

THOMPSON PRICE SCOTT ADAMS & CO PA  
SAMPLE TAX ORGANIZER FOR MINISTERS



**Organizer Mailing Slip**

# General Information

	<b>Taxpayer</b>	<b>Spouse</b>
First Name . . . . .	<input type="text"/>	<input type="text"/>
Middle Initial . . . . .	<input type="text"/>	<input type="text"/>
Last Name . . . . .	<input type="text"/>	<input type="text"/>
Suffix . . . . .	<input type="text"/>	<input type="text"/>
Social Security Number . . . . .	<input type="text"/>	<input type="text"/>
Date of Birth . . . . .	<input type="text"/>	<input type="text"/>
Date of Death . . . . .	<input type="text"/>	<input type="text"/>
Check ("X") which phone number to list on return.		
Home Phone . . . . .	<input type="checkbox"/> <input type="text"/>	<input type="checkbox"/> <input type="text"/>
Work Phone . . . . .	<input type="checkbox"/> <input type="text"/>	<input type="checkbox"/> <input type="text"/>
Cell Phone . . . . .	<input type="checkbox"/> <input type="text"/>	<input type="checkbox"/> <input type="text"/>
Fax Number . . . . .	<input type="checkbox"/> <input type="text"/>	<input type="checkbox"/> <input type="text"/>
Legally Blind . . . . .	<input type="checkbox"/>	<input type="checkbox"/>
Totally Disabled . . . . .	<input type="checkbox"/>	<input type="checkbox"/>
Claimed as a Dependent . . . . .	<input type="checkbox"/>	<input type="checkbox"/>
Presidential Election Fund (\$3) . . . . .	<input type="checkbox"/>	<input type="checkbox"/>
Occupation . . . . .	<input type="text"/>	<input type="text"/>
E-mail address . . . . .	<input type="text"/>	<input type="text"/>
State of Residence as of 12/31 . . . . .	<input type="text"/>	<input type="text"/>
County of Residence as of 12/31 . . . . .	<input type="text"/>	<input type="text"/>
School District as of 12/31 . . . . .	<input type="text"/>	<input type="text"/>
Sales tax rate of locality in 2013 . . . . .	<input type="text"/> % to <input type="text"/>	<input type="text"/> % to <input type="text"/>
If Part Year, Period of Residency . . . . .	<input type="text"/> to <input type="text"/>	<input type="text"/> to <input type="text"/>

## Filing Status

Status on 2012 return :

Status as of 12/31/2013 :  1 Single  
Enter ("X") in the box  2 Married filing joint  
 3 Married filing separately  
(Enter spouse's name and SSN above)

4 Head of Household Non-dependent name: \_\_\_\_\_  
Non-dependent SSN: \_\_\_\_\_

5 Qualifying widow(er) with minor child Year spouse died \_\_\_\_\_

## Address

Street \_\_\_\_\_ Apt/Suite : \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

If address is in a foreign country, enter that country . . . \_\_\_\_\_

Foreign province/county . . . \_\_\_\_\_ Foreign postal code \_\_\_\_\_

If a bona fide resident of a U.S. territory, enter territory . . . \_\_\_\_\_

Name \_\_\_\_\_

SSN \_\_\_\_\_

### Questions

If any of the following items apply to you or your spouse, please "X" the appropriate box and if possible, include details.

#### Basic Information

Yes No

- 1 Did your marital status change since last year?
- 2 Were you in a Registered Domestic Partnership, civil union or same-sex marriage during 2013?
- 3 Are there any changes in your dependents from last year?
- 4 Did you have any children under 19 (or 24 if a full time student) who received more than \$1,000 in investment income?
- 5 Are all your dependents either US residents or citizens?
- 6 Did you provide over half of the support for someone you aren't claiming as a dependent?
- 7 Are you being claimed (or are eligible to be claimed) as a dependent on anyone else's return?
- 8 Were either you or your spouse in the military or National Guard?
- 9 Did you purchase or sell your principal residence?
- 10 Have you been notified by the IRS of changes to a prior year's return, or received any other tax correspondence?
- 11 Were there any changes to a prior year's income, deductions, or credits?
- 12 Did you make gifts of more than \$14,000 to any one person?
- 13 Did you file Form 8839, Adoption Credit, in a previous year or incur adoption expenses in 2013?
- 14 Did you claim a First-time Homebuyer Credit for a home purchased in 2008?
- 15 Did you have a disposition or change in use of your main home for which you claimed the First-time Homebuyer Credit?
- 16 Do you want to e-file your return?
- 17 If you are due a refund, how do you want to receive it?
  - Check sent to you in the mail       Money Clip Visa Prepaid Card
  - Apply to next year's estimates       Other quick refund via a bank product
  - Direct deposit (please provide a voided blank check)      Type of account:  Checking       Savings

If you owe taxes, how do you want to pay them?

