2013 TAX RETURN ORGANIZER

All Clients MUST Sign Below

I have retained Shea Medlin at Aircrew Taxes to prepare my 2013 Income Tax returns. I hereby verify that the information provided in this Organizer is accurate and complete. I understand it is my responsibility and my continuing obligation until I have verified my tax return and it is filed, to include any and all information concerning income, deductions and other information necessary for the preparation of my personal income tax return. I have not overstated my deductions or understated my income, and acknowledge that false information on a tax return could constitute a federal crime. I understand it is my responsibility to review my Income Tax Return after Aircrew Taxes has prepared it, and to verify that it contains accurate information. If I am billed for an amount due by Aircrew Taxes, I will promptly pay the full amount due and I hereby acknowledge that I will be responsible for any resulting collection fees due to nonpayment, and any attorney's fees incurred by Aircrew Taxes pursuant to a collection action. The laws of Georgia shall be applicable to all aspects of this agreement, and I hereby consent to jurisdiction of the Courts of Cobb County, Georgia regardless of where I actually reside. (If filing a joint return, both you and your spouse must sign.)

Taxpayer Signature____________________________ Spouse Signature_______________________________ Date____________

Client Instructions to Complete Tax Return

Please do not send original tax documents, send copies only. You will need the originals to help resolve possible discrepancies. If you send your original tax documents there may be additional fees to return the documents to you.

General Instructions:

1) Complete the tax organizer filling in only the sections that apply to your tax situation. Send the completed organizer, and **copies only**, of your tax documents to Aircrew Taxes. New clients must include previous year's tax return. Previous years clients send short checklist that we e-mailed to you back to Aircrew Taxes checking off items included.
2) Make payment with credit card, check, or authorized deduction from your refund.
3) Aircrew Taxes will contact you to resolve any questions and discuss possible deductions and tax strategies and then we will e-mail the return to you for review.
4) Contact Aircrew Taxes with any changes to your tax return.
5) Aircrew Taxes will e-mail completed tax return with E-file authorization form to you.
6) Fax signed Form 8879 E-file Authorization to Aircrew Taxes so we may e-file your tax return.

Please Note:

1) New Clients may send tax returns from up to three previous tax years for a missed deductions review.
2) **Send copy of tax documents as listed in the tax organizer, no originals please. Keep your receipts for your own records.**
3) If you have a **small business,** please download and complete the worksheet from the small business tab on the website. Send all business related 1099 income statements designated as income for the business.
4) If you have **rental real estate,** please download and complete the worksheet from the rental real estate tab on the website. Send any 1099 income statements and 1098 mortgage interest statements designated as income and mortgage interest for rentals.

IRS NOW REQUIRES US TO FILE ELECTONICALLY CALL IF YOU WISH TO FILE BY PAPER

Tax Documents Required to Complete Accurate Return

_____ Copy of all W-2s from all Employers
_____ Copy of 1099-INT for Interest and 1099-DIV for Dividends
_____ Copy of 1099-B Proceeds from Broker and Barter Exchange Transactions
_____ Copy of Tax Reporting Statements from Brokers
_____ Copy of 1099-G from State Income Tax Refund and 1099-G for State Unemployment
_____ Copy of 1099-R from IRA, Pensions, and 401(k) distributions and rollovers
_____ Copy of K-1 Statements form Rental Real Estate, Royalties, Partnerships, S-Corps
_____ Copy of 1099's form Unemployment Compensation, SSA 1099 and RRB 1099 from social security benefits
_____ Copy of 1099-MISC for other income, may need to fill out business worksheet
_____ Copy of 1098-E for Student Loan Interest and 1098-T Tuition
_____ Copy of 1098 Mortgage Interest Statement with Real Estate Taxes
_____ Copy of 1098-C for Contribution of motor vehicles
_____ Copy of Closing Statement if Purchased or Refinanced a Home
_____ Copy of Final Year Pay Stub or December 31 Pay Stub to Complete Non-taxable Per Diem Deductions

Office (770) 884-7565 Cell (678) 332-6905 Fax (770) 795-9799
Fax or E-mail Organizer to aircrewtaxes@yahoo.com
www.aircrewtaxes.com

Personal Information (Please Print Clearly)

	Taxpayer	Spouse
Last Name (According to SS card)		
First Name		
Middle Initial		
Social Security Number		
Occupation		
Date of Birth (mm/dd/yyyy)		
E-Mail Address		
Work Phone		
Cell Phone		
Home Phone		
Fax Number		

Tax Address: This is your current state residency where you pay tax for this tax year and the address on your federal tax return.

