

This Tax Organizer is designed to help you collect and report the information needed to prepare your 2017 income tax return. The attached worksheets cover income, deductions, and credits, and will help in the preparation of your tax return by focusing attention on your special needs.

Please enter your 2017 information in the designated areas on the worksheets. If you need to include additional information, you may use the back of a worksheet or an additional page.

When possible, 2016 information is included for your reference. You do not need to make any 2016 entries.

Note: The General Questions and Business/Investment Questions worksheets include a variety of questions designed to assist in completing your tax return. If you answer **yes** to any of the questions, be sure to provide the applicable details.

Please provide the following information:

- A copy of your 2016 tax return (if not in our possession).
- Original Form(s) W-2.
- Schedule(s) K-1 showing income or loss from partnerships, S corporations or estates or trusts.
- Copies of other compensation or pension documentation, such as Form 1099-MISC or Form 1099-R.
- Form(s) 1099 or statements reporting dividend and interest income.
- Brokerage statements showing transactions for stocks, bonds, etc.
- Form(s) 1098 reporting interest paid, copies of real estate tax bills and other information relating to real property holdings.
- Copies of closing statements regarding the sale or purchase of real property.
- All other information notices you received, or any items you have questions about.

Thank you for taking the time to complete this Tax Organizer.



**Attach Form(s) W-2 – Wages, Salaries, Tips and Other Compensation**

Employer Name	2016 Amount
_____	_____
_____	_____
_____	_____

**Attach Form(s) 1099-R – Distributions from Pensions, Annuities, Retirement, Profit-Sharing, IRAs, etc**

1099-R Payer Name	2016 Amount
_____	_____
_____	_____
_____	_____

**Attach Form(s) SSA-1099 – Social Security/Railroad Benefits**

	Taxpayer	Spouse
Social Security Benefits from Form SSA-1099 .....	_____	_____
Railroad Retirement Benefits from Form RRB-1099 .....	_____	_____
Medicare B premiums withheld .....	_____	_____
Medicare C premiums withheld .....	_____	_____
Medicare D premiums withheld .....	_____	_____

**Attach Form(s) 1099-MISC – Miscellaneous Income**

1099-MISC Payer Name

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Attach Form(s) 1099-INT – Interest Income**

1099-INT Payer Name	2016 Amount
_____	_____
_____	_____
_____	_____
_____	_____

**Attach Form(s) 1099-DIV – Dividend Income**

1099-DIV Payer Name	2016 Amount
_____	_____
_____	_____
_____	_____
_____	_____

**Attach Form(s) 1099-B, 1099-S – Sales of Stocks, Bonds, Real Estate, etc**  
 Attach all stock sale transaction information, including initial cost information.

**Other Government Forms to attach:**  
 Form(s) 1099-G – Certain Government Payments, Schedule K-1s – Partnership, S-Corporation, Trust or Estate Income, Form(s) W-2G – Gambling or Lottery Winnings, Form(s) 1099-Q – Payments from Qualified Education Programs

**Other Income:**  
 Alimony, jury duty, unreported tips, disability income, etc. Business, rentals, farms: Attach income and expenses for any business, rental or farm you own. Include a list of all new equipment acquired this year, including date of purchase and cost.

	Taxpayer	Spouse
<b>Retirement Plan Contributions</b>		
Traditional IRA contributions made for 2017 .....	_____	_____
Roth IRA contributions made for 2017 .....	_____	_____
SEP, Keogh, Individual 401(k) or SIMPLE Contributions .....	_____	_____

<b>Medical and Dental Expenses</b>	<b>2017 Amount</b>	<b>2016 Amount</b>
Prescription medications.....	_____	_____
Health insurance premiums .....	_____	_____
Doctors, dentists, etc .....	_____	_____
Hospitals, clinics, etc .....	_____	_____
Eyeglasses and contact lenses .....	_____	_____
Miles driven for medical purposes.....	_____	_____
Other medical and dental expenses: _____	_____	_____