  - Paper check sent with my return       Credit card       Installment Agreement
  - Direct debit from my bank account (please provide a voided blank check)      Type of account:  Checking       Savings
- 18 Do you want to allow your tax preparer to discuss this year's return with the IRS?  
If no, enter another person (if desired) to be allowed to discuss this return with the IRS:  
 Designee's name \_\_\_\_\_ Phone Number \_\_\_\_\_ Personal identification Number (5 digit PIN) \_\_\_\_\_

#### Income

Yes No

- 19 Did you have an interest in or signature authority over a financial account in a foreign country?
- 20 Were you the grantor of or transferor to a foreign trust?
- 21 Did you receive income from a foreign source or pay taxes to a foreign government?
- 22 Did you receive tip income NOT reported to your employer?
- 23 Did you barter your services for goods or services from someone else?
- 24 Did you receive any tax-exempt income, such as interest or dividends from municipal bonds or a mutual fund account?
- 25 Did you make a loan to someone at an interest rate below market rate?
- 26 Did you receive, or expect to receive, a Schedule K-1 (or substitute K-1) from a trust, estate, partnership, or S corp?
- 27 Did you cash in any U.S. savings bonds?
- 28 Did you own an interest in a Real Estate Mortgage Investment Conduit (REMIC)?
- 29 Did you itemize your deductions in a previous year and receive a state or local refund, or a refund of any other deduction you itemized, in 2013? (If yes, attach Form 1099-G)
- 30 Did you receive disability income?
- 31 Do you have gambling winnings? (If yes, be sure to include in gambling expenses)
- 32 Did you receive any unemployment benefits?
- 33 During 2013, did you receive payments from a Long-Term Care insurance contract?
- 34 Did you receive employer-provided adoption benefits for a previous year?
- 35 Did you receive any distributions from a retirement plan? (If Yes, attach all 1099-Rs)
- 36 Did you "roll over" a retirement plan distribution into another plan?
- 37 Did you receive Social Security benefits?

**Questions (Cont.)**

If any of the following items apply to you or your spouse, please "X" the appropriate box and if possible, include details.

- | Yes                      | No                       |  |
|--------------------------|--------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> | 38 Did you convert a traditional IRA to a Roth IRA?                              |
| <input type="checkbox"/> | <input type="checkbox"/> | 39 Did you exchange any securities or investments for something other than cash? |
| <input type="checkbox"/> | <input type="checkbox"/> | 40 Do you have any short sales, commodity sales, or straddles?                   |
| <input type="checkbox"/> | <input type="checkbox"/> | 41 Did you receive Form 2439?  |
| <input type="checkbox"/> | <input type="checkbox"/> | 42 Did you buy or sell any bonds?  |
| <input type="checkbox"/> | <input type="checkbox"/> | 43 Did you receive stock from a stock bonus plan with your employer?             |
| <input type="checkbox"/> | <input type="checkbox"/> | 44 Did you sell any other personal assets at a gain?                             |
| <input type="checkbox"/> | <input type="checkbox"/> | 45 Did you sell any real estate (other than your home) during the year?          |
| <input type="checkbox"/> | <input type="checkbox"/> | 46 Did you sell any assets using the installment method?                         |
| <input type="checkbox"/> | <input type="checkbox"/> | 47 Did you receive proceeds from a prior year installment sale?                  |
| <input type="checkbox"/> | <input type="checkbox"/> | 48 Did you purchase a rental property?   |
| <input type="checkbox"/> | <input type="checkbox"/> | 49 Did you exchange any property for other property?                             |
| <input type="checkbox"/> | <input type="checkbox"/> | 50 Did you receive any income not reported in this Organizer?                    |

**Business and Rental Property Income**

- | Yes                      | No                       |  |
|--------------------------|--------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> | 51 If you own rental property, do you qualify as a Real Estate Professional? |
| <input type="checkbox"/> | <input type="checkbox"/> | 52 Did you start or acquire a new business?                                  |
| <input type="checkbox"/> | <input type="checkbox"/> | 53 Did you sell any part of an existing business, or sell business assets?   |
| <input type="checkbox"/> | <input type="checkbox"/> | 54 Did you cease operating any business or rental property?                  |
| <input type="checkbox"/> | <input type="checkbox"/> | 55 Did you remove any of your business assets for personal use?              |

