

Bend: 541-548-1040
Gresham: 503-665-1040
Portland: 503-281-0919
Redmond: 541-923-1040

Individual Tax Organizer

This is just a guideline!

Even if you don't complete these worksheets, please bring them with you to your tax appointment.

DOFS YOUR MONEY WORK AS HARD AS YOU DO?

Tax laws change every year. Even with no change in your financial situation, your taxes may vary greatly. Sound, professional advice is critical to minimizing your tax bill and keeping more money in your pocket.

How can we help? Our firm provides income tax return preparation for individuals, partnerships, corporations, trusts and estates. Unlike some firms that just "crunch your numbers," we recommend ways to reduce your tax liabilities and improve your overall financial picture, with your personal goals and objectives in mind.

Frequently, our recommendations more than offset the cost of our professional services.

Good tax planning, along with timely action, allows you to do more than prevent future problems. It allows you to seize opportunities and capitalize on your profits. You are guaranteed our personal attention, expertise and experience every step of the way.

Your professional should do more than prepare your tax return. Our firm can also analyze your return to help save you money.

We look forward to working with you, and your friends!

2013	1040	US	Client Information		1
	Tax M		of Oregon Inc. Tax Return Ap	pointment	
	Telepho Fax nur		Date: r: (503) 665-1040 Time:		
	This of	tax organiz your 2013	er will assist you in gathering information necessary for the p tax return. Please add, change, or delete information as app	preparation ropriate.	
CLIEN		MATION			
Filing Status	1=married	filing separate	e and lived with spouse		•
Taxpayer	First name Last name Title/suffix Social secion Occupation Date of bir Date of dea	and initial urity number th (m/d/y)		Filing 1 = Single 2 = Married fi 3 = Married fi 4 = Head of h 5 = Qualifying	ling joint ling separate ousehold
Spouse	First name Last name Title/suffix Social secu Occupation Date of bir Date of dea	urity number th (m/d/y)			
Address	In care of . Street add Apartment City State ZIP code	ress number	OR		
Foreign Address	Postal cod	e			

Series: Client Information

2013	1040	US/OR	Client Information (continued)	1 p2				
Please add, change or delete information for 2013.								
CLIEN	NT INFO	RMATION						
Taxpayer Contact Information	Work phor Work exte Daytime p Mobile pho Pager nur	nnenensionhone (table)one	Dayti 1	me Phone Work Home Mobile				
Spouse Contact Information	E-mail add Home pho Work phor Work exte Daytime p Mobile pho Pager nur Fax numb	dress						
State Information	1=taxpaye 1=spouse	dress er disabled disabled status (table).						
				1 p2				

2013 1040 US/OR Dependents

2

Please add, change or delete information for 2013.

DEPENDENTS

1	Dependent	Dependent	
First name			
Last name			Type of Dependent
Title/suffix			
Date of birth (m/d/y)			1 = Child living w/taxpayer
Social security number			2 = Child not living w/taxpayer 3 = Dependent other than child
Relationship			4 = Head of household only, not a dependent
Months lived at home			5 = Earned income credit only,
Type of dependent (see table)			not a dependent
Earned income credit (see table)			
Claimed by: 1=taxpayer, 2=spouse			
1=disabled			Earned Income Credit
İ	Dependent	Dependent	
First name			1 = When applicable (default) 2 = Student age 19 to 23
Last name			3 = Disabled
Title/suffix			4 = Force 5 = Suppress
Date of birth (m/d/y)			3 – Suppress
Social security number			
Relationship			
Months lived at home			NOTE: If you claim the earned income credit, please provide
Type of dependent (see table)			proof that your child is a res-
Earned income credit (see table)			ident of the U.S. This proof is typically in the form of:
Claimed by: 1=taxpayer, 2=spouse			
1=disabled			 School records or statement Landlord or property man-
i	Dependent	Dependent	agement statement
First name	·	·	3. Health care provider statement
Last name			4. Medical records
Title/suffix			5. Child care provider records6. Placement agency statemen
Date of birth (m/d/y)			Social service records or
Social security number			statement 8. Place of worship statement
Relationship			Indian tribe office statement Figure statement
Months lived at home			10. Employer statement
Type of dependent (see table)			
Earned income credit (see table)			
Claimed by: 1=taxpayer, 2=spouse			NOTE: If your child is disabled, please provide one of the fol-
1=disabled			lowing forms of proof of disa-
	Dependent	Dependent	bility:
First name			1. Doctor statement 2. Other health care provider
Last name			statement
Title/suffix			3. Social services agency or program statement
Date of birth (m/d/y)			program statement
Social security number			
Relationship			
Months lived at home			
Type of dependent (see table)			
Earned income credit (see table)			
Claimed by: 1=taxpayer, 2=spouse			
1=disabled			

