# 2017 Individual Taxpayer Organizer Rental Property



If you have questions, please contact us O: 704-496-2625 rtrautwein@rptconsulting.com (See next page for Organizer)

## **2017 Individual Taxpayer Organizer**

Taxpayer						SS#		
First	M.I.	Last		Email			IP PIN	
Occupation		Date o	f birth		Are you new to our firm? Yes			
Address		City				State	Zip	
County		Home	phone			Work or cell	1	
Driver's License No.				State	Is	sue Date	Exp. Date	
Spouse						SS#		
First	M.I.	Last		Email			IP PIN	
Occupation		Date o	f birth			Are you new to		es No
Address (If different from Taxpayer)		City				State	Zip	
County		Home	phone			Work or cell		
Driver's License No.		I		State	Is	sue Date	Exp. Date	
If you moved during 2017, enter your p	revious address	s.				Date of move		
Were you divorced or separated during Individuals who are in registered dome Have you received any notice from the	stic partnership	os (RDPs		ions are not con	sidere	aths in the family ed married for fe 'es No		oses.
Names of dependent children Child's full name	Social Secur		IP PIN	Date of bi		Months lived in home in 2017	Relationship to taxpayer	College student?
Did any of the children have income about Is it anticipated that a different taxpayer		•		,		e children have a for tax year 2017	3	les No
Other dependents or people who lived	with you							
Name	Social Secu	rity#	IP PIN	Date of bi	irth	Relationship	Inc	оте
If you are due a refund, would you like	it directly depo	osited in	to your bank a	nccount? Name o	f bank	:		
Ask your tax preparer for information a	bout depositing	g a refur	nd into an IRA	account or spli	tting t	he deposit into r	more than one a	ccount.

	7	(1 Tootac Tetated Statements of other accumentation
"You" refers to bo	th taxpayer and spouse—enter "?" if unsure about a question.	
	i '	

