Client Organizer Topical Index

This client organizer topical index is designed to help you quickly locate the items listed. To use the index just locate the topic and refer to the page number listed. The page number corresponds to the number printed in the top right corner of your organizer sheets. Please note this organizer is customized specifically for you, and may not contain all of the pages listed here.

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Please note the following conventions used throughout your client organizer: T/S/J and T/S headings should be used to indicate if an item belongs to the (T)axpayer, (S)pouse, or (J)oint. Also, if an item did not occur in your resident state, please indicate the state's postal code abbreviation in which the item occurred. Control totals and [] numbers are for preparer use only.

Form ID: INDX

FOIM ID: 1040		Personai	ıntormat	ion			1
o (,	status code (1 = Single, 2 = Married filing joint,	3 = Married filing separate,	4 = Head of hou	sehold, 5 = Qua	lifying widow(er))		[1]
-	re married but living apart all year						[2]
Mark if your no	nresident alien spouse does not have a	an Individual Taxpaye	er Identification	on Number (IIIN)		[3]
0			Taxpayer			Spo	
Social security	number			[4]	-		[5]
First name				[6]			
Last name				[8]			
Occupation	· · · · · · · · · · · · · · · · · · ·			[10]			[1 ⁻
•	0 to the presidential election campaign	tund? (1 = Yes, 2 = No, 3	3 = Blank)	[12]			[14
•	ent of another taxpayer	4000 (11 /	0	[15]			[16
	ncome less than 1/2 support age 18 or	19 - 23 full-time stud	ient? (Y, N)	[17]			
Mark if legally b	Dlind			[20]			[2
Date of birth				[22]			[24
Date of death				[26]			[27
,	elephone number/ext number		[28]	[29]		[30]	
•	telephone number			[32]			[3:
Do you authoriz	ze us to discuss your return with the IRS	S? (Y, N)		[34]			
		Present Mai	ilina Ada	dress			
		Tresent ma	iiiig Au	ui 033			
Address							[38
Apartment num							[39
	al code, zip code				[40]	[41]	[42
Foreign country							[44
In care of addre	essee						[47
		Dependent	Informa	ation			
	(*DI-	<u> </u>			b		Care
	("Ple	ase refer to Depend	ient Codes	located at ti	ne bottom)	Months*** De	ep expenses
First Name	e[48] Last Name	Date of Birth	Social Secui	ity No	Relationship	in Coo	des paid for ** dependen
i iist ivaiiid	Last Name	Date of Birtin	Jociai Jecui	ity ivo.	Relationship	Home	dependen
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	who lived with you but is not your deper	ndent			-		[49
Social security	number of qualifying person						[50
		Dependen	t Codes				
*Basic	1 = Child who lived with you	•	**Other	1 = Studer	nt (Age 19 - 23)		
	2 = Child who did not live with you	u			ed dependent		
	3 = Other dependent				dent who is both a	student and di	sabled
	5 = Qualifying child for Earned Inc	come Credit only		о – Борон		otaaoni ana an	Jabioa
	6 = Children who lived with you, b		r Farnad Inc	come Credit			
	_						
	7 = Children who lived with you, b				unad Inaama One I		
****	8 = Children who lived with you, b	out do not quality fo	r Uniid Tax	Credit or Ea	irnea income Credi	ιτ	
***Months	77 = Reported on odd year return						
	88 = Reported on even year return	l					
	99 = Not reported on return						

Form ID: 1040

Client Contact Information

Preparer - Enter on Screen Contact

Tax matters person (Indicate which spouse handles tax return related question	s) (Blank = Both, T = Taxpayer, S = Spouse)	[8]
Taxpayer email address		[9]
Spouse email address		[10]
	Taxpayer	Spouse
Car telephone number	[11]	[19]
Fax telephone number	[12]	[20]
Mobile telephone number	[13]	[21]
Pager number	[14]	[22]
Other:	[15]	[23]
Telephone number	[16]	[24]
Extension	[17]	[25]
Preferred method of contact:		
Email, Work phone, Home phone, Fax, Mobile phone, Car phone	[18]	[26]

Form ID: Bank

Direct Deposit/Electronic Funds Withdrawal Information

3

If you would like to have a refund direct deposited into or a balance due debited from your bank account(s), please enter information in the fields below. Note that electronic funds will be withdrawn only from the primary account listed below.

Financial institution routing transit number					
Thansar monator roding transcri					[1]
Name of financial institution					[2]
Your account number		_			[3]
Type of account (1 = Savings, 2 = Checking, 3 = IRA*)					_[4]
Mark if married filing jointly and this is a joint account (Both taxpayer and spo	use names are on the account)				[5]
Mark if financial institution is foreign based (Not located in the territorial jurisdict	on of the United States)				_[6]
Enter the maximum dollar amount, or percentage of total refund	Dollar	[7]	or	Percent (xxx.xx)	[8]
Secondary account #1:					
Financial institution routing transit number					[23]
Name of financial institution					[24]
Your account number		_			[25]
Type of account (1 = Savings, 2 = Checking, 3 = IRA*)					[26]
Mark if married filing jointly and this is a joint account (Both taxpayer and spo	use names are on the account)				[27]
Mark if financial institution is foreign based (Not located in the territorial jurisdict	on of the United States)				[28]
Enter the maximum dollar amount, or percentage of total refund	Dollar	[9]	or	Percent (xxx.xx)	[10]
Secondary account #2:					
Financial institution routing transit number					[29]
Name of financial institution					[30]
Your account number					[31]
Type of account (1 = Savings, 2 = Checking, 3 = IRA*)		_			[32]
Mark if married filing jointly and this is a joint account (Both taxpayer and spo	use names are on the account)				[33]
Mark if financial institution is foreign based (Not located in the territorial jurisdict	on of the United States)				[34]
Cotor the previous dellar assesset as presentent of total refund	5 "	****		D ()	[14]
Enter the maximum dollar amount, or percentage of total refund	Dollar	[13]	or	Percent (xxx.xx)	
*Refunds may only be direct deposited to established traditional, Roth or SEP-IRA accounts. Make				, ,	
•	e sure direct deposits will be acc	epted by the bank or		, ,	
*Refunds may only be direct deposited to established traditional, Roth or SEP-IRA accounts. Make	Savings Bond Posts and registered your refund, if applicable tion of married filing j	urchases for up to three ple, please com oint returns) ar	differ	ent persons. I	f you would like information.
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Form ID: ELF	Electronic Filing	4
To comply with this requirement you	parers who expect to prepare a certain amount of federal individual tax returns to file the our return will be electronically filed this year if it qualifies for electronic filing under IRS ruter return instead of filing electronically.	-
Mark if you want to file a paper return e	even if you qualify for electronic filing	[1]
Receive email notification(s) when your If 1 or 2, please provide email addr	electronic file is accepted by the taxing agency (Blank = None, 1 = Return, 2 = Return & Extension) ess on Organizer Form ID: Info	[2]
Mark if you are filing a balance due retu	urn electronically and you want to pay the amount due by debiting your	
financial institution account		[9]
The IRS requires a Personal Identificat	ion Number (PIN) be used in signing returns that are electronically filed.	
Each taxpayer and spouse, if applicable	e, must provide a 5 digit self-selected PIN of your choice other than all zeroes.	
Taxpayer self-selected Personal Ider	tification Number (PIN)	[7]
Spouse self-selected Personal Identi	fication Number (PIN)	[8]

Form ID: ELF

Form ID: Est	Estimated Taxes	5
If you have an overnayme	ent of 2013 taxes, do you want the excess:	
Refunded	one of 2010 taxes, do you want the oxecos.	[47]
Applied to 2014 es	timated tax liability	[48]
Do you expect a consider	rable change in your 2014 income? (Y, N)	[49]
If yes, please explain any	/ differences:	
-		[50]
-		[51]
-		[52] [53]
Do you expect a conside	rable change in your deductions for 2014? (Y, N)	[53] [54]
If yes, please explain any		[0.]
		[55]
		[56]
		[57]
-		[58]
	rable change in the amount of your 2014 withholding? (Y, N)	[59]
If yes, please explain any	/ differences:	7001
-		[60] [61]
-		[61] [62]
-		[62] [63]
Do you expect a change	in the number of dependents claimed for 2014? (Y, N)	[64]
If yes, please explain any	y differences:	
		[65]
-		[66]
		[67]
Mark if you use the Flect	ronic Federal Tax Payment System (EFTPS) to pay your estimated taxes	[68]
Walk ii you use the Liect	Tonic rederal rax rayment System (Er ri S) to pay your estimated taxes	[69]
	2013 Federal Estimated Tax Payments	
2012 overpayment applie	d to 2012 actimator	[4]
	d to 2013 estimates +ulated amounts on the dates due indicated below. Skip the remaining fields.	[1] [4]
Walk if you paid the oalor	dialect amounts on the dates due indicated bolow. Only the formalising holds.	[¬]
If your estimated paymen	ts were not made on the date due or were for an amount other than the calculated amount below, please enter	
the actual date and amou	unt paid.	
	Date Due Date Paid if After Date Due Amount Paid Calculated Amo	ount
1st quarter payment	4/15/13[5] +[6]	
2nd quarter payment 3rd quarter payment	6/17/13[7] +[8] 9/16/1319] +[10]	
4th quarter payment	9/16/13	
Additional payment	[13] + [14]	
NOTES/QUESTION	S:	

Control Totala	Farms ID. Fat
Control Totals +	Form ID: Est

Form ID: St Pmt		2013 State Estim	nated Tax Payme	nts	6
Taxpayer/Spouse/Joint (State postal code	T, S, J)				[1] [2]
Amount paid with 2012 2012 overpayment appli Treat calculated amount	ed to '13 estimates				+[3] +[4] [8]
	Date Paid		Amoun	t Paid	Calculated Amount
1st quarter payment	[9]		+	<u>[</u> 10]	
2nd quarter payment	[11]		+	[12]	
3rd quarter payment	[13]		+	[14]	
4th quarter payment	[15]		+	[16]	
Additional payment	[17]		+	[18]	
	2	2013 City Estima	ted Tax Payment	S	
	City #1			City #2	
City name	•	[28]	City name		[50]
Amount paid with 2012	return +	[31]	Amount paid with 2012	return	+[53]
2012 overpayment appli	ed to '13 estimates +	[32]	2012 overpayment app	ied to '13 estimates	+[54]
Treat calculated amount	s as paid	[36]	Treat calculated amoun	ts as paid	[58]
	Date Paid	Amount Paid		Date Paid	Amount Paid
1st quarter payment	[37] +	[38]	1st quarter payment	[59]	+[60]
2nd quarter payment	[39] +	[40]	2nd quarter payment	[61]	+[62]
3rd quarter payment	[41] +	[42]	3rd quarter payment	[63]	+[64]
4th quarter payment	[43] +	[44]	4th quarter payment	[65]	+[66]
	Calculated Amount			Calculated Amount	<u>t</u>
1st quarter payr			1st quarter pay		
2nd quarter pay	ment		2nd quarter pa	yment	
3rd quarter payı			3rd quarter pay		
4th quarter payr	ment		4th quarter pay	ment	
	City #3			City #4	
City name		[72]	•		[94]
Amount paid with 2012		[75]	•		+[97]
2012 overpayment appli		[76]			+[98]
Treat calculated amount	s as paid	[80]	Treat calculated amoun	ts as paid	[10:
	Date Paid	Amount Paid		Date Paid	Amount Paid
1st quarter payment		[82]		[103]	+[10-
2nd quarter payment		[84]		[105]	+[100
3rd quarter payment		[86]		[107]	+[108
4th quarter payment	[87] +	[88]	4th quarter payment	[109]	+[110
	Calculated Amount			Calculated Amount	<u>:</u>
1st quarter payr			1st quarter pay		
2nd quarter pay			2nd quarter pag		
3rd quarter payı			3rd quarter pay		
4th quarter payr	ment		4th quarter pay	ment	

Form ID: SumRep	Income Summary	7
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Below is a list of the forms as reported in last year's tax return. Please provide copies of all of the forms you received. To indicate which forms are attached, enter a "1" for attached in the field provided next to the Description. To indicate which forms are not applicable, enter a "2" for not applicable (N/A) in the field provided next to the Description. Otherwise, leave this field blank.

Form	T/S/J	Description	1 = Attache 2 = N/A
	.,0,0	2000 P. C.	1471
			- —
			- —
			- —
			- —
			- —
			- —
			- —
			- —
			- —
			- —
			- —
			- —
			- —

	Form ID: SumRen

Form	

Interest and Dividend Summary

8

Below is a list of the forms as reported in last year's tax return. Please provide copies of all 1099-INT and 1099-DIV you received. To indicate which forms are attached, enter a "1" for attached in the field provided. To indicate which forms are not applicable, enter a "2" for not applicable (N/A) in the field provided. Otherwise, leave this field blank.

Form	T/S/J	Description	Mark if f Foreign	I = Attached 2 = N/A
	_		_	_
	_		_	_
				_
	_		_	_
	_		_	_
			_	_
	_		_	_
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			_	_
			_	_
			_	_
	_		_	_
			_	_

Wages and Salaries #1

Please provide a	all copies of Form W-2.	
	2013 Information	Prior Year Information
Taxpayer/Spouse (T, S)	[1]	
Employer name	<u>[</u> 3]	
Were these wages earned for service as: (1 = Minister, 2 = Military, 3 = Farm	ing / Fishing, 4 = National Guard)[5]	
Mark if this is your current employer	[6]	
Federal wages and salaries (Box 1)	+[10]	
Federal tax withheld (Box 2)	+[12]	
Social security wages (Box 3) (If different than federal wages)	+[14]	
Social security tax withheld (Box 4)	+[16]	
Medicare wages (Box 5) (If different than federal wages)	+[18]	
Medicare tax withheld (Box 6)	+[21]	
SS tips (Box 7)	+[23]	
Allocated tips (Box 8)	+[25]	
Dependent care benefits (Box 10)	+[27]	
Box 13 -		
Statutory employee	[29]	
Retirement plan	_[30]	
Third-party sick pay	[31]	
State postal code (Box 15)	[32]	
State wages (Box 16) (If different than federal wages)	+[34]	
State tax withheld (Box 17)	+[36]	
Local wages (Box 18)	+[38]	
Local tax withheld (Box 19)	[40]	
Name of locality (Box 20)	[43]	
	_	
	Control Totals +	
	and Calariae #2	
vvages	and Salaries #2	

Please provide all copies of Form W-2. 2013 Information **Prior Year Information** Taxpayer/Spouse (T, S) _[1] Employer name [3] Were these wages earned for service as: (1 = Minister, 2 = Military, 3 = Farming / Fishing, 4 = National Guard) __[5] Mark if this your current employer __[6] Federal wages and salaries (Box 1) [10] Federal tax withheld (Box 2) [12] Social security wages (Box 3) (If different than federal wages) Social security tax withheld (Box 4) [16] Medicare wages (Box 5) (If different than federal wages) [18] Medicare tax withheld (Box 6) SS tips (Box 7) Allocated tips (Box 8) [25] Dependent care benefits (Box 10) [27] Box 13 -Statutory employee [29] Retirement plan [30] Third-party sick pay __[31] State postal code (Box 15) [32] State wages (Box 16) (If different than federal wages) [34] State tax withheld (Box 17) [36] Local wages (Box 18) [38] Local tax withheld (Box 19) [40] Name of locality (Box 20) [43]

	Form ID: W2

Please provide copies of all Form 1099-INT or other statements reporting interest income.

*Whole numbers will be treated as \$ amounts. Enter percentages in the XXX.XX format. For example, enter 100% as 100.00 or 75.5% as 75.50.

T/S/J	Type Code (*	*See c	odes below)	Interest [1] Income	Tax Exempt Income	Penalty on Early Withdrawal	U.S. Obligations* \$ or %	Tax Exempt* \$ or %	Foreign Taxes Paid	Prior Year Information
		1	Payer							
		Ľ	Amounts	+						
		2	Payer							
			Amounts	+						
		3	Payer			ı	1			
		Ш	Amounts	+						
		4	Payer	ı		T	T T			
	ı		Amounts	+						
		5	Payer	ı		Γ	1 1			
	<u> </u>		Amounts	+						
		6	Payer	1		Γ	<u> </u>			
			Amounts	+						
		7	Payer	1		T	<u> </u>			
	I		Amounts	+						
		8	Payer	. 1		<u> </u>	1 1			
	I		Amounts	+						
		9	Payer	<u> </u>		I	<u> </u>			
	I	Н	Amounts	+						
		10	Payer	<u> </u>			<u> </u>			
			Amounts	+						

	**Interest Codes	
Blank = Regular Interest	4 = Accrued Interest	6 = ABP Adjustment
3 = Nominee Distribution	5 = OID Adjustment	7 = Series EE & I Bond

ſ		
-[Control Totals +	Form ID: B-1

Please provide copies of all Form 1099-DIV or other statements reporting dividend income.

*Whole numbers will be treated as \$ amounts. Enter percentages in the XXX.XX format. For example, enter 100% as 100.00 or 75.5% as 75.50.

11

T S T J C	ype ode (**	'See codes below)	Ordinary [2] Dividends	Qualified Dividends	Total Cap Gain Distributions	Section 1250	Sec. 1202	28% Capital Gain	Tax Exempt Dividends	U.S. Obligations* \$ or %	Tax Exempt* \$ or %	Foreign Taxes Paid	Prior Year Information
	1	Payer											
	<u>'</u>	Amounts +											
	2	Payer									ı		
		Amounts +											
	3	Payer									· · · · · · · · · · · · · · · · · · ·		
		Amounts +											
Ш	4	Payer				<u> </u>					 		
		Amounts +											
	5	Payer									ı		
		Amounts +											
	6	Payer		1		<u> </u>	ı				Т		
		Amounts +											
Ш	7	Payer				<u> </u>					 		
	ľ	Amounts +											
	8	Payer	т-				T				T T		
		Amounts +											
	9	Payer	т				T				T T		
		Amounts +											
	10	Payer	т				Т				,		
		Amounts +											

	**Dividend Codes
Blank = Other	3 = Nominee

Control Totals +	Form ID: B-2

Seller Financed Mortgage Interest Income

Please provide copies of all Form 1099-INT or other statements reporting interest income.

			2013 Information	Prior Year Information
Taxpayer/Spouse/Joint (T, S, J)			_	
Payer's name				
Payer's street address				
Payer's city, state, zip code				
Payer's social security number				
Interest income amount received in 2013		+	[1]	
Taxpayer/Spouse/Joint (T, S, J)				
Payer's name			_	
Payer's street address				
Payer's city, state, zip code	_		_	
Payer's social security number				
Interest income amount received in 2013		+	[1]	
Taxpayer/Spouse/Joint (T, S, J)			_	
Payer's name				
Payer's street address				
Payer's city, state, zip code				
Payer's social security number				
Interest income amount received in 2013		+	[1]	
Taxpayer/Spouse/Joint (T, S, J)			_	
Payer's name				
Payer's street address				
Payer's city, state, zip code				
Payer's social security number				
Interest income amount received in 2013		+	[1]	
Taxpayer/Spouse/Joint (T, S, J)			_	
Payer's name				
Payer's street address	_		_	
Payer's city, state, zip code				
Payer's social security number				
Interest income amount received in 2013		+	[1]	
Taxpayer/Spouse/Joint (T, S, J)			_	
Payer's name				
Payer's street address	_			
Payer's city, state, zip code				
Payer's social security number				
Interest income amount received in 2013		+	[1]	
Taxpayer/Spouse/Joint (T, S, J)			_	
Payer's name				
Payer's street address	_			
Payer's city, state, zip code				
Payer's social security number				
Interest income amount received in 2013		+	[1]	
Taxpayer/Spouse/Joint (T, S, J)			_	
Payer's name				
Payer's street address	_			
Payer's city, state, zip code				
Payer's social security number				
Interest income amount received in 2013		+	[1]	
	0		Ι	In the second
	Control Totals +		i	Form ID: B-3

Form ID: B-4	Income from REMICs	13
Taxpayer/Spouse/Joint (T, S, J) Name of activity Employer identification number State postal code	Please provide all Schedules Q.	[1]
Taxpayer/Spouse/Joint (T, S, J) Name of activity Employer identification number State postal code		

m ID: D	Sales of Stocks, Sec	urities, and Other	Investmen	t Property	14		
Please provide copies of all Forms 1099-B and 1099-S Did you have any securities become worthless during 2013? (Y, N) Did you have any debts become uncollectible during 2013? (Y, N) Did you have any commodity sales, short sales, or straddles? (Y, N) Did you exchange any securities or investments for something other than cash? (Y, N) _[12]							
ŋ	Description of Property [1]	Date Acquired	Date Sold	Gross Sales Price (Less expenses of sale)	Cost or Other Ba		
				+	+		
				+	+		
				+	+		
				+	+		
				+	+		
				+	+		
				+	+		
-				+	+		
				+	+		
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				+	+		
				+	+		
				+	+		
				+	+		

_		 +	+
	Control Totals +		Form ID: D

Form ID: InfoD

Sales of Stocks, Securities, and Other Investment Property

14a

Form ID: InfoD

Please provide copies of all Forms 1099-B and 1099-S

T/S/J	Description of Property [1]	Date Acquired	Date Sold	Gross Sales Price (Less expenses of sale)	Cost or Other Basis
				+	+
_				+	+
_				+	+
				+	+
_				+	+
_				+	+
				+	+
				+	+
				+	+
				+	+
				+	+
				+	+
		-	-	+	+
_	_			+	+
				+	+
_				+	+
_				+	+
				+	+
				+	+
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				+	+
NOTES/Q	UESTIONS:				

Form	ID.	1099F

Please provide all Forms 1099-R

- 4	
	,

Please	provide all Forms 1	099-R. 2013 Information	Prior Year Information
Taxpayer/Spouse (T, S)		[1]	
Name of payer		[3]	
State postal code			
Gross distributions received (Box 1)	_		
Taxable amount received (Box 2a)		[7]	
, ,		[9]	
Federal withholding (Box 4)	т	[11]	
Distribution code (Box 7)	_	_[14]	_
Mark if distribution is from an IRA, SEP, SIMPLE retirement plan		[16]	
State withholding (Box 12)		[17]	
Local withholding (Box 15)		[19]	
Amount of rollover	+	[21]	
Mark if distribution was due to a pre-retirement age disability		[23]	
Mark if distribution was from an inherited IRA		[24]	
	Control Totals +		
		•	
Pension, Annuity	y, and IRA Dis	tributions #2	
Please	provide all Forms 1		B: V 14 4
Townsyler/Chause (T. C)		2013 Information	Prior Year Information
Taxpayer/Spouse (T, S)		[1]	
Name of payer		[3]	
State postal code		[5]	
Gross distributions received (Box 1)		[7]	
Taxable amount received (Box 2a)	+	[9]	
Federal withholding (Box 4)	+	[11]	
Distribution code (Box 7)		[14]	_
Mark if distribution is from an IRA, SEP, SIMPLE retirement plan	n	[16]	
State withholding (Box 12)		[17]	
Local withholding (Box 15)	+	[19]	
Amount of rollover	+	[21]	
Mark if distribution was due to a pre-retirement age disability		[23]	
Mark if distribution was from an inherited IRA		[24]	
	Control Totals +		
	Totale :	<u>'</u>	
Pension, Annuity	y, and IRA Dis	tributions #3	
Please	provide all Forms 1	099-R.	
		2013 Information	Prior Year Information
Taxpayer/Spouse (T, S)		[1]	
Name of payer		[3]	
State postal code		[5]	
Gross distributions received (Box 1)	+	[7]	
Taxable amount received (Box 2a)	+	[9]	
Federal withholding (Box 4)	+	[11]	
Distribution code (Box 7)		[14]	_
Mark if distribution is from an IRA, SEP, SIMPLE retirement plan	n	[16]	
State withholding (Box 12)	+		
Local withholding (Box 15)		[19]	
Amount of rollover		[21]	
Mark if distribution was due to a pre-retirement age disability			
Mark if distribution was from an inherited IRA		[24]	
		,	
	Control Totals +		
			Form ID: 1099R

Form	ID.	SSA-	100

Social Security, Tier 1 Railroad Benefits

16

Please provide a copy of Form(s) SSA-1099 or RRB-1099			
Taxpayer/Spouse (T, s)	_[1]		
State postal code	[2]		
Social Security	Benefits		
	2013 Information	Prior Year Information	
If you received a Form SSA - 1099, please complete the following information:			
Net Benefits for 2013 (Box 3 minus Box 4) (Box 5)	+[8]		
Voluntary Federal Income Tax Withheld (Box 6)	+[10]		
From the DESCRIPTION OF AMOUNT IN BOX 3 area of Form SSA-1099:			
Medicare premiums	+[12] + [14]		
Prescription drug (Part D) premiums	+[14]		
Tion 4 Poilmond	Danafita		
Tier 1 Railroad			
W	2013 Information	Prior Year Information	
If you received a Form RRB - 1099, please complete the following information:			
Net Social Security Equivalent Benefit:			
Portion of Tier 1 Paid in 2013 (Box 5)	+[22]		
Federal Income Tax Withheld (Box 10)	+[25]		
Medicare Premium Total (Box 11)	+[27]		
Additional Information Abou	ut Benefits Received		
Additional information about the benefits received not reported above. For example benefits in 2013. This information will be reported in the SSA-1099 DESCRIPTION		RRB-1099 Boxes 7 through 9.	
		[4 [4	
NOTES/QUESTIONS:			
NOTEGRACIONO.			

