

F
R
O
M

2013 TAX ORGANIZER



T
O

Famiglio & Associates

A Professional Accountancy & Financial Group

1634 Main Street
Sarasota, FL 34236

I (We) have submitted this information for the sole purpose of preparing my (our) tax return(s). Each item can be substantiated by receipts, canceled checks or other documents. This information is true, correct and complete to the best of my (our) knowledge.

Taxpayer Signature 	Date
Spouse Signature 	Date

Please Note:

This generic Organizer is intended for **New Clients Only**. If you are an existing client, and have misplaced your packet, please contact us and we will provide you with your specialized copy.

Famiglio & Associates

A Professional Accountancy & Financial Group

George V. Famiglio, Jr. CPA, PFS, CFP, CFS
Masters Degree in Taxation

Admitted to Practice, U.S. Tax Court

telephone: 941.957.0775
fax: 941.957.0778

<http://www.famiglio.com>
frontdesk@famiglio.com

main office: 1634 Main Street
Sarasota, FL
34236

Dear Client,

We appreciate the opportunity to work with, and advise you regarding your taxation. The Internal Revenue Service imposes penalties upon taxpayers, and upon us as preparers, for failure to observe due care in reporting income tax returns. In order to ensure an understanding of our mutual responsibilities, we ask all clients for whom we prepare tax returns to **confirm the following arrangements by signing the back of this engagement letter**. We will prepare your Federal, and requested State income tax returns, from information that you will furnish to us with your client organizer. We will make no audit or other verification of the data you submit, although we may need to ask you for clarification of some of the information. We will provide you with questionnaires and/or worksheets to guide you in gathering the necessary information. Your use of such forms will assist us in keeping our fee to a minimum.

It is your responsibility to provide us with all the information required for the preparation of complete and accurate returns. You represent to us that your records, as required by law, support your expenses for meals, entertainment, travel, gifts, and vehicle use. You should retain all the documents, canceled checks, and other data that form the basis of income and deductions. These may be necessary to prove the accuracy and completeness of the returns to a taxing authority. You have the final responsibility for the income tax returns, and therefore, you should review them carefully before you sign them.

Our work in connection with the preparation of your income tax returns does not include any procedures designed to discover defalcations or other irregularities, should any exist.

We will use our judgment in resolving questions where the tax law is unclear, or where there may be conflicts between the taxing authorities' interpretations of the law and other supportable positions. Unless otherwise instructed by you, we will resolve such questions in your favor whenever possible.

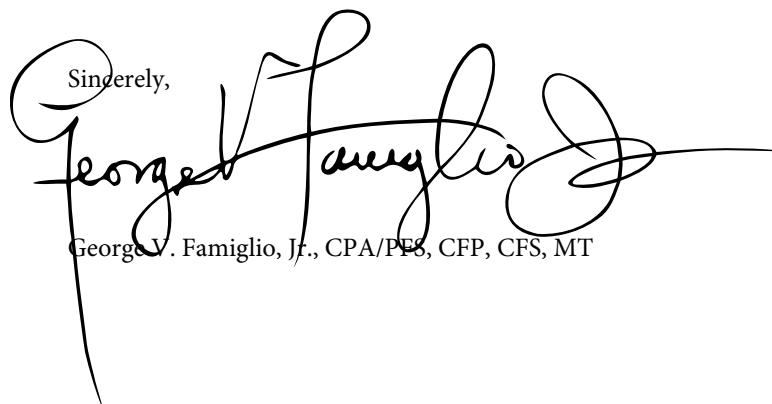
The law provides various penalties that may be imposed when taxpayers understate their tax liability. If you would like information on the amount or circumstances of these penalties, please contact us.

Your returns may be selected for review by the taxing authorities. Any proposed adjustments by the examining agent are subject to certain rights of appeal. In the event of such government tax examination, we will be available upon request to represent you and will render additional invoices for the time and expenses incurred.

Our fee for these services will be based upon the amount of time required at our standard billing rate, plus out-of-pocket expenses. **All invoices are due at time of tax return completion.** Failure to pay would allow us to terminate this agreement.

We want to express our appreciation for this opportunity to work with you.

Sincerely,

A handwritten signature in black ink, appearing to read "George V. Famiglio, Jr.", written in a cursive style. The signature is positioned above the typed name and extends across the width of the text area.

George V. Famiglio, Jr., CPA/PFS, CFP, CFS, MT

We Will Prepare:

Federal Income Tax Returns
The IRS has implemented a mandate requiring our firm to electronically file the returns we prepare. We may file extensions as needed for all types of returns.

State Income Tax Returns
If applicable.

Local Income Tax Returns
Please Note: You must enclose any forms needed.

Personal Property/Intangible

City/Township

Circle One:

Yes / No? Will you be contributing to an IRA, SEP, Keough, Pension, or Profit Sharing Plan before April 15th 2014? *If you will be contributing to an IRA, please send a schedule of all IRA investments to date showing the name of investment and value as of December 31st. Husbands and Wives have separate schedules.*

Yes / No? Do you have **any** sort of foreign financial account or asset? *Please Note: The U.S. Treasury has increased enforcement & compliance on foreign bank and investment accounts. Failure to file and disclose timely can subject you to penalties in excess of \$10,000.00 — All types of accounts, investments, and other assets, must be disclosed.*

Do You Need Assistance in Any of the Following Areas?

