



This Tax Organizer is designed to help you collect and report the information needed to prepare your 2018 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 2018 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, 2017 information is included for your reference. You do not need to make any 2017 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 2017 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.

## 2018 TAX ORGANIZER

Taxpayer Information		Spouse Information	
Last name .....	_____	Last name.....	_____
First name.....	_____	First name .....	_____
Middle Initial.....	_____	Middle Initial.....	_____
Suffix.....	_____	Suffix.....	_____
Social security number .....	_____	Social security number .....	_____
Occupation .....	_____	Occupation.....	_____
Work phone .....	_____ Ext ... _____	Work phone.....	_____ Ext ... _____
Cell phone.....	_____	Cell phone .....	_____
E-mail address.....	_____	E-mail address.....	_____
Date of birth.....	_____	Date of birth .....	_____
Address .....	_____		Apartment number..... _____
City .....	_____	State.....	_____ ZIP Code..... _____
Home phone.....	_____	Fax number.....	_____

Dependent Information					
First name Last name	MI Suffix	Social Security Number Relationship	Date of Birth	Months Lived with Taxpayer	Child Care Expense

Child and Dependent Care Provider Expenses			
Name	Address	ID Number	Amount Paid

**Education Tuition and Fees**  
 Attach all Form 1098-Ts and a list of your qualified education expenses.

**Student Loan Interest Paid**  
 Enter total 2018 qualified student loan interest..... \_\_\_\_\_

<b>Attach Form(s) W-2 – Wages, Salaries, Tips and Other Compensation</b>	
<b>Employer Name</b>	<b>2017 Amount</b>
_____	_____
_____	_____
_____	_____

<b>Attach Form(s) 1099-R – Distributions from Pensions, Annuities, Retirement, Profit-Sharing, IRAs, etc</b>	
<b>1099-R Payer Name</b>	<b>2017 Amount</b>
_____	_____
_____	_____
_____	_____

<b>Attach Form(s) SSA-1099 – Social Security/Railroad Benefits</b>		
	<b>Taxpayer</b>	<b>Spouse</b>
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 .....	_____	_____

<b>Attach Form(s) 1099-MISC – Miscellaneous Income</b>	
<b>1099-MISC Payer Name</b>	
_____	
_____	
_____	

<b>Attach Form(s) 1099-INT – Interest Income</b>	
<b>1099-INT Payer Name</b>	<b>2017 Amount</b>
_____	_____
_____	_____
_____	_____
_____	_____

<b>Attach Form(s) 1099-DIV – Dividend Income</b>	
<b>1099-DIV Payer Name</b>	<b>2017 Amount</b>
_____	_____
_____	_____
_____	_____
_____	_____

**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.

<b>Retirement Plan Contributions</b>		
	<b>Taxpayer</b>	<b>Spouse</b>
Traditional IRA contributions made for 2018 .....	_____	_____
Roth IRA contributions made for 2018 .....	_____	_____
SEP, Keogh, Individual 401(k) or SIMPLE Contributions .....	_____	_____

**2018 Deductions**

<b>Medical and Dental Expenses</b>	<b>2018 Amount</b>	<b>2017 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>2018 Amount</b>	<b>2017 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>2018 Amount</b>	<b>2017 Amount</b>
_____	_____	_____
Points paid on loan to buy, build or improve main home		
<b>Lender's Name</b>	<b>2018 Amount</b>	
_____	_____	
<b>Cash/Check/Credit Contributions</b>	<b>2018 Amount</b>	<b>2017 Amount</b>
_____	_____	_____
_____	_____	_____
_____	_____	_____
<b>Noncash Charitable Contributions</b>		
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>2018 Amount</b>	<b>2017 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): _____	_____	_____