<b>Taxes</b>	<b>2017 Amount</b>	<b>2016 Amount</b>
Real estate taxes paid on principal residence .....	_____	_____
Real estate taxes paid on additional homes or land .....	_____	_____
Auto license registration fees based on the value of the vehicle .....	_____	_____
Other personal property taxes .....	_____	_____

<b>Interest Expenses</b>		
Home mortgage interest paid – Attach Form(s) 1098.		
<b>Lender's Name</b>	<b>2017 Amount</b>	<b>2016 Amount</b>
_____	_____	_____
_____	_____	_____
Points paid on loan to buy, build or improve main home		
<b>Lender's Name</b>	<b>2017 Amount</b>	
_____	_____	

<b>Cash/Check/Credit Contributions</b>	<b>2017 Amount</b>	<b>2016 Amount</b>
_____	_____	_____
_____	_____	_____
_____	_____	_____

**Noncash Charitable Contributions**  
 Attach all receipts with details listing the following information: Donee, donee address, description of donation, date acquired and date contributed, your cost, value at time of donation, and how you acquired the property.

<b>Miscellaneous Deductions</b>	<b>2017 Amount</b>	<b>2016 Amount</b>
Union and professional dues .....	_____	_____
Professional subscriptions, books, supplies .....	_____	_____
Uniforms and protective clothing (including cleaning) .....	_____	_____
Job search costs .....	_____	_____
Taxpayer educator expenses.....	_____	_____
Spouse educator expenses.....	_____	_____
Tax return preparation fees .....	_____	_____
Safe deposit box rental .....	_____	_____
Gambling losses (to the extent of gambling income) .....	_____	_____
Other expenses (list): _____	_____	_____

**2017 Questions**

	<b>Yes</b>	<b>No</b>
1 Did a lender cancel any of your debt in 2017? (Attach any Forms 1099-A or 1099-C).....	<input type="checkbox"/>	<input type="checkbox"/>
2 Did you make energy efficient improvements to your home or purchase any energy-saving property during 2017? If <b>yes</b> , please attach details.....	<input type="checkbox"/>	<input type="checkbox"/>
3 Did you purchase a motor vehicle or boat during 2017?..... If <b>yes</b> , attach documentation showing sales tax paid.	<input type="checkbox"/>	<input type="checkbox"/>
4 Did you purchase a hybrid or electric vehicle in 2017? If <b>yes</b> , enter year, make, model, and date purchased: _____	<input type="checkbox"/>	<input type="checkbox"/>
5 Did you donate a vehicle in 2017? If <b>yes</b> , attach Form 1098C.....	<input type="checkbox"/>	<input type="checkbox"/>
6 What was the sales tax rate in your locality in 2017? ..... % State ID .....	<input type="checkbox"/>	<input type="checkbox"/>
7 Did your marital status change during 2017?..... If <b>yes</b> , explain: _____	<input type="checkbox"/>	<input type="checkbox"/>
8 Were you or your spouse permanently and totally disabled in 2017? .....	<input type="checkbox"/>	<input type="checkbox"/>
9 Do you have dependents who must file?.....	<input type="checkbox"/>	<input type="checkbox"/>
10 Do you have children who are under age 19 or a full time student under age 24 with investment income greater than \$2,100?...	<input type="checkbox"/>	<input type="checkbox"/>
11 Did you provide over half the support for any other person during 2017? .....	<input type="checkbox"/>	<input type="checkbox"/>
12 Did you incur adoption expenses during 2017? .....	<input type="checkbox"/>	<input type="checkbox"/>
13 Did you receive a total distribution from an IRA or other qualified plan that was partially or totally rolled over into another IRA or qualified plan within 60 days of the distribution?.....	<input type="checkbox"/>	<input type="checkbox"/>
14 Did you receive any disability payments in 2017? .....	<input type="checkbox"/>	<input type="checkbox"/>
15 Did you receive tip income <b>not</b> reported to your employer? .....	<input type="checkbox"/>	<input type="checkbox"/>
16a Did you buy, sell, refinance, foreclose or abandon a principal residence or other real property in 2017? If <b>yes</b> , attach closing or escrow statements, 1099-C or 1099-A forms.....	<input type="checkbox"/>	<input type="checkbox"/>
b If you sold a home, did you claim the First-Time Homebuyer Credit when you purchased it?.....	<input type="checkbox"/>	<input type="checkbox"/>
17 Did you incur any casualty or theft losses during 2017? .....	<input type="checkbox"/>	<input type="checkbox"/>
18 Did you incur any non-business bad debts?.....	<input type="checkbox"/>	<input type="checkbox"/>
19 Did you pay any individual for domestic services in 2017?.....	<input type="checkbox"/>	<input type="checkbox"/>
20 Did you buy or sell any stocks or bonds in 2017? .....	<input type="checkbox"/>	<input type="checkbox"/>
21 Did you use the proceeds from Series EE or I U.S. savings bonds purchased after 1989 to pay for higher education expenses? .....	<input type="checkbox"/>	<input type="checkbox"/>
22 Did you incur any moving expenses? If <b>yes</b> , attach details.....	<input type="checkbox"/>	<input type="checkbox"/>
23 Did you receive any income not included in this Tax Organizer?..... If <b>yes</b> , please attach information.	<input type="checkbox"/>	<input type="checkbox"/>
24 Do you expect your income and deductions in 2018 to be the same as 2017? .....	<input type="checkbox"/>	<input type="checkbox"/>
If <b>no</b> , attach explanation of changes expected.		
25a Did you and your dependents have health insurance coverage for the full year? .....	<input type="checkbox"/>	<input type="checkbox"/>
b Did you receive any of the following IRS documents? Forms 1095-A (Health Insurance Marketplace Statement), Form 1095-B (Health Coverage) or Form 1095-C (Employer Provided Health Insurance Offer and Coverage)? If so, please attach.....	<input type="checkbox"/>	<input type="checkbox"/>
26 If you paid any alimony, enter recipient's SSN: _____ Alimony paid: _____		
27 Enter your state of residence..... Taxpayer _____ Spouse _____		

