ORGANIZER Page 1 **Client Information** US 2012 1040 1 **Tax Return Appointment** Cheryl L. Miranda, CPA 43111 Turf Lane Temecula, CA 92592 Date: Time: Telephone number: (951) 303-6979 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 add, change, or delete information as appropriate. **CLIENT INFORMATION** Filing status (table)..... Filing Status 1=married filing separate and lived with spouse Year spouse died, if qualifying widow(er) (2010 or 2011) **Filing Status** First name and initial 1 = Single2 = Married filing joint 3 = Married filing separate 4 = Head of household Social security number. . . . Taxpayer 5 = Qualifying widow(er) Date of birth (m/d/y)..... Date of death (m/d/y)..... First name and initial Social security number. Spouse Occupation.... Date of birth (m/d/y)..... Date of death (m/d/y)..... Street address Apartment number..... Address ZIP code............ Region.... Foreign Address Country.....

	Home phone	
	Work phone	Daytime Phone
avnaver	Work extension	1 = Work
axpayer Contact	Daytime phone (table)	2 = Home
formation	Mobile phone	3 = Mobile
	Pager number	
	Fax number	
	E-mail address	
	Home phone	
	Work phone	
Spouse	Work extension	
Spouse Contact	Daytime phone (table)	
ormation	Mobile phone	
	Pager number	
	Fax number	
	E-mail address	

2012 1040 US Dependents

Please add, change or delete information for 2012.

DEPENDENTS

	Type of Dependent 1 = Child living w/taxpayer 2 = Child not living w/taxpayer 3 = Dependent other than child 4 = Head of household only, not a dependent 5 = Earned income credit only, not a dependent
Described	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,
Described	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,
Described	2 = Child not living w/taxpayer 3 = Dependent other than child 4 = Head of household only, not a dependent 5 = Earned income credit only,
Described	4 = Head of household only, not a dependent 5 = Earned income credit only,
Described	4 = Head of household only, not a dependent 5 = Earned income credit only,
Demonstrat	5 = Earned income credit only,
Described	not a dependent
Described	
Domina don't	
	1
t j Dependent	Earned Income Credit
Верепаетт	
	1 = When applicable (default)
	2 = Student age 19 to 23 3 = Disabled
	4 = Force
	5 = Suppress
+	
	NOTE: If you claim the earned
	income credit, please provide
	proof that your child is a resident of the U.S. This proof is
	typically in the form of:
t Dependent	School records or statement
	2. Landlord or property man-
	agement 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
	10. Employer statement
t J Dependent	
	NOTE: If your child is disabled, please provide one of the fol-
	lowing forms of proof of disa-
	bility:
	1. Doctor statement
	 2. Other health care provider statement
	3. Social services agency or
	program statement
l l	

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ORGANIZER Page 4 **Miscellaneous Questions** 2012 1040 US 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. PERSONAL INFORMATION YES NO Did your marital status change during the year? Did your address change during the year? Could you be claimed as a dependent on another person's tax return for 2012? **DEPENDENTS** Were there any changes in dependents? Were any of your unmarried children who might be claimed as dependents 19 years of age or older at the end of 2012? 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 Did you receive unreported tip income of \$20 or more in any month? 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? Did you receive any disability income? Did you have any foreign income or pay any foreign taxes? PURCHASES, SALES AND DEBT Did you start a business or farm, purchase rental or royalty property, or acquire an interest in a partnership, S corporation, trust, or REMIC? Did you purchase or dispose of any business assets (furniture, equipment, vehicles, real estate, etc.), or convert any personal assets to business use? Did you buy or sell any stocks, bonds or other investment property in 2012? Did you sell or do you plan to sell any dividend generating stocks or mutual funds during the first 60 days of 2013? Did you purchase, sell, or refinance your principal home or second home, or did you take a home equity loan? Did you make any residential energy-efficient improvements or purchases involving solar, wind, geothermal or fuel cell energy sources? Did you have any debts cancelled or forgiven? Does anyone owe you money which has become uncollectible?