Address				Apt. #	
City		State		ZIP	

Federal Filing Status (Check Box of Filing Status)

	1 Single
	2 Married Filing Jointly
	3 Married Filing Separate Spouse Name ____________________________ Spouse Soc Sec # ____________________

If **MFS**, Did you live apart from your spouse during the last 6 months of 2013?(Y or N) Did your spouse itemize deductions?(Y or N)

	4 Head of Household: If someone else is using the exemption for your custodial child please fill out below if claiming status.	
Name:		Social Security #:
Relationship:		Number months lived with you:
	5 Qualifying Widow	Spouse's Date of Death ____________

Dependent Information (Name must appear as on the social security card)

Dependent must be under 19 or under 24 and a full-time student for at least 5 months during the year to qualify as a dependent and for the Earned Income Credit. If your dependent children did not live with you, you must provide Form 8832, Release of Claim, or a copy of your divorce decree. Dependents income must be under $3800 unless a full time student.

First Name	Last Name	MI	SSN	Relationship	Date of Birth	# Mos at Home	Care Expenses	Student
					/ /			Y or N
					/ /			Y or N
					/ /			Y or N
					/ /			Y or N
					/ /			Y or N

Direct Deposit/Funds Withdrawal Information

Use direct deposit for tax refund? No additional fees	Y or N	Use electronic funds withdrawal for balance due?	Y or N
Account Type? Circle One	Checking or Saving	Name of Bank?	
Routing Number?		Account Number?	

Payment Method for Tax Preparation Fees

All preparation and related fees must be paid prior to completion of return.

1	**Check ($25 charge for all returned checks)**				
2	**Credit Card (please circle card type)**	**Visa**		**Mastercard**	
Card Number		Expiration Date		Security Code	
Name on Card		Signature		Biling Zip Code	
3	**Withhold Tax Fees from my Refund ($35 Bank fee for this service)**				

Taxpayer's Drivers License # & state			Spouse's Drivers License # and state		
Date Issued / /	Date Expired / /		Date Issued / /	Date Expired / /	
U.S. Citizen	Resident Alien	Non Resident Alien	U.S. Citizen	Resident Alien	Non Resident Alien
Do you owe back taxes to the IRS or state?	Y or N		Do you have delinquent student loans?	Y or N	
Do you owe back child support?	Y or N		Did the IRS garnish your refund last year?	Y or N	

State Tax Information

Please circle yes or no below if you are a resident of a state at the end of the year. If you paid taxes to more than one state, you may receive a separate W2 for each state and we need all W2's.

State	Still Resident	Date Moved In	Date Moved Out	County	School District
	Y or N				
	Y or N				
	Y or N				

Important Questions

YES	NO	Please Answer All Questions.	Amount
		Dependent of Someone Else	
		Can you be claimed as a dependent of someone else?	
		If yes, were you claimed as a dependent on another persons return?	
		Can your spouse be claimed as a dependent of someone else?	
		If yes, was your spouse claimed as a dependent on another persons return?	
		Presidential Election Campaign Fund	
		Does taxpayer want $3 to go to the presidential election campaign fund?	
		Does spouse want $3 to go to the presidential election campaign fund?	
		Credit for Qualified Retirement Saving Contributions	
		Are you a full time student?	
		Is your spouse a full time student?	
		Credit for Elderly or Disabled	
		Is taxpayer retired on total and permanent disability?	
		Is spouse retired on total and permanent disability?	

Other Information You Believe We May Need

Interest Income

Not required if providing all 1099-INT interest statements.

Owner SS#	Bank/Institution	Box Numbers and Amounts in each Box from each separate 1099-INT

Dividend Income

Not required if providing all 1099-DIV dividend or 1099-B broker statements

Owner SS#	Institution	Box Numbers and Amounts in each Box from each separate 1099-DIV

Stocks & Bonds Sold

Required even if providing 1099-B Proceeds From Broker and Barter Exchange Transactions and year-end broker statements. Must have purchase date, cost, sales date and sales proceeds for each sales.