- | | | |
|------------------------------|-----------------------------|--|
| YES <input type="checkbox"/> | NO <input type="checkbox"/> | Obamacare Credit Planning or Affordable Care Act Compliance |
| YES <input type="checkbox"/> | NO <input type="checkbox"/> | Analyzing your estate. |
| YES <input type="checkbox"/> | NO <input type="checkbox"/> | Reducing your tax liability. |
| YES <input type="checkbox"/> | NO <input type="checkbox"/> | Stimulus Package Incentives. |
| YES <input type="checkbox"/> | NO <input type="checkbox"/> | Ponzi Losses or Foreclosure Issues. |
| YES <input type="checkbox"/> | NO <input type="checkbox"/> | Planning, Restructuring, or Selling a Business. |
| YES <input type="checkbox"/> | NO <input type="checkbox"/> | Obtaining financial independence by age _____. |
| YES <input type="checkbox"/> | NO <input type="checkbox"/> | Planning an educational fund for your children. |
| YES <input type="checkbox"/> | NO <input type="checkbox"/> | Reducing taxes on your Social Security benefits. |
| YES <input type="checkbox"/> | NO <input type="checkbox"/> | Increasing the return on your investments. |
| YES <input type="checkbox"/> | NO <input type="checkbox"/> | Establishing/Funding an IRA, SEP, Keough, or Roth IRA. |
| YES <input type="checkbox"/> | NO <input type="checkbox"/> | Establishing a systematic savings program for _____. |
- e.g., home, vacation, retirement*

Taxpayer:  _____ *Please Sign & Print* **Date:** _____

Spouse:  _____ *Please Sign & Print* **Date:** _____

**THIS FORM MUST BE SIGNED & RETURNED WITH
 CLIENT ORGANIZER**

<u>Form</u>	<u>Form</u>
Alimony Paid or Received 13	Gambling Winnings 21
Annuity Payments Received 9A, 13	Gifts 34, 35
Application of Refund 20	Health Savings Accounts 13A
Business Income and Expenses 6, 6A	Household Employment Taxes 19
Business Use of Home:	Installment Sale Receipts 7
Business 6D	Interest Income 5A
Employee Business Expenses 17A	Interest Paid 14A
Farm 12D	Investment Interest Expense 14A
Itemized Deductions 16A	IRA Contributions 9
Passthrough 11B	IRA Distributions 9, 13
Rental 10D	Keogh Plan Contributions 9A
Calendar 33	Medical and Dental Expenses 14
Casualty or Theft Losses 16	Ministerial Income 13B
Child and Dependent Care Expenses 18	Miscellaneous Income and Adjustments 13
Consolidated Brokerage Statements:	Miscellaneous Itemized Deductions 16
Interest Income & Foreign Information 5E	Mortgage Interest Paid 14A
Dividend Income & Foreign Information 5F	Moving Expenses 8
Sales of Stocks, Securities, Capital Assets & Misc. Income 5G	Partnership Income 11
Contributions 15	Pension Income 9A, 13
Dependent Information 3A	Personal Information 3
Depreciable Property and Equipment:	Railroad Retirement Benefits 13
Business 6A	Real Estate Mortgage Investment Conduit Income (REMIC) ... 11
Employee Business Expenses 17	Rental and Royalty Income and Expenses 10
Farm 12A	Roth IRA Contributions/Conversions 9
Rental and Royalty 10A	S Corporation Income 11
Direct Deposit Information 4A	Sale of Stock, Securities and Other Capital Assets 7
Dividend Income 5B	Sale of Your Home 8
Education Expenses 18	Savings Bond Purchases 4B
Educator (Teacher) Expenses 13A	SEP/SIMPLE Plan Contributions 9A
Electronic Filing 4	Social Security Benefits 13
Employee Business Expenses 17	State and Local Tax Refunds 13
Estate Income 11	Student Loan Interest 13
Farm Income and Expenses 12, 12A	Taxes Paid 14
Federal, State and City Estimated Taxes 20, 20A	Trust Income 11
Foreign Assets 5C, 5D	Unemployment Compensation 13
Foreign Employment Information 30, 30A, 30B	Vehicle/Other Listed Property Information:
Foreign Housing Expenses 30C	Business 6B, 6C
Foreign Taxes 32	Employee Business Expenses 17
Foreign Travel and Workdays 30D	Farm 12B, 12C
Foreign Wages and Other Income 31, 31A, 31B	Rental and Royalty 10B, 10C
Tax Organizer Legend:	Partnership/S Corporation 11A
Throughout the tax organizer, you will find columns with the heading "TSJ".	Wages and Salaries 3A
TSJ Codes - Enter "T" for taxpayer, "S" for spouse or "J" for joint.	



For any question answered Yes, please attach supporting detail or documents.

Personal Information:

	Yes	No
Did your marital status change during 2013?		
Are you legally married?		
If Yes, do you and your spouse want to file separate returns?		
If Yes, will you file a joint federal return and be required to file single state returns?		
If No, are you in a domestic partnership, civil union, or other state-defined relationship?		
Did your address change during 2013?		
Can you or your spouse be claimed as a dependent by another taxpayer?		

Dependents:

Were there any changes in dependents from the prior year?		
Note: Include non-child dependents for whom you provided more than half the support		
Did you pay for child care while you worked or looked for work?		
Do you have any children under age 18 with unearned income more than \$1000?		
Do you have any children age 18 or student children, aged 19 to 23, who did not provide more than half of their cost of support with earned income and that have unearned income of more than \$1000?		
Did you adopt a child or begin adoption proceedings during 2013?		

