

Willyoung and Company
John Willyoung
4301 West Cayuga Street
Tampa, FL 33614



Organizer Mailing Slip

General Information

Taxpayer

Spouse

First Name
 Middle Initial
 Last Name
 Suffix
 Social Security Number
 Date of Birth
 Date of Death

First Name
 Middle Initial
 Last Name
 Suffix
 Social Security Number
 Date of Birth
 Date of Death

Check ("X") which phone number to list on return.

Home Phone
 Work Phone
 Cell Phone
 Fax Number

Home Phone
 Work Phone
 Cell Phone
 Fax Number

Legally Blind
 Totally Disabled
 Claimed as a Dependent
 Presidential Election Fund (\$3)

Legally Blind
 Totally Disabled
 Claimed as a Dependent
 Presidential Election Fund (\$3)

Occupation
 E-mail address

Occupation
 E-mail address

State of Residence as of 12/31
 County of Residence as of 12/31
 School District as of 12/31
 Sales tax rate of locality in 2013 % to
 If Part Year, Period of Residency to

State of Residence as of 12/31
 County of Residence as of 12/31
 School District as of 12/31
 Sales tax rate of locality in 2013 % to
 If Part Year, Period of Residency to

Filing Status

Status on 2012 return :

Status as of 12/31/2013 :
Enter ("X") in the box

- 1 Single
- 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	
<input type="checkbox"/>	<input type="checkbox"/>	1 Did your marital status change since last year?
<input type="checkbox"/>	<input type="checkbox"/>	2 Were you in a Registered Domestic Partnership, civil union or same-sex marriage during 2013?
<input type="checkbox"/>	<input type="checkbox"/>	3 Are there any changes in your dependents from last year?
<input type="checkbox"/>	<input type="checkbox"/>	4 Did you have any children under 19 (or 24 if a full time student) who received more than \$1,000 in investment income?
<input type="checkbox"/>	<input type="checkbox"/>	5 Are all your dependents either US residents or citizens?
<input type="checkbox"/>	<input type="checkbox"/>	6 Did you provide over half of the support for someone you aren't claiming as a dependent?
<input type="checkbox"/>	<input type="checkbox"/>	7 Are you being claimed (or are eligible to be claimed) as a dependent on anyone else's return?
<input type="checkbox"/>	<input type="checkbox"/>	8 Were either you or your spouse in the military or National Guard?
<input type="checkbox"/>	<input type="checkbox"/>	9 Did you purchase or sell your principal residence?
<input type="checkbox"/>	<input type="checkbox"/>	10 Have you been notified by the IRS of changes to a prior year's return, or received any other tax correspondence?
<input type="checkbox"/>	<input type="checkbox"/>	11 Were there any changes to a prior year's income, deductions, or credits?
<input type="checkbox"/>	<input type="checkbox"/>	12 Did you make gifts of more than \$14,000 to any one person?
<input type="checkbox"/>	<input type="checkbox"/>	13 Did you file Form 8839, Adoption Credit, in a previous year or incur adoption expenses in 2013?
<input type="checkbox"/>	<input type="checkbox"/>	14 Did you claim a First-time Homebuyer Credit for a home purchased in 2008?
<input type="checkbox"/>	<input type="checkbox"/>	15 Did you have a disposition or change in use of your main home for which you claimed the First-time Homebuyer Credit?
<input type="checkbox"/>	<input type="checkbox"/>	16 Do you want to e-file your return?
		17 If you are due a refund, how do you want to receive it?
		<input type="checkbox"/> Check sent to you in the mail <input type="checkbox"/> Money Clip Visa Prepaid Card
		<input type="checkbox"/> Apply to next year's estimates <input type="checkbox"/> Other quick refund via a bank product
		<input type="checkbox"/> Direct deposit (please provide a voided blank check) Type of account: <input type="checkbox"/> Checking <input type="checkbox"/> Savings
		If you owe taxes, how do you want to pay them?
		<input type="checkbox"/> Paper check sent with my return <input type="checkbox"/> Credit card <input type="checkbox"/> Installment Agreement
		<input type="checkbox"/> Direct debit from my bank account (please provide a voided blank check) Type of account: <input type="checkbox"/> Checking <input type="checkbox"/> Savings
<input type="checkbox"/>	<input type="checkbox"/>	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	
<input type="checkbox"/>	<input type="checkbox"/>	19 Did you have an interest in or signature authority over a financial account in a foreign country?
<input type="checkbox"/>	<input type="checkbox"/>	20 Were you the grantor of or transferor to a foreign trust?
<input type="checkbox"/>	<input type="checkbox"/>	21 Did you receive income from a foreign source or pay taxes to a foreign government?
<input type="checkbox"/>	<input type="checkbox"/>	22 Did you receive tip income NOT reported to your employer?
<input type="checkbox"/>	<input type="checkbox"/>	23 Did you barter your services for goods or services from someone else?
<input type="checkbox"/>	<input type="checkbox"/>	24 Did you receive any tax-exempt income, such as interest or dividends from municipal bonds or a mutual fund account?
<input type="checkbox"/>	<input type="checkbox"/>	25 Did you make a loan to someone at an interest rate below market rate?
<input type="checkbox"/>	<input type="checkbox"/>	26 Did you receive, or expect to receive, a Schedule K-1 (or substitute K-1) from a trust, estate, partnership, or S corp?
<input type="checkbox"/>	<input type="checkbox"/>	27 Did you cash in any U.S. savings bonds?
<input type="checkbox"/>	<input type="checkbox"/>	28 Did you own an interest in a Real Estate Mortgage Investment Conduit (REMIC)?
<input type="checkbox"/>	<input type="checkbox"/>	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)
<input type="checkbox"/>	<input type="checkbox"/>	30 Did you receive disability income?
<input type="checkbox"/>	<input type="checkbox"/>	31 Do you have gambling winnings? (If yes, be sure to include in gambling expenses)
<input type="checkbox"/>	<input type="checkbox"/>	32 Did you receive any unemployment benefits?
<input type="checkbox"/>	<input type="checkbox"/>	33 During 2013, did you receive payments from a Long-Term Care insurance contract?
<input type="checkbox"/>	<input type="checkbox"/>	34 Did you receive employer-provided adoption benefits for a previous year?
<input type="checkbox"/>	<input type="checkbox"/>	35 Did you receive any distributions from a retirement plan? (If Yes, attach all 1099-Rs)
<input type="checkbox"/>	<input type="checkbox"/>	36 Did you "roll over" a retirement plan distribution into another plan?
<input type="checkbox"/>	<input type="checkbox"/>	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				
	11				
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	52				
	53				
	54				
	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"/>	44					
<input type="checkbox"/>	45					
<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						
	7						
	8						
	9						
	10						
	11						
	12						
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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						
	7						
	8						
	9						
	10						
	11						
	12						
	13						
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	18						
	19						
	20						
	21						
	22						
	23						
	24						
	25						
	26						

