2012 1040 US Topical Index

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ORGANIZER Page 2 Tax Organizer US 2012 1040 **Tax Return Appointment** Rountree Consulting, Inc. 300 S. El Camino Real Suite 206 San Clemente, CA 92672 Date: Telephone number: (949) 366-3180 Time: 949-366-3181 Fax number: Location: E-mail address: 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 .... In care of ..... Street address..... Apartment number. . Address 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 . . . .

	1040	US	Tax Organizer			
		•		012 informa eck the box	tion. If you have attached and do not enter a 2012	d amount.
	GES, SALAI	RIES AND	TIPS		2012 A	2011 A
Emplo	oyer name:				2012 Amount	2011 Amount
				_		
					Attach Forms W-2	
Ш						
INTE	REST INC	OME				
Payer	name:					
Н					Attach Forms 1099-INT	
Н						
DIVII	DEND INCO	OME				
Payer	name:					
					A.I. I. E 1000 DIV	
H					Attach Forms 1099-DIV	
$\vdash$						
PEN:	SIONS, IRA	AND GAN	IBLING INCOME			
	name:					
	name:					
	name:				Attach Forms	
	name:				Attach Forms 1099-R & W-2G	
	name:					
		reported on V	V-2G			
	Winnings not	•	V-2G			
	Winnings not Total gamblin	g losses				
<u>О</u> ТН	Winnings not Total gamblin	g losses	DRMS - INCOME			
отн	Winnings not Total gamblin <b>ER GOVER</b> Form 1099-B	g losses  RNMENT FO  - Sales of sto	DRMS - INCOME  ock (also include transaction h	istory)		
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RETI	REMENT P	LAN CON	TRIBUTIONS	2012 Amount	2011 Amount
Taxpa	yer: Traditiona	I IRA contrib	outions (1=maximum)		
			s (1=maximum)		
	Self-employe	ed, SEP, SIMPLI	E, & qualified plan contributions (1=maximum)		
Spous			outions (1=maximum)		
			s (1=maximum)		
	Self-employe	ed, SEP, SIMPLI	E, & qualified plan contributions (1=maximum)		
ОТЦЕ	ED COVEDI	MENT E	DRMS - DEDUCTIONS		
			interest		
_			elated expenses	Attach Forms 1098	
ADJL	JSTMENTS	TO INCO	ME		
Taxpa	•		г		
			nce premiums		
	•				
			sonal property		
Oti	her adjustmen	ts to income	): 		
_					
Δli	mony paid - F	ecinient nar	ne & SSN		
ΛII	mony paid - i	ecipient nai	nie & 351(		
_					
Spous	e:				
Se	If-employed h	ealth insurar	nce premiums		
Ed	lucator expens	ses			
			sonal property		
Otl	her adjustmen	ts to income	э: Г		
_					
A 1:		la simi sml mau	and R CCNI		
AII	mony paid - F	ecipient nar	ne & SSN		
_					
MEDI	CAL AND [	DENTAL E	XPENSES		
Prescr	iption medicin	es and drug	S		
	•				
	•				
	•		ayer		
-	•	•	ISE		
			nortation expenses		
			portation expenses		
Other:					
Jui 101 .					
TAXE	S PAID				
State i	ncome taxes	- 1/12 payme	ent on 2011 state estimate		
Stata i	ncome taxes	paid with 2	011 state extension		
State		noid with 2	011 state return		
	ncome taxes	· paiu witii 2	off State return		

City/lo			Tax Organizer		
City/lo	ES PAID (co	ntinued)		2012 Amount	2011 Amount
	•	•	ayment on 2011 city/local estimate		
City/lo	cal income tax	ces - paid w	ith 2011 city/local extension		
			ith 2011 city/local return		
State	and local sales	s taxes (exc	ept autos and special items)		
			es		
Use ta	axes paid on 20	011 state ref	turn		
			above		
Sales	taxes paid on	boats, aircra	aft, and other special items		
	•		idence		
			d for investment		
Pe	ersonal propert	ty taxes (inc	luding automobile fees in some states)	Attach Tax Notice	
	<b>REST PAID</b>		,		
Home	mortgage inte	rest and poi	nts paid:		
	3 3		'	1 1. 5 1000	
				Attach Forms 1098	
Home m	nortgage interest n	ot on Form 109	8 (include name, SSN, & address of payee):		
	3 3		, , , , , , , , , , , , , , , , , , , ,		
-					
Points	not reported of	on Form 109	98:	1	
-					
Morta	age insurance	premiums o	n post 12/31/06 contracts		
			margin accounts):		
		`	<i>,</i>		
Passiv	ve interest				
	H CONTRIB				
	: No deduction	is allowed t	for cash or check contributions unless the do	nor maintains a bank record, or	a written communication
	from the don	ee, showing	the name of the organization, contribution d	ate(s), and contribution amount	(S).
Volunt	teer expenses	(out-of-pock	ret)		
Numbe	er of charitable	e miles			
	CASH CON	TRIBUTIO	)NS		
NON					
	: No deduction			ems that are not in good used c	ondition or better, in additio
	: No deduction a deduction f		for contributions of clothing and household it with minimal monetary value may be denied	ems that are not in good used c	ondition or better, in additio
	: No deduction a deduction f			ems that are not in good used c	ondition or better, in additio
	: No deduction a deduction f			ems that are not in good used c	ondition or better, in additio
NOTE:	: No deduction a deduction f	is allowed for any item	for contributions of clothing and household ite with minimal monetary value may be denied	ems that are not in good used co.	ondition or better, in additio
MISC	ELLANEOU	is allowed for any item	for contributions of clothing and household ite with minimal monetary value may be denied	ems that are not in good used co.	ondition or better, in additio
MISC Union	ELLANEOU and profession	is allowed for any item  JS DEDUC	for contributions of clothing and household ite with minimal monetary value may be denied	ems that are not in good used co	ondition or better, in additio
MISC Union Tax re	CELLANEOU and profession	is allowed to any item  JS DEDUC  nal dues	for contributions of clothing and household ite with minimal monetary value may be denied	ems that are not in good used o	ondition or better, in additio
MISC Union Tax re Safe d	ELLANEOU and profession eturn preparation	JS DEDUC nal dues on fee	for contributions of clothing and household ite with minimal monetary value may be denied	ems that are not in good used co.	ondition or better, in additio
MISC Union Tax re Safe d	ELLANEOU and profession eturn preparation deposit box rer ment expenses	JS DEDUC nal dues on fee	for contributions of clothing and household ite with minimal monetary value may be denied CTIONS	ems that are not in good used co.	ondition or better, in additio
MISC Union Tax re Safe d Investi	ELLANEOU and profession eturn preparation deposit box rer ment expenses	JS DEDUC nal dues on fee s	for contributions of clothing and household ite with minimal monetary value may be denied CTIONS	ems that are not in good used co.	ondition or better, in additio
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MISC Union Tax re Safe d Investi	ELLANEOU and profession eturn preparation deposit box reriment expenses atax, section 6	JS DEDUC nal dues on fee s	for contributions of clothing and household ite with minimal monetary value may be denied CTIONS	ems that are not in good used co.	ondition or better, in additio
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MISC Union Tax re Safe d Investi	ELLANEOU and profession eturn preparation deposit box rer ment expenses e tax, section 6 mbursed emplo	JS DEDUC nal dues on fee s	for contributions of clothing and household ite with minimal monetary value may be denied CTIONS	ems that are not in good used co.	ondition or better, in additio
MISC Union Tax re Safe d Investi Estate Unrein	ELLANEOU and profession eturn preparation deposit box rer ment expenses e tax, section 6 mbursed emplo	JS DEDUC nal dues on fee s	for contributions of clothing and household ite with minimal monetary value may be denied	ems that are not in good used co.	ondition or better, in additio
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MISC Union Tax re Safe d Investi Estate Unrein	ELLANEOU and profession eturn preparation deposit box rer ment expenses e tax, section 6 mbursed emplo	JS DEDUC nal dues on fee s	for contributions of clothing and household ite with minimal monetary value may be denied	ems that are not in good used or	ondition or better, in additio