		Please ente	er all pertinent 201	3 information.			
DIREC	T DEPOSIT / ELEC	CTRONIC PAY	MENT (3)				
l=direct d	leposit of federal tax refund	I into bank account					
=electror	nic payment of balance due						
	nic payment of estimated ta						
=state di	rect deposit						
BANK	INFORMATION Name of Bank	Percent to Deposit (xx.xx)	Routing Number	Account N	umber	Type of Account (Table 1)	Type of Invest. (Table 2)
-							
2012 F	CTIMATED TAY	1040 FC (C)					
2013 E Federal	STIMATED TAX /	• •	ount Paid	Date Paid	TS	2013 Voucher Am	ount
Overpaym	nent applied from 2012						
lst quarte	r payment						
	er payment						
	er payment						
Ith quarte	er payment	<u> </u>					
,	Additional Estimated						
F	Tax Payments						
Paid with	extension						
State		Amo	ount Paid	Date Paid	TS	2013 Voucher Am	ount
Overpaym	nent applied from 2012						
1st quarte	r payment						
2nd quarte	er payment						
	er payment						
4th quarte	er payment	<u></u>					
P	Additional Estimated Tax Payments						
	,						
Paid with	extension						
ala Witii	CATCHSIOTE		l				
			_				
	1 Type of Accou	ınt	2	Type of Investment			
	1 = Savings 2 = Checking		1 = Checking or savings (de 2 = Taxpayer's IRA (next ye 3 = Spouse's IRA (next yea 4 = Health savings account 5 = Archer MSA	ear limits) 7 = Other r limits) 8 = Taxpav	ell savings accou er's IRA (current s's IRA (current y	t vear limits)	

