

2010 TAX ORGANIZER

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This tax organizer has been prepared for your use in gathering the information needed for your 2010 tax return.

To save you time, selected information from your 2009 tax return has been entered in this organizer. Please line through any information that does not apply to your 2010 tax return.

In some cases, 2009 amounts have been included in a separate column. These amounts are for comparison purposes only. You do not need to change these prior year amounts.

If we may be of further assistance, please contact us at your convenience.

REMOVE THIS SHEET PRIOR TO RETURNING THE COMPLETED ORGANIZER

Topic Index

<u>Form</u>	<u>Form</u>
Alimony Paid or Received ~ ~ ~ ~ ~ 13	Gambling Winnings ~ ~ ~ ~ ~ 21
Annuity Payments Received ~ ~ ~ ~ ~ 9, 13	Gifts ~ ~ ~ ~ ~ 34, 35
Application of Refund ~ ~ ~ ~ ~ 20	Health Savings Accounts ~ ~ ~ ~ ~ 13A
Business Income and Expenses ~ ~ ~ ~ ~ 6, 6A	Household Employment Taxes ~ ~ ~ ~ ~ 19
Business Use of Home:	Installment Sale Receipts ~ ~ ~ ~ ~ 7
Business ~ ~ ~ ~ ~ 6D	Interest Income ~ ~ ~ ~ ~ 5A
Employee Business Expenses ~ ~ ~ ~ ~ 17A	Interest Paid ~ ~ ~ ~ ~ 14A
Farm ~ ~ ~ ~ ~ 12D	Investment Interest Expense ~ ~ ~ ~ ~ 14A
Itemized Deductions ~ ~ ~ ~ ~ 16A	IRA Contributions ~ ~ ~ ~ ~ 9
Passthrough ~ ~ ~ ~ ~ 11B	IRA Distributions ~ ~ ~ ~ ~ 9, 13
Rental ~ ~ ~ ~ ~ 10D	Keogh Plan Contributions ~ ~ ~ ~ ~ 9
Calendar ~ ~ ~ ~ ~ 33	Medical and Dental Expenses ~ ~ ~ ~ ~ 14
Casualty or Theft Losses ~ ~ ~ ~ ~ 16	Miscellaneous Income and Adjustments ~ ~ ~ ~ ~ 13
Child and Dependent Care Expenses ~ ~ ~ ~ ~ 18	Miscellaneous Itemized Deductions ~ ~ ~ ~ ~ 16
Consolidated Brokerage Statements:	Mortgage Interest Paid ~ ~ ~ ~ ~ 14A
Interest Income & Foreign Information ~ ~ ~ ~ ~ 5D	Moving Expenses ~ ~ ~ ~ ~ 8
Dividend Income & Foreign Information ~ ~ ~ ~ ~ 5E	Partnership Income ~ ~ ~ ~ ~ 11
Sales of Stocks, Securities, Capital Assets & Misc. Income ~ ~ ~ ~ ~ 5F	Pension Income ~ ~ ~ ~ ~ 9, 13
Contributions ~ ~ ~ ~ ~ 15	Personal Information ~ ~ ~ ~ ~ 3
Dependent Information ~ ~ ~ ~ ~ 3	Railroad Retirement Benefits ~ ~ ~ ~ ~ 13
Depreciable Property and Equipment:	Real Estate Mortgage Investment Conduit Income (REMIC) ~ ~ ~ ~ ~ 11
Business ~ ~ ~ ~ ~ 6A	Rental and Royalty Income and Expenses ~ ~ ~ ~ ~ 10
Employee Business Expenses ~ ~ ~ ~ ~ 17	Roth IRA Contributions/Conversions ~ ~ ~ ~ ~ 9
Farm ~ ~ ~ ~ ~ 12A	S Corporation Income ~ ~ ~ ~ ~ 11
Rental and Royalty ~ ~ ~ ~ ~ 10A	Sale of Stock, Securities and Other Capital Assets ~ ~ ~ ~ ~ 7
Direct Deposit Information ~ ~ ~ ~ ~ 4A	Sale of Your Home ~ ~ ~ ~ ~ 8
Dividend Income ~ ~ ~ ~ ~ 5B	Savings Bond Purchases ~ ~ ~ ~ ~ 4B
Education Expenses ~ ~ ~ ~ ~ 18	SEP/SIMPLE Plan Contributions ~ ~ ~ ~ ~ 9
Educator (Teacher) Expenses ~ ~ ~ ~ ~ 13A	Social Security Benefits ~ ~ ~ ~ ~ 13
Electronic Filing ~ ~ ~ ~ ~ 4	State and Local Tax Refunds ~ ~ ~ ~ ~ 13
Employee Business Expenses ~ ~ ~ ~ ~ 17	Student Loan Interest ~ ~ ~ ~ ~ 13
Estate Income ~ ~ ~ ~ ~ 11	Taxes Paid ~ ~ ~ ~ ~ 14
Farm Income and Expenses ~ ~ ~ ~ ~ 12, 12A	Trust Income ~ ~ ~ ~ ~ 11
Federal, State and City Estimated Taxes ~ ~ ~ ~ ~ 20, 20A	Unemployment Compensation ~ ~ ~ ~ ~ 13
Foreign Bank and Financial Accounts ~ ~ ~ ~ ~ 5C	Vehicle/Other Listed Property Information:
Foreign Employment Information ~ ~ ~ ~ ~ 30, 30A, 30B	Business ~ ~ ~ ~ ~ 6B, 6C
Foreign Housing Expenses ~ ~ ~ ~ ~ 30C	Employee Business Expenses ~ ~ ~ ~ ~ 17
Foreign Taxes ~ ~ ~ ~ ~ 32	Farm ~ ~ ~ ~ ~ 12B, 12C
Foreign Travel and Workdays ~ ~ ~ ~ ~ 30D	Rental and Royalty ~ ~ ~ ~ ~ 10B, 10C
Foreign Wages and Other Income ~ ~ ~ ~ ~ 31, 31A, 31B	Partnership/S Corporation ~ ~ ~ ~ ~ 11A
Tax Organizer Legend:	Wages and Salaries ~ ~ ~ ~ ~ 3