Form ID: IRA	Traditional IRA			17
		Taxpayer		Spouse
Are you or your spouse (if MFJ or MFS) covered by an emp	loyer's retirement			
plan? (Y, N)		[1]		[2]
Do you want to contribute the maximum allowable traditional	IRA contribution amount? If			
yes, enter the applicable code: (1 = Deductible only, 2 = Both ded	uctible and nondeductible)	[3]		[4]
Enter the total traditional IRA contributions made for use in 2	2013 +		+	[6]
		Taxpayer		Spouse
Enter the nondeductible contribution amount made for use in	n 2013 +	[11]	+	[12]
Enter the nondeductible contribution amount made in 2014 f		[13]	+	[14]
Traditional IRA basis	+	[15]	+	[16]
Value of all your traditional IRA's on December 31, 2013:				
	+	[17]	+	[18]
	+		+	
	+		+	
	+		+	
	+		+	
	Roth IRA			
Please provide copies o	Roth IRA f any 1998 through 2012 Form 86	606 not prepared by this	office	
Please provide copies o		606 not prepared by this Taxpayer	office	Spouse
Please provide copies of Mark if you want to contribute the maximum Roth IRA contribute.	f any 1998 through 2012 Form 86		office	Spouse[28]
	f any 1998 through 2012 Form 86	Taxpayer	office +	•
Mark if you want to contribute the maximum Roth IRA contri	f any 1998 through 2012 Form 86 bution +	Taxpayer[27]	office +	[28]
Mark if you want to contribute the maximum Roth IRA contributer the total Roth IRA contributions made for use in 2013	f any 1998 through 2012 Form 86 bution + ations for 2013 +	Taxpayer [27][29]	office ++ ++	[28] [30]
Mark if you want to contribute the maximum Roth IRA contributer the total Roth IRA contributions made for use in 2013 Enter the total amount of Roth IRA conversion recharacterizenter the total contribution Roth IRA basis on December 31, Enter the total Roth IRA contribution recharacterizations for	bution + ations for 2013 + 2012 + 2013 +	Taxpayer[27][29][37]	office ++	[28] [30] [38]
Mark if you want to contribute the maximum Roth IRA contributer the total Roth IRA contributions made for use in 2013. Enter the total amount of Roth IRA conversion recharacterizenter the total contribution Roth IRA basis on December 31, Enter the total Roth IRA contribution recharacterizations for Enter the Roth conversion IRA basis on December 31, 2012.	bution + ations for 2013 + 2012 + 2013 +	Taxpayer[27][29][37][41]	++ ++ ++	[28] [30] [38] [42]
Mark if you want to contribute the maximum Roth IRA contributer the total Roth IRA contributions made for use in 2013 Enter the total amount of Roth IRA conversion recharacterizenter the total contribution Roth IRA basis on December 31, Enter the total Roth IRA contribution recharacterizations for	tations for 2013 + 2012 + 2013 + 4 2013 +	Taxpayer[27][29][37][41][43]	+ + + + + +	[28] [30] [38] [42] [44]
Mark if you want to contribute the maximum Roth IRA contributer the total Roth IRA contributions made for use in 2013. Enter the total amount of Roth IRA conversion recharacterizenter the total contribution Roth IRA basis on December 31, Enter the total Roth IRA contribution recharacterizations for Enter the Roth conversion IRA basis on December 31, 2012.	tations for 2013 +	Taxpayer[27][29][37][41][43][45]	+ + + + + + +	[28] [30] [38] [42] [44] [46]
Mark if you want to contribute the maximum Roth IRA contributer the total Roth IRA contributions made for use in 2013. Enter the total amount of Roth IRA conversion recharacterizenter the total contribution Roth IRA basis on December 31, Enter the total Roth IRA contribution recharacterizations for Enter the Roth conversion IRA basis on December 31, 2012.	bution + ations for 2013 + 2012 + 2013 + + + +	Taxpayer[27][29][37][41][43][45]	+ + + + + + + +	[28] [30] [38] [42] [44] [46]
Mark if you want to contribute the maximum Roth IRA contributer the total Roth IRA contributions made for use in 2013. Enter the total amount of Roth IRA conversion recharacterizenter the total contribution Roth IRA basis on December 31, Enter the total Roth IRA contribution recharacterizations for Enter the Roth conversion IRA basis on December 31, 2012.	tations for 2013 +	Taxpayer[27][29][37][41][43][45]	+ + + + + +	[28] [30] [38] [42] [44] [46] [48]
Mark if you want to contribute the maximum Roth IRA contributer the total Roth IRA contributions made for use in 2013. Enter the total amount of Roth IRA conversion recharacterizenter the total contribution Roth IRA basis on December 31, Enter the total Roth IRA contribution recharacterizations for Enter the Roth conversion IRA basis on December 31, 2012.	tations for 2013 +	Taxpayer[27][29][37][41][43] _[45]	+ + + + + +	[28] [30] [38] [42] [44] [46] [48]
Mark if you want to contribute the maximum Roth IRA contributer the total Roth IRA contributions made for use in 2013. Enter the total amount of Roth IRA conversion recharacterizenter the total contribution Roth IRA basis on December 31, Enter the total Roth IRA contribution recharacterizations for Enter the Roth conversion IRA basis on December 31, 2012.	tations for 2013 +	Taxpayer[27][29][37][41][43] _[45]	+ + + + + +	[28] [30] [38] [42] [44] [46] [48]

Control Totals +	Form ID: IRA

Canadian Registered Retirement Plans #1

Please provide all Forms T4RSP, T4RIF, and Canadian plan custodian statements

	2013 Information	Prior Year Information
Taxpayer/Spouse (T, S)	[1]	
Name of custodian	[2]	
State postal code	[3]	
Type of plan (1 = RRSP, Registered Retirement Savings Plan, 2 = RRIF, Registered Retirement Income Fund)	[14]	
Status in plan (1 = Beneficiary, 2 = Annuitant)	[15]	
Election under Article XVIII(7) of the U.SCanada income tax treaty:		
Mark if you previously elected to defer income tax	[16]	
Year election was made	[17]	
Mark if you are electing for this year and subsequent years	[18]	
Distributions received from the plan in 2013	+[21]	
Complete this section only if NOT electing to defer U.S. incor	me tax on undistributed earning	ıs
	2013 Information	Prior Year Information
Undistributed earnings		
Interest income	+[38]	
Ordinary dividends	+[40]	
Qualified dividends	+[42]	
Total capital gains	+[44]	
Other income:		
	+[46]	
	+	
	+	
	+	
	+	
Control Totals -	+	
Canadian Registered Retireme	nt Plane #2	
Gariadian Registered Retireme	11t 1 lai13 #Z	
Please provide all Forms T4RSP, T4RIF, and Canadia		
Please provide all Forms T4RSP, T4RIF, and Canadia		Prior Year Information
	n plan custodian statements	Prior Year Information
Please provide all Forms T4RSP, T4RIF, and Canadia	n plan custodian statements 2013 Information	Prior Year Information
Please provide all Forms T4RSP, T4RIF, and Canadia Taxpayer/Spouse (T, S)	n plan custodian statements 2013 Information _[1]	Prior Year Information
Please provide all Forms T4RSP, T4RIF, and Canadia Taxpayer/Spouse (T, S) Name of custodian	n plan custodian statements 2013 Information _[1] _[2]	Prior Year Information
Please provide all Forms T4RSP, T4RIF, and Canadia Taxpayer/Spouse (T, S) Name of custodian State postal code	n plan custodian statements 2013 Information [1][2][3]	Prior Year Information
Please provide all Forms T4RSP, T4RIF, and Canadia Taxpayer/Spouse (T, S) Name of custodian State postal code Type of plan (1 = RRSP, Registered Retirement Savings Plan, 2 = RRIF, Registered Retirement Income Fund)	2013 Information [1] [2] [3] [14]	Prior Year Information
Please provide all Forms T4RSP, T4RIF, and Canadia Taxpayer/Spouse (T, S) Name of custodian State postal code Type of plan (1 = RRSP, Registered Retirement Savings Plan, 2 = RRIF, Registered Retirement Income Fund) Status in plan (1 = Beneficiary, 2 = Annuitant)	2013 Information [1] [2] [3] [14]	Prior Year Information
Please provide all Forms T4RSP, T4RIF, and Canadia Taxpayer/Spouse (T, S) Name of custodian State postal code Type of plan (1 = RRSP, Registered Retirement Savings Plan, 2 = RRIF, Registered Retirement Income Fund) Status in plan (1 = Beneficiary, 2 = Annuitant) Election under Article XVIII(7) of the U.SCanada income tax treaty:	2013 Information [1][2][3][14][15]	Prior Year Information
Please provide all Forms T4RSP, T4RIF, and Canadia Taxpayer/Spouse (T, S) Name of custodian State postal code Type of plan (1 = RRSP, Registered Retirement Savings Plan, 2 = RRIF, Registered Retirement Income Fund) Status in plan (1 = Beneficiary, 2 = Annuitant) Election under Article XVIII(7) of the U.SCanada income tax treaty: Mark if you previously elected to defer income tax	2013 Information [1][2][3][14][15][16][17]	Prior Year Information
Please provide all Forms T4RSP, T4RIF, and Canadia Taxpayer/Spouse (T, S) Name of custodian State postal code Type of plan (1 = RRSP, Registered Retirement Savings Plan, 2 = RRIF, Registered Retirement Income Fund) Status in plan (1 = Beneficiary, 2 = Annuitant) Election under Article XVIII(7) of the U.SCanada income tax treaty: Mark if you previously elected to defer income tax Year election was made Mark if you are electing for this year and subsequent years	2013 Information [1] [2] [3] [14] [15]	Prior Year Information
Please provide all Forms T4RSP, T4RIF, and Canadia Taxpayer/Spouse (T, S) Name of custodian State postal code Type of plan (1 = RRSP, Registered Retirement Savings Plan, 2 = RRIF, Registered Retirement Income Fund) Status in plan (1 = Beneficiary, 2 = Annuitant) Election under Article XVIII(7) of the U.SCanada income tax treaty: Mark if you previously elected to defer income tax Year election was made Mark if you are electing for this year and subsequent years	n plan custodian statements 2013 Information [1][2][3][14][15] [16][17][18]	Prior Year Information
Please provide all Forms T4RSP, T4RIF, and Canadia Taxpayer/Spouse (T, S) Name of custodian State postal code Type of plan (1 = RRSP, Registered Retirement Savings Plan, 2 = RRIF, Registered Retirement Income Fund) Status in plan (1 = Beneficiary, 2 = Annuitant) Election under Article XVIII(7) of the U.SCanada income tax treaty: Mark if you previously elected to defer income tax Year election was made Mark if you are electing for this year and subsequent years	n plan custodian statements 2013 Information [1][2][3][14][15] [16][17][18] +[21]	
Please provide all Forms T4RSP, T4RIF, and Canadia Taxpayer/Spouse (T, S) Name of custodian State postal code Type of plan (1 = RRSP, Registered Retirement Savings Plan, 2 = RRIF, Registered Retirement Income Fund) Status in plan (1 = Beneficiary, 2 = Annuitant) Election under Article XVIII(7) of the U.SCanada income tax treaty: Mark if you previously elected to defer income tax Year election was made Mark if you are electing for this year and subsequent years Distributions received from the plan in 2013	n plan custodian statements 2013 Information [1][2][3][14][15] [16][17][18] +[21]	
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Please provide all Forms T4RSP, T4RIF, and Canadia Taxpayer/Spouse (T, S) Name of custodian State postal code Type of plan (1 = RRSP, Registered Retirement Savings Plan, 2 = RRIF, Registered Retirement Income Fund) Status in plan (1 = Beneficiary, 2 = Annuitant) Election under Article XVIII(7) of the U.SCanada income tax treaty: Mark if you previously elected to defer income tax Year election was made Mark if you are electing for this year and subsequent years Distributions received from the plan in 2013 Complete this section only if NOT electing to defer U.S. incording to Interest income Ordinary dividends	2013 Information 2013 Information [1] [2] [3] [14] [15] [16] [17] [18] +[21] me tax on undistributed earning 2013 Information [38] +[40]	S
Please provide all Forms T4RSP, T4RIF, and Canadia Taxpayer/Spouse (T, S) Name of custodian State postal code Type of plan (1 = RRSP, Registered Retirement Savings Plan, 2 = RRIF, Registered Retirement Income Fund) Status in plan (1 = Beneficiary, 2 = Annuitant) Election under Article XVIII(7) of the U.SCanada income tax treaty: Mark if you previously elected to defer income tax Year election was made Mark if you are electing for this year and subsequent years Distributions received from the plan in 2013 Complete this section only if NOT electing to defer U.S. incor Undistributed earnings Interest income Ordinary dividends Qualified dividends	2013 Information 2013 Information [1] [2] [3] [14] [15] [16] [17] [18] +[21] me tax on undistributed earning 2013 Information [38]	S
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Form ID: Keogh Keogh, SEP, SIMPLE Contributions		19
Preparer use only		
Business activity or profession name		[3]
Taxpayer/Spouse (T, S)		[4]
State postal code		[5]
Contribute the maximum allowable contribution amount? (1 = Keogh, 2 = SEP, 3 = SIMPLE 401(k), 4 = Solo 401(k), 5 = SIMP	LE IRA, 6 = SARSEP)	[6]
Plan contribution rate. Enter in xx.xx format (Limitation percentage)	•	[7]
Enter the total amount of contributions made to a Keogh plan in 2013	+	
Enter the total amount of contributions made to a Solo 401(k) plan in 2013		[9]
Enter the total amount of contributions made to a SEP plan in 2013	+	[10]
Enter the total amount of contributions made to a SARSEP plan in 2013	+	[11]
Enter the total amount of contributions made to a defined benefit plan in 2013	+	[12]
Enter the total amount of contributions made to a profit-sharing plan in 2013	+	[13]
Enter the total amount of contributions made to a money purchase plan in 2013		[14]
Enter the total amount of contributions made to a SIMPLE 401(k) plan in 2013	"	[15]
Enter the total amount of contributions to a SIMPLE IRA plan in 2013		[16]
Catch-up Contributions		
Enter the amount of catch-up contributions made to a Solo 401(k) or SARSEP in 2013	+	[17]
Enter the amount of catch-up contributions made to a SIMPLE Plan in 2013	+	[18]
Elective Deferrals		
Enter the total contributions to a Solo 401(k) or SARSEP made through elective deferrals in 2013 Enter the amount of elective deferrals designated as Roth contributions in 2013	+	[19] [20]

		2013 Info	ormation	Prior Year Information
State and local income	tax refunds		+[1]	
		Taxpayer	Spouse	
Alimony received		+[3]	+[4]	
Jnemployment compen	sation	+[8]		
Jnemployment compen	sation federal withholding	+[8]	+[9]	
Jnemployment compen-	sation state withholding	+[8]	+[9]	
Jnemployment compen	sation repaid	+[11]		
Alaska Permanent Fund	d dividends	+[17]		
Self- Employment Income ? T/S/J (Y, N)			2013 Information	Prior Year Information
	Other income, such as: Co	mmissions, Jury pay, Director fees,		
			+[14]	
			+	
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Control Totals +	Form ID: Income

Form ID: 1099M Miscellaneous Income #1	20a
Please provide all Forms 1099-MISC	
Preparer use only	
Name of across	
Name of payer Taxpayer/Spouse/Joint (T, S, J)	[3]
State postal code	[5] [6]
Rents (Box 1)	+[12]
Royalties (Box 2)	+[14]
Other income (Box 3)	+[16]
Federal income tax withheld (Box 4)	+[18]
Fishing boat proceeds (Box 5)	+[20]
Medical and health care payments (Box 6)	+[22]
Nonemployee compensation (Box 7)	+[24]
Substitute payments in lieu of dividends or interest (Box 8)	+[26]
Payer made direct sales of \$5,000 or more of consumer products (Box 9)	[28]
Crop Insurance proceeds (Box 10)	+[30]
Foreign tax paid (Box 11)	+[32]
Foreign country or US possession (Box 12)	[34]
Excess golden parachute payments (Box 13) Gross proceeds paid to an attorney (Box 14)	+[35] +[37]
Section 409A deferrals (Box 15a)	+[37] +[39]
Section 409A income (Box 15b)	+[33]
State tax withheld (Box 16)	+ [43]
State/Payer's state no. (Box 17)	 [45]
State income (Box 18)	+[46]
Control Totals +	
Miscellaneous Income #2	
Please provide all Forms 1099-MISC Preparer use only	
Name of payer	[3]
Taxpayer/Spouse/Joint (T, S, J)	[5]
State postal code	[6]
Rents (Box 1)	+[12]
Royalties (Box 2)	+[14]
Other income (Box 3)	+[16]
Federal income tax withheld (Box 4)	+[18]
Fishing boat proceeds (Box 5) Medical and health care payments (Box 6)	+[20]
Nonemployee compensation (Box 7)	+[22] + [24]
Substitute payments in lieu of dividends or interest (Box 8)	+[24] +[26]
Payer made direct sales of \$5,000 or more of consumer products (Box 9)	[28]
Crop Insurance proceeds (Box 10)	+ [30]
Foreign tax paid (Box 11)	+ [32]
Foreign country or US possession (Box 12)	[34]
Excess golden parachute payments (Box 13)	+[35]
Gross proceeds paid to an attorney (Box 14)	+[37]
Section 409A deferrals (Box 15a)	+[39]
Section 409A income (Box 15b)	+[41]
State tax withheld (Box 16)	+[43]
State/Payer's state no. (Box 17)	[45]
State income (Box 18)	+[46]
Control Totals +	
Control Totals 1	1

Form ID: 1099M

Form ID: 1099PATR Taxable Distributions Received from Cooperatives #1	20b
Please provide all Forms 1099-PATR	
Preparer use only	
Name of payer	[3]
Taxpayer/Spouse/Joint (T, S, J)	[5]
State postal code	[6]
Patron dividends (Box 1)	+[10]
Nonpatronage distributions (Box 2)	+[12]
Per-unit retain allocations (Box 3)	+[14]
Federal income tax withheld (Box 4)	+[16]
Redemption of nonqualified notices and retain allocations (Box 5)	+[18]
Domestic production activities deductions (Box 6)	+[20]
Investment credit (Box 7)	+[22]
Work opportunity credit (Box 8)	+[24]
Patron's AMT adjustments (Box 9)	+[26]
Other credits and deductions #1 (Box 10)	+[28]
Other credits and deductions #2 (Box 10)	+[30]
Control Totals +	
Form ID: 1099PATR Taxable Distributions Received from Cooperatives #2	
Please provide all Forms 1099-PATR	
Preparer use only	
Name of payer	[3]
Taxpayer/Spouse/Joint (T, S, J)	[5]
State postal code	[6]
Patron dividends (Box 1)	+[10]
Nonpatronage distributions (Box 2)	+[12]
Per-unit retain allocations (Box 3)	+[14]
Per-unit retain allocations (Box 3) Federal income tax withheld (Box 4)	+[14] +[16]
	+ [16] + [18]
Federal income tax withheld (Box 4)	+[16]
Federal income tax withheld (Box 4) Redemption of nonqualified notices and retain allocations (Box 5)	+ [16] + [18]
Federal income tax withheld (Box 4) Redemption of nonqualified notices and retain allocations (Box 5) Domestic production activities deductions (Box 6)	+ [16] + [18] + [20]
Federal income tax withheld (Box 4) Redemption of nonqualified notices and retain allocations (Box 5) Domestic production activities deductions (Box 6) Investment credit (Box 7)	+ [16] + [18] + [20] + [22]
Federal income tax withheld (Box 4) Redemption of nonqualified notices and retain allocations (Box 5) Domestic production activities deductions (Box 6) Investment credit (Box 7) Work opportunity credit (Box 8)	+ [16] + [20] + [22] + [24]

Form ID: 1099C Cancellation of Debt, Abandonment #1	21
Please provide all Forms 1099-C and 1099-A	
Preparer use only	
Enter a brief description of the debt /i.e. type of debt) and why it was consoled to societ in determining toy confications.	
Enter a brief description of the debt (i.e. type of debt) and why it was canceled to assist in determining tax ramifications:	[54]
	[51]
Taxpayer/Spouse/Joint (T, S, J)	[5]
State postal code	— _[6]
Name of creditor/lender	[3]
Form 1099-C Cancellation of Debt	
Date of identifiable event (Box 1)	[10]
Amount of debt discharged (Box 2)	+[11]
Interest if included in box 2 (Box 3)	+[12]
Personally liable for repayment of the debt (if checked) (Box 5)	[13]
Identifiable event code (Box 6) (A = Bankruptcy, B = Other judicial debt relief, C = Statue of limitations, D = Foreclosure, E = Debt relief from probate	
F = By agreement, G = Decision to discontinue collection, H = Expiration of nonpayment testing period, I = Other)	[14]
Fair market value of property (Box 7)	+[15]
Form 1099-A Acquisition or Abandonment of Secured Property	
Date of lender's acquisition or knowledge of abandonment (Box 1)	[16]
Balance of principal outstanding (Box 2)	+[17]
Fair market value of property (Box 4)	+[18]
Personally liable for repayment of the debt (if checked) (Box 5)	[19]
Control Totals +	
Cancellation of Debt, Abandonment #2	
Please provide all Forms 1099-C and 1099-A	
Preparer use only	
Enter a brief description of the debt (i.e. type of debt) and why it was canceled to assist in determining tax ramifications:	
	[51]
Taxpayer/Spouse/Joint (T, S, J)	[5]
State postal code	[6]
Name of creditor	[3]
Form 1099-C Cancellation of Debt	
Date of identifiable event (Box 1)	[10]
Amount of debt discharged (Box 2)	+[11]
Interest if included in box 2 (Box 3)	+[12]
Personally liable for repayment of the debt (if checked) (Box 5)	[13]
Identifiable event code (Box 6) (A = Bankruptcy, B = Other judicial debt relief, C = Statue of limitations, D = Foreclosure, E = Debt relief from probate	
F = By agreement, G = Decision to discontinue collection, H = Expiration of nonpayment testing period, I = Other)	[14]
Fair market value of property (Box 7)	+[15]
Form 1099-A Acquisition or Abandonment of Secured Property	
Date of lender's acquisition or knowledge of abandonment (Box 1)	[16]
Balance of principal outstanding (Box 2)	+[17]
Fair market value of property (Box 4)	+[18]
Personally liable for repayment of the debt (if checked) (Box 5)	[19]

Form ID: 10990

Gambling Winnings #1

Please	provide all copies of Form W-2G.	
	2013 Information	Prior Year Information
Taxpayer/Spouse (T, S)	[1]	
Payer name	[3]	
State postal code	[4]	
Mark if professional gambler	[9]	
Gross winnings (Box 1)	+[11]	
Date won (Box 2)	[13]	
Type of wager (Box 3)	[15]	
Federal withholding (Box 4)	+[17]	
Transaction (Box 5)	[19]	
Race (Box 6)	[21]	
Identical wager winnings (Box 7)	+[23]	
Cashier (Box 8)	[25]	
Taxpayer identification number (Box 9)	[27]	
Window (Box 10)	[28]	
First ID (Box 11)	[30]	
Second ID (Box 12)	[31]	
Payer's state ID no. (Box 13)	[32]	
State winnings (Box 14)	[33]	
State withholding (Box 15)	+[34]	
Local winnings (Box 16)	[36]	
Local withholding (Box 17)	[37]	
Name of locality (Box 18)	[40]	
	Control Totals +	

Gambling Winnings #2

	2013 Information	Prior Year Information
Taxpayer/Spouse (T, S)	[1]	
Payer name	[3]	
State postal code	[4]	
Mark if professional gambler	[9]	
Gross winnings (Box 1)	+[11]	
Date won (Box 2)	[13]	
Type of wager (Box 3)	[15]	
Federal withholding (Box 4)	+[17]	
Transaction (Box 5)	[19]	
Race (Box 6)	[21]	
Identical wager winnings (Box 7)	+[23]	
Cashier (Box 8)	[25]	
Taxpayer identification number (Box 9)	[27]	
Window (Box 10)	[28]	
First ID (Box 11)	[30]	
Second ID (Box 12)	[31]	
Payer's state ID no. (Box 13)	[32]	
State winnings (Box 14)	[33]	
State withholding (Box 15)	+[34]	
Local winnings (Box 16)	[36]	
Local withholding (Box 17)	[37]	
Name of locality (Box 18)	[40]	

NOTES/QUESTIONS:

	Form ID: W2G

Form ID: 2439

Shareholders Undistributed Capital Gain #1

Please provide all copies of Form 2439

		2013 Information	Prior Year Information
Taxpayer/Spouse (T, S)		_[1]	
RIC or REIT name			
State postal code		[4]	
Total undistributed long-term capital gains (Box 1a)	+	[9]	
Unrecaptured section 1250 gain (Box 1b)	+	[11]	
Section 1202 gain (Box 1c)	+	[13]	
If your interest in the RIC/REIT was held on the date the RIC/REIT	Γ acquired the Section		
1202 stock and continuously until sold indicate the appropriate sec	ction 1202 code		
(1 = 50% exclusion, 2 = 60% exclusion within an empowerment zo)	one)	[15]	_
Collectibles (28%) gain (Box 1d)	+	[17]	
Tax paid by the RIC or REIT on the box 1a gains (Box 2)	+	[19]	
	Control Totals +	T	
	Control Totals +	I	
Shareholders Un	ndistributed Ca	apital Gain #2	
Please pro	ovide all copies of Fo	orm 2439	
		2013 Information	Prior Year Information
Taxpayer/Spouse (T, S)		_[1]	
RIC or REIT name		[3]	
State postal code		[4]	
Total undistributed long-term capital gains (Box 1a)		[9]	
Unrecaptured section 1250 gain (Box 1b)	+	[11]	
Section 1202 gain (Box 1c)	+ continued the Continue	[13]	
If your interest in the RIC/REIT was held on the date the RIC/REIT	•		
1202 stock and continuously until sold indicate the appropriate sec			
(1 = 50% exclusion, 2 = 60% exclusion within an empowerment zo	•	[15]	_
Collectibles (28%) gain (Box 1d)	.	[17]	-
Tax paid by the RIC or REIT on the box 1a gains (Box 2)	+	[19]	
	Control Totals +		
Shareholders Un	ndistributed Ca	apital Gain #3	
Please pro	ovide all copies of Fo	orm 2439	
Townsyar/Cooung (T. O.		2013 Information	Prior Year Information
Taxpayer/Spouse (т, s) RIC or REIT name		_[1]	
State postal code		[3]	
Total undistributed long-term capital gains (Box 1a)	_	[4] [9]	
Unrecaptured section 1250 gain (Box 1b)			
Section 1202 gain (Box 1c)	+	[11] [13]	
If your interest in the RIC/REIT was held on the date the RIC/REIT	Γ acquired the Section	[13]	
1202 stock and continuously until sold indicate the appropriate sec	·		
(1 = 50% exclusion, 2 = 60% exclusion within an empowerment zo		[15]	
Collectibles (28%) gain (Box 1d)	+	[17]	_
Tax paid by the RIC or REIT on the box 1a gains (Box 2)	+	[19]	
	1 0		
	Control Totals +		
NOTES/QUESTIONS:			

Form ID: 6781	Contracts & Str	addles - Gener	al Information	24
Subject to self-employment tax code (T = Tax				[1]
Mark to indicate all the elections that apply Mixed straddle election	:			[2]
Mixed straddle account election (Attach exp	planation)			
				[3]
Oracle III a benefit and III a				
Straddle-by-straddle identification election Net section 1256 contracts loss election	on .			^[4] [5]
	0	Occidental Man	lead to Market	
	Section 1256	Contracts Mar	ked to Market	
Identification of Account A				[c]
Identification of Account A	_			[6]
Identification of Account C	_			
Townsyar/Chause/Jaint (T. O. II)		Account A	A Account B	Account C
Taxpayer/Spouse/Joint (T, S, J) State postal code			_	
-Loss/Gain for entire year (Enter losses as	a negative amount)	+	+	+
Total Form 1099-B adjustment		+		
Total net 1256 contract loss carryback		+	+	_ +
	Gains and	d Losses From	Straddles	
Description of Property A	_			[7]
Name of Contract	_		Time	
Component			Туре	
Description of Property B Name of Contract	_			
Component	_		Typo	
Description of Property C			Туре	
Name of Contract	_			
Component	_		Typo	
Description of Property D			Туре	
Name of Contract				
Component	_		Туре	
Сотронет			туре	
	Property A	Property B	Property C	Property D
Taxpayer/Spouse/Joint (T, S, J)	_	_	-	_
State postal code			<u> </u>	
Date entered into/acquired				
Date closed out/sold				
Gross sales price	+	+	+	+
Cost plus expense of sale	+	+	+	+
Unrecognized gain	+	+	+	+
Unrecog	nized Gain Froi	m Positions He	eld on Last Busine	ss Day
Description of Property A				[8]
Description of Property B				
Description of Property C				
	Pro	perty A	Property B	Property C
Date acquired	_			
Fair market value on last business day	+	+		+
Cost or other basis as adjusted	+	+		+
	Control Totals +			Form ID: 6781
	John Totals +			ן רטוווו וט. טוסו

