

| | | | | |
|-------------|-------------|-----------|---------------------------|----------|
| 2012 | 1040 | US | Client Information | 1 |
|-------------|-------------|-----------|---------------------------|----------|

Leading Edge Tax Solutions
 10016 Foothills Blvd Ste 110
 Roseville, CA 95747
 Telephone number: (916) 787-5387
 Fax number: (916) 749-1521
 E-mail address: brad@leadingedgetaxes.com

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 add, change, or delete information as appropriate.

CLIENT INFORMATION

| | | | |
|-----------------|--|--|--|
| Filing Status | Filing status (table) | | <p align="center">Filing Status</p> <p>1 = Single 2 = Married filing joint 3 = Married filing separate 4 = Head of household 5 = Qualifying widow(er)</p> |
| | 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 | | |
| Foreign Address | ZIP code | | |
| | Region | | |
| | Postal code | | |
| | Country | | |

2012

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Client Information (continued)

1 p2

Please add, change or delete information for 2012.

CLIENT INFORMATION

| | | | |
|------------------------------------|-----------------------------|--|--|
| Taxpayer Contact Information | Home phone | | Daytime Phone 1 = Work 2 = Home 3 = Mobile |
| | 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 | | |

1 p2

| | | | | |
|-------------|-------------|-----------|-------------------|----------|
| 2012 | 1040 | US | Dependents | 2 |
|-------------|-------------|-----------|-------------------|----------|

Please add, change or delete information for 2012.

DEPENDENTS

| | Dependent | Dependent | |
|---------------------------------------|-----------|-----------|---|
| First name..... | | | <p>Type of Dependent</p> <p>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</p> |
| 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 | <p>Earned Income Credit</p> <p>1 = When applicable (default) 2 = Student age 19 to 23 3 = Disabled 4 = Force 5 = Suppress</p> <p>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:</p> <ol style="list-style-type: none"> 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 |
| 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 | <p>NOTE: If your child is disabled, please provide one of the following forms of proof of disability:</p> <ol style="list-style-type: none"> 1. Doctor statement 2. Other health care provider statement 3. Social services agency or program statement |
| 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 | This section is covered by the note in Section 3 |
| 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..... | | | |

| | | | |
|-------------|-------------|-----------|--------------------------------|
| 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 | |
|----------------------------------|--------------------------|--|
| PERSONAL INFORMATION | | |
| <input type="checkbox"/> | <input type="checkbox"/> | Did your marital status change during the year? |
| <input type="checkbox"/> | <input type="checkbox"/> | Did your address change during the year? |
| <input type="checkbox"/> | <input type="checkbox"/> | Could you be claimed as a dependent on another person's tax return for 2012? |
| DEPENDENTS | | |
| <input type="checkbox"/> | <input type="checkbox"/> | Were there any changes in dependents? |
| <input type="checkbox"/> | <input type="checkbox"/> | Were any of your unmarried children who might be claimed as dependents 19 years of age or older at the end of 2012? |
| <input type="checkbox"/> | <input type="checkbox"/> | Did you have any children under age 19 or full-time students under age 24 at the end of 2012, with interest and dividend income in excess of \$950, or total investment income in excess of \$1,900? |
| INCOME | | |
| <input type="checkbox"/> | <input type="checkbox"/> | Did you receive unreported tip income of \$20 or more in any month? |
| <input type="checkbox"/> | <input type="checkbox"/> | Did you cash any Series EE U.S. savings bonds issued after 1989 and pay qualified higher education expenses for yourself, your spouse, or your dependents? |
| <input type="checkbox"/> | <input type="checkbox"/> | Did you receive any disability income? |
| <input type="checkbox"/> | <input type="checkbox"/> | Did you have any foreign income or pay any foreign taxes? |
| PURCHASES, SALES AND DEBT | | |
| <input type="checkbox"/> | <input type="checkbox"/> | Did you start a business or farm, purchase rental or royalty property, or acquire an interest in a partnership, S corporation, trust, or REMIC? |
| <input type="checkbox"/> | <input type="checkbox"/> | Did you purchase or dispose of any business assets (furniture, equipment, vehicles, real estate, etc.), or convert any personal assets to business use? |
| <input type="checkbox"/> | <input type="checkbox"/> | Did you buy or sell any stocks, bonds or other investment property in 2012? |
| <input type="checkbox"/> | <input type="checkbox"/> | Did you sell or do you plan to sell any dividend generating stocks or mutual funds during the first 60 days of 2013? |
| <input type="checkbox"/> | <input type="checkbox"/> | Did you purchase, sell, or refinance your principal home or second home, or did you take a home equity loan? |
| <input type="checkbox"/> | <input type="checkbox"/> | Did you make any residential energy-efficient improvements or purchases involving solar, wind, geothermal or fuel cell energy sources? |
| <input type="checkbox"/> | <input type="checkbox"/> | Did you have any debts cancelled or forgiven? |
| <input type="checkbox"/> | <input type="checkbox"/> | Does anyone owe you money which has become uncollectible? |