Throughout the tax organizer, you will find columns with the heading "TSJ".
TSJ Codes - Enter "T" for taxpayer, "S" for spouse or "J" for joint.



For any question answered Yes, please attach supporting detail or documents.

Personal Information:

- Did your marital status change during 2010? Yes No
- If married, do you and your spouse want to file separate returns? Yes No
- Did your address change during 2010? Yes No
- Can you or your spouse be claimed as a dependent by another taxpayer? Yes No

Dependents:

- Were there any changes in dependents from the prior year? Yes No
Note: Including non-child dependents for whom you provided more than half the support
- Did you pay for child care while you worked or looked for work? Yes No
- Do you have any children under age 18 with unearned income more than \$950? Yes No
- Do you have any children age 18 or student children, aged 19 to 23, who did not provide more than half of their cost of support with earned income and that have unearned income of more than \$950? Yes No
- Did you adopt a child or begin adoption proceedings during 2010? Yes No

Purchases, Sales and Debt:

- Did you have any debts canceled, forgiven or refinanced during 2010? Yes No
- Did you start a new business, purchase a new rental property, farm or acquire any new interest in any partnership or S corporation during 2010? Yes No
- Did you sell an existing business, rental property, farm or any existing interest in a partnership or S corporation during 2010? Yes No
- Did you sell, exchange or purchase any real estate in 2010? If so, please attach closing statements. Yes No
- Did you withdraw any amounts from your Individual Retirement Account (IRA) or Roth IRA to acquire a principal residence? Yes No
- Did you receive grants of stock options from your employer, exercise any stock options granted to you or dispose of any stock acquired under a qualified employee stock purchase plan? Yes No
- Did you pay any student loan interest in 2010? Yes No
- Are your total mortgages on your first and/or second residence greater than \$1,000,000? If so, please provide the principal balance and interest rate at the beginning and the end of the year. Yes No
- Did you have an outstanding home equity loan at the end of 2010? If so, please provide the principal balance and interest rate at the beginning and end of the year. Yes No
- Did you take out a home equity loan in 2010? Yes No
- Are you claiming a deduction for mortgage interest paid to a financial institution and someone else received the Form 1098? Yes No
- Did you engage in any put or call transactions? If Yes, please provide details. Yes No
- Did you close any open short sales during 2010? Yes No
- Did you sell any securities not reported on your Form 1099-B? Yes No