3, 6

F	Please enter all pertiner	nt 2013 information.		
2013 ESTIMATED TAX / 1040	·ES (6)			¢/V±011
Vultnomah	Amount Paid	Date Paid	TS	\${Y+01} Voucher Amount
verpayment applied from 2012st quarter payment				
nd quarter payment				
rd quarter payment				
th quarter payment				
aid with extension (not later than 4/15/14).	.407	409		
ortland	Amount Paid	Date Paid	T C	\${Y+01} Voucher Amount
Overpayment applied from 2012		Date Faiu	TS	Voucher Amount
st quarter payment				
nd quarter payment				
rd quarter paymentth quarter payment				
		1		
Paid with extension (not later than 4/15/14). APPLICATION OF 2013 OVEF you have an overpayment of 2013 taxes, or	RPAYMENT (7.1)	ded? or applied to	2014 estin	nate?
Paid with extension (not later than 4/15/14). APPLICATION OF 2013 OVEF f you have an overpayment of 2013 taxes, or	RPAYMENT (7.1)	ded?. or applied to	2014 estin	nate?
Paid with extension (not later than 4/15/14). APPLICATION OF 2013 OVEF f you have an overpayment of 2013 taxes, of the properties of the content of the co	RPAYMENT (7.1) do you want the excess refun	ded? or applied to	2014 estin	nate?
Paid with extension (not later than 4/15/14). APPLICATION OF 2013 OVEF If you have an overpayment of 2013 taxes, of their (please explain): 2014 ESTIMATED TAX INFOR	RPAYMENT (7.1) Ito you want the excess refundable RMATION be different from 2013?			
Paid with extension (not later than 4/15/14). APPLICATION OF 2013 OVEF f you have an overpayment of 2013 taxes, of the properties of the	RPAYMENT (7.1) Ito you want the excess refundable RMATION be different from 2013?			
Paid with extension (not later than 4/15/14). APPLICATION OF 2013 OVEF f you have an overpayment of 2013 taxes, of their (please explain): 2014 ESTIMATED TAX INFOR	RPAYMENT (7.1) Ito you want the excess refundable RMATION be different from 2013?			
Po you expect your 2014 withholding to be only you expect your 2014 withholding to be of the color of the col	RPAYMENT (7.1) do you want the excess refundable RMATION be different from 2013? eductions, dependents, etc.:			. Yes No
APPLICATION OF 2013 OVER you have an overpayment of 2013 taxes, of ther (please explain): 2014 ESTIMATED TAX INFOR To you expect your 2014 taxable income to "yes" explain any differences in income, d	RPAYMENT (7.1) It is a second of the excess refundable with the excess ref			. Yes No
Paid with extension (not later than 4/15/14). APPLICATION OF 2013 OVEF If you have an overpayment of 2013 taxes, of their (please explain): 2014 ESTIMATED TAX INFOR 20 you expect your 2014 taxable income to f "yes" explain any differences in income, d	RPAYMENT (7.1) It is a second of the excess refundable with the excess ref			. Yes No

ORGANIZER Wages, Pensions, Gambling Winnings 10, 13.1, 13.2 US 2013 1040 Please enter all pertinent 2013 amounts & attach all W-2, W-2G and 1099-R forms. Last year's amounts are provided for your reference. WAGES, SALARIES, TIPS (10) 1=retirement Tax Withheld Wages, Tips, plan (Box 13) Other 2012 Social No. Name of Employer (Box c) Federal Medicare State Local Compensation Wages Security (Box 4) (Box 2) (Box 6) (Box 17) (Box 19) =spouse (Box 1) PENSIONS, IRA DISTRIBUTIONS (13.1) Distribution code #2 Tax Withheld Value of Distribution code #1 Gross Taxable 2012 all IRAs No. Name of Payer Distribution Amount (Box 2a) =IRA/SEP/SIMPLE Federal State Distribution (Box 1) (Box 4) (Box 12) 12/31/13 =spouse **GAMBLING WINNINGS (W-2G) (13.2)** Tax Withheld **Gross Winnings** 2012 No. Name of Payer 1=spouse Winnings (Box 1) Federal (Box 4) State (Box 15) **GAMBLING LOSSES & WINNINGS (NON W-2G)** (13.2)2013 Amount 2012 Amount Total gambling losses

10, 13.1, 13.2

Winnings not reported on Form W-2G.....

2013	1040	US	Interest & Dividend Income	11, 12
	10-10		I IIICICIC CA DIVIGCIIA IIICOIIIC	

Please enter all pertinent 2013 amounts & attach all 1099-INT, 1099-OID and 1099-DIV forms. Last year's amounts are provided for your reference.