Name _____

SSN _____

Alimony Received

* F/S - enter ownership (F)iler or (S)pouse.

F/S*		Payer		Current Year Amount	Prior Year Amount
<input type="checkbox"/>	1	_____	1		
<input type="checkbox"/>	2	_____	2		
<input type="checkbox"/>	3	_____	3		
<input type="checkbox"/>	4	_____	4		
<input type="checkbox"/>	5	_____	5		
<input type="checkbox"/>	6	_____	6		
<input type="checkbox"/>	7	_____	7		
<input type="checkbox"/>	8	_____	8		
<input type="checkbox"/>	9	_____	9		

Alimony Paid

* F/S - enter ownership (F)iler or (S)pouse.

F/S*		Recipient's Name	Recipient's SSN		Current Year Amount	Prior Year Amount
<input type="checkbox"/>	1	_____	_____	1		
<input type="checkbox"/>	2	_____	_____	2		
<input type="checkbox"/>	3	_____	_____	3		
<input type="checkbox"/>	4	_____	_____	4		
<input type="checkbox"/>	5	_____	_____	5		
<input type="checkbox"/>	6	_____	_____	6		
<input type="checkbox"/>	7	_____	_____	7		
<input type="checkbox"/>	8	_____	_____	8		
<input type="checkbox"/>	9	_____	_____	9		

Name _____

SSN _____

Business _____

Vehicle Information (Schedule C)

Vehicle 1 -

Vehicle 2 -

	Current Year Amount	Prior Year Amount	Current Year Amount	Prior Year Amount
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 -

	Current Year Amount	Prior Year Amount	Current Year Amount	Prior Year Amount
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 _____

IRA and Other Contribution Information

Traditional IRA Contributions

		Current Year Amount	Prior Year Amount
Filer			
1	Enter total traditional IRA contributions made for 2013	1	
2	Enter contributions, on line 1, made after 12/31/2013 and before 04/15/2014	2	
3	Enter value of all traditional IRAs as of 12/31/2013	3	
Spouse			
4	Enter total traditional IRA contributions made for 2013	4	
5	Enter contributions, on line 4, made after 12/31/2013 and before 04/15/2014	5	
6	Enter value of all traditional IRAs on 12/31/2013	6	

