Tax Deduction Locator & IRS Trouble Minimizer

Provided By:

SAVE TIME – READ THIS FIRST

This organizer is designed to assist and remind you of information that is needed to prepare your tax return. The goal is not to overlook anything so you can maximize your legal deductions, comply with government reporting requirements, and avoid problems with the IRS after the return is filed.

Taxes are complicated and the rules change constantly. This organizer was designed specifically for the 2013 tax year and certain items may not apply to other years. Although care has been taken to accommodate most taxpayers' needs, please note questions that are related to issues not included here under "*Questions You May Have*" in Section D5.

Section Categories – To help you collect your information quickly, this organizer is organized into four general areas. Information required from:

- everyone – Sections A1 – A13 (Pages 2 & 3)
- those who itemize their deductions – Sections B1 – B11 (Pages 4 & 5)
- those who have relocated, sold their home, made home energy improvements or have debt relief income – Sections D1 – D4 (Page 6)

The instructions provided in the header of each section will help you determine if you are required to complete the information in that section. Before proceeding, please take a moment to review the purpose of the SPECIAL MARKERS used throughout this organizer.

Your tax information from the prior year is automatically transferred to this year's tax return. Therefore, not all taxpayer data and contact info needs to be recorded. The marker signifies that returning clients need only enter data in that section if it has changed since the prior year or if there is new information.

This marker notes areas where the IRS can match the entry on their computer and incomplete or incorrect information can trigger government correspondence or, worse yet, an office audit. Pay particular attention to sections or individual entries with this symbol.

This flag symbol denotes areas where a deduction or item of income is to be treated differently when computing the alternative minimum tax (AMT). The AMT is another way of computing your tax liability, which applies more restrictive limits on certain deductions and preference income. If higher than the regular tax, the AMT applies.

This marker indicates payments that may require the issuance of a 1099 if the annual amount paid to an individual is $600 or more. Failure to file 1099s can lead to a loss of the tax deduction for that expense and failure to timely file the forms with the IRS and furnish copies to payees can result in substantial penalties.

YOUR TAX APPOINTMENT

Please complete and sign this organizer prior to your appointment.

- ❍ Please call to schedule your appointment. Try to call early before the calendar is booked up.
- ❍ Please mail the completed organizer to this office prior to your appointment.
- ❍ Please mail the completed organizer along with required documentation, W2s, 1099s, 1098s, K-1s, etc., to this office so your return can be prepared by correspondence.

❍ Your tax appointment is scheduled for:

Day: _____

Date: _____

Time: _____

Please notify this office promptly if you are unable to keep this appointment.

If you are a new client, be sure to provide a copy of last year's tax return.

Referrals are Always Appreciated.

If you know someone who would like a tax appointment, please have them call this office.
Do not be concerned that your business, personal or financial matters will be discussed with clients whom you refer.
All client information is treated in the utmost confidence.

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TAXPAYER INFORMATION

The information on this page is required for every taxpayer. Please review each section on this page and report items that are applicable to you, your spouse or dependents.

A1 - TAXPAYER INFORMATION

Returning clients can skip this section except for changes.

Filer Name (Must Match SS Admin)

Social Security No. Birth Date / /

Occupation ☐ ✓ If Legally Blind

Contact Phone ◯ Day ◯ Evening

E-Mail Address

Spouse Name (Must Match SS Admin)

Social Security No. Birth Date / /

Occupation ☐ ✓ If Legally Blind

Contact Phone ◯ Day ◯ Evening

E-Mail Address

A2 - ADDRESS

Returning clients can skip this section except for changes.

Street Apt/Unit No

City State Zip

Home Phone Number

A3 - STATUS CHANGES FOR 2013

Check any that apply and enter the effective date.

☐ Married	/	☐ Moved	/
☐ Separated	/	☐ Home Sold	/
☐ Divorced	/	☐ Spouse Deceased	/
☐ Retired	/	☐ Dependent Deceased	/

A4 - ESTIMATED TAXES PAID

This office cannot assume that all estimated taxes were paid as originally scheduled or on time. Therefore, please enter the amounts and dates of payment or provide proof of payments. Incorrect amounts will result in IRS correspondence after the return is filed.