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Miscellaneous Questions (continued)

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 | |
|--------------------------|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | RETIREMENT PLANS |
| <input type="checkbox"/> | <input type="checkbox"/> | Did you receive a distribution from a retirement plan (401(k), IRA, SEP, SIMPLE, Qualified Plan, etc.)? |
| <input type="checkbox"/> | <input type="checkbox"/> | Did you make a contribution to a retirement plan (401(k), IRA, SEP, SIMPLE, Qualified Plan, etc.)? |
| <input type="checkbox"/> | <input type="checkbox"/> | Did you transfer or rollover any amount from one retirement plan to another retirement plan? |
| <input type="checkbox"/> | <input type="checkbox"/> | Did you convert part or all of your traditional, SEP, or SIMPLE IRA to a Roth IRA in 2012? |
| <input type="checkbox"/> | <input type="checkbox"/> | Did you convert a traditional, SEP, or SIMPLE IRA (or other qualified retirement plan) to a Roth IRA in 2010, and defer the taxable amount of the conversion to tax year 2011 and 2012? |
| | | EDUCATION |
| <input type="checkbox"/> | <input type="checkbox"/> | Did you receive a distribution from an Education Savings Account or a Qualified Tuition Program? |
| <input type="checkbox"/> | <input type="checkbox"/> | Did you, your spouse, or a dependent incur any tuition expenses that are required to attend a college, university, or vocational school? |
| | | ITEMIZED DEDUCTIONS |
| <input type="checkbox"/> | <input type="checkbox"/> | Did you incur a loss because of damaged or stolen property? |
| <input type="checkbox"/> | <input type="checkbox"/> | Did you work out of town for part of the year? |
| <input type="checkbox"/> | <input type="checkbox"/> | Did you use your car on the job (other than to and from work)? |
| | | ESTIMATED TAXES |
| <input type="checkbox"/> | <input type="checkbox"/> | Did you apply an overpayment of 2011 taxes to your 2012 estimated tax (instead of being refunded)? |
| <input type="checkbox"/> | <input type="checkbox"/> | If you have an overpayment of 2012 taxes, do you want the excess applied to your 2013 estimated tax (instead of being refunded)? |
| <input type="checkbox"/> | <input type="checkbox"/> | Do you expect your 2013 taxable income and withholdings to be different from 2012? |
| | | MISCELLANEOUS |
| <input type="checkbox"/> | <input type="checkbox"/> | Do you want to electronically file your tax return? |
| <input type="checkbox"/> | <input type="checkbox"/> | Do you want to allocate \$3 to the Presidential Election Campaign Fund? |
| <input type="checkbox"/> | <input type="checkbox"/> | Does your spouse want to allocate \$3 to the Presidential Election Campaign Fund? |
| <input type="checkbox"/> | <input type="checkbox"/> | May the IRS discuss your tax return with your preparer? |
| <input type="checkbox"/> | <input type="checkbox"/> | Did you have an interest in or signature or other authority over a financial account in a foreign country, such as a bank account, securities account, or other financial account? |

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Miscellaneous Questions (continued)