**Electronic Filing and Direct Deposit of Refund** **Yes**  **No**

If your tax return is eligible for Electronic Filing, would you like to file electronically?.....

The Internal Revenue Service is able to deposit many refunds directly into taxpayers' accounts.  
If you receive a refund, would you like direct deposit? .....

If **yes**, please provide a voided check (not a deposit slip) if your bank account information has changed.  
What type of account is this?..... Checking  Savings

Federal		State			Local		
Date	Amount	Date	Amount	ID	Date	Amount	ID

**Additional Information** (Enter any additional information here and attach any documents.)

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**Business Income and Expenses**

**ORG19**

**GENERAL INFORMATION**

1 Check ownership .....  Taxpayer     Spouse     Joint

2 Business name .....

3 a Business street address.....

    b 1 City, State and Zip Code, or.....

    2 Foreign country.....

4 Principal business/profession .....

5 Employer ID number.....

6 Business code (Preparer Use Only) ..... Yes  No

7 Was this business fully disposed of in a fully taxable transaction during 2017?..... Yes  No

8 Accounting method:  
 Cash     Accrual     Other (specify)  \_\_\_\_\_

9 Method used to value closing inventory:  
 Cost     Lower of     Other (explain)  \_\_\_\_\_  
cost or market

10 Was there a change in determining quantities, costs, or valuations between opening/closing inventory?  
 (If yes, attach explanation) ..... Yes  No

11 Did you materially participate in the operation of this business during 2017? ..... Yes  No

12 Did you start or acquire this business during 2017? ..... Yes  No

13 a Did you make any payments in 2017 that require you to file Forms 1099? ..... Yes  No

    b If yes, did you or will you file all the required Forms 1099? ..... Yes  No

14 At-risk determination:

    a Is all of the investment in this activity at risk? ..... Yes  No

    b Is some of the investment in this activity not at risk? ..... Yes  No

15 Did you have unallowed passive losses in 2016? ..... Yes  No

16 a Treat all MACRS assets for this activity as qualified Indian reservation property? ..... Yes  No

    b Treat all assets acquired after August 27, 2005 as qualified GO Zone property?..... **Regular**  **Extension**  **No**

    c Treat all assets acquired after May 4, 2007 as qualified Kansas Disaster Zone property? ..... Yes  No

    d Was this business located in a Qualified Disaster Area? ..... Yes  No

Complete ORG51 for Asset Acquisitions and ORG50 for Dispositions.