Form ID: C-1

Preparer use only		
	2013 Information	Prior Year Information
Taxpayer/Spouse/Joint (T, S, J)	_[2]	
Employer identification number	[3]	
Business name		
Principal business/profession	[6]	
Business code	[11]	
Business address, if different from home address on Organizer Fo	rm ID: 1040	
Address	[14]	
City/State/Zip	[15][16][17]	
Accounting method (1 = Cash, 2 = Accrual, 3 = Other)	[18]	_
If other:	[20]	
Inventory method (1 = Cost, 2 = LCM, 3 = Other)	_[21]	_
If other enter explanation:		
	[23]	
Enter an explanation if there was a change in determining your inv	rentory:	
	[24]	
Did you "materially participate" in this business? (Y, N)	[25]	_
If not, number of hours you did significantly participate	[27]	
Mark if you began or acquired this business in 2013	[29]	
Did you make any payments in 2013 that require you to file Form(s	s) 1099? (Y, N)[30]	<u> </u>
If "Yes", did you or will you file all required Forms 1099? (Y, N)	[32]	<u> </u>
Mark if this business is considered related to qualified services as	a minister or religious worker[34]	_
Did you receive wages as a statutory employee or as a minister? (1	= Statutory employee, 2 = Minister)[36]	<u> </u>
Medical insurance premiums paid by this activity	+[40]	
Long-term care premiums paid by this activity	+[42]	
Amount of wages received as a statutory employee	+[45]	
Bu	siness Income	
Bu		Drier Veer Information
	siness Income 2013 Information	Prior Year Information
Gross receipts and sales	2013 Information	
	2013 Information +[50]	
	2013 Information +[50] +	
	2013 Information +[50]	
Gross receipts and sales	2013 Information +[50] + +	
Gross receipts and sales Returns and allowances	2013 Information +[50] +	
Gross receipts and sales	2013 Information +[50] + + +[53]	
Gross receipts and sales Returns and allowances	2013 Information +[50] + +	
Gross receipts and sales Returns and allowances	2013 Information +[50] + + +[53]	
Gross receipts and sales Returns and allowances	2013 Information +[50] + + +[53]	
Gross receipts and sales Returns and allowances Other income:	2013 Information +[50] + +[53] +[55] + +[55]	
Gross receipts and sales Returns and allowances Other income:	2013 Information +[50] + + +[53]	
Gross receipts and sales Returns and allowances Other income:	2013 Information +[50] + +[53] +[55] + +[55]	
Gross receipts and sales Returns and allowances Other income:	2013 Information +[50] +[50] +[53] +[55] +[55] +[55] t of Goods Sold	
Returns and allowances Other income: Cos	2013 Information +[50] + +[53] +[55] + t of Goods Sold 2013 Information	
Returns and allowances Other income: Cos Beginning inventory	2013 Information +[50] +[53] +[55] +[55] + t of Goods Sold 2013 Information +[57]	
Returns and allowances Other income: Cos Beginning inventory Purchases	2013 Information +[50] +[53] +[55] +[55] + t of Goods Sold 2013 Information +[57]	
Returns and allowances Other income: Cos Beginning inventory Purchases	2013 Information +	
Returns and allowances Other income: Cos Beginning inventory Purchases	2013 Information +	
Gross receipts and sales Returns and allowances Other income: Cos Beginning inventory Purchases Labor:	2013 Information +[50] +[50] +[53] +[55] +[55] t of Goods Sold 2013 Information +[57] +[61] +[61]	
Gross receipts and sales Returns and allowances Other income: Beginning inventory Purchases Labor: Materials	2013 Information +[50] +[50] +[53] +[55] +[55] t of Goods Sold 2013 Information +[57] +[61] +[61]	
Gross receipts and sales Returns and allowances Other income: Beginning inventory Purchases Labor: Materials	2013 Information +	
Gross receipts and sales Returns and allowances Other income: Beginning inventory Purchases Labor: Materials	2013 Information +	
Gross receipts and sales Returns and allowances Other income: Beginning inventory Purchases Labor: Materials	2013 Information +	
Gross receipts and sales Returns and allowances Other income: Beginning inventory Purchases Labor: Materials	2013 Information +	

Form	ID:	C-

Schedule C - Expenses

Preparer use only			
Principal business or profession			
		2013 Information	Prior Year Information
Advertising	+	[6]	
Car and truck expenses	+	[8]	
Commissions and fees		[10]	
Contract labor		[12]	
Depletion	· +		
Depreciation	· -	[14]	
Employee benefit programs (Include Small En	mplover Health Ingurance Promiums credit	[16]	
Employee beliefit programs (include Small En	iployer riealth insurance Fremiums credity.	****	
		[18]	
(0) (1)	+		
Insurance (Other than health):			
		[20]	
	+	·	
Interest:			
Mortgage (Paid to banks, etc.)			
	+	[22]	
	+		
	+		
Other:			
	+	[24]	
Legal and professional services			
	Ţ	[26]	
Office expense	+	[29]	
Pension and profit sharing:			
	+	[31]	
	+		
Rent or lease:			
Vehicles, machinery, and equipment	+	[33]	
Other business property	+	[35]	
Repairs and maintenance	+	[37]	
Supplies	+	[39]	
Taxes and licenses:			
	+	[41]	
		·	
-	·	·	
Traval mode and entertainments		·	
Travel, meals, and entertainment:			
Travel	+		
Meals and entertainment		[45]	
Meals (Enter 100% subject to DOT 80% li	imit) _.	[47]	
Utilities	+	[51]	
Wages (Less employment credit):			
	+	[53]	
	+	·	
Other expenses:			
	+	[55]	
	+		
	+		
	+		
			
	+		
-	+		
	+	·	
	+	·	
<u> </u>		<u> </u>	
	Control Totals +		Form ID: C-2

Form ID: C-3	Schedule C - Carryovers
	Schedule C - Carryovers

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Preparer use only	
Principal business or profession	

_ Preparer use only				
Carryovers		Regular		AMT
Operating	+	[11]	+	[12]
Short-term capital	+	[13]	+	[14]
Long-term capital	+	[15]	+	[16]
28% rate capital	+	[17]	+	[18]
Section 1231 loss	+	[19]	+	[20]
Ordinary business gain/loss	+	[21]	+	[22]
Section 179	+	[23]	+	[24]

Form ID: Rent Rent and R	Royalty Property - Genera	I Information	28
Preparer use only	2	013 Information	Prior Year Information
Description	-	[2]	Thor real information
Taxpayer/Spouse/Joint (T, S, J)[3]	State po	estal code [4]	
Physical address: Street	Oldio pe	[5]	
			
Foreign country		[10]	
Foreign province/county		[44]	
Foreign postal code		[12]	
Type (1 = Single-family, 2 = Multi-family, 3 = Vacation/short-term, 4 = Con	nmercial, 5 = Land, 6 = Royalties, 7 = Self-rental, 8	= Other)[13]	
Description of other type (Type code #8)		[14]	
Did you make any payments in 2013 that require you to fi	ile Form(s) 1099? (Y,N)	[16]	<u></u>
If "Yes", did you or will you file all required Forms 1099	9? (Y, N)	[18]	<u></u>
Fair rental days (If not full year) (For types 1, 2, 4, 5, 7 and 8 only) (Us	e Rent-2 for type 3)	[20]	
Percentage of ownership if not 100%		[22]	
Business use percentage, if not 100% (Not vacation home	e percentage)	[24]	
	Rent and Royalty Incom	e	
Rents and royalties :	2013 Information		Prior Year Information
	+	[33]	
	Cont and Davidty Evens		
r	Rent and Royalty Expense 2013 Information		% Prior Year Information
Advertising			Filor real information
Auto	+		
Travel	+		
Cleaning and maintenance	+	[44] [45]	
Commissions:	·	[++][+0]	
Commissions.	+	[47] [49]	
-	·	_[47][40]	
Insurance:	·_	_	
	+	[50] [52]	
	+		
Legal and professional fees	+		-
Management fees:			-
Ç	+	[57][59]	
	+		
Mortgage interest paid to banks, etc (Form 1098)		_	
	+	[60][62]	
	+		
Other mortgage interest	+		
Qualified mortgage insurance premiums	+	[66][67]	
Other interest:			
	+	[69][71]	
	+		
Repairs	+	[72] [73]	
Supplies	+	[75][76]	
Taxes:			
	+	[78][80]	
	+		
Utilities	+	[81][82]	
Depreciation	+	[84] [85]	

Control Totals +

[88]

Form ID: Rent

Depletion

Other expenses:

Form ID: Rent-2	ent and Royalty Pro	perties - Points, Vac	ation Home, Passive	Information 29
Preparer Description	use only			
		Refinancing Po	pints	
		Preparer - Enter on Screen	n Rent	
			2013 Information	Prior Year Information
Refinancing points p	aid -			
Recipient's/Lender's	name		[92	1
Date of refinance				
Total # Payments				
Reported on 1098 in	2013		_	
Total points paid				
	aid in current year (Preparer u s	se only)		
Refinancing points p				
Recipient's/Lender's	name	-		
Date of refinance				
Total # Payments				
Reported on 1098 in	2013		_	
Total points paid				
	aid in current year (Preparer us	se only)		
Refinancing points p				
Recipient's/Lender's	name			
Date of refinance				
Total # Payments Reported on 1098 in	2013			
Total points paid	12013		_	
	aid in current year (Preparer us	se only)		
i oints deemed as po	ald in current year (i reparer us	se omy)		
		Vacation Home Info	ormation	
			2013 Information	Prior Year Information
Number of days home	was used personally		[6]	
Number of days home	was rented		[8]	
Number of day home of	owned, if not 365		[10	<u></u>
Carryover of disallower	d operating expenses into 2013	3	+[20	1
Carryover of disallower	d depreciation expenses into 20	013	+[21]
		Passive and Other	Information	
	Drongror use only			
	Preparer use only Carryovers	Regular	AMT	
	Operating	+ [28]	+ [29]	
	Short-term capital	+ [30]	+ [31]	
	Long-term capital	+ [32]	+ [33]	
	28% rate capital	+ [34]	+ [35]	
	Section 1231 loss	+ [36]	+ [37]	
	Ordinary business gain/loss	+ [38]	+ [39]	
	Comm revitalization	+ [40]	+ [41]	
	Section 179	+ [42]	+ [43]	

Control Totals + Form II	ID: Rent-2	

Farm Income - General Information

Proparer use only Proparer use only Prior Year Information Prio		Please	e provide	all Forms 1099-h	<					
Tagapyer/Spouse/Clorit (1, 18, 12) Enripolacy identification number Basile postal code	Preparer use only					2013 Information		Prior Y	ear Informatio	on
Employer identification number September Septembe	Townsyar/Spayar/ laint (T. C. I)						,,, [11101	car imormatic	,
Description Principal Product State postal code Accounting method (1 - Cash, 2 - Account) Apricultural activity code Did you finaterially perincipate? in this business? (1, 14) Apricultural activity code Did you finaterially perincipate? in this business? (1, 14) Apricultural activity code Did you finaterially perincipate? in this business? (1, 14) If "Yes," did you or will you file all required Forms 1099? (1, 16) If "Yes," did you or will you file all required Forms 1099? (1, 16) If "Yes," did you or will you file all required Forms 1099? (1, 16) If "Yes," did you or will you file all required Forms 1099? (1, 16) Insurance premiums paid by this activity **Sales Codes** Schedule F Income Sales Codes* 1 = Cash sales of items bought for resale 2 = Cash sales of items bought for resale 2 = Cash sales of items bought for resale 3 = Accrual sales **Sales Codes* 1 = Cash sales of items bought for resale 3 = Accrual sales **Sales Codes* 1 = Cash sales of items would file the sale of items bought for resale (2sh mathod) 3 = Accrual sales **Sales Codes* 1 = Cash sales of items would file the sale of items sale (2sh mathod) 4 = Quality of items (2sh mathod) 5 = Other income 3 = Accrual sales **Sales Codes* 1 = Cash sales of items would file the sale (2sh mathod) 4 = Quality of items (2sh mathod) 5 = Other income 4 = Quality of items (2sh mathod) 5 = Other income 5 = Other income 6 = Quality of items (2sh mathod) 6 = Quality of items (2sh mathod) 7 = Quality of items (2sh m							- 1			
Principal Product Site postal code Accounting method (1 = Suni, 9 = Account) Approximate activity code Accounting method (1 = Suni, 9 = Account) Approximate activity code Accounting method (1 = Suni, 9 = Account) Approximate activity code Accounting method (1 = Suni, 9 = Account) Approximate activity code Accounting method (1 = Suni, 9 = Account) Approximate activity code account in 2013 has trequire you to file Form(s) 10989? (*, N) If vest, did you countly look file all required Forms 10990? (*, N) If vest, did you countly look file all required Forms 10990? (*, N) If vest, did you continue account of the activity If vest, did you continue account of the activity Schedule F Income Sales Code* Sales Code* 1 = Cash sales of items bought for resale 1 = Cash sales of items activity 2 = Cash sales of items activity 3 = Account sales 1 = Cash sales of items activity 2 - Cash sales of items activity 3 = Account sales 1 = Cash sales of items activity 4 = Destruction Cost or other basis of livestock and other items you bought for resale (Cash method) 5 = Other income 3 = Account sales A							_			
Slate posial code Accounting method (1 - Cash, 2 - Account) Apricultural activity code Did you "insterially participate" in this business? (*, N) Did you make any payments in 2013 that require you to file Form(s) 1099? (*, N) Dif you make any payments in 2013 that require you to file Form(s) 1099? (*, N) Dif you make any payments in 2013 that require you to file Form(s) 1099? (*, N) Dif you make any payments in 2013 that require you to file Form(s) 1099? (*, N) Dif you make any payments in 2013 that require you to file Form(s) 1099? (*, N) Dif you make any payments in 2013 that require you so file Form(s) 1099? (*, N) Dif you make any payments in 2013 that require you bought for resale Cash sales of items bought for resale Cash sales of items bought for resale Cash sales of terms bought for resale Cash sales of terms you sought for resale Cash sales of terms	•						—:			
Accounting method (- cask, 2 - Account) Applicational activity code Did your 'inseterably participate' in this business? (*, N) Did you make any payments in 2013 that require you to file Form(s) 1099? (*, N) If 'Yes', did you or will you tile all required Form 1099? (*, N) If 'Yes', day on will you tile all required Form 1099? (*, N) If 'Yes', day on will you tile all required Form 1099? (*, N) If 'Yes', day on will you tile all required Form 1099? (*, N) If 'Yes', day on will you tile all required Form 1099? (*, N) If 'Yes', day on will you tile all required Form 1099? (*, N) If 'Yes', day on will you tile all required Form 1099? (*, N) If 'Yes', day on will you tile all required Form 1099? (*, N) If 'Yes', day on will you tile all required Form 1099? (*, N) If 'Yes', day on will you tile all required Form 1099? (*, N) If 'Yes', day on will you tile all required Form 1099? (*, N) If 'Yes', day on will you tile all required Form 1099? (*, N) Is 'Yes', day on will you tile all required Form 1099? (*, N) Is 'Yes', day on will you tile all required Form 1099? (*, N) Is 'Yes', day on will you tile all required Form 1099? (*, N) Is 'Yes' Information Income description Schedule F Income Sales Code* 1 = Cash sales of items bought for resale (Cash method) 2 = Cash sales of items you bought for resale (Cash method) 2 = Cash sales of items you bought for resale (Cash method) 4 = Custom hire (machine work) 2 = Cash sales of items you bought for resale (Cash method) 5 = Other income 2013 Information							_			
Agricultural activity code International protection Income International protection Income International protection Income	•						_			
Did you materally participates in this business? (Y, N)							- 1			_
Did you make any payments in 2013 that require you to file Form(s) 1099? (Y, N)	·	ess? (Y N)				-	_			
If "Yes," did you or will you file all required Forms 1089? (Y. No New Form) 149			Form(s)	1099? (Y. N)			_			_
Mark if delcting to defer crop insurance proceeds you received in 2013 Agricultural program payments CRP payments received while enrolled to receive social security or disability benefits Commodity credit loans reported under election: Cost or omnodity credit loans forfeited Total corp insurance proceeds you received in 2013 Agricul fire processed you received in 2013 Agricultural program payments Agricultural program payme	* * * *			, ,			- 1			_
Schedule Fincome Schedule Fi				emplovment income	9		- 1			_
Schedule F Income Sales Code** Income description				. , . ,	+	•	- 1			_
Sales Code** Income description		-			+		_			
Income description			Sch	edule F Inco	me					
Sales Codes 1 = Cash sales of items bought for resale 2 = Cash sales of items proceed items (Cash method) 3 = Accrual sales 1 = Cash sales of items raised 3 = Accrual sales 2013 Information Prior Year Information Cost or other basis of livestock and other items you bought for resale (Cash method) Beginning inventory of livestock and other items (Accrual method) Accrual cost of livestock and other items (Accrual method) Ending inventory of livestock and other items (Accrual method) Accrual cost of livestock and other items (Accrual method) *Sales Codes 2013 Information Prior Year Information Prior Year Information Agricultural program payments *** *** 2013 Total 2013 Taxable Prior Year Information CRP payments received while enrolled to receive social security or disability benefits Commodity credit loans reported under election: Total commodity credit loans forfeited Taxable commodity credit loans forfeited 1	Sales Code**					2013 Information		Prior Y	ear Information	on
** Sales Codes 1 = Cash sales of items bought for resale 2 = Cash sales of items raised 3 = Accrual sales ** Sales Codes 1 = Cash sales of items raised 3 = Accrual sales ** Other income 3 = Accrual sales ** Other income ** Despiration ** Prior Year Information ** Cost or other basis of livestock and other items you bought for resale (Cash method) ** Beginning inventory of livestock and other items (Accrual method) ** Accrual cost of livestock, produce, grains, and other products purchased ** Finding Inventory of livestock and other items (Accrual method) ** Accrual cost of lives	Inco	me description								
** Sales Codes 1 = Cash sales of items bought for resale 2 = Custom hire (machine work) 5 = Other income 3 = Accrual sales 2013 Information Prior Year Information Cost or other basis of livestock and other items you bought for resale (cseh method) + [38] Beginning inventory of livestock, produce, grains, and other products purchased + [40] Accrual cost of investock, produce, grains, and other products purchased + [40] Total cooperative distributions you received + [44] Taxable cooperative distributions you received 2013 Total 2013 Taxable Prior Year Information CRP payments received while enrolled to receive social security or disability benefits + [85] Total commodity credit loans reported under election: 1013 Total 2013 Total 2013 Taxable Prior Year Information Frior Year Information Prior Year Information Prior Year Information Frior Year Information Prior Year Information Prior Year Information Frior Year Information Prior Year Information Frior Year Information	<u> </u>				+_		_[34]			
** Sales Codes 1 = Cash sales of items bought for resale 2 = Cash sales of items raised 3 = Accrual sales ** Sales Codes 1 = Cash sales of items sought for resale 2 = Cash sales of items raised 3 = Accrual sales ** Sales Codes 4 = Custom hire (machine work) 5 = Other income ** 2013 Information Prior Year Information Cost or other basis of livestock and other items (Accrual method) Beginning inventory of livestock, produce, grains, and other products purchased Ending Inventory of livestock, produce, grains, and other products purchased Ending Inventory of livestock, produce, grains, and other products purchased Ending Inventory of livestock, produce, grains, and other products purchased ### 144 144 1	<u> </u>				+_		_			
** Sales Codes 1 = Cash sales of items bought for resale 2 = Cash sales of items raised 3 = Accrual sales 2013 Information Prior Year Information Cost or other basis of livestock and other items you bought for resale (Cash method) Beginning inventory of livestock and other items (Accrual method) Ending Inventory of livestock and other items (Accrual method) Finding Inventory of livestock and other items (Accrual method) Total cooperative distributions you received 2013 Total 2013 Taxable Prior Year Information Total commodity credit loans forfeited 2013 Total 2013 Taxable Prior Year Information	<u> </u>				+_		_			
1 = Cash sales of items bought for resale 2 = Cash sales of items raised 3 = Accrual sales 2013 Information Prior Year Information Cost or other basis of livestock and other items (Accrual method) Beginning inventory of livestock and other items (Accrual method) Accrual cost of livestock, produce, grains, and other products purchased Ending Inventory of livestock and other items (Accrual method) Total cooperative distributions you received Taxable cooperative distributions you received 4	_				+_		_			_
1 = Cash sales of items bought for resale 2 = Cash sales of items raised 3 = Accrual sales 2013 Information Prior Year Information Cost or other basis of livestock and other items (Accrual method) Beginning inventory of livestock and other items (Accrual method) Accrual cost of livestock, produce, grains, and other products purchased Ending Inventory of livestock and other items (Accrual method) Total cooperative distributions you received Taxable cooperative distributions you received 4	_				+ -		_ l			
2 = Cash sales of items raised 3 = Accrual sales 2013 Information Prior Year Information Cost or other basis of livestock and other items you bought for resale (Cash method) +				** Sales Codes						
Agricultural program payments CRP payments received while enrolled to receive social security or disability benefits Commodity credit loans forfeited Total commodity credit loans forfeited Taxable commodity credit loans forfeited Total crop insurance proceeds you received in 2013 Mark if electing to defer crop insurance proceeds to 2014 Mark if electing to defer crop insurance proceeds de dother items (xoculal method) Total cop of livestock, produce, grains, and other products purchased	1 = Cash sale	s of items bou	ght for re	esale	4 = Cı	stom hire (machine	work)			
Cost or other basis of livestock and other items you bought for resale (Cash method) Beginning inventory of livestock and other items (Accrual method) Accrual cost of livestock, produce, grains, and other products purchased Ending Inventory of livestock and other items (Accrual method) Accrual cost of livestock and other items (Accrual method) Ending Inventory of livestock and other items (Accrual method) Total cooperative distributions you received Ending Inventory of livestock and other items (Accrual method) Ending Inventory of livestock and other inventory	2 = Cash sale	s of items raise	ed		5 = Ot	her income				
Cost or other basis of livestock and other items you bought for resale (Cash method) Beginning inventory of livestock, and other items (Accrual method) Accrual cost of livestock, produce, grains, and other products purchased Ending Inventory of livestock and other items (Accrual method) For investory of livestock and other items (Accrual method) Ending Inventory of livestock and other items (Accrual method) Ending Inventory of livestock and other items (Accrual method) Ending Inventory of livestock and other items (Accrual method) Ending Inventory of livestock and other items (Accrual method) Ending Inventory of livestock and other items (Accrual method) Ending Inventory of livestock and other items (Accrual method) Ending Inventory of livestock and other items (Accrual method) Ending Inventory of livestock, produce, grains, and other products purchased Ending Inventory of livestock, produce, grains, and other products purchased Ending Inventory of livestock, produce, grains, and other products purchased Ending Inventory of livestock, produce, grains, and other products purchased Ending Inventory of livestock, produce, grains, and other products purchased Ending Inventory of livestock, products purchased Ending Inventory of livestock purchased Ending Inventory of livestock purchased Ending Inventory of livestock and other liters (Accrual method) Ending Inventory of livestock and other liters (Accrual method) Ending Inventory of livestock and other liters (Accrual method) Ending Inventory of livestock and other liters (Accrual method) Ending Inventory of livestock and other liters (Accrual method) Ending Inventory of livestock and other liters (Accrual method) Ending Inventory of livestock and other liters (Accrual method) Ending Inventory of livestock and other liters (Accrual method) Ending Inventory of livestock and other liters (A	3 = Accrual s	ales								
Cost or other basis of livestock and other items you bought for resale (Cash method) Beginning inventory of livestock, and other items (Accrual method) Accrual cost of livestock, produce, grains, and other products purchased Ending Inventory of livestock and other items (Accrual method) For investory of livestock and other items (Accrual method) Ending Inventory of livestock and other items (Accrual method) Ending Inventory of livestock and other items (Accrual method) Ending Inventory of livestock and other items (Accrual method) Ending Inventory of livestock and other items (Accrual method) Ending Inventory of livestock and other items (Accrual method) Ending Inventory of livestock and other items (Accrual method) Ending Inventory of livestock and other items (Accrual method) Ending Inventory of livestock, produce, grains, and other products purchased Ending Inventory of livestock, produce, grains, and other products purchased Ending Inventory of livestock, produce, grains, and other products purchased Ending Inventory of livestock, produce, grains, and other products purchased Ending Inventory of livestock, produce, grains, and other products purchased Ending Inventory of livestock, products purchased Ending Inventory of livestock purchased Ending Inventory of livestock purchased Ending Inventory of livestock and other liters (Accrual method) Ending Inventory of livestock and other liters (Accrual method) Ending Inventory of livestock and other liters (Accrual method) Ending Inventory of livestock and other liters (Accrual method) Ending Inventory of livestock and other liters (Accrual method) Ending Inventory of livestock and other liters (Accrual method) Ending Inventory of livestock and other liters (Accrual method) Ending Inventory of livestock and other liters (Accrual method) Ending Inventory of livestock and other liters (A						2012 Information		Drior V	oar Informatio	n.
Beginning inventory of livestock and other items (Accrual method) Accrual cost of livestock, produce, grains, and other products purchased Ending Inventory of livestock and other items (Accrual method) Ending Inventory of livestock and other items (Accrual method) Ending Inventory of livestock and other items (Accrual method) Total cooperative distributions you received 2013 Total 2013 Total 2013 Taxable Prior Year Information Agricultural program payments +						2013 Illioilliation		FIIOI I	ear information	
Accrual cost of livestock, produce, grains, and other products purchased Ending Inventory of livestock and other items (Accrual method) Total cooperative distributions you received 2013 Total 2013 Total 2013 Taxable 2013 Taxable 2013 Taxable 2013 Taxable 2013 Taxable 2013 Taxable Prior Year Information 2013 Total 2013 Taxable 2013 Information Prior Year Information	Cost or other basis of livestock and other it	ems you bought	for resale	(Cash method)	+_		_[36]			
Ending Inventory of livestock and other items (Accrual method) Total cooperative distributions you received Taxable cooperative distributions you received 2013 Total 2013 Total 2013 Taxable Prior Year Information Agricultural program payments +	Beginning inventory of livestock and other i	tems (Accrual metho	od)		+_		[38]			_
Total cooperative distributions you received 2013 Total 2013 Taxable Prior Year Information Agricultural program payments +	Accrual cost of livestock, produce, grains, a	and other produc	ts purcha	sed	+_		_[40]			
Taxable cooperative distributions you received 2013 Total 2013 Taxable Prior Year Information Agricultural program payments +					+ -		[42]			_
Agricultural program payments +					+ -		_[44]			
Agricultural program payments +	Taxable cooperative distributions you recei	ved			+ -		[46]			
+ + +				2013 Total		2013 Taxable		Prior Y	ear Information	on
+ + +	Agricultural program payments						ſ			
+ + + + + + + + + + + + + + + + + + +			+		+		[48]			
CRP payments received while enrolled to receive social security or disability benefits Commodity credit loans reported under election: Total commodity credit loans forfeited Taxable commodity credit loans forfeited 2013 Total 2013 Total 2013 Information Prior Year Information Figs			+		+					
CRP payments received while enrolled to receive social security or disability benefits Commodity credit loans reported under election: Total commodity credit loans forfeited Taxable commodity credit loans forfeited Total crop insurance proceeds you received in 2013 H H H H H H H H H H H H H			+		_ +		_ [
Commodity credit loans reported under election: +						2013 Information		Prior Y	ear Information	on
Commodity credit loans reported under election: +	CPP payments received while enrolled to r	eceive social sec	curity or o	licability banafite			[54]			
Total commodity credit loans forfeited +			Julity Of C	iisabiiity berients	т-		—[ɔ i]			
Total commodity credit loans forfeited +	Commodity credit loans reported under cie	Clion.			_		[52]			
Total commodity credit loans forfeited +							_			_
Taxable commodity credit loans forfeited 2013 Total 2013 Total 2013 Taxable Prior Year Information Total crop insurance proceeds you received in 2013 +	Total commodity credit loans forfeited				_		_			_
Total crop insurance proceeds you received in 2013 +	-				· -		_			_
+ + + [59] + + +				2013 Total		2013 Taxable		Prior Y	ear Information	on
+ + + [59] + + +	Total crop insurance proceeds you received	1 in 2013					ſ			
# # # # # # # # # # # # # # # # # # #	Total crop insurance proceeds you received	1 111 2013	_				[50]			
Mark if electing to defer crop insurance proceeds to 2014 Crop insurance proceeds deferred from 2012 +										
Crop insurance proceeds deferred from 2012 + [64]					— †-		-			
Crop insurance proceeds deferred from 2012 + [64]	Mark if electing to defer crop insurance pro	ceeds to 2014			+-		_ _[62]			_
	-				+		- 1			-
	,		s +				1		Form ID: F	-1