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 | MISCELLANEOUS (continued) |
|--------------------------|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | Did you receive a distribution from, or were you the grantor of, or transferor to, a foreign trust? |
| <input type="checkbox"/> | <input type="checkbox"/> | Was your home rented out or used for business? |
| <input type="checkbox"/> | <input type="checkbox"/> | Did you have a medical savings account (MSA), a Medicare Advantage MSA, or acquire an interest in an MSA or a Medicare Advantage MSA because of the death of the account holder? Or, were you a policyholder who received payments under a long-term care (LTC) insurance contract or received any accelerated death benefits from a life insurance policy? |
| <input type="checkbox"/> | <input type="checkbox"/> | Did you incur moving expenses due to a change of employment? |
| <input type="checkbox"/> | <input type="checkbox"/> | Did you engage the services of any household employees? |
| <input type="checkbox"/> | <input type="checkbox"/> | Were you notified or audited by either the Internal Revenue Service or the State taxing agency? |
| <input type="checkbox"/> | <input type="checkbox"/> | Did you or your spouse make any gifts to an individual that total more than \$13,000, or any gifts to a trust? |

Please enter all pertinent 2012 information.

DIRECT DEPOSIT / ELECTRONIC PAYMENT (3)

| | | |
|--|--|--|
| 1=direct deposit of federal tax refund into bank account | | |
| 1=electronic payment of balance due | | |
| 1=electronic payment of estimated tax | | |

BANK INFORMATION

| Name of Bank | Percent to Deposit (xx.xx) | Routing Number | Account Number | Type of Account (Table 1) | Type of Invest. (Table 2) |
|--------------|----------------------------|----------------|----------------|---------------------------|---------------------------|
| | | | | | |
| | | | | | |
| | | | | | |

2012 ESTIMATED TAX / 1040-ES (6)

| Federal | Amount Paid | Date Paid | TS | 2011 Voucher Amount |
|-------------------------------------|-------------|-----------|----|---------------------|
| Overpayment applied from 2011 | | | | |
| 1st quarter payment | | | | |
| 2nd quarter payment | | | | |
| 3rd quarter payment | | | | |
| 4th quarter payment | | | | |
| Additional Estimated Tax Payments | | | | |
| Paid with extension | | | | |

| State | Amount Paid | Date Paid | TS | 2011 Voucher Amount |
|-------------------------------------|-------------|-----------|----|---------------------|
| Overpayment applied from 2011 | | | | |
| 1st quarter payment | | | | |
| 2nd quarter payment | | | | |
| 3rd quarter payment | | | | |
| 4th quarter payment | | | | |
| Additional Estimated Tax Payments | | | | |
| Paid with extension | | | | |

1 **Type of Account**

1 = Savings
2 = Checking

2 **Type of Investment**

| | |
|---------------------------------------|--|
| 1 = Checking or savings (default) | 6 = Coverdell savings account (ESA) |
| 2 = Taxpayer's IRA (next year limits) | 7 = Other |
| 3 = Spouse's IRA (next year limits) | 8 = Taxpayer's IRA (current year limits) |
| 4 = Health savings account (HSA) | 9 = Spouse's IRA (current year limits) |
| 5 = Archer MSA | 10 = Series I treasury bonds |

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Direct Deposit & Estimates (Form 1040 ES) (cont.)

7.1

Please enter all pertinent 2012 information.

APPLICATION OF 2012 OVERPAYMENT (7.1)

If you have an overpayment of 2012 taxes, do you want the excess refunded? or applied to 2013 estimate? ...