**Business and Rental Property Deductions**

- | Yes                      | No                       |  |
|--------------------------|--------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> | 56 Did you use part of your home for business purposes?  |
| <input type="checkbox"/> | <input type="checkbox"/> | 57 Did you make any contributions to a Keogh or a self-employed SEP plan for 2013?                     |
| <input type="checkbox"/> | <input type="checkbox"/> | 58 Do you pay for any health or long term care insurance through your business?                        |
| <input type="checkbox"/> | <input type="checkbox"/> | 59 If you or your spouse are self-employed, are either of you covered under an employer's health plan? |
| <input type="checkbox"/> | <input type="checkbox"/> | 60 Did you purchase any furniture or equipment for your business?                                      |

**Other Deductions**

- | Yes                      | No                       |   |
|--------------------------|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | 61 Did you make any contributions, or plan to make contributions, to a traditional or Roth IRA for 2013?          |
| <input type="checkbox"/> | <input type="checkbox"/> | 62 Did you make any contributions to HSA (Health Savings Account) in 2013?  |
| <input type="checkbox"/> | <input type="checkbox"/> | 63 Did you use your car on the job (other than to and from work)?   |
| <input type="checkbox"/> | <input type="checkbox"/> | 64 Did you work out of town for part of the year?   |
| <input type="checkbox"/> | <input type="checkbox"/> | 65 Did you incur any travel and entertainment expenses for business purposes?                                     |
| <input type="checkbox"/> | <input type="checkbox"/> | 66 Did you pay expenses for the care of your child or other dependent so you could work?                          |
| <input type="checkbox"/> | <input type="checkbox"/> | 67 Did you lose property or have damage to a property due to a casualty, theft, or condemnation?                  |
| <input type="checkbox"/> | <input type="checkbox"/> | 68 Did any security become worthless during 2013?   |
| <input type="checkbox"/> | <input type="checkbox"/> | 69 Did any debts become uncollectible during 2013?  |
| <input type="checkbox"/> | <input type="checkbox"/> | 70 Did you purchase a 'clean fuel' or electric hybrid vehicle in 2013?  |
| <input type="checkbox"/> | <input type="checkbox"/> | 71 Did you make energy efficient improvements to your home or purchase any energy-saving property during 2013?    |
| <input type="checkbox"/> | <input type="checkbox"/> | 72 Did you contribute less than an entire interest in any property to charity?                                    |
| <input type="checkbox"/> | <input type="checkbox"/> | 73 Did you refinance a mortgage or take out a home equity loan during 2013?                                       |
| <input type="checkbox"/> | <input type="checkbox"/> | 74 Did you incur moving expenses during the year due to a change of employment?                                   |
| <input type="checkbox"/> | <input type="checkbox"/> | 75 Did you pay any educational tuition or fees for you or a dependent?  |
| <input type="checkbox"/> | <input type="checkbox"/> | 76 Did you pay any student loan interest?   |
| <input type="checkbox"/> | <input type="checkbox"/> | 77 Did you make any federal or state estimated payments?  |
| <input type="checkbox"/> | <input type="checkbox"/> | 78 Did you have a certain trade or business from which you figured your domestic production activities deduction? |





Name \_\_\_\_\_

SSN \_\_\_\_\_

# Wages

## W-2 Information

		Box 1 Wages, Tips Other Comp	Box 2 Federal Income Tax Withheld	Box 16 State Wages	Box 17 State Income Tax Withheld
"X" if spouse	Employer's Name				
	1				
	2				
	3				
	4				
	5				
	6				
	7				
	8				
	9				
	10				
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	55				

Name \_\_\_\_\_

SSN \_\_\_\_\_

### Retirement Income

#### 1099-R Information

"X" if spouse		Payer's Name	Box 1 Gross Distribution	Box 4 Federal Income Tax Withheld	Box 14 State Distribution	Box 12 State Income Tax Withheld
<input type="checkbox"/>	1					
<input type="checkbox"/>	2					
<input type="checkbox"/>	3					
<input type="checkbox"/>	4					
<input type="checkbox"/>	5					
<input type="checkbox"/>	6					
<input type="checkbox"/>	7					
<input type="checkbox"/>	8					
<input type="checkbox"/>	9					
<input type="checkbox"/>	10					
<input type="checkbox"/>	11					
<input type="checkbox"/>	12					
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<input type="checkbox"/>	46					
<input type="checkbox"/>	47					
<input type="checkbox"/>	48					
<input type="checkbox"/>	49					
<input type="checkbox"/>	50					
<input type="checkbox"/>	51					
<input type="checkbox"/>	52					
<input type="checkbox"/>	53					
<input type="checkbox"/>	54					
<input type="checkbox"/>	55					



Name \_\_\_\_\_

SSN \_\_\_\_\_

**Interest Income**

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

\* F/S/J - enter ownership (F)iler, (S)pouse, or (J)oint.

