Form ID: 1040	Persona	al Information			1
Filing (Marital) status code(1 = Single, 2 = Married filing Mark if you were married but living apart all year Mark if your nonresident alien spouse does not h		axpayer Identification Nun			[1] [2] [3]
Social security number		Taxpayer		Spouse	
First name		[4] [6]	-		[5] [7]
Last name		[8]			[''] [9]
Occupation		[10]			[11]
Designate \$3.00 to the presidential election cam	paign fund(?) = Yes, 2 =	= No, 3 = Blank) 2 [12]			[14]
Mark if dependent of another taxpayer	40 40 00 0 1 1	[15]			[16]
Taxpayer with income less than 1/2 support age Mark if legally blind	18 or 19 - 23 tull-tir	[17] [20] ne student(<u>*</u> , N)			[21]
Date of birth		[22]			[24]
Date of death		[26]			[27]
Work/daytime telephone number/ext number		[28] [29]		[30]	[31]
Home/evening telephone number		[32]			[33]
Do you authorize us to discuss your return with t	he IRS?(Y, N)	 [34]			
	Present M	lailing Address			
Address					[38]
Apartment number				_	[39]
City, state postal code, zip code			[40]	[41]	[42]
Foreign country name					[44]
In care of addressee					[47]
	Depende	ent Information			
(*F	Please refer to Dep	endent Codes located a	t the bottom)	Months*** Dep	Care expenses
[48] First Name Last Name	Date of Birth	Social Security No.	Relationship		paid for dependent
		·			
		·			
Name of child who lived with you but is not your	dependent				[49]
Social security number of qualifying person					[50]
	Depen	dent Codes			
*Basic 1 = Child who lived with you			ent (Age 19 - 23)		
2 = Child who did not live with 3 = Other dependent	you		led dependent ndent who is both a	e student and disa	blod
5 = Qualifying child for Earned	I Income Credit on				IDIEU
6 = Children who lived with yo		-	edit		
7 = Children who lived with yo	-	-			
8 = Children who lived with yo	-	ify for Child Tax Credit o	r Earned Income C	redit	
***Months 77 = Reported on odd year retu					
88 = Reported on even year re 99 = Not reported on return	turn				
		Gen	eral	For	m ID: 1040

Client Contact Information

Preparer - Enter on Screen Contact

Tax matters person(Indicate which spouse handles tax return related question Taxpayer email address	ns) (Blank = Both, T = Taxpayer, S = Spouse)	[8]
Spouse email address		[3] [10]
	Taxpayer	Spouse
Car telephone number	[11]	[19]
Fax telephone number	[12]	[20]
Mobile telephone number	[13]	[21]
Pager number	[14]	[22]
Other:	[15]	[23]
Telephone number	[16]	[24]
Extension	[17]	[25]
Preferred method of contact:		
Email, Work phone, Home phone, Fax, Mobile phone, Car phone	[18]	[26]

NOTES/QUESTIONS:

General Form ID: Info

2

Gambling Winnings #1

0	0
Z	2

•	2012 Information	Prior Year Information
Taxpayer/Spouse(T, S)	_[1]	
Payer name	[3]	
State postal code	[4]	
Mark if professional gambler	_[9]	
Gross winnings (Box 1)	+[1:	
Federal withholding(Box 2)	+[1:	3]
Type of wager (Box 3)	[1	5]
Date won (Box 4)	[1]	7]
Transaction (Box 5)	[15	9]
Race (Box 6)	[2:	1]
Identical wager winnings(Box 7)	+[23	3]
Cashier (Box 8)	[2!	5]
Taxpayer identification number(Box 9)	[2]	זן
Window (Box 10)	[28	8]
First ID (Box 11)	[30	ן נ
Second ID (Box 12)	[3:	1]
Payer's state ID no. (Box 13)	[32	2]
State withholding(Box 14)	+[33	3]
Name of locality	[36	6]
Local withholding	[3]	7]

Control Totals+

Gambling Winnings #2

Please	e provide all copies of Form W-2G.		
	2012 Information	Prior Year Information	on
Taxpayer/Spouse(T, S)		_[1]	
Payer name		[3]	
State postal code		[4]	
Mark if professional gambler		_[9]	
Gross winnings (Box 1)	+	[11]	
Federal withholding(Box 2)	+	[13]	
Type of wager (Box 3)		[15]	
Date won (Box 4)		[17]	
Transaction (Box 5)		[19]	
Race (Box 6)		[21]	
Identical wager winnings(Box 7)	+	[23]	
Cashier (Box 8)		[25]	
Taxpayer identification number(Box 9)		[27]	
Window (Box 10)		[28]	
First ID (Box 11)		[30]	
Second ID (Box 12)		[31]	
Payer's state ID no. (Box 13)		[32]	
State withholding(Box 14)	+	[33]	
Name of locality		[36]	
Local withholding		[37]	
	Control Totals+		

NOTES/QUESTIONS:

Income Form ID: W2G

Form	ID:	C-1
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Schedule C - General Information

