2012	1040	US	Topical Index

2012	1040	US	Tax Organizer

Rountree Consulting, Inc.
300 S. El Camino Real Suite 206
San Clemente, CA 92672
Telephone number: (949) 366-3180
Fax number: 949-366-3181
E-mail address:

Tax Return Appointment

Date:
Time:
Location:

This tax organizer will assist you in gathering information necessary for the preparation of your 2012 tax return. Please enter all pertinent 2012 information.

NOTE: If you claim the earned income credit, please provide proof that your child is a resident of the United States. This proof is typically in the form of: school records or statement, landlord or property management statement, health care provider statement, medical records, child care provider records, placement agency statement, social service records or statement, place of worship, Indian tribal office statement, or employer statement.

NOTE: If your child is disabled, please provide one of the following forms of proof of disability: doctor statement, other health care provider statement, or social services agency or program statement.

CLIENT INFORMATION

	Taxpayer	Spouse
First name and initial		
Last name		
Title/suffix		
Social security number		
Occupation		
Date of birth (m/d/y)		
Date of death (m/d/y)		
1=blind		
Home phone		
Work phone		
Work extension		
Cell phone		
E-mail address		

Address	In care of	
	Street address	
	Apartment number	
	City	
	State	
	ZIP code	

DEPENDENTS

	Dependent No.	Dependent No.
First name		
Last name		
Title/suffix		
Date of birth (m/d/y)		
Social security number		
Relationship		
Months lived at home		

	Dependent No.	Dependent No.
First name		
Last name		
Title/suffix		
Date of birth (m/d/y)		
Social security number		
Relationship		
Months lived at home		

2012	1040	US	Tax Organizer

Please enter all pertinent 2012 information. If you have attached a government form for an item, check the box and do not enter a 2012 amount.

WAGES, SALARIES AND TIPS

Employer name:	2012 Amount	2011 Amount
☐	Attach Forms W-2	
☐		
☐		
☐		
☐		

INTEREST INCOME

Payer name:	2012 Amount	2011 Amount
☐	Attach Forms 1099-INT	
☐		
☐		
☐		
☐		

DIVIDEND INCOME

Payer name:	2012 Amount	2011 Amount
☐	Attach Forms 1099-DIV	
☐		
☐		
☐		
☐		

PENSIONS, IRA AND GAMBLING INCOME

Payer name:	2012 Amount	2011 Amount
☐	Attach Forms 1099-R & W-2G	
☐		
☐		
☐		
☐		
Winnings not reported on W-2G		
Total gambling losses		

OTHER GOVERNMENT FORMS - INCOME

	2012 Amount	2011 Amount
☐ Form 1099-B - Sales of stock (also include transaction history)	Attach Forms 1099	
☐ Form 1099-MISC - Miscellaneous income		
☐ Form 1099-K - Merchant card and third party network payments		
☐ Form 1099-S - Sales of real estate (also include closing statements)		
☐ Form 1099-G - State tax refunds	Attach Forms 1099	
Taxpayer:		
☐ Form SSA-1099 - Social security benefits	Attach Forms 1099	
☐ Form 1099-G - Unemployment compensation		
Spouse:		
☐ Form SSA-1099 - Social security benefits	Attach Forms 1099	
☐ Form 1099-G - Unemployment compensation		

MISCELLANEOUS INCOME

	2012 Amount	2011 Amount
Taxpayer: Alimony received		
Spouse: Alimony received		
Other:		

2012	1040	US	Tax Organizer

RETIREMENT PLAN CONTRIBUTIONS

	2012 Amount	2011 Amount
Taxpayer: Traditional IRA contributions (1=maximum)		
Roth IRA contributions (1=maximum)		
Self-employed, SEP, SIMPLE, & qualified plan contributions (1=maximum)		
Spouse: Traditional IRA contributions (1=maximum)		
Roth IRA contributions (1=maximum)		
Self-employed, SEP, SIMPLE, & qualified plan contributions (1=maximum)		

OTHER GOVERNMENT FORMS - DEDUCTIONS

	2012 Amount	2011 Amount
☐ Form 1098-E - Student loan interest	Attach Forms 1098	
☐ Form 1098-T - Tuition and related expenses		

ADJUSTMENTS TO INCOME

	2012 Amount	2011 Amount
Taxpayer:		
Self-employed health insurance premiums		
Educator expenses		
Expenses from rental of personal property		
Other adjustments to income:		
Alimony paid - Recipient name & SSN		
Spouse:		
Self-employed health insurance premiums		
Educator expenses		
Expenses from rental of personal property		
Other adjustments to income:		
Alimony paid - Recipient name & SSN		

MEDICAL AND DENTAL EXPENSES

	2012 Amount	2011 Amount
Prescription medicines and drugs		
Doctors, dentists and nurses		
Hospitals and nursing homes		
Insurance premiums		
Long-term care premiums - taxpayer		
Long-term care premiums - spouse		
Insurance reimbursement		
Out-of-pocket lodging and transportation expenses		
Number of medical miles		
Other:		

TAXES PAID

	2012 Amount	2011 Amount
State income taxes - 1/12 payment on 2011 state estimate		
State income taxes - paid with 2011 state extension		
State income taxes - paid with 2011 state return		
State income taxes - paid for prior years and/or to other states		

2012	1040	US	Tax Organizer

TAXES PAID (continued)

	2012 Amount	2011 Amount
City/local income taxes - 1/12 payment on 2011 city/local estimate		
City/local income taxes - paid with 2011 city/local extension		
City/local income taxes - paid with 2011 city/local return		
State and local sales taxes (except autos and special items)		
Use taxes paid on 2012 purchases		
Use taxes paid on 2011 state return		
Sales tax on autos not included above		
Sales taxes paid on boats, aircraft, and other special items		
Real estate taxes - principal residence		
Real estate taxes - property held for investment		
Foreign income taxes		
☐ Personal property taxes (including automobile fees in some states)	Attach Tax Notice	

INTEREST PAID

	2012 Amount	2011 Amount
Home mortgage interest and points paid:		
☐	Attach Forms 1098	
☐		
Home mortgage interest not on Form 1098 (include name, SSN, & address of payee):		
Points not reported on Form 1098:		
Mortgage insurance premiums on post 12/31/06 contracts		
Investment interest (interest on margin accounts):		
Passive interest		

CASH CONTRIBUTIONS

NOTE: No deduction is allowed for cash or check contributions unless the donor maintains a bank record, or a written communication from the donee, showing the name of the organization, contribution date(s), and contribution amount(s).

