| Name: | |
|-------|--|
| | |

TO BE ANSWERED BY ALL CLIENTS:

To help assure the accuracy of your tax return and that all possible tax deductions are taken, please complete the following questions.

| Yes | No | Do you wish to designate a part of your taxes to the Presidential Campaign Fund? |
|-----|----|---|
| Yes | No | Any births, adoptions, marriages, divorces, or deaths in your immediate family during 2014? |
| Yes | No | Did you have any children with interest and dividend income in excess of \$950, or total investment income in |
| | | excess of \$1900, that were under age 19 or full-time students under age 24 at the end of 2014? |
| Yes | No | Will you need your tax return to fill out a Free Application for Student Aid (FAFSA) Form? |
| Yes | No | Did you start a business or farm, purchase rental or royalty property, or acquire an interest in a |
| | | partnership, an S corporation, trust, or REMIC? |
| Yes | No | Did you receive income for which you did not receive a Form W-2 or 1099? |
| Yes | No | Did you use your car for business purposes (other than to commute to and from work)? Did you commute |
| | | between first and second jobs? If yes, complete page 3 of the organizer. |
| Yes | No | Did you move because of a job change? If so, bring moving costs. |
| Yes | No | Did you add any energy efficient improvements (insulation systems, exterior windows and doors, |
| | | metal roofs) to your home? |
| Yes | No | Did you buy a main home in 2014? |
| Yes | No | Did you sell or gift any stock, real estate, land, or other property or have any become worthless? If yes, |
| | | complete page 3 of the organizer and provide the final settlement statement for both the purchase and the sale. |
| Yes | No | Did you sell any gold, old jewelry, or precious metals? |
| Yes | No | Did you sell any items on EBay? |
| Yes | No | Did you make a gift to any individual in excess of \$14,000? |
| Yes | No | Does anyone owe you money for which you have exhausted all reasonable efforts to collect? |
| Yes | No | Did you employ any household workers? (Specifically caregivers, nannies, etc.) |
| Yes | No | Did you pay additional state tax last year as a result of an audit or filing of a late return? |
| Yes | No | Did you make an internet purchase on which no state sales tax was collected? |
| Yes | No | Did you have a casualty or theft loss which would exceed 10% of your income? If so, |
| | | bring an itemized list including both original cost and value on date of loss. |
| Yes | No | Did you contribute to a retirement plan, including a Roth IRA? What type of plan? |
| Yes | No | Did you transfer or rollover any amount from one retirement plan to another retirement plan? |
| Yes | No | Did you make contributions to a Health Savings Account (HSA) this year? (Do not mark "yes" for FSA) |
| Yes | No | Did you have any foreign income or pay any foreign taxes? |
| Yes | No | Did you have an interest in or signature or other authority over a financial account in a foreign |
| | | country, such as a bank account, securities account, or other financial account? |
| Yes | No | Did you receive a foreign gift or inheritance from someone in a foreign country or from a foreign entity? |
| Yes | No | Have you ever had the Earned Income Credit denied? |
| Yes | No | Did you claim the Homeowners' Credit in 2008 for which you are responsible for paying back each year? |
| Yes | No | Did you have health insurance for you, your spouse, and all dependents for the entire year? If you did NOT have |
| | | insurance for each month of 2014, please provide details of insurance coverage for each family member by month. |
| Yes | No | If you bought health insurance through an exchange (ie. www.healthcare.gov, www.coveredca.com), please include |
| | | in your tax information the Form 1095A that the Health Insurance Exchange sent you. |
| Yes | No | Financial Planning*: I am interested in being contacted by Kari Pel, a CERTIFIED FINANCIAL |
| | | PLANNER TM professional, regarding the following areas: |
| | | Retirement PlanningRollover to an IRACollege Funding |
| | | Budgeting Estate Planning Savings Plan |
| | | Life Insurance Health Insurance |
| | | (Other) |

*Securities and advisory services offered through United Planners Financial Services, Member FINRA, SIPC

SIGNATURE REQUIRED:

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To the best of my knowledge, the enclosed information correctly includes all income, deductions, and other information necessary for the preparation for this year's income tax returns and I have adequate records to substantiate data.

Taxpayer _____

Date _____

| Spouse | |
|--------|--|
| Spouse | |

Date _____

2014 INCOME TAX CHECKLIST FOR MINISTERS ONLY

| <u>non-ministry income)</u> |
|---|
| \$ |
| \$ |
| \$ |
| \$ |
| |
| \$ |
| \$ |
| \$ |
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| \$ |
| of Social Security? Yes No |
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| |

Note: Please ask the person issuing the W-2 or 1099 Misc. to provide you with an explanation of how the final salary number was figured. This should include all compensation received by you, including allowances by classification, but not reimbursements.

Please use the Miscellaneous Deductions Section on page 2 of the Income Tax Checklist for your ministerial expenses if your income was reported on a form W-2. Use the Self-Employed Business Income and Expense Section on page 3 if you received a form 1099-MISC.

****SEE REVERSE FOR ADDITIONAL QUESTIONS FOR ALL CLIENTS****