Preparer use only		
Description		
	2013 Information	Prior Year Information
Car and truck expenses -	+[5]	
Chemicals -	+[7]	
	+[9]	
	+[11]	
	+[13]	
	+[15]	
	+[17]	
`	+ <u>[19]</u>	
	+[21]	
	+[23]	
Insurance (Other than health)		
	1261	
	<u>[26]</u>	
		
	t	
Mortgage interest (Paid to banks, etc.)		
	+[28]	
	+	
	+	
	+[30]	
Labor hired (Less employment credit)	+[32]	
	+[34]	
Rent - vehicles, machinery, and equipment -	+[36]	
Rent - other -	+[38]	
Repairs and maintenance -	+ [40]	
	+[42]	
	+[44]	
	+[46]	
Taxes:		
	+[48]	
	+	
	+	
	+	
	+	
Utilities -	F (E0)	
	+[52]	
Other expenses:		
•	L [54]	
	<u>[</u> 54]	
	+	
	 	
	+	
	+	
	+	
	+	
	+	
	+	
	+	
	+	
	+	
<u> </u>	t	
<u> </u>	+	
	+	
Preproductive period expenses -	+[56]	

Form ID: F-3	Farm	Passive	and	Other	Carr	vover	Inform	ation

32

Preparer use only

Description

Preparer use only				
Carryovers		Regular		AMT
Operating	+	[12]	+	[13]
Short-term capital	+	[14]	+	[15]
Long-term capital	+	[16]	+	[17]
28% rate capital	+	[18]	+	[19]
Section 1231 loss	+	[20]	+	[21]
Ordinary business gain/loss	+	[22]	+	[23]
Section 179	+	[24]	+	[25]
Excess farm loss	+	[28]	+	[29]

NOTES/QUESTIONS:

Control Totals + Form ID: F-3

Form ID: 4835 Farm Rent	tal - General In	forma	tion	33
Preparer use only				
		20	013 Information	Prior Year Information
Taxpayer/Spouse/Joint (T, S, J)			[2]	
Employer identification number		_	[3]	
Description			[4]	
State postal code			[5]	
Did you "actively participate" in the operation of this business th	is year? (Y, N)		[6]	
	Income Items			
			2013 Information	Prior Year Information
Income from production of livestock, produce, grains, and other	crops:			
	•		[16]	
	•			
	•	_		
	•	· ·		
Total cooperative distributions you received	-		[40]	
Taxable cooperative distributions you received			[18] [20]	-
Taxable cooperative distributions you received		'-	[20]	
	2013 Total		2013 Taxable	Prior Year Information
Agricultural program payments:				
	+	[22]	[23]	
	+	+_		
	+	+_		
				5 . 7. 1
			2013 Information	Prior Year Information
Commodity credit loans reported under election:				
	•		[25]	
Tatal assessable, analit lasus forfaited	•			
Total commodity credit loans forfeited		<u> </u>	[27]	-
Taxable commodity credit loans forfeited		+_	[29]	
	2013 Total		2013 Taxable	Prior Year Information
Crop insurance proceeds you received in 2013				
·	+	[31]	[32]	
	+			-
	+			
				-
			2013 Information	Prior Year Information
Mark if electing to defer crop insurance proceeds to 2014		+	[34]	_
Crop insurance proceeds deferred from 2012		_	[36]	
Other income:		+		
	_	+-	[39]	-
	_	+ -		-
	_	+ -		
-	_	+ -		
-	_	+ -		
	_	+ -		
	_	+ -		
-	_	+ -		
	_	+ -		
	_	+ -	_	

Control Totals +

Form ID: 4835

Form ID: 4835-2	Farm Rental Expenses	34
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Preparer use only			
Description			
		2013 Information	Prior Year Information
Car and truck expenses	+ _	<u>[</u> 6]	
Chemicals		[8]	
Conservation expenses	+	[10]	
Custom hire (machine work)	+ _	[12]	
Depreciation		[14]	
Employee benefit programs		[16]	
Feed purchased		[18]	
Fertilizers and lime		[20]	
Freight and trucking		[22]	
Gasoline, fuel, and oil		[24]	
nsurance (Other than health):	-		
(+	[26]	
Mortgage interest (Paid to banks, etc.):	· –	_	
violigage interest (i did to barno, etc.).	_	[90]	
		[28]	
-			
 Other interest			
		[31]	
Labor hired (Less employment credit)		[33]	
Pension and profit sharing		[35]	
Rent - vehicles, machinery, and equipment		[37]	
Rent - other		[39]	
Repairs and maintenance		[41]	
Seed and plants purchased		[43]	
Storage and warehousing		[45]	
Supplies purchased	+_	[47]	
Taxes:			
		[49]	
	+		
	+		
	+		
Jtilities	+_	[51]	
Veterinary, breeding, and medicine	+_	[53]	
Other expenses:			
	+ _	[55]	
	+ _		
	+		
	+		
	+		
	+ _		
	+		
	+		
	+		
Preproductive period expenses		[57]	
Preparer use only			
Carryovers	Regular	AMT	_

Preparer use only				
Carryovers		Regular		AMT
Operating	+	[65]	+	[66]
Short-term capital	+	[67]	+	[68]
Long-term capital	+	[69]	+	[70]
28% rate capital	+	[71]	+	[72]
Section 1231 loss	+	[73]	+	[74]
Ordinary business gain/loss	+	[75]	+	[76]
Section 179	+	[77]	+	[78]
Excess farm loss	+	[81]	+	[82]

Control Totals + Form ID: 4835-2

Partnerships and S Corporations

	Please provide	copies of Schedules K-1	showing income from part	nerships and S-corporations.
Taxpayer/Sp	oouse/Joint (T, S, J)			_[2]
Employer id	lentification number			[3]
Name of en	tity			[4]
State postal	code			[5]
	ty (1 = Partnership, 2 = S Corporation, 3 = Fo	preign partnership, 4 = Publicly trade	d partnership)	[12]
	Preparer use only			1
	Carryovers	Regular	AMT	
Enter	Operating	[51]	[52]	
on K1-4	Short-term capital	[53]	[54]	
	Long-term capital	[55]	[56]	
	28% rate capital	[57]	[58]	
	Section 1231 loss	[59]	[60]	
	Ordinary business gain/loss	[61]	[62]	
	Other losses - 1040 pg.1	[63]	[64]	
	Comm revitalization	[65]	[66]	
	Section 179	[69]	[70]	
	Excess farm loss	[71]	[72]	
State postal Type of enti	ty (1 = Partnership, 2 = S Corporation, 3 = Fo			[5] [12]
	Carryovers	Regular	AMT	
Enter	Operating	[51]	[52]	
on K1-4	Short-term capital	[53]	[54]	
	Long-term capital	[55]	[56]	
	28% rate capital	[57]	[58]	
	Section 1231 loss	[59]	[60]	
	Ordinary business gain/loss	[61]	[62]	
	Other losses - 1040 pg.1	[63]	[64]	
	Comm revitalization	[65]	[66]	
	Section 179	[69]	[70]	
	Excess farm loss	[71]	[72]	
Employer id Name of en State postal	•	oreign partnership. 4 = Publicly trade	d partnership)	[2] [3] [4] [5] [12]
		, , , , , , , , , , , , , , , , , , ,		_(12)
	Preparer use only Carryovers	Regular	АМТ	

Preparer lise only		
Carryovers	Regular	AMT
Operating	[51]	[52]
Short-term capital	[53]	[54]
Long-term capital	[55]	[56]
28% rate capital	[57]	[58]
Section 1231 loss	[59]	[60]
Ordinary business gain/loss	[61]	[62]
Other losses - 1040 pg.1	[63]	[64]
Comm revitalization	[65]	[66]
Section 179	[69]	[70]
Excess farm loss	[71]	[72]
	Operating Short-term capital Long-term capital 28% rate capital Section 1231 loss Ordinary business gain/loss Other losses - 1040 pg.1 Comm revitalization Section 179	Carryovers Regular Operating [51] Short-term capital [53] Long-term capital [55] 28% rate capital [57] Section 1231 loss [59] Ordinary business gain/loss [61] Other losses - 1040 pg.1 [63] Comm revitalization [65] Section 179 [69]

Form ID: K1T		Estates a	and Trusts		36
	Please prov	ide all copies of Schedule	s K-1 showing income from	estates and trusts.	
Taxpayer/Sp	ouse/Joint (T, S, J)	·	•		[2]
	entification number				[3]
Name of act	•				[4]
State postal	code			_	<u>[</u> 5]
	Preparer use only				
	Carryovers	Regular	AMT		
Enter on K1T-2	Operating	[70]	[71]		
OII IXII-Z	Short-term capital	[72]	[73]		
	Long-term capital	[74]	[75]		
	28% rate capital	[76]	[77]		
	Section 1231 loss	[78]	[79]		
	Ordinary business gain/loss	[80]	[81]		
	Comm revitalization	[82]	[83]		
T/C	over / leint = 0 0				
	ouse/Joint (T, S, J)				_[2]
	entification number				[3]
Name of act			-		[4]
State postal				_	[5]
	Preparer use only	Regular	AMT		
Enter	Carryovers				
on K1T-2	Operating Chart term capital	[70]	[71]		
	Short-term capital	[72]	[73]		
	Long-term capital	[74]	[75]		
	28% rate capital	[76]	[77]		
	Section 1231 loss	[78]	[79]		
	Ordinary business gain/loss Comm revitalization	[80]	[81]		
	Commi revitalization	[82]	[83]		
Taxpaver/Sp	ouse/Joint (T, S, J)				_[2]
	entification number				[3]
Name of act					[4]
State postal					[5]
	Preparer use only			_	
	Carryovers	Regular	AMT		
Enter	Operating	[70]	[71]		
on K1T-2	Short-term capital	[72]	[73]		
	Long-term capital	[74]	[75]		
	28% rate capital	[76]	[77]		
	Section 1231 loss	[78]	[79]		
	Ordinary business gain/loss	[80]	[81]		
	Comm revitalization	[82]	[83]		
	·				
Taxpayer/Sp	ouse/Joint (T, S, J)				[2]
Employer id	entification number				— [3]
Name of act	ivity				[4]
State postal	code			_	[5]
	Preparer use only			_	_
	Carryovers	Regular	AMT		
Enter	Operating	[70]	[71]		
on K1T-2	Short-term capital	[72]	[73]		
	Long-term capital	[74]	[75]		
	28% rate capital	[76]	[77]		
	Section 1231 loss	[78]	[79]		
	Ordinary business gain/loss	[80]	[81]		
	Comm revitalization	[82]	[83]		
		[92]	[00]		

Form ID: K1T

Form ID: Home Sale of Principal Residence		37
Description		[4]
Taxpayer/Spouse/Joint (T, S, J)		[1] [5]
State postal code		[6]
Mark if electing to pay tax on entire gain (No exclusion will be calculated and entire gain will be reported on Schedule	e D)	^[0] [7]
Date former residence was acquired	C D)	[9] —[1]
Date former residence was sold	_	[0]
Selling price of former residence	+	[11]
Expenses related to the sale of your old home		[12]
Original cost of home sold including capital improvements	+	[13]
Exclusion Information		
Mark if meet use and ownership test without exceptions (2 years use within 5-year period preceding sale date)		_[19]
	Taxpayer	Spouse
Reduced exclusion days: (Enter only days within 5-year period ending on sale date)	. ,	·
Number of days each person used property as main home	[21]	[22]
Number of days each person owned property used as main home	[23]	[24]
Number of days between date of sale of the other home and date of sale of this home	[25]	[26]
Form 6252 - Current Year Installment Sale		
Mortgage and other debts the buyer assumed	+	[28]
Total current year payments received	+	
Form 6252 - Related Party Installment Sale Information		
Related party name		[30]
Address		[31]
City, State and Zip [32]	[33]	[34]
Identifying number of related party		[35]
Was the property sold as a marketable security? (Y, N)		_[36]
Enter date of second sale if more than 2 years after the first sale	_	[37]
Indicate special conditions if applicable (1 = Sale/exchange, 2 = Involuntary conv, 3 = Death of seller, 4 = No tax avoidance)		_[38]
Selling price of property sold by a related party	+	[40]

Form ID: InstPY Prior Year Installment Sale		
Preparer use only	2013 Information	Prior Year Information
Description	[3]	
Taxpayer/Spouse/Joint (T, S, J)	[7]	
State postal code	[8]	
Date acquired	[16]	
Date sold	[17]	
Gross sales price of property sold	+[18]	
	+[20]	
	+[22]	
Commissions and other expenses of the sale	+[24]	
Gross profit percentage	[26]	
Total current year principal payments received	+[32]	
Prior year principal payments received	+[34]	
Total ordinary income to recapture	+[36]	
Total ordinary income previously recaptured	+[38]	
	1	
Control Totals +		
Prior Year Installment	Sale	
Preparer use only	2013 Information	Prior Year Information
Description	[3]	
Taxpayer/Spouse/Joint (T, S, J)		
State postal code	[8]	
Date acquired	[16]	
Date sold	[17]	
Gross sales price of property sold	+[18]	
Mortgage and other debts the buyer assumed	+[20]	
Cost or other basis	+[22]	
Commissions and other expenses of the sale	+ [24]	
Gross profit percentage	[26]	

Total current year principal payments received

Total ordinary income previously recaptured

Control Totals +

Prior year principal payments received Total ordinary income to recapture [32]

[36]

Form ID: Sale Form 4797 and 6252 - General Information		39
Preparer use only		
Description		[3]
Taxpayer/Spouse/Joint (T, S, J)		[9]
State postal code		[10]
Mark to include gross proceeds for 1099-S reporting on Form 4797, line 1		[14]
Mark if disposition is due to casualty or theft		[18]
Mark if disposition was to a related party		[20]
Sale Information		
Date acquired		[22]
Date sold		[23]
Gross sales price or insurance proceeds received	+	[24]
Cost or other basis		[25]
Commissions and other expenses of sale	•	[26]
Depreciation allowed or allowable	+	[27]
Form 4797, Part III - Recapture		
Additional depreciation after 1975 (Section 1250)	+	[29]
Applicable percentage (if not 100%) (Section 1250)		[30]
Additional depreciation after 1969 (Section 1250)	+	[31]
Soil, water and land clearing expenses (Section 1252)	+	[32]
Applicable percentage (if not 100%) (Section 1252)		[33]
Intangible drilling and development costs (Section 1254)	+	[34]
Applicable payments excluded from income under sec. 126 (Section 1255)	+	[35]
Form 6252 - Current Year Installment Sale		
Mortgage and other debts the buyer assumed	1	[20]
Total current year payments received		[36] [37]
Total culterit year payments received	T	[37]
Form 6252 - Related Party Installment Sale Information		
Related party name		[38]
Address		[39]
State, City and Zip [40]	[41]	[42]
Identifying number of related party		[43]
Was the property sold as a marketable security? (Y, N)		[44]
Enter date of second sale		[45]
Indicate special conditions if applicable (1 = Sale/exchange, 2 = Involuntary conv, 3 = Death of seller, 4 = No tax avoidance)		[46]
Selling price of property sold by a related party	+	[48]

Control Totals +	Form ID: Sale

Form ID: 8824 Like-Ki	nd Exchange General Information	on 40
Preparer use only		
Description of property given up		[4]
		[5]
Taxpayer/Spouse/Joint (T, S, J)		_[6]
State postal code		[7]
Description of property received		
	Data Information	[11]
	Date Information	
Date the like-kind property given up was acquired		[16]
Date you transferred your property to the other party		
Date the like-kind property received was identified		[18]
Date you received the like-kind property from the other pa	arty	[19]
Ga	in and Basis Information	
Fair market value of other property given up		+[20]
Adjusted basis of other property given up		+[21]
Cash received		+[22]
Fair market value of other (not like-kind) property received	d	+[23]
Installment obligation received in like-kind exchange		+[24]
Fair market value of like-kind property you received		+[25]
Fair market value of non-section 1245 property you receive	ved	+[26]
Liabilities, including mortgages, assumed by you		+[27]
Cash paid		+[28]
Adjusted basis of like-kind property given up		+[29]
Adjusted basis of like-kind property from pass through en	tity	
Cost or other basis	470	+[30]
Depreciation allowed or allowable excluding Section	179	+[31]
Section 179 expense deduction passed through Section 179 carryover		+[32]
Liabilities, including mortgages, assumed by the other pa	rh.	+[33]
Exchange expenses incurred by you	TTY .	+[34] + [35]
		т[33]
Relate	ed Party Exchange Information	
Name of related party		[38]
Address of related party	-	[39]
City		[40]
State	-	
Zip code		[42]
Identifying number of related party		[43]
Relationship to you		[44]
During this tax year, did the related party sell or dispose of	of the property received? (Y, N)	
During this tax year, did you sell or dispose of the like-kin	d property you received? (Y, N)	[46]
Indicate if any special conditions apply (1 = Death of either part		
Mark if this exchange is a prior year like-kind exchange		

Control Totals +	Form ID: 8824

Form ID: 2555	Foreign Earned Income Exclusion	41
Taxpayer/Spouse (T, S)	[1] State postal code	[3]
Foreign street address	[4] City	
State/Province	Country code	_
Country	Postal code	
Employer's name		[2]
U.S. address		_
State postal code Foreign street address	Zip code [6] City	_
State/Province	Country code	_
Country	Deatel and	_
•	entity, B = U.S. company, C = Self, D = Foreign affiliate of a U.S. company, E = Other) [7] If other, specify type	
Country of citizenship		
If maintained a separate	foreign residence for your family due to adverse living conditions, provide city, country, and days:	_
City/Country	[12] Days	_
City/Country	Days	
, ,	ne tax year and dates established:	
Tax home	[13] Date	_
Tax home	Date	_
	Foreign Earned Income Allocation Information	
*U.S. Business Davs ar	nd Travel Type Code: 1=Travel to United States; 2=Travel to restricted country; 3=Travel to foreign country	
U.S. business days and	travel information: [16]	
Type Code*	No. of U Name of Country including United States Date Arrived Date Left business	
_		_
		_
_		_
		_
		_
— — — Foreign days worked bef	ore and after foreign assignment [17] Total days worked before and after foreign assignment	— [18]
• ,	rked during year (defaults to 240)	[19]
	Bona Fide Residence Test	\neg
Data faraign regidence h		
Date foreign residence b	· — — · · · — · · · · · · · · · · · · ·	[22] [23]
	ed abroad with you during any part of tax year, list who and for what period:	_[20]
Relationship	Period abroad	[24]
Relationship	Period abroad	_, ,
Relationship	Period abroad	_
Relationship	Period abroad	_
Mark if you submitted a s	statement to foreign country authorities that you are not a resident of that country	[25]
Mark if required to pay in	come tax to that country	[26]
List any contractual terms	s or other conditions relating to length of employment abroad	
		[27]
Type of visa used to enter	or foreign country	
	length of stay or employment	[28]
	Tongui of outproymoni	[29]
If maintained a home in I	J.S., enter address, whether it was rented, names of occupants and their relationship to you:	
Address	[30]	_
State postal code	Zip code	_
-	ccupant Relationship	_
Address		_
State postal code	Zip code Polationship	_
Rented _ Oo	ccupant Relationship	
	Physical Presence Test	
Principal country of empl	oyment	[31]
	Form ID: 2	555

Form ID: 2555-2 Foreign Earned Income Exclusion		42
Employer's name Taxpayer/Spouse (T, S) State postal code	-	_
Foreign Earned Income		
Please use the Foreign Earned Income Allocation Codes located below	Allocation Code	Amount
Noncash income: Home (lodging) Meals		[12] [15]
Car Other properties or facilities (Please enter code here and description and amount below):	[19]	[18] [20]
	_ +_	
Allowances, reimbursements or expenses paid on behalf: Cost of living and overseas differential		[22]
Family Education Home leave	[25] + _	[24] [26] [28]
Quarters Other purposes (Please enter code here and description and amount below):	[31]	[30] [32]
	_ +_	
Other foreign earned income (Please enter code here and description and amount below):	+ _ [33]	[34]
	_ + _ _ + _ _ + _	
Excludable meals and lodging under section 119		[35]
*Foreign Earned Income Allocation Codes 1 = 100% foreign during assignment 2 = 100% U.S. during assignment 3 = U.S. and foreign days worked during assignment 4 = U.S. and foreign days before/after assignment 5 = Days worked before, during, and after assignment		
Deductions Allocable to Foreign Earned In	come	
Other allocable deductions	Allocation Code* ^[36] +_	Amount [37]
Housing Exclusion/Deduction		
Qualified housing expense	+_	[47]
NOTES/QUESTIONS:		

Control Totals +

Form ID: 2555-2

Medical and Health Savings Account Contributions

Please provide all Forms 5498-SA.

	2013 Information	Prior Year Information
Taxpayer/Spouse (T, S)	[1]	
Name of Trustee	[4]	
State postal code	[2]	
Archer MSA contributions made in 2013 and 2014 for 2013 (Box 1)	+[6]	
Total contributions made in 2013 (Box 2)	+[8]	
Total HSA or Archer MSA contributions made in 2014 for 2013 (Box 3)	+[10]	
Rollover contribution (Box 4)	+[13]	
Fair market value of HSA, Archer MSA, or MA MSA (Box 5)	+[15]	
Box 6 -		
HSA	[17]	
Archer MSA	 [18]	
MA (Medicare Advantage) MSA	 [19]	
	_	
Additional Informa	tion	
To Posts the section of an exercise section of the section of the body section of the section of	2013 Information	Prior Year Information
Indicate type of coverage under qualifying high deductible health plan (1 = Self-Only, 2 = Family	<u> </u>	
Number of months in qualified high deductible health plan in 2013	[21]	
Mark if you want to contribute the maximum allowable health or medical savings account	-	
Total HSA/MSA contribution to be made for 2013	+[23]	
Excess contributions for 2012 taken as constructive contributions for 2013	+[25]	
Complete this section if your account is an	n Archer MSA or MA MSA	
Amount of annual deductible	+ [28]	
Enter compensation from employer maintaining high deductible health plan	+[31]	
If self-employed, enter earned income from business under which plan was established	+[35]	
Complete this section if your acco	ount is an HSA	
Was the high deductible health plan in effect for December 2013? (Y, N)	[37]	
NOTES/QUESTIONS:		

Form	ID.	10995	: /

Health, Medical Savings Account Distributions

А	А

Please provide all For	ms 1099		
		2013 Information	Prior Year Information
Taxpayer/Spouse (T, S)		[1]	
Name of Trustee		[4]	
State postal code		[2]	
Gross distributions received (Box 1)	+_		
Earnings on excess contributions (Box 2)	+_	[9]	
Distribution code (Box 3)		[11]	
Fair Market Value on date of death (Box 4)	+_	[12]	
Box 5 -			
HSA		[13]	
Archer MSA		[14]	
MA MSA		[15]	
All distributions were used to pay unreimbursed qualified medical expenses		 [17]	_
If some distributions were used to pay for other than qualified medical expenses	s, enter		
the unreimbursed qualified medical expenses for 2013	+	[19]	
Withdrawal of excess contributions by the due date of the return	+	[21]	
Amount of distribution rolled over for 2013	+	[23]	
If the distribution is due to the death of the account holder,			
enter the qualified decedent medical expenses paid by the taxpayer	+	[26]	
If MA (Medicare Advantage) MSA, enter value of account on 12/31/12	+	[27]	
For HSA accounts:			
Was the high deductible health plan coverage started in 2012 and			
in effect for the month of December 2012? (Y, N)		[29]	
Was the high deductible health plan coverage ended before 12/31/13? (Y, N)		[30]	
Long Term Care (LTC) Ser	vice a	and Contracts	
Diagon provide all For	ma 4000	LTC	

Plea	ase provide all Forms 1099-LTC.		
	20	13 Information	Prior Year Information
Name of the insured chronically ill individual		[39]	
Social security number of insured		[40]	
Gross long-term care (LTC) benefits paid (Box 1)	+	[42]	
Accelerated death benefits paid (Box 2)	+	[44]	
Check one (Box 3)			
Per diem		[46]	
Reimbursed amount		[47]	
Qualified contract (Box 4)		[48]	
Check, if applicable (Box 5)			
Chronically ill		[49]	
Terminally ill		[50]	
Are there other individuals who received LTC payments during	2013? (Y, N)	[52]	
If the insured is terminally ill, were payments received on account	unt of terminal illness? (Y, N)	[53]	
Number of days during the long-term care period		[54]	
Cost incurred for qualified long-term care services during the lo	ong-term care period +	[55]	

Control Totals +	Form ID: 1099SA

Form ID: 3903	Moving Expenses		45
Preparer use only			
Description of move			[2]
Taxpayer/Spouse/Joint (T, S, J)			_[3]
Mark if the move was due to service in the armed forces			[7]
Number of miles from old home to new workplace			[8]
Number of miles from old home to old workplace			[9]
Mark if move is outside United States or its possessions			[10]
Transportation and storage expenses		+	[11]
Travel and lodging (not including meals)		+	[12]
Miles driven to new home			[13]
Total amount reimbursed for moving expenses		+	[15]

TRAU Recipient name Recipient SSN 2013 Information Prior Year Information	Alimony Paid:				
Address	T/S/J	Recipient name	Recipient SSN	2013 Information	Prior Year Information
Address		•	•		
Address Addr	Address				<u> </u>
Address	Address				_
Address				+	
2013 Information Taxpayer Spouse Educator expenses:	Address				
2013 Information Taxpayer Spouse Educator expenses:				+	
2013 Information Prior Year Information Taxpayer Spouse	Address				
Educator expenses:	Addicoo				.J [
Educator expenses:					
Educator expenses: +			2013 In		Prior Year Information
+			Taxpayer	Spouse	
+	Educator expenses:				
Self-employed health insurance premiums: (Not entered elsewhere) +	•	+	্য	+ [/	1
Self-employed health insurance premiums: (Not entered elsewhere) + [6] + [7] Self-employed long-term care premiums: (Not entered elsewhere) + [10] + [10] + -					·
				+	
Self-employed long-term care premiums: (Not entered elsewhere)	Self-employed health i	insurance premiums: (Not entered elsewh	ere)		
Self-employed long-term care premiums: (Not entered elsewhere) +		+	[6]	+	1
Self-employed long-term care premiums: (Not entered elsewhere) +		+		+	
	Self-employed long-teri		-		
Other adjustments:	Con employed long ten	· ·	•		
Other adjustments:					0]
		+		+	
	Other adjustments:				
		+	[14	i] + [[*]	5]
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l .	Control Totals +	i Forni ib. OtherAuj i

Form ID: Educate

47

Exclusion of Interest Income from Series EE or I U.S. Savings Bonds

Complete if you cashed qualified U.S. Savings bonds in 2013 that were issued after 1989, and you paid qualified higher education expenses in 2013 for yourself, your spouse, or your dependents.