	2012 Amount	2011 Amount
Volunteer expenses (out-of-pocket)		
Number of charitable miles		

NONCASH CONTRIBUTIONS

NOTE: No deduction is allowed for contributions of clothing and household items that are not in good used condition or better, in addition, a deduction for any item with minimal monetary value may be denied.

	2012 Amount	2011 Amount

MISCELLANEOUS DEDUCTIONS

	2012 Amount	2011 Amount
Union and professional dues		
Tax return preparation fee		
Safe deposit box rental		
Investment expenses		
Estate tax, section 691(c)		
Unreimbursed employee expenses:		
Other:		

2012	1040	US	Client Information	1

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CLIENT INFORMATION

Filing Status	Filing status (table)	
	1=married filing separate and lived with spouse	
	Year spouse died, if qualifying widow(er) (2010 or 2011)	
Taxpayer	First name and initial	
	Last name	
	Title/suffix	
	Social security number	
	Occupation	
	Date of birth (m/d/y)	
	Date of death (m/d/y)	
	1=blind	
Spouse	First name and initial	
	Last name	
	Title/suffix	
	Social security number	
	Occupation	
	Date of birth (m/d/y)	
	Date of death (m/d/y)	
	1=blind	
Address	In care of	
	Street address	
	Apartment number	
	City	
	State	
	ZIP code	
Foreign Address	Region	
	Postal code	
	Country	

Filing Status

1 = Single
2 = Married filing joint
3 = Married filing separate
4 = Head of household
5 = Qualifying widow(er)

2012	1040	US	Client Information (continued)	1 p2

Please add, change or delete information for 2012.

CLIENT INFORMATION

Taxpayer Contact Information	Home phone		
	Work phone		
	Work extension		
	Daytime phone (table)		
	Mobile phone		
	Pager number		
	Fax number		
	E-mail address		
Spouse Contact Information	Home phone		
	Work phone		
	Work extension		
	Daytime phone (table)		
	Mobile phone		
	Pager number		
	Fax number		
	E-mail address		

Daytime Phone

1 = Work
2 = Home
3 = Mobile

2012	1040	US	Dependents	2

Please add, change or delete information for 2012.

DEPENDENTS

	Dependent	Dependent
First name		
Last name		
Title/suffix		
Date of birth (m/d/y)		
Social security number		
Relationship		
Months lived at home		
Type of dependent (see table)		
Earned income credit (see table)		
Claimed by: 1=taxpayer, 2=spouse		

	Dependent	Dependent
First name		
Last name		
Title/suffix		
Date of birth (m/d/y)		
Social security number		
Relationship		
Months lived at home		
Type of dependent (see table)		
Earned income credit (see table)		
Claimed by: 1=taxpayer, 2=spouse		

	Dependent	Dependent
First name		
Last name		
Title/suffix		
Date of birth (m/d/y)		
Social security number		
Relationship		
Months lived at home		
Type of dependent (see table)		
Earned income credit (see table)		
Claimed by: 1=taxpayer, 2=spouse		

	Dependent	Dependent
First name		
Last name		
Title/suffix		
Date of birth (m/d/y)		
Social security number		
Relationship		
Months lived at home		
Type of dependent (see table)		
Earned income credit (see table)		
Claimed by: 1=taxpayer, 2=spouse		

Type of Dependent

1 = Child living w/taxpayer
2 = Child not living w/taxpayer
3 = Dependent other than child
4 = Head of household only, not a dependent
5 = Earned income credit only, not a dependent

Earned Income Credit

1 = When applicable (default)
2 = Student age 19 to 23
3 = Disabled
4 = Force
5 = Suppress

NOTE: If you claim the earned income credit, please provide proof that your child is a resident of the U.S. This proof is typically in the form of:

1. School records or statement
2. Landlord or property management statement
3. Health care provider statement
4. Medical records
5. Child care provider records
6. Placement agency statement
7. Social service records or statement
8. Place of worship statement
9. Indian tribe office statement
10. Employer statement

NOTE: If your child is disabled, please provide one of the following forms of proof of disability:

1. Doctor statement
2. Other health care provider statement
3. Social services agency or program statement

2012	1040	US	Miscellaneous Questions

If any of the following items pertain to you or your spouse for 2012, please check the appropriate box and provide additional information if necessary.

YES	NO	
☐	☐	Did your marital status change during the year?
☐	☐	Did your address change during the year?
☐	☐	Could you be claimed as a dependent on another person's tax return?
☐	☐	Were there any changes in dependents?
☐	☐	Did you receive unreported tip income of $20 or more in any month?
☐	☐	Did you receive any disability income?
☐	☐	Did you buy or sell any stocks, bonds or other investment property?
☐	☐	Did you purchase, sell, or refinance your principal home or second home, or did you take a home equity loan?
☐	☐	Did you make any residential energy-efficient improvements or purchases involving solar, wind, geothermal or fuel cell energy sources?
☐	☐	Did you receive a distribution from or make a contribution to a retirement plan (401(k), IRA, etc.)?
☐	☐	Did you transfer or rollover any amount from one retirement plan to another?
☐	☐	Did you convert part or all of your traditional/SEP/SIMPLE IRA to a Roth IRA?
☐	☐	Did you, your spouse, or a dependent incur any tuition expenses that are required to attend a college, university, or vocational school?
☐	☐	Did you incur a loss because of damaged or stolen property?
☐	☐	Did you use your car on the job (other than to and from work)?
☐	☐	Do you want to electronically file your tax return?
☐	☐	May the IRS discuss your tax return with your preparer?
☐	☐	Was your home rented out or used for business?
☐	☐	Were you notified or audited by either the IRS or the State taxing agency?

2012	1040	US	Wages, Pensions, Gambling Winnings	10, 13.1, 13.2

Please enter all pertinent 2012 amounts & attach all W-2, W-2G and 1099-R forms.
Last year's amounts are provided for your reference.

