

Miscellaneous Information

Name: _____

SSN: _____

	Yes	No	General Information
			1. Were there any changes to your filing status or number of dependents during 2011?
			2. Can you or your spouse be claimed as a dependent by someone else?
			3. Did you incur any childcare expenses?
			4. Did you have a change in residence or job location during the year?
			5. Did you move during 2011? From where? _____ Date of move _____
			6. Did you reside in more than one state during 2011? If yes, which states? _____
			7. Did you receive any notices from the IRS or the state taxing agency? If yes, please attach.
			8. Would you like a copy of your tax return sent to you via email?
			9. Did you receive an Economic Recovery Payment in 2011 from social security benefits, supplemental security income, or pension benefits?

	Yes	No	Income Information
			1. Have you received all W-2s from all employers? How many W-2s are attached? _____
			2. Did you use your vehicle on the job other than for commuting to work?
			3. Did you have an employer-provided vehicle which you drove home or used personally? If so, enter the lease value. \$ _____
			4. Did you work out of town at any time during the year?
			5. Did you earn income from a state other than the state in which you live? If yes, what state and how much? _____
			6. Did you or your spouse receive any tips not reported to your (or your spouse's) employer?
			7. Did you receive any disability income during the year? \$ _____. Attach 1099-R.
			8. Did you have an interest in or signature over a bank or brokerage account in a foreign country? Were you a grantor of or transferor to a foreign trust?
			9. Did you earn interest from, or are you an authorized signature holder on, a foreign bank account?
			10. Did you have any income from, or pay taxes to, a foreign country?
			11. Did you engage in any bartering transactions during 2011?
			12. Did you surrender any U.S. Savings Bonds during 2011?
			13. Did you receive any state or local income tax refunds from prior years?
			14. Do you or your spouse have any IRA accounts?
			15. Did you recharacterize any IRAs this year?
			16. Did you or your spouse "roll over" a profit-sharing or retirement plan distribution into another plan?
			17. Did you receive a Schedule K-1 from a partnership, S corporation, or trust? If so, please attach.
			18. Did you or your spouse receive any social security benefits during the year? Attach Form(s) SSA-1099.
			19. Did you receive any type of prize, award, or gambling winnings during 2011?
			20. Did you receive any of the following: Unemployment Income, Combat Pay, Jury Duty and/or Alimony, or Maintenance Received? If so, what and how much? _____
			21. Did you receive any income not shown in this organizer? If so, please list. _____
			22. Does anyone owe you money that has become uncollectible?

Comments: _____

Miscellaneous Information

Name:

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Yes	No	Business Information
<input type="checkbox"/>	<input type="checkbox"/>	1. Did you start a new business or purchase any rental property during 2011?
<input type="checkbox"/>	<input type="checkbox"/>	2. Have you purchased any business assets (furniture, equipment, etc.) or converted any assets to business use? If yes, please list on an attached sheet the date placed in service, cost or basis of asset, business use percentage, etc.
<input type="checkbox"/>	<input type="checkbox"/>	3. Did you dispose of any business assets (including real estate)? If yes, please list on an attached sheet the date removed from service, selling price and expense of sale.
<input type="checkbox"/>	<input type="checkbox"/>	4. Did you own rental property? What percentage of time did you spend managing your rentals? _____
<input type="checkbox"/>	<input type="checkbox"/>	5. Did you purchase any gasoline, diesel, or special fuels for non-highway business use?

Yes	No	Other Information
<input type="checkbox"/>	<input type="checkbox"/>	1. Were any tuition costs paid during 2011 (even if classes were attended in another year)?
<input type="checkbox"/>	<input type="checkbox"/>	2. Did anyone in your household attend higher education classes in 2011?
<input type="checkbox"/>	<input type="checkbox"/>	3. Did you incur a loss due to damaged or stolen property?
<input type="checkbox"/>	<input type="checkbox"/>	4. Did you purchase a home for your personal residence between April 8, 2008, and December 31, 2008 in which the First-Time Homebuyer Credit was taken on the home?
<input type="checkbox"/>	<input type="checkbox"/>	5. Did you refinance your principal home or your second home or make a home equity loan during the year? If yes, please provide all escrow, closing, and other pertinent documentation and information.
<input type="checkbox"/>	<input type="checkbox"/>	6. Did you purchase or sell a home that you used as a principal residence? If yes, please provide closing documentation.
<input type="checkbox"/>	<input type="checkbox"/>	7. If yes to question 6 was the First-Time Homebuyer Credit taken?
<input type="checkbox"/>	<input type="checkbox"/>	8. Did you make any gifts to any one person in 2011 in excess of \$13,000? If so, are you splitting this gift with your spouse?
<input type="checkbox"/>	<input type="checkbox"/>	9. Did you pay wages to any household employees (babysitter, housekeeper, nanny, etc.)?