Payment & Due Date		Date Paid	Federal	State
Applied from Last Year's Refund				
First Quarter	April 15, 2013			
Second Quarter	June 17, 2013			
Third Quarter	Sept. 16, 2013			
Fourth Quarter	Jan. 15, 2014			

A5 - REFUND DIRECT DEPOSIT

Complete this section to have your refund automatically deposited into your bank account. Doing so will speed up the refund and eliminate the danger of a check being lost or stolen. Direct deposit can be allocated to up to 3 separate accounts. Entries for only one account are provided below. If you wish to make multiple deposits, please provide the additional account information and how you wish to allocate the refund.

Bank Routing Number (Exactly 9 Digits)

Account Number (include hyphens - omit spaces & special characters – 17 digits max)

✓ Account Type: ☐ Checking ☐ Savings Allocation:

A6 - INCOME & ADJUSTMENTS

	You	Spouse
W-2 Wages – Please provide W-2 forms (retain copy "C" for your records)		
Partnership, Trust or S-Corporation K-1s (provide complete K-1 copies)		
Were you the beneficiary of an inheritance? If so, please verify with executor or trustee if you will be receiving a K-1.	☐ Yes	☐ Yes
State Tax Refund (provide 1099-G)		
Social Security or RR (provide SSA-1099 or RRB-1099)		
Pension Income (provide all 1099-Rs)		
Alimony Received (IRS matches with alimony paid)		
Alimony Paid (provide name and SSN below) Paid to:	SS#:	
Tips (not included in W-2)		
Unemployment Compensation (provide 1099-G)		
Gambling Winnings (provide W-2Gs)		

A7 - IRA & SE PLANS

	You	Spouse
Retirement Plan with your Employer?	☐ Yes	☐ Yes
Did you or your spouse convert a traditional IRA into a Roth IRA during 2013?	☐ Yes	☐ Yes
Traditional IRA, Keogh & SEP Plans		
Contributions		
Withdrawals (1099-R)(1)		
Rollovers(2)(3)		
Basis (Total of prior year non-deductible contributions)		
Roth IRA		
Contributions		
Withdrawals (1099-R)(1)		
Rollovers(2)(3)		

(1) Show reason if under age 59½ (2) Must be reported even if not taxable unless directly "transferred"
(3) Rollovers from Traditional to a Roth IRA may be taxable.

A8 - SPECIAL QUESTIONS & INFORMATION

Coverdell Education Account **Contribution**	
Coverdell Education Account **Distribution** (provide 1099-Q)	
Qualified Tuition Plan (Sec. 529) **Distribution** (provide 1099-Q)	
Student Loan Interest paid (provide 1098-E)	
HSA Distributions (provide 1099-SA)	
Adoption Expenses ☐ ✓ If "special needs child"	

CAUTION – Review the following questions carefully. There are severe penalties associated with failing to report an interest or signature authority over a foreign bank account. Please call our attention to any dealings related to foreign accounts and inheritances.

✓ If you or your spouse have signature authority or are named as a co-owner on a bank account in a foreign country even if the funds are not yours.	☐
✓ If you received an inheritance from someone in a foreign country.	☐
✓ If you or spouse have a foreign bank account (over $10,000)	☐
✓ If you or your spouse received a distribution from, or were the grantor, or transferor to, a foreign trust	☐
✓ If at any time during the year you or your spouse held an interest in a foreign financial asset	☐
✓ If you have been denied Earned Income Credit by the IRS	☐
✓ If you have been re-certified for the Earned Income Credit	☐
✓ If you bought, sold, or gifted real estate in 2013. If you have, please call in advance to discuss what documents are needed.	☐
✓ If you made a gift of money or property to any individual in excess of $14,000 ($28,000 for joint gifts by a married couple)	☐
✓ If you employ household workers	☐
✓ If you sold jewelry, gold, coins, or other precious metals during the year	☐
✓ If you wish to contribute to the Presidential campaign fund: ☐ You ☐ Spouse	

ADDITIONAL INFORMATION

The information on this page is required for every taxpayer. Please review each section on this page and report items that are applicable to you, your spouse or dependents.