*F/S/J	Payer	Taxable Interest Income		Tax Exempt Interest		Specified Priv Act Interest	
		Current Year Amount	Prior Year Amount	Current Year Amount	Prior Year Amount	Current Year Amount	Prior Year Amount
	1						
	2						
	3						
	4						
	5						
	6						
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	11						
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	26						

**Dividend Income**

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

\* F/S/J - enter ownership (F)iler, (S)pouse, or (J)oint.

*F/S/J	Payer	Ordinary Dividends		Qualified Dividends		Capital Gains	
		Current Year Amount	Prior Year Amount	Current Year Amount	Prior Year Amount	Current Year Amount	Prior Year Amount
	1						
	2						
	3						
	4						
	5						
	6						
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	10						
	11						
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	24						
	25						
	26						

Name \_\_\_\_\_

SSN \_\_\_\_\_

### Self-Employed Business Income and Expenses (Schedule C-EZ)

Enter "X" in one box:  Filer  Spouse

#### General Information

- 1 Federal employer identification number \_\_\_\_\_ (do not enter Social Security Number)
- 2 Principal business or profession . . . \_\_\_\_\_
- 3 Business name . . . . . \_\_\_\_\_
- 4 Business address . . . . . \_\_\_\_\_  
 City, state, zip . . . . . \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

#### Business Income

\* Report statutory income as W-2 income.

- 5 Income reported on 1099 MISC . . . . . 5  
 Gross receipts or sales not reported on Form 1099 or Form W-2
- 6 \_\_\_\_\_ 6
- 7 \_\_\_\_\_ 7
- 8 \_\_\_\_\_ 8
- 9 \_\_\_\_\_ 9

Current Year Amount	Prior Year Amount

#### Business Expenses

- 10 Business meals and entertainment . . . . . 10
- 11 Enter "X" in the box if subject to DOT hours of service limits . . . . . 11
- 12 \_\_\_\_\_ 12
- 13 \_\_\_\_\_ 13
- 14 \_\_\_\_\_ 14
- 15 \_\_\_\_\_ 15
- 16 \_\_\_\_\_ 16

Current Year Amount	Prior Year Amount
<input type="checkbox"/>	<input type="checkbox"/>

Name \_\_\_\_\_

SSN \_\_\_\_\_

Business \_\_\_\_\_

**Vehicle Information (Schedule C)**

**Vehicle 1 -**

**Vehicle 2 -**

	<b>Current Year Amount</b>	<b>Prior Year Amount</b>	<b>Current Year Amount</b>	<b>Prior Year Amount</b>
1 Date vehicle was placed in service . . . 1				
2 Cost of vehicle . . . . . 2				
3 Total miles driven for the year . . . . . 3				
4 Business miles driven during the year . . . 4				
5 Commuting miles included on line 3 . . . 5				
6 Parking fees and tolls . . . . . 6				
7 Vehicle Interest . . . . . 7				
8 Vehicle Personal Property tax . . . . . 8				

**Actual Expenses**

9 Gasoline, oil and repairs . . . . . 9				
10 Vehicle Insurance . . . . . 10				
11 Vehicle registration fees . . . . . 11				
12 Vehicle lease or rental . . . . . 12				
13 _____ 13				

**Vehicle 3 -**

**Vehicle 4 -**

	<b>Current Year Amount</b>	<b>Prior Year Amount</b>	<b>Current Year Amount</b>	<b>Prior Year Amount</b>
1 Date vehicle was placed in service . . . 1				
2 Cost of vehicle . . . . . 2				
3 Total miles driven for the year . . . . . 3				
4 Business miles driven during the year . . . 4				
5 Commuting miles included on line 3 . . . 5				
6 Parking fees and tolls . . . . . 6				
7 Vehicle Interest . . . . . 7				
8 Vehicle Personal Property tax . . . . . 8				

**Actual Expenses**

9 Gasoline, oil and repairs . . . . . 9				
10 Vehicle Insurance . . . . . 10				
11 Vehicle registration fees . . . . . 11				
12 Vehicle lease or rental . . . . . 12				
13 _____ 13				