_			1 7 1									
	Yes	No	Are either you or y	our spouse le	egally blind?							
	Yes	No	Did you pay or reco	eive alimony	in 2017? Paid/Received \$		Recipient's SS#					
	Yes	No	Did you have healt	Did you have health insurance for you, your spouse, and all dependents for the entire year?								
	Yes	No	Did you purchase l	Did you purchase health insurance through a public exchange?								
	Yes	No	Will there be any si	Will there be any significant changes in income or deductions next year, such as retirement?								
S	Yes	No	Did you receive inc	come from a	sharing/gig economy activity (	(e.g. Airl	bnb, Uber, etc.)					
TAXI	Yes	No	Have you paid alte	lave you paid alternative minimum tax (AMT) in previous years?								
LIFESTYLE & TAXES	Yes	No	Did you pay anyon	id you pay anyone for domestic services in your home?								
IFEST	Yes	No	Did you purchase a	Did you purchase a new energy-efficient car, truck, or van?								
7	Yes	No	Are you involved i	n bankruptcy	, foreclosure, repossession, or l	had any	debt (including	credit cards) car	ncelled?			
	Yes	No	Are you a member	of the militar	ry?							
	Yes	No	Were you a citizen	of or lived in	a foreign country?							
	Yes	No	Do you own or hav	ve financial ir	iterest in a foreign bank or fina	ncial aco	count?					
	Yes	No	Would you like to a Designee's name	allow your ta	x preparer or another person to Phone number	o discus	s your return w	ith the IRS? PIN (any five d	igits)			
	Yes	No	Were any children	born or adop	ted in 2017? (Provide statement j	for other	expenses.)					
	Yes	No	Were any children	Year in	Paid by you: Tuition \$		Student loan inte	erest \$	Books \$			
>			attending college?	college	Paid by student: Tuition \$		Student loan inte	erest \$	Books \$			
ATIO	Yes	No	Did you pay any tu	uition for a pi	rivate school for a dependent or	r take cl	asses yourself?					
EDUC			Student					Amount paid \$				
EN &			Name and address of	school								
CHILDREN & EDUCATION	Yes	No	Did you pay for ch	ild or depend	lent care so you could work or	go to sc	thool? (add stater	nent if needed)				
C			Name of provider					EIN or SS #				
			Address					Amount paid \$				
	Yes	No	Do you have any cl	hildren who	earned more than \$2,100 of inv	estment	income?					
	Yes	No	Did you, or will yo	u, contribute	any money to an IRA for 2017	?		Traditional II	RA Rot	h IRA		
INTS	Yes	No	Did you roll over a	ny amounts	from a retirement account in 20	)17?						
INVESTMENTS	Yes	No	Did you sell or tran	nsfer any stoc	k or sell rental or investment p	property	?					
INVE	Yes	No	Did you have any i	investments l	become worthless or were you	a victim	of investment t	heft in 2017?				
	Yes	No	Were you granted,	or did you e	kercise, any employee stock op	tions du	ring 2017?					
ONS	Yes	No	Did you pay any in	nterest on a lo	an for a boat or RV that has liv	ing qua	rters? If yes, pro	vide details.				
DEDUCTIONS	Yes	No	Did you pay sales t	taxes on a ma	jor purchase in 2017, such as a	vehicle,	, boat, or home?					
DEI	Yes	No	Did you have any t	uninsured los	ss to your property in 2017?							
SS	Yes	No	Did you work from	n a home offic	ce or use your car for business?	?						
BUSINESS	Yes	No	Did you receive an	y income from	m an installment sale?							
BI	Yes	No	Do you own a busi	ness or an in	terest in a partnership, corpora	ition, LL	C, farming activ	ities, or other ve	enture?			
	Yes	No	Did you purchase o	or sell a main	home during the year? If yes, p	provide (	closing statemer	nt.				
Li i	Yes	No	If you sold a home,	did you claii	m the First-Time Homebuyer C	Credit wh	nen it was purch	ased? If yes, pro	vide details	3.		
номе	Yes	No	Did you refinance a	a mortgage o	r take a home equity loan? (Pro	ovide clo	osing statement)	ı				
	Yes	No	Did you use any m	ortgage loan	proceeds for purposes other th	nan to bu	uy, build, or sub	stantially impro	ve your ho	me?		
	Yes No Did you make any new energy-efficient improvements to your home? If yes, provide details.											
Sta	ite infori	matio	n Full-year resid	dent Part	year resident Nonresident							
Sta	tes of res	sidenc	e during 2017 and d	lates								
Scł	nool disti	rict					Do you rent or	own your home	? Rent	Own		

## **Income Worksheet**

Provide to your preparer all Forms W-2, 1099-INT, 1099-DIV, 1099-R, 1099-MISC, and other income reporting statements. Do not list dollar amounts for the following forms. Your preparer will report the appropriate amounts.

Indicate	e "T" for taxpayer, "S" for spouse, "J" for joint				Pro	vide additional statemen	ts if more room is needed		
Forms V	W-2—Wage and Tax Statement								
T/S	Employer name			T/S	Employ	er name			
	1)				4)				
	2)				5)				
	3)				6)				
Forms 1	1099-INT — Interest Income								
T/S/J	Name of issuer			T/S/J	Name o	f issuer			
	1)				4)				
	2)				5)				
	3)				6)				
Forms 1	1099-DIV — Dividends and Distributions								
T/S/J	Name of issuer			T/S/J	Name o	f issuer			
	1)				4)				
	2)				5)				
	3)				6)	6)			
Forms 1	1099-R—Distributions From Pensions, Annuita	ies, Ret	irement	or Profit	-Sharing	Plans, IRAs, Insurance Co	ontracts, Etc.		
T/S	Name of issuer			T/S	Name o	Name of issuer			
	1)				4)				
	2)				5)				
	3)				6)				
If the di	istribution is before age 59½, give a reason to de	etermin	e if an e	exception	to penalt	y applies.			
Tax-Exe	empt Interest (such as municipal bonds—inclu	de state	ement)						
Payer	\$			Payer			\$		
Other I	ncome						·		
State ta:	x refund		\$			Unreported tips	\$		
Alimon	y		\$			Other	\$		
Unemp	loyment compensation		\$				\$		
Social S	Social Security (taxpayer)—provide SSA-1099 or RRB-1099			\$			\$		
Social Security (spouse)—provide SSA-1099 or RRB-1099			\$				\$		
Business income (see Sole Proprietorship Tax Organizer)						Stock sales	See "Sales and Exchanges		
Rental income (see Rental Property Tax Organizer)						Sale of other property	Worksheet" below.		
Sale	s and Exchanges Workshee	et							
	e information about sales of stock, real estate, or		propert	v, along w	ith Form	s 1099-B, 1099-S, or other	supporting statements.		