**2018 Questions**

	<b>Yes</b>	<b>No</b>
1 Did a lender cancel any of your debt in 2018? (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 2018? If <b>yes</b> , please attach details.....	<input type="checkbox"/>	<input type="checkbox"/>
3 Did you purchase a motor vehicle or boat during 2018 ? .....	<input type="checkbox"/>	<input type="checkbox"/>
If <b>yes</b> , attach documentation showing sales tax paid.		
4 Did you purchase a hybrid or electric vehicle in 2018? If <b>yes</b> , enter year, make, model, and date purchased: _____	<input type="checkbox"/>	<input type="checkbox"/>
5 Did you donate a vehicle in 2018? If <b>yes</b> , attach Form 1098C.....	<input type="checkbox"/>	<input type="checkbox"/>
6 What was the sales tax rate in your locality in 2018 ? ..... % State ID .....		
7 Did your marital status change during 2018? .....	<input type="checkbox"/>	<input type="checkbox"/>
If <b>yes</b> , explain: _____		
8 Were you or your spouse permanently and totally disabled in 2018? .....	<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 2018? .....	<input type="checkbox"/>	<input type="checkbox"/>
12 Did you incur adoption expenses during 2018? .....	<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 2018? .....	<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"/>
16 a Did you buy, sell, refinance, foreclose or abandon a principal residence or other real property in 2018? 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 2018 ? .....	<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 2018 ? .....	<input type="checkbox"/>	<input type="checkbox"/>
20 Did you buy or sell any stocks or bonds in 2018 ? .....	<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?.....	<input type="checkbox"/>	<input type="checkbox"/>
If <b>yes</b> , please attach information.		
24 Do you expect your income and deductions in 2019 to be the same as 2018 ? .....	<input type="checkbox"/>	<input type="checkbox"/>
If <b>no</b> , attach explanation of changes expected.		
25 a 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.....	<b>Taxpayer</b> _____	<b>Spouse</b> _____

**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

**Estimated Tax Paid**

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) .....

7 Was this business fully disposed of in a fully taxable transaction during 2018 ?..... Yes  No

8 Accounting method:  
     Cash       Accrual       Other (specify)  .....

9 Method used to value closing inventory:  
     Cost       Lower of       Other (explain)  .....

Yes    No

10 Was there a change in determining quantities, costs, or valuations between opening/closing inventory?  
     (If yes, attach explanation) .....

11 Did you materially participate in the operation of this business during 2018 ? .....

12 Did you start or acquire this business during 2018 ? .....

13 a Did you make any payments in 2018 that require you to file Forms 1099? .....

    b If yes, did you or will you file all the required Forms 1099? .....

14 At-risk determination:

    a Is all of the investment in this activity at risk? .....

    b Is some of the investment in this activity not at risk? .....

15 Did you have unallowed passive losses in 2017 ? .....

16 a Treat all MACRS assets for this activity as qualified Indian reservation property? .....

    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? .....

    d Was this business located in a Qualified Disaster Area? .....

Complete ORG51 for Asset Acquisitions and ORG50 for Dispositions.

INCOME	2018	2017
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	2018	2017
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**

<b>EXPENSES</b>	<b>2018</b>	<b>2017</b>
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 and meals		
a Travel.....		
b Meals subject to 50% limit.....		
c Meals subject to 80% limit.....		
d Meals 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.....		

# Business Use of Home

ORG20

for:

copy:

Simplified method election for Home Office expenses: Elect the simplified method in **2018** instead of entering actual expenses

Elected the simplified method in **2017** instead of entering actual expenses


GENERAL INFORMATION	2018	2017
1 Area used regularly and exclusively for business, regularly and exclusively for day care, or regularly for inventory storage (square footage) .....		
2 Area used only partly for day care (square footage) .....		
3 Total area of home (square footage) .....		
4 Daycare hours		
a Number of weeks used for day care, if less than full year .....		
b Number of days used for day care each week .....		
c Number of days closed for holidays, vacations, etc .....		
d Number of hours used for day care each day .....		
e Total hours used for day care .....		
f Total hours available for use .....		
5 Enter the date you began using this home office for this business .....		
6 If part of your income is from a place of business other than this home, enter % of gross income from business use of this home .....		
7 Adjustment to gain from business use of home shown on Schedule D or Form 4797 (Preparer Use Only) .....		
8 Adjustment to losses from this business shown on Schedule D or Form 4797 (Preparer Use Only) .....		