Purchases, Sales and Debt:

Did you have any debts canceled, forgiven or refinanced during 2013?		
Did you start a new business, purchase a new rental property, farm or acquire any new interest in any partnership or S corporation during 2013?		
Did you sell an existing business, rental property, farm or any existing interest in a partnership or S corporation during 2013?		
Did you sell, exchange or purchase any real estate in 2013? If so, please attach closing statements.		
Did you withdraw any amounts from your Individual Retirement Account (IRA) or Roth IRA to acquire a principal residence?		
Did you receive grants of stock options from your employer, exercise any stock options granted to you or dispose of any stock acquired under a qualified employee stock purchase plan?		
Did you pay any student loan interest in 2013?		
Are your total mortgages on your first and/or second residence greater than \$1,000,000? If so, please provide the principal balance and interest rate at the beginning and the end of the year.		
Did you have an outstanding home equity loan at the end of 2013? If so, please provide the principal balance and interest rate at the beginning and end of the year.		
Did you take out a home equity loan in 2013?		
Are you claiming a deduction for mortgage interest paid to a financial institution and someone else received the Form 1098?		
Did you or your mortgagee receive any mortgage assistance payments? If Yes, enclose Forms 1098-MA.		



Miscellaneous: (continued)

- | | Yes | No |
|--|--------------------------|--------------------------|
| Did you use gasoline or special fuels for business or farm purposes (other than for a highway vehicle) during the year? | <input type="checkbox"/> | <input type="checkbox"/> |
| If Yes, please provide the gallons of gasoline or special fuels used for off-highway business purposes _____ Gallons _____ Type | | |
| Have you received a punitive damage award or an award for damages other than for physical injuries or illness? | <input type="checkbox"/> | <input type="checkbox"/> |
| Were you notified by the IRS or other taxing authority of any changes in prior year returns? | <input type="checkbox"/> | <input type="checkbox"/> |
| Did you lose your job during 2013 because of foreign competition and pay for your own health insurance? | <input type="checkbox"/> | <input type="checkbox"/> |
| Did you install any alternative energy equipment in your residence such as solar water heaters, solar electricity equipment (photovoltaic) or fuel cells? | <input type="checkbox"/> | <input type="checkbox"/> |
| Did you install any energy efficiency improvements, or energy property in your residence such as exterior doors or windows, insulation, heat pumps, furnaces, central air conditioners or water heaters? | <input type="checkbox"/> | <input type="checkbox"/> |
| Have you been an identity theft victim and have you contacted the IRS? | <input type="checkbox"/> | <input type="checkbox"/> |
| If Yes, please furnish the 6-digit identity protection PIN issued to you by the IRS _____ | | |
| Did you engage in any bartering transactions? | <input type="checkbox"/> | <input type="checkbox"/> |
| Did you have any work outside of the U.S. or pay any foreign taxes? | <input type="checkbox"/> | <input type="checkbox"/> |
| Did you or your spouse serve in the military or were you or your spouse on active duty? | <input type="checkbox"/> | <input type="checkbox"/> |
| Did you or your spouse claim a homebuyer credit for a home purchased in 2008? | <input type="checkbox"/> | <input type="checkbox"/> |
| Will you have healthcare coverage (health insurance) for you, your spouse, and any dependents during 2014? | <input type="checkbox"/> | <input type="checkbox"/> |

Gifts:

- | | | |
|--|--------------------------|--------------------------|
| Did you or your spouse make any gifts, including birthday, holiday, anniversary, graduation, etc., with a total (aggregate) value in excess of \$14,000 to any individual during the year? | <input type="checkbox"/> | <input type="checkbox"/> |
| Did you or your spouse make any gifts to a trust for any amount during the year? | <input type="checkbox"/> | <input type="checkbox"/> |
| Do you or your spouse have a life insurance trust? | <input type="checkbox"/> | <input type="checkbox"/> |
| Did you assist in the purchase of any asset (auto, home) for any individual during the year? | <input type="checkbox"/> | <input type="checkbox"/> |
| Did you forgive any indebtedness to any individual, trust or entity during the year? | <input type="checkbox"/> | <input type="checkbox"/> |
| Did you or your spouse make any gifts of difficult-to-value assets (such as non-publicly traded stock) to any person regardless of value? | <input type="checkbox"/> | <input type="checkbox"/> |
| If you answered Yes to any of the above gift questions, please complete Form 34 and/or 35 in the back of the Organizer. | | |

Severance/Retirement:

- | | | |
|---|--------------------------|--------------------------|
| Did you retire or change jobs in 2013? | <input type="checkbox"/> | <input type="checkbox"/> |
| Did you receive deferred, retirement or severance compensation? | <input type="checkbox"/> | <input type="checkbox"/> |

Date

If Yes, enter the date received (Mo/Da/Yr).

- | | | |
|--|--------------------------|--------------------------|
| Did you or your spouse turn age 70 1/2 during the year and have money in an IRA or other retirement account while not taking any distribution? | <input type="checkbox"/> | <input type="checkbox"/> |
|--|--------------------------|--------------------------|



Miscellaneous: (continued)

	Yes	No
Did you use gasoline or special fuels for business or farm purposes (other than for a highway vehicle) during the year?	<input type="checkbox"/>	<input type="checkbox"/>
If Yes, please provide the gallons of gasoline or special fuels used for off-highway business purposes _____ Gallons _____ Type		
Have you received a punitive damage award or an award for damages other than for physical injuries or illness?	<input type="checkbox"/>	<input type="checkbox"/>
Were you notified by the IRS or other taxing authority of any changes in prior year returns?	<input type="checkbox"/>	<input type="checkbox"/>
Did you lose your job during 2013 because of foreign competition and pay for your own health insurance?	<input type="checkbox"/>	<input type="checkbox"/>
Did you install any alternative energy equipment in your residence such as solar water heaters, solar electricity equipment (photovoltaic) or fuel cells?	<input type="checkbox"/>	<input type="checkbox"/>
Did you install any energy efficiency improvements, or energy property in your residence such as exterior doors or windows, insulation, heat pumps, furnaces, central air conditioners or water heaters?	<input type="checkbox"/>	<input type="checkbox"/>
Have you been an identity theft victim and have you contacted the IRS?	<input type="checkbox"/>	<input type="checkbox"/>
If Yes, please furnish the 6-digit identity protection PIN issued to you by the IRS _____		
Did you engage in any bartering transactions?	<input type="checkbox"/>	<input type="checkbox"/>
Did you make gifts of more than \$14,000 to any individual?	<input type="checkbox"/>	<input type="checkbox"/>
Did you have any foreign income or pay any foreign taxes during 2013?	<input type="checkbox"/>	<input type="checkbox"/>
Did you or your spouse serve in the military or were you or your spouse on active duty?	<input type="checkbox"/>	<input type="checkbox"/>
Did you or your spouse claim a homebuyer credit for a home purchased in 2008?	<input type="checkbox"/>	<input type="checkbox"/>
Will you have healthcare coverage (health insurance) for you, your spouse, and any dependents during 2014?	<input type="checkbox"/>	<input type="checkbox"/>