2012	1040	US	Client Information		1
	300 S. E San Cle Telepho Fax nur E-mail a	El Camino I emente, CA one numbe nber: address:	r: (949) 366-3180 949-366-3181	Tax Return A  Date: Time: Location:	
CLIEN	This of Of IT INFOR	your 2012	er will assist you in gathering information tax return. Please add, change, or del	tion necessary for the tee information as a	ne preparation ppropriate.
Filing Status	1=married	filing separate	e and lived with spouse		Filing Status
Taxpayer	Last name Title/suffix Social secu Occupation Date of bir Date of dea	urity number  n  th (m/d/y)  ath (m/d/y)			Filing Status  1 = Single 2 = Married filing joint 3 = Married filing separat 4 = Head of household 5 = Qualifying widow(er)
Spouse	First name Last name Title/suffix Social secu Occupation Date of bir Date of dea	and initial urity number th (m/d/y)			
Address	In care of . Street add Apartment City	ress number			
	Region	e			

1 p2

US **Dependents** 2012 1040

2

### Please add, change or delete information for 2012.

# **DEPENDENTS**

1	Dependent	Dependent	
First name	'	'	
Last name			Type of Dependent
Title/suffix			4 0.7.1.
Date of birth (m/d/y)			1 = Child living w/taxpayer 2 = Child not living w/taxpayer
Social security number			3 = Dependent other than child
Relationship			4 = Head of household only, not a dependent
Months lived at home			5 = Earned income credit only,
Type of dependent (see table)			not a dependent
Earned income credit (see table)			
Claimed by: 1=taxpayer, 2=spouse			
	Dependent	Dependent	Earned Income Credit
First name			1 \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
Last name			1 = When applicable (default) 2 = Student age 19 to 23
Title/suffix			3 = Disabled
Date of birth (m/d/y)			4 = Force 5 = Suppress
Social security number			<u> </u>
Relationship			
Months lived at home			NOTE IS
Type of dependent (see table)			NOTE: If you claim the earned income credit, please provide
Earned income credit (see table)			proof that your child is a res-
Claimed by: 1=taxpayer, 2=spouse			ident of the U.S. This proof is typically in the form of:
	Dependent	Dependent	School records or statement
First name			2. Landlord or property man-
Last name			agement statement 3. Health care provider
Title/suffix			statement
Date of birth (m/d/y)			4. Medical records 5. Child care provider records
Social security number			6. Placement agency statement
Relationship			7. Social service records or statement
Months lived at home			8. Place of worship statement
Type of dependent (see table)			9. Indian tribe office statement 10. Employer statement
Earned income credit (see table)			To. Employer statement
Claimed by: 1=taxpayer, 2=spouse			
	Dependent	Dependent	NOTE: K
First name			NOTE: If your child is disabled, please provide one of the fol-
Last name			lowing forms of proof of disa-
Title/suffix			bility:
Date of birth (m/d/y)			Doctor statement     Other health care provider
Social security number			statement
Relationship			Social services agency or program statement
Months lived at home			program statement
Type of dependent (see table)			
Earned income credit (see table)			
Claimed by: 1=taxpayer, 2=spouse			
			2

ORGANIZER

2012 1040 US Miscellaneous Questions

2012	1040	US Miscellaneous	Questions
	If an	of the following items pertain to appropriate box and provid	o you or your spouse for 2012, please check the le additional information if necessary.
YES	NO	Did your marital status change during	the year?
		Did your address change during the ye	ar?
		Could you be claimed as a dependent	on another person's tax return?
		Were there any changes in dependent	5?
		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?
			ur principal home or second home, or did you take a home equity loan?
		Did you make any residential energy-e energy sources?	fficient improvements or purchases involving solar, wind, geothermal or fuel cell
		Did you receive a distribution from or r	nake a contribution to a retirement plan (401(k), IRA, etc.)?
		Did you transfer or rollover any amour	t from one retirement plan to another?
		Did you convert part or all of your trad	tional/SEP/SIMPLE IRA to a Roth IRA?
		Did you, your spouse, or a dependent vocational school?	incur any tuition expenses that are required to attend a college, university, or
		Did you incur a loss because of damaç	ed 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 w	th 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?

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)

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

#### PENSIONS, IRA DISTRIBUTIONS (13.1)

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

#### **GAMBLING WINNINGS (W-2G) (13.2)**

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

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

(13.2)	2012 Amount	TS	2011 Amount
Total gambling losses			
Winnings not reported on Form W-2G			
·			

10, 13.1, 13.2

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)**

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

# **DIVIDEND INCOME (12)**

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

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 A	mount	2011 A	mount
	Taxpayer	Spouse	Taxpayer	Spouse
Social security benefits (SSA-1099, box 5)				-
Medicare premiums paid (SSA-1099)				
Fier 1 RR retirement benefits (RRB-1099, box 5)				
=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				
ncome from rental of personal property				
ncome subject to S/E tax:			<u> </u>	
Other income (1099-MISC, box 3)				
<u> </u>				
T A 3 / 14 // TI II I E I B				
TAX WITHHELD (not entered elsewhere)				
ederal income tax withheld				
State income tax withheld.				
Local income tax withheld.				

**ORGANIZER** 

2012   1040   IIS   State & Local Tay Refunds / Unemployment Compensation   14.2	2012 1040 US State & Local Tax Refunds / Unemployment Compensation 1	14.2	State & Local Tax Refunds / Unemployment Compensation	US	1040	2012
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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)

UNEMPLO	2012 1099-G Amount	
	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)	
No.	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)	
	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)	
No.	ATAA/RTAA payments (Box 5)	
·	Taxable grants:	
	Taxable grants.	
	Federal taxable amount (Box 6)	
	Federal taxable amount (Box 6)	
	Federal taxable amount (Box 6)	
	Federal taxable amount (Box 6)	
	Federal taxable amount (Box 6)	
	Federal taxable amount (Box 6)	
	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	
	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).	

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 AN	ID QTP'S (Form 1099-Q)	2012 Amount	2011 Amount
	Name of payer		
No.	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		
	In .		
	Name of payer		
	1=spouseQualified expenses:		
	Higher education (net of nontaxable benefits)		
	Elementary & secondary education (net of nontaxable benefits).		
	Form 1099-Q:		
	Gross distributions (Box 1)		
No.	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.		
	Busis in this Est us of TEISTITI		
	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)		
No.	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		