Taxpayer/Spouse/Joint (T, S, J)		_
SSN of person enrolled at eligible educational institution		
Name of person enrolled at eligible educational institution (First/Last)		
Name of eligible educational institution		
Address of eligible educational institution		
City, state, and zip code		
Qualified higher education expenses you paid in 2013 for person listed above	+	[1]
Enter any nontaxable educational benefits received for 2013 for person listed above	+	
Type of qualified education program, if contributions made for enrollee (ESA = Coverdell ESA, QTP = Qualified Tuition Program)	•	
Financial institution name (ESA) or name of program (QTP)		
Financial institution address (ESA) or address of program (QTP)		
City, state and zip code		
Taxpayer/Spouse/Joint (T, S, J)		
SSN of person enrolled at eligible educational institution		_
Name of person enrolled at eligible educational institution (First/Last)		
Name of eligible educational institution		
Address of eligible educational institution		
City, state, and zip code		
Qualified higher education expenses you paid in 2013 for person listed above	+	[1]
Enter any nontaxable educational benefits received for 2013 for person listed above		
Type of qualified education program, if contributions made for enrollee (ESA = Coverdell ESA, QTP = Qualified Tuition Program)		
Financial institution name (ESA) or name of program (QTP)		
Financial institution address (ESA) or address of program (QTP)		
City, state and zip code		
Taxpayer/Spouse/Joint (T, S, J)		
SSN of person enrolled at eligible educational institution		_
Name of person enrolled at eligible educational institution (First/Last)		
Name of eligible educational institution		
Address of eligible educational institution		
City, state, and zip code		
Qualified higher education expenses you paid in 2013 for person listed above	+	[1]
Enter any nontaxable educational benefits received for 2013 for person listed above		
Type of qualified education program, if contributions made for enrollee (ESA = Coverdell ESA, QTP = Qualified Tuition Program)		
Financial institution name (ESA) or name of program (QTP)		
Financial institution address (ESA) or address of program (QTP)		
City, state and zip code		
, ,		
Total proceeds from Series EE or I U.S. Savings bonds issued after 1989 and cashed in 2013	+	[3]

Form	ID:	Educate2

Student Loan Interest Paid

48

Complete this section if you paid interest on a qualified student loan in 2013 for qualified higher education expenses for you, your spouse, or a person who was your dependent when you took out the loan. Please provide all copies of Form 1098-E. Form 1098-E from the lender reports interest received in 2013. The amounts reported by the lender may differ from the amounts you actually paid.

TS	Qualified loan interest recipient/lender		2013 Interest Paid	Prior Year Information
_		+	[1]	
_		+		
_		+		
		+		
	<u> </u>	 _	<u> </u>	<u> </u>

Form ID: Educ3

Education Credits and Tuition and Fees Deduction

49

Please provide all copies of Form 1098-T.

Educational institutions use Form 1098-T to report qualified education expenses. An eligible educational institution is any college, university, or vocational school eligible to participate in a student aid program administered by the U.S. Department of Education.

Preparer	-	Enter	on	Screen	Educate2
----------	---	-------	----	--------	----------

Taxpayer/Spouse (T, s)	[8]
Education code (1=American Opportunity Credit, 2=Lifetime Learning Credit, 3 = Tuition a	and Fees Deduction)
Student's social security number	
Student's first name	
Student's last name	
Institution	Information
nter information from each institution on a separate page, including	the complete address and federal identification number of the institution
Institution's federal identification number	[8]
Institution's name	
Institution's street address	·
Institution's city, state, zip code	

Tuition Paid and Related Information

Amounts reported in Box 1 or Box 2 may not reflect the actual amount paid for the student during 2013.

Enter the amount actually paid during 2013.

	2013 Information	Prior Year Information
Tuition paid (Enter only the amount actually paid) (Box 1)	+[8]	
Tuition billed (Enter only the amount actually paid) (Box 2)		
Educational institution changed its reporting method for 2013 (Box 3)	_	
Adjustments made for a prior year (Box 4)		
Scholarships or grants (Box 5)		
Adjustments to scholarships or grants for a prior year (Box 6)		
Box 1 or 2 includes amounts for an academic period beginning January - March 2014 (Box 7)	_	
At least half-time student (Box 8)	_	
Graduate student (Box 9)	_	
Insurance contract reimbursement/refund (Box 10)		
Non-Institution expenses (Books and fees not paid directly to the educational institution)		
American Opportunity Tax Credit (AOTC) disqualifier	_	
1 = Not pursuing degree, 2 = Not enrolled at least half-time, 3 = Felony drug conviction, 4 = 4 yrs post-secondary education	on before 2013	

Control Totals +	Form ID: Educ3

Form	ID:	1099	

Qualified Education Programs

50

Please provide all copie	s of Form 1099Q	
Taxpayer/Spouse (T, S)	_[1]	
Payer name	[3]	
State postal code	[4]	
Type of account (1= Private QTP, 2 = State QTP, 3 = ESA)	[6]	
Relationship to account (1 = Beneficiary, 2 = Account owner, 3 = Both, 4 = Neither)	[7]	
Final distribution	[8]	
Contributions ar	nd Basis	
Beneficiary's Information (if not taxpayer or spouse)		
Social security number	[11]	
First name	[11]	
Last name	[13]	
	[13]	
	2013 Information	Prior Year Information
Amount contributed in current year	+[14]	
Basis of this account at 12/31/12	+[17]	
Value of this account at 12/31/13	+[19]	
Distribution by beneficiary of previously taxed contributions (if not taxpayer or spouse)	+[24]	
Payments from Qualified E	ducation Programs	
	2013 Information	Prior Year Information
Gross distribution (Box 1)	+[30]	
Earnings (Box 2)	+[32]	
Basis (Box 3)	+[34]	
Trustee-to-trustee rollover (Box 4)	[36]	
Trustee-to-trustee rollover amount if different than Box 1	+[37]	
Box 5 -		
Private QTP	[39]	
State QTP	[40]	
Coverdell ESA	[41]	
Check if the recipient is not the designated beneficiary (Box 6)	[42]	
Qualified education expenses	+[43]	
Elementary and secondary education expenses	+ [45]	

Form ID: FAFSA

Federal Student Aid Application Information #1

Complete a FAFSA information section for both the parent and student. Both may be required to complete the FAFSA.

If the parent or student tax return was prepared elsewhere, please provide the completed tax return.

	2013 Information	Prior Year Information
Who is listed as the primary taxpayer on the tax return of the individual to whom this inforr		
(1 = Father or stepfather, 2 = Mother or stepmother, 3 = Student, 4 = Student's spouse)	[1]	
The information for the FAFSA worksheet will be:	_	
(1 = Calculated for the taxpayer on this return, 2 = Entered from someone else's return)	[2]	
Taxpayer's (and spouse's) total current balance of cash, savings and checking accounts	+[4]	
Taxpayer's (and spouse's) net worth in investments, including real estate but		
do not include the primary residence	+[6]	
Taxpayer's (and spouse's) net worth in current businesses and/or investment farms	+[8]	
Child support paid because of divorce, separation, or a result of a legal requirement	+[10]	
Taxable earnings from need-based employment programs	+[12]	
Student grant and scholarship aid included in adjusted gross income	+[14]	
Earnings from work under a cooperative education program offered by a college	+[16]	
Child support received but do not include foster care or adoption payments	+[18]	
Veterans noneducation benefits	+[20]	
Other untaxed income not reported elsewhere, such as worker's compensation,		
disability, etc., but do not include student aid, earned income credit, additional		
child tax credit, welfare payments, untaxed Social Security benefits, SSI,		
on-base military housing or a military housing allowance, or combat pay.	+[22]	
Money received or paid on behalf of the student (For the student's worksheet only)	+[24]	
Control Total	s +	
Federal Student Aid Application	1.6	
This FAFSA information is for the: Preparer use only		
Who is listed as the primary taxpayer on the tax return of the individual to whom this inform	2013 Information	Prior Year Information
Who is listed as the primary taxpayer on the tax return of the individual to whom this inforr (1 = Father or stepfather, 2 = Mother or stepmother, 3 = Student, 4 = Student's spouse)	nation applies?	Prior Year Information
(1 = Father or stepfather, 2 = Mother or stepmother, 3 = Student, 4 = Student's spouse)		Prior Year Information
(1 = Father or stepfather, 2 = Mother or stepmother, 3 = Student, 4 = Student's spouse) The information for the FAFSA worksheet will be:	nation applies?	Prior Year Information
(1 = Father or stepfather, 2 = Mother or stepmother, 3 = Student, 4 = Student's spouse) The information for the FAFSA worksheet will be: (1 = Calculated for the taxpayer on this return, 2 = Entered from someone else's return)	nation applies?[1][2]	Prior Year Information
(1 = Father or stepfather, 2 = Mother or stepmother, 3 = Student, 4 = Student's spouse) The information for the FAFSA worksheet will be: (1 = Calculated for the taxpayer on this return, 2 = Entered from someone else's return) Taxpayer's (and spouse's) total current balance of cash, savings and checking accounts	nation applies?	Prior Year Information
(1 = Father or stepfather, 2 = Mother or stepmother, 3 = Student, 4 = Student's spouse) The information for the FAFSA worksheet will be: (1 = Calculated for the taxpayer on this return, 2 = Entered from someone else's return) Taxpayer's (and spouse's) total current balance of cash, savings and checking accounts Taxpayer's (and spouse's) net worth in investments, including real estate but	nation applies?[1][2] +[4]	Prior Year Information
(1 = Father or stepfather, 2 = Mother or stepmother, 3 = Student, 4 = Student's spouse) The information for the FAFSA worksheet will be: (1 = Calculated for the taxpayer on this return, 2 = Entered from someone else's return) Taxpayer's (and spouse's) total current balance of cash, savings and checking accounts Taxpayer's (and spouse's) net worth in investments, including real estate but do not include the primary residence	nation applies?[1] +[4] +[6]	Prior Year Information
(1 = Father or stepfather, 2 = Mother or stepmother, 3 = Student, 4 = Student's spouse) The information for the FAFSA worksheet will be: (1 = Calculated for the taxpayer on this return, 2 = Entered from someone else's return) Taxpayer's (and spouse's) total current balance of cash, savings and checking accounts Taxpayer's (and spouse's) net worth in investments, including real estate but do not include the primary residence Taxpayer's (and spouse's) net worth in current businesses and/or investment farms	nation applies?[1] [2] +[4] +[6] +[8]	Prior Year Information
(1 = Father or stepfather, 2 = Mother or stepmother, 3 = Student, 4 = Student's spouse) The information for the FAFSA worksheet will be: (1 = Calculated for the taxpayer on this return, 2 = Entered from someone else's return) Taxpayer's (and spouse's) total current balance of cash, savings and checking accounts Taxpayer's (and spouse's) net worth in investments, including real estate but do not include the primary residence	+[6] +[8] +[10]	Prior Year Information
(1 = Father or stepfather, 2 = Mother or stepmother, 3 = Student, 4 = Student's spouse) The information for the FAFSA worksheet will be: (1 = Calculated for the taxpayer on this return, 2 = Entered from someone else's return) Taxpayer's (and spouse's) total current balance of cash, savings and checking accounts Taxpayer's (and spouse's) net worth in investments, including real estate but do not include the primary residence Taxpayer's (and spouse's) net worth in current businesses and/or investment farms Child support paid because of divorce, separation, or a result of a legal requirement Taxable earnings from need-based employment programs	+[6] +[8] +[8] +[10]	Prior Year Information
(1 = Father or stepfather, 2 = Mother or stepmother, 3 = Student, 4 = Student's spouse) The information for the FAFSA worksheet will be: (1 = Calculated for the taxpayer on this return, 2 = Entered from someone else's return) Taxpayer's (and spouse's) total current balance of cash, savings and checking accounts Taxpayer's (and spouse's) net worth in investments, including real estate but do not include the primary residence Taxpayer's (and spouse's) net worth in current businesses and/or investment farms Child support paid because of divorce, separation, or a result of a legal requirement Taxable earnings from need-based employment programs Student grant and scholarship aid included in adjusted gross income	+[1] +[4] +[6] +[10] +[10] +[12] +[14]	Prior Year Information
(1 = Father or stepfather, 2 = Mother or stepmother, 3 = Student, 4 = Student's spouse) The information for the FAFSA worksheet will be: (1 = Calculated for the taxpayer on this return, 2 = Entered from someone else's return) Taxpayer's (and spouse's) total current balance of cash, savings and checking accounts Taxpayer's (and spouse's) net worth in investments, including real estate but do not include the primary residence Taxpayer's (and spouse's) net worth in current businesses and/or investment farms Child support paid because of divorce, separation, or a result of a legal requirement Taxable earnings from need-based employment programs	+[1] +[4] +[6] +[10] +[10] +[10] +[12] +[14] +[16]	Prior Year Information
(1 = Father or stepfather, 2 = Mother or stepmother, 3 = Student, 4 = Student's spouse) The information for the FAFSA worksheet will be: (1 = Calculated for the taxpayer on this return, 2 = Entered from someone else's return) Taxpayer's (and spouse's) total current balance of cash, savings and checking accounts Taxpayer's (and spouse's) net worth in investments, including real estate but do not include the primary residence Taxpayer's (and spouse's) net worth in current businesses and/or investment farms Child support paid because of divorce, separation, or a result of a legal requirement Taxable earnings from need-based employment programs Student grant and scholarship aid included in adjusted gross income Earnings from work under a cooperative education program offered by a college	+[1] +[4] +[6] +[10] +[10] +[12] +[14]	Prior Year Information
(1 = Father or stepfather, 2 = Mother or stepmother, 3 = Student, 4 = Student's spouse) The information for the FAFSA worksheet will be: (1 = Calculated for the taxpayer on this return, 2 = Entered from someone else's return) Taxpayer's (and spouse's) total current balance of cash, savings and checking accounts Taxpayer's (and spouse's) net worth in investments, including real estate but do not include the primary residence Taxpayer's (and spouse's) net worth in current businesses and/or investment farms Child support paid because of divorce, separation, or a result of a legal requirement Taxable earnings from need-based employment programs Student grant and scholarship aid included in adjusted gross income Earnings from work under a cooperative education program offered by a college Child support received but do not include foster care or adoption payments	rnation applies? [1] [2] +[4] +[6] +[8] +[10] +[12] +[14] +[16] +[18]	Prior Year Information
(1 = Father or stepfather, 2 = Mother or stepmother, 3 = Student, 4 = Student's spouse) The information for the FAFSA worksheet will be: (1 = Calculated for the taxpayer on this return, 2 = Entered from someone else's return) Taxpayer's (and spouse's) total current balance of cash, savings and checking accounts Taxpayer's (and spouse's) net worth in investments, including real estate but do not include the primary residence Taxpayer's (and spouse's) net worth in current businesses and/or investment farms Child support paid because of divorce, separation, or a result of a legal requirement Taxable earnings from need-based employment programs Student grant and scholarship aid included in adjusted gross income Earnings from work under a cooperative education program offered by a college Child support received but do not include foster care or adoption payments Veterans noneducation benefits	rnation applies? [1] [2] +[4] +[6] +[8] +[10] +[12] +[14] +[16] +[18]	Prior Year Information
(1 = Father or stepfather, 2 = Mother or stepmother, 3 = Student, 4 = Student's spouse) The information for the FAFSA worksheet will be: (1 = Calculated for the taxpayer on this return, 2 = Entered from someone else's return) Taxpayer's (and spouse's) total current balance of cash, savings and checking accounts Taxpayer's (and spouse's) net worth in investments, including real estate but do not include the primary residence Taxpayer's (and spouse's) net worth in current businesses and/or investment farms Child support paid because of divorce, separation, or a result of a legal requirement Taxable earnings from need-based employment programs Student grant and scholarship aid included in adjusted gross income Earnings from work under a cooperative education program offered by a college Child support received but do not include foster care or adoption payments Veterans noneducation benefits Other untaxed income not reported elsewhere, such as worker's compensation,	rnation applies? [1] [2] +[4] +[6] +[8] +[10] +[12] +[14] +[16] +[18]	Prior Year Information
(1 = Father or stepfather, 2 = Mother or stepmother, 3 = Student, 4 = Student's spouse) The information for the FAFSA worksheet will be: (1 = Calculated for the taxpayer on this return, 2 = Entered from someone else's return) Taxpayer's (and spouse's) total current balance of cash, savings and checking accounts Taxpayer's (and spouse's) net worth in investments, including real estate but do not include the primary residence Taxpayer's (and spouse's) net worth in current businesses and/or investment farms Child support paid because of divorce, separation, or a result of a legal requirement Taxable earnings from need-based employment programs Student grant and scholarship aid included in adjusted gross income Earnings from work under a cooperative education program offered by a college Child support received but do not include foster care or adoption payments Veterans noneducation benefits Other untaxed income not reported elsewhere, such as worker's compensation, disability, etc., but do not include student aid, earned income credit, additional	rnation applies? [1] [2] +[4] +[6] +[8] +[10] +[12] +[14] +[16] +[18]	Prior Year Information
(1 = Father or stepfather, 2 = Mother or stepmother, 3 = Student, 4 = Student's spouse) The information for the FAFSA worksheet will be: (1 = Calculated for the taxpayer on this return, 2 = Entered from someone else's return) Taxpayer's (and spouse's) total current balance of cash, savings and checking accounts Taxpayer's (and spouse's) net worth in investments, including real estate but do not include the primary residence Taxpayer's (and spouse's) net worth in current businesses and/or investment farms Child support paid because of divorce, separation, or a result of a legal requirement Taxable earnings from need-based employment programs Student grant and scholarship aid included in adjusted gross income Earnings from work under a cooperative education program offered by a college Child support received but do not include foster care or adoption payments Veterans noneducation benefits Other untaxed income not reported elsewhere, such as worker's compensation, disability, etc., but do not include student aid, earned income credit, additional child tax credit, welfare payments, untaxed Social Security benefits, SSI,	nation applies? [1] [2] +[4] +[6] +[8] +[10] +[12] +[14] +[16] +[18] +[20]	Prior Year Information
(1 = Father or stepfather, 2 = Mother or stepmother, 3 = Student, 4 = Student's spouse) The information for the FAFSA worksheet will be: (1 = Calculated for the taxpayer on this return, 2 = Entered from someone else's return) Taxpayer's (and spouse's) total current balance of cash, savings and checking accounts Taxpayer's (and spouse's) net worth in investments, including real estate but do not include the primary residence Taxpayer's (and spouse's) net worth in current businesses and/or investment farms Child support paid because of divorce, separation, or a result of a legal requirement Taxable earnings from need-based employment programs Student grant and scholarship aid included in adjusted gross income Earnings from work under a cooperative education program offered by a college Child support received but do not include foster care or adoption payments Veterans noneducation benefits Other untaxed income not reported elsewhere, such as worker's compensation, disability, etc., but do not include student aid, earned income credit, additional child tax credit, welfare payments, untaxed Social Security benefits, SSI, on-base military housing or a military housing allowance, or combat pay.	nation applies? [1] [2] +[4] +[6] +[8] +[10] +[12] +[14] +[16] +[18] +[20]	Prior Year Information

Control Totals +

Form ID: A-1

Schedule A - Medical and Dental Expenses

J		2013 Information	Prior Year	Informati
	Medical and dental expenses, such as: Doctors, Dentists, Nurses, Hospital and nursing homes,	_		
	and surgical supplies, Hearing aids, Guide dogs, Eyeglasses and contact lenses, and Insurance	e reimbursements received		
1]	+	·	[2]	
	+			
	+	·		
	+			
	+			
	+			
	Medical insurance premiums you paid***: (Do not include pre-tax amounts paid by an employe	er-sponsored plan)		
4]	+	·	[5]	
	+	- -		
	+	·		
	+			
	Long-term care premiums you paid***: (Do not include pre-tax amounts paid by an employer-sp	ponsored plan)		
]	+	•	[8]	
	· · · · · · · · · · · · · · · · · · ·			
	Prescription medicines and drugs:			
0]		•	[11]	
•		•	· ·	
	+			
21	Miles driven for medical items			
J	***Not entered elsewhere, such as amounts paid for your self-employed business (Sch C, Sch F, Sch		[14]	
			D.:	Informa
J		2013 Information	Prior Year	IIIIOIIIIai
	State/local income taxes paid:	2013 Information	Prior Year	IIIIOIIIIa
	State/local income taxes paid:			IIIOIIIIa
	+		[19]	IIIIOIIIIa
			[19]	IIIOIIIIa
	+ +		[19]	IIIOIIIIa
			[19]	IIIOIIIIa
8]	+ + + + +		[19]	IIIOIIIIa
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8]	+ + + + + + + + + + + + + + + + + + +		[19]	IIIOIIIIa
8]	+ + + + + + + + + + + + + + + + + + +		[19]	IIIOIIIIa
8]	+ + + 2012 state and local income taxes paid in 2013: + + + + + + + + + + + + + + + + + + +		[19]	IIIOIIIIa
1]	+ 2012 state and local income taxes paid in 2013: + Real estate taxes paid:		[19]	IIIOIIIIa
1]	+ + + + + + + + + + + + + + + + + + +		[22]	
8] 1]	+ + + + + + + + + + + + + + + + + + +		[22]	
8] 1] 4]	+ + + + + + + + + + + + + + + + + + +		[22]	
8] 1] 4]	+ + + + + + + + + + + + + + + + + + +		[22]	
8] 1] 4]	### ### ### ### ### ### ### ### ### ##		[22]	
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8] 1] 4]	### ### ### ### ### ### ### ### ### ##		[22]	
8] 1] 7]	+ + + + + + + + + + + + + + + + + + +		[22]	
8]	+ + + + + + + + + + + + + + + + + + +		[22] [25] [28] [31]	
8] :1] :4]	+ + + + + + + + + + + + + + + + + + +		[22] [25] [28] [31]	
8] -1] -4]	### ### ### ### ### ### ### ### ### ##		[22]	
8] -1] -4]	+ + + + + + + + + + + + + + + + + + +		[22]	
8] -1] -4]	### ### ### ### ### ### ### ### ### ##		[22]	
8] :1] :4]	### ### ### ### ### ### ### ### ### ##		[22]	
[8] [21] [24] [27] [36]	### ### ### ### ### ### ### ### ### ##		[22]	
8] 21] 27]	### ### ### ### ### ### ### ### ### ##		[22]	

Control Totals +

Form ID: A-2	Interest Expenses	53
	IIILEI ESL EXDENSES	

Other, such as: Home mortgage interest paid to individuals [4]	
# # # # # # # # # # # # # # # # # # #	
*** *** *** *** *** *** *** *** *** **	

*Mortgage Types Blank = Used to buy, build or improve main/qualified second home 1 = Not used to buy, build, improve home or investment 2 = Used to pay off previous mortgage *Mortgage Types Blank = Used to buy, build, improve home or investment 2 = Used to pay off previous mortgage, excess provided to pay off previous mortgage and a secured by home used to buy, build, improve home or investment 3 = Used to pay off previous mortgage, excess provided to pay off previous mortgage and excended by home used to pay off previous mortgage and excended by home used to pay off previous mortgage and excended by home used to pay off previous mortgage and excended by home used to pay off previous mortgage and excended by home used to pay off previous mortgage and used to pay off previous mortgage and excended by home used to pay off previous mortgage and excended by home used to pay off previous mortgage and excended by home used to pay off previous mortgage and excended by home used to pay off previous mortgage and excended by home used to pay off previous mortgage and excended by home used to pay off previous mortgage and excended by home used to pay off previous mortgage and excended by home used to pay of	
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*Mortgage Types Blank = Used to buy, build or improve main/qualified second home 1 = Not used to buy, build, improve home or investment 2 = Used to pay off previous mortgage and secured by home used to pay off previous mortgage and secured by home used to pay off previous mortgage. ** //S/J	
*Mortgage Types Blank = Used to buy, build or improve main/qualified second home 1 = Not used to buy, build, improve home or investment 2 = Used to pay off previous mortgage, excess proved 4 = Taken out before 7/1/82 and secured by home used to pay off previous mortgage, excess proved 4 = Taken out before 7/1/82 and secured by home used to pay off previous mortgage, excess proved 4 = Taken out before 7/1/82 and secured by home used to pay off previous mortgage, excess proved 4 = Taken out before 7/1/82 and secured by home used to pay off previous mortgage, excess proved 4 = Taken out before 7/1/82 and secured by home used to pay off previous mortgage, excess proved 4 = Taken out before 7/1/82 and secured by home used to pay off previous mortgage, excess proved 4 = Taken out before 7/1/82 and secured by home used to pay off previous mortgage, excess proved a = Taken out before 7/1/82 and secured by home used to pay off previous mortgage, excess proved a = Taken out before 7/1/82 and secured by home used to pay off previous mortgage, excess proved a = Taken out before 7/1/82 and secured by home used to pay off previous mortgage, excess proved a = Taken out before 7/1/82 and secured by home used to pay off previous mortgage, excess proved a = Taken out before 7/1/82 and secured by home used to pay off previous mortgage, excess proved a = Taken out before 7/1/82 and secured by home used to pay off previous mortgage, excess proved a = Taken out before 7/1/82 and secured by home used to pay off previous mortgage and excerded by home used to pay off previous mortgage and secured by home used to pay off previous mortgage and excerded by home used to pay off previous mortgage and secured by home used to pay off previous mortgage and excerded by home used to pay off previous mortgage and secured by home used to pay off previous pay off previous mortgage and secured by home used to pay off previous mortgage and excerded by home used to pay off previous p	
*Mortgage Types Blank = Used to buy, build or improve main/qualified second home 1 = Not used to buy, build, improve home or investment 2 = Used to pay off previous mortgage /S/J	
Blank = Used to buy, build or improve main/qualified second home 1 = Not used to buy, build, improve home or investment 2 = Used to pay off previous mortgage, excess product of the previous mortgage and secured by home uses the pay off previous mortgage, excess product of the previous mortgage and secured by home uses the pay off previous mortgage, excess product of the previous mortgage, excess product of the previous mortgage, excess product of the product of the product of the product of the previous mortgage, excess product of the product of the product of the previous mortgage, excess product of the previous mortgage, excess product of the previous mortgage, excess product of the previous mortgage, excess product of the previous mortgage, excess product of the previous mortgage, excess product of the previous mortgage and except of the product of the product of the product of the product of the previous mortgage and except of the product of the pr	
1 = Not used to buy, build, improve home or investment 2 = Used to pay off previous mortgage /S/J	
Other, such as: Home mortgage interest paid to individuals 4	
Address City, state and zip code H Address City, state and zip code /J Name and address of other person who received Form 1098 for jointly liable mortgage interest you paid - Payer's/Borrower's name Street Address City/State/Zip code Refinancing Points paid in 2013 -	Year Information
City, state and zip code	
Address City, state and zip code J Name and address of other person who received Form 1098 for jointly liable mortgage interest you paid - Payer's/Borrower's name Street Address City/State/Zip code Refinancing Points paid in 2013 -	
Address City, state and zip code J Name and address of other person who received Form 1098 for jointly liable mortgage interest you paid - Payer's/Borrower's name Street Address City/State/Zip code Refinancing Points paid in 2013 -	
City, state and zip code Name and address of other person who received Form 1098 for jointly liable mortgage interest you paid - Payer's/Borrower's name Street Address City/State/Zip code Refinancing Points paid in 2013 -	
Name and address of other person who received Form 1098 for jointly liable mortgage interest you paid - Payer's/Borrower's name Street Address City/State/Zip code Refinancing Points paid in 2013 -	
Taxpayer/Spouse/Joint (T, S, J) Recipient/Lender name Total points paid at time of refinance Percentage of principal exceeding original mortgage (For AMT adjustment) Points deemed as paid in 2013 (Preparer use only) Date of refinance Term of new loan (in months) Reported on Form 1098 in 2013 Taxpayer/Spouse/Joint (T, S, J) Recipient/Lender name Total points paid at time of refinance Percentage of principal exceeding original mortgage (For AMT adjustment) Points deemed as paid in 2013 (Preparer use only) Date of refinance	
Term of new loan (in months)	
Reported on Form 1098 in 2013	
S/J 2013 Information	
Investment interest expense, other than on Schedule(s) K-1:	
[15] +[16]	
- <u>- </u>	
- <u> </u>	
- - +	
- - + - - - - - - - - - 	
- 	
- - + - - - - - - - - - 	
Control Totals +	