To itemize deductions, bring receipts and documentation for these types of expenses:

<input type="checkbox"/>	Prescriptions, first-aid
<input type="checkbox"/>	State/local income taxes
<input type="checkbox"/>	Mortgage interest
<input type="checkbox"/>	Tax preparation fees
<input type="checkbox"/>	Gambling losses (up to amount of winnings)
<input type="checkbox"/>	Cash donations to charity (provide all receipts)
<input type="checkbox"/>	Medical/Dental/Vision expenses and insurance premiums, mileage and lodging for seeking medical care (but not meals)
<input type="checkbox"/>	Real estate and personal property taxes paid in 2011
<input type="checkbox"/>	Unreimbursed employee/work-related expenses (if self-employed, do not include items reported on Schedule C)
<input type="checkbox"/>	Fair market value of property donated to charity
<input type="checkbox"/>	Purchase price of new goods donated or used in volunteer work

Comments: _____

Miscellaneous Information

Name:

SSN:

Information to bring to your appointment:

- Driver's license & social security card (for identity verification)
- Copy of your 2010 income tax return (for comparison and review for all includible information)
- Preprinted IRS label received
- Original W-2s and other statements of income received from employers
- 1099s and other statements reporting interest/dividend/miscellaneous income
- Records of other income received (tips, self-employment, SSI, combined bank reporting statements)
- Cancelled checking/savings slip (for direct deposit/direct debit information)

Concerns to discuss with preparer: _____

Preparer Notes

Miscellaneous Notes

Personal Data

Filing Status: <input type="checkbox"/> Single <input type="checkbox"/> Married Filing Joint <input type="checkbox"/> Married Filing Separate <input type="checkbox"/> Head of Household	
Taxpayer Name	SSN
Spouse Name	SSN
Address	Apt no.
City	State Zip
Foreign State/Province	Foreign Postal Code
Foreign Country	
Taxpayer Date of Birth	Spouse Date of Birth
Occupation	Occupation
Daytime phone: Ext:	Daytime phone: Ext:
Evening phone: Ext:	Evening phone: Ext:
Cell:	Cell:
E-mail	E-mail
<input type="checkbox"/> Full time student <input type="checkbox"/> Blind <input type="checkbox"/> Active military	<input type="checkbox"/> Full time student <input type="checkbox"/> Blind <input type="checkbox"/> Active military
Do you want \$3 to go to the Presidential Election Camp Fund? <input type="checkbox"/>	Does your spouse want \$3 to go to the Presidential Election Camp Fund? <input type="checkbox"/>
Date and time of this year's appointment	

Income Taxes Paid

Federal	2011 estimate date due	2011 est amount	Amount paid	Date paid	Check no.
2010 Refund	April 18, 2011				
2010 Refund applied to 2011	June 15, 2011				
2010 Balance Due	Sept. 15, 2011				
	Jan. 17, 2012				
Amount paid	Date paid	Check no.	Amount paid	Date paid	Check no.
Additional payments made					

Resident State	2011 estimate date due	2011 est amount	Amount paid	Date paid	Check no.
2010 Refund	April 18, 2011				
2010 Refund applied to 2011	June 15, 2011				
2010 Balance Due	Sept. 15, 2011				
	Jan. 17, 2012				
Amount paid	Date paid	Check no.	Amount paid	Date paid	Check no.
Additional payments made					

Local	2011 estimate date due	2011 est amount	Amount paid	Date paid	Check no.
2010 Refund	April 18, 2011				
2010 Refund applied to 2011	June 15, 2011				
2010 Balance Due	Sept. 15, 2011				
	Jan. 17, 2012				
Amount paid	Date paid	Check no.	Amount paid	Date paid	Check no.
Additional payments made					

Interest Income

Please attach all 1099(s) relating to interest income.

Name:

SSN:

Name and SSN of payer			2011	2010
TSJ	Address of payer			

Dividend Income

Please attach all 1099(s) relating to dividend income.