WAGES, SALARIES, TIPS (10)

No.	Name of Employer (Box c)	1=retirement plan (Box 13)	1=spouse	Wages, Tips, Other Compensation (Box 1)	Tax Withheld: Federal (Box 2)	Tax Withheld: Social Security (Box 4)	Tax Withheld: Medicare (Box 6)	Tax Withheld: State (Box 17)	Tax Withheld: Local (Box 19)	2011 Wages

PENSIONS, IRA DISTRIBUTIONS (13.1)

No.	Name of Payer	1=spouse	1=IRA/SEP/SIMPLE	Distribution code #1	Distribution code #2	Gross Distribution (Box 1)	Taxable Amount (Box 2a)	Tax Withheld: Federal (Box 4)	Tax Withheld: State (Box 12)	Value of all IRAs at 12/31/12	2011 Distribution

GAMBLING WINNINGS (W-2G) (13.2)

No.	Name of Payer	1=spouse	Gross Winnings (Box 1)	Tax Withheld: Federal (Box 2)	Tax Withheld: State (Box 14)	2011 Winnings

GAMBLING LOSSES & WINNINGS (NON W-2G) (13.2)

	2012 Amount	TS	2011 Amount
Total gambling losses			
Winnings not reported on Form W-2G			

(T=taxpayer, S=spouse, Blank=joint)

2012	1040	US	Interest & Dividend Income	11, 12

Please enter all pertinent 2012 amounts & attach all 1099-INT, 1099-OID and 1099-DIV forms.
Last year's amounts are provided for your reference.

INTEREST INCOME (11)

No.	Name of Payer (also enter SSN & address for seller-financed mortgage)	1=taxpayer 2=spouse	Interest Income: Banks, S&Ls, C/Us, etc. (Box 1)	Interest Income: Seller-Financed Mtg. (Box 1)	Interest Income: U.S. Bonds, T-Bills (Box 3)	Tax-Exempt Interest: Total Municipal Bonds	Tax-Exempt Interest: In-state Municipal Bonds	Early Withdrawal Penalty (Box 2)	2011 Interest

DIVIDEND INCOME (12)

No.	Name of Payer	1=tp 2=sp	Dividend Income: Total Ordinary Dividends (Box 1a)	Dividend Income: Qualified Dividends (Box 1b)	Dividend Income: Total Capital Gain Distrib. (Box 2a)	Dividend Income: U.S. Bonds (% or amt.)	Tax-Exempt Interest: Total Municipal Bonds	Tax-Exempt Interest: In-state Muni-bonds (% or amt.)	Foreign Tax Paid (Box 6)	2011 Dividends

2012	1040	US	Miscellaneous Income	14.1

Please enter all pertinent 2012 amounts and attach all 1099-MISC, SSA-1099, and RRB-1099 forms. Last year's amounts are provided for your reference.

MISCELLANEOUS INCOME

	2012 Amount		2011 Amount	
	Taxpayer	Spouse	Taxpayer	Spouse
Social security benefits (SSA-1099, box 5)				
Medicare premiums paid (SSA-1099)				
Tier 1 RR retirement benefits (RRB-1099, box 5)				
1=lump-sum election for SS benefits				
Alimony received				
Taxable scholarships and fellowships				
Jury duty pay				
Household employee income not on W-2				
Excess minister's allowance				
Alaska permanent fund dividends				
Income from rental of personal property				
Income subject to S/E tax:				
Other income (1099-MISC, box 3)				

TAX WITHHELD (not entered elsewhere)

	2012 Taxpayer	2012 Spouse	2011 Taxpayer	2011 Spouse
Federal income tax withheld				
State income tax withheld				
Local income tax withheld				

Please add, change or delete 2012 information as appropriate.
Be sure to attach all 1099-G forms.

STATE AND LOCAL TAX REFUNDS / UNEMPLOYMENT COMPENSATION (Form 1099-G)

		2012 1099-G Amount
No.	Name of payer	
	1=spouse	
	Unemployment compensation:	
	Total received (Box 1)	
	2012 Overpayment repaid	
	State and local refunds:	
	State and local income tax refund, credit or offsets (Box 2)	
	1=city or local income tax refund	
	Tax year for box 2 if not 2011 (Box 3)	
	Federal income tax withheld (Box 4)	
	ATAA/RTAA payments (Box 5)	
	Taxable grants:	
	Federal taxable amount (Box 6)	
	State taxable amount, if different	
	Farm amounts:	
	Agriculture payments (Box 7)	
	1=agriculture payments are from conservation reserve program	
	Market gain (Box 9)	
	Number of farm	
	1=box 2 is trade or business income (Box 8)	
	State income tax withheld (Box 11)	

No.	Name of payer	
	1=spouse	
	Unemployment compensation:	
	Total received (Box 1)	
	2012 Overpayment repaid	
	State and local refunds:	
	State and local income tax refund, credit or offsets (Box 2)	
	1=city or local income tax refund	
	Tax year for box 2 if not 2011 (Box 3)	
	Federal income tax withheld (Box 4)	
	ATAA/RTAA payments (Box 5)	
	Taxable grants:	
	Federal taxable amount (Box 6)	
	State taxable amount, if different	
	Farm amounts:	
	Agriculture payments (Box 7)	
	1=agriculture payments are from conservation reserve program	
	Market gain (Box 9)	
	Number of farm	
	1=box 2 is trade or business income (Box 8)	
	State income tax withheld (Box 11)	

2012	1040	US	Education Distributions (ESA's and QTP's)	14.3

Please enter all pertinent 2012 amounts and attach all 1099-Q forms.
Enter qualified education expenses below that are not entered elsewhere.
Last year's amounts are provided for your reference.