Roth IRA Contributions

		Current Year Amount	Prior Year Amount
Filer			
1	Enter 2013 Roth IRA contributions	1	
2	Enter value of all Roth IRAs on 12/31/2013	2	
Spouse			
3	Enter 2013 Roth IRA contributions	3	
4	Enter value of all Roth IRAs on 12/31/2013	4	

SIMPLE IRA

		Current Year Amount	Prior Year Amount
Filer			
1	Enter value of all SIMPLE IRAs on 12/31/2013	1	
Spouse			
2	Enter value of all SIMPLE IRAs on 12/31/2013	2	

Education (Coverdell ESA)

		Current Year Amount	Prior Year Amount
Filer			
1	Enter 2013 Coverdell ESA contributions	1	
2	Enter value of the Coverdell ESA on 12/31/2013	2	
Spouse			
3	Enter 2013 Coverdell ESA contributions	3	
4	Enter value of the Coverdell ESA on 12/31/2013	4	

Name _____

SSN _____

Taxes - Itemized Deductions

		Current Year Amount	Prior Year Amount
Real Estate Taxes			
23	Principal residence	23	
24	Real estate taxes from Schedule E properties	24	
Real Estate Not Held For Investment			
25	_____	25	
26	_____	26	
27	_____	27	
28	_____	28	
29	_____	29	
Real Estate Held For Investment			
30	_____	30	
31	_____	31	
32	_____	32	
33	_____	33	
34	_____	34	
Personal property taxes			
35	Non-business portion of vehicle personal property taxes	35	
36	_____	36	
37	_____	37	
38	_____	38	
39	_____	39	
40	_____	40	
Non-Personal Property Taxes			
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	

Name _____

SSN _____

Unreimbursed Employee Expenses - Itemized Deductions

List car, truck, transportation, meals and entertainment expenses on Employee Expenses tab

		Current Year Amount	Prior Year Amount
58	Union dues	58	
59	Professional journals and subscriptions	59	
60	Uniform and protective clothing costs and cleaning	60	
61	Job search costs (resumes, travel, postage, etc.)	61	
62	_____	62	
63	_____	63	
64	_____	64	
65	_____	65	
66	_____	66	
67	_____	67	
68	_____	68	

Certain Miscellaneous Deductions - Itemized Deductions

	If investment related enter "X"	Current Year Amount	Prior Year Amount
69	Tax preparation fees	69	
70	Certain attorney and accounting fees	70	
71	Safe deposit box rental	71	
72	IRA Custodial fees	72	
73	Investment counsel and advisory fees	73	
74	Losses on deposits in insolvent or bankrupt financial institutions	74	
75	Convenience fees paid with credit or debit card for federal taxes in 2013	75	
76	_____	76	
77	_____	77	
78	_____	78	
79	_____	79	
80	_____	80	
81	_____	81	
82	_____	82	
83	_____	83	
84	_____	84	
85	_____	85	
86	_____	86	
87	_____	87	

Other Miscellaneous Deductions

88	Federal estate tax on income in respect of a decedent	88	
89	Amortizable bond premiums on bonds acquired before 10/23/86	89	
90	Gambling losses (if gambling income)	90	
91	Repayment of income	91	
92	From K1 Input Worksheet (1065 & 1120S) - Portfolio deduction	92	
93	Certain unrecovered investment in a pension	93	
94	_____	94	
95	_____	95	
96	_____	96	
97	_____	97	
98	_____	98	
99	_____	99	
100	_____	100	

Name _____

SSN _____

Noncash Charitable Contributions (Total of Contributions more than \$500)

Information on Donated Property

(a) Name and Address of the Donee Organization				(b) Description of Donated Property
1	Name Address City	State	Zip Code	
2	Name Address City	State	Zip Code	
3	Name Address City	State	Zip Code	
4	Name Address City	State	Zip Code	
5	Name Address City	State	Zip Code	

Note: If the fair market value for an item is \$500 or less, you do not have to complete columns (d), (e), and (f).

	(c) Date of the Contribution	(d) Date Acquired mm/dd/yyyy	(e) How Acquired	(f) Cost or Adjusted Basis	(g) Fair Market Value F. M. V.	(h) Method Used to Determine the F. M. V.
1						
2						
3						
4						
5						