Severance/Retirement:

Did you retire or change jobs in 2013?	<input type="checkbox"/>	<input type="checkbox"/>		
Did you receive deferred, retirement or severance compensation?	<input type="checkbox"/>	<input type="checkbox"/>		
If Yes, enter the date received (Mo/Da/Yr).	<table border="1" style="margin-left: auto; margin-right: auto;"> <tr> <td style="text-align: center;">Date</td> </tr> <tr> <td style="height: 20px;"> </td> </tr> </table>		Date	
Date				
Did you or your spouse turn 70 1/2 during the year and have money in an IRA or other retirement account while not taking a distribution?	<input type="checkbox"/>	<input type="checkbox"/>		



Sale of Your Home:

Did you sell your home in 2013?	<input type="checkbox"/>	<input type="checkbox"/>
If Yes, did you receive Form 1099?	<input type="checkbox"/>	<input type="checkbox"/>
If Yes, did you own and occupy the home as your principal residence for at least two years of the five-year period prior to the sale?	<input type="checkbox"/>	<input type="checkbox"/>
Did you ever rent out this property?	<input type="checkbox"/>	<input type="checkbox"/>
Did you ever use any portion of the home for business purposes?	<input type="checkbox"/>	<input type="checkbox"/>
Have you or your spouse sold a principal residence within the last two years?	<input type="checkbox"/>	<input type="checkbox"/>
At the time of the sale, the residence was owned by the:	<input type="checkbox"/> Taxpayer	<input type="checkbox"/> Spouse <input type="checkbox"/> Both

Additional Information:

For any trust you created or that you are trustee, have any beneficiaries died during 2013?	<input type="checkbox"/>	<input type="checkbox"/>
Did you or your spouse make any contributions to Qualified State Tuition Plans (Section 529 plans) during 2013?	<input type="checkbox"/>	<input type="checkbox"/>

If Yes, enter the following:

TS	Name of Designated Beneficiary	Social Security Number	State Sponsoring Plan	Account Number	2013 Amount Contributed



2013

Personal Information

3

Taxpayer: _____
 First Name and Initial Last Name Social Security Number

 Occupation Date of Birth (Mo/Da/Yr) Date of Death (Mo/Da/Yr)

Spouse: _____
 First Name and Initial Last Name Social Security Number

 Occupation Date of Birth (Mo/Da/Yr) Date of Death (Mo/Da/Yr)

Contact Information: _____
 Street Address Apartment Number

 City State ZIP or Postal Code

 Province or County

 Foreign Country

 Taxpayer Daytime/Work Phone Spouse Daytime/Work Phone

 Taxpayer Evening/Home Phone Spouse Evening/Home Phone

 Taxpayer Foreign Phone Spouse Foreign Phone

 Taxpayer Cell Phone Spouse Cell Phone

 Taxpayer Fax Number Spouse Fax Number

 Taxpayer Email Address

 Spouse Email Address

 Preferred Method of Contact

May the IRS or other taxing authority discuss the return with the preparer?

Is the taxpayer claimed as a dependent on someone else's tax return?

Yes	No
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>

Taxpayer		Spouse	
-----------------	--	---------------	--

Are you considered legally blind per IRS regulations?

Do you want to contribute to the Presidential Election Campaign Fund?

Yes	No	Yes	No
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



2013

Dependents and Wages

3A

Dependent Information:

Did dependent have income over \$3,900?

First Name and Initial	Last Name	Social Security Number	Date of Birth (Mo/Da/Yr)	Relationship to Taxpayer	Months Lived in Your Home	X if Disabled	Yes or No

Please provide the name of any person living with you who is claimed as a dependent on someone else's tax return _____

Please list the years that a release of claim to exemption is given for a dependent child not living with you _____

Wages and Salaries: **Please enclose all copies of your current year Forms W-2**

TS	Employer's Name	Taxable Wages	Tax Withheld				
			Federal	FICA/TIER1	Medicare	State	Local



2013

Electronic Filing

Electronic Filing: Please enclose all copies of your current year Forms W-2

Electronic filing is the means by which your return is transmitted directly to the IRS and state tax authorities. The IRS has implemented an electronic filing mandate requiring certain preparers, including this firm, to file all returns that they prepare electronically. Some states also require certain preparers to electronically file state returns prepared. The IRS and some states allow taxpayers to elect not to file their returns electronically.

Do not electronically file the federal return

Do not electronically file the state return(s)

Note: The IRS and some states that require returns to be electronically filed also impose fees and/or penalties for failure to do so. If you checked either of the boxes above, you may be required to sign an "opt-out" form before we can release your returns. As a follow-up we will contact you to discuss these requirements and your ability to "opt-out" of electronic filing.

The IRS requires, and many states allow, the use of a Personal Identification Number (PIN) in lieu of mailing a signature document when electronically filing.