12	1040	US	Business Income (Schedule C	<i>;</i> )	No.	16
	Please 6	enter all pe	rtinent 2012 amounts. Last year's amounts	are provided for	or your reference	e.
GFN	NERAL IN	-	-	•	•	
			Form 1040			
			om Form 1040			
			10			
			1040			
Other	accounting n	nethod				
Accou	ınting method	: 1=cash, 2=	-accrual			
	-		wer cost/market, 3=other			
			business			
			or will you file all required Form(s) 1099: 1=yes, 2=no			
	•		nt tax			
			"terial income producing factor			
1-0613						
1=inve 1=min	estment nister's Sched	ule C				
1=inve 1=min	estment nister's Sched	ule C				
1=inve 1=min 1=sing	estment nister's Sched	ule C	r company.	2012 Amount		ount
1=inve 1=min 1=sing INCO Gross	estment	ule C imited liability ales (Form 10	/ company	2012 Amount	2011 Am	ount
1=inve 1=min 1=sing INCO Gross Return	estment	ule C imited liability ales (Form 10	r company.	2012 Amount	2011 Am	ount
1=inve 1=min 1=sing INCO Gross Return	estment	ule C imited liability ales (Form 10	/ company	2012 Amount	2011 Am	ount
1=inve 1=min 1=sing INCO Gross Return	estment	ule C	/ company	2012 Amount	2011 Am	ount
1=inve 1=min 1=sing INCO Gross Return	estment	ule C	/ company	2012 Amount	2011 Am	ount
1=inve 1=min 1=sing INCO Gross Return	estment	ule C	/ company	2012 Amount	2011 Am	ount
1=inve 1=min 1=sing INCO Gross Return	estment	ule C	/ company	2012 Amount	2011 Am	ount
1=inve 1=min 1=sing INCO Gross Return	estment	ule C	/ company	2012 Amount	2011 Am	ount
1=invertible 1=min 1=sing INC( Gross Return Other	estment  nister's Sched gle member li  OME  receipts or s ns and allowa income:	ule C	7 company.	2012 Amount	2011 Am	ount
1=inve 1=min 1=sing INC( Gross Return Other	estment  nister's Sched gle member li  OME  receipts or s ns and allowa income:	ule C mited liability ales (Form 10 inces	OP9-MISC, box 7).	2012 Amount	2011 Am	ount
1=invertible 1=min 1=sing INC( Gross Return Other	estment  nister's Sched gle member li  OME  receipts or s ns and allowa income:  ST OF GO  tory at beginn	ule C mited liability ales (Form 10 nnces	Opp-MISC, box 7).	2012 Amount	2011 Am	ount
1=invertal 1=min 1=sing INC() Gross Return Other  COS Invent Purcha	estment	ule C mited liability ales (Form 10 inces	OP9-MISC, box 7).	2012 Amount	2011 Am	ount
1=invertal 1=min 1=sing INC() Gross Return Other  COS Invent Purcha Cost of	estment  nister's Sched gle member li  OME  receipts or s ns and allowa income:  ST OF GC  tory at beginn ases of items for po	ule C mited liability ales (Form 10 inces	OP9-MISC, box 7).	2012 Amount	2011 Am	ount
1=invertal 1=min 1=sing INCO Gross Return Other COS Invent Purcha Cost of Material 1=min 1	estment  nister's Sched gle member li  OME  receipts or s ns and allowa income:  ST OF GC  tory at beginn ases of items for poor ials and supp	ule C	OP9-MISC, box 7).	2012 Amount	2011 Am	ount
1=invertal 1=min 1=sing INCO Gross Return Other COS Invent Purcha Cost of Material 1=min 1	estment  nister's Sched gle member li  OME  receipts or s ns and allowa income:  ST OF GC  tory at beginn ases of items for por	ule C	OSP-MISC, box 7).	2012 Amount	2011 Am	ount
1=invertal 1=min 1=sing INCO Gross Return Other COS Invent Purcha Cost of Material 1=min 1	estment  nister's Sched gle member li  OME  receipts or s ns and allowa income:  ST OF GC  tory at beginn ases of items for poor ials and supp	ule C	OSP-MISC, box 7).	2012 Amount	2011 Am	ount
1=invertal 1=min 1=sing INCO Gross Return Other COS Invent Purcha Cost of Material 1=min 1	estment  nister's Sched gle member li  OME  receipts or s ns and allowa income:  ST OF GC  tory at beginn ases of items for poor ials and supp	ule C	OSP-MISC, box 7).	2012 Amount	2011 Am	ount
1=invertal 1=min 1=sing INCO Gross Return Other COS Invent Purcha Cost of Material 1=min 1	estment  nister's Sched gle member li  OME  receipts or s ns and allowa income:  ST OF GC  tory at beginn ases of items for poor ials and supp	ule C	OSP-MISC, box 7).	2012 Amount	2011 Am	ount
1=invertal 1=min 1=sing INCO Gross Return Other COS Invent Purcha Cost of Material 1=min 1	estment  nister's Sched gle member li  OME  receipts or s ns and allowa income:  ST OF GC  tory at beginn ases of items for poor ials and supp	ule C	OSP-MISC, box 7).	2012 Amount	2011 Am	ount
1=invertal 1=min 1=sing INC() Gross Return Other  COS Invent Purcha Cost of Co	estment  nister's Sched gle member li  OME  receipts or s ns and allowa income:  ST OF GC  tory at beginn ases of items for poof ials and supp costs:	DODS SO  ing of the year  ersonal use	OSP-MISC, box 7).	2012 Amount	2011 Am	ount

2012	1040	US	Business Income (Schedule C) (cont.)	No.	16
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Please enter all	pertinent 2012 amounts.	Last year's amounts are	provided for your reference
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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.		
<del></del>		
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 IC.		
NOTE: If you purchased or disposed of any business as	sets, please complete Sheet	: 22.

16 p2

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)
				l	I	I			17

2012 1040 US Sale of Home & Moving Expenses

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.