Enter expenses that benefit only your business area in the 'Direct' column and expenses that benefit your entire home in the 'Indirect' column.

EXPENSES	2018		2017	
	Direct	Indirect	Direct	Indirect
9 Casualty losses (Preparer Use Only) .....				
10 Total mortgage interest/points .....				
11 Mortgage interest/points on Form 1098 .....				
12 Interest <b>not</b> on Form 1098 .....				
13 Points <b>not</b> of Form 1098 .....				
14 Real estate taxes .....				
15 Excess mortgage interest (Preparer Use) .....				
16 Qualified mortgage insurance .....				
17 Other insurance .....				
18 Rent .....				
19 Repairs and maintenance .....				
20 Utilities .....				
21 Other expenses (e.g., rent) .....				
22 Carryover of operating expenses .....				
23 Excess casualty losses (Preparer Use Only) .....				
24 Depreciation of your home (Preparer Use Only) .....				
25 Carryover of excess casualty losses and depreciation .....				

## DEPRECIATION

If your home and any additions or improvements to your home are not already listed on ORG50 for this business, please complete the following information.

26	Description	Date Acquired (MM/DD/YY)	Date Placed in Service (MM/DD/YY)	Cost (include land for residence only)
	Residence .....			
	Addition/Improvement .....			
	Addition/Improvement .....			
	Addition/Improvement .....			
	Addition/Improvement .....			
27	Enter the land value included in cost for residence .....			



**Car And Truck Expenses**  
(Employees use ORG17 – Employee Business Expenses)

ORG18

for:

GENERAL INFORMATION-	Vehicle 1		Vehicle 2		Vehicle 3	
1 Description of vehicle.....						
2 Date placed in service.....						
3 Enter detail on lines 3a and 3b, or total on line 3c:						
a Ending mileage reading.....						
b Beginning mileage reading.....						
c Total miles for the year (line 3a less line 3b).....						
4 Business miles.....						
5 Total commuting miles.....						
STANDARD MILEAGE RATE	Vehicle 1		Vehicle 2		Vehicle 3	
6 Do you qualify for standard mileage? (Preparer Use).....	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
7 Is this a leased vehicle?.....	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
ACTUAL EXPENSES	Vehicle 1		Vehicle 2		Vehicle 3	
8 Gasoline, oil, repairs, insurance, etc.....						
9 Vehicle registration fee (excluding property tax).....						
10 Vehicle lease or rental fee.....						
11 Inclusion amount (Preparer Use Only).....						
12 Depreciation (Preparer Use Only).....						
13 Parking fees, tolls, and local transportation.....						
14 Portion of vehicle registration fee based on value.....						
15 Interest on vehicle.....						
DEPRECIATION/DISPOSITIONS	Vehicle 1		Vehicle 2		Vehicle 3	
16 Cost or basis.....						
17 Is this an electric vehicle?.....	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
18 Is this qualified Indian reservation property?.....	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
19 Type of vehicle (Preparer Use).....						
20 Section 179 expense (Preparer Use).....						
21 Qualified Property for Economic Stimulus? (Preparer Use).....	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
22 Qualified Property for Qualified Disaster Area? (Preparer Use).....	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
23 Kansas Disaster Zone? (Preparer Use).....	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
24 Qualified GO Zone Property (Preparer Use).....	<input type="checkbox"/> Reg	<input type="checkbox"/> Ext	<input type="checkbox"/> N/A	<input type="checkbox"/> Reg	<input type="checkbox"/> Ext	<input type="checkbox"/> N/A
25 Percentage for SDA? (Preparer Use).....	<input type="checkbox"/> 100%/50%	<input type="checkbox"/> 30%	<input type="checkbox"/> No	<input type="checkbox"/> 100%/50%	<input type="checkbox"/> 30%	<input type="checkbox"/> No
26 Elect OUT of SDA? (Preparer Use).....	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
27 Elect 30% in place of 50% SDA (Preparer Use).....	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
28 Date sold.....						
29 Date acquired, if different from line 2.....						
30 Sales price.....						
31 Expense of sale.....						
32 Gain/loss basis, if different (Preparer Use).....						
33 AMT gain/loss basis, if different (Preparer Use).....						
VEHICLE QUESTIONS	Vehicle 1		Vehicle 2		Vehicle 3	
34 Is another vehicle available for personal use?.....	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
35 Was vehicle available during off duty hours?.....	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
36 Was vehicle used primarily by a greater than 5% owner or related person?.....	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
37 Do you have evidence to support the business use claimed?.....					<input type="checkbox"/> Yes	<input type="checkbox"/> No
38 If yes, is the evidence written?.....					<input type="checkbox"/> Yes	<input type="checkbox"/> No