#### Notes:

Description of property

• When stock is sold, you will usually receive Form 1099-B, *Proceeds From Broker and Barter Exchange Transactions*, reporting the proceeds from the sale. However, your statement will not always provide the cost/basis information necessary to compute gain or loss. If the statement does not contain the cost/basis information, you must provide it. You may need to contact your broker for questions about cost/basis and purchase dates of your stock accounts.

Purchase date

Cost/basis

\$

\$

\$

Sell date

Sale price

\$

\$

\$

- Often, "transfers" of stock or mutual funds within a brokerage account are actually sales of one type of stock and purchase of another. Even if you did not receive any cash from the transaction, you may have taxable gain or loss.
- If your stock dividends are automatically reinvested, the dividends will be taxable even though you did not receive any cash. The transaction is treated as if you had received cash and purchased additional stock. When the stock is sold, the amount reinvested over the years is taken into account. You may need to contact your broker for questions about the amount of reinvested dividends.
- If you sold property other than stock, your taxable gain or loss will be determined by your cost/basis. The cost/basis is usually the original purchase price plus improvements (the cost of repairs and maintenance are not taken into account for cost/basis).

## **Itemized Deductions Worksheet**

Deductions must exceed \$6,350 Single, \$12,700 MFJ, \$9,350 HOH, or \$6,350 MFS to be a tax benefit.

	r dependents—do	l 10% of income to be not include any expe		contributions, prov	vide details of cor	\$500 in noncash cha ntributions. Rules rec all cash contributions	quire that the
Dentists	\$	Hospitals	\$	Cash	Cash		
Doctors	\$	Insurance	\$	Noncash contribut			
Equipment	\$	Prescriptions	\$	items must be in go			\$
Eyeglasses	\$	Other	\$	Did you transfer fu		directly to a	
Medical miles:		@ 17¢			No		\$
		paid for full or partia		Charitable mileage  Casualty and The			
State withhold	ing		Reported on W-2	If you suffered any theft, provide detail		cted damage or loss eparer. Yes No	
State estimated	d taxes—paid in 20	17	\$			1	
Real estate tax	Real estate tax—residence			<b>Miscellaneous Itemized Deductions.</b> The following must exceed 2% of income to be a benefit. For use of home, or auto mileage, or other job-related expenses, provide information on a separate sheet.			
Real estate tax	Real estate tax—other						
Personal property taxes			\$	7 1 77 1 7			es No
Property tax re	efund—received in	2017	\$ (	Dues	\$	Supplies	\$
Foreign tax pa	id		\$	Investment	\$	Tax prep fees	\$
Other			\$	expenses		m 1	
Other			\$	Job education	\$	Tools	\$
Balance paid is	n 2017 from prior y	ear state returns		Job seeking	\$	Uniforms	\$
(do not include	e interest or penalti	es)	\$	Legal fees	\$	Union dues	\$
		x paid during 2017?	Yes No	Licenses	\$	Other	\$
Did you purch Sales tax paid \$		at, or home in 2017?  vaid \$ Date	Yes No	Safety equipment	\$	Other	\$
· · · · · · · · · · · · · · · · · · ·		•		Subscriptions	\$	Other	\$
<b>Interest Paid.</b> Do not include interest paid for full or partial business or rental-use property, including business use of the home. Provide all Forms 1098 or lender information and ID numbers.			Other Miscellaneous Deductions. The following deductions are not subject to a 2% of income limit.				
Main home	\$	Equity loan	\$	Gambling losses	\$	Federal estate tax on IRD	\$
Second home	\$	Equity loan	\$	Impairment-	\$	Loss from box 2,	\$
Points	\$	Investment interest	\$	related expenses		K-1, Form 1065B	
Did you pay a	mortgage insuranc	e premium when you	ı purchased your h	ome? Amount \$	Date		
Dia you pay a	morigage mourant	e premium when you	a parchasca your n	OHC. HIIOUH P	Dute		