Description of property (Box 3).  Date acquired (m/dfy)  Date acquired (m/dfy)  Date sold (m/dfy)  Date sold (m/dfy)  Date sold property as main home for at least 2 of 5 years before sale.  Solution of days after December 31, 2008 that home was not used as principal residence.  Date of days after December 31, 2008 that home was not used as principal residence.  Date of days after December 31, 2008 that home was not used as principal residence.  Date of days after December 31, 2008 that home was not used as principal residence.  Date of days after December 31, 2008 that home was not used as principal residence.  Date of days after December 31, 2008 that home was not used as principal residence.  Date of days after December 31, 2008 that home was not used as principal residence.  Date of days after December 31, 2008 that home was not used as principal residence.  Date of days after December 31, 2008 that home was not used as principal residence.  Date of days after December 31, 2008 that home was not used as principal residence.  Date of days after December 31, 2008 that home was not used as principal residence.  Date of days after December 31, 2008 that home was not used as principal residence.  Date of days after December 31, 2008 that home was not used as principal residence.  Date of days after December 31, 2008 that home.  Date of days after December 31, 2008 that home.  Date of days after December 31, 2008 that home.  Date of days after December 31, 2008 that home.  Date of days after December 31, 2008 that home.  Date of days after December 31, 2008 that home.  Date of days after December 31, 2008 that home.  Date of days after December 31, 2008 that home.  Date of days after December 31, 2008 that home.  Date of days after December 31, 2008 that home.  Date of days after December 31, 2008 that home.  Date of days after December 31, 2008 that home.  Date of days after December 31, 2008 that home.  Date of days after December 31, 2008 that home.  Date of days after December 31, 2008 that home.  Date of days	the purchase and sale of your home.	
bate sold (m/d/y) (Box 1)  sales price (Box 2).  sale of home.  —prowned and used property as main home for at least 2 of 5 years before sale.  —first-time homebuyer credit was previously taken on this home. —business use in year of sale.  —business of Sale (Commissions, advertising fees, legal fees, and loan charges paid by the seller)  —business of Sale (Commissions, advertising fees, legal fees, and loan charges paid by the seller)  —business of Sale (Commissions, advertising fees, legal fees, and loan charges paid by the seller)  —business of Sale (Commissions, advertising fees, legal fees, and loan charges paid by the seller)  —business of Sale (Commissions, advertising fees, legal fees, and loan charges paid by the seller)  —business of Sale (Commissions, advertising fees, legal fees, and loan charges paid by the seller)  —business of Sale (Commissions, advertising fees, legal fees, and loan charges paid by the seller)  —business of Sale (Commissions, advertising fees, legal fees, and loan charges paid by the seller)  —business of Sale (Commissions, advertising fees, legal fees, and loan charges paid by the seller)  —business of Sale (Commissions, advertising fees, legal fees, and loan charges paid by the seller)  —business of Sale (Commissions, advertising fees, legal fees, and loan charges paid by the seller)  —business of Sale (Commissions, advertising fees, legal fees, and loan charges paid by the seller)  —business of Sale (Commissions, advertising fees, legal fees, and loan charges paid by the seller)  —business of Sale (Commissions, advertising fees, legal fees, and loan charges paid by the seller)  —business of Sale (Commissions, advertising fees, legal fees, and loan charges paid by the seller)  —business of Sale (Commissions, advertising fees, legal fees, and loan charges paid by the seller)  —business of Sale (Commissions, advertising fe	SALE OF HOME (17)	
lable sold (m/d/y) (Box 1)	Description of property (Box 3).	
sales price (Box 2).	Date acquired (m/d/y).	
=sale of home =owned and used property as main home for at least 2 of 5 years before sale. =first-time homebuyer credit was previously taken on this home. =business use in year of sale. Mumber of days after December 31, 2008 that home was not used as principal residence.  Adjusted Basis  Adjusted Basis  Adjusted Basis  Adjusted basis  Expenses of Sale (Commissions, advertising fees, legal fees, and loan charges paid by the seller)  Expenses of Sale (Commissions, advertising fees, legal fees, and loan charges paid by the seller)  Footal 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: 1) Did not meet the ownership and use tests *, or 1) Excluded gain on the sale of another home after May 6, 1997.  **sale due to change in health, employment or unforeseen circumstances.  Adays used as main home - laxpayer.  Agays used as main home - laxpayer.  Agays used as main home - laxpayer.  Agays used as main home - spouse.  Adays property owned - taxpayer,  Agays property owned - spouse.  MOVING EXPENSES (27) (if you moved because of a change in the location of your job)  **spouse, 2-point  **armed forces move due to permanent change of station.  **likes from old home to new work place.  **likes from old home to old work place.  **likes from old home to old work place.  **likes from old home to new work place.  **likes from old home to old work place.  **likes from old home to new work place.  **likes from old home to old work place.  **likes from old home to new work place.  **likes from	Date sold (m/d/y) (Box 1)	
=sale of home =owned and used property as main home for at least 2 of 5 years before sale. =first-time homebuyer credit was previously taken on this home. =business use in year of sale. Mumber of days after December 31, 2008 that home was not used as principal residence.  Adjusted Basis  Adjusted Basis  Adjusted Basis  Adjusted basis  Expenses of Sale (Commissions, advertising fees, legal fees, and loan charges paid by the seller)  Expenses of Sale (Commissions, advertising fees, legal fees, and loan charges paid by the seller)  Footal 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: 1) Did not meet the ownership and use tests *, or 1) Excluded gain on the sale of another home after May 6, 1997.  **sale due to change in health, employment or unforeseen circumstances.  Adays used as main home - laxpayer.  Agays used as main home - laxpayer.  Agays used as main home - laxpayer.  Agays used as main home - spouse.  Adays property owned - taxpayer,  Agays property owned - spouse.  MOVING EXPENSES (27) (if you moved because of a change in the location of your job)  **spouse, 2-point  **armed forces move due to permanent change of station.  **likes from old home to new work place.  **likes from old home to old work place.  **likes from old home to old work place.  **likes from old home to new work place.  **likes from old home to old work place.  **likes from old home to new work place.  **likes from old home to old work place.  **likes from old home to new work place.  **likes from	Sales price (Box 2).	
#inst-time homebuyer credit was previously taken on this home	1=sale of home	
=business use in year of sale.    Jumber of days after December 31, 2008 that home was not used as principal residence.	1=owned and used property as main home for at least 2 of 5 years before sale	
=business use in year of sale.    Adjusted Basis	1=first-time homebuyer credit was previously taken on this home	
Adjusted Basis  Driginal cost	1=business use in year of sale	
Adjusted basis  Expenses of Sale (Commissions, advertising fees, legal fees, and loan charges paid by the seller)  Fotal expenses of sale (Commissions, advertising fees, legal fees, and loan charges paid by the seller)  Fotal 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:  Jo Did not meet the ownership and use tests ", or b) Excluded gain on the sale of another home after May 6, 1997.  Fack I, gain from another home after May 6, 1997 & within 2 yrs. of current sale, enter date of sale (m/d/y)  =sale due to change in health, employment or unforeseen circumstances.  Jays used as main home - taxpayer.  Jays property owned - taxpayer.  Jays property owned - taxpayer.  Jays property owned - spouse.  MOVING EXPENSES (27) (If you moved because of a change in the location of your job)  =spouse, 2=joint.  MIGHING EXPENSES (27) (If you moved because of a change in the location of your job)  ### Spouse, 2=joint	Number of days after December 31, 2008 that home was not used as principal residence	
Adjusted basis  Expenses of Sale (Commissions, advertising fees, legal fees, and loan charges paid by the seller)  Fotal expenses of sale (Commissions, advertising fees, legal fees, and loan charges paid by the seller)  Fotal 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:  Jo Did not meet the ownership and use tests ", or b) Excluded gain on the sale of another home after May 6, 1997.  Fack I, gain from another home after May 6, 1997 & within 2 yrs. of current sale, enter date of sale (m/d/y)  =sale due to change in health, employment or unforeseen circumstances.  Jays used as main home - taxpayer.  Jays property owned - taxpayer.  Jays property owned - taxpayer.  Jays property owned - spouse.  MOVING EXPENSES (27) (If you moved because of a change in the location of your job)  =spouse, 2=joint.  MIGHING EXPENSES (27) (If you moved because of a change in the location of your job)  ### Spouse, 2=joint	Adjusted Basis	