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A9 - DEPENDENTS

Returning clients need only enter the first names since the other info is on file. Enter all the information for new dependents.

First Name	Last Name (If Different)	Social Security # (Mandatory)	Enter S for Son, D for Daughter, R for Relative, O for Other	P if you are NOT the child's custodial parent	Months in Home (Your Home)	Birth Date	If over the age of 18 Income	If over the age of 18 P if Student
				☐		/ /		☐
				☐		/ /		☐
				☐		/ /		☐

A10 – INTEREST INCOME

IRS matches payer and amount. Always use the payer name listed on 1099 even if not the original source.

Caution: All interest must be reported even if tax-free!

Name of Payer (Please provide all forms 1099INT and 1099OID (Entries are not needed when 1099s are provided))	Banks, Credit Union, Corp Bonds, etc.	Seller Financed Mortgages	Direct U.S Obligations (Savings Bonds, T-Bills, etc. (State Tax-Free))	Home State Municipal Bonds (Generally Tax-Free)	Other State (Federal Tax-Free)
		Note: Seller financed mortgages require the name, SS# and address of the payer. See the special line below.			
Payer Name:	SS#:		Address:		
Forfeited Interest		Federal Tax Withholding on Interest & Dividends			

A11 – DIVIDEND INCOME

IRS matches payer and amount. Always use payer name listed on 1099 even if not the original source. Some institutions use substitute 1099s and caution must be used in separating the various types of dividends. Please bring broker statements.

Name of Payer – Please provide all forms 1099DIV (Entries are not needed when 1099s are provided)	Foreign Taxes Paid	Ordinary	Qualified Dividends (1)	Capital Gains	Source U.S. Obligations (2)	Taxable to State Only	Non-Taxable State & Federal

(1) Qualified dividends receive special tax treatment and are included in the "Ordinary Dividends" total. (2) Includes income from savings bonds, T-Bills, etc., which are state tax-free.

A12 – INVESTMENT SALES

IRS matches gross proceeds from sales using the 1099-B. All transactions must be reported even if there is no profit. If broker provides a summary of transactions, bring it and skip this section. For home sales, see Section D1.

Description (Please provide all forms 1099B)	P If Inherited	Date Acquired	Date Sold	Selling Price	Cost or Other Basis (1)	Profit (Memo Only)
	☐	/ /	/ /			
	☐	/ /	/ /			
	☐	/ /	/ /			
	☐	/ /	/ /			
	☐	/ /	/ /			

(1) The basis from which gain is determined may not be the original cost and must account for stock splits, reverse splits, mergers, reinvested dividends, wash sales, etc.

A13 – CHILD OR DEPENDENT CARE EXPENSES

Care must enable you to work (or search for work) or attend school FULL-TIME. Care must be for a child under age 13 or an individual who is physically or mentally incapable of self care. If you are a student, also see section C4. IRS matches employer provided care benefits and income reporting of care provider.

☐ P If you have employer provided dependent care benefits

Paid To	Address & Phone Number	Provider's SSN or Employer ID# **MANDATORY** unless it is an exempt organization. Check circle if exempt.	Payments MUST Be Allocated By Child/Dependent: Child/Depnd.'s Name	Child/Depnd.'s Name	Child/Depnd.'s Name
		○			
		○			
		○			

ITEMIZED DEDUCTIONS

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Taxpayers may choose between itemized or standard deductions. This page and the adjoining page are for recording your expenses, which are needed when itemizing your deductions. If you are certain that you cannot itemize your deductions, you can skip this page and the next one. **CAUTION: If you are married and filing separately and either you or your spouse itemize your deductions, then the other spouse must also itemize their deductions. The law does not allow one to itemize and the other to take the standard deduction.**

☐ P **If filing married separate and your spouse is itemizing deductions.**

B1 - MEDICAL EXPENSES

Although for Federal purposes medical expenses are only deductible to the extent they exceed 10% (7½% if age 65 and older) of your adjusted gross income (AGI) for the year (10% of AGI if taxed by the alternative minimum tax) some states, such as Arizona, do not have that limitation. If your state has a lower or no limitation be sure to list your medical expenses. Do not list expenses reimbursed by insurance or expenses and premiums paid with pre-tax funds.