## **Other Deductions or Questions**

Notes:

- Gambling losses are deductible only up to the amount of gambling winnings reported. A log must be kept to verify losses.
- Work clothing is not deductible if adaptable for every day wear. Exception for safety equipment, such as steel-toe boots.
- Legal expenses are deductible only if related to producing or collecting taxable income.
- Expenses to enable individuals, who are physically or mentally impaired, to work are generally deductible.

#### Adjustments Worksheet Educator expenses. Classroom expenses of teachers, counselors, and principals. Maximum \$250 each. \$ Health savings account deduction (HSA). \$ Self-employed SEP, SIMPLE, and qualified plans. Some contributions for 2017 may be made in 2018. Self-employed health insurance deduction. Sole proprietors, partners, and 2% S corporation shareholders if not eligible for \$ employer coverage. \$ Penalty on early withdrawal of savings. IRA deduction. For traditional IRAs. Roth IRAs are not deductible. Some contributions for 2017 may be made in 2018. \$ Student loan interest deduction. Paid for taxpayers and dependents. Income limits apply. \$ Tuition and fees deduction. Qualified tuition and fees if not claiming education credits. Income limits apply. Moving expenses. Job-related move and at least 50 mile increase in commuting distance. Ask preparer Business expenses of reservists, performing artists, and fee-based government officials. Ask preparer

Estimated Tax Payments — Tax Year 2017							
Installment	Date paid	Federal	Date paid	State			
First		\$		\$			
Second		\$		\$			
Third		\$		\$			
Fourth		\$		\$			
Amount applied from 2016 overpayment?		\$		\$			
Total		\$		\$			

## **Tax Preparation Checklist**

Please provide the following documentation:

All Forms W-2 (wages), 1099-INT (interest), 1099-DIV (dividends), 1099-B (proceeds from broker or barter transactions), 1099-R (pensions and IRA distributions), Schedules K-1 from partnerships, S corporations, estates and trusts, and other income reporting statements, including all copies provided from the payer.

Form 1095-A (for health insurance purchased through a public exchange), Form 1095-B (for health insurance purchased outside of a public exchange), or Form 1095-C (for employer-provided health insurance coverage).

If you are a new client, provide copies of last year's tax returns.

The completed Individual Income Tax Organizer. *Note:* If you choose not to fill out the organizer, you must at least answer the "Yes" or "No" questions under "Questions—All Taxpayers."

Copy of the closing statement if you bought or sold real estate.

Mileage figures for any automobile expenses claimed, including total mileage, commuting mileage, and business mileage. Detail of estimated tax payments made, if any.

Income and deductions categorized on a separate sheet for business or rental activities.

List of itemized deductions categorized on a separate sheet for medical, taxes, interest, charitable, and miscellaneous deductions. Copy of all acknowledgement letters received from charitable organizations for contributions made in 2017.

## **Tax Return Preparation**

We will prepare your tax return based on information you provide. In the event your return is audited, you will be responsible for verifying the items reported. It is important that you review the return carefully before signing to make sure the information is correct. Unless otherwise stated, the services for preparation of your return do not include auditing, review, or any other verification or assurance.