Adjusted basis.  Expenses of Sale (Commissions, advertising fees, legal fees, and loan charges paid by the seller)  Cotal 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:  1) Did not meet the ownership and use tests *, or b) Excluded gain on the sale of another home after May 6, 1997.  Exclusion in the sale of another home after May 6, 1997 & within 2 yrs. of current sale, enter date of sale (m/dy)  =sale due to change in health, employment or unforeseen circumstances.	Original cost	
Expenses of Sale (Commissions, advertising fees, legal fees, and loan charges paid by the seller)    Cotal expenses of sale   Commissions	Improvements:	
Expenses of Sale (Commissions, advertising fees, legal fees, and loan charges paid by the seller)    Cotal expenses of sale   Commissions	'	
Expenses of Sale (Commissions, advertising fees, legal fees, and loan charges paid by the seller)    Cotal expenses of sale   Commissions		
Expenses of Sale (Commissions, advertising fees, legal fees, and loan charges paid by the seller)    Cotal expenses of sale   Commissions		
Agusted basis.  Expenses of Sale (Commissions, advertising fees, legal fees, and loan charges paid by the seller)  Fotal 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:  1) Did not meet the ownership and use tests *, or b) Excluded gain on the sale of another home after May 6, 1997.  1 excl. gain from another home after May 6, 1997 & within 2 yrs. of current sale, enter date of sale (m/d/y)  = sale due to change in health, employment or unforeseen circumstances.    Jays used as main home - taxpayer.		
rotal 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:  1) Did not meet the ownership and use tests *, or b) Excluded gain on the sale of another home after May 6, 1997.  f excl. gain from another home after May 6, 1997 & within 2 yrs. of current sale, enter date of sale (m/d/y)  =sale due to change in health, employment or unforeseen circumstances.  Days used as main home - taxpayer.  Days property owned - taxpayer.  Days property owned - spouse.  WOVING EXPENSES (27) (If you moved because of a change in the location of your job)  =spouse, 2=joint.  =armed forces move due to permanent change of station.  Miles from old home to new work place.  Expenses for transportation and storage of household goods and personal effects.  odging and travel (excluding meals):  Lodging and travel (excluding automobile).  Parking fees and tolls.  Gas and oil.	Adjusted basis	
rotal 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:  1) Did not meet the ownership and use tests *, or b) Excluded gain on the sale of another home after May 6, 1997.  f excl. gain from another home after May 6, 1997 & within 2 yrs. of current sale, enter date of sale (m/d/y)  =sale due to change in health, employment or unforeseen circumstances.  Days used as main home - taxpayer.  Days property owned - taxpayer.  Days property owned - spouse.  WOVING EXPENSES (27) (If you moved because of a change in the location of your job)  =spouse, 2=joint.  =armed forces move due to permanent change of station.  Miles from old home to new work place.  Expenses for transportation and storage of household goods and personal effects.  odging and travel (excluding meals):  Lodging and travel (excluding automobile).  Parking fees and tolls.  Gas and oil.	, and the second	<u> </u>
Reduced Exclusion  Please complete the following information if due to a change in health, place of employment, or unforeseen circumstances you either:  1) Did not meet the ownership and use tests *, or b) Excluded gain on the sale of another home after May 6, 1997.  1) Excl. gain from another home after May 6, 1997 & within 2 yrs. of current sale, enter date of sale (m/d/y)  1) Exale due to change in health, employment or unforeseen circumstances.  2) Days used as main home - taxpayer.  2) Days used as main home - spouse.  2) Days property owned - taxpayer.  2) Days property owned - spouse.  2) DAYS property owned - spouse.  2) DAYS property owned - spouse.  3) DAYS property owned - spouse.  4) DAYS property owned - spouse.  4) DAYS property owned on the location of your job)  1) Expouse, 2=joint.  2) Exponse, 2=joint.  2) Exponse for transportation and storage of household goods and personal effects.  2) DAYS property owned on the very lace.  2) DAYS property owned to lot work place.  2) DAYS property owned to lot work place.  3) DAYS property owned to lot work place.  4) DAYS property owned to lot work place.  4) DAYS property owned to lot work place.  5) DAYS property owned to lot work place.  6) DAYS property owned to lot work place lot work place.  8) DAYS property owned to lot work place lot work place.  8) DAYS property owned to lot work place lot work place lot work place.  8) DAYS property owned to lot work place lo	<b>Expenses of Sale</b> (Commissions, advertising fees, legal fees, and loan charges paid by the seller)	
Reduced Exclusion  Please complete the following information if due to a change in health, place of employment, or unforeseen circumstances you either:  1) Did not meet the ownership and use tests *, or b) Excluded gain on the sale of another home after May 6, 1997.  1) Excl. gain from another home after May 6, 1997 & within 2 yrs. of current sale, enter date of sale (m/d/y)  1) Exale due to change in health, employment or unforeseen circumstances.  2) Days used as main home - taxpayer.  2) Days used as main home - spouse.  2) Days property owned - taxpayer.  2) Days property owned - spouse.  2) DAYS property owned - spouse.  2) DAYS property owned - spouse.  3) DAYS property owned - spouse.  4) DAYS property owned - spouse.  4) DAYS property owned on the location of your job)  1) Expouse, 2=joint.  2) Exponse, 2=joint.  2) Exponse for transportation and storage of household goods and personal effects.  2) DAYS property owned on the very lace.  2) DAYS property owned to lot work place.  2) DAYS property owned to lot work place.  3) DAYS property owned to lot work place.  4) DAYS property owned to lot work place.  4) DAYS property owned to lot work place.  5) DAYS property owned to lot work place.  6) DAYS property owned to lot work place lot work place.  8) DAYS property owned to lot work place lot work place.  8) DAYS property owned to lot work place lot work place lot work place.  8) DAYS property owned to lot work place lo		
Reduced Exclusion  Please complete the following information if due to a change in health, place of employment, or unforeseen circumstances you either:  Did not meet the ownership and use tests *, or b) Excluded gain on the sale of another home after May 6, 1997.  Fexcl. gain from another home after May 6, 1997 & within 2 yrs. of current sale, enter date of sale (m/d/y)  =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.  WOVING EXPENSES (27) (If you moved because of a change in the location of your job)  =spouse, 2=joint.  =armed forces move due to permanent change of station.  Aliles from old home to new work place.  Expenses for transportation and storage of household goods and personal effects.  Dodging and travel (excluding meals):  Lodging and travel (excluding automobile).  Parking fees and tolls.  Gas and oil.		
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MOVING EXPENSES (27) (If you moved because of a change in the location of your job)  =spouse, 2=joint. =armed forces move due to permanent change of station.  Miles from old home to new work place.  Expenses for transportation and storage of household goods and personal effects.  codging and travel (excluding meals):  Lodging and travel (excluding automobile).  Parking fees and tolls.  Gas and oil.	Days property owned - taxpayer	
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Ailes from old home to new work place.  Ailes from old home to old work place.  Expenses for transportation and storage of household goods and personal effects.  Codging and travel (excluding meals):  Lodging and travel (excluding automobile).  Parking fees and tolls.  Gas and oil.	1=armed forces move due to permanent change of station	
Expenses for transportation and storage of household goods and personal effects.  odging and travel (excluding meals):  Lodging and travel (excluding automobile).  Parking fees and tolls.  Gas and oil.	Miles from old home to new work place	
Expenses for transportation and storage of household goods and personal effects.  odging and travel (excluding meals):  Lodging and travel (excluding automobile).  Parking fees and tolls.  Gas and oil.	Miles from old home to old work place	
Lodging and travel (excluding meals):  Lodging and travel (excluding automobile).  Parking fees and tolls.  Gas and oil.	Expenses for transportation and storage of household goods and personal effects	
Lodging and travel (excluding automobile).  Parking fees and tolls.  Gas and oil.	Lodging and travel (excluding meals):	
Parking fees and tolls		
Gas and oil		
	· · · · · · · · · · · · · · · · · · ·	
	<b>•</b>	
(* award and used property or main home for at least 2 of 5 years hefere sale)	(* award and ward avaparty on main have fair at least 2 of E warm to fair at	2)
(* owned and used property as main home for at least 2 of 5 years before sale)	(" owned and used property as main nome for at least 2 of 5 years before sail	=)