ESA'S AND QTP'S (Form 1099-Q)

No.		2012 Amount	2011 Amount
	Name of payer		
	1=spouse		
	Qualified expenses:		
	Higher education (net of nontaxable benefits)		
	Elementary & secondary education (net of nontaxable benefits)		
	Form 1099-Q:		
	Gross distributions (Box 1)		
	Earnings (Box 2)		
	Basis (Box 3)		
	Rollover: 1=nontaxable, 2=taxable (Box 4)		
	Distribution type: 1=private 529, 2=state 529, 3=Coverdell ESA (Box 5)		
	ESA's only:		
	2012 contributions to this ESA		
	Value of this account at 12/31/12 (plus outstanding rollovers)		
	Basis in this ESA as of 12/31/11		

No.		2012 Amount	2011 Amount
	Name of payer		
	1=spouse		
	Qualified expenses:		
	Higher education (net of nontaxable benefits)		
	Elementary & secondary education (net of nontaxable benefits)		
	Form 1099-Q:		
	Gross distributions (Box 1)		
	Earnings (Box 2)		
	Basis (Box 3)		
	Rollover: 1=nontaxable, 2=taxable (Box 4)		
	Distribution type: 1=private 529, 2=state 529, 3=Coverdell ESA (Box 5)		
	ESA's only:		
	2012 contributions to this ESA		
	Value of this account at 12/31/12 (plus outstanding rollovers)		
	Basis in this ESA as of 12/31/11		

No.		2012 Amount	2011 Amount
	Name of payer		
	1=spouse		
	Qualified expenses:		
	Higher education (net of nontaxable benefits)		
	Elementary & secondary education (net of nontaxable benefits)		
	Form 1099-Q:		
	Gross distributions (Box 1)		
	Earnings (Box 2)		
	Basis (Box 3)		
	Rollover: 1=nontaxable, 2=taxable (Box 4)		
	Distribution type: 1=private 529, 2=state 529, 3=Coverdell ESA (Box 5)		
	ESA's only:		
	2012 contributions to this ESA		
	Value of this account at 12/31/12 (plus outstanding rollovers)		
	Basis in this ESA as of 12/31/11		

2012	1040	US	Business Income (Schedule C)	No.	16

Please enter all pertinent 2012 amounts. Last year's amounts are provided for your reference.

GENERAL INFORMATION

Principal business/profession	
Principal business code	
Business name, if different from Form 1040	
Business address, if different from Form 1040	
City, if different from Form 1040	
State, if different from Form 1040	
ZIP code, if different from Form 1040	
Employer identification number	
Other accounting method	

Accounting method: 1=cash, 2=accrual	
Inventory method: 1=cost, 2=lower cost/market, 3=other	
1=change of inventory method	
1=spouse, 2=joint	
1=first Schedule C filed for this business	
If required to file Form(s) 1099, did you or will you file all required Form(s) 1099: 1=yes, 2=no	
1=not subject to self-employment tax	
1=did not "materially participate"	
1=personal services is not a material income producing factor	
1=investment	
1=minister's Schedule C	
1=single member limited liability company	

INCOME

	2012 Amount	2011 Amount
Gross receipts or sales (Form 1099-MISC, box 7)		
Returns and allowances		
Other income:		

COST OF GOODS SOLD

Inventory at beginning of the year		
Purchases		
Cost of items for personal use		
Cost of labor		
Materials and supplies		
Other costs:		
Inventory at end of the year		

2012	1040	US	Business Income (Schedule C) (cont.)	No.	16 p2

Please enter all pertinent 2012 amounts. Last year's amounts are provided for your reference.

EXPENSES

	2012 Amount	2011 Amount
Accounting		
Advertising		
Answering service		
Bad debts from sales or service		
Bank charges		
Car and truck expenses (not entered elsewhere)		
Commissions		
Contract labor		
Delivery and freight		
Dues and subscriptions		
Employee benefit programs		
Insurance (other than health)		
Mortgage interest (paid to banks, etc.)		
Other interest (not entered elsewhere)		
Janitorial		
Laundry and cleaning		
Legal and professional		
Miscellaneous		
Office expense		
Outside services		
Parking and tolls		
Pension and profit sharing plans - contributions		
Pension and profit sharing plans - admin. and education costs		
Postage		
Printing		
Rent - vehicles, machinery, & equipment (not entered elsewhere)		
Rent - other		
Repairs		
Security		
Supplies		
Taxes - real estate		
Taxes - payroll		
Taxes - sales tax included in gross receipts		
Taxes - other (not entered elsewhere)		
Telephone		
Tools		
Travel		
Total meals and entertainment in full (50%)		
Department of Transportation meals in full (80%)		
Uniforms		
Utilities		
Wages		

Other expenses:

NOTE: If you purchased or disposed of any business assets, please complete Sheet 22.

2012	1040	US	Capital Gains & Losses (Schedule D)	17

If you sold any stocks, bonds, or other investment property in 2012, please list the pertinent information for each sale below or provide a spreadsheet file with this information. Be sure to attach all 1099-B forms and brokerage statements.

No.	Quantity	Description of Property (Box 8)	Date Acquired (Box 1b)	Date Sold (Box 1a)	Sales Price (gross or net) (Box 2)	Cost or Basis (Box 3)	Blank=basis rep. to IRS, 1=nonrec. security (Box 6)	Expenses of Sale (if gross sales price entered)	Federal Income Tax Withheld (Box 4)

2012	1040	US	Sale of Home & Moving Expenses	17, 27

If you sold your home or moved in 2012, please complete the information below. For the sale of home, please provide Form 1099-S and closing statements from the purchase and sale of your home.

SALE OF HOME (17)

Description of property (Box 3)	
Date acquired (m/d/y)	
Date sold (m/d/y) (Box 1)	
Sales price (Box 2)	
1=sale of home	
1=owned and used property as main home for at least 2 of 5 years before sale	
1=first-time homebuyer credit was previously taken on this home	
1=business use in year of sale	
Number of days after December 31, 2008 that home was not used as principal residence	

Adjusted Basis

Original cost	
Improvements:	
Adjusted basis	

Expenses of Sale (Commissions, advertising fees, legal fees, and loan charges paid by the seller)

Total expenses of sale	

Reduced Exclusion

Please complete the following information if due to a change in health, place of employment, or unforeseen circumstances you either: **a)** Did not meet the ownership and use tests *, or **b)** Excluded gain on the sale of another home after May 6, 1997.