Would you like to use a randomly generated PIN?

Yes	No
<input type="checkbox"/>	<input type="checkbox"/>

Taxpayer

Spouse

If No, please enter a 5-digit self-selected PIN:

Taxpayer PIN _____

Spouse PIN _____



Direct Deposit and Electronic Funds Withdrawal Account Information:

The IRS and certain states allow refunds to be deposited directly into your financial institution account, regardless of the means used to file the return. For balance due returns to be filed electronically, the IRS and many states allow the entire amount due to be paid using electronic withdrawal. If you would like to have your refund deposited directly into your account or pay a balance due by using an electronic withdrawal, please complete the following information. If you selected either direct deposit or electronic withdrawal in 2012, your account information has already been included below.

Account Information:

Account owner Taxpayer Spouse Joint

Type of account Checking Trad. Savings IRA Savings
 Archer MSA Savings Coverdell Ed. Savings HSA Savings

Account use (check all that apply) Business Federal estimate State(s)
 Federal return Electronic withdrawal
 Direct deposit

Name of financial institution _____

Routing Transit Number _____

Account number _____

If requesting electronic withdrawal:

What amount do you want withdrawn, if not the entire balance due? _____

When should the withdrawal occur, if not the due date of the return? _____

Account Information:

Account owner Taxpayer Spouse Joint

Type of account Checking Trad. Savings IRA Savings
 Archer MSA Savings Coverdell Ed. Savings HSA Savings

Account use (check all that apply) Business Federal estimate State(s)
 Federal return Electronic withdrawal
 Direct deposit

Name of financial institution _____

Routing Transit Number _____

Account number _____

If requesting electronic withdrawal:

What amount do you want withdrawn, if not the entire balance due? _____

When should the withdrawal occur, if not the due date of the return? _____



2013

Dividend Income

5B

Dividend Information:

Please enclose copies of all Forms 1099-DIV or other documents for dividends received

TSJ	Name of Payer	Box 1a Total Ordinary Dividends	Box 1b Qualified Dividends	Box 2a Total Capital Gain Distribution	U.S. Bond Interest Amount or Percent in Box 1a
A					
B					
C					
D					
E					
F					
G					
H					
I					
J					
K					
L					
M					
N					
Total					

Tax-Exempt Interest Code: 1 - 1099-DIV 2 - Private Activity Bonds 3 - Both

Code	Tax-Exempt Interest	2012 Gross Dividends Amount
A		
B		
C		
D		
E		
F		
G		
H		
I		
J		
K		
L		
M		
N		
Total		

Enter Any Additional Information:

Note: Please list all items sold during the year on Form 7.



2013

Interest Income and Foreign Information

5A

Please enclose all Forms 1099-INT or other documents for interest received

Interest Income:

(List all items sold during the year on Form 7.)

Special Interest Code: 1 - Qualified Educational Series EE Bonds 2 - Seller Financed Mortgage Interest 3 - Early Withdrawal Penalty 4 - Nominee Interest 5 - Accrued Interest 6 - Original Issue Discount Adjustment 7 - Amortizable Bond Premium Adjustment

TSJ	Source	Savings/Loans, Bank, and Other	U.S. Bonds and Obligations	Code	Special Interest
A					
B					
C					
D					
E					

Tax-Exempt Interest Code: 1 - 1099-INT 2 - Private Activity Bond 3 - Both

Social Security No. of Home Buyer	Address of Individual to Whom Mortgage Interest Was Paid	Code	Tax-Exempt Interest
A			
B			
C			
D			
E			

Federal Withholding	State Withholding	Investment Expenses	Tax Exempt Paid CUSIP No.	2012 Interest Amount
A				
B				
C				
D				
E				

Foreign Taxes Paid or Accrued:

Source	Name of Foreign Country Imposing Tax	X if Tax Accrued	Date Paid or Accrued (Mo/Da/Yr)	Tax Amount (in Foreign Currency)	Tax Amount (in U.S. Dollars)
A					
B					
C					
D					
E					

Additional State Information:

Payer ID	New Hampshire Reason Interest is Nontaxable
A	
B	
C	
D	
E	

Foreign Bank Accounts and Trusts:

At any time during 2013, did you have an interest in or a signature or other authority over a financial account in a foreign country, such as a bank account, securities account or other financial account? Yes No

If Yes, enter name of foreign country _____

Were you the grantor of, or transferor to, a foreign trust that existed during 2013, whether or not you had any beneficial interest in it? Yes No



2013

Foreign Assets

5C

Note: If the aggregate value of the accounts does not exceed \$10,000, then you do not need to provide details.

General Information:

TSJ _____
 Title of filer _____
 Enter all countries where you have foreign bank accounts _____

Foreign Identification:

	Yes	No
Passport		
Foreign TIN		

If not passport or TIN, enter description _____
 Number _____
 Country of issue _____

Information on Foreign Financial Accounts:

1 - Bank Account 2 - Securities Account 3 - Other

Account Type	If Other Account Type, Describe	Maximum Account Value	Account Number	Financial Institution Name
A				
B				

Street Address	City
A	
B	

Foreign Province/State/County	ZIP/Postal Code	Country
A		
B		

If you have no financial interest in the account or account is jointly owned, please complete the account owner information below.