## **Taxpayer Responsibilities**

- You agree to provide us all income and deductible expense information. If you receive additional information after we begin working on your return, you will contact us immediately to ensure your completed tax returns contain all relevant information.
- You affirm that all expenses or other deduction amounts are accurate and that you have all required supporting written records.
   In some cases, we will ask to review your documentation.
- You must be able to provide written records of all items included on your return if audited by either the IRS or state tax authority. We can provide guidance concerning what evidence is acceptable.
- You must review the return carefully before signing to make sure the information is correct.
- Fees must be paid before your tax return is delivered to you or filed for you. If you terminate this engagement before completion, you agree to pay a fee for work completed. A retainer is required for preparation of late returns.
- You should keep a copy of your tax return and any related tax documents. You may be assessed a fee if you request a copy in the
  future.

**Signatures.** By signing below, you acknowledge that you have read, understand, and accept your obligations and responsibilities. For a joint return, both taxpayers must sign.

Taxpayer	Spouse	Date

## **Privacy Policy**

The nature of our work requires us to collect certain nonpublic information. We collect financial and personal information from applications, worksheets, reporting statements, and other forms, as well as interviews and conversations with our clients and affiliates. We may also review banking and credit card information about our clients in the performance of receipt of payment. Under our policy, all information we obtain about you will be provided by you or obtained with your permission.

Our firm has procedures and policies in place to protect your confidential information. We restrict access to your confidential information to those within our firm who need to know in order to provide you with services. We will not disclose your personal information to a third party without your permission, except where required by law. We maintain physical, electronic, and procedural safeguards in compliance with federal regulations that protect your personal information from unauthorized access.

## **Rental Property Tax Organizer**

#### **Rental Income and Expenses**

Indicate type of property as 1-Single Family Residence, 2-Multi-Family Residence, 3-Vacation/Short-Term Rental, 4-Commercial, 5-Land, 6-Self-Rental, or 7-Other (describe).

	Prope	erty A	Prope	erty B	Property C  Location of property:		
	Location o	of property:	Location o	f property:			
	Туре		Туре		Туре		
	Any personal us	se? Yes No	Any personal us	e? Yes No	Any personal use	e? Yes No	
	Fair Rental Days	Personal Use Days	Fair Rental Days	Personal Use Days	Fair Rental Days	Personal Use Days	
Date placed in service							
Rents received	\$		\$		\$		
Expenses							
Advertising	\$		\$		\$		
Cleaning and maintenance	\$		\$		\$		
Commissions	\$		\$		\$		
Insurance	\$		\$		\$		
Legal and professional fees	\$		\$		\$		
Management fees	\$		\$		\$		
Mortgage interest paid to banks	\$		\$		\$		
Other interest	\$		\$		\$		
Repairs	\$		\$		\$		
Supplies	\$		\$		\$		
Taxes	\$		\$		\$		
Utilities	\$		\$		\$		
Other (list)	\$		\$		\$		
	\$		\$		\$		
	\$		\$		\$		
	\$		\$		\$		
	\$		\$		\$		
	\$		\$		\$		

## **Property Information**

If this is your first year with our firm, please provide a depreciation schedule for all property placed in service before 2017.

 Property Purchased. Treat the cost of improvements made to real property as the purchase of a new asset.

 Asset
 Date purchased
 Cost
 Date placed in service

 \$
 \$

 \$
 \$

 \$
 \$

 \$
 \$

 \$
 \$

 \$
 \$

 \$
 \$

 \$
 \$

 \$
 \$

 \$
 \$

 \$
 \$

 \$
 \$

 \$
 \$

 \$
 \$

 \$
 \$

 \$
 \$

 \$
 \$

 \$
 \$

 \$
 \$

 \$
 \$

 \$
 \$

 \$
 \$

 \$
 \$

 \$
 \$

 \$
 \$

 \$
 \$

 \$
 \$

 \$
 \$

 \$
 \$

 \$
 \$

 \$
 \$

 \$
 \$

 \$
 \$

 \$
 \$

 \$
 \$

 \$
 \$

 \$
 \$

 \$
 \$

 \$
 \$

 \$
 <t

Property Sold or Taken Out of Service			
Asset	Date sold or taken out of service	Selling price	Trade in?
		\$	
		\$	
		\$	
		\$	
		\$	