If excl. gain from another home after May 6, 1997 & within 2 yrs. of current sale, enter date of sale (m/d/y)	
1=sale due to change in health, employment or unforeseen circumstances	
Days used as main home - taxpayer	
Days used as main home - spouse	
Days property owned - taxpayer	
Days property owned - spouse	

MOVING EXPENSES (27) (If you moved because of a change in the location of your job)

1=spouse, 2=joint	
1=armed forces move due to permanent change of station	
Miles from old home to new work place	
Miles from old home to old work place	
Expenses for transportation and storage of household goods and personal effects	
Lodging and travel (excluding meals):	
Lodging and travel (excluding automobile)	
Parking fees and tolls	
Gas and oil	
Miles driven to new home	

(* owned and used property as main home for at least 2 of 5 years before sale)

2012	1040	US	Rental & Royalty Income (Schedule E)	No.	18

Please enter all pertinent 2012 amounts. Last year's amounts are provided for your reference.

RENTAL & ROYALTY INCOME (Schedule E)

	2012 Amount	2011 Amount
Description of property		
Street address		
City		
State		
ZIP code		
Type of property (see table)		
Other type of property		
Number of days rented		

GENERAL INFORMATION

Percentage of ownership if not 100% (.xxxx)		**Type of Property**
Percentage of tenant occupancy if not 100% (.xxxx)		1 = Single Family Residence
1=spouse, 2=joint		2 = Multi-Family Residence
1=qualified joint venture		3 = Vacation/Short-Term Rental
If required to file Form(s) 1099, did you or will you file all required Form(s) 1099: 1=yes, 2=no		4 = Commercial
1=nonpassive activity, 2=passive royalty		5 = Land
1=did not actively participate		6 = Royalties
1=real estate professional		7 = Self-Rental
1=rental other than real estate		
1=investment		
1=single member limited liability company		

INCOME

	2012 Amount	2011 Amount
Rents or royalties received		

DIRECT EXPENSES

NOTE: Direct expenses are related only to the rental activity. These include rental agency fees, advertising, and office supplies.

	2012 Amount	2011 Amount
Advertising		
Association dues		
Auto and travel (not entered elsewhere)		
Cleaning and maintenance		
Commissions		
Gardening		
Insurance		
Legal and professional fees		
Licenses and permits		
Management fees		
Miscellaneous		
Mortgage interest (paid to banks, etc.)		
Qualified mortgage insurance premiums		
Excess mortgage interest		
Other interest (not entered elsewhere)		
Painting and decorating		

NOTE: If you purchased or disposed of any business assets, please complete Sheet 22.

2012	1040	US	Rental & Royalty Income (Sch. E) (cont.)	No.	18 p2

Please enter all pertinent 2012 amounts. Last year's amounts are provided for your reference. The indirect expense column should only be used for vacation homes or less than 100% tenant occupied rentals.

DIRECT EXPENSES (continued)

Direct expenses are related only to the rental activity. These include rental agency fees, advertising, and office supplies.

	2012 Amount	2011 Amount
Pest control		
Plumbing and electrical		
Repairs		
Supplies		
Taxes - real estate		
Taxes - other (not entered elsewhere)		
Telephone		
Utilities		
Wages and salaries		
Other:		

OIL AND GAS

	2012 Amount	2011 Amount
Production type (preparer use only)		
Cost depletion		
Percentage depletion rate or amount		
State cost depletion, if different (-1 if none)		
State % depletion rate or amount, if different (-1 if none)		

VACATION HOME

	2012 Amount	2011 Amount
Number of days personal use		
Number of days owned (if optional method elected)		

INDIRECT EXPENSES

NOTE: Indirect expenses are related to operating or maintaining the dwelling unit. These include repairs, insurance, and utilities.

	2012 Amount	2011 Amount
Advertising		
Association dues		
Auto and travel (not entered elsewhere)		
Cleaning and maintenance		
Commissions		
Gardening		
Insurance		
Legal and professional fees		
Licenses and permits		
Management fees		
Miscellaneous		
Mortgage interest (paid to banks, etc.)		
Qualified mortgage insurance premiums		
Excess mortgage interest		
Other interest (not entered elsewhere)		
Painting and decorating		

2012	1040	US	Rental & Royalty Income (Sch. E) (cont.)	No.	18 p3

Please enter all pertinent 2012 amounts. Last year's amounts are provided for your reference. The indirect expense column should only be used for vacation homes or less than 100% tenant occupied rentals.

INDIRECT EXPENSES (continued)

NOTE: Indirect expenses are related to operating or maintaining the dwelling unit. These include repairs, insurance, and utilities.

	2012 Amount	2011 Amount
Pest control		
Plumbing and electrical		
Repairs		
Supplies		
Taxes - real estate		
Taxes - other (not entered elsewhere)		
Telephone		
Utilities		
Wages and salaries		
Other:		

2012	1040	US	Partnership and S corporation Information	20.1,20.2

Please add, change or delete 2012 information as appropriate. Be sure to attach all Schedule K-1s.

PARTNERSHIP INFORMATION (20.1)

No.	Name of Partnership	Employer Identification Number	Tax Shelter Registration Number	Additional Amounts Invested in Partnership

S CORPORATION INFORMATION (20.2)

No.	Name of S corporation	Employer Identification Number	Tax Shelter Registration Number	Additional Amounts Invested in S corporation

2012	1040	US	Vehicle Expenses	No.	22 p3

Please enter all pertinent 2012 amounts. Last year's amounts are provided for your reference.

GENERAL INFORMATION

	2012 Amount	2011 Amount
Description of vehicle		
1=no evidence to support your deduction		
1=no written evidence to support your deduction		
1=vehicle is available for off-duty personal use		
1=no other vehicle is available for personal use		
1=vehicle used primarily by more than 5% owner		
Number of months your job required a vehicle (if not 12 months)		

AUTOMOBILE MILEAGE

	2012 Amount	2011 Amount
Total mileage (for the tax year)		
Business mileage		
Commuting mileage (for the tax year)		
Average daily round-trip commute		

ACTUAL EXPENSES

	2012 Amount	2011 Amount
Parking fees and tolls (business portion only)		
Gasoline, lube, oil		
Repairs		
Tires		
Insurance		
Miscellaneous		
Auto license (other than personal property taxes)		
Personal property taxes (based on car's value)		
Interest (car loan) (for Schedule C, E & F)		
Vehicle rent or lease payments		
Inclusion amount (enter as positive)		
Value of employer-provided vehicle on Form W-2 (2106)		

2012	1040	US	Adjustments to Income	24

Please enter all pertinent 2012 information. Last year's amounts are provided for your reference.