Page 5 ORGANIZER **Miscellaneous Questions (continued)** 2012 1040 US 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. RETIREMENT PLANS YES NO Did you receive a distribution from a retirement plan (401(k), IRA, SEP, SIMPLE, Qualified Plan, etc.)? Did you make a contribution to a retirement plan (401(k), IRA, SEP, SIMPLE, Qualified Plan, etc.)? Did you transfer or rollover any amount from one retirement plan to another retirement plan? Did you convert part or all of your traditional, SEP, or SIMPLE IRA to a Roth IRA in 2012? 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** Did you receive a distribution from an Education Savings Account or a Qualified Tuition Program? Did you, your spouse, or a dependent incur any tuition expenses that are required to attend a college, university, or ITEMIZED DEDUCTIONS Did you incur a loss because of damaged or stolen property? Did you work out of town for part of the year? Did you use your car on the job (other than to and from work)? **ESTIMATED TAXES** Did you apply an overpayment of 2011 taxes to your 2012 estimated tax (instead of being refunded)? If you have an overpayment of 2012 taxes, do you want the excess applied to your 2013 estimated tax (instead of being refunded)? Do you expect your 2013 taxable income and withholdings to be different from 2012? **MISCELLANEOUS** Do you want to electronically file your tax return? Do you want to allocate \$3 to the Presidential Election Campaign Fund? Does your spouse want to allocate \$3 to the Presidential Election Campaign Fund? May the IRS discuss your tax return with your preparer? 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?

ORGANIZER Page 6 **Miscellaneous Questions (continued)** US 2012 1040 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. **MISCELLANEOUS (continued)** YES NO Did you receive a distribution from, or were you the grantor of, or transferor to, a foreign trust? Was your home rented out or used for business? 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? Did you incur moving expenses due to a change of employment? Did you engage the services of any household employees? Were you notified or audited by either the Internal Revenue Service or the State taxing agency? Did you or your spouse make any gifts to an individual that total more than \$13,000, or any gifts to a trust?

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2012 1040 US Miscellaneous Questions

If any of the following items pertain to you or your spouse for 2012, please check the

	If an	y of the following items pertain to you or your spouse for 2012, please check the appropriate box and provide additional information if necessary.
YES	NO	Did your marital status change during the year?
		Did your address change during the year?
		Could you be claimed as a dependent on another person's tax return?
		Were there any changes in dependents?
		Did you receive unreported tip income of \$20 or more in any month?
		Did you receive any disability income?
		Did you buy or sell any stocks, bonds or other investment property?
		Did you purchase, sell, or refinance your principal home or second home, or did you take a home equity loan?
		Did you make any residential energy-efficient improvements or purchases involving solar, wind, geothermal or fuel cell energy sources?
		Did you receive a distribution from or make a contribution to a retirement plan (401(k), IRA, etc.)?
		Did you transfer or rollover any amount from one retirement plan to another?
		Did you convert part or all of your traditional/SEP/SIMPLE IRA to a Roth IRA?
		Did you, your spouse, or a dependent incur any tuition expenses that are required to attend a college, university, or vocational school?
		Did you incur a loss because of damaged or stolen property?
		Did you use your car on the job (other than to and from work)?
		Do you want to electronically file your tax return?
		May the IRS discuss your tax return with your preparer?
		Was your home rented out or used for business?
		Were you notified or audited by either the IRS or the State taxing agency?

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electronic pay electronic pay BANK INFO	ment of balance of ment of estimated DRMATION	dued taxPercent to					
BANK INFO	ORMATION	Percent to					
		(xx.xx)	Routing Number	Account N	umber	Type of Account (Table 1)	Type of Invest. (Table 2)
2012 ESTIN ederal	MAIED IAX	/ 1040-ES (6)	nount Paid	Date Paid	TS	2011 Voucher Am	ount
	plied from 2011		- I I I I I I I I I I I I I I I I I I I				- Cum
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Additior Tax	nal Estimated Payments						
aid with extens	ion						
itate		A	nount Paid	Date Paid	TS	2011 Voucher Am	ount
verpayment ap	plied from 2011						
st quarter paym	nent						
nd quarter payr	ment						
	nent						
	nent						
Additior	nal Estimated						
Tax	Payments						
aid with extens	ion						
			1				
1	Type of Acc	count	2	Type of Investment			
	1 = Savings 2 = Checkin	g	1 = Checking or savings (d 2 = Taxpayer's IRA (next ye 3 = Spouse's IRA (next yea 4 = Health savings account 5 = Archer MSA	ear limits) 7 = Other r limits) 8 = Taxpaye (HSA) 9 = Spouse	ell savings accorris IRA (current single) IRA (current single) I treasury bonds	t year limits) year limits)	

3, 6

Page 9 **ORGANIZER** Direct Deposit & Estimates (Form 1040 ES) (cont.) US 2012 1040 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 If "yes" explain any differences in income, deductions, dependents, etc.: Do you expect your 2013 withholding to be different from 2012? Yes If "yes" explain any differences:

7.1

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=retire	eretirement lan (Box 13) Wages, Othe Compens (Box		Wages Tins	Tips, Tax Withheld					
No.	Name of Employer (Box c)	plan (B			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	Distribu 1=IRA/SE 1=spous	P/SIM	1	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	Faraire		
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 Amount		
	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.					