Stock Name or Description	Date Sold	Date Acquired	Sales Price	Cost Plus Fees
	/ /2013	/ /	$	$
	/ /2013	/ /	$	$
	/ /2013	/ /	$	$
	/ /2013	/ /	$	$
	/ /2013	/ /	$	$
	/ /2013	/ /	$	$

State Income Tax Refunds and Unemployment Compensation

Not required if providing 1099-Gs and/or 1099-G for unemployment benefits.

State Refunds Received in 2013 (this tax year)	State		Amount	$	State		Amount	$
Additional State Tax paid in 2013 when filed	State		Amount	$	State		Amount	$
Did you itemize last year?	Taxpayer		Y or N		Spouse		Y or N	
State Unemployment Compensation Received	State		Amount	$	State		Amount	$
State Unemployment Benefits Repaid	State		Amount	$	State		Amount	$

Alimony Received

Taxpayer Amount	$	Spouse Amount	$

IRA, Pension, 401(k), and Annuities Distributions and Rollovers

Not required if providing all 1099-R statements for distributions and rollovers. Circle T or S for taxpayer or spouse.

Taxpayer or Spouse	T or S Distribution #1	T or S Distribution #2	T or S Distribution #3
Name of payer institution			
Gross distribution from 1099-R box 1			
Reason for distribution			
Amount of Rollover			
Name of receiving institution			
Type of account (401k, IRA, Pension, Roth)			

Social Security Benefits and Other Income

Not required if providing SSA 1099s and RRB 1099s and 1099MISCs.

	Taxpayer	Spouse
Amounts for Social Security Benefits	$	$
Amounts for Railroad Benefits	$	$
Amounts for 1099 MISC not requiring Schedule C for business income	$	$
Amounts for 1099 MISC not requiring Schedule C for business income	$	$

Educator Expenses

Un-reimbursed amounts spent on books, supplies, and materials used in the classroom by kindergarten to 12th grade teacher.

Taxpayer Amount	$	Spouse Amount	$

Health Savings Accounts (HSA)

Provide Forms 5498-SA and /or 1099-SA if applicable. All HSA questions concern tax year 2013.

Type of high deductible plan?	Self Only or Family	Months in high deductible plan?	
Plan in effect for December?	Y or N	Total HSA contributions to your account	$
Total Employer HSA contributions	$	Total HSA distributions	$
Total payroll deduction HSA contributions	$	Total unreimbursed qualified medical expenses	$

Moving Expenses

Only job related moves are deductible. Meals are NOT deductible. (Mileage rate for 2013 is 24 cents)

Old Primary Residence		Old Work (BASE)		Transportation Expense	$
New Primary Residence		New Work (BASE)		Storage Expense	$
Miles from Old HOME to New BASE		Date Moved	/ /2013	Travel Expense	$
Miles from Old HOME to Old BASE		Mileage Driven During Move		Lodging Expense	$

Self-Employed Contributions to SEP, SIMPLE and Qualified Plans

Type of Plan	Taxpayer Amount	Spouse Amount
Money Purchase Plan	$	$
Profit Sharing Plan	$	$
Defined Benefit Plan	$	$
SEP Plan	$	$
SIMPLE Plan	$	$
Individual 401(k) Plan	$	$
Roth 401(k) Plan	$	$

Alimony Paid

Recipients Name		Recipients SS#		Amount Paid	$
Recipients Name		Recipients SS#		Amount Paid	$

Traditional And Roth IRA Contributions

	Taxpayer	Spouse
Traditional IRA Contribution Amount Made by 4/15/14	$	$
Roth IRA Contribution Amount Made by 4/15/14	$	$
Non-Deductible IRA	$	$

Education Savings Accounts

List contributions made on or before 12/31/13		Student Name	Amount
Excess Contributions to Coverdell Education Plan (amounts in excess of $2,000)			$
Contributions to State Prepaid tuition Program	State Plan Name		$
Contributions to State College Savings 529 Plan	State Plan Name		$

Student Loan Interest and Educational Deduction and Credits

Provide all 1098-Es for student loan interest paid in 2013 and all 1098-Ts for educational tuition and fees. For a complete list of education expenses please request the Educational Deduction and Credit Worksheet

You may claim qualified expenses and fees for yourself, your spouse, and your dependent children as Tuition and Fees Deduction or the American Opportunity Credit or the Lifetime Learning Credit. You must file a joint return if married. For the Lifetime Learning Credit you may be taking as little as one course, and can be taking it to improve or acquire job skills rather than obtaining a degree.