TRADITIONAL IRA CONTRIBUTIONS

	2012 Amount Taxpayer	2012 Amount Spouse	2011 Amount Taxpayer	2011 Amount Spouse
IRA contributions you made or expect to make (1=maximum) ($5,000/$6,000 if 50 or older)				
Contributions made to date				
1=covered by plan, 2=not covered				
2012 payments from 1/1/13 to 4/15/13				

ROTH IRA CONTRIBUTIONS

	2012 Amount Taxpayer	2012 Amount Spouse	2011 Amount Taxpayer	2011 Amount Spouse
Roth IRA contributions you made or expect to make (1=maximum) ($5,000/$6,000 if 50 or older)				
Contributions made to date				

SEP, SIMPLE AND QUALIFIED PLANS (KEOGH)

	2012 Amount Taxpayer	2012 Amount Spouse	2011 Amount Taxpayer	2011 Amount Spouse
Profit-sharing (25%/1.25) contributions you made or expect to make (1=maximum)				
Money purchase (25%/1.25) contributions you made or expect to make (1=maximum)				
Defined benefit contributions you expect to make				
Self-employed SEP (25%/1.25) contributions you made or expect to make (1=maximum)				
Plan contribution rate if not .25 (.xxxx)				
Individual 401k: SE elective deferrals (except Roth) (1=max.)				
Individual 401k: SE designated Roth contributions (1=max.)				
SIMPLE contributions:				
Self-employed SIMPLE contributions you made or expect to make (1=maximum)				
Employer matching rate if not .03 (.xxxx)				
1=nonelective contributions (2%)				
Contributions made to date				

ADJUSTMENTS TO INCOME

	2012 Amount Taxpayer	2012 Amount Spouse	2011 Amount Taxpayer	2011 Amount Spouse
Self-employed health insurance:				
Total premiums (excluding long-term care)				
Long-term care premiums				
Student loan interest paid (1098-E, box 1)				
Educator expenses (kindergarten thru grade 12)				
Jury duty pay given to employer				
Expenses from rental of personal property				
Other adjustments to income:				

Alimony paid:	Taxpayer	Spouse
Recipient's first name		
Recipient's last name		
Recipient's SSN		
Amount paid	2011 amt:	2011 amt:

2012	1040	US	Itemized Deductions	25

Please enter all pertinent 2012 amounts and attach all 1098 forms.
Last year's amounts are provided for your reference.

MEDICAL AND DENTAL EXPENSES

NOTE: Enter self-employed health insurance premiums on Sheet 24 and Medicare insurance premiums on Sheet 14.

	2012 Amount	TS	2011 Amount
Prescription medicines and drugs			
Doctors, dentists and nurses			
Hospitals and nursing homes			
Insurance premiums not entered elsewhere (excl. LT care & amts. paid w/pre-tax dollars)			
Long-term care premiums - taxpayer			
Long-term care premiums - spouse			
Insurance reimbursement (enter as a positive number)			
Lodging and transportation:			
Out-of-pocket expenses			
Medical miles driven			
Other medical and dental expenses:			

TAXES PAID (State and local withholding and 2012 estimates are automatic.)

	2012 Amount	TS	2011 Amount
State income taxes - 1/12 payment on 2011 state estimate			
State income taxes - paid with 2011 state return extension			
State income taxes - paid with 2011 state return			
State income taxes - paid for prior years and/or to other state			
City/local income taxes - 1/12 payment on 2011 city/local estimate			
City/local income taxes - paid with 2011 city/local extension			
City/local income taxes - paid with 2011 city/local return			

SALES AND USE TAXES PAID

	2012 Amount	TS	2011 Amount
State and local sales taxes (except autos and special items)			
Use taxes paid on 2012 purchases			
Use taxes paid with 2011 state return			
Sales tax on autos not included above			
Sales tax on boats, aircraft, other special items			

OTHER TAXES PAID

	2012 Amount	TS	2011 Amount
Real estate taxes - principal residence:			
Real estate taxes - property held for investment			
Personal property taxes (including auto fees in some states. Provide a copy of tax notice)			
Foreign income taxes			
Other taxes:			

2012	1040	US	Itemized Deductions (continued)	25 p2

Please enter all pertinent 2012 amounts. Last year's amounts are provided for your reference.

INTEREST PAID

	2012 Amount	TS	2011 Amount
Home mortgage int. (Box 1) and points (Box 2) reported on Form 1098:			
Home mortgage interest not reported on Form 1098:			
Payee's name			
Payee's SSN or FEIN			
Payee's street address			
Payee's city			
Payee's state			
Payee's ZIP code			
Amount paid			
Points not reported on Form 1098:			
Mortgage insurance premiums on post 12/31/06 contracts (Box 4)			
Investment interest (interest on margin accounts):			
Passive interest			
Certain home mortgage interest included above (6251)			

NOTE: Points paid on loans other than to buy, build, or improve your main home are deductible over the life of the mortgage. For these types of loans also provide the dates and lives of the loans.

CASH CONTRIBUTIONS

NOTE: No deduction is allowed for cash or check contributions unless the donor maintains a bank record, or a written communication from the donee, showing the name of the organization, contribution date(s), and contribution amount(s).

Churches, schools, hospitals, and other charitable organizations (50% limitation):

Contributions by cash or check:	2012 Amount	TS	2011 Amount
Volunteer expenses (out-of-pocket)			
Number of charitable miles			

Veterans' organizations, fraternal societies, nonprofit cemeteries, and certain private nonoperating foundations (30% limitation):

Contributions by cash or check:	2012 Amount	TS	2011 Amount
Volunteer expenses (out-of-pocket)			
Number of charitable miles			

2012	1040	US	Itemized Deductions (continued)	25 p3

Please enter all pertinent 2012 amounts. Last year's amounts are provided for your reference.

NONCASH CONTRIBUTIONS

NOTE: Use Sheet 26 if total noncash contributions are over $500. No deduction is allowed for contributions of clothing and household items that are not in *good* used condition or better. In addition, a deduction for any item with minimal monetary value may be denied.