Charitable Contributions

	2013 I	nformation	Prior Year Inform
Contributions made by cash or check (including out-of-pocket expense	es)	_	
	+	[3]	
	_ +		
	_ +		
	_ +		
	_ +		
	_ +		
	_ +		
	_ +		
	_ +		
Volunteer miles driven	+		
Volunteer miles driven Noncash items, such as: Goodwill/Salvation Army/Other clothing or ho			
	ousehold goods		
Noncash items, such as: Goodwill/Salvation Army/Other clothing or ho	ousehold goods +	[6]	
Noncash items, such as: Goodwill/Salvation Army/Other clothing or ho	ousehold goods + + +	[6]	
Noncash items, such as: Goodwill/Salvation Army/Other clothing or ho	ousehold goods + + +	[6]	
Noncash items, such as: Goodwill/Salvation Army/Other clothing or ho	busehold goods + + + +	[6] [9]	

Miscellaneous Deductions

		nformation	Prior Year Info
Unreimbursed expenses, such as: Uniforms, Professional dues, Business publications, Job se	eking expenses, Edu	ucational expenses	
	+	[12]	
	+		
	+		
	+		
Union dues:			
	+	[15]	
	+		
Tax preparation fees	+	[18]	
Other expenses, subject to 2% AGI limitation, such as: Legal/accounting fees, of	custodial fees		
	+	[21]	
	+		
	+		
	+		
Safe deposit box rental	+	[24]	
Investment expenses, other than on Schedule(s) K-1 or Form(s) 1099-DIV/1099	-INT:		
	+	[27]	
	+		
	+		
Other expenses, not subject to the 2% AGI limitation:			
	+	[31]	
	+		
	+		
	+		
Gambling losses: (Enter only if you have gambling income)			
	+	[34]	

Control Totals +	Form ID: A-3

Form ID: MortgInt

Home Mortgage Interest Subject To Limitations

55

Complete this section if you have home acquisition/improvement debt over \$1,000,000 or home equity debt over \$100,000.

Mortgages taken out before 10/14/87 generally qualify as grandfather debt regardless of how the proceeds are used.

Home acquisition debt is a mortgage taken out after 10/13/87, the proceeds of which are used to buy, build or substantially improve your home. Home equity debt is a mortgage taken out after 10/13/87, the proceeds of which are NOT used to buy, build, or substantially improve your home.

	2013 Information	Prior Year Information
Description of loan/property	[2]	
Taxpayer/Spouse/Joint (T, S, J)	[3]	
Loan origination date	[4]	
Fair market value of home	+[5]	
Number of months loan was outstanding in 2013, if not 12	[7]	<u> </u>
Number of months home was a qualifying home (If different from number of months loan was outstar	nding)[9]	<u> </u>
Principal paid in 2013	+[11]	
Interest paid during 2013	+[13]	
Points reported on Form 1098 for 2013	+[15]	
Home mortgage interest you paid, not reported on Form 1098:		
Recipient name	[18]	
Recipient SSN or EIN	[19]	
Recipient address	[20]	
Recipient city, state, zip code[21]	[22][23]	
Grandfather debt as of 12/31/12 (or first day mortgage was outstanding)	+[24]	
Grandfather debt as of 12/31/13 (or last day mortgage was outstanding)	+[26]	
Home acquisition/improvement debt as of 12/31/12 (or first day mortgage was outstanding)	+[28]	
Home acquisition/improvement debt as of 12/31/13 (or last day mortgage was outstanding)	+[30]	
Home equity debt as of 12/31/12 (or first day mortgage was outstanding)	+[32]	
Home equity debt as of 12/31/13 (or last day mortgage was outstanding)	+[34]	
Average balance in 2013 of grandfather debt	+[37]	
Average balance in 2013 of home acquisition/improvement debt	+[39]	
Average balance for 2013 all types of debt	+[41]	

Employee Business Expenses

Preparer use only		
	2013 Information	Prior Year Information
Taxpayer/Spouse (T, S)	[2]	
Occupation in which expenses were incurred	[3]	
State postal code	[5]	
If the employee expenses were from an occupation listed below, enter the applicable co	[6]	_
1 = Qualified performing artist, 2 = Handicapped employee, 3 = Fee-basis official		
Mark if these employee expenses are related to qualified services as a minister or religion	—	
Parking fees and tolls	+[17]	
Local transportation	+[19]	
Travel expenses	+[22]	
Other business expenses:	[05]	
	+[25]	
	+	
	+	
	+	
	+	
	+	
	+	
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	+	
	T	
	<u> </u>	
Nonvehicle depreciation	+ + [28]	
Meals and entertainment		
Meals for individuals subject to DOT hours of service limitation	+[31] + [33]	
Employer Reimburse Enter Reimbursements not entered on Scre		
Enter Neumbulsements not entered on sole	2013 Information	Drian Vaan Information
Reimbursements for other expenses not included on Form W-2	+ [60]	Prior Year Information

[64]

Form ID: 2106

Reimbursements for meals and entertainment not included on Form W-2 Reimbursements for meals for DOT service limitation not included on Form W-2

Control Totals +

Form ID: 2106-2 Employee Business Expenses 57					57			
Preparer use only Taxpayer/Spouse (T, S)[2]								
Occupation in which exp	enses were incu	rred	-			[3]		
State postal code						[4]		
			Vehicle	Question	S			
## 2013 Information If you used your automobile for work purposes, please answer the following questions: Was the vehicle available for off-duty personal use? (Y, N, Blank = Not applicable) Was another vehicle available for personal use? (Y, N) ## 2013 Information Prior Year Information								
Do you have evidend				- not written, 3 = No	0)	[6] [,]		
			Vehicle I	nformation	on			
Vehicle 1 -	Date placed in	service						[11]
VOINGIO I	Description	oci vioc						[12]
Vehicle 2 -	Comments Date placed in Description	service					_	[62] [63]
Vehicle 3 -	Comments Date placed in Description Comments	service					_	[109] [110]
Vehicle 4 -	Date placed in Description Comments	service					_	[156] [157]
			Vehicles Ac	tual Evn	ansas			
			Verlicies A		CHOCO			
	Vehicle 1	Prior Year Information	Vehicle 2	Prior Year Information	Vehicle 3	Prior Year Information	Vehicle 4	Prior Year Information
Total mileage for the year	[20]		[69]		[116]		[163]	
Business mileage	[24]		[71]		[118]		[165]	
Average daily round trip								
commuting mileage	[26]		[73]		[120]		[167]	
Total commuting mileage	[28]		[75]		[122]		[169]	
Gasoline +	[30]		+[77]		+[124]		+[171]	
Oil +	[32]		+[79]		+[126]		+[173]	
Repairs +	[34]		+[81]		+[128]		+[175]	
Maintenance +	[36]		+[83]		+[130]		+[177]	
Tires +	[38]		+[85]		+[132]		+[179]	
Car washes +	[40]		+[87]		+[134]		+[181]	
Insurance +	[42]		+[89]		+[136]		+[183]	
Interest +	[44]		+[91]		+[138]		+[185]	
Registration +	[46]		+[93]		+[140]		+[187]	
Licenses +	[48]		+[95]		+[142]		+[189]	
Property taxes (Plates, tags, +	tc) [50]		+[97]		+[144]		+[191]	
Vehicle rentals +			+[99]		+[146]		+[193]	
Inclusion amt (Preparer only)+			+[101]		+[148]		+[195]	
Other vehicle expenses +			+ [103]		+ [150]		+ [197]	
Value of employer								
provided vehicle +	[58]		+ [105]		+ [152]		+ [199]	
Depreciation +	[60]		+ [107]		+ [154]		+ [201]	
-								

Control Totals +

Form ID: 2106-2

Form ID: 8283

Noncash Contributions Exceeding \$500

_	

Form ID: 8283

For donated securities, include the company name and number of shares in the donated property description, below

· · · · · · · · · · · · · · · · · · ·		
Taxpayer/Spouse/Joint (T, S, J)		1]
Donated property description	[-	[4]
Name of donee organization		[5]
Address of donee organization		[6]
City		[7]
State postal code	[8	[8]
Zip code		[9]
Date contributed	1	[10]
Date acquired by donor		[11]
How was donated property acquired: (P = Purchase, I = Inheritance, G = Gift, E = E	Exchange)[[12]
Donor's cost or basis	+[[13]
Fair market value	+[[14]
Method used to determine fair market value (A = Appraisal, C = Catalog, T = Thri	ift shop value, S = Sales/comparative, O = Other)	[15]
If other:	[[16]
Т.		
Co	ontrol Totals +	_
Noncash Contribu	itions Exceeding \$500	
For donated securities, include the company name and n	number of shares in the donated property description, below	
Taxpayer/Spouse/Joint (T, S, J)	ŗ	11
Denoted preparty description	<u></u>	[4]
Name of donor organization		[5]
Address of donee organization		[6]
City		[7]
State postal code		[8]
Zip code		[9]
Date contributed		10]
Date acquired by donor		[11]
How was donated property acquired: (P = Purchase, I = Inheritance, G = Gift, E = E		
Donor's cost or basis		[13]
Fair market value	+[[14]
Method used to determine fair market value (A = Appraisal, C = Catalog, T = Thri	ift shop value, S = Sales/comparative, O = Other)	[15]
If other:		[16]
1 6	antical Tatala	
	ontrol Totals +	
Noncash Contribu	itions Exceeding \$500	
For donated securities, include the company name and n	number of shares in the donated property description, below	
Taxpayer/Spouse/Joint (T, S, J)	[[1]
Donated property description		[4]
Name of donee organization	[1	[5]
Address of donee organization	Į.	[6]
City		[7]
State postal code	[1	[8]
Zip code		[9]
Date contributed	[[10]
Date acquired by donor		[11]
How was donated property acquired: (P = Purchase, I = Inheritance, G = Gift, E = E	exchange)	12]
Donor's cost or basis	+[[13]
Fair market value	+[[14]
Method used to determine fair market value (A = Appraisal, C = Catalog, T = Thri	ift shop value, S = Sales/comparative, O = Other)	15]
If other:	1	[16]
1	T .	
Co	ontrol Totals +	

Form ID: 1098C

Contributions of Motor Vehicles, Boats & Airplanes

EΛ	
23	

Please provide all Forms 1098-C

Done's sname Jest State postal code Jest of contribution (Box 1) State postal code Date of contribution (Box 1) Model of vehicle (Box 2a) Model of vehicle (Box 2b) Jest State postal (Box 2b) Jest State postal (Box 2c) Jest State postal (Box 2c) Jest State postal (Box 2c) Jest State (Box 2c) Jest State (Box 2c) Jest State (Box 4c) Denee certifies that vehicle was sold in arm's length transaction to unrelated party (Box 4a) Jest State (Box 4b) Jest State (Box 4c) Jest Stat	Taxpayer/Spouse (T, S)		[1]
Date of contribution (Box 1) Year of vehicle (Box 2a) 190 Make of vehicle (Box 2b) 191 Model of vehicle (Box 2c) 192 Vehicle or other identification number (Box 3) Donee certifies that vehicle was sold in arm's length transaction to unrelated party (Box 4a) 193 Donee certifies that vehicle was sold in arm's length transaction to unrelated party (Box 4a) 194 Date of sale (Box 4b) 195 Donee certifies that vehicle is that vehicle was sold in arm's length transaction to unrelated party (Box 4a) 196 Donee certifies that vehicle is to be transferred for money, other property, or services 197 Donee certifies that vehicle is to be transferred to a neety individual for significantly 198 Detailed description of material improvement or significant intervening use (Box 5b) 198 Detailed description of material improvements or significant intervening use and duration of use (Box 5c) 199 Did you provide goods or services in exchange for the vehicle? (Box 6a) 199 Detailed description of material improvements or significant intervening use and duration of use (Box 5c) 199 Did you provide goods and services provided in exchange for the vehicle (Box 6b) 199 Detailed the law, the donor may not claim a deduction of more than \$500 for this vehicle (Box 6c) 293 Description of goods and services (Box 6c) 294 Under the law, the donor may not claim a deduction of more than \$500 for this vehicle if this box is checked (Box 7) 295 Overall physical condition of property Overall physical condition of property Overall physical condition of property Overall physical condition of property was acquired by donor (P = Pushase, 1 = Inhelitance, G = Git, E = Exchange) 190 Donor's cost of basis 190 191 Biggian sale amount received 193 Donee's address, and ZIP code 194 195 196 197 197 198 199 199 199 199 199			
Year of vehicle (Box 2a)	State postal code		[3]
Make of vehicle (Box 2b)	Date of contribution (Box 1)		[9]
Model of vehicle (Box 2c) 1/2 Vehicle or other identification number (Box 3) 1/3 1	Year of vehicle (Box 2a)		[10]
Vehicle or other identification number (Box 3) Donee certifies that vehicle was sold in arm's length transaction to unrelated party (Box 4a)	Make of vehicle (Box 2b)		[11]
Done certifies that vehicle was sold in arm's length transaction to unrelated party (Box 4a)	Model of vehicle (Box 2c)		[12]
Date of sale (Box 4b) [15] Gross proceeds from sale (Box 4c) [15] Gross proceeds from sale (Box 4c) [16] Donee certifies that vehicle will not be transferred for money, other property, or services before completion of material improvement or significant intervening use (Box 5a) [17] Donee certifies that vehicle is to be transferred to a needy individual for significantly below fair market value in furtherance of donee's charitable purpose (Box 5b) [18] Detailed description of material improvements or significant intervening use and duration of use (Box 5c) [19] Did you provide goods or services in exchange for the vehicle? (Box 6a) Yes [20] No [21] Value of goods and services provided in exchange for the vehicle (Box 6b) 223 Description of goods and services consisted solely of intangible religious benefits (Box 6c) [24] Under the law, the donor may not claim a deduction of more than \$500 for this vehicle if this box is checked (Box 7) [25] Other Information for Donated Property Vehicle mileage on date of contribution [31] Date property was acquired by donor (P = Purchase, I = Inhertance, G = Gift, E = Exchange) [33] Donor's cost or basis (1)	Vehicle or other identification number (Box 3)		[13]
Date of sale (Box 4b) [15] Gross proceeds from sale (Box 4c) [15] Gross proceeds from sale (Box 4c) [16] Donee certifies that vehicle will not be transferred for money, other property, or services before completion of material improvement or significant intervening use (Box 5a) [17] Donee certifies that vehicle is to be transferred to a needy individual for significantly below fair market value in furtherance of donee's charitable purpose (Box 5b) [18] Detailed description of material improvements or significant intervening use and duration of use (Box 5c) [19] Did you provide goods or services in exchange for the vehicle? (Box 6a) Yes [20] No [21] Value of goods and services provided in exchange for the vehicle (Box 6b) 223 Description of goods and services consisted solely of intangible religious benefits (Box 6c) [24] Under the law, the donor may not claim a deduction of more than \$500 for this vehicle if this box is checked (Box 7) [25] Other Information for Donated Property Vehicle mileage on date of contribution [31] Date property was acquired by donor (P = Purchase, I = Inhertance, G = Gift, E = Exchange) [33] Donor's cost or basis (1)	Donee certifies that vehicle was sold in arm's length transaction to unrelated party (Box 4a)		[14]
Gross proceeds from sale (Box 4c) Donee certifies that vehicle will not be transferred for money, other property, or services before completion of material improvement or significant intervening use (Box 5a) Detailed description of material improvements or significant intervening use (Box 5b) Detailed description of material improvements or significant intervening use and duration of use (Box 5c) [19] Did you provide goods or services in exchange for the vehicle? (Box 6a) Ves [20] No [21] Value of goods and services provided in exchange for the vehicle (Box 6b) Pescription of goods and services (Box 6c) [24] Under the law, the donor may not claim a deduction of more than \$500 for this vehicle if this box is checked (Box 7) [25] Other Information for Donated Property Overall physical condition of property Vehicle mileage on date of contribution Date property was acquired by donor (P = Purchase, I = Inheritance, G = Gift, E = Exchange) Date property was acquired by donor (P = Purchase, I = Inheritance, G = Gift, E = Exchange) Fair market value on date of contribution Bargain sale amount received [43] [44] [44] [44] [45] [46] [48] [46]			
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Defore completion of material improvement or significant intervening use (Box 5a)			
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Value of goods and services provided in exchange for the vehicle (Box 6b)			
Value of goods and services provided in exchange for the vehicle (Box 6b)			
Value of goods and services provided in exchange for the vehicle (Box 6b)	Did you provide goods or services in exchange for the vehicle? (Box 6a)	Yes [20]	No [21]
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Donor's cost or basis + [34] Fair market value on date of contribution + [35] Method used to determine FMV (A = Appraisal, C = Catalog, T = Thrift shop value, S = Sales/comparative, O = Other) [36] If other: [37] Bargain sale amount received [38] Donee's address, and ZIP code [43] [44] [45]			[32]
Fair market value on date of contribution + [35] Method used to determine FMV (A = Appraisal, C = Catalog, T = Thrift shop value, S = Sales/comparative, O = Other) [36] If other: [37] Bargain sale amount received [38] Donee's address, and ZIP code [43] [44] [45]	How property was acquired by donor (P = Purchase, I = Inheritance, G = Gift, E = Exchange)		[33]
Method used to determine FMV (A = Appraisal, C = Catalog, T = Thrift shop value, S = Sales/comparative, O = Other) If other: Bargain sale amount received Donee's address, and ZIP code [43] [44] [45]		+_	[34]
If other: [37] Bargain sale amount received [38] Donee's address, and ZIP code [42] [43] [44] [45]	Fair market value on date of contribution	+_	[35]
Bargain sale amount received Donee's address, and ZIP code [43] [44] [45]	$ \begin{tabular}{lllllllllllllllllllllllllllllllllll$	er)	[36]
Donee's address, and ZIP code	If other:		[37]
	Bargain sale amount received	_	[38]
	Donee's address, and ZIP code		[42]
Donee's telephone number[46]		[43][44]	[45]
	Donee's telephone number		[46]

Control Totals +	Form ID: 1098C

Form ID: 4684B Casualty and Th	eft - Busines	ss/Income Pr	oducing Pro	perties	60
Preparer use only					
Occurrence description					<u>[</u> 3]
Taxpayer/Spouse/Joint (T, S, J)					[4]
State postal code					[5]
Date of casualty or theft					[7]
Casualty and Th	eft - Busines	ss/Income Pr	oducing Pro	perties	
Description of casualty or theft - Property A					[10]
Description of casualty or theft - Property B	-				[23]
Description of casualty or theft - Property C					[36]
Description of casualty or theft - Property D					[49]
	Α	В		С	D
Property type (1 = Business, 2 = Income producing, 3 = Employe	e prop)[13]		[26]	[39]	[52]
Date acquired	[17]		[30]	[43]	[56]
		+			[57]
	[19]		[32] +		[58]
	[20]		[33] +		[59]
Fair market value after casualty +	[21]	+	[34] +	[47] +	[60]
Business/	Income Use	Replacemen	t Informatio	n	
Description of replacement property A					[61]
Description of replacement property B					[65]
Description of replacement property C Description of replacement property D					[69]
Description of replacement property D					[73]
	Α	В		С	D
Mark if property was acquired from a related party	[62]		[66]	[70]	[74]
Date acquired	[63]		[67]	[71]	[75]
Cost of replacement property +	[64]	+	[68] +	[72] +	[76]

Form ID: 4684P	asualty a	nd Theft - Pers	sonal Use Prop	erties	61
Preparer us	e only				
Occurrence description					[3]
Taxpayer/Spouse/Joint (T, S, J)					[4]
State postal code					[5]
Date of casualty or theft					[8]
(Casualty a	and Theft - Per	rsonal Use Pro	perties	
Description of casualty or theft - Property	A				[17]
Description of casualty or theft - Property					[29]
Description of casualty or theft - Property	С				[41]
Description of casualty or theft - Property	D				[52]
		Α	В	С	D
Date acquired	_	[23]	[35]	[47]	[58]
Cost or other basis of property	+	[24] +	[36] +	[48]	
Insurance or other reimbursement		[25] +			+[60]
Fair market value before casualty	+	[27] +		[50]	
Fair market value after casualty	+	[28] +	[40] +	[51]	+[62]
	Persona	al Use Replace	ement Informat	tion	
Description of replacement property A					[63]
Description of replacement property B					[67]
Description of replacement property C					[71]
Description of replacement property D					[75]
		Α	В	С	D
Mark if property was acquired from a rela	ted party	[64]	[68]	[72]	[76]
Date acquired		[65]	[69]	[73]	[77]
Cost of replacement property	+	[66] +	[70] +	[74]	+[78]

Form ID: 4684PY Prior Year Cas	ualty and	Theft - Bus	iness/Income	Producing Pro	perties	62
Preparer use of	only					
Occurrence description						[3]
Taxpayer/Spouse/Joint (T, S, J)	_					[4]
State postal code					•	 [5]
Date of casualty or theft						 [6]
			_			
Prior Year Casualty	and Theft	: - Business	/Income Prod	lucing Propertie	es (Cont'd)	
Description of casualty or theft - Property A						[8]
Description of casualty or theft - Property B						[17]
Description of casualty or theft - Property C	_					[26]
Description of casualty or theft - Property D	_					[35]
		A	В	С	D	
Property type (1 = Business, 2 = Income producing, 3	= Employee prop)	[9]	[18]	l [[27]	[36]
Date acquired		<u> </u>	[21]			[39]
Cost or other basis of property	+	[13] +		+		[40]
Insurance or other reimbursement					[32] +	[41]
Fair market value before casualty					[33] +	
Fair market value after casualty					34] +	
Current Ye	ar Busine	ss/Income \	Jse Replacen	nent Information	<u> </u>	
Description of replacement property A	_					[44]
Description of replacement property B	_					[50]
Description of replacement property C	_					<u>[</u> 56]
Description of replacement property D	_					<u>[</u> 62]
		Α	В	С	D	
Date acquired		[45]	[51]	l[57]	[63]
Prior year cost of replacement property	+	[46] +	[52]	+[58] +	[64]
Cost of replacement property	+	[47] +	[53]	+[59] +	[65]
Postponed gain	+	[48] +	[54]	+[[60] +	[66]
Adjusted basis of replacement property	+	[49] +	[55]	+[[61] +	[67]

Control Totals +	Form ID: 4684F	PY
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Form ID: CasPY Prior Year Cast	ualty and Thef	t - Personal l	Jse Properties	63
			<u> </u>	
Occurrence description				741
Occurrence description Taxpayer/Spouse/Joint (T, S, J)				[1]
State postal code				[2] [3]
Date of casualty or theft				[3] [4]
Damage to personal residence from corrosive drywall				^[4] [5]
Amount paid to repair damage to home or household a	ppliances			+ [6]
25% loss available from 2012	FF			+ [7]
Prior Year Casualty	and Theft - P	ersonal Use	Properties (Cont'	d)
Description of casualty or theft - Property A				[15]
Description of casualty or theft - Property B				[23]
Description of casualty or theft - Property C				[31]
Description of casualty or theft - Property D				[39]
feet	Α	В	С	D
[32] Date acquired	[47]	[05]	[22]	[44]
· —	[17]	[25]	[33] +[34]	[41] + [42]
			+[35]	
			+ [36]	
			+ [37]	
			+ [38]	
Pers	sonal Use Rep	olacement Inf	ormation	
Description of replacement property A				[47]
Description of replacement property B				[53]
Description of replacement property C				[59]
Description of replacement property D				[65]
	Α	В	С	D
Date acquired	[48]	[54]	[60]	[66]
Prior year cost of replacement property +				+[67]
Cost of replacement property +	[50] +			+[68]
·	[51] +			+[69]
Adjusted basis of replacement property +	[52] +	[58]	+[64]	+[70]

Principal business or profession			
Principal business or profession			
·			
			[3]
Taxpayer/Spouse/Joint (T, S, J)			[4]
State postal code			[5]
	Business Use of Hor	me	
		2013 Information	Dries Vees Information
Total area of home		2013 information [12]	Prior Year Information
Area used exclusively for business		[14]	
Information for day-care facilities only:			
Total hours used for day-care during this year		[16]	
Total hours used this year, if less than 8760		[18]	
Special computation for certain day-care facilities:			
Area used regularly and exclusively for day-care bus	siness	[20]	
Area used partly for day-care business		[22]	
List as direct expenses any exper			
List as indirect expenses any expenses v	which are attributable to the over	erall upkeep and running of yo	our home.
	2013 Infor	mation	
	Direct Expenses	Indirect Expenses	Prior Year Information
Mortgage interest:		+[29]	
Mortgage insurance premiums		+[33]	
Real estate taxes:	· · · · · · · · · · · · · · · · · · ·	+[37]	
Excess mortgage interest and insurance premiums		+[41]	
Insurance		+[45]	
Rent		+[50]	
Repairs & maintenance		+[53]	
Utilities	+[55]	+[56]	
Other expenses, such as: Supplies & Security system			
		+[59]	
	+	+	
	+	+	
	+	+	
	+	+	
	<u>+</u>	+	
	+	+	
	+	+	
	+	+	
Excess casualty losses	+	+ + [61]	
Carryovers:		[01]	
Operating expenses		+[62]	
Casualty losses		+[63]	
Depreciation		+[65]	
Business expenses not from business use of home, such	n as:		
- accoo expended not norm business use of norme, such		+ [66]	
·			
Travel, Supplies, Business telephone expenses		+ 1//"	
·		+[70]	
Travel, Supplies, Business telephone expenses		+[/0]	
Travel, Supplies, Business telephone expenses		+	

Control Totals +

Form ID: 8829

				Auto we	orksheet							65
	If you used	your auto	omobile fo	r business purp	oses, please	comp	olete the foll	owing	informati	on.		
		er use o	nly									
Description of bu	isiness or professio	n										[3]
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Vehicle 1 -	Date placed in serv	ce										[
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If you your o	stamabila far wark		anaurar tha	fallowing guartic		Year	2	Year	3	Year	4	Year
If you used your at	e available for off-d				ns: [60]		[62]		[64]		١.	[66]
Was the vehicl				, ,	[68]		[70]		[72]		_	[74]
	ehicle available for	personal	use: (Y, N)								I .	
Was another v	ehicle available for vidence to support)	[76]	_	_[78]	_	_[80]	_	l –'	[82]
Was another v	vidence to support)	[76] [84]	_	_ ^[78] _ ^[86]	_	— ^[80] — ^[88]	_	_	[82] —
Was another v Do you have e	vidence to support)		_ _		_	_	_	_	_
Was another v Do you have e	vidence to support				[84]	_ 		_	_		_	_
Was another v Do you have e	vidence to support			Vehicle E	[84]	_ _ s		_	_	_	_	_
Was another v Do you have e	vidence to support e written? (Y, N)	your dedu	ior Year	Vehicle E	[84] Expense Prior Year		[86]		[88]	Vehicle		Prior Year
Was another v Do you have e Is this evidence	vidence to support e written? (Y, N) Vehicle 1	your dedu	uction? (Y, N)	Vehicle E	^[84] Expense		Tehicle 3		[88]	Vehicle	4	[90]
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Was another v Do you have e Is this evidence Is this evidence Is this evidence Total miles for year Commuting miles Business miles Parking fees Tolls Gasoline Oil Repairs Maintenance Tires Car washes Insurance Interest Registration Licenses Property taxes Other vehicle expe	Vehicle 1 + + + + + + + + + + + + + + + + + +	Pr Inf [32] [42] [52] [92] [100] [108] [116] [124] [132] [148] [156] [164] [172] [180] [188] [196] [204]	ior Year	Vehicle E Vehicle 2 [34] [44] [54] + [94] + [102] + [110] + [118] + [126] + [150] + [150] + [158] + [166] + [174] + [182] + [190] + [198] + [206]	[84] Expense Prior Year		[86] [86] [86] [86] [86] [86] [86] [86]		[88]	Vehicle	[38] [48] [58] [98] [106] [114] [122] [130] [138] [146] [154] [162] [170] [178] [186] [194] [202] [210]	Prior Year
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Control Totals +

Form ID: Auto

Social Security Tax on Unreported Tips

Complete if you received cash/charge tips of \$20 or less in a month in 2013.