Provide All 1098-Ts and 1098-Es	**Student 1**	**Student 2**
Name of Student		
Name of School and City and State where located		
Tuition Paid in 2013	$	$
Year in College and was student at least halftime?	1st 2nd 3rd 4th Grad, Yes or No	1st 2nd 3rd 4th Grad, Yes or No
Amount of 529 Plan Withdrawals		
Student Loan Interest Paid in 2013	$	$

Medical Expenses

Do not include amounts paid by insurance or from Flexible Spending Accounts.

Prescriptions Medications	$	Medical Equipment and Supplies	$
Health Insurance Premiums – **After Tax**	$	Medical Travel – Number of Miles	
Long Term Care Insurance	$	Medical Lodging	$
Fees for Physician/Dentist/Chiropractor	$	Lasik and Radial Kerotonomy	$
Fees for Hospital and Clinics	$	Other – Including COBRA or Specify:	$
Lab and X-ray	$	Other	$
Long Term Care Costs	$	Other	$
Eyeglasses and Contacts	$	Other	$

Taxes Paid

Real Estate taxes on Principal Residence	**$**	Personal Property Tax (Car Tag or Advalorem Fee)	**$**
Real Estate taxes on Second Home or Land	**$**	Personal Property Tax (boat or airplane)	**$**
Real Estate taxes on Vacation Home	**$**	Sales Tax on Motor Vehicle or Boat or Aircraft	**$**

Homeowner Mortgage Interest and Points Information

Not required if providing all 1098 Mortgage Interest Statements . ***If you purchased, sold or refinanced a house, send a copy of the closing statement. (<u>DO NOT INCLUDE RENTAL MORTGAGE INTEREST BELOW SEE RENTAL WORKSHEET</u>)***

Primary mortgage interest Lender__________________	$	Qualified Mortgage Insurance Premiums	$
Primary mortgage interest Lender__________________	$	Did you sell your home in 2013?	Y or N
Equity line loan Lender__________________	$	Number of years lived in home before selling?	
Second mortgage Lender__________________	$	Did you purchase your home in 2013?	Y or N
Vacation Home mortgage Lender__________________	$	Did you refinance your home in 2013?	Y or N
Origination or Discount Points	$	Number of years you refinanced?	

Charitable Contributions

You need to have an acknowledgement if any single cash contribution is over $250. If you donated any household goods, please estimate the value and include the name and address of the charitable organization. Vehicle Donation over $500 send 1098C

Cash Donations	Donee Name:__________________	$	Donee Name:__________________	$
	Donee Name:__________________	$	Travel for Charitable Purposes	Miles

Vehicle Donations	Vehicle Donated to:____________________________		Date of Vehicle Donation	
	FMV under $500	$	Make & Year of Vehicle	
	Purchase Date		Original Purchase Price	$

Non-Cash Donations	Name of Charity			
	Address of Charity			
	City, State, Zip			
Must complete all items for Donation Value over $500	Donation Description			
	Date of Donation	2013	2013	2013
	Date Acquired			
	How Acquired	Purchase Gift Created Bequest	Purchase Gift Created Bequest	Purchase Gift Created Bequest
	Total Original Cost	$	$	$
	Value of Donations	$	$	$
	How Valued	Thrift Replacement Equal sale	Thrift Replacement Equal sale	Thrift Replacement Equal sale

Casualty/Theft & Loss

Description of Casualty Event	Event Date	Property	Purchase Date	Cost	Value after Loss	Insurance
				$	$	$

Miscellaneous Expenses

Tax Prep Fees Paid in 2013	$	Margin or Investment Interest Paid	$
Tax Prep Software/Books/Publications.	$	Certain Attorney and Accounting Fees	$
Tax Prep Mailing/Fed Ex Fees Paid in 2013	$	Safe Deposit Box Rental.	$
Investment Expense.	$	IRA Management Fees.	$

Other Job Expenses/W-2 Non-Airline Employee Deductions

If you have another job or your spouse has a job with non-reimbursed employee related business expenses enter below.

