHII	LD'S INF	ORMATIC	ON			
First n	ame					
Last n	ame					
Social	security num	nber				
		′)				
		deral				
		ate				
INTE	EREST IN	ICOME (F	Form 1099-INT)			
Banks	, credit union	s, etc. (Box 1):	2013 Amount	2012 Amo	ount
-						
<u>-</u>						
U.S. b	onds, T-bills,	etc. (nontaxa	uble to state) (Box 3):			
-						
Tax-e	kempt interes	t:				
Adjust	ments:					
No	minee distrib	oution				
	· ·		T in error)			
	•					
Foreig						J
·		authority over	r foreign account			
		3				
1=	grantor/trans	feror or receiv	ved distribution from foreign trust			
Post 8	3/7/86 private	activity bond	interest (included above) (6251)			
DIVI	DEND IN	COME (F	orm 1099-DIV)			
		ends (Box 1a)	·			
Total C	orumary urviu	enus (bux ra)	″ Г			
=						
Qualifi	ied dividends	(Box 1b)				
		istributions (B	_			
-						
-						
	-	_	(Box 2b)			
	kempt interes	` ,				
	•					
	•					
	ee distributio					
	-					
Ca						
	normanent t	tund dividends	s included above			
Alaska	т реглапети	arra arragina			·L	

Please enter all pertinent 2013 information. RENTER'S CREDIT NOTE: To qualify for the credit you must have paid rent, for at least half of the year, on property in California which was your principal residence. 1=qualified renter	2013	1040	CA	Other Credits	53.013
RENTER'S CREDIT NOTE:To qualify for the credit you must have paid rent, for at least half of the year, on property in California which was your principal residence. 1=qualified renter. 1=filing separate, claiming spouse's credit. 1=filing jointly and one spouse claimed homeowner's property tax exemption.					l
NOTE:To qualify for the credit you must have paid rent, for at least half of the year, on property in California which was your principal residence. 1=qualified renter. 1=filing separate, claiming spouse's credit 1=filing jointly and one spouse claimed homeowner's property tax exemption.				Please enter all pertinent 2013 information.	
1=qualified renter. 1=filing separate, claiming spouse's credit 1=filing jointly and one spouse claimed homeowner's property tax exemption.	REN	ITER'S C	REDIT		
1=filing separate, claiming spouse's credit	NOTE	:To qualify for on property i	r the credit yo n California v	ou must have paid rent, for at least half of the year, which was your principal residence.	
1=filing jointly and one spouse claimed homeowner's property tax exemption.					
			,		