	2012 Amount	TS	2011 Amount
50% limitation (see above):			
30% limitation (see above):			
30% capital gain property (gifts of capital gain property to 50% limit orgs.):			
20% capital gain property (gifts of capital gain property to non-50% limit orgs.):			

MISCELLANEOUS DEDUCTIONS (subject to 2% AGI limit)

	2012 Amount	TS	2011 Amount
Union and professional dues			
Other unreimbursed employee expenses (uniforms and protective clothing, professional subscriptions, employment agency fees, and certain edu. expenses):			
Investment expense:			
Tax return preparation fee			
Safe deposit box rental			
Miscellaneous deductions (2% AGI) (certain legal and accounting fees, and custodial fees):			

2012	1040	US	Itemized Deductions (continued)	25 p4

Please enter all pertinent 2012 amounts. Last year's amounts are provided for your reference.

OTHER MISCELLANEOUS DEDUCTIONS

	2012 Amount	TS	2011 Amount
Estate tax, section 691(c)			

Other miscellaneous deductions:

	2012 Amount	TS	2011 Amount

2012	1040	US	Itemized Deductions (continued)	25 p5

If either of the following conditions below apply to you, your home mortgage interest deduction may need to be limited and the input section provided below should be completed. If neither condition applies, enter home mortgage interest amounts on organizer sheet 25 p2.

1. Total home equity debt exceeded $100,000 at any time during 2012 ($50,000 if married filing separate). For this purpose, home equity debt is defined as any mortgages taken out after October 13, 1987 in which the proceeds were used for purposes other than to buy, build, or improve your home. An example of this type of mortgage is a home equity loan use to pay off credit card bills, buy a car, or pay tuition.
2. Total home acquisition debt exceeded $1,000,000 at any time during 2012 ($500,000 if married filing separate). For this purpose, home acquisition debt is defined as any mortgages taken out after October 13, 1987 in which the proceeds were used to buy, build, or improve your home.

NOTE: When completing the input section below, grandfather debt represents loans taken out prior to October 14, 1987.

Please enter all pertinent 2012 amounts and attach all 1098 forms.
Last year's amounts are provided for your reference.

	2012 Amount	TS	2011 Amount
Fair market value of the property on the date that the last debt was secured			
Home acquisition and grandfather debt on the date that the last debt was secured			

LOAN INFORMATION

Loan #1	2012 Amount	TS	2011 Amount
Lender's name			
Form (see table)			
Number of form			
1=taxpayer, 2=spouse, blank=joint			
Interest paid			
Points paid			
Total principal paid			
Lump sum principal payment (if paid off)			
Months outstanding (if not 12)			
Home acquisition debt balance - beginning of year			
Home acquisition debt borrowed in 2012			
Home equity debt balance - beginning of year			
Home equity debt borrowed in 2012			
Grandfather debt balance - beginning of year			

Loan #2	2012 Amount	TS	2011 Amount
Lender's name			
Form (see table)			
Number of form			
1=taxpayer, 2=spouse, blank=joint			
Interest paid			
Points paid			
Total principal paid			
Lump sum principal payment (if paid off)			
Months outstanding (if not 12)			
Home acquisition debt balance - beginning of year			
Home acquisition debt borrowed in 2012			
Home equity debt balance - beginning of year			
Home equity debt borrowed in 2012			
Grandfather debt balance - beginning of year			

Form

1 = Schedule A (default)
2 = Business use of home
3 = Schedule E

2012	1040	US	Noncash Contributions (Form 8283)	26

If your total noncash contributions are in excess of $500 in 2012, please complete the information below for each donee using the following guidelines:

* If you contributed a motor vehicle, boat, or airplane with a claimed value of more than $500, attach Form 1098-C or other written acknowledgement received from the donee organization.

* A deduction for contributions of clothing or other household items that are not in *good* used condition or better is not allowed. In addition, a deduction for any item with minimal monetary value may be denied. However, these rules do not apply to any contribution of a single item for which a deduction of more than $500 is claimed, if a qualified appraisal for the donated property is provided.

DONATED PROPERTY INFORMATION

No.		Name of charitable organization (donee)	
		Street address	
		City	
		State	
		ZIP code	
		1=spouse, 2=joint	
		Property description (other than vehicle)	
	Vehicle	Identification number (VIN)	
		Year (yyyy)	
		Make and model	
		Condition and mileage	
		Date of contribution (m/d/y)	
		Date acquired by donor (m/y)	
		How acquired by donor (Table 1 or describe)	
		Donor's cost or basis	
		Fair market value	
		Method used to determine FMV (Table 2 or describe)	

No.		Name of charitable organization (donee)	
		Street address	
		City	
		State	
		ZIP code	
		1=spouse, 2=joint	
		Property description (other than vehicle)	
	Vehicle	Identification number (VIN)	
		Year (yyyy)	
		Make and model	
		Condition and mileage	
		Date of contribution (m/d/y)	
		Date acquired by donor (m/y)	
		How acquired by donor (Table 1 or describe)	
		Donor's cost or basis	
		Fair market value	
		Method used to determine FMV (Table 2 or describe)	

1 **How Property was Acquired**	2 **Method Used to Determine FMV**
1 = Purchase 2 = Gift 3 = Inheritance 4 = Exchange	1 = Appraisal 2 = Thrift shop value 3 = Catalog 4 = Comparable sales For other methods, see IRS Pub. 561.

2012	1040	US	Employee/Vehicle Bus. Exp. (Form 2106)	No.	30

Please enter all pertinent 2012 amounts. Last year's amounts are provided for your reference.

GENERAL INFORMATION

Occupation, if different from Form 1040		
Form		
Number of form (1=first Schedule C, 2=second, etc.)		
1=spouse		
1=performance artist, 2=handicapped, 3=fee-basis government official		

EMPLOYEE BUSINESS EXPENSES

	2012 Amount	2011 Amount
Meal and entertainment expenses		
Reimbursements for meals and entertainment not on W-2, box 1		
1=Department of Transportation (80% meal allowance)		
Local transportation (bus, taxi, train, etc.)		
Travel expenses while away from home overnight		
Reimbursements not included on Form W-2, box 1		
Other business expenses:		

2012	1040	US	Vehicle Expenses (Form 2106) (cont.)	No.	30 p2

Please enter all pertinent 2012 amounts. Last year's amounts are provided for your reference.