Union Dues and Professional Dues	$	Meals and Entertainment Expense	$	Other ______________________	$
Professional Subscriptions	$	Office Supplies	$	Other ______________________	$
Uniform and Protective Clothing	$	Office Equipment	$	Other ______________________	$
Job Search Costs	$	Licenses	$	Other ______________________	$
Local Parking Fees and Transportation	$	Telephone Calls	$	Other ______________________	$
Travel Expense Lodging	$	Cell Phone	$	Other ______________________	$
Travel Expense Airfare	$	Pager	$	Other ______________________	$
Travel Expense Car Rental	$	Internet	$	Other ______________________	$
Business Gifts	$	Postage	$	Other ______________________	$
Education Expense Job Related	$	Other ______________________	$	Other ______________________	$

Vehicle Expense - Mileage rate for 2013 is 56.5 cents per mile.

Year & Make and Model Vehicle		Do you have evidence to support the deduction?	Yes or No
Date First Used for Business		Is this evidence written?	Yes or No
Type of Vehicle: Car, Van, Truck		Is another vehicle available for personal use?	Yes or No
Total Mileage		Was the vehicle available for personal use during off duty hours?	Yes or No
Business Mileage		Was the vehicle leased?	Yes or No
Commuting Mileage		Was the vehicle used for hire?	Yes or No
Personal Mileage		Actual Expenses: Gas, Oil, Repairs, Insurance, ect.	$

Home Office – To be deductible must have been required by employer.

Area Used for Business - Square Footage/Room	Sq/ft	Mortgage Interest	$
Total Area - Square Footage of Home	Sq/ft	Real Estate Taxes	$
Number of Days in Year Office was in Home		Insurance – Homeowners/Renters	$
Date of Using Room as Home Office	$	Repair and Maintenance	$
Fair Market Value of Home with Home Office	$	Utilities Except Water per Month	$
Cost of Home with Home Office	$	Rent Paid for Year	$
Improvement to Home Office	$	Other Specify:____________________________	$
Land Value on Property Tax Statement	$	Other Specify:____________________________	$
Building Value on Property Tax Statement	$	Other Specify:____________________________	$

What are adequate records according IRS Publication 463 Travel, Entertainment, Gift and Car Expenses?

You should keep the proof you need in an account book, diary statement of expense, or similar record. You should also keep documentary evidence that, together with your record, will support each element of an expense. You generally must have documentary evidence, such as receipts, cancelled checks, or bills to support your expenses. Documentary evidence is not needed if your travel expense other than lodging is less than $75 or you have a transportation expense for which a receipt is not readily available. Documentary evidence ordinarily will be considered adequate if it shows the amount, date, place, and essential character of the expense. You must generally provide a written statement of the business purpose of an expense. However, the degree of proof varies according to the circumstances in each case. If the business purpose of an expense is clear from the surrounding circumstances, then you do not need to give a written explanation. If you do not have complete records to prove an element of an expense, then you must prove the element your own written or oral statements containing specific information about the element, and other supporting evidence that is sufficient to establish the element. If the element is the description of a gift, or the cost, time, place, or date of and expense, the supporting evidence must be either direct evidence or documentary evidence. Direct evidence can be written statements, or oral testimony of your guests or other witness setting forth the detail information about the element. Documentary evidence can be receipts, paid bills, or similar evidence.

Small Business – Self Employed - 1099 Income-Schedule C Worksheet

Send last year's Schedule C or tax return if you operated the business previously and we did not prepare the previous tax return for you.

Name of Business:	Type of Business:
Does this business belong to you or your spouse?	Address of Business:

Gross Income (provide any 1099's)	$	Materials and Supplies	$
Cost of Inventory at Beginning of Year	$	Other Costs	$
Cost of Inventory Purchased	**$**	Cost of Inventory at End of Year	$
Cost of Labor	**$**	Returns and Refunds	**$**