INSURANCE PREMIUMS for Medical, Dental, Vision & Hospital	
Medicare Insurance Premiums (Not payroll tax)	
Long-Term Care Insurance — Filer	
Long-Term Care Insurance — Spouse	
Doctors, Dentists [1] (No discretionary cosmetic surgery)	
Acupuncture & Chiropractic Care	
Hospital [2]	
Prescription Drugs (Not over-the-counter drugs)	
Nursing Care ☐ P If in-home care	
Eye Exam, Glasses, Contact Lenses, Contact Lens Solution	
Hearing Aids & Batteries	
Ambulance & Paramedics	
Auto Travel (To and from medical treatment) — miles	
Parking (For medical treatment)	
Taxi, Shuttle, Air Fare, Etc. (To reach medical treatment)	
Lodging (For medical treatment) — No. of days	
Telephone (Medical-related toll charges only)	
Therapy & Special Schooling [3]	
Supplies & Equipment	
Handicapped Placard	
Handicapped Home Modifications	
Rentals (crutches, wheelchair, walker, oxygen equipment, etc.)	
Other:	
Other:	

(1) Includes Christian Science practitioner and psychological counseling.
(2) Includes nursing homes for individuals medically incapable of self care. Also includes hospital or nursing home meals.
(3) Includes physical therapy and psychotherapy; special schooling for physically or mentally handicapped.

B2 – INVESTMENT INTEREST

Interest paid on loans to acquire investments. This interest is only allowable to the extent of net investment income.

Brokerage Margin Accounts	
Vacant Land	
Other:	
Other:	

B3 - TAXES PAID

Do not list any taxes associated with a business or rental activity. Taxes are not deductible for AMT purposes.

Real Estate – Primary Residence (Do not include interest & penalties.)	
Real Estate – 2nd Home	
Real Estate – Investment Property (Land, etc.)	

CAUTION – Some tax bills include non-deductible special services. Please provide copies of the tax bills.

Vehicle License Fees (Tax portion only): (1) (2) (3)	
Personal Property Tax (Boat, plane, etc.)	
Sales Tax – Receipted (Leave blank for standard amount)	
Sales Tax – Cars, Boats, Home, Etc. (Do not include above)	
Income Taxes Paid to Another State — State:	
City, County, Local Taxes (not listed in another category)	
Other:	

State Income Tax Paid During 2013 (please provide proof of payment)
Do not include taxes withheld; they are automatic from the source documents.

Balance Due 2012 Return		Other Year's Tax Or Adjustment	
Extension Payment 2012 Return		2012 4th Qtr. Estimate Paid Jan. 2013	

B4 - HOME MORTGAGE INTEREST

Enter only interest on loans **secured** by your primary residence and designated second residence. This deduction is limited to interest paid on $1 million of home acquisition debt and $100,000 of home equity debt on your primary or designated second residence. Equity debt interest is not deductible for AMT purposes. IRS matches the interest paid on home mortgages.

CAUTION – if paid to an individual, P check box and enter the PAYEE's address and Social Security number in **Box A** below to avoid IRS correspondence.	P If 2nd Home	P If Equity Loan	**Amount** Please provide Form 1098
Paid to: ☐	☐	☐	
Paid to: ☐	☐	☐	
Paid to: ☐	☐	☐	
Paid to: ☐	☐	☐	

CAUTION – If Form 1098 was issued using a co-owner's SSN, enter that individual's name & SSN to avoid IRS correspondence.

Box A Name:

SSN:

If your home or 2nd home is a qualified motor home, boat, etc., list the name of the payee here:

PLEASE P ANY OF THE FOLLOWING THAT APPLY:

- ☐ Has the original home loan ever been refinanced?
- ☐ Did you refinance any of these loans this year? (If so, provide escrow closing statements)
- ☐ Have you exceeded the $100,000 equity debt limit?
- ☐ Does the total of all your home loan balances exceed $1 million?