INTEREST INCOME (11)

			Interest Income	!	Tax-Exem	pt Interest	Farly	
Name of Payer (also enter SSN & address for seller-financed mortgage)	1=taxpayer 2=spouse	Banks, S&Ls, C/Us, etc. (Box 1)	Seller- Financed Mtg. (Box 1)	U.S. Bonds, T-Bills (Box 3)	Total Municipal Bonds	In-state Municipal Bonds	Withdrawal Penalty (Box 2)	2012 Interest
	Name of Payer (also enter SSN & address for seller-financed mortgage)	Name of Payer (also enter SSN & address for seller-financed mortgage) 1=taxpayer 2=spouse	Name of Paver	Name of Paver	Name of Payer (also enter SSN & address for seller-financed mortgage) 1=taxpayer 2=spouse 1=taxpayer 2=spouse Banks., S&ler-Financed Mtg. (Box 1) T-Bills (Box 3) 1=taxpayer 2=spouse S&l.s, C/Us, etc. (Box 1) T-Bills (Box 3) 1=taxpayer 2=spouse Sal.s, C/Us, etc. (Box 1) T-Bills (Box 3) 1=taxpayer 2=spouse Sal.s, C/Us, etc. (Box 1) T-Bills (Box 3) 1=taxpayer 2=spouse Sal.s, C/Us, etc. (Box 1) T-Bills (Box 3) 1=taxpayer 2=spouse Sal.s, C/Us, etc. (Box 1) T-Bills (Box 3) 1=taxpayer 2=spouse Sal.s, C/Us, etc. (Box 1) T-Bills (Box 3) 1=taxpayer 2=spouse Sal.s, C/Us, etc. (Box 1) T-Bills (Box 3) 1=taxpayer 2=spouse T-Bills (Box 3)	Name of Paver	Name of Payer	Name of Payer Larry

DIVIDEND INCOME (12)

				Dividend	Income		Tax-Exem	pt Interest		
No.	No. Name of Payer		Total Ordinary Dividends (Box 1a)	Qualified Dividends (Box 1b)	Total Capital Gain Distrib. (Box 2a)	U.S. Bonds (% or amt.)	Total Municipal Bonds	In-state Muni-bonds (% or amt.)	Foreign Tax Paid (Box 6)	2012 Dividends
I										

11, 12

			l	
2013	1040	US	Miscellaneous Income	14.1

Please enter all pertinent 2013 amounts and attach all 1099-MISC, SSA-1099, and RRB-1099 forms. Last year's amounts are provided for your reference.

MISCELLANEOUS INCOME	2013 A	mount	2012 A	mount
	Taxpayer	Spouse	Taxpayer	Spouse
Social security benefits (SSA-1099, box 5)				-
Medicare premiums paid (SSA-1099)				
Tier 1 RR retirement benefits (RRB-1099, box 5)				
1=lump-sum election for SS benefits				
Alimony received				
Taxable scholarships and fellowships				
Jury duty pay				
Household employee income not on W-2				
Excess minister's allowance				
Alaska permanent fund dividends				
Income from rental of personal property				
Income subject to S/E tax:				
Other income (1099-MISC, box 3, 8)				
Cultil moome (1933 maes, box e, e)				
L_				
TAX WITHHELD (not entered elsewhere)				
Federal income tax withheld				
State income tax withheld				
Local income tax withheld				
Local income tax withingly				

14.1

2013	10/10	115	Itemized Deductions	25
ZUI 5	1040	l US	Hemizea Deauctions	23

Please enter all pertinent 2013 amounts and attach all 1098 forms. Last year's amounts are provided for your reference.