17, 27

	Please e	enter all pe	rtinent 2012 amounts. Last year's am	ounts are provided fo	or your reference.
REN	ITAL & R	OYALTY	INCOME (Schedule E)	2012 Amount	2011 Amount
Descr	iption of prope	erty			
Street	address				
	ode				
	of property (s				
	_		<u> </u>		
	IERAL IN				
			00% (.xxxx)		Tune of Duenout
			if not 100% (.xxxx)		Type of Property
					1 = Single Family Residence 2 = Multi-Family Residence
			or will you file all required Form(s) 1099: 1=yes, 2=no.		3 = Vacation/Short-Term Ren 4 = Commercial
			e royalty		5 = Land
					6 = Royalties 7 = Self-Rental
					/ = 0cm-nomai
1=ren	tal other than	real estate			
1=inve	estment				
1=inve 1=sino	estment				2011 Amount
1=inve 1=sino	estment gle member li	mited liability			2011 Amount
1=inve 1=sing INC Rents DIR NOTE	omestment  OME  or royalties round to see the content of the	mited liability eceived  ENSES nses are relat cy fees, adver	ed only to the rental activity. These include tising, and office supplies.		2011 Amount
1=inve 1=sing INC Rents DIR NOTE	estment	mited liability eceived  ENSES nses are relately fees, adver	ed only to the rental activity. These include tising, and office supplies.		2011 Amount
1=inve 1=sing INC Rents DIRI NOTE	estment	mited liability eceived  ENSES uses are relately fees, adver	ed only to the rental activity. These include tising, and office supplies.		2011 Amount
1=inve 1=sing INC Rents DIR NOTE Adver Associ	estment gle member li  OME  or royalties re  ECT EXP  Direct experrental agency tising iation dues and travel (no	mited liability eceived  ENSES nses are relately fees, adver	ed only to the rental activity. These include tising, and office supplies.		2011 Amount
1=inve 1=sing INC Rents DIRI NOTE Adver Assoc Auto a	estment gle member li  OME  or royalties re  ECT EXP  Direct experiental agency tising iation dues and travel (no	eceived  ENSES  nses are relat cy fees, adver  t entered else	ed only to the rental activity. These include tising, and office supplies.		2011 Amount
1=inve 1=sing INC Rents DIRI NOTE Adver Assoc Auto a Clean Comm	estment gle member li  OME  or royalties re  ECT EXP  : Direct exper rental agence tising iation dues and travel (no ing and maint nissions	eceived  ENSES nses are relately fees, advert	ed only to the rental activity. These include tising, and office supplies.		2011 Amount
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1=inve 1=sing INCO Rents DIRI NOTE Adver Assoc Auto a Clean Comm Garde Insura	estment gle member li  OME  or royalties re  ECT EXP  :: Direct experrental agence tising iation dues and travel (no ing and maint hissions ning	eceived  ENSES  ses are relately fees, advert	ed only to the rental activity. These include tising, and office supplies.		2011 Amount
1=inve 1=sing INC Rents DIR NOTE Adver Assoc Auto a Clean Comm Garde Insura Legal	estment gle member li  OME  or royalties re  ECT EXP  Direct experrental agency  istion dues and travel (no ing and maint hissions ning and profession  and profession	eceived  ENSES  nses are relately fees, advertiged to entered else tenance	ed only to the rental activity. These include tising, and office supplies.		2011 Amount
1=inve 1=sing INC Rents DIR NOTE Adver Assoc Auto a Clean Comm Garde Insura Legal Licens	estment gle member li  OME  or royalties ro  ECT EXP  Direct experrental agency tising iation dues and travel (no ing and maint hissions ning and professions and permiting and permit	eceived  ENSES  nses are relately fees, advertiged to entered else renance	ed only to the rental activity. These include tising, and office supplies.		2011 Amount
1=inve 1=sing INC Rents DIR NOTE Adver Assoc Auto a Clean Comm Garde Insura Legal Licens Manag	estment gle member li  OME  or royalties ro  ECT EXP  Direct experrental agency tising iation dues and travel (no ing and maint nissions ning and profession ses and permit gement fees	eceived  ENSES  nses are relately fees, advertighted else enance	ed only to the rental activity. These include tising, and office supplies.		2011 Amount
1=inve 1=sing INC Rents DIRI NOTE Adver Assoc Auto a Clean Comm Garde Insura Legal Licens Manag Misce	estment gle member li  OME  or royalties re  ECT EXP  : Direct exper rental agence tising iation dues and travel (no ing and maint nissions ning and professions sees and permit gement fees Illaneous	eceived  ENSES  nses are relately fees, advertighted the entered else enance	ed only to the rental activity. These include tising, and office supplies.		2011 Amount
1=inve 1=sing INC Rents DIRI NOTE Adver Assoc Auto a Clean Comm Garde Insura Legal Licens Manag Misce Mortga	estment gle member li  OME  or royalties re  ECT EXP :: Direct experiental agence tising iation dues and travel (no ing and maint nissions ning and professions sees and permit gement fees llaneous age interest (j	eceived  ENSES  nses are relately fees, advertight tentered else tenance	ed only to the rental activity. These include tising, and office supplies.		2011 Amount
1=inve 1=sing INCO Rents DIRI NOTE Adver Assoc Auto a Clean Comm Garde Insura Legal Licens Manag Misce Mortga Qualif Exces	estment gle member li  OME  or royalties re  ECT EXP  :: Direct experrental agency tising iation dues and travel (no ing and maint hissions and professions and professions ese and permit gement fees llaneous age interest (priced mortgage is mortgage is reserved.)	ENSES  ses are relately fees, advertised to banks insurance protections.	ed only to the rental activity. These include tising, and office supplies.  ewhere).		2011 Amount
1=inve 1=sing INCO Rents DIRI NOTE Adver Associated Clean Comm Garde Insura Legal Licens Manag Misce Mortga Qualif Excess Other	estment	ENSES  ses are relately fees, advertised elses  and fees  and fees	ed only to the rental activity. These include tising, and office supplies.  ewhere).  , etc.). emiums.		2011 Amount

12   1040   US   Ren	ital & Royalty Income (	(Sch. E) (cont.)	No.	18
		, , ,		
Please enter all pertinent 2012 a	mounts. Last year's amounts a be used for vacation homes or	are provided for your re	ference. The in	ndirect
		less than 100% tenant	occupied renta	ais.
<b>DIRECT EXPENSES (contin</b>	iued)			
Direct expenses are related only to rental agency fees, advertising, ar	o the rental activity. These include and office supplies.	2012 Amount	2011 Amo	unt
Pest control				
Plumbing and electrical				
Repairs				
Supplies				
Taxes - real estate				
Taxes - other (not entered elsewhere)			<u> </u>	
Telephone				
Utilities			<u> </u>	
Wages and salaries			<u> </u>	
Other:	<del></del>			
			<u> </u>	
OIL AND GAS				
			T	
Production type (preparer use only)				
Cost depletion				
Percentage depletion rate or amount				
State cost depletion, if different (-1 if non				
State % depletion rate or amount, if differ	rent (-1 if none)			
VACATION HOME				
Number of days personal use				
Number of days owned (if optional metho				
INDIRECT EXPENSES				
NOTE:Indirect expenses are related to o These include repairs, insurance,	perating or maintaining the dwelling un and utilities.	it.		
Advertising				
Association dues				
Auto and travel (not entered elsewhere).				
Cleaning and maintenance				
Commissions				
Gardening				
Insurance			1	
Legal and professional fees			1	
Licenses and permits			1	
Management fees			†	
Miscellaneous			†	
Mortgage interest (paid to banks, etc.)			†	
Qualified mortgage insurance premiums.				
Quantica mortgage mourance premiding.			I	
Excess mortgage interest				

18 p2

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	Partnersh	p and S corporat	ion Information	Page 2 <b>20.1,20.</b>
PAR	Please add, change		formation as appropriate	e. Be sure to attach all \$	Schedule K-1s.
No.	Name of Partne		Employer Identification Number	Tax Shelter Registration Number	Additional Amounts Invested in Partnership
5.00	DRPORATION INF	OPMATION (2	0 2)		
No.	Name of S corpo		Employer Identification Number	Tax Shelter Registration Number	Additional Amounts Invested in S corporation

20.1,20.2

					1 490	
2012	1040	US	Vehicle Expenses	No.	<b>22</b> p	3

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

	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		
Total mileage (for the tax year)		
Business mileage		
Commuting mileage (for the tax year)		
Average daily round-trip commute		
Average daily round-trip commute		
Average daily round-trip commute  ACTUAL EXPENSES		
ACTUAL EXPENSES		
ACTUAL EXPENSES Parking fees and tolls (business portion only)		
ACTUAL EXPENSES  Parking fees and tolls (business portion only)		
ACTUAL EXPENSES  Parking fees and tolls (business portion only)		
ACTUAL EXPENSES  Parking fees and tolls (business portion only)		
ACTUAL EXPENSES  Parking fees and tolls (business portion only)		
ACTUAL EXPENSES  Parking fees and tolls (business portion only)  Gasoline, lube, oil  Repairs  Fires  Insurance  Wiscellaneous		
ACTUAL EXPENSES  Parking fees and tolls (business portion only)  Gasoline, lube, oil  Repairs  Fires  Insurance  Miscellaneous  Auto license (other than personal property taxes)		
ACTUAL EXPENSES  Parking fees and tolls (business portion only)  Gasoline, lube, oil  Repairs  Fires  Insurance  Miscellaneous  Auto license (other than personal property taxes)  Personal property taxes (based on car's value)		
ACTUAL EXPENSES  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).		