Other (please explain): _____

2013 ESTIMATED TAX INFORMATION

Do you expect your 2013 taxable income to be different from 2012? Yes No

If "yes" explain any differences in income, deductions, dependents, etc.: _____

Do you expect your 2013 withholding to be different from 2012? Yes No

If "yes" explain any differences: _____

7.1

| | | | | |
|-------------|-------------|-----------|---|-----------------------|
| 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) | | Wages, Tips, Other Compensation (Box 1) | Tax Withheld | | | | | 2011 Wages |
|-----|--------------------------|----------------------------|--|---|-----------------|-------------------------|------------------|----------------|----------------|------------|
| | | 1=spouse | | | Federal (Box 2) | Social Security (Box 4) | Medicare (Box 6) | State (Box 17) | Local (Box 19) | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
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| | | | | | | | | | | |

PENSIONS, IRA DISTRIBUTIONS (13.1)

| No. | Name of Payer | Distribution code #2 | | Gross Distribution (Box 1) | Taxable Amount (Box 2a) | Tax Withheld | | Value of all IRAs at 12/31/12 | 2011 Distribution |
|-----|---------------|----------------------|--|----------------------------|-------------------------|-----------------|----------------|-------------------------------|-------------------|
| | | Distribution code #1 | | | | Federal (Box 4) | State (Box 12) | | |
| | | 1=IRA/SEP/SIMPLE | | | | | | | |
| | | 1=spouse | | | | | | | |
| | | | | | | | | | |
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GAMBLING WINNINGS (W-2G) (13.2)

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

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

| | | | | |
|--|--------------------|----------|----------|--------------------|
| | 2012 Amount | T | S | 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)

| No. | Name of Payer (also enter SSN & address for seller-financed mortgage) | 1=taxpayer 2=spouse | Interest Income | | | Tax-Exempt Interest | | Early Withdrawal Penalty (Box 2) | 2011 Interest |
|-----|---|------------------------|---------------------------------------|-------------------------------------|-----------------------------------|-----------------------------|--------------------------------|---|------------------|
| | | | 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 | | |
| | | | | | | | | | |
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DIVIDEND INCOME (12)

| No. | Name of Payer | 1=tp 2=sp | Dividend Income | | | | Tax-Exempt Interest | | Foreign Tax Paid (Box 6) | 2011 Dividends |
|-----|---------------|--------------|---|------------------------------------|--|---------------------------|-----------------------------|---------------------------------------|--------------------------------|-------------------|
| | | | 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.) | | |
| | | | | | | | | | | |
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2012

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State & Local Tax Refunds / Unemployment Compensation

14.2

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. <input type="text"/> | 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. <input type="text"/> | 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)..... | | | |

14.2

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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..... | | |

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:

| | | |
|-------|--|--|
| <hr/> | | |
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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) |
|-----|----------|------------------------------------|------------------------------|-----------------------|--|--------------------------|---|---|---|
| | | | | | | | | | |
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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 1 = Single Family Residence 2 = Multi-Family Residence 3 = Vacation/Short-Term Rental 4 = Commercial 5 = Land 6 = Royalties 7 = Self-Rental |
| Percentage of tenant occupancy if not 100% (.xxxx)..... | | |
| 1=spouse, 2=joint..... | | |
| 1=qualified joint venture..... | | |
| If required to file Form(s) 1099, did you or will you file all required Form(s) 1099: 1=yes, 2=no..... | | |
| 1=nonpassive activity, 2=passive royalty..... | | |
| 1=did not actively participate..... | | |
| 1=real estate professional..... | | |
| 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.

| | | |
|--|--|--|
| 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

| | | |
|--|--|--|
| 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

| | | |
|--|--|--|
| 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.

| | | |
|--|--|--|
| 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..... | | |

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: | | |
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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.

Table with 3 columns: 2012 Amount, TS, 2011 Amount. Rows include Prescription medicines and drugs, Doctors, dentists and nurses, Hospitals and nursing homes, Insurance premiums not entered elsewhere, Long-term care premiums, Insurance reimbursement, Lodging and transportation, Out-of-pocket expenses, Medical miles driven, and Other medical and dental expenses.

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

Table with 3 columns: 2012 Amount, TS, 2011 Amount. Rows include State income taxes (1/12 payment, 2011 state return extension, 2011 state return, prior years), and City/local income taxes (1/12 payment, 2011 city/local extension, 2011 city/local return).

SALES AND USE TAXES PAID

Table with 3 columns: 2012 Amount, TS, 2011 Amount. Rows include 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, and Sales tax on boats, aircraft, other special items.