VEHICLE INFORMATION

	2012 Amount	2011 Amount
1=vehicle used primarily by more than 5% owner		
1=vehicle is available for off-duty personal use		
1=no other vehicle is available for personal use		
1=no evidence to support your deduction		
1=no written evidence to support your deduction		

VEHICLE 1

	2012 Amount	2011 Amount
Description of vehicle		
Date placed in service (m/d/y)		
Total mileage (for the tax year)		
Business mileage		
Commuting mileage (for the tax year)		
Average daily round-trip commute		
Number of months of vehicle business use (if not 12)		
Parking fees and tolls (business portion only)		
Actual expenses:		
Gasoline, lube, oil		
Repairs		
Tires		
Insurance		
Miscellaneous		
Auto license (other than personal property taxes)		
Personal property taxes (based on car's value)		
Interest (car loan) (for Schedule C, E & F)		
Vehicle rent or lease payments		
Inclusion amount (enter as positive)		
Value of employer-provided vehicle on Form W-2 (2106)		

VEHICLE 2

	2012 Amount	2011 Amount
Description of vehicle		
Date placed in service (m/d/y)		
Total mileage (for the tax year)		
Business mileage		
Commuting mileage (for the tax year)		
Average daily round-trip commute		
Number of months of vehicle business use (if not 12)		
Parking fees and tolls (business portion only)		
Actual expenses:		
Gasoline, lube, oil		
Repairs		
Tires		
Insurance		
Miscellaneous		
Auto license (other than personal property taxes)		
Personal property taxes (based on car's value)		
Interest (car loan) (for Schedule C, E and F)		
Vehicle rent or lease payments		
Inclusion amount (enter as positive)		
Value of employer-provided vehicle on Form W-2 (2106)		

2012	1040	US	Health Savings Accounts (8889)	32.1

Please enter all pertinent 2012 amounts & attach all 1099-SA forms.
Last year's amounts are provided for your reference.

HSA CONTRIBUTIONS

NOTE: Contributions to an HSA are only eligible to persons covered under a high deductible health plan. For tax year 2012, a high deductible health plan is one with an annual deductible that is not less than $1,200 for self-only coverage or $2,400 for family coverage, and the annual out-of-pocket expenses (deductibles, co-payments, and other amounts, but not premiums) do not exceed $6,050 for self-only coverage or $12,100 for family coverage.

	2012 Amount		2011 Amount	
	Taxpayer	Spouse	Taxpayer	Spouse
1=self-only coverage, 2=family coverage				
HSA contributions you made or expect to make, except rollovers, employer contributions, and contributions made to an employee account through a cafeteria plan (1=maximum)				
Contributions included above that were made after you became eligible for Medicare				
Contributions made to date				

HSA DISTRIBUTIONS

	2012 Taxpayer	2012 Spouse	2011 Taxpayer	2011 Spouse
Total HSA distribution received (1099-SA, box 1)				
Distributions included above that were rolled over to another HSA				
Total unreimbursed qualified medical expenses				

2012	1040	US	Child and Dependent Care Expenses (Form 2441)	33.1,33.2

Please enter all pertinent 2012 information. Last year's amounts are provided for your reference. You must have paid for the care of one or more dependents enabling you to work or attend school to qualify for this credit.

DEPENDENT CARE EXPENSES (33.1)

	2012 Amount		2011 Amount	
	Taxpayer	Spouse	Taxpayer	Spouse
Dependent care expenses incurred but not paid in 2012				
Employer-provided benefits forfeited in 2012				

PERSONS AND EXPENSES QUALIFYING FOR DEPENDENT CARE CREDIT

No.	First name		
	Last name		
	Date of birth (m/d/y)		
	Social security number		
	Qualified dependent care expenses incurred and paid in 2012		2011 amt:
	1=disabled		
	1=spouse, 2=joint		

No.	First name		
	Last name		
	Date of birth (m/d/y)		
	Social security number		
	Qualified dependent care expenses incurred and paid in 2012		2011 amt:
	1=disabled		
	1=spouse, 2=joint		

No.	First name		
	Last name		
	Date of birth (m/d/y)		
	Social security number		
	Qualified dependent care expenses incurred and paid in 2012		2011 amt:
	1=disabled		
	1=spouse, 2=joint		

PERSONS OR ORGANIZATIONS PROVIDING CARE (33.2)

No.	Name of provider		
	Street address		
	City, state, ZIP code		
	Identification number (SSN or EIN)		
	Amount paid to care provider in 2012		2011 amt:
	1=spouse, 2=joint		

No.	Name of provider		
	Street address		
	City, state, ZIP code		
	Identification number (SSN or EIN)		
	Amount paid to care provider in 2012		2011 amt:
	1=spouse, 2=joint		

2012	1040	US	Education Credits / Tuition Deduction	No.	38

Please complete the information below if you paid qualified education expenses in 2012 for you, your spouse, or your dependents enrolled in an accredited postsecondary institution. Last year's amounts are provided for your reference.

STUDENT INFORMATION

1=taxpayer, 2=spouse	
First name	
Last name	
Social security number	
Number of years hope credit claimed	
Number of years American opportunity credit claimed	
1=student was NOT entrolled at least half-time for at least one academic period that began in 2012 at an eligible institution in a qualified program	
1=student completed first four years of post-secondary education before 2012	
1=student was convicted, before the end of 2012, of a felony for possession or distribution of a controlled substance	

EDUCATIONAL INSTITUTION ATTENDED (#1)

Name	
Street address	
City	
State	
ZIP code	
1=2012 Form 1098-T received	
1=2012 Form 1098-T received with Box 2 & 7 completed	
Federal ID number from Form 1089-T	

EDUCATIONAL INSTITUTION ATTENDED (#2)

Name	
Street address	
City	
State	
ZIP code	
1=2012 Form 1098-T received	
1=2012 Form 1098-T received with Box 2 & 7 completed	
Federal ID number from Form 1089-T	

QUALIFIED EDUCATION EXPENSES

	2012 Amount	2011 Amount
Qualified tuition & fees paid in 2012 (net of refund or assistance, & not entered elsewhere)		
Books & supplies required to be purchased from institution		
Books & supplies not entered above		
Amount of prior year refund or assistance *		

* Refund of qualified expenses and tax-free educational assistance received after you file your return for the year in which the expenses were paid.