Type of TIN Code: A - Employer Identification No. (EIN) B - SSN or ITIN C - Foreign

Last Name or Organization Name	First Name	Middle Initial	Suffix	Taxpayer ID Number
A				
B				

# of Joint Owners	Street Address	City
A		
B		

1 - No financial interest 2A - Joint ownership - spouse is joint owner 2B - Joint ownership - other joint owner

Foreign Province/State/County	State	ZIP/Postal Code	Country	Ownership Code	Filer's Title
A					
B					

1 - Deposit 2 - Custodial

Type	Foreign Currency	Exchange Rate	Source of Exchange	Acct Open	Acct Closed	Joint	No Tax Items Reported
A							
B							



Asset Information:

Description	Identifying Number	Date Acquired (Mo/Da/Yr)	Date Sold (Mo/Da/Yr)	Jointly Owned	No Tax Items Reported

Value	Foreign Currency	Exchange Rate	Source of Exchange Rate

If Asset is Stock of a Foreign Entity or an Interest in a Foreign Entity

1 - Partnership 2 - Corporation 3 - Trust 4 - Estate

Name of Foreign Entity	Type of Foreign Entity	Mailing Address of Foreign Entity

City or Town of Foreign Entity	Province, County or State of Foreign Entity	Country of Foreign Entity	Postal Code of Foreign Entity

If Asset is NOT Stock of a Foreign Entity or an Interest in a Foreign Entity

1 - Issuer 2 - Counterparty

1 - U.S. person
2 - Foreign person

Name of Issuer	Issuer Code	Type of Issuer	Residence of Issuer

1 - Individual 2 - Partnership 3 - Corporation 4 - Trust 5 - Estate

Mailing Address of Issuer	City or Town of Issuer

Province, County or State of Issuer	Country of Issuer	Postal Code of Issuer

Foreign Bank Accounts and Trusts:

At any time during 2013, did you have an interest in or a signature or other authority over a financial account in a foreign country, such as a bank account, securities account or other financial account? Yes No

If Yes, enter name of foreign country _____

Were you the grantor of, or transferor to, a foreign trust that existed during 2013, whether or not you had any beneficial interest in it? Yes No



Sales of Stocks, Securities, Capital Assets & Installment Sales

Gains or Losses from Sales of Stocks, Securities and Other Capital Assets:

Please enclose all Forms 1099-A, 1099-B, 1099-S and copies of mutual fund statements for the year

Did you have any of the following during the year?

- Mutual fund transactions
- Exchange of any securities or investments for something other than cash
- Sales of inherited property
- Sales of any stock or stock options at a loss and purchases of the same or substantially similar stock or options 30 days before or 30 days after the sale
- Commodity sales, short sales or straddles
- Reinvestment of the proceeds of the sale of a publicly traded security into an SSBIC interest
- Reinvestment of the proceeds of the sale of qualified small business stock in other qualified small business stock
- Debts that became uncollectible
- Securities that became worthless
- Sale of any property where you will receive payments in future years

Yes	No

TSJ	Kind of Property and Description	Date Acquired (Mo/Da/Yr)	Date Sold (Mo/Da/Yr)	Gross Sales Price (Less Commissions)
A				
B				
C				
D				
E				
F				
G				
H				

	Cost or Other Basis	Federal Tax Withheld	State Tax Withheld
A			
B			
C			
D			
E			
F			
G			
H			

Installment Sales: **Do not include interest received in principal amount**

TSJ	Property Description	Date Sold (Mo/Da/Yr)	2013 Principal Received	2012 Principal Received



Please enclose Forms: W-2G, 1099-MISC, 1099-RRB, 1099-SSA, 1099-SA, 1099-LTC, 1099-G and 1098-E

Miscellaneous Income and Adjustments:

Table with 2 main columns for TSJ (with blank line) and 2 sub-columns for 2013 Amount and 2012 Amount. Rows include Taxable pensions and annuities received, Nontaxable pensions and annuities received, Federal withholding on pensions and annuities, State withholding on pensions and annuities, Unemployment compensation received, Unemployment compensation repaid in 2013, Social security benefits received, Social security benefits repaid in 2013, Medicare premiums withheld, Tier 1 railroad retirement benefits received, Tier 1 railroad retirement benefits repaid in 2013, Taxable IRA distributions, Nontaxable IRA distributions, Total lump sum social security received, Lump sum taxable social security, Other federal withholding, and Other state withholding.

State and Local Income Tax Refunds:

Table with columns: TSJ, State, City, Tax Year, and Income Tax Refund (subdivided into State and Local).

Other Income:

Table with columns: TSJ, Nature and Source, 2013 Amount, and 2012 Amount.

Alimony Paid or Received:

Table with columns: TSJ, Recipient's Name, Recipient's Social Security No., Alimony Received?, 2013 Amount, and 2012 Amount.



Educator Expenses: Deduction for amounts paid by educators of kindergarten through Grade 12

TS	2013 Amount	2012 Amount

Health Savings Accounts (HSAs)

TS	Description	2013 Amount	2012 Amount
	Contributions made for 2013		
	Distributions received from all HSAs in 2013		

What type of coverage applies to your high deductible health plan? Self only Family

Were any HSA contributions listed above also shown on your Form W-2? Yes No

Were all distributions from your HSA for unreimbursed medical expenses? Yes No

Did you or your spouse enroll in Medicare? Yes No

If yes, what month did you enroll? _____

What month did your spouse enroll? _____

Other Adjustments to Income: Please enclose all Forms 1098-E for Student Loan Interest Paid

TSJ	Nature and Source	2013 Amount	2012 Amount



Medical and Dental Expenses:

Prescription medicines and drugs

Total medical insurance premiums paid (Do not include medicare premiums paid)

Long-term care expenses

Total insurance reimbursement

Number of miles traveled for medical care

Lodging

Doctors, dentists, etc.

Hospitals

Lab fees

Eyeglasses and contacts

Cobra assistance premiums in 2013

TSJ	2013 Amount	2012 Amount

Taxpayer long-term care insurance premiums paid

Spouse long-term care insurance premiums paid

2013 Amount	2012 Amount

Other Medical Expenses:

TSJ	Description	2013 Amount	2012 Amount

Taxes Paid: Please include copies of your tax bills

Personal property taxes paid (include vehicle taxes)

General sales taxes paid on specified items

TSJ	2013 Amount	2012 Amount

Itemize real estate taxes by state.