INCOME	2017	2016
17 Gross receipts or sales.....		
18 Returns and allowances plus other adjustments.....		
19 Other income (include federal/state gas tax credit/refund) .....		

COST OF GOODS SOLD – IF APPLICABLE	2017	2016
20 Inventory at beginning of year .....		
21 Purchases .....		
22 Items withdrawn for personal use .....		
23 Cost of labor (do not include your salary) .....		
24 Materials and supplies .....		
25 Other costs .....		
26 Inventory at end of year.....		

**Business Income and Expenses (continued)**

**ORG19**

EXPENSES	2017	2016
Business name _____		
27 Advertising .....		
28 Car and truck expenses (complete ORG18).....		
29 Commissions and fees.....		
30 Contract labor .....		
31 Depletion .....		
32 Depreciation and Section 179 deduction <b>(Preparer Use Only)</b> .....		
33 Employee benefit programs:		
a Employee health insurance premiums .....		
b Other employee benefit programs .....		
34 Insurance (other than health).....		
35 Self-employed health insurance attributable to this business.....		
36 Interest:		
a Mortgage paid to banks not reported to you on Form 1098.....		
b Other .....		
37 Legal and professional services .....		
38 Office expenses .....		
39 Pension and profit-sharing plans.....		
40 Rent or lease:		
a Machinery and equipment (enter vehicle lease on ORG18) .....		
b Other business property.....		
41 Repairs and maintenance .....		
42 Supplies (not included in cost of goods sold) .....		
43 Taxes and licenses not reported to you on Form 1098 .....		
44 Travel, meals, and entertainment:		
a Travel.....		
b Meals and entertainment subject to 50% limit .....		
c Meals subject to 80% limit.....		
d Meals and entertainment not subject to limit.....		
45 Utilities .....		
46 Gross wages .....		
47 Other expenses:		
_____		
_____		
_____		
_____		
_____		
_____		
_____		
_____		
48 Expenses for business use of your home <b>(Preparer Use Only)</b> .....		
Complete ORG20 for Business Use of Home.		
49 Qualified pension plan start-up costs.....		

# Rent and Royalty Income and Expenses

ORG25

## BASIC PROPERTY INFORMATION

Property description: \_\_\_\_\_  
 Property type: \* \_\_\_\_\_ If type is other, enter a description: \_\_\_\_\_  
 Location (street address): \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 If a foreign address: Foreign province or state: \_\_\_\_\_  
 Foreign postal code: \_\_\_\_\_ Foreign Country: \_\_\_\_\_