Advertising	$	Travel		$
Car and Truck	$	Meals and Entertainment		$
Commission and Fees	$	Utilities – Outside of Home		$
Contract Labor	$	Wages and Salaries Paid to Employees		$
Employee Benefit Programs not pensions	$	Other Expenses: Dues & Publications		$
Insurance: List Type______________________	$	Other Expenses: Postage & Shipping		$
Self Employed Health Insurance	$	Other Expenses: Telephone		$
Mortgage Interest	$	Other Expenses: Bank Charges		$
Other Interest	$	Other (Specify):____________________________		$
Legal & Professional Fees	$	Other (Specify):____________________________		$
Office Expense	$	Other (Specify):____________________________		$
Pension and Profit Sharing Plans	$	Depreciable Items: Such as Equipment, Furniture, Computer and Land Improvements – Provide list with cost and date purchased.		
Rent or Lease – Outside of Home	$			
Repairs/Maintenance	$	Item:______________________	Date:___________	Cost:___________
Supplies	$	Item:______________________	Date:___________	Cost:___________
Taxes and Licenses	$	Item:______________________	Date:___________	Cost:___________

Vehicle Expense

Mileage rate for 2013 is 56.5 cents per mile.

Year & Make and Model Vehicle		Do you have evidence to support the deduction?	Yes or No
Date First Used for Business:		Is this evidence written?	Yes or No
Type of Vehicle: Car, Van, Truck		Is another vehicle available for personal use?	Yes or No
Total Mileage		Was the vehicle available for personal use during off duty hours?	Yes or No
Business Mileage		Was the vehicle leased?	
Commuting Mileage		Was the vehicle used for hire?	Yes or No
Personal Mileage		Actual Expenses: Gas, Oil, Repairs, Insurance, etc.	$

Home Office

Area Used for Business - Square Footage/Room	Sq/ft	Mortgage Interest	$
Total Area - Square Footage of Home	Sq/ft	Real Estate Taxes	$
Number of Days in Year Office was in Home		Insurance – Homeowners/Renters	$
Date of Using Room as Home Office	$	Repair and Maintenance	$
Fair Market Value of Home with Home Office	$	Utilities Except Water per Month	$
Cost of Home with Home Office	$	Rent Paid for Year	$
Improvement to Home Office	$	Other Specify:______________________________	$
Land Value on Property Tax Statement	$	Other Specify:______________________________	$
Building Value on Property Tax Statement	$	Other Specify:______________________________	$

Small Business Comments and Other Expenses:

Child and Dependent Care Expenses Credit

Qualifying expense for care that allows you to work or look for work. Deduction only allowed for children under age 13.

NOTE: Social Security Number or ID Number is required to receive credit!

Care Provider's Name	Provider's Address and Phone Number	Provider's SS#	Child's Name	Amount
				$
				$
				$
				$

Other Tax Credits

Do you have a Qualified Mortgage Interest Credit Certificate issued by federal or state government?	Y or N
Did you adopt a child this year?	Y or N
Do you have the first home buyer in the District of Columbia available before 12/31/11?	Y or N

Residential Energy Credits

Did you claim residential energy credits on your 2006 through 2012 tax returns?	Y or N
Did you install insulation, energy efficient windows, doors, skylights, heating and AC systems, water heaters, biomass stoves, metal or asphalt roofs in 2013? **You must provide a copy of manufactures certificate and sales receipt.**	Y or N
Did you install alternative energy equipment, such as a solar hot water heater, geothermal heat pump or wind turbine? **You must provide a copy of manufactures certificate and sales receipt.**	Y or N

First Time Home Buyers Credit Recapture

Did you take the First Time Hombuyers Credit in 2008?	Y or N

Additional Tax Payments Made to Federal or State

Quarterly Tax Payments	Date Payment Made	Federal Amount	State Amount	Local Amount
First Quarter due 4/15/13		$	$	$
Second Quarter due 6/15/13		$	$	$
Third Quarter due 9/15/13		$	$	$
Fourth Quarter due 1/15/14		$	$	$

Taxes Paid with Extensions to Federal or State

Federal Amount	$	State of _____________ amount	$	State of _____________ amount	$

State Tax Renters Credit

If you paid rent in CA, IN, MA, MI, MN, NJ, WI or any other state in 2013 with a renters credit please complete the following section, Minnesota residents provide a copy of your Certificate of Rent Paid (CRP)

Landlords Name					
Landlords Address					
Apartment Address					
Monthly Rent	$	Total Rent Paid	$	Dates Rented	

State K-12 Education Credits for AZ, IL, IA, & MN

Name of Student	Grade	Expenses	Name of School	Address	State	Zip Code
		$				
		$				