MEDICAL AND DENTAL EXPENSES

NOTE:Enter self-employed health insurance premiums on Sheet 24 and Medicare insurance premiums on Sheet 14.	2013 Amount	TS	2012 Amount
Prescription medicines and drugs			
Doctors, dentists and nurses			
Hospitals and nursing homes			
Insurance premiums not entered elsewhere (excl. LT care & amts. paid w/pre-tax dollars)			
Long-term care premiums - taxpayer			
Long-term care premiums - spouse			
Insurance reimbursement (enter as a positive number)			
Lodging and transportation:			
Out-of-pocket expenses			
Medical miles driven			
Other medical and dental expenses:			
TAXES PAID (State and local withholding and 2013 estimates are a	utomatic.)		
State income taxes - 1/13 payment on 2012 state estimate			
State income taxes - paid with 2012 state return extension			
State income taxes - paid with 2012 state return			
State income taxes - paid for prior years and/or to other state			
City/local income taxes - 1/13 payment on 2012 city/local estimate			
City/local income taxes - paid with 2012 city/local extension			
City/local income taxes - paid with 2012 city/local return			
SALES AND USE TAXES PAID			_
Г			
State and local sales taxes (except autos and special items)			
Use taxes paid on 2013 purchases. Use taxes paid with 2012 state return.			
Sales tax on autos not included above			
Sales tax on boats, aircraft, other special items			
Sales tax oil boats, aircraft, other special items			
OTHER TAXES PAID			
Real estate taxes - principal residence:			
Г			
Real estate taxes - property held for investment			
Personal property taxes (including auto fees in some states. Provide a copy of tax notice)			
Foreign income taxes			
Other taxes:		1 1	

25

13	1040	US	Itemized Deductions (co	ontinued)			25
INTI	Please e	•	rtinent 2013 amounts. Last year's a	amounts are provide	d for yo	our reference.	
			noints (Pay 2) reported on Form 1000.	2013 Amount		2012 Amo	
поппе	mortgage int	(DOX 1) and	points (Box 2) reported on Form 1098:	2013 Amount	TS	2012 Amou	ını
	Home mortga	ge interest <u>n</u>	ot reported on Form 1098:				
	Payee's name						
	Payee's SSN						
	Payee's stree	<u> </u>					
	Payee's city Payee's state						
	Amount paid.						
	not reported		<u></u>				
	·						
-	-	•	n post 12/31/06 contracts (Box 4)				
Invest	ment interest	(interest on	margin accounts):		1 1		
Pacci	un interest						
			included above (6251).				
NOTE	For these ty	pes of loans	er than to buy, build, or improve your main lalso provide the dates and lives of the loans	iorne are deductible over s.	the life o	i the mortgage.	
$C \wedge C$	SH CONT	DIRIITIO	NC				
	E: No deductio	n is allowed	for cash or check contributions unless the do the name of the organization, contribution of	onor maintains a bank red date(s), and contribution a	cord, or a amount(s)	written communi	cation
		•	d other charitable organizations (50% limitar	ion):			
C	ontributions by	cash or che	ck:				
					++		
			oocket)				
Νι	umber of char	itable miles.					
			al societies, nonprofit cemeteries, and certain	n private nonoperating fou	undations	(30% limitation):	
Co	ontributions by	cash or che	ck:		1 1		
					++		
					++		
Vo	olunteer exper	nses (out-of-	oocket)				
Nι	umber of char	itable miles.					

13	1040	US	Itemized Deduction	ons (continued)		25 ,
	Please e	nter all pe	ertinent 2013 amounts. Las	st year's amounts are provide	d for you	ur reference.
	ICASH C		_			
NOTE	:Use Sheet 26 that are not i	if total non n <i>good</i> used	ncash contributions are over \$500, discondition or better. In addition,	. No deduction is allowed for contribute a deduction for any item with minima	tions of clo Il monetary	othing and household item value may be denied.
50% li	mitation (see	above):		2013 Amount	TS	2012 Amount
-						
						
30% li	mitation (see	above):				
•						
-						
30% d	apital gain pro	operty (aifts	of capital gain property to 50% li	imit oras.):		
	apital galli pil	op 0. 13 (gto				
20% c	apital gain pro	operty (gifts	of capital gain property to non-50	0% limit orgs.):		
•						
N/IC	0511 411	-OUC DI	EDUCTIONS			
			EDUCTIONS (subject to 2%	•	1 1	
profes	unreimbursed sional subscri	employee options, emp	expenses (uniforms and protective ployment agency fees, and certain	e clotning, i edu. expen <mark>ses):</mark>		
•						
•						

Tax return preparation fee		
Safe deposit box rental		
Miscellaneous deductions (2% AGI) (certain legal and accounting fees, and custodial fees):		

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2013	1040	US	Itemized Deductions (continued)	25 n4
	IUTU		i ilcinizca beauchons (continuea)	

Please enter all pertinent 2013 amounts. Last year's amounts are provided for your reference.