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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	Capital Gains & Losses (Sched	dule D)
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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

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2012	1040	US	Adjustments to Income	24	

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

TRADITIONAL IDA CONTRIBUTIONIC	2012 Amount		2011 Amount
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			
2012 payments from 1/1/13 to 4/15/13			
ROTH IRA CONTRIBUTIONS			
Dalla IDA a satella di sassa da sa sassa da sa			
Roth IRA contributions you made or expect to make (1=maximum) (\$5,000/\$6,000 if 50 or older). Contributions made to date			
SEP, SIMPLE AND QUALIFIED PLANS	(KEOGH)		
Profit-sharing (25%/1.25) contributions you made or expect to make (1=maximum)			
Money purchase (25%/1.25) contributions you made or expect to make (1=maximum)			
Defined benefit contributions you expect to make.			
Self-employed SEP (25%/1.25) contributions you made or expect to make (1=maximum)			
Plan contribution rate if not .25 (.xxxx)			
Individual 401k: SE elective deferrals (except Roth) (1=max.)			
Individual 401k: SE designated Roth contributions (1=max.) SIMPLE contributions:			
Self-employed SIMPLE contributions you made or expect to make (1=maximum)			
Employer matching rate if not .03 (.xxxx)			
Contributions made to date			
ADJUSTMENTS TO INCOME			
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	011 amtı		2011 amti
Amount paid 20	011 amt:		2011 amt:

2012 1040 US Itemized Deductions 25

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

MEDICAL AND DENTAL EXPENSES

NOTE:Enter self-employed health insurance premiums on Sheet 24 and Medicare insurance premiums on Sheet 14.	2012 Amount	TS	2011 Amount
Prescription medicines and drugs.			
Doctors, dentists and nurses			
Hospitals and nursing homes.			
Insurance premiums not entered elsewhere (excl. LT care & amts. paid w/pre-tax dollars).			
Long-term care premiums - taxpayer			
Long-term care premiums - spouse			
Insurance reimbursement (enter as a positive number)			
Lodging and transportation:			
Out-of-pocket expenses			
Medical miles driven			
Other medical and dental expenses:			
TAXES PAID (State and local withholding and 2012 estimates are at	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:			
. i.s. sette takes principal residence.			
-		1 1	
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:			
Γ			
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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 SSN or FEIN			
Payee's street address .			
Payee's city			
Payee's state			
Payee's ZIP code			
Amount paid.			
ints not reported on Form 1098:			
		++	
where increases are an increased (Pour A)		++	
rtgage insurance premiums on post 12/31/06 contracts (Box 4)			
estment interest (interest on margin accounts):			
poivo intercet			
ssive interest			
taili nome mortgage interest included above (0231)			
ASH CONTRIBUTIONS	n home are deductible over ans.		
ASH CONTRIBUTIONS OTE: No deduction is allowed for cash or check contributions unless the from the donee, showing the name of the organization, contribution curches, schools, hospitals, and other charitable organizations (50% limitation).	n home are deductible over ans. donor maintains a bank red n date(s), and contribution a	cord, or a	written communication
ASH CONTRIBUTIONS OTE: No deduction is allowed for cash or check contributions unless the from the donee, showing the name of the organization, contribution	n home are deductible over ans. donor maintains a bank red n date(s), and contribution a	cord, or a	written communication
ASH CONTRIBUTIONS OTE: No deduction is allowed for cash or check contributions unless the from the donee, showing the name of the organization, contribution curches, schools, hospitals, and other charitable organizations (50% limitable).	n home are deductible over ans. donor maintains a bank red n date(s), and contribution a	cord, or a	written communication
ASH CONTRIBUTIONS OTE: No deduction is allowed for cash or check contributions unless the from the donee, showing the name of the organization, contribution curches, schools, hospitals, and other charitable organizations (50% limitable).	n home are deductible over ans. donor maintains a bank red n date(s), and contribution a	cord, or a	written communication
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ASH CONTRIBUTIONS OTE: No deduction is allowed for cash or check contributions unless the from the donee, showing the name of the organization, contribution surches, schools, hospitals, and other charitable organizations (50% limit Contributions by cash or check:	n home are deductible over ans. donor maintains a bank red n date(s), and contribution a	cord, or a	written communication
ASH 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% limit Contributions by cash or check: Volunteer expenses (out-of-pocket)	n home are deductible over ans. donor maintains a bank red n date(s), and contribution a	cord, or a	written communication
ASH CONTRIBUTIONS OTE: No deduction is allowed for cash or check contributions unless the from the donee, showing the name of the organization, contribution surches, schools, hospitals, and other charitable organizations (50% limit Contributions by cash or check:	n home are deductible over ans. donor maintains a bank red n date(s), and contribution a	cord, or a	written communication
ASH 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% limit Contributions by cash or check: Volunteer expenses (out-of-pocket) Number of charitable miles	n home are deductible over ans. donor maintains a bank red n date(s), and contribution a tation):	cord, or a	written communication).
ASH 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% limit Contributions by cash or check: Volunteer expenses (out-of-pocket) Number of charitable miles	n home are deductible over ans. donor maintains a bank red n date(s), and contribution a tation):	cord, or a	written communication).
ASH CONTRIBUTIONS TE: 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% limit Contributions by cash or check: Volunteer expenses (out-of-pocket) Number of charitable miles verans' organizations, fraternal societies, nonprofit cemeteries, and certain contributions is allowed for cash or check contributions unless the from the donee, showing the name of the organizations (50% limit Contributions by cash or check:	n home are deductible over ans. donor maintains a bank red n date(s), and contribution a tation):	cord, or a	written communication).
ASH CONTRIBUTIONS OTE: No deduction is allowed for cash or check contributions unless the from the donee, showing the name of the organization, contribution contributions, schools, hospitals, and other charitable organizations (50% limit Contributions by cash or check: Volunteer expenses (out-of-pocket) Number of charitable miles terans' organizations, fraternal societies, nonprofit cemeteries, and certain contributions.	n home are deductible over ans. donor maintains a bank red n date(s), and contribution a tation):	cord, or a	written communication).
ASH CONTRIBUTIONS OTE: No deduction is allowed for cash or check contributions unless the from the donee, showing the name of the organization, contribution contributions urches, schools, hospitals, and other charitable organizations (50% limit Contributions by cash or check: Volunteer expenses (out-of-pocket) Number of charitable miles terans' organizations, fraternal societies, nonprofit cemeteries, and certains.	n home are deductible over ans. donor maintains a bank red n date(s), and contribution a tation):	cord, or a	written communication).
ASH CONTRIBUTIONS DTE: 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% limit Contributions by cash or check: Volunteer expenses (out-of-pocket) Number of charitable miles terans' organizations, fraternal societies, nonprofit cemeteries, and certains.	n home are deductible over ans. donor maintains a bank red n date(s), and contribution a tation):	cord, or a	written communication).
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ASH CONTRIBUTIONS DTE: 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% limit Contributions by cash or check: Volunteer expenses (out-of-pocket) Number of charitable miles terans' organizations, fraternal societies, nonprofit cemeteries, and certains.	n home are deductible over ans. donor maintains a bank red n date(s), and contribution a tation):	cord, or a	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.