OTHER TAXES PAID

Table with 3 columns: 2012 Amount, TS, 2011 Amount. Rows include Real estate taxes (principal residence, property held for investment), Personal property taxes, Foreign income taxes, and Other taxes.

25

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

Home mortgage int. (Box 1) and points (Box 2) reported on Form 1098:

2012 Amount

Ts

2011 Amount

Table with 3 columns: Description, 2012 Amount, Ts, 2011 Amount. Includes rows for home mortgage interest and points reported on Form 1098.

Home mortgage interest not reported on Form 1098:

Form for home mortgage interest not reported on Form 1098, including fields for payee's name, SSN or FEIN, street address, city, state, and ZIP code.

Table with 3 columns: Description, 2012 Amount, Ts, 2011 Amount. Includes row for amount paid.

Points not reported on Form 1098:

Table with 3 columns: Description, 2012 Amount, Ts, 2011 Amount. Includes rows for points not reported on Form 1098.

Mortgage insurance premiums on post 12/31/06 contracts (Box 4)

Table with 3 columns: Description, 2012 Amount, Ts, 2011 Amount. Includes row for mortgage insurance premiums.

Investment interest (interest on margin accounts):

Table with 3 columns: Description, 2012 Amount, Ts, 2011 Amount. Includes row for investment interest.

Passive interest

Table with 3 columns: Description, 2012 Amount, Ts, 2011 Amount. Includes row for passive interest.

Certain home mortgage interest included above (6251)

Table with 3 columns: Description, 2012 Amount, Ts, 2011 Amount. Includes row for certain home mortgage interest.

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:

Table with 3 columns: Description, 2012 Amount, Ts, 2011 Amount. Includes rows for cash or check contributions.

Volunteer expenses (out-of-pocket)

Number of charitable miles

Table with 3 columns: Description, 2012 Amount, Ts, 2011 Amount. Includes rows for volunteer expenses and charitable miles.

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

Contributions by cash or check:

Table with 3 columns: Description, 2012 Amount, Ts, 2011 Amount. Includes rows for cash or check contributions.

Volunteer expenses (out-of-pocket)

Number of charitable miles

Table with 3 columns: Description, 2012 Amount, Ts, 2011 Amount. Includes rows for volunteer expenses and charitable miles.

25 p2

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.

50% limitation (see above):

2012 Amount

TS

2011 Amount

Three horizontal lines for entering 2012 amounts.

Table with 3 columns: 2012 Amount, TS, 2011 Amount. Three rows for data entry.

30% limitation (see above):

Three horizontal lines for entering 2012 amounts.

Table with 3 columns: 2012 Amount, TS, 2011 Amount. Three rows for data entry.

30% capital gain property (gifts of capital gain property to 50% limit orgs.):

Three horizontal lines for entering 2012 amounts.

Table with 3 columns: 2012 Amount, TS, 2011 Amount. Three rows for data entry.

20% capital gain property (gifts of capital gain property to non-50% limit orgs.):

Three horizontal lines for entering 2012 amounts.

Table with 3 columns: 2012 Amount, TS, 2011 Amount. Three rows for data entry.

MISCELLANEOUS DEDUCTIONS (subject to 2% AGI limit)

Union and professional dues

Table with 3 columns: 2012 Amount, TS, 2011 Amount. One row for data entry.

Other unreimbursed employee expenses (uniforms and protective clothing, professional subscriptions, employment agency fees, and certain edu. expenses):

Five horizontal lines for entering 2012 amounts.

Table with 3 columns: 2012 Amount, TS, 2011 Amount. Five rows for data entry.

Investment expense:

Five horizontal lines for entering 2012 amounts.

Table with 3 columns: 2012 Amount, TS, 2011 Amount. Five rows for data entry.

Tax return preparation fee

Safe deposit box rental

Table with 3 columns: 2012 Amount, TS, 2011 Amount. Two rows for data entry.

Miscellaneous deductions (2% AGI) (certain legal and accounting fees, and custodial fees):

Five horizontal lines for entering 2012 amounts.