ITEMIZED DEDUCTIONS

B5 - CASH CHARITABLE CONTRIBUTIONS

All cash contributions MUST be documented with either a bank record or written verification from the charity. Personal benefits must be excluded from the donation.

House of Worship	
Payroll Deduction (Filer)	
Payroll Deduction (Spouse)	
Other:	
Other:	
Other:	

B6 - NON-CASH CONTRIBUTIONS

Household and clothing items must be in good or better condition. Items of minimal value such as underclothing are not counted. A written receipt is required for donations of $250 or more. An itemized list should be included with your return if the total exceeds $500. Deductions are limited to the lesser of your cost or the fair market value (FMV) for each item contributed.

Clothing & Household Items	
Automobile Travel	miles
Volunteer Expenses - Explain:	
Vehicle Donation (Provide Form 1098-C)	
Other:	
Other:	

B7 – OTHER DEDUCTIONS

The expenses listed in this section are part of the "miscellaneous" itemized deductions but are listed separately because they are not subject to the 2% of AGI limit.

Gambling Losses (Only to the extent of gambling winnings)	
Impairment (Handicapped) Related Work Expenses	
Unrecovered Pension Basis (Deceased taxpayer)	

B8 – CASUALTY LOSSES

Generally, to be deducted, casualty losses, after insurance reimbursement must exceed 10% of your adjusted gross income (AGI) and then only the amount that exceeds the 10% is deductible. There are exceptions for certain theft, embezzlement and designated disaster area losses.

- ☐ P If the loss was in a presidentially declared disaster area
- ☐ P If the loss was from theft or embezzlement
- ☐ P If the loss was the result of a Ponzi scheme

Casualty Description	
Date of Casualty	/ /
Insurance Reimbursement	

Property Damaged – or provide a list in the same format

Description of Property	Date Acquired	Original Cost or Other Basis	Fair Market Value Before Casualty	Fair Market Value After Casualty
	/ /			
	/ /			
	/ /			

B9 – MISCELLANEOUS

The expenses listed in this section are only deductible to the extent they exceed 2% of your AGI, and are generally not deductible at all when computing the alternative minimum tax.

DO NOT enter Self-employed business expenses here. Instead list them in Section C7	You Name:	Spouse Name:
Employee Business Expenses Don't include amounts that COULD BE or were reimbursed by your employer. List all travel expenses including out-of-town meals, hotel, air fare, etc., in section C2.		
Auto Travel — See Section **C1**		
Business Gifts – Limited to $25 per recipient per year. **Must** be ordinary & necessary.		
Continuing Education — See Section **C4**		
Employment Seeking & Resume Fees		
Entertainment & Meals (Enter 100% of expense)		
Equipment – Include individual items costing more than $500 in Section B11		
Insurance – Malpractice, E&O, Etc.		
Occupational Licenses, Fees, Credentials, Etc.		
Publications & Journals		
Telephone (Business calls only)		
Tools – Include individual items costing more than $500* in Section B11		
Supplies		
Uniform Purchases (Not including street wear)		
Uniform Cleaning		
Union & Professional Dues		
Other:		
Other Miscellaneous Deductions		
Attorney Fees (To protect or produce taxable income only)		
IRA or SE Plan Fees Paid By You (Not deducted from the plan)		
Tax Preparation & Consulting Fees		
Credit/Debit Card Fees to Make Tax Payments		
Other:		

B10 - INVESTMENT EXPENSES

The investment expenses listed in this section are used to:

- Determine how much investment interest is deductible.
- Add to miscellaneous deductions subject to the 2% of AGI limitation.
- Reduce the net investment income tax.

Complete this section whether itemizing deductions or not.

Investment Expenses – DIRECTLY connected with the production of TAXABLE INCOME ONLY! Do not include purchase or sales costs. Include interest in Section B2.

Investment Advisory Fees	
Safe Deposit Box Fees	
Legal & Accounting (Related to investments)	
Other:	

B11 – ITEMS COSTING $500* OR MORE

Equipment, tools, computers, etc., used in business and costing more than $500* and having a useful life of more than one year must be treated differently for tax purposes.