r icase enter all pertinent 2012 amounts.	Last year 5 amounts are provided for your refere
NONCASH CONTRIBUTIONS	

NOTE: Use Sheet 26 if total noncash contributions are	e over \$500	. No deduction is al	lowed for contribution	ons of clothing ar	nd household items
that are not in <i>good</i> used condition or better.	In addition,	a deduction for any	item with minimal	monetary value r	nay be denied.

50% limitation (see above):	2012 Amount	TS	2011 Amount
30% limitation (see above):			
30% capital gain property (gifts of capital gain property to 50% limit orgs.):			
0.9% capital gain property (gifts of capital gain property to non-50% limit orgs.)	:		
		\perp	
MISCELLANEOUS DEDUCTIONS (subject to 2% AGI limit)			
Union and professional dues			
Other unreimbursed employee expenses (uniforms and protective clothing, professional subscriptions, employment agency fees, and certain edu. expense	s):		
-			
		\perp	
nvestment expense:			
		+	
		+	
ax return preparation fee			
Safe deposit box rental			
Aiscellaneous deductions (2% AGI) (certain legal and accounting fees, and custodial fees):			
-			

25 p3

2012	1040	IIS	Itemized Deductions (continued)	25 -4
ZUIZ	1040	US	I ILEITIIZEU DEUUCIIOTIS (COTTITIUEU)	

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:			
	_		
	_		
	_	-	
	_		
	_		
-			
	_		
-	_		
-	_	-	
	_		
	<u> </u>		
	_		

2012 1040 US Itemized Deductions (continued) 25 p5

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

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

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

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

- -	2012 Amount	TS	2011 Amount
Fair market value of the property on the date that the last debt was secured			
dome 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.			
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.			
Granditation dobt balance boginning of year		1 1	
Form			
1 = Schedule A (defau	11+7		
2 = Business use of ho			

3 = Schedule E

ORGANIZER Page 21 **Child and Dependent Care Expenses (Form 2441)** 2012 US 1040 33.1,33. 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. . 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..... Date of birth (m/d/y)..... No. Social security number Qualified dependent care expenses incurred and paid in 2012 2011 amt: 1=disabled 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)

	Name of provider	
	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	
	Name of provider	
	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	