Name \_\_\_\_\_

SSN \_\_\_\_\_

**Miscellaneous Income**

	Filer			Spouse	
	Current Year Amount	Prior Year Amount		Current Year Amount	Prior Year Amount
1 Refund from state . . . . .			1		
2 Unemployment compensation . . . . .			2		
3 Prizes and awards . . . . .			3		
4 Scholarships and fellowships . . . . .			4		
5 Bartering income . . . . .			5		
6 Fees received for jury duty . . . . .			6		
7 Income from rental of personal property, if not in the business of renting such property . . . . .			7		
8 Precinct election board duty . . . . .			8		
9 Alaska Permanent Fund Dividends . . . . .			9		
10 Net operating loss carryover (negative no.) . . . . .			10		
11 Canceled debts . . . . .			11		
12 _____			12		
13 _____			13		
14 _____			14		
15 Other income not provided for in this Organizer			15		

**Adjustments to Income**

\* F/S/J - enter ownership (F)iler, (S)pouse, or (J)oint.

*F/S/J				Current Year Amount	Prior Year Amount
<input type="checkbox"/>	1	Educator expenses . . . . .	1		
<input type="checkbox"/>	2	Student loan interest . . . . .	2		
<input type="checkbox"/>	3	Health Savings account deduction . . . . .	3		
<input type="checkbox"/>	4	Moving expenses . . . . .	4		
<input type="checkbox"/>	5	Self-employed SEP, SIMPLE, or other qualified plans . . . . .	5		
<input type="checkbox"/>	6	Penalty on early withdrawal of savings . . . . .	6		
<input type="checkbox"/>	7	Tuition and fees . . . . .	7		

**Other Adjustments to Income**

\* F/S/J - enter ownership (F)iler, (S)pouse, or (J)oint.

*F/S/J				Current Year Amount	Prior Year Amount
<input type="checkbox"/>	1	Performing-arts-related expenses . . . . .	1		
<input type="checkbox"/>	2	Foreign housing deduction . . . . .	2		
<input type="checkbox"/>	3	Jury duty pay given to your employer . . . . .	3		
<input type="checkbox"/>	4	Reforestation amortization . . . . .	4		
<input type="checkbox"/>	5	Repayment of sub-pay under the Trade Act of 1974 . . . . .	5		
<input type="checkbox"/>	6	Contributions to Section 501(c)(18)(D) pension plans . . . . .	6		
<input type="checkbox"/>	7	Attorney fees and court costs paid for actions settled or decided after October 22, 2004 involving unlawful discrimination claims, but only to the extent of gross income from such actions. . . . .	7		
<input type="checkbox"/>	8	Attorney fees and court costs you paid in connection with an award from the IRS for information you provided that helped the IRS detect tax law violations, up to the the amount of the award includible in your gross income . . . . .	8		
<input type="checkbox"/>	9	Employee business expenses of fee-basis state or local government officials . . . . .	9		
<input type="checkbox"/>	10	Expenses from the rental of personal property but were not in the business of renting such property . . . . .	10		
<input type="checkbox"/>	11	Contributions by chaplains to section 403(b) plans . . . . .	11		
<input type="checkbox"/>	12	Archer MSA deduction . . . . .	12		
<input type="checkbox"/>	13	_____	13		
<input type="checkbox"/>	14	_____	14		



Name \_\_\_\_\_

SSN \_\_\_\_\_

**Taxes - Itemized Deductions**

		Current Year Amount	Prior Year Amount
<b>Real Estate Taxes</b>			
23	Principal residence . . . . .	23	
24	Real estate taxes from Schedule E properties . . . . .	24	
<b>Real Estate Not Held For Investment</b>			
25	_____	25	
26	_____	26	
27	_____	27	
28	_____	28	
29	_____	29	
<b>Real Estate Held For Investment</b>			
30	_____	30	
31	_____	31	
32	_____	32	
33	_____	33	
34	_____	34	
<b>Personal property taxes</b>			
35	Non-business portion of vehicle personal property taxes . . . . .	35	
36	_____	36	
37	_____	37	
38	_____	38	
39	_____	39	
40	_____	40	
<b>Non-Personal Property Taxes</b>			
41	K1 (1065) - Other deductions/taxes . . . . .	41	
42	K1 (1120S) - Other deductions/taxes . . . . .	42	
43	K1 (1041) - Other deductions/taxes . . . . .	43	
44	_____	44	
45	_____	45	
46	_____	46	