		2013 Inform	ation	Prior	Year Information
	Taxpayer		Spouse		
Total cash and charge tips under \$20 per month and					
not reported to employer	+	[3] +		[4]	
Complete if you received cash/charge tips	of \$20 or more in a mon	th and did n	ot report all of th	nose tips to you	employer.
Employer name			nployer cation number	Total tips received in 201	Total tips 3 reported in 2013
Taxpayer information [1]					•
					<u> </u>
					
_		_			
Spouse information [2]		_			
		_			_
					-
-	and Medicare taxes were refer to Reason Codes lo	not withheld	d from the pay.		
Firm name	Firm's federal identification number	Reason Code **	determination corresponden received	or Mark if ice 1099-MISC	Total wages received with no social securit or Medicare tax withhe
Taxpayer information [6]	identification flumbo.	0000	10001104	10001104	or modical or tax within
		_			
		_			
		_		<u> </u>	
_		_			
Spouse information [7]		_			
Cpouce information [r]					
		_			
		_			
		_			
		_			
	** Dance /	Na da a			
A = I filed Form SS-8 and red	** Reason (nat I am an emnl	ovee of this firm	,
C = I received other correspond		_		oyee or tills lill	•
G = I filed Form SS-8 with th					
H = I received a Form W-2 ar			or 2013. The amo	ount on	
Form 1099-MISC should ha	ve been included as wag	es on Form	W-2.		

Form ID: Clergy	Olamana Min		Dallala	Manlague	67
· ciiii izi cioigy	Clergy, Mir	nister, I	Religious	Workers	0/

		Taxpayer	Spouse	
State postal code		[1]	[2]	
		Taxpayer	Spouse	Prior Year Information
If you received a parsonage provided by the church, pleas	e complete th	ne following information:		
Fair rental value of parsonage provided by church	+	[5] +	[6]	
Actual parsonage utilities expense	+	[11] +	[12]	
If you received a rental or parsonage allowance provided by	by the church,	please complete the following	information:	
Utilities allowance, if separate from parsonage allowar	nce +	[17] +	[18]	
Actual parsonage expense	+	[20] +	[21]	
Fair rental value of home	+	[23] +	[24]	
Actual utilities expense	+	[26] +	[27]	
Mark if you have claimed exemption from self-employment	tax			
by filing Form 4361 with the IRS		[29]	[32]	
If you are a self-employed minister, enter any tax-deductible	e		_	
contributions to a 403(b) retirement plan	+	[31] +	[34]	

Form	ID.	261	15

Tax for Children with Unearned Income

^	•
n	2

Enter parent's information for children under age 19 on 1/1/14 or a full-time student under age 24 with unearned income of more than \$2,000.

Parent's social security number (Enter the name and social security number of the parent listed first on the return)			[4]
Parent's first name			[5]
Parent's last name			[6]
Parent's filing status (1 = Single, 2 = Married/filing jointly, 3 = Married separately, 4 = Head of household, 5 = Qualifying widow(er))			[7]
All Other Children's Information			
Enter information for each child with unearned income of more than \$2,000.			
	Preparer - Enter on S	creen 8615Sib	
Child #1 social security number	[1]	Child #2 social security number	[1]
Child #1 first name	[2]	Child #2 first name	[2]
01.71.74.1.4	[3]	Child #2 last name	[3]
Child #1 date of birth (mm/dd/yyyy)	[4]	Child #2 date of birth (mm/dd/yyyy)	[4]
Child #3 social security number	[1]	Child #4 social security number	[1]
Child #3 first name		Child #4 first name	[2]
Ob 11.1 //O 1	[3]	01.71.1.74.14	[3]
01:11:40	[4]	Child #4 date of birth (mm/dd/yyyy)	[4]
Child #5 social security number	<u>[</u> 1]	Child #6 social security number	[1]
· -	[2]	Child #6 first name	[2]
	[3]	0.00	[3]
0171175 17 (1174)	[3] [4]	Child #6 date of birth (mm/dd/yyyy)	[4]
Child #7 social security number	741	Child #8 social security number	
- C. II. II. II. II.	[1]	<u> </u>	[1]
	[2] [3]		[2]
0.11.17	[3] [4]	Child #8 date of birth (mm/dd/yyyy)	[3] [4]
	[1]	Child #10 social security number	[1]
	[2]		[2
	[3]		[3]
Child #9 date of birth (mm/dd/yyyy)	[4]	Child #10 date of birth (mm/dd/yyyy)	[4]
Child #11 social security number	[1]	Child #12 social security number	[1]
Child #11 first name	[2]	Child #12 first name	[2]
Child #11 last name	[3]	Child #12 last name	[3]
Child #11 date of birth (mm/dd/yyyy)	[4]	Child #12 date of birth (mm/dd/yyyy)	[4]

Children's Interest Income

Please provide copies of all Form 1099-INT or other statements reporting child's interest income.

			* W	/hole nu	mbers will be tr		ints. Enter percenta	_		-	er 100% a	as 100.00 or 75.	5% as 75.50.	
.						Co	mplete a separate	Organizer Form I	D: 8814 for eac	ch child.				
		ocial securi	ty number											[1]
		late of birth												[2]
		name												[4]
	aye	r/Spouse/Jo	oint (T, S, J)							T F		0. 0	T F	[5]
Type Code	(**S	ee codes belov	w)		Payer				Interest [6] Income	Tax Exe Incom		S. Obligations* \$ or %	\$ or %	Prior Year Information
	, -		,		,							·		
_														
								·						
_								· +						
_														
								**Interest Cod						
				Blar	nk = Regular Int	erest 3 = Nor	minee Distribution	4 = Accrued	Interest 5 =	OID Adjusti	ment	6 = ABP Adjustr	ment	
							Childre	en's Dividen	d Income					
						Please provide	e copies of all For	m 1099-DIV or oth	her statements	reporting ch	ild's divid	dend income.		
уре			Ordii	nary [8]	Qualified	Total Capital G	-		28%			.S. Obligations*	Tax Exempt*	Prior Year
ode	** Se	e codes belov) Divid	ends	Dividends	Distributions	Section 1250	Section 1202	Capital Gai	n Divid	ends	\$ or %	\$ or %	Information
	1	Payer				ı	1	T				T		T
		Amounts	+											
	2	Payer				I	1	<u> </u>						
		Amounts	+											
	3	Payer										1		
		Amounts	+											
	4	Payer Amounts	_									Ι		
		Payer	т			ı								
	5	Amounts	+									T		
	_	Payer	•			I					<u> </u>	1		
	6	Amounts	+											
				<u> </u>		•		**Dividend Co.	-1			<u>'</u>		
								**Dividend Co						
							Blank =	: Other	3 = Nomine	e				
													2013	Prior Year
													ormation [10]	Information
Alas	ka F	Permanent	Fund divide	ends:									_	
											_	+		
											_	+		
											1			
								Control Totals	+					Form ID: 8814

Form ID: H Household Employment Tax		70
Complete if you paid cash wages of \$1,000 or more to any household employee		
Taxpayer/Spouse (T, S)		[1]
Employer identification number		[2]
Total cash wages subject to social security taxes	+	[4]
Total cash wages subject to Medicare taxes	+	[5]
Total cash wages subject to Additional Medicare Tax withholding	+	[6]
Federal income tax withheld	+	[7]
State disability plan social security & Medicare withheld	+	[8]
Did you:		
(A) pay any household employee cash wages of \$1800 or more in 2013? (Y, N)		[9]
(B) withhold Federal income tax for any household employee? (Y, N)		_[10]
(C) pay household employees cash wages equal to or greater than \$1,000 in any quarter of 2012 or 2013? (Y, N)		_[11]
Federal Unemployment (FUTA) Tax		
If you answered "Yes" to question (C) above, complete the following information	ation.	
Complete only items marked with an asterisk (*) if total cash wages subject to FUTA tax amou	nt is also taxable	
as defined by your State act and unemployment contributions are paid to only on	e State.	
Total cash wages subject to FUTA tax	+	[12]
State #1 information		
State postal code where you have to pay unemployment contributions *		[13]
State reporting number as shown on state unemployment tax return		[14]
Taxable wages (as defined in state act)	+	[15]
State experience rate period:		
From		[16]
To		[17]
State experience rate (xxx.xx)	_	[18]
Contributions paid to state unemployment fund *	+	[19]
Contributions for 2013 paid after 4/15/14	+	[20]

[21]

[22]

[23]

[25]

[26]

[27]

NOTES/QUESTIONS:

State experience rate (xxx.xx)

State #2 information

From To

State postal code where you have to pay unemployment contributions

State reporting number as shown on state unemployment tax return

Taxable wages (as defined in state act)

Contributions paid to state unemployment fund

Contributions for 2013 paid after 4/15/14

State experience rate period:

Control Totals +	Form ID: H

Form ID: 5405

First-Time Homebuyer Credit Repayment

71

You are required to repay the First-Time Homebuyer credit if you claimed the credit in 2008. If the credit was claimed in 2009, 2010, or 2011, and the home is no longer used as your main residence, you may have to repay the credit.

Principal residence address, if different from nome address on Organizer Form ID: 1040		
Address		[1]
City/State/Zip code	[2][3]	[4]
Date home acquired (After 4/8/08 and before 5/1/10) (For service members after 12/31/08 and before 5/1/11)		[5]
Purchase price of the home		[6]
Date the home was sold or ceased being used as principal residence		[13]
If you sold your home, enter the selling price		[14]
If you sold your home, enter the expense of sale		[15]
Were you and your spouse married on the purchase date? (Y, N)		[18]
If your home was transferred to your ex-spouse due to a divorce settlement,		
enter his or her full name		[19]
If you own the principal residence with another person enter their name and allocation percentage		
Other owner name		[22]
Allocation percentage		

Child and Dependent Care Expenses

Please enter all amounts paid in 2013 for the care of one or more dependents which enables you to work or attend school. Enter the amount of dependent care expenses paid for each qualifying dependent on Organizer Form ID:1040

	Taxpayer	Spouse
2012 employer-provided dependent care benefits used during 2013 grace period	+[3] + _	[4]
Employer-provided dependent care benefits that were forfeited in 2013	+[5] +	[6]
Total qualified expenses incurred in 2013	_	[9]
Were you or your spouse a full time student or disabled? (Yes or No)	[10]	[11]
Did you provide care expenses for any person(s) who is not listed as a dependent? (Y, N)		[12]
Business name of provider		
First and last name of provider		
Street address of provider		
City, State and Zip code		
Social security number OR Employer identification number		
Tax Exempt or Living Abroad Foreign Care Provider (1 = Tax Exempt, 2 = Living Abroad Foreign Care	e Provider)	
Amount paid to care provider in 2013	+	[7]
Foreign province or state of provider		
Foreign country and Foreign postal code of provider		
Business name of provider		
First and last name of provider		
Street address of provider		
City, State and Zip code		
Social security number OR Employer identification number		
Tax Exempt or Living Abroad Foreign Care Provider (1 = Tax Exempt, 2 = Living Abroad Foreign Care	o Provider)	
Amount paid to care provider in 2013	e Piovidei)	_
Foreign province or state of provider	· –	
Foreign country and Foreign postal code of provider		
Business name of provider		
First and last name of provider		
Street address of provider		
City, State and Zip code		
Social security number OR Employer identification number		
Tax Exempt or Living Abroad Foreign Care Provider (1 = Tax Exempt, 2 = Living Abroad Foreign Care	e Provider)	_
Amount paid to care provider in 2013	+_	
Foreign province or state of provider		
Foreign country and Foreign postal code of provider		
Business name of provider		
First and last name of provider		
Street address of provider		
City, State and Zip code		
Social security number OR Employer identification number		
Tax Exempt or Living Abroad Foreign Care Provider (1 = Tax Exempt, 2 = Living Abroad Foreign Care	e Provider)	_
Amount paid to care provider in 2013	+_	
Foreign province or state of provider		
Foreign country and Foreign postal code of provider		
Business name of provider		
First and last name of provider		
Street address of provider		
City, State and Zip code		
Social security number OR Employer identification number		
Tax Exempt or Living Abroad Foreign Care Provider (1 = Tax Exempt, 2 = Living Abroad Foreign Care	e Provider)	_
Amount paid to care provider in 2013	+_	
Foreign province or state of provider		
Foreign country and Foreign postal code of provider	T	
Control Totals +	I	Form ID: 2441

Form ID: R

Credit For The Elderly or Disabled

73

Please complete if you were age 65 or older at the end of 2013, OR you were under age 65 and retired under total and permanent disability, and you received taxable disability income.

	Taxpayer		Spo	ouse
Nontaxable disability/pension income received in 2013	+	[7]	+	[8]
Taxable disability income received in 2013	+	[9]	+	[10

Control Totals +	Form ID: R

Form ID: 5695

Residential Energy Credit

The American Tax Relief Act of 2012 provides credits for energy efficient improvements made to personal residences. There are certain restrictions and limits but some of the home improvements that may qualify include exterior windows and doors, metal roofs, solar electric, or solar heating property. Please provide copies of any 2006, 2007, 2009, 2010, 2011 or 2012 Forms 5695 not prepared by this office.

74

Taxpayer/Spouse/Joint (T, S, J)		[1]
Were the costs incurred made to your main home located in the United States? (Y, N)		[2]
Were the costs incurred related to the construction of your main home located in the United States? (Y, N)		_[3]
Enter the total amount of costs for insulation material or system to reduce heat loss or gain	+	[5]
Enter the total amount of costs for exterior windows	+	[7]
Enter the total amount of costs for exterior doors	+	[9]
Enter the total amount of costs for qualified metal roofs	+	[11
Enter the total amount of costs for energy-efficient building property	+	[6]
Enter the total amount of costs for qualified natural gas, propane, or oil furnace or hot water boilers	+	[8]
Enter the total amount of costs for advanced main circulating fan used in a natural gas, propane, or oil furnace	+	[10
Enter the total amount of costs for qualified solar electric property	+	[12
Enter the total amount of costs for qualified solar water heating property	+	[14
Enter the total amount of costs for qualified small wind energy property	+	[16
Enter the total amount of costs for qualified geothermal heat pump property	+	[13
Enter the total amount of costs for qualified fuel cell property	+	[15
Enter the total amount of kilowatt capacity of the qualified fuel cell property	_	[17

Form ID: 1116 Foreign	Tax Credit 75
	s to a foreign country or U.S. possession in 2013.
Complete if you paid or accrued foreign taxe	s to a foreign country or 0.5. possession in 2013.
Preparer use only	
Description	[3]
Taxpayer/Spouse (τ, s)	_[8]
Category of income* Description of income	_[10]
Description of income	[11]
*Category	y of Income
	D = Certain income re-sourced by treaty
	E = Lump-sum distributions
C = Section 901(j) income	·
Foreign	Income or Loss
Country code	[18]
Country name	[19]
	Regular AMT, if different
Foreign gross income	+[22] +[23]
Definitely related expenses:	
	+ +
	+ +
Foreign source losses	+ [44] + [45]
. o.o.g., econoc 100000	
Foreign Taxe	es Paid or Accrued
Foreign taxes paid or accrued:	
Date paid or accrued	[46]
In foreign currency - taxes withheld on:	
Dividends	+[47]
Rents & royalties	+[48]
Interest	+[49]
Other foreign taxes	+[50]
In US dollars - taxes withheld on:	
Dividends	+[52]
Rents & Royalties	+[53]
Interest	+[54]
Other foreign taxes	+[55]
NOTEC/OUESTIONS.	
NOTES/QUESTIONS:	

Complete this form if you paid qualified adoption expenses in 2013. Indicate if the adoption was final in or before 2013. Qualified adoption expenses include adoption fees, attorney fees, court costs, and travel expenses while away from home. Please provide copies of legal documents approving the adoption.

	Child 1 [1]	Child 2	Child 3
Taxpayer/Spouse/Joint (T, S, J)			
First name			
Last name			
Child's date of birth			
Mark if this child was:			
born before '96 and was disabled			
a child with special needs	<u> </u>	<u></u>	<u> </u>
a foreign child	<u></u>	<u></u>	<u> </u>
Child's identifying number			
Total adoption credit received in prior years for this child			
Total qualified adoption expenses paid in 2012 for this child		<u> </u>	
Employer-provided benefits received in 2012 for this child			
Total qualified adoption expenses paid in 2013 for this child			
Employer-provided benefits received in 2013 for this child			
Adoption final in (1 = '13, 2 = Pre '13)			
	Child 4	Child 5	Child 6
Taxpayer/Spouse/Joint (T, S, J)	oma i	oa o	Omia o
First name			
Last name			
Child's date of birth			
Mark if this child was:			
born before '96 and was disabled			
a child with special needs			
a foreign child			
Child's identifying number			
Total adoption credit received in prior years for this child			
Total qualified adoption expenses paid in 2012 for this child			
Employer-provided benefits received in 2012 for this child	-		
Total qualified adoption expenses paid in 2013 for this child			
Employer-provided benefits received in 2013 for this child			- -
Adoption final in (1 = '13, 2 = Pre '13)			
7. doption mai m (1 = 10, 2 = 110 10)			
If the adoption was incomplete or unsuccessful please provide inf	ormation below:		
			[6]
			[7]
			[8]

*Select the Type of Use codes from the chart below

Type of Use*	Rate	Gallons
Nontaxable use of gasoline -		
Off-highway business use	\$0.183 +	[1]
Use on a farm		[2]
Other nontaxable use[3]		[4]
Exported	0.184 +	[5]
Nontaxable use of aviation gasoline -		
Commercial aviation	0.15 +	[6]
Other nontaxable use[7]		[8]
Exported	0.194 +	[9]
Leaking underground storage tank (LUST) tax	0.001 +	[10]
Nontaxable use of undyed diesel fuel -		
Explanation of evidence of dyes:		
		[11]
Other nontaxable use [12]	0.243 +	[13]
Use on a farm		[14]
Trains		[15]
Intercity / local bus		[16]
Exported		[17]
Other nontaxable use[19]	0.243 +	[20]
Use on a farm	0.243 +	
		[21]
Intercity / local buses		
Intercity / local buses Exported	0.17 +	[22]
	0.17 + 0.244 +	[22]
Exported	0.17 + 0.244 + 0.043 +	[22] [23] [25]
Exported Other nontaxable use taxed at \$.044[24]	0.17 + 0.244 + 0.043 +	[22] [23] [25]
Exported Other nontaxable use taxed at \$.044[24] Other nontaxable use taxed at \$.219[26]	0.17 + 0.244 + 0.043 + 0.218 +	[22] [23] [25] [27]
Exported Other nontaxable use taxed at \$.044[24] Other nontaxable use taxed at \$.219[26] Kerosene used in aviation -	0.17 + 0.244 + 0.043 + 0.218 +	[22] [23] [25] [27]
Exported Other nontaxable use taxed at \$.044 Other nontaxable use taxed at \$.219 Kerosene used in aviation - Kerosene taxed at \$.244 Kerosene taxed at \$.219 Other nontaxable use taxed at \$.244 [30]	0.17 + 0.244 + 0.043 + 0.218 + 0.200 + 0.175 +	[22] [23] [25] [27] [28] [29]
Exported Other nontaxable use taxed at \$.044[24] Other nontaxable use taxed at \$.219[26] Kerosene used in aviation - Kerosene taxed at \$.244 Kerosene taxed at \$.219 Other nontaxable use taxed at \$.244 Other nontaxable use taxed at \$.244 Other nontaxable use taxed at \$.219/.044[32]	0.17 + 0.244 + 0.043 + 0.218 + 0.200 + 0.175 + 0.243 +	[22] [23] [25] [27] [28] [29]
Exported Other nontaxable use taxed at \$.044 Other nontaxable use taxed at \$.219 Kerosene used in aviation - Kerosene taxed at \$.244 Kerosene taxed at \$.219 Other nontaxable use taxed at \$.244 [30]	0.17 + 0.244 + 0.043 + 0.218 + 0.200 + 0.175 + 0.243 +	[22] [23] [25] [27] [28] [29] [31]
Exported Other nontaxable use taxed at \$.044	0.17 + 0.244 + 0.043 + 0.218 + 0.200 + 0.175 + 0.243 + 0.218 + 0.001 +	[22] [23] [25] [27] [28] [29] [31] [33]
Exported Other nontaxable use taxed at \$.044	*Type of Use 0.17 + 0.244 + 0.043 + 0.218 + 0.200 + 0.175 + 0.243 + 0.218 + 0.001 +	[22] [23] [25] [27] [28] [29] [31] [33]
Exported Other nontaxable use taxed at \$.044 [24] Other nontaxable use taxed at \$.219 [26] Kerosene used in aviation - Kerosene taxed at \$.244 Kerosene taxed at \$.219 Other nontaxable use taxed at \$.244 [30] Other nontaxable use taxed at \$.219/.044 [32] Leaking underground storage tank (LUST) tax 1 = Farming purposes 2 = Off highway business use	0.17 + 0.244 + 0.043 + 0.218 + 0.200 + 0.175 + 0.243 + 0.218 + 0.001 + *Type of Use 8 = Diesel & Kerosene fuel other than train or highway 9 = Foreign trade	[22] [23] [25] [27] [28] [29] [31] [33] [34]
Exported Other nontaxable use taxed at \$.044	0.17 + 0.244 + 0.043 + 0.218 + 0.200 + 0.175 + 0.243 + 0.218 + 0.01 + *Type of Use 8 = Diesel & Kerosene fuel other than train or highway 9 = Foreign trade 10 = Certain helicopter and fixed wing air ambulance u	[22] [23] [25] [27] [28] [29] [31] [33] [34]
Exported Other nontaxable use taxed at \$.044	*Type of Use 8 = Diesel & Kerosene fuel other than train or highway 9 = Foreign trade 10 = Certain helicopter and fixed wing air ambulance u 11 = Aviation fuel other than propulsion engines	[22] [23] [25] [27] [28] [29] [31] [33] [34] vehicle ses
Exported Other nontaxable use taxed at \$.044	*Type of Use 8 = Diesel & Kerosene fuel other than train or highway 9 = Foreign trade 10 = Certain helicopter and fixed wing air ambulance u 11 = Aviation fuel other than propulsion engines 13 = Exclusive use by a nonprofit educational organiza	[22] [23] [25] [27] [28] [29] [31] [33] [34] vehicle ses
Exported Other nontaxable use taxed at \$.044	*Type of Use 8 = Diesel & Kerosene fuel other than train or highway 9 = Foreign trade 10 = Certain helicopter and fixed wing air ambulance u 11 = Aviation fuel other than propulsion engines	[22] [23] [25] [25] [27] [28] [29] [31] [33] [34] [34] [29] [29] [31] [33] [34] [34] [35] [36] [36] [36] [36] [36] [36] [36] [36

Control Totals +	Form ID: 4136

*Select the Type of Use codes from the chart below

Type of Use*	R	ate	Gallons					
Sales by registered ultimate vendors of undyed diesel fuel -								
Registration Number			[
Explanation of evidence of dyes:								
			[2					
State / local government	(0.243	+[;					
Intercity / local buses	C).17	+[4					
Sales by registered ultimate vendors of undyed kerosene -								
Registration Number			[8					
Explanation of evidence of dyes:								
			[6					
Harden de Maral de company		. 0.40						
Use by state/local government).243	+[7					
Sales from a blocked pump Intercity / local buses).243).17	+[8					
Sales by registered ultimate vendors of kerosene in aviation). 17	+[9					
Registration Number			['					
Commercial aviation taxed at \$.219 (Other than foreign trade)	().175	+[
Commercial aviation taxed at \$.244 (Other than foreign trade)	(0.200	+[
Nonexempt use in noncommercial aviation	(0.025	+[
Other nontaxable uses taxed at \$.244[14]	().243	+[
Other nontaxable uses taxed at \$.219/.044[16]	().218	+[
Leaking underground storage tank (LUST) tax	C	0.001	+[
Biodiesel or renewable diesel mixture credit -								
Registration Number			[2					
Biodiesel mixtures		1.00	+[2					
Agri-biodiesel mixtures		1.00	+[2					
Renewable diesel mixtures	· ·	1.00	+[2					
	*Type of Use							
1 = Farming purposes	8 = Diesel & Kerosene fuel other than	n train o	r highway vehicle					
2 = Off highway business use	9 = Foreign trade							
3 = Export	10 = Certain helicopter and fixed wing	10 = Certain helicopter and fixed wing air ambulance uses						
4 = Commercial fishing	11 = Aviation fuel other than propuls	ion engiı	nes					
5 = Intercity/local bus	13 = Exclusive use by a nonprofit ed	ucationa	I organization					
6 = In a qualified local bus	14 = Exclusive use by a state, political							
7 = School bus	15 = In an aircraft or vehicle owned b	y an airc	craft museum					

Control Totals +	Form ID: 4136-2

*Select the Type of Use codes from the chart below

Type of Use*	Rate	Gallons
Nontaxable use of alternative fuel -		
Liquified petroleum gas (LPG)	0.183	+[2]
"P Series" fuels	0.183	+[4]
Compressed natural gas (CNG)[5]	0.183	+[6]
Liquified hydrogen[7]	0.183	+[8]
Any liquid fuel derived from coal through		
the Fischer-Tropsch process[9]	0.243	+[10]
Liquid hydrocarbons derived from biomass[11]	0.243	+[12]
Liquified natural gas (LNG)	0.243	+[14]
Liquified gas derived from biomass[15]	0.183	+[16]
Alternative fuel credit and alternative fuel mixture credit -		
Registration Number		[17]
Liquified petroleum gas (LPG)	0.50	+[18]
"P Series" fuels	0.50	+[19]
Compressed natural gas	0.50	+[20]
Liquified hydrogen	0.50	+[21]
Any liquid fuel derived from coal through the Fischer-Tropsch process	0.50	+[22]
Liquid hydrocarbons derived from biomass	0.50	+[23]
Liquified natural gas (LNG)	0.50	+[24]
Liquified gas derived from biomass	0.50	+[25]
Compressed gas derived from biomass	0.50	+[26]
Registered credit card users -		
Registration Number		[27]
Diesel for state / local government	0.243	+[28]
Kerosene for state / local government	0.243	+[29]
Kerosene for aviation use by state / local gov't taxed at \$.219/.044	0.218	+[30]
Nontaxable use of a diesel-water fuel emulsion -		
Other nontaxable use[31]	0.197	+[32]
Exported	0.198	+[33]
Diesel-water fuel emulsion blending -		
Registration Number		[34]
Blender credit	0.046	+[35]
Exported dyed fuels -		
Exported dyed diesel fuel	0.001	+[36]
Exported dyed kerosene	0.001	+[37]

1 = Farming purposes	8 = Diesel & Kerosene fuel other than train or highway vehicle
2 = Off highway business use	9 = Foreign trade
3 = Export	10 = Certain helicopter and fixed wing air ambulance uses
4 = Commercial fishing	11 = Aviation fuel other than propulsion engines
5 = Intercity/local bus	13 = Exclusive use by a nonprofit educational organization
6 = In a qualified local bus	14 = Exclusive use by a state, political subdivision or DC
7 = School bus	15 = In an aircraft or vehicle owned by an aircraft museum

Control Totals +	Form ID: 4136-3

Instructions

Enter carryovers as positive numbers.