## 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
2 a Did you make any payments that would require you to file Form(s) 1099? .....	<input type="checkbox"/>	<input type="checkbox"/>
b If <b>yes</b> , did you or will you file all required Forms(s) 1099? .....	<input type="checkbox"/>	<input type="checkbox"/>

3 a Enter the ownership percentage (if not 100%) .....		
b If not 100%, are you reporting 100% of the income and expenses? .....	<input type="checkbox"/>	<input type="checkbox"/>

4 Is this a rental property? (If **yes**, answer questions 5 through 11; if **no**, skip to question 12.) .....  Yes  No

5 Did you have personal use of this property or rent it for part of the year at less than fair rental value? .....  Yes  No

6 For all rental properties, **enter the number of days** during 2018 that:

a The property was rented at fair rental value .....		
b The property was used personally or rented at less than fair rental value .....	_____	_____
c You owned the property, if not the entire year .....	_____	_____

7 a Does this rental have multiple living units and you live in one of the units? .....	<input type="checkbox"/>	<input type="checkbox"/>
b If <b>yes</b> , enter percentage of rental use .....	_____	_____

8 Did you actively participate in this property's management during 2018? .....  Yes  No

9 Did you materially participate in this property's management during 2018? .....  Yes  No

10 Do you want to treat this property as non-passive? .....  Yes  No

11 Did this property have unallowed passive losses in 2017? .....  Yes  No

12 Did you dispose of this property in a fully taxable transaction? .....  Yes  No

13 Check this box if some of this investment was **not** at-risk .....  Yes  No

14 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 activity located in a Qualified Disaster Area? .....  Yes  No

Complete ORG51 for Asset Acquisitions and ORG50 for Dispositions.

INCOME	2018	2017
15 Rents or royalties received .....		

- |                          |                              |               |
|--------------------------|------------------------------|---------------|
| <b>* Property Types:</b> | 1 Single family residence    | 5 Land        |
|                          | 2 Multi-family residence     | 6 Royalties   |
|                          | 3 Vacation/short-term rental | 7 Self-rental |
|                          | 4 Commercial                 | 8 Other       |

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

**ORG25**

<b>EXPENSES</b>		<b>2018</b>	<b>2017</b>
	Property location .....		
<b>16</b>	Advertising .....		
<b>17 a</b>	Automobile (complete ORG18 for autos).....		
<b>b</b>	Travel.....		
<b>18</b>	Cleaning and maintenance .....		
<b>19</b>	Commissions.....		
<b>20 a</b>	Mortgage insurance premiums – qualified .....		
<b>b</b>	Other insurance .....		
<b>21</b>	Legal and professional fees .....		
<b>22</b>	Management fees .....		
<b>23 a</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>27 a</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>30 a</b>	Depreciation and Section 179 deduction <b>(Preparer Use Only)</b> .....		
<b>b</b>	Depletion <b>(Preparer Use Only)</b> .....		