53.013

ORGANIZER 2013 1040 CA California Use Tax 54.012 Please enter all pertinent 2013 information. 1=taxpayer, 2=spouse, blank=joint No. Use county (see table)..... Total purchases subject to use tax Sales or use tax already paid 1=taxpayer, 2=spouse, blank=joint No. Use county (see table)...... Total purchases subject to use tax... Sales or use tax already paid No. Use county (see table)..... Total purchases subject to use tax Sales or use tax already paid 1=taxpayer, 2=spouse, blank=joint No. Use county (see table)..... Total purchases subject to use tax Sales or use tax already paid 1=taxpayer, 2=spouse, blank=joint No. Use county (see table)...... Total purchases subject to use tax Sales or use tax already paid County 97 = Santa Cruz (Scotts Valley)
98 = Santa Cruz (Watsonville)
99 = Shasta
100 = Sierra
101 = Siskiyou
102 = Solano
103 = Sonoma
104 = Sonoma (Cotati)
105 = Sonoma (Rohnert Park)
106 = Sonoma (Santa Rosa)
107 = Sonoma (Santa Rosa)
107 = Sonoma (Sebastopol)
108 = Stanislaus
109 = Stanislaus
109 = Stanislaus (Ceres)
110 = Sutter
111 = Tehama
112 = Trinity
113 = Tulare
114 = Tulare (Dinuba)
115 = Tulare (Farmersville)
116 = Tulare (Farmersville)
117 = Tulare (Tulare)
118 = Tulare (Visalia)
119 = Tuolumne
120 = Tuolumne (Sonora)
121 = Ventura
122 = Yolo
123 = Yolo (Davis)
124 = Yolo (West Sacramento)
125 = Yuba 33 = Lassen
34 = Los Angeles (Avalon)
36 = Los Angeles (Inglewood)
37 = Los Angeles (South Gate)
38 = Madera
39 = Marin
40 = Marin (San Rafael)
41 = Mariposa
42 = Mendocino (Fort Bragg)
44 = Mendocino (Point Arena)
45 = Mendocino (Willish)
45 = Mendocino (Willish)
46 = Mendocino (Willish)
47 = Merced
48 = Merced (Los Banos)
49 = Merced (Merced)
50 = Modoc
51 = Mono
52 = Mono (Mammoth Lakes) 65 = Placer 1 = Alameda 1 = Alameda 2 = Alpine 3 = Amador 4 = Butte 5 = Calaveras 6 = Colusa 7 = Colusa (Williams) 8 = Contra Costa 9 = Contra Costa (El Cerrito) 10 = Contra Costa (Richmond) 11 = Contra Costa (Richmond) 12 = Del Norte 13 = El Dorado 66 = Plumas 67 = Riverside 68 = Riverside (Cathedral City) 67 = Riverside
68 = Riverside (Cathedral City)
69 = Sacramento
70 = San Benito
71 = San Benito (Hollister)
72 = San Benito (San Juan Bautista)
73 = San Benito (San Juan Bautista)
73 = San Bernardino (Montclair)
75 = San Bernardino (San Bernardino)
76 = San Diego
77 = San Diego (El Cajon)
78 = San Diego (Rational City)
79 = San Diego (Vista)
80 = San Francisco
81 = San Joaquin (Manteca)
83 = San Joaquin (Manteca)
83 = San Joaquin (Stockton)
84 = San Luis Obispo (Arroyo Grande)
85 = San Luis Obispo (Arroyo Grande)
86 = San Luis Obispo (Grover Beach)
87 = San Luis Obispo (Morro Bay)
88 = San Luis Obispo (San Luis Obispo)
90 = San Mateo
91 = San Mateo (San Mateo)
92 = Santa Barbara
93 = Santa Cruz (Capitola)
94 = Santa Cruz (Capitola)
95 = Santa Cruz (Capitola)
96 = Santa Cruz (Capitola) 12 = Del Norte
13 = El Dorado
14 = El Dorado (So. Lake Tahoe)
15 = El Dorado (Placerville)
16 = Fresno
17 = Fresno (Clovis)
18 = Fresno (Reedley)
19 = Fresno (Sanger) 19 = Fresno (Sanger)
20 = Fresno (Selma)
21 = Glenn
22 = Humboldt
23 = Humboldt (Trinidad)
24 = Imperial
25 = Impreial (Calexico)
26 = Inyo
27 = Kern
28 = Kern (Delano)
29 = Kings
30 = Lake
31 = Lake (Lakeport)
32 = Lake (Clearlake) 51 = Mono 52 = Mono (Mammoth Lakes) 53 = Monterey 54 = Monterey (Del Ray Oaks) 55 = Monterey (Pacific Grove) 56 = Monterey (Seaside) 57 = Monterey (Salinas) 58 = Monterey (Sand City) 59 = Napa 50 - Napa 60 - Nevada 61 - Nevada (Nevada City) 62 - Nevada (Truckee) 95 = Santa Cruz (Capitola) 96 = Santa Cruz (Santa Cruz) 63 = Orange 64 = Orange (Laguna Beach)

54.012

California Use Tax Series: 4001

2013	1040	US	Additional Information
Plea	se furnish	any additio	onal information or supporting details not provided elsewhere in this tax organizer.
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