Name:

SSN:

TSJ	Name of payer	Ordinary	Qualified	Capital Gains	Federal Income Tax	Foreign Tax Paid	Other	
							Description	Amount

Profit or Loss From Business Schedule C

Name: _____ **SSN:** _____

TS		Principal business or profession	Business code	
----	--	----------------------------------	---------------	--

Business name		Employer I.D. number	
---------------	--	----------------------	--

Business address	
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Accounting method, if not cash Accrual Other

Activity type _____ You disposed of this property during 2011

You started or acquired this business during 2011

Did you make any payments in 2011 that would require you to file Form(s) 1099? Yes No

If, Yes," did you or will you file all required Forms 1099? Yes No

	2011	2010		2011	2010
--	------	------	--	------	------

Payments from Form 1099-K			Returns and allowances		
---------------------------	--	--	------------------------	--	--

Gross receipts or sales			Other income		
-------------------------	--	--	--------------	--	--

Statutory Employee Earnings					
-----------------------------	--	--	--	--	--

	2011	2010		2011	2010
--	------	------	--	------	------

Advertising			Taxes and licenses		
-------------	--	--	--------------------	--	--

Car and truck expenses			Travel		
------------------------	--	--	--------	--	--

Commissions and fees			Total meals and entertainment		
----------------------	--	--	-------------------------------	--	--

Contract labor			Utilities		
----------------	--	--	-----------	--	--

Depletion			Wages		
-----------	--	--	-------	--	--

Employee benefit programs			Other expenses (list):		
---------------------------	--	--	------------------------	--	--

Insurance (other than health)					
-------------------------------	--	--	--	--	--

Mortgage interest (paid to banks etc.)					
--	--	--	--	--	--

Other interest					
----------------	--	--	--	--	--

Legal & professional services					
-------------------------------	--	--	--	--	--

Office expenses					
-----------------	--	--	--	--	--

Pension and profit sharing plans					
----------------------------------	--	--	--	--	--

Rent or lease (vehicles, machinery, and equipment)					
--	--	--	--	--	--

Rent (other business property)					
--------------------------------	--	--	--	--	--

Repairs and maintenance			Other (Detail)		
-------------------------	--	--	----------------	--	--

Supplies			Family Health Coverage		
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	2011	2010		2011	2010
--	------	------	--	------	------

Inventory at beginning of the year			Materials and supplies		
------------------------------------	--	--	------------------------	--	--

Purchases (less cost of items withdrawn for personal use)			Other costs		
---	--	--	-------------	--	--

Cost of labor			Inventory at end of year		
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Inventory method, if not Cost Lower of Cost or Market Other There was a change of inventory method

Profit or Loss From Business

Schedule C General Information

Name:

SSN:

TS	Business name	Profession or product		2011	2010
Expenses					
	Advertising				
	Car and truck expenses				
	Commissions and fees				
	Contract labor				
	Depletion				
	Employee benefit programs				
	Insurance (other than health)				
	Mortgage interest (paid to banks etc.)				
	Other interest				
	Legal and professional services				
	Office expense				
	Pension and profit sharing plans				
	Rent or lease (vehicles, machinery, and equipment)				
	Rent (other business property)				
	Repairs and maintenance				
	Supplies				
	Taxes and licenses (including real estate taxes)				
	Travel				
	Total meals and entertainment				
	Utilities				
	Wages				
	Other expenses (list):				
	Other (Detail)				

Expenses for Business Use of Your Home

Name: _____ SSN: _____

TSJ _____ For _____

Business Use of Home

2011 2010

Square feet of home used exclusively for business

Total square feet of home

Use of Home for Daycare

2011 2010

Area used part time for business

Total hours used for daycare

Total hours available

Did you live in the home all year?

Yes No

Expenses

Expenses directly related
to business use only

Total Household
expenses

Did you claim office in home expenses last year? Yes No

2011	2010	2011	2010
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Deductible mortgage interest

Real estate taxes

Excess mortgage interest

Insurance

Rent

Repairs and maintenance

Utilities

Other expenses

Cost of Home

2011 2010

Enter the **smaller** of your home's adjusted basis or its fair market value

Does this include the value of the land? Yes No

Value of land

Date placed in service

Date taken out of service

Auto Expense Worksheet

Name:

SSN:

For

Business name & Profession/Product

Description

Date placed in service

Do you or your spouse have another vehicle available for personal use? Yes No

Was your vehicle available for use during off-duty hours? Yes No

Do you have evidence to support your deduction? Yes No

If "Yes," is the evidence written? Yes No

Enter the number of miles your vehicle was used for:	2011	2010
a Business miles before 7/1		
b Business miles after 6/30		
c Commuting		
d Other		

Expenses:	2011	2010
Garage rent		
Gas		
Insurance		
Licenses		
Oil		
Parking fees		
Lease payments		
Interest		
Property tax		
Repairs		
Tires		
Tolls		
Other expenses (list): Apply Business %		
<input type="checkbox"/>		
<input type="checkbox"/>		
<input type="checkbox"/>		