				20.90
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 Amoun	t	2011 A	mount
TRADITIONAL IRA CONTRIBUTIONS	Taxpayer	Spouse	Taxpayer	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				
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 PLAN	S (KEOGH)			
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:	<u>.</u>			
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	L			
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	<b>.</b> .		laar -	
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	TC	2011 Amount
Prescription medicines and drugs.	2012 Amount	TS	2011 Amount
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 a	utomatic )		
<del>-</del>	utomatic.)		
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			
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			
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

me mortgage int. (Box 1) and points (Box 2) reported on Form 1098:	2012 Amount	TS	2011 Amount
Home mortgage interest not reported on Form 1098:			
Payee's name			
Payee's street address.			
Payee's city			
Payee's state			
Payee's ZIP code			
Amount paid.			
ints not reported on Form 1098:			
The flot reported of it of the rese.			
rtgage insurance premiums on post 12/31/06 contracts (Box 4)			
estment interest (interest on margin accounts):		1 1	
g 2222m			
ssive interest			
OTE: Points paid on loans other than to buy, build, or improve your ma For these types of loans also provide the dates and lives of the lo ASH CONTRIBUTIONS  OTE: No deduction is allowed for cash or check contributions unless the	e donor maintains a bank rec	cord. or a	written communication
OTE: Points paid on loans other than to buy, build, or improve your ma For these types of loans also provide the dates and lives of the loans also provide the dates and lives of the loans also provide the dates and lives of the loans also provide the dates and lives of the loans also provide the dates and lives of the loans and lives of the loans also provide the dates and lives of the loans also provide the loans also provide the dates and lives of the loans also provide the l	e donor maintains a bank rec on date(s), and contribution a	cord. or a	written communication
OTE: Points paid on loans other than to buy, build, or improve your ma For these types of loans also provide the dates and lives of the lo ASH CONTRIBUTIONS  OTE: No deduction is allowed for cash or check contributions unless the from the donee, showing the name of the organization, contribution	e donor maintains a bank rec on date(s), and contribution a	cord. or a	written communication
OTE: Points paid on loans other than to buy, build, or improve your ma For these types of loans also provide the dates and lives of the loans also provide the dates and lives of the loans also provide the dates and lives of the loans also provide the dates and lives of the loans and lives of the l	e donor maintains a bank rec on date(s), and contribution a	cord. or a	written communication
urches, schools, hospitals, and other charitable organizations (50% lim	e donor maintains a bank rec on date(s), and contribution a	cord. or a	written communication
OTE: Points paid on loans other than to buy, build, or improve your ma For these types of loans also provide the dates and lives of the loans also provide the dates and lives of the loans also provide the dates and lives of the loans also provide the dates and lives of the loans and lives of the l	e donor maintains a bank rec on date(s), and contribution a	cord. or a	written communication
OTE: Points paid on loans other than to buy, build, or improve your ma For these types of loans also provide the dates and lives of the loast CONTRIBUTIONS OTE: No deduction is allowed for cash or check contributions unless the from the donee, showing the name of the organization, contributions urches, schools, hospitals, and other charitable organizations (50% lime Contributions by cash or check:	e donor maintains a bank rec on date(s), and contribution a	cord. or a	written communication
OTE: Points paid on loans other than to buy, build, or improve your ma For these types of loans also provide the dates and lives of the loast CONTRIBUTIONS OTE: No deduction is allowed for cash or check contributions unless the from the donee, showing the name of the organization, contribution urches, schools, hospitals, and other charitable organizations (50% lime Contributions by cash or check:  Volunteer expenses (out-of-pocket)	e donor maintains a bank recon date(s), and contribution a itation):	cord. or a	written communication
DTE: Points paid on loans other than to buy, build, or improve your ma For these types of loans also provide the dates and lives of the loast CONTRIBUTIONS  DTE: No deduction is allowed for cash or check contributions unless the from the donee, showing the name of the organization, contributions urches, schools, hospitals, and other charitable organizations (50% lime Contributions by cash or check:	e donor maintains a bank recon date(s), and contribution a itation):	cord. or a	written communication
DTE: Points paid on loans other than to buy, build, or improve your ma For these types of loans also provide the dates and lives of the loans also provide the l	e donor maintains a bank recon date(s), and contribution a itation):	cord, or a samount(s).	written communication
DTE: Points paid on loans other than to buy, build, or improve your ma For these types of loans also provide the dates and lives of the loans also provide the l	e donor maintains a bank recon date(s), and contribution a itation):	cord, or a samount(s).	written communication
DTE: Points paid on loans other than to buy, build, or improve your ma For these types of loans also provide the dates and lives of the loans also provide the l	e donor maintains a bank recon date(s), and contribution a itation):	cord, or a samount(s).	written communication
DTE: Points paid on loans other than to buy, build, or improve your ma For these types of loans also provide the dates and lives of the loans also provide the l	e donor maintains a bank recon date(s), and contribution a itation):	cord, or a samount(s).	written communication
OTE: Points paid on loans other than to buy, build, or improve your ma For these types of loans also provide the dates and lives of the loans also provide the l	e donor maintains a bank recon date(s), and contribution a itation):	cord, or a samount(s).	written communication
OTE: Points paid on loans other than to buy, build, or improve your ma For these types of loans also provide the dates and lives of the loans also provide the l	e donor maintains a bank recon date(s), and contribution a itation):	cord, or a samount(s).	written communication
DTE: Points paid on loans other than to buy, build, or improve your ma For these types of loans also provide the dates and lives of the loans also provide the l	e donor maintains a bank recon date(s), and contribution a itation):	cord, or a samount(s).	written communication

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 II OL LOGICI II II II II	ΦE00 N			1.1

50% limitation (see above):				2012 Λ	mount	те	2011 Δmc	unt
that are not in good use								
NOTE: Use Sheet 26 if total no	oncash contributions ar	re over \$500.	No deduction	is allowed for	or contribution	ons of clot	hing and hous	sehold items

	2012 Amount	TS	2011 Amount
<u> </u>	-		
	-		
_	-		
30% limitation (see above):			
	-		
	-		
30% capital gain property (gifts of capital gain property to 50% limit orgs.):	<u> </u>		
	-		
200/ parital rain managh. (sittle of parital pain managh. to pan E00/ limit a			
20% capital gain property (gifts of capital gain property to non-50% limit or	rgs.):		
_	-		
Other unreimbursed employee expenses (uniforms and protective clothing, professional subscriptions, employment agency fees, and certain edu. expe			
	enses):		
	enses):		
	enses): - -		
	enses):		
Investment expense:  Tax return preparation fee			
Investment expense:  Tax return preparation fee			
Investment expense:  Tax return preparation fee  Safe deposit box rental  Miscellaneous deductions (2% AGI) (certain legal and accounting fees.			
Investment expense:  Tax return preparation fee Safe deposit box rental  Miscellaneous deductions (2% AGI) (certain legal and accounting fees, and custodial fees):			
Investment expense:  Tax return preparation fee			

**25** p3

2012 1040 US Itemized Deductions (continued) 25 p4

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

THER MISCELLANEOUS DEDUCTIONS	2012 Amount	TS	2011 Amount
ate tax, section 691(c)			
er miscellaneous deductions:			
	_		
	_		
	_		
	_		
	_		
	_		
	_		
-	_		
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	_		
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	_		

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
air market value of the property on the date that the last debt was secured			
ome acquisition and grandfather debt on the date that the last debt was secured			
OAN INFORMATION			
oan #1			
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			
oan #2			
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			
11 11 11 11 11 11 11 11 11 11 11 11 11			
Home equity debt borrowed in 2012			

3 = Schedule E

2012 | 1040 | US | Noncash Contributions (Form 8283)

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.