TSJ	Real Estate Taxes	2013 Amount	2012 Amount

Other Taxes Paid:

TSJ	Description	2013 Amount	2012 Amount

If you purchased or sold your home in 2013, did you include any taxes from your closing statement in the amounts above? Yes No



2013

Mortgage Questions for 2013:

	Yes	No
If you purchased or sold your home, did you include any mortgage interest from your closing statement in the amount below? . . .	<input type="checkbox"/>	<input type="checkbox"/>
Did you refinance your home? (If Yes, please enclose the closing statement.)	<input type="checkbox"/>	<input type="checkbox"/>
If Yes, how many years is your new mortgage loan? _____		
Did you purchase a new home or sell your former home during the year?	<input type="checkbox"/>	<input type="checkbox"/>
If Yes, please enclose the closing statements from the purchase and sale of your new and former homes.		
If Yes, also, did you (or your spouse, if married) have an ownership interest in a principal residence in the US during the 3 year period prior to the purchase of this home?	<input type="checkbox"/>	<input type="checkbox"/>
If Yes, did you (and your spouse, if married at the time of purchase) own and use the same home as a principal residence in the U.S. for any 5 consecutive year period during the 8 year period ending on the purchase date of the new home?	<input type="checkbox"/>	<input type="checkbox"/>

Home Mortgage Interest Paid To Financial Institutions:

TSJ	Paid To	Did You Receive Form 1098?		2013 Amount	2012 Amount
		Yes	No		

Other Home Mortgage Interest Paid:

TSJ	Paid To		ID Number	2013 Amount	2012 Amount
	Name	Address			

Deductible Points:

TSJ	Paid To	Did You Receive Form 1098?		2013 Amount	2012 Amount
		Yes	No		

Mortgage Insurance Premiums:

Premiums paid or accrued for qualified mortgage insurance.

TSJ	2013 Amount	2012 Amount

Investment Interest Expense:

Interest paid on money you borrowed that is allocable to property held for investment.

TSJ	Paid To	2013 Amount	2012 Amount



Cash Contributions:

You cannot deduct a cash contribution, regardless of the amount, unless you keep as a record of the contribution a bank record (such as a canceled check, a bank copy of a canceled check, or a bank statement containing the name of the charity, the date, and the amount) or a written communication from the charity. The written communication must include the name of the charity, date of the contribution, and amount of the contribution. Clothes and household items donated must be in good, used condition or better in order to be deductible unless the item donated is worth more than \$500 and you have the item's value appraised. Attach a copy of the appraisal. Include any vehicles donated to charity. Attach Forms 1098-C received from the charity.

Table with 4 columns: TSJ, Organization or Description of Contribution, 2013 Amount, 2012 Amount

Table with 4 columns: TSJ, Conservation Real Property, 2013 Amount, 2012 Amount. Includes rows for 100% limit and 50% limit.

Table with 4 columns: TSJ, Description, 2013 Miles, 2012 Miles. Includes row for Number of miles traveled performing volunteer work for qualified charitable organizations.

Noncash Contributions Totaling \$500 or Less:

Table with 4 columns: TSJ, Description of Donated Property, 2013 Amount, 2012 Amount

Noncash Contributions Totaling More Than \$500: Please enclose all Forms 1098-C or other documentation.

TSJ _____
Description of the donated property _____

Donee organization name _____

Donee organization address _____

Date the property was acquired by the taxpayer (Mo/Da/Yr) _____

Date the property was donated (Mo/Da/Yr) _____

Cost or basis of the donated property []

Fair market value of the donated property []

Which of the following methods was used to determine the fair market value? CAUTION: Generally, contributions in excess of \$5,000 of similar property will require an appraisal (does not apply to marketable securities)

- Appraisal Thrift shop value Catalog Comparable sale

Other - please explain _____

Which of the following describes how this donated property was acquired?

- Purchase Gift Inheritance Exchange



Miscellaneous Itemized Deductions:

Union and professional dues

Tax preparation fee

Professional subscriptions

Hobby expense (To extent of income)

Safe deposit box

Uniforms and protective clothing

Work tools

Gambling losses

Estate taxes

TSJ	2013 Amount	2012 Amount

Other Itemized Deductions:

Examples:

- Certain legal and accounting fees
- Investment expenses
- Custodial fees
- Employment agency fees
- Certain educational expenses

TSJ	Description	2013 Amount	2012 Amount

Casualty or Theft Loss:

TSJ

Property description

Which of the following describes the type of property that sustained the casualty or theft loss?

- Personal use
 Business use
 Income producing
 Employee Use
 Personal use due to Hurricane Katrina
- Personal use attributable to a federally declared disaster between 2007 and 2009
 Personal use attributable to Midwestern disaster area
 Personal use attributable to Kansas disaster area

Date acquired (Mo/Da/Yr) _____

Date damaged or lost (Mo/Da/Yr) _____

- Personal use attributable to insolvent or bankrupt financial institution losses on deposits

Original cost or other basis

Fair market value before casualty

Fair market value after casualty

Cost of replacement

Insurance reimbursement



TS: _____ Occupation: _____

Business Expenses: **Enter all expenses at 100 percent**

If these expenses are to be divided between Schedule A (Itemized Deductions) and one or more businesses, please enter the percentage to apply to Schedule A _____ %

	2013 Amount	2012 Amount
Parking fees and tolls		
Local transportation		
Travel expenses		
Meals and entertainment		
Other Business Expenses:		