Enter utilizations as negative numbers.

Enter utilizations only for those losses shown on organizer form.

Indefinite Carryovers		2012 to 2013 Amounts
Excess section 179 for Sch A	+	[1]
Excess section 179 for Sch A - AMT	+	[2]
Minimum tax credit	+	[3]
Investment interest	+	[4]
Investment interest - AMT	+	[5]
Short-term capital loss	+	[6]
Short-term capital loss - AMT	+	[7]
Long-term capital loss	+	[8]
Long-term capital loss - AMT	+	[9]
Residential energy credit	+	 [10
D.C. first-time homebuyer credit	+	[11
Tax credit bonds	+	[12

Charitable Contribution Carryover Items

Prior C/O Year		50% Contributions		30% Contributions		50/30% Cap Gain Prop		20% Contributions		50% Qualified Conservation Contributions		100% Qualified Conservation Contributions
2006									+	[63]	+	[77]
2007									+	[64]	+	[78]
2008	+_	[13]	+	[18]	+ .	[23]	+ .	[28]	+	[65]	+	[79]
2009	+_	[14]	+	[19]	+ .	[24]	+ .	[29]	+	[66]	+	[80]
2010	+_	[15]	+	[20]	+ .	[25]	+ .	[30]	+	[67]	+	[81]
2011	+_	[16]	+	[21]	+ .	[26]	+ .	[31]	+	[68]	+	[82]
2012	+_	[17]	+	[22]	+ .	[27]	+ .	[32]	+	[69]	+	[83]

AMT Charitable Contribution Carryover Items

Prior C/O Year	50% / Contrib			30% AMT Contributions		50/30% AMT Cap Gain Prop		20% AMT Contributions		50% AMT Qual Conservation Contributions		100% AMT Qual Conservation Contributions
2006									+	[70]	+	[84]
2007									+	[71]	+	[85]
2008	+	[33]	+ .	[38]	+	[43]	+_	[48]	+	[72]	+	[86]
2009	+	[34]	+	[39]	+	[44]	+_	[49]	+	[73]	+	[87]
2010	+	[35]	+ .	[40]	+	[45]	+_	[50]	+	[74]	+	[88]
2011	+	[36]	+ .	[41]	+	[46]	+_	[51]	+	[75]	+	[89]
2012	+	[37]	+ .	[42]	+	[47]	+_	[52]	+	[76]	+	[90]

Section 1231 Nonrecaptured Losses

	N	Section 1231 lonrecaptured Losses	N	AMT Section 1231 lonrecaptured Losses
2008	+	[53]	+	[58]
2009	+	[54]	+	[59]
2010	+	[55]	+	[60]
2011	+	[56]	+	[61]
2012	+	[57]	+	[62]

Control Totals +	Form ID: CO
CONTOL TOTALS +	i FOIIII ID. GO

Form ID: CC	OGBCr	Business (Credit Ca	rryover Informa	tion - Pre	parer Use On	ly	81
	Description							
Α _								[2]
В _								[2]
С _								[2]
D _								[2]
Prior		A		В		С		D
C/O Year		[1]		[1]		[1]		[1]
1998	+	, [3]	+	[3]	+	[3]	+ -	[3]
1999	+		+		+	[4]	+	 [4]
2000	+	[5]	+	[5]	+	[5]	+	[5]
2001	+	[6]	+	[6]	+	[6]	+	[6]
2002	+	[7]	+	[7]	+	[7]	+	[7]
2003	+	[8]	+	[8]	+	[8]	+	[8]
2004	+	[9]	+	[9]	+	[9]	+	[9]
2005	+	[10]	+	[10]	+	[10]	+	[10
2006	+	[11]	+	[11]	+	[11]	+	[11
2007	+	[13]	+	[13]	+	[13]	+	[13
2008	+	[15]	+	[15]	+	[15]	+	[15
2009	+	[17]	+	[17]	+	[17]	+	[17
2010	+	[19]	+	[19]	+	[19]	+	[19
2011	+	[21]	+	[21]	+	[21]	+	[21
2012	+	[22]	+	[22]	+	[22]	+	[22

Form ID: FarmLoss	Excess Farm Loss Limitation Information	on - Preparer Use Only	82
Schedule F - Farm inc	ome/-loss:		
2012		+	[1]
2011		+	
2010		+	
2009		+	
2008		+	
Schedule C - Farm co	mmodity processing income/-loss:		
2012		+	[6]
2011		+	[7]
2010		+	
2009		+	[9]
2008		+	
Schedule E - Partners	nip/S corporation farm income/-loss:		
2012		+	[11]
2011		+	[12]
2010		+	[13]
2009		+	[14]
2008		+	
Form 4835 - Farm ren	t income/-loss:		
2012		+	[16]
2011		+	[17]
2010		+	
2009		+	
2008		+	[20]
Gain/-loss on sale of fa	arming property:		
2012		+	
2011		+	[22]
2010		+	
2009		+	[24]
2008		+	[25]
AMT Gain/-loss on sale	e of farming property:		
2012		+	[26]
2011		+	[27]
2010		+	[28]
2009		+	[29]
2008		+	[30]
•	erences to farm income/-loss:		
2012		+	
2011		+	
2010		+	
2009		+	[34]
2008		+	[35]

Control Totals +	Form ID: FarmLoss
I CONTOLLORIS +	I FOITH ID. FAITHLOSS

Form ID: NOLCO	Net Operating Loss Carryover Information - Preparer Use Only	83
	not operating boos carryover information. Troparer coo city	03

Prior C/O Year	No Operati	et ng Loss	AMT N	OL
1998	+	[1] +		[16]
1999	+	[2] +		[17]
2000	+	[3] +	·	[18]
2001	+	[4] +	·	[19]
2002	+	[5] +		[20]
2003	+	[6] +	·	[21]
2004	+	[7] +		[22]
2005	+	[8] +		[23]
2006	+	[9] +	·	[24]
2007	+	[10] +	·	[25]
2008	+	[11] +	·	[26]
2009	+	[12] +	·	[27]
2010	+	[13] +	·	[28]
2011	+	[14] +	·	[29]
2012	+	[15] +		[40]

Form ID: 8938-2

Statement of Specified Foreign Financial Assets

84

Form ID: 8938-2

This form is used to report financial accounts and assets in foreign countries, as required by the Internal Revenue Service.

Foreign Deposit and	d Custodial Accounts			
-	2013 Informa	ion	Prior Year I	nformation
Type of Account: (D= Deposit, C = Custodial)		_[2]		
Account number or other designation		[4]		
Account opened during the tax year		[5]		_
Account closed during the tax year		[7]		
Account jointly owned with spouse		[8]		
Maximum value of account		[10]		
Name of financial institution				[15
Address of financial institution				 [16
City, state, zip code		[17]	[18]	 [19
Foreign country code/name				
Foreign province/county	_ _			[22
Foreign postal code				[23
Other Fore	eign Assets			
	2013 Informa	 tion	Prior Year I	Information
Asset description		[24]		
Asset identifying number or other designation		[25]		
Date asset acquired		[26]		
Date asset disposed		[28]		_
Asset jointly owned with spouse		[29]		
Maximum value of asset		[31]		
Foreign entity name Foreign entity address City, state, zip code Foreign country code/name Foreign province/county	[42]	[39]	[40]	
Foreign postal code				[45
Asset issuer or counterparty information - (Enter either foreign entity information	on or issuer/counterparty information, but not both)			
Type: (I = Issuer, C = Counterparty)				[46
Entity: (I = Individual, P = Partnership, C = Corporation, T = Trust, E = Estate)				_
If an individual, select either U.S. or foreign (1 = U.S. Person, 2 = Foreign	n Person)			_
Individual or organization name				
Address of issuer or counterparty				
City, state, zip code				
Foreign country code/name				
Foreign province/county				
Foreign postal code				
Asset issuer or counterparty information - (Enter either foreign entity information	on or issuer/counterparty information, but not both)			
Type: (I = Issuer, C = Counterparty)				_
Entity: (I = Individual, P = Partnership, C = Corporation, T = Trust, E = Estate)				_
If an individual, select either U.S. or foreign (1 = U.S. Person, 2 = Foreign	n Person)			_
Individual or organization name				
Address of issuer or counterparty				
City, state, zip code		_		
Foreign country code/name				
Foreign province/county				
Foreign postal code				

Treasury Department Report of Foreign Bank Accounts

85

FinCEN Form 114, Report of Foreign Bank Accounts, must be filed through the BSA E-Filing System on or before June 30, 2014

Taxpayer/Spouse/Joint (T, S, J)		[1]
I/we have a financial interest in 25 or more foreign a		
(Specific account information is not required for foreign a	accounts in which you have a financial interest	·
Number of foreign accounts filer has a financial interest in, if 25 or more		[2]
Complete the following section to report foreign account but no financial interest, and to report all foreign	counts over which you have signature or other a ginaccounts in which you have a financial inter	•
	2013 Information	Prior Year Information
Information is reported for a financial account which is: 2 = Owned separately, 3 = Owned jointly, 4 = Authority over but no financial interest	_[3]	
Type of Account:		
Bank	_[4]	
Securities	[5]	
Other	[6]	
Maximum value of account	[7]	
Account number or other designation	[9]	
Financial institution	[10]	
Address of financial institution	[11]	
City, state, zip code	[12][13][14]	
Foreign country	[15]	
For addresses in Mexico, enter state	[17]	
Foreign postal code	[20]	
Parts III and IV -		
Joint owner is spouse		[21]
Taxpayer identification number of account holder/joint owner		[22]
Foreign identification number of account holder/joint owner (If no Taxpayer	er identification number)	[23]
Last name or organization name of account holder/joint owner		[24]
First name and middle initial of account holder/joint owner		[25] [26]
Address and apartment		[27] [28]
City, state, zip code	[29]	[30]
Foreign country		[32]
For addresses in Mexico, enter state		[34]
Foreign postal code		[35]
Part III -		
Number of joint owners (Not including taxpayer)		[37]
Part IV -		
Filer's title with this owner		[38]

This page has been prepared to present the details of prior year income tax returns and is provided for informational purposes only.

	2009 Amounts	2010 Amounts	2011 Amounts	2012 Amounts
Filing Status (1 = Single, 2 = MFJ, 3 = MFS, 4 = HOH, 5 = QW)				
Salaries and wages				
Interest income				
Tax-exempt interest				
Dividend income				
Qualified dividends				
Business income/loss				
Capital gains and losses				
Other gains and losses				
IRA distributions, pensions, annuities				
Rent, royalty, farm rental income				
Partnership/S corp income				
Estate or trust income				
Farm income/loss	_			
Other income/loss				
Total income -	_	·		
Total adjustments to income				
Adjusted gross income -				
Medical expenses				
State and local taxes				
Interest expenses				
Charitable contributions				
Other itemized deductions				
Allowable itemized deductions				
Standard deduction				
Standard or itemized deduction taken -				
Exemptions				
Taxable income -				
Tax on taxable income				
Alternative minimum tax				
Total credits				
Net tax liability -				
Self-employment taxes				
Other taxes				
Total tax -	_	·		
Income tax withheld				
Estimated tax payments				
Other payments	_			
Total payments -				
Tax due/-refund -				
Penalties and interest				
Net tax due/-refund -				
Refund applied to estimated tax payments				
Refund received				
Marginal tax rate -	%	%	%	%
Effective tax rate -	%	%	%	%

	Form ID: History
	FUITH ID. HISTORY

Lite-1 GENERAL INFORMATION

General: 1040		Personal I	nformation		
Filing (Marital) status code (1 Mark if you were married but			4 = Head of household, 5 = Qualifying flark if your nonresident alien Taxpayer		e an ITIN Spouse
Social security number			талрау с т		
First name					
Last name Occupation					
Designate \$3.00 to the presi	dential election campaign fu	und? (1 = Yes. 2 = No. 3	i=Blank)		_
Mark if legally blind					
Mark if dependent of another	r taxpayer		<u> </u>		- -
Taxpayer between 19 and 23	3, full-time student, with inco	ome less than 1/2 s	upport? (Y, N)		
Date of birth					
Date of death Work/daytime telephone nun	nher/ext number				
Do you authorize us to discus	-	Y, N)			
		.,,	_		
General: 1040, Contact		Present Mail	ling Address		
Address					
Apartment number		_			
City/State postal code/Zip co	de	_			
Foreign country name					
Home/evening telephone nu	mber				
Taxpayer email address Spouse email address					
- Cpouco oman address					
General: 1040		Dependent	Information		
					Care Months expenses
First Name	Last Name	Date of Birth	Social Security No.	Relationship	in paid for home dependent
			<u> </u>		
-			-		
Credits: 2441	Child ar	nd Depender	nt Care Expenses		
Provider information:					
Business name					
First and Last name				_	
Street address					
City, state, and zip code Social security number OR	R Employer identification nur	mber			
· ·	oad Foreign Care Provider (1				
Amount paid to care provide	•				_
Employer-provided depender	nt care benefits that were for	orfeited		Taxpayer	Spouse
General: Info	Direct Deposit/E	lectronic Fu	nds Withdrawal I	nformation	
v	<u> </u>				d 6 H
If you would like to have a re	•		ed directly into/from your bar	nk account, please ent	er the following information:
Your account number	ng transit number		account (1 = Savings, 2 = Checking	1 3 – IRA*\	
If you would like to use a refu	und to purchase U.S. Series				 to \$5,000.**
*Refunds may only be direct deposited	·		,	•	
**To purchase U.S. Series I Savings b	bonds in someone else's name. plea	se contact our office.			

Income: W2

Salary and Wages

Below is a	Please provide all copies of Form W-2 that you receive list of the Form(s) W-2 as reported in last year's tax return. If a particular W-2 no le		mark the not applicable box.
T/S	Description	Prior Year Information	3
_			
Income: 1099R	Pension, IRA, and Annuity Distribu	ıtions	
Below is a lis	Please provide all copies of Form 1099-R that you rece st of the Form(s) 1099-R as reported in last year's tax return. If a particular 1099-R n	o longer appl	
T/S	Description	Prior Year Information	
<u> </u>			
			_ _
<u> </u>			
			<u> </u>
Income: K1, K1	Schedules K-1		
Relow is a	Please provide all copies of Schedule K-1 that you receist of the Schedule(s) K-1 as reported in last year's tax return. If a particular K-1 no	eive.	s mark the not applicable boy
Delow is a i	ist of the Schedule(s) K-1 as reported in last years tax return. If a particular K-1 no	ionger applies	Mark if no longer
T/S/J	Description	Form	applicable
			_
_			<u> </u>
<u> </u>			<u> </u>
			<u> </u>
Income: W2G	Gambling Income		
	Gambing income		
Below is a	Please provide all copies of Form W-2G that you receist of the Form(s) W-2G as reported in last year's tax return. If a particular W-2G no		s, mark the not applicable box.
T/S	Description	Prior Year Information	
_			
Educate: 10990	Qualified Education Plan Distributi	ons	
Below is a lis	Please provide all copies of Form 1099-Q that you recent of the Form(s) 1099-Q as reported in last year's tax return. If a particular 1099-Q n	o longer appl	
T/S	Description	Prior Year Information	•
			<u> </u>
			_
<u> </u>		Lite-2	W-2/1099-R/K-1/W-2G/1099-Q

Lite-2

INCOME SUMMARY

Income Summary

Below is a list of the forms as reported in last year's tax return. Please provide copies of all of the forms you received. To indicate which forms are attached, enter a "1" for attached in the field provided next to the Description. To indicate which forms are not applicable, enter a "2" for not applicable (N/A) in the field provided next to the Description. Otherwise, leave this field blank.

Form	T/S/J	Description	1 = Attached 2 = N/A
FOIII	1/3/3		2 = N/A
_			
-	-		
	- —		
	- —		

Income: B	¹ Inte	erest Income					
	Please provide	all copies of Form 1099-II	NT.	Interest	Prior Year		
T/S/J	Payer Name			Income	Information		
_							
Income: B	Seller Fin	anced Mortgage I	nterest				
T, S, C	J Payer's name 's address, city, state, zip code	Pa	yer's social security	number	_		
	nt received in 2013	Am	ount received in 20	112			
Income: B	² Di	vidend Income					
	Please provide copies of all Form 1099	9-DIV or other statements	reporting dividend	l income.			
T/S/J	Payer Name		Ordinary Dividends	Qualified Dividends	Prior Year Information		
_							
Income: D	Onland Ottoba Oncode	an and Other last					
	Sales of Stocks, Securities, and Other Investment Property						
		es of all Forms 1099-B and	Gr	oss Sales Price	Cost or		
T/S/J	Description of Property	Date Acquired	Date Sold (Le	ess expenses of sale)	Other Basis		
		-					
		- <u> </u>					
		-					
		- <u> </u>					
Income: In	O	ther Income					
	Please provide copie	es of all supporting docur 2013 Infor		Prior	Year Information		
State	and local income tax refunds	T			Van lafamatian		
Alimo	ny received	Taxpayer	Spouse	Prior	Year Information		
	ployment compensation						
	ployment compensation repaid						
	are premiums to be reported on Schedule A						
Railro	ad retirement benefits		=				
T/S/			2013 Informa	tion Prior	Year Information		
	Other Income:	<u></u>					
		<u> </u>					
		Lite-3 INTE	REST/DIVIDENDS/	CAPITAL GAINS	OTHER INCOME		

1040 Adj: IRA

Adjustments to Income - IRA Contributions

Please provide year end statements for each account and any Form 8606 not prepared by this office.

			Taxpayer	Spouse
raditional IRA Contribution	ons for 2013 -			
you want to contribute the	maximum allowable traditional IRA cont	ribution amount,		
enter the applicable cod	e: (1 = Deductible only, 2 = Both deductible and nor	ndeductible)		
	A contributions made for use in 2013	_		
Roth IRA Contributions fo				
•	te the maximum Roth IRA contribution			
nter the total Roth IRA con	tributions made for use in 2013	_		
Educate: Educate2	Higher Education	Deductions and/or	r Credits	
Complete this sec	tion if you paid interest on a qualified your spouse, or a person who w			expenses for you,
T/S	Qualified student loan interest		2013 Information	Prior Year Information
	·		ndance at an eligible ed	
		_		
	r the American opportunity credit who is not completed the first 4 years of p		as no felony drug conv	
	Complete this section if you moved to	o a new home because of a	new principal work plac	e.
Description of move				
axpayer/Spouse/Joint (T, S,	,			
lumber of miles from old ho	service in the armed forces			_
lumber of miles from old ho	'			
	ed States or its possessions			
ransportation and storage				_
ravel and lodging (not inclu	•			
otal amount reimbursed for				
1040 Adj: OtherAdj	-	justments to Incom	Δ	
Alimany Paid	Other Au			
Alimony Paid: T/S	Recipient name	Recipient SSN	2013 Information	Prior Year Information
	•			
Street address				_
City, State and Zip code	-			_
		Taxpayer	Spouse	Prior Year Information
Educator expenses:		• •	•	
				_
Other adjustments:				
	·			
			-	

ITEMIZED DEDUCTIONS

Itemized:	Medical and Dental Expense	es	TIEWIZED DEDUCTIONS
T/S/J		2013 Information	Prior Year Information
_	Medical and dental expenses		
_	Medical insurance premiums you paid***		<u> </u>
_	Long-term care premiums you paid***		
_	Prescription medicines and drugs		
- *	Miles driven for medical items **Do not include pre-tax amounts paid by an employer-sponsored plan or amounts paid for your self-employed busine		· ———
Itemized:			
T/S/J	Tax Expenses	2013 Information	Prior Year Information
1/3/3	State/local income taxes paid	2013 Illiorniation	Prior real information
_	2012 state and local income taxes paid in 2013		
_	Sales tax paid on actual expenses		
_	Real estate taxes paid	•	
_	Personal property taxes		
_	Other taxes		
Itemized:	A2 Interest Expenses		
T/S/J		2013 Information	Prior Year Information
_	Home mortgage interest: From Form 1098		
Other, :	such as: Home mortgage interest paid to individuals Payee's Name SSN or EIN	2013 Information	Prior Year Information
_	Address	City	State Zip Code
T/S/J		2013 Information	Prior Year Information
_	Investment interest expense, other than on Sch K-1s:		
	Refinance #1	1	Refinance #2
Refinar	ncing Information:		
T/S/J	_		_
	pient/Lender name		
	points paid at time of refinance		
	of refinance		
	of new loan (in months)		
Repo	orted on Form 1098 in 2013		
Itemized:	A3 Charitable Contributions		
T/S/J		2013 Information	Prior Year Information
	Contributions made by cash or check		
_	Volunteer miles driven		
_	Noncash items, such as: Goodwill, Salvation Army		. <u> </u>
Itemized:	A3 Miscellaneous Deductions	8	
T/S/J		2013 Information	Prior Year Information
	Unreimbursed expenses		
_	Union dues		
_	Tax preparation fees		
_	Other expenses, subject to 2% AGI limitation:		
_	<u> </u>		
_			
_	Safe deposit box rental		
_	Investment expenses, other than on Schedule(s) K-1 or Form(s) 1099-DIV/1099-INT:		<u> </u>
	Other expenses, not subject to the 2% AGI limitation:		
_	0 15 1 45 1 4 4 1 1 1 1 1		
	Gambling losses: (Enter only if you have gambling income)		<u> </u>
		Lite-5	ITEMIZED DEDUCTIONS

Form II	D: OrgDp
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Depreciation - Asset List

07	

Preparer use only

Activity name

HOW TO REPORT DISPOSALS: Use the blank line directly below the asset information to indicate any asset disposals. Enter the date of the disposal and/or sale proceeds, if applicable. Enter additional information regarding the asset disposal in the comments section, such as if the asset was sold on installment, traded for other asset(s), disposed of due to casualty, or sold to a related party. See the EXAMPLE asset below.

Asset No.	Description of Property	Date in Service	Cost or Basis
	Comments	Date Sold/Disposed	Sales Price
EXAMPLE -	Machinery and equipment (EXAMPLE ASSET) Collected in 5 equal payments over 2 yrs	11/21/08	42,500
L/OAIVII LL	Collected in 5 equal payments over 2 yrs	03/09/13	20,000
			_
		 	
		+	
			_
		 	_
		 	
		+	
			_
			Form ID: OrgDp

_		_	_
Form	ID:	Org	Up2

Depreciation - Asset Acquisitions

_	·

	Preparer	use	only

Activity name

Use the comments section to provide additional information about the asset. Enter information such as vehicle mileage (total, commuting and business), the total and business square footage of home, home expenses (total and business portion). See the EXAMPLE asset below.

				Description of	Asset Acquired			Date Acq	uired	Cost or Basis
EVA	MPLE	_	2013	Model T	- (EXAMP	LE ASSET)		03/09		25,750
	(IVIPLE	Comments:		22,500	job-relat	ed miles	, 25,000	total	miles	
1		Comments:								
2		Comments:								
		Comments.								
3							<u> </u>			
		Comments:								
4										
		Comments:								
5										
		Comments:								
6										
•		Comments:								
7										
7		Comments:								
8		Comments:								
_										
9		Comments:								
		Comments.							T	
10		Comments:								
		Comments.								
11		0								
		Comments:								
12										
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14										
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15										
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16										
		Comments:								
17										
		Comments:								
18										
		Comments:							,	
19										
1.3		Comments:								
20										
		Comments:								
21										
<u> </u>		Comments:								
22										
22		Comments:								
22										
23		Comments:								
0.4										
24		Comments:							· · · · · · · · · · · · · · · · · · ·	
25		Comments:								
										Form ID: OrgDp2