Description of Property	Date Acquired	Cost
	/ /	
	/ /	
	/ /	

*The threshold $ amount, effective for 2013, has been established to be $500 by new regulations.

RELOCATION, HOME SALE, DEBT RELIEF, ENERGY CREDITS

D1 – HOME SALE

If you sold your home, abandoned it, or lost it to foreclosure, the disposition may need to be reported. If you received a 1099-S, it is very important that you provide it. If you abandoned the home or lost it to foreclosure, see Section D4.

Address of Home Sold	
Date Purchased	/ /
Purchase Price (including purchase escrow costs)	
Gain Deferred from a Home Sale made prior to 5/7/1997 This generally does not apply to individuals who have previously sold a home after 5/6/1997. If it applies, bring the Form 2119 for the year of the last home sale prior to 5/7/97.	
Improvements to Home Sold (not maintenance)	
Date of Sale	/ /
Sales Price	
Sales Expenses	

(Please bring final closing escrow statement. This document will have the information needed for these entries.)

P If you owned and used the home as your primary residence for two of the prior five years (counting back from the sale date)	☐
P If your spouse (if married) owned and used the home as his/her primary residence for two of the prior five years	☐
If owned and used less than two years, give reason for sale:	
P If the home was ever used for business (such as a rental, home office or day care center)	☐
P If any of the business use in the prior question was before 5/7/97	☐
P If the home was acquired by tax-deferred (Sec 1031) exchange after 10/22/04	☐
P If you (and spouse if married) have excluded gain from the sale of a prior residence within two years of the date of sale of this residence	☐
P If the home was inherited (including from a deceased spouse)	☐
P If the home was not used as your primary residence for any period after 2008	☐
P If you previously claimed the new or long time resident homeowner credit	☐

D2 – HOME ENERGY CREDITS

Enter only items certified by the manufacturer to meet Government energy standards.

Energy-Efficient Property – QUALIFIED solar electric generation, solar water heating systems, fuel cell property, wind energy property, and geothermal heat pumps for a RESIDENCE OF THE TAXPAYER LOCATED WITHIN THE U.S. ☐ P If primary residence

Description of Property	Cost

D3 – MOVING DEDUCTIONS

To qualify for a moving expenses deduction, the distance to the new job from the old home must be at least 50 miles farther than to the old job from the old home.

☐ P If employer reimbursed any amount of moving expense or home sale assistance and provide the reimbursement statement from the employer (Form 3903 or a substitute statement)

A - Miles from Old Residence to New Job			miles
B - Miles from Old Residence to Old Job			miles
A minus B – if less than 50 miles, stop: no deduction allowed			miles
Commercial Mover		Temporary Storage (up to 30 days)	
Truck Rental		Rental Fuel Costs	
Trailer Rental		Highway Tolls	
Lodging en route (no meals)		Airfare	
# of owned vehicles driven to new home		Auto Travel	miles
Boxes/Tape/Supplies		Other:	
Other:		Other:	

D4 – DEBT RELIEF & FORECLOSURE

If you had debt totally or partially forgiven, you may be required to report debt relief income. This includes real estate mortgages, credit card debt, vehicle loans, etc. Debts discharged in bankruptcy are not included. Please call the office in advance to discuss what additional documentation may be required.

☐ P If you had any amount of credit card debt forgiven and provide a copy of the 1099-C you received from the financial institution

☐ P If you abandoned your home and provide a copy of the 1099-A and/or the 1099-C you received from the financial institution (also complete Section D1 home sale information)

☐ P If your home was foreclosed upon or you sold it under a "short sale" agreement with the lender and provide a copy of the 1099-A and/or the 1099-C you received from the financial institution (also complete Section D1 home sale information)

D5 – QUESTIONS YOU MAY HAVE

D6 - SIGNATURE

To the best of my knowledge, all the information contained within this document is true, correct and complete.

	/ /		/ /
Filer's Signature	**Date**	**Spouse's Signature**	**Date**