OTHER MISCELLANEOUS DEDUCTIONS	2013 Amount	TS	2012 Amount
Estate tax, section 691(c)			
Other miscellaneous deductions:			
	_		
	_		
	_		
	_		
	_		
	<u> </u>	++	
	_		
		++	
-			
	_		
	_	++	
	_		

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2013 1040 US Itemized Deductions (continued) 25 p5

If either of the following conditions below apply to you, your home mortgage interest deduction may need to be limited and the input section provided below should be completed. If neither condition applies, enter home mortgage interest amounts on organizer sheet 25 p2.

- 1. Total home equity debt exceeded \$100,000 at any time during 2013 (\$50,000 if married filing separate). For this purpose, home equity debt is defined as any mortgages taken out after October 13, 1987 in which the proceeds were used for purposes other than to buy, build, or improve your home. An example of this type of mortgage is a home equity loan use to pay off credit card bills, buy a car, or pay tuition.
- 2. Total home acquisition debt exceeded \$1,000,000 at any time during 2013 (\$500,000 if married filing separate). For this purpose, home acquisition debt is defined as any mortgages taken out after October 13, 1987 in which the proceeds were used to buy, build, or improve your home.

NOTE: When completing the input section below, grandfather debt represents loans taken out prior to October 14, 1987.

Please enter all pertinent 2013 amounts and attach all 1098 forms. Last year's amounts are provided for your reference.

	2013 Amount	TS	2012 Amount
air market value of the property on the date that the last debt was secured			
ome acquisition and grandfather debt on the date that the last debt was secured			
OAN INFORMATION			
pan #1			
Lender's name			
Form (see table)			
Number of form			
1=taxpayer, 2=spouse, blank=joint			
Interest paid			
Points paid			
Total principal paid			
Lump sum principal payment (if paid off)			
Months outstanding (if not 12)			
Home acquisition debt balance - beginning of year			
Home acquisition debt borrowed in 2013			
Home equity debt balance - beginning of year			
Home equity debt borrowed in 2013			
Grandfather debt balance - beginning of year			
oan #2			
Lender's name			
Form (see table)			
Number of form			
1=taxpayer, 2=spouse, blank=joint			
Interest paid			
Points paid			
Total principal paid			
Lump sum principal payment (if paid off)			
Months outstanding (if not 12)			
Home acquisition debt balance - beginning of year			
Home acquisition debt borrowed in 2013			
Home equity debt balance - beginning of year			
Home equity debt borrowed in 2013			
Grandfather debt balance - beginning of year			

2 = Business use of home

3 = Schedule E

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ORGANIZER US **Miscellaneous Questions** 2013 1040 Please answer these questions and provide ALL W-2, 1099 and K-1 forms received! Yes No MISC Would you like to receive this printed organizer next year? If so; via Email? Would you like to opt out of receiving a copy of your completed tax return on CD? Would you like to opt out of a prescheduled tax appointment next year? Would you like to opt-out of our no-charge Electronic Filing service? We will automatically prepare your return for electronic filing unless you opt-out. (If you do not opt out at this time and opt out after your return is complete, there will be a \$25 charge to change your return to a paper return.) Would you like to have your refund direct deposited into your bank account? If so, please provide a voided check, if you did not provide one to our office last year. **Can** you be claimed as a dependent on another person's tax return? Did any of your dependents have income? If so, list amount earned, including interest and dividends, next to each dependent named on sheet 2. INCOME Did you receive unreported tip income of \$20 or more in any month? Did you cash any Series EE U.S. savings bonds issued after 1989 and pay qualified higher education expenses for yourself, spouse, or dependents? Did you have any foreign income or pay any foreign taxes? **PURCHASES, SALES AND DEBT** Did you start a business or farm or purchase rental or royalty property? Did you have a real estate transaction? If so, provide settlement statement. Did anyone owe you money which had become uncollectible? If so, provide details of debt, amounts and dates. **RETIREMENT PLANS** Did you make a contribution to an IRA, SEP, SIMPLE, Qualified Plan, etc. other than what was reported on your W2 form? If so, list the following information: Owner: _____ Tax year: ____ Date: ____ Amount: ____ Owner: _____ Tax year: ____ Date: ____ Amount: ____