- 1** Check property owner .....  **Taxpayer**       **Spouse**       **Joint**
- |  | Yes                              | No   |
|--|----------------------------------|--|
| <b>2 a</b> Did you make any payments that would require you to file Form(s) 1099? .....  | <input type="checkbox"/>         | <input type="checkbox"/>                                       |
| <b>b</b> If <b>yes</b> , did you or will you file all required Forms(s) 1099? .....  | <input type="checkbox"/>         | <input type="checkbox"/>                                       |
| <b>3 a</b> Enter the ownership percentage (if not 100%) .....  |                                  |  |
| <b>b</b> If not 100%, are you reporting 100% of the income and expenses? .....   | <input type="checkbox"/>         | <input type="checkbox"/>                                       |
| <b>4</b> Is this a rental property? (If <b>yes</b> , answer questions 5 through 11; if <b>no</b> , skip to question 12.) ..... | <input type="checkbox"/>         | <input type="checkbox"/>                                       |
| <b>5</b> Did you have personal use of this property or rent it for part of the year at less than fair rental value? .....      | <input type="checkbox"/>         | <input type="checkbox"/>                                       |
| <b>6</b> For all rental properties, <b>enter the number of days</b> during 2017 that:  |                                  |  |
| <b>a</b> The property was rented at fair rental value .....  |                                  |  |
| <b>b</b> The property was used personally or rented at less than fair rental value .....                                       |                                  |  |
| <b>c</b> You owned the property, if not the entire year .....  |                                  |  |
| <b>7 a</b> Does this rental have multiple living units and you live in one of the units? .....                                 | <input type="checkbox"/>         | <input type="checkbox"/>                                       |
| <b>b</b> If <b>yes</b> , enter percentage of rental use .....  |                                  |  |
| <b>8</b> Did you actively participate in this property's management during 2017? .....   | <input type="checkbox"/>         | <input type="checkbox"/>                                       |
| <b>9</b> Did you materially participate in this property's management during 2017? .....                                       | <input type="checkbox"/>         | <input type="checkbox"/>                                       |
| <b>10</b> Do you want to treat this property as non-passive? .....   | <input type="checkbox"/>         | <input type="checkbox"/>                                       |
| <b>11</b> Did this property have unallowed passive losses in 2016? .....   | <input type="checkbox"/>         | <input type="checkbox"/>                                       |
| <b>12</b> Did you dispose of this property in a fully taxable transaction? .....   | <input type="checkbox"/>         | <input type="checkbox"/>                                       |
| <b>13</b> Check this box if some of this investment was <b>not</b> at-risk .....   | <input type="checkbox"/>         |  |
| <b>14 a</b> Treat all MACRS assets for this activity as qualified Indian reservation property? .....                           | <input type="checkbox"/>         | <input type="checkbox"/>                                       |
| <b>b</b> Treat all assets acquired after August 27, 2005 as qualified GO Zone property? .....                                  | Regular <input type="checkbox"/> | Extension <input type="checkbox"/> No <input type="checkbox"/> |
| <b>c</b> Treat all assets acquired after May 4, 2007 as qualified Kansas Disaster Zone property? .....                         | <input type="checkbox"/>         | <input type="checkbox"/>                                       |
| <b>d</b> Was this activity located in a Qualified Disaster Area? .....   | <input type="checkbox"/>         | <input type="checkbox"/>                                       |

Complete ORG51 for Asset Acquisitions and ORG50 for Dispositions.

	2017	2016
<b>15</b> Rents or royalties received .....		
<b>* Property Types:</b>		
<b>1</b> Single family residence		<b>5</b> Land
<b>2</b> Multi-family residence		<b>6</b> Royalties
<b>3</b> Vacation/short-term rental		<b>7</b> Self-rental
<b>4</b> Commercial		<b>8</b> Other



**Rent and Royalty Income and Expenses (continued)**

**ORG25**

EXPENSES	2017	2016
Property location .....		
<b>16</b> Advertising .....		
<b>17a</b> Automobile (complete ORG18 for autos) .....		
<b>b</b> Travel .....		
<b>18</b> Cleaning and maintenance .....		
<b>19</b> Commissions .....		
<b>20a</b> Mortgage insurance premiums – qualified .....		
<b>b</b> Other insurance .....		
<b>21</b> Legal and professional fees .....		
<b>22</b> Management fees .....		
<b>23a</b> Mortgage interest paid to banks – qualified .....		
<b>b</b> Mortgage interest paid to banks – other .....		
<b>24</b> Other interest .....		
<b>25</b> Repairs .....		
<b>26</b> Supplies .....		
<b>27a</b> Real estate taxes .....		
<b>b</b> Other taxes .....		
<b>28</b> Utilities .....		
<b>29</b> Other expenses:		
<b>a</b> .....		
<b>b</b> .....		
<b>c</b> .....		
<b>d</b> .....		
<b>e</b> .....		
<b>30a</b> Depreciation and Section 179 deduction ( <b>Preparer Use Only</b> ) .....		
<b>b</b> Depletion ( <b>Preparer Use Only</b> ) .....		