Description	2013 Amount	2012 Amount

Reimbursements: **Please list only reimbursements NOT reported in Box 1 of your Form W-2**

	2013 Amount	2012 Amount
Amount received for other expenses		
Amount received for meals and entertainment		

Does your employer's reimbursement plan for meals and entertainment allow for offset of other reimbursements? Yes No

Vehicle:

If these vehicle expenses are to be divided between Schedule A (Itemized Deductions) and one or more businesses, please enter the percentage to apply to Schedule A _____ %

Description of vehicle

Date vehicle was placed in service (Mo/Da/Yr) _____

Do you (or your spouse) have another vehicle available for personal purposes? Yes No

Was your vehicle available for personal use during off-duty hours? Yes No

	2013	2012
Total miles		
Total business miles		
Average daily commuting miles		
Total commuting miles for the year		
Gasoline and oil		
Repairs		
Insurance		
Taxes		
Value of employer provided vehicle		
Temporary vehicle rentals		
Fair market value of leased vehicle		
Vehicle leases		
Other Vehicle Expenses:		

Description	2013 Amount	2012 Amount



Child/Dependent Care Expenses & Education Expenses

Child/Dependent Care Expenses:

General Information:

TSJ

Were you or your spouse a full time student or disabled? Yes No
 Did you pay an individual for services performed in your home? Yes No

Expenses incurred in 2012 but paid in 2013
 Employer-provided dependent care benefits that were forfeited in 2013
 2012 carryover used in grace period

Child/Dependent Care Providers:

Provider 1:

Name
 Street address
 City, state and ZIP code
 Social security number OR
 Employer identification number
 Telephone number (California only)

	2013 Amount	2012 Amount
Expenses incurred and paid in 2013		
Expenses incurred and not paid in 2013		

Provider 2:

Name
 Street address
 City, state and ZIP code
 Social security number OR
 Employer identification number
 Telephone number (California only)

	2013 Amount	2012 Amount
Expenses incurred and paid in 2013		
Expenses incurred and not paid in 2013		

Qualifying Persons for Child/Dependent Care Expenses:

First Name and Initial	Last Name	Social Security Number	2013 Expenses Incurred	2012 Expenses Incurred

Higher Education Expenses for Education Credits and/or Tuition Fees Deduction:

Qualified expenses are for post-secondary education tuition and related expenses; they do not include room or board. Include a detailed listing of the expenses.

Please enclose copies of all Forms 1098-T

First Name and Initial	Last Name	Social Security Number	Grade	2013 Qualified Expenses



2013

Federal Tax Payments

20

Refund Application:

If you have an overpayment of 2013 taxes, do you want the excess:

Refunded Yes No
 Applied to your 2014 estimated tax liability Yes No

Federal Estimated Tax Payments:

2013 1st Quarter Estimate (Due 04-15-2013)
 2013 2nd Quarter Estimate (Due 06-17-2013)
 2013 3rd Quarter Estimate (Due 09-16-2013)
 2013 4th Quarter Estimate (Due 01-15-2014)

Amount Due	Date Paid if Not Date Due (Mo/Da/Yr)	Amount Paid

2012 overpayment applied to 2013 estimate

Tax Planning Information for Tax Year 2014:

Do you expect any of the following to occur in 2014?

	Yes	No
A change in your marital status	<input type="checkbox"/>	<input type="checkbox"/>
A change in the number of your dependents	<input type="checkbox"/>	<input type="checkbox"/>
A substantial change in your income	<input type="checkbox"/>	<input type="checkbox"/>
A substantial change in your withholding	<input type="checkbox"/>	<input type="checkbox"/>
A substantial change in deductions	<input type="checkbox"/>	<input type="checkbox"/>

If you answered Yes to any of the above questions, please provide details.



NOTE: Only complete Forms 34 and/or 35 if in 2013:

- You made gifts of cash or marketable securities to an individual that exceeded \$14,000; or
- You made gifts of hard-to-value assets (such as closely-held stock) to an individual of any amount; or
- You made any transfers to a trust (including paying premiums on a life insurance policy that was transferred to a life insurance trust).

You should include all gifts made to each individual during the year, including gifts for his or her birthday, holiday, anniversary, graduation, etc. In addition, please include any gifts you made for educational or medical expenses. You can exclude amounts paid directly to a qualifying educational organization for tuition. You can also exclude amounts paid directly to health care providers if the expenses relate to nonelective medical expenses.

If you made any loans with an interest rate below the market rate of interest, please provide details below.

If your most recent gift tax return was not prepared by us, please include a copy.

For gifts other than cash, please include a copy of any appraisal(s) of assets.

If no appraisal is available, please describe how the value was determined.

For each gift made outright to an individual during the year, please provide the following information:

Gift 1:

Person giving the gift	<input type="checkbox"/> Taxpayer	<input type="checkbox"/> Spouse	<input type="checkbox"/> Joint
Name of person receiving the gift			
Address of person			
Your relationship to the person (e.g., son, granddaughter or friend)			
Age of the person			
Date(s) of gift(s) (Mo/Da/Yr)			
Description and amount of assets gifted (e.g., \$14,000 in cash or 500 shares of ABC stock)			
Cost basis of assets gifted if other than cash			
Value of assets gifted if other than cash			

Gift 2:

Person giving the gift	<input type="checkbox"/> Taxpayer	<input type="checkbox"/> Spouse	<input type="checkbox"/> Joint
Name of person receiving the gift			
Address of person			
Your relationship to the person (e.g., son, granddaughter or friend)			
Age of the person			
Date(s) of gift(s) (Mo/Da/Yr)			
Description and amount of assets gifted (e.g., \$14,000 in cash or 500 shares of ABC stock)			
Cost basis of assets gifted if other than cash			
Value of assets gifted if other than cash			