DONAIL	DPROPE	RTY INFORMATION		
	Name of ch	aritable organization (donee)		
		ess		
	City			
	1 -		_	
			<del></del>	
		2=joint		
		scription (other than vehicle)	<del></del>	
	Froperty de	Identification number (VIN)	<del></del>	
No.				
	Vehicle	Year (yyyy)		
		Make and model	<del></del>	
	5	Condition and mileage		
		tribution (m/d/y)		
		ed by donor (m/y)		
	-	ed by donor (Table 1 or describe).		
	Donor's cos	t or basis		
	Fair market	value		
	Method use	d to determine FMV (Table 2 or des	scribe)	
	Name of ch	aritable organization (donee)		
	Street addr	ess		
	City			
	1 -		_	
			<del></del>	
		2=joint		
		scription (other than vehicle)		
	Froperty de	Identification number (VIN)		
No.				
140.	Vehicle	Year (yyyy)		
		Make and model	<del></del>	
		Condition and mileage		
		tribution (m/d/y)		
		ed by donor (m/y)		
	How acquire	ed by donor (Table 1 or describe)		
	Donor's cos	t or basis		
	Fair market	value		
	Method use	d to determine FMV (Table 2 or des	scribe)	
	•	· ·	, ,	
1			2	
	How Pro	pperty was Acquired	_	Method Used to Determine FMV
	1 = Purchase	3 = Inheritance		: Appraisal 3 = Catalog
:	2 = Gift	4 = Exchange	2 =	Thrift shop value 4 = Comparable sales
				For other methods, see IRS Pub. 561.
			1	

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NIZER 12	1040	US	Employee/Vehicle Bus Eye (Fe		Pac 3
12	1040	05	Employee/Vehicle Bus. Exp. (Fo	orm 2106)   No	-
	Please e	nter all pe	ertinent 2012 amounts. Last year's amounts are	e provided for your reference.	
GEN	IERAL IN	FORMA	TION		
Occup	ation, if differ	ent from For	rm 1040		
Number 1=spor	er of form (1=	first Schedu	le C, 2=second, etc.).		
·			apped, 3=fee-basis government official		
EMP	PLOYEE E	BUSINES	SS EXPENSES	2 Amount 2011 Amount	t
Reimb 1=Dep Local f Travel Reimb	ursements for partment of Tr transportation expenses wh ursements no	r meals and ansportation (bus, taxi, t ille away fron ot included o	es		
Other _	business exp	enses:			
=					
-					
-					
-					
-					
			I I		

)12	1040	US	Vehicle Expenses (Form 2	2106) (cont.)	No.	<b>30</b> p2
	Please e	nter all pe	rtinent 2012 amounts. Last year's amo	ounts are provided for	r your reference	
VEH	IICLE INF	ORMAT	ION	2012 Amount	2011 Amo	ount
1=veh 1=no 1=no	icle is availab other vehicle i evidence to si	le for off-dut s available fo upport your d	e than 5% owner.  y personal use.  or personal use.  leduction.  t your deduction.			
VEH	IICLE 1					
Descri	intion of vehic	ماد				
	•					
		. ,,				
	ū		year)			
		-	te			
			siness use (if not 12)			
			portion only)			
	l expenses:	(00.00.000				
		oil				
Re	epairs					
Ti	res					
In	surance					
Mi	scellaneous.					
Αι	uto license (ot	her than pers	sonal property taxes)			
Pe	ersonal propei	rty taxes (bas	sed on car's value)			
In	terest (car loa	n) (for Sched	dule C, E & F)			
Ve	ehicle rent or	lease payme	nts			
			oositive)			
Va	alue of employ	er-provided	vehicle on Form W-2 (2106)			
VEH	IICLE 2					
Descr	iption of vehic	:le				
Date p	placed in serv	ice (m/d/y)				
Total	mileage (for tl	ne tax year).				
Busine	ess mileage					
Comm	nuting mileage	e (for the tax	year)			
Avera	ge daily round	d-trip commu	te			
			siness use (if not 12)			
Parkir	ng fees and to	lls (business	portion only)			
Actua	l expenses:					
Ga	asoline, lube,	oil				
Re	epairs					
			·····			
			sonal property taxes)			
			sed on car's value)			
			dule C, E and F)			
			nts			
			positive)			
Vá	alue of employ	yer-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		mount	
	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				
Total HSA distribution received (1099-SA, box 1)				
Distributions included above that were rolled over to another HSA				
Total unreimbursed qualified medical expenses				

**Child and Dependent Care Expenses (Form 2441)** US 2012 1040 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. 2012 Amount 2011 Amount **DEPENDENT CARE EXPENSES (33.1)** 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 First name..... Last name..... Date of birth (m/d/y)..... No. Social security number..... Qualified dependent care expenses incurred and paid in 2012 2011 amt: 1=disabled ..... 1=spouse, 2=joint..... Last name..... Date of birth (m/d/y)..... No. Social security number..... Qualified dependent care expenses incurred and paid in 2012 2011 amt: 1=spouse, 2=joint..... Date of birth (m/d/y)..... No. Social security number ..... Qualified dependent care expenses incurred and paid in 2012 2011 amt: 1=spouse, 2=joint..... PERSONS OR ORGANIZATIONS PROVIDING CARE (33.2) Street address..... No. City, state, ZIP code..... Identification number (SSN or EIN)..... Amount paid to care provider in 2012..... 2011 amt: 1=spouse, 2=joint..... Street address..... No. City, state, ZIP code.....

2011 amt:

Identification number (SSN or EIN)..... Amount paid to care provider in 2012.....

1=spouse, 2=joint.....

)12	1040	US	<b>Education Credits / Tuition</b>	Deduction	No.
	Please co you	omplete th r spouse,	e information below if you paid qualified or or your dependents enrolled in an accred Last year's amounts are provided for y	education expense ted postsecondar our reference.	es in 2012 for you, y institution.
STU	JDENT IN	FORMA	ΓΙΟΝ		
1=tax	payer, 2=spou	ıse			
Last r	name				
	,				
			nimed		
Numb	per of years Arent was NOT entrol	nerican oppo	ortunity credit claimedtime for at least one academic period that began ed program		
1=stude	ent was convicted,	before the end of	post-secondary education before 2012		_
EDU	JCATION.	AL INST	ITUTION ATTENDED (#1)		
Name	e				
Stree	t address				
City					
			illa Day 0.0.7 a separate d		_
			/ith Box 2 & 7 completed		
EDU	JCATION.	AL INST	ITUTION ATTENDED (#2)		
Name	<del>)</del>				
Stree	t address				
City					
State					
			vith Box 2 & 7 completed		
reaer	rai iD number	from Form 1	089-T		
QU	ALIFIED E	EDUCAT	ION EXPENSES	2012 Amount	2011 Amoun
Qualifie	ed tuition & fees p	aid in 2012 (net	t of refund or assistance, & not entered elsewhere)		
Books	s & supplies re	equired to be	purchased from institution		
Books	s & supplies n	ot entered al	bove		
Amou	unt of prior yea	ar refund or a	assistance *		
und o	f qualified exp	enses and ta	ax-free educational assistance received after you file	vour return for the vea	ar in which the expense
			•	,	•