Personal Information, Dependent(s) and Wages

Taxpayer: First Name and Initial, Last Name, Social Security Number, Occupation, Date of Birth (Mo/Da/Yr), Date of Death (Mo/Da/Yr), Daytime/Work Telephone Number, Evening/Home Telephone Number, Cell Phone Number, Fax Number, Primary Email Address, Secondary Email Address

Spouse: First Name and Initial, Last Name, Social Security Number, Occupation, Date of Birth (Mo/Da/Yr), Date of Death (Mo/Da/Yr)

Present Mailing Address: Street Address, Apartment Number, City, State, ZIP code, Foreign Country

May the IRS or other taxing authority discuss the return with the preparer? Is the taxpayer claimed as a dependent on someone else's tax return? Are you considered legally blind per IRS regulations? Do you want to contribute to the Presidential Election Campaign Fund? [Yes/No selection boxes]

Dependent Information table with columns: First Name and Initial, Last Name, Social Security Number, Date of Birth (Mo/Da/Yr), Relationship to Taxpayer, Months Lived in Your Home, X if Disabled, Yes or No. Includes a header box: 'Did dependent have income over \$3,650?' with an arrow pointing to the table.

Please provide the name of any person living with you who is claimed as a dependent on someone else's tax return
Please list the years that a release of claim to exemption is given for a dependent child not living with you [] [] [] []

Wages and Salaries: Please enclose all copies of your current year Forms W-2

Table with columns: TS, Employer's Name, Taxable Wages, Tax Withheld (Federal, FICA/TIER1, Medicare, State, Local)



Interest Income

5A

Interest Information:

Please enclose copies of all Forms 1099-INT or other documents for interest received

Tax-Exempt Interest Code: 1 - 1099-INT 2 - Private Activity Bond 3 - Both

Table with 7 columns: TSJ, Name of Payer, Savings & Loans, Bank and Other, U.S. Bonds and Obligations, Code, Tax-Exempt Interest, 2009 Interest Amount. Includes a Total row at the bottom.

Seller-Financed Mortgage Interest Information:

Table with 4 columns: Name of Individual to Whom Mortgage Interest Was Paid, Identification Number of Individual, 2010 Interest Amount, 2009 Interest Amount.

Address of Individual to Whom Mortgage Interest Was Paid

Enter Any Additional Information:

Three horizontal lines for entering additional information.

Note: Please list all items sold during the year on Form 7.



Dividend Income

5B

Dividend Information:

Please enclose copies of all Forms 1099-DIV or other documents for dividends received

TSJ	Name of Payer	Box 1a Total Ordinary Dividends	Box 1b Qualified Dividends	Box 2a Total Capital Gain Distribution	U.S. Bond Interest Amount or Percent in Box 1a	2009 Gross Dividends Amount
Total						

Enter Any Additional Information:

Note: Please list all items sold during the year on Form 7.



Name of Business: [] _____

Principal Business or Profession: [] _____

TSJ [] _____

Employer ID number [] _____

Street address [] _____

City, state and ZIP code [] _____

Method of inventory [] _____

Method of accounting [] _____

Business Questions for 2010:

Yes No

Did you dispose of this business? []

If Yes, what was the disposition date? [] (Mo/Da/Yr) _____

Was there a change in determining quantities, costs or valuations between opening and closing inventory? []

Were you involved in the operations of this business on a regular, continuous and substantial basis? []

Yes No

Table with 2 columns: 2010 Amount, 2009 Amount

Health insurance premiums paid for yourself and your dependents []

Income:

Table with 2 columns: 2010 Amount, 2009 Amount

Gross receipts or sales []

Less returns and allowances []

Cost of Goods Sold:

Table with 2 columns: 2010 Amount, 2009 Amount

Beginning inventory []

Purchases less cost of items withdrawn for personal use []

Cost of labor (do not include amounts paid to yourself) []

Materials and supplies []

Other Costs of Cost of Goods Sold:

Table with 3 columns: Description, 2010 Amount, 2009 Amount

Ending inventory []

Other Income:

Table with 3 columns: Description, 2010 Amount, 2009 Amount



Sales of Stocks, Securities, Capital Assets & Installment Sales

Gains or Losses from Sales of Stocks, Securities and Other Capital Assets:

Please enclose all Forms 1099-A, 1099-B, 1099-S and copies of mutual fund statements for the year

Did you have any of the following during the year?

- Mutual fund transactions
- Exchange of any securities or investments for something other than cash
- Sales of inherited property
- Sales of any stock or stock options at a loss and purchases of the same or substantially similar stock or options 30 days before or 30 days after the sale
- Commodity sales, short sales or straddles
- Reinvestment of the proceeds of the sale of a publicly traded security into an SSBIC interest
- Reinvestment of the proceeds of the sale of qualified small business stock in other qualified small business stock
- Debts that became uncollectible
- Securities that became worthless
- Sale of any property where you will receive payments in future years

Yes	No
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>

TSJ	Kind of Property and Description	Gross Sales Price (Less Commissions)	Cost or Other Basis	Date Acquired (Mo/Da/Yr)	Date Sold (Mo/Da/Yr)	Federal Tax Withheld

Installment Sales: Do not include interest received in principal amount

TSJ	Property Description	Date Sold (Mo/Da/Yr)	2010 Principal Received	2009 Principal Received



Partnership, S Corporation, Estate, Trust
and REMIC Income

Partnership Income: Please enclose all Schedules K-1

TSJ	Entity Name	Employer ID Number	Health Insurance Paid by Entity

S Corporation Income: Please enclose all Schedules K-1

TSJ	Entity Name	Employer ID Number	Health Insurance Paid by Entity

Estate and Trust Income: Please enclose all Schedules K-1

TSJ	Entity Name	Employer ID Number

Real Estate Mortgage Investment Conduit (REMIC) Income: Please enclose all Schedules Q

TSJ	Entity Name	Employer ID Number



Please enclose Forms: W-2G, 1099-MISC, 1099-RRB, 1099-SSA, 1099-SA, 1099-LTC, 1099-G and 1098-E

Miscellaneous Income and Adjustments:

Table with 4 columns: TSJ (blank), 2010 Amount, 2009 Amount, TSJ (blank), 2010 Amount, 2009 Amount. Rows include Taxable pensions and annuities received, Nontaxable pensions and annuities received, Federal withholding on pensions and annuities, State withholding on pensions and annuities, Unemployment compensation received, Unemployment compensation repaid in 2010, Social security benefits received, Social security benefits repaid in 2010, Medicare premiums withheld, Tier 1 railroad retirement benefits received, Tier 1 railroad retirement benefits repaid in 2010, Taxable IRA distributions, Nontaxable IRA distributions, Total lump sum social security received, Lump sum taxable social security, Other federal withholding, Other state withholding, Economic recovery payment received in 2010.

State and Local Income Tax Refunds:

Table with 5 columns: TSJ, State, City, Tax Year, Income Tax Refund (State, Local). Rows are empty for data entry.

Other Income:

Table with 4 columns: TSJ, Nature and Source, 2010 Amount, 2009 Amount. Rows are empty for data entry.

Alimony Paid or Received:

Table with 6 columns: TSJ, Recipient's Name, Recipient's Social Security No., Alimony Received?, 2010 Amount, 2009 Amount. Rows are empty for data entry.



Miscellaneous Adjustments

Educator Expenses: Deduction for amounts paid by educators of kindergarten through Grade 12

Table with 3 columns: TS, 2010 Amount, 2009 Amount

Health Savings Accounts (HSAs)

Table with 4 columns: TS, Description, 2010 Amount, 2009 Amount

Were all distributions from your HSA for unreimbursed medical expenses?
Did you or your spouse enroll in Medicare?
If yes, what month did you enroll?
What month did your spouse enroll?