0	-
2	ົ
_	~

Preparer use only

	2012 Informa	ition	Prior Year Information	
Busines	s Income			
Amount of wages received as a statutory employee	+	[44]		
Long-term care premiums paid by this activity	+	[41]		-
Medical insurance premiums paid by this activity	+	[39]		<u>.</u>
Did you receive wages as a statutory employee or as a minister? = Statu	tory employee, 2 = Minister)	[36]	-	-
Mark if this business is considered related to qualified services as a min	-	[34]	_	
lf "Yes", did you or will you file all required Forms 1099?(Y, N)		[32]	-	<u>.</u>
Did you make any payments in2012 that require you to file Form(s) 109	9?(Y, N)	[30]	_	<u>_</u>
Mark if you began or acquired this business in2012		[29]		
If not, number of hours you did significantly participate		[27]		
Did you "materially participate" in this business?(Y, N)		[25]	_	
		[24]		
Enter an explanation if there was a change in determining your invento	ry:			
		[23]		
If other enter explanation:		_[2]]	-	t
Inventory method(1 = Cost, 2 = LCM, 3 = Other)		[21]		
If other:		[20]	-	Ť
Accounting method(1 = Cash, 2 = Accrual, 3 = Other)	[10][10]	[18]		
City/State/Zip	[15] [16]	[17]		
Address	. 10-10	[14]		
Business address, if different from home address on Organizer Form II	D [.] 1040	[111]		
Business code		[0] [11]		
Principal business/profession		[0] [6]		
Business name		[5]		
Employer identification number		[2] [3]		
Taxpayer/Spouse/Joint(T, S, J)	2012 11101118	[2]		
• • • • • • • • • • • • • • • • •	2012 Informa	tion	Prior Year Information	

Cost of Goods Sold

		2012 Info	rmation	Prior Year Information	1
Beginning inventory		+	[56]		
Purchases		+	[58]		
Labor:					
		+	[60]		
		+			
Materials		+	[62]		
Other costs:					
		+	[64]		
		+			
		+			
		+			
Ending inventory		+	[66]		
	Control Totals+	Busine	ess	Form ID: 0	C-1

Form ID: C-2	Schedule C - Expenses	26
Preparer use only	•	
Principal business or profession		
Advertising	2012 Information	Prior Year Information
Advertising Car and truck expenses		[6]
Commissions and fees		[8]
Contract labor		[12]
Depletion	+	30
Depreciation		[16]
Employee benefit programs (Include Small Employee	er Health Insurance Premiums credit):	
	+	[18]
	+	
Insurance (Other than health):		
		.20]
	+	
Interest:		
Mortgage (Paid to banks, etc.)	±	1991
	+ +	
Other:		
		[24]
	+	
Legal and professional services		[26]
Office expense		[29]
Pension and profit sharing:		
		[31]
Rent or lease:		
Vehicles, machinery, and equipment		[33]
Other business property		[35]
Repairs and maintenance Supplies		[37]
Taxes and licenses:	+	
	+	[41]
	+	
	+	
	+	
	+	
Travel, meals, and entertainment:		
Travel	+	[43]
Meals and entertainment	+	[45]
Meals (Enter 100% subject to DOT 80% limit)		[47]
Utilities	+	[51]
Wages (Less employment credit):		
	+	53]
Other expenses:	Ť	
Other expenses.	+	(55)
	+	
	+	
	+	
	+	
	+	
	+	
	+	
	+	
Control	Totals+	Form ID: C-2

Preparer use only

Principal business or profession

Preparer use only

Carryovers		Regular		AMT
Operating	+	[11]	+	[12]
Short-term capital	+	[13]	+	[14]
Long-term capital	+	[15]	+	[16]
28% rate capital	+	[17]	+	[18]
Section 1231 loss	+	[19]	+	[20]
Ordinary business gain/loss	; +	[21]	+	[22]
Section 179	+	[23]	+	[24]

NOTES/QUESTIONS:

Control Totals+ Form ID: C-3

Form ID: Rent and Royalt	y Property - C	General Infor	mation	28
Preparer use only				
		2012 Informa	tion	Prior Year Information
Taxpayer/Spouse/Joint(T, S, J)			_[3]	
State postal code Description			[4]	
Description Physical address: Street			[2] [5]	
City, state, zip code	[6]	[7]		
Foreign country				
Foreign province/county Foreign postal code				
Type (1 = Single-family, 2 = Multi-family, 3 = Vacation/short-term, 4 = Commercial, 5	5 = Land, 6 = Royalties, 7 =		[13]	
Description of other type(Type code #8)			[14]	
Did you make any payments in2012 that require you to file Form If "Yes", did you or will you file all required Forms 1099 (Y, N)	n(s) 1099?(Y,N)		_[15]	
Fair rental days(if not full year) (For types 1, 2, 4, 5, 7 and 8 only) (Use Rent-2 for	pr type 3)		[17] [19]	
Percentage of ownership if not 100%	51 -7		[21]	
Business use percentage, if not 100%(Not vacation home perce	entage)		[23]	
Rent	and Royalty I	ncome		
	2012 Infor			Prior Year Information
Rents and royalties	+	[32]		
Rent a	nd Royalty E	xpenses		
	2012 Infor		if not 100%	Prior Year Information
Advertising	+		[35]	
Auto	+			
	+		[41]	
Cleaning and maintenance Commissions:	+	[43]	[44]	
	+	[46]	[48]	
	+			
Insurance:				
	+ +	[49]	[51]	
Legal and professional fees	+	[53]	[54]	
Management fees:				
	+	[56]	[58]	
Mortgage interest paid to banks, etc (Form 1098)	+	[59]	[61]	
Other mortgage interest	+		[64]	
Qualified mortgage insurance premiums	+	[65]	[66]	
Other interest:	+	[68]	[70]	
	+		[/0]	
Repairs	+		[72]	
Supplies	+	[74]	[75]	
Taxes:	+	[77]	[79]	
	+		[10]	
Utilities	+		[81]	
Depreciation	+		[84]	
Depletion Other expenses:	т	[86]	[87]	
	+	[89]		
	+			
	- +			
	+			