ORGANIZ	ORGANIZER				
2013	1040	US	Miscellaneous Questions		
	Yes	No	EDUCATION		
			Did you, your spouse, or a dependent incur any <u>tuition expenses</u> that are required to attend a college, university, or vocational school?		
			Did you fund a Qualified College Savings Plan? If so, please provide the amount and if the plan is a Qualified Oregon plan.		
			ITEMIZED DEDUCTIONS		
			Did you incur a loss because of <u>damaged or stolen property</u> , in which your out of pocket expenses exceeded 10% of your income? If so, provide details of the loss.		
			Did you work out of town or use your car on the job (other than to/from work) without reimbursement? If so, provide the costs and/or mileage.		
			Did you purchase a <u>business auto</u> that has a gross vehicle weight greater than 6,000 pounds?		
			Did you purchase business <u>fuel for off-road use</u> , on which you paid road tax? List # of gallons:		
			Did you incur job hunting expenses? If so, how much? \$		
			SOLE PROPRIETORS ONLY		
			Do you need our office to prepare your <u>W-2's and/or 1099's</u> ? If so, please provide details prior to Jan. 26th.		
			Do you have income derived within the following areas? If so, list the GROSS INCOME amount derived inside each area: \$ In City of Portland \$ In Multnomah County, OUT of City of Portland \$ In Clackamas and Washington Counties \$ In Lane County Transit District \$ In Tri-Met Districts \$ In Other states (outside Oregon). Specify states.		
	_		MISCELLANEOUS		
			Do you and your spouse want to <u>allocate \$3</u> to the Presidential Election Campaign Fund?		
			Did you pay a <u>premature withdrawal penalty</u> , such as with a CD account? If so, amount: \$		
			Do you have child day care expenses? If so, provide details of providers and amounts.		

ORGANIZER US **Miscellaneous Questions** 2013 1040 No Yes Was your home rented out or used for business? If so, provide total utility and insurance costs. Did you incur moving expenses due to a job change? If so, list expenses here: Did you hire the services of any household employee, who was not independently employed for others, but was employed by you? Were you notified or audited by either the IRS or the State taxing agency? Did you or your spouse make any gifts that total more than \$14,000? Do you rent, are over 58, have income of less than \$10,000 & assets less than \$25,000? Or, rent, are over 65, and have income of less than \$10,000? Do you have a federally qualified disabled child and an IEP plan in place at school for that child? If so, the child's name: Did you pay a political contribution? If so, how much \$ Did you make any energy efficient improvements to your home? If so, provide the amounts: Insulation Costs \$ Exterior Windows Metal Roofing Exterior Doors Furnace Circulation Furnace Fan \$ Did you improve your home using solar, wind, geothermal or fuel cell energy source? If so, provide amounts. Did you purchase any energy efficient appliances that came with a special Oregon credit? If so, please provide the credit information/postcard, indentifying credit. Did you purchase a new alternative energy vehicle? If so, provide car type and price if for electric or plug-in hybrid vehicle. Do you have an interest in any of these areas? () accounting services () CD alternatives () estate planning () college funding options () getting married tips () insurance planning () small business tips () IRA tips & strategies () retirement account rollover () mortgage loan services () retirement planning