Table with 3 columns: 2012 Amount, TS, 2011 Amount. Five rows for data entry.

25 p3

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: | | | |
| _____ | | | |
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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.

- 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.
- 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

| | | | |
|---|--|--|--|
| 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

| | | | |
|---|--|--|--|
| 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

25 p5

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. <input style="width: 50px;" type="text"/> | 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. <input style="width: 50px;" type="text"/> | 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)..... | | | | |

| | |
|---|--|
| <p>1</p> <p style="text-align: center;">How Property was Acquired</p> <p>1 = Purchase 3 = Inheritance 2 = Gift 4 = Exchange</p> | <p>2</p> <p style="text-align: center;">Method Used to Determine FMV</p> <p>1 = Appraisal 3 = Catalog 2 = Thrift shop value 4 = Comparable sales</p> <p style="text-align: center;">For other methods, see IRS Pub. 561.</p> |
|---|--|

26

**Please enter 2012 indirect expenses in full. Nonbusiness portion will carry to Schedule A.
Business percentage will be applied to indirect expenses only.**

BUSINESS USE OF HOME

| | 2012 Amount | 2011 Amount |
|--|-------------|-------------|
| Form | | |
| Number of form (e.g., enter 2 for Schedule C number 2) | | |
| Business use area (square footage) | | |
| Total area of home (square footage) | | |
| Total hours facility used (for daycare facilities only) | | |
| Total hours available (if not 8,760) | | |
| % (.xx) or amount of gross income from home if not 100% (-1 if none) | | |
| % (.xx) or amount of expenses from home if not 100% (-1 if none) | | |

INDIRECT EXPENSES

NOTE: Indirect expenses are for keeping up and running your entire home. They benefit both the business and personal parts of your home.

| | | |
|---|--|--|
| Mortgage interest | | |
| Real estate taxes | | |
| Qualified mortgage insurance premiums | | |
| Casualty losses | | |
| Insurance | | |
| Miscellaneous | | |
| Rent | | |
| Repairs and maintenance | | |
| Utilities | | |
| Excess mortgage interest | | |
| Other indirect expenses: | | |
| _____ | | |
| _____ | | |
| _____ | | |

DIRECT EXPENSES

NOTE: Direct expenses benefit only the business part of your home. They include painting or repairs made to specific areas or rooms used for business.

| | | |
|---|--|--|
| Mortgage interest | | |
| Real estate taxes | | |
| Qualified mortgage insurance premiums | | |
| Casualty losses | | |
| Insurance | | |
| Miscellaneous | | |
| Rent | | |
| Repairs and maintenance | | |
| Utilities | | |
| Excess mortgage interest | | |
| Excess casualty losses | | |
| Allowable casualty losses | | |
| Other direct expenses: | | |
| _____ | | |
| _____ | | |
| _____ | | |

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 | <input type="text"/> | |
| Number of form (1=first Schedule C, 2=second, etc.) | <input type="text"/> | |
| 1=spouse | <input type="text"/> | |
| 1=performance artist, 2=handicapped, 3=fee-basis government official..... | <input type="text"/> | |

EMPLOYEE BUSINESS EXPENSES

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

30

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

| | | |
|--|--|--|
| 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

| | | |
|--|--|--|
| 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

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

| | |
|--|-------------|
| | 32.1 |
|--|-------------|

| | | | | |
|-------------|-------------|-----------|--|------------------|
| 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.

| | 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. <input style="width:40px;" type="text"/> | 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. <input style="width:40px;" type="text"/> | 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. <input style="width:40px;" type="text"/> | 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. <input style="width:40px;" type="text"/> | 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. <input style="width:40px;" type="text"/> | 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 | | |

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..... | |
| <small>1=student was NOT enrolled at least half-time for at least one academic period that began in 2012 at an eligible institution in a qualified program</small> | |
| <small>1=student completed first four years of post-secondary education before 2012.....</small> | |
| <small>1=student was convicted, before the end of 2012, of a felony for possession or distribution of a controlled substance.....</small> | |

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.