Other Adjustments to Income: Please enclose all Forms 1098-E for Student Loan Interest Paid

Table with 4 columns: TSJ, Nature and Source, 2010 Amount, 2009 Amount



Mortgage Questions for 2010:

If you purchased or sold your home, did you include any mortgage interest from your closing statement in the amount below? Yes No

Did you refinance your home? (If Yes, please enclose the closing statement.) Yes No

If Yes, how many years is your new mortgage loan? _____

Did you purchase a new home or sell your former home during the year? Yes No

If Yes, please enclose the closing statements from the purchase and sale of your new and former homes.

If Yes, also, did you (or your spouse, if married) have an ownership interest in a principal residence in the US during the 3 year period prior to the purchase of this home? Yes No

If Yes, did you (and your spouse, if married at the time of purchase) own and use the same home as a principal residence in the U.S. for any 5 consecutive year period during the 8 year period ending on the purchase date of the new home? Yes No

Home Mortgage Interest Paid To Financial Institutions:

TSJ	Paid To	Did You Receive Form 1098?		2010 Amount	2009 Amount
		Yes	No		

Other Home Mortgage Interest Paid:

TSJ	Paid To		ID Number	2010 Amount	2009 Amount
	Name	Address			

Deductible Points:

TSJ	Paid To	Did You Receive Form 1098?		2010 Amount	2009 Amount
		Yes	No		

Mortgage Insurance Premiums:

Premiums paid or accrued for qualified mortgage insurance.

TSJ	2010 Amount	2009 Amount

Investment Interest Expense:

Interest paid on money you borrowed that is allocable to property held for investment.

TSJ	Paid To	2010 Amount	2009 Amount



Cash Contributions:

You cannot deduct a cash contribution, regardless of the amount, unless you keep as a record of the contribution a bank record (such as a canceled check, a bank copy of a canceled check, or a bank statement containing the name of the charity, the date, and the amount) or a written communication from the charity. The written communication must include the name of the charity, date of the contribution, and amount of the contribution. Clothes and household items donated must be in good, used condition or better in order to be deductible unless the item donated is worth more than \$500 and you have the item's value appraised. Attach a copy of the appraisal. Include any vehicles donated to charity. Attach Forms 1098-C received from the charity.

Table with 4 columns: TSJ, Organization or Description of Contribution, 2010 Amount, 2009 Amount

Table with 4 columns: TSJ, Conservation Real Property, 2010 Amount, 2009 Amount. Includes rows for 100% limit and 50% limit.

Table with 4 columns: TSJ, Description, 2010 Miles, 2009 Miles. Includes row for Number of miles traveled performing volunteer work for qualified charitable organizations.

Noncash Contributions Totaling Less Than or Equal to \$500:

Table with 4 columns: TSJ, Description of Donated Property, 2010 Amount, 2009 Amount

Noncash Contributions Totaling More Than \$500:

Form with fields for TSJ, Description of the donated property, Donee organization name, Donee organization address, Date the property was acquired by the taxpayer, Date the property was donated, Cost or basis of the donated property, Fair market value of the donated property.

Which of the following methods was used to determine the fair market value? CAUTION: Generally, contributions in excess of \$5,000 of similar property will require an appraisal (does not apply to marketable securities)

Form with checkboxes for Appraisal, Thrift shop value, Catalog, Comparable sale.

Other - please explain []

Which of the following describes how this donated property was acquired?

Form with checkboxes for Purchase, Gift, Inheritance, Exchange.



Miscellaneous Itemized Deductions:

- Union and professional dues []
- Tax preparation fee []
- Professional subscriptions []
- Hobby expense (To extent of income) []
- Safe deposit box []
- Uniforms and protective clothing []
- Work tools []
- Gambling losses []
- Estate taxes []

TSJ	2010 Amount	2009 Amount

Other Itemized Deductions:

Examples:

- ¥ Certain legal and accounting fees
- ¥ Investment expenses
- ¥ Custodial fees
- ¥ Employment agency fees
- ¥ Certain educational expenses

TSJ	Description	2010 Amount	2009 Amount

Casualty or Theft Loss:

TSJ [] _____
 Property description [] _____

Which of the following describes the type of property that sustained the casualty or theft loss?

- Personal use Business use Income producing Employee Use Personal use due to Hurricane Katrina
- Personal use attributable to a federally declared disaster Personal use attributable to Midwestern disaster area Personal use attributable to Kansas disaster area
- Personal use attributable to insolvent or bankrupt financial institution losses on deposits

Date acquired [] (Mo/Da/Yr) _____
 Date damaged or lost [] (Mo/Da/Yr) _____

Original cost or other basis []

Fair market value before casualty []

Fair market value after casualty []

Cost of replacement []

Insurance reimbursement []



Refund Application:

If you have an overpayment of 2010 taxes, do you want the excess:

Refunded [] Yes [] No
Applied to your 2011 estimated tax liability [] Yes [] No

Federal Estimated Tax Payments:

2010 1st Quarter Estimate [] (Due 04-15-2010)
2010 2nd Quarter Estimate [] (Due 06-15-2010)
2010 3rd Quarter Estimate [] (Due 09-15-2010)
2010 4th Quarter Estimate [] (Due 01-18-2011)

Table with 3 columns: Amount Due, Date Paid if Not Date Due (Mo/Da/Yr), Amount Paid

2009 overpayment applied to 2010 estimate [] []

Tax Planning Information for Tax Year 2011:

Do you expect any of the following to occur in 2011?

- A change in your marital status [] Yes [] No
A change in the number of your dependents [] Yes [] No
A substantial change in your income [] Yes [] No
A substantial change in your withholding [] Yes [] No
A substantial change in deductions [] Yes [] No

If you answered Yes to any of the above questions, please provide details.

Empty table for providing details.



Residency Information:

From (Mo/Da/Yr)	To (Mo/Da/Yr)
--------------------	------------------

If you did not live in Minnesota for all of 2010, enter the dates you did live in Minnesota]]]]]]]]]]]]]] _____

Enter the state names other than Minnesota where you had income]]]]]]]]]]]]]]]] _____

Voluntary Contributions:

Enter the amount you wish to contribute on your 2010 tax return to the Nongame Wildlife Fund]]]]]]]]]]]]]]]]

Do you wish to designate \$5.00 on your 2010 tax return to the state elections campaign fund?

If Yes, please select one of the following: Democratic Farmer - Labor, General Campaign Fund, Green, Independence or Republican.

Taxpayer]] _____

Spouse]] _____

Qualified School Expenses for Dependents:

	Dependent 1	Dependent 2
Dependent's name]]]]]]]]]]	<input type="text"/>	<input type="text"/>
Dependent's grade]]]]]]]]]]	<input type="text"/>	<input type="text"/>
Qualified expenses]]]]]]]]]]	<input type="text"/>	<input type="text"/>
Type of school]]]]]]]]]]]]]]] (public, private, home)	<input type="text"/>	<input type="text"/>
Type of expense]]]]]]]]]]]]]]] (Classes, Individual instruction, Textbooks, Computer, Tuition, Transportation, Musical instrument)	<input type="text"/>	<input type="text"/>
Type of Instruction]]]]]]]]]]]]]]] (Class or Individual)	<input type="text"/>	<input type="text"/>
Instructor or organization]]]]]]	<input type="text"/>	<input type="text"/>
Type of class]]]]]]]]]]]]]]]]	<input type="text"/>	<input type="text"/>
Type of musical instrument]]]]]]	<input type="text"/>	<input type="text"/>

Long Term Care Insurance:

If you had long term care insurance, list the policy owner, policy company name and policy number below.

Policy Owner	Policy Company Name	Policy Number
Taxpayer <input type="checkbox"/> Spouse <input type="checkbox"/> Joint <input type="checkbox"/>	<input type="text"/>	<input type="text"/>
Taxpayer <input type="checkbox"/> Spouse <input type="checkbox"/> Joint <input type="checkbox"/>	<input type="text"/>	<input type="text"/>

