

IRA, PENSION, AND ANNUITIES (Please enclose all copies of 2011 Form 1099-R)

T = Taxpayer S = Spouse

| | | 2011 | | | | | 2010 |
|-----|--------------|--------------------|-----------------------------|--------------------------|----------|--------------------|------|
| | | Box 1 | Box 4 | Amount rolled over into: | | Gross distribution | |
| T S | Payer's Name | Gross distribution | Federal income tax withheld | Regular IRA | Roth IRA | | |
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Total IRA basis for 2010 and prior years _____ **Taxpayer** _____ **Spouse**
 Value of all traditional IRA's as of December 31, 2011 _____

ANNUITIES AND PENSIONS BY THE RAILROAD RETIREMENT BOARD (Please enclose all copies of 2011 Form RRB-1099-R)

T = Taxpayer S = Spouse

| | | 2011 | | 2010 |
|-----|--------------|------------------|-----------------------------|------------------|
| | | Box 7 | Box 9 | Total gross paid |
| T S | Payer's Name | Total gross paid | Federal income tax withheld | |
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PAYMENTS FROM QUALIFIED EDUCATION PROGRAMS (Please enclose all copies of 2011 Form 1099-Q)

T = Taxpayer S = Spouse

| | | 2011 | | | 2010 |
|-----|--------------|---------------------|---------|-----------------|---------------------|
| | | Box 1 | Box 5 | | Gross distributions |
| T S | Payer's Name | Gross distributions | Private | State Coverdell | |
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PARTNERSHIPS, S CORPORATIONS, ESTATES AND TRUSTS (Please enclose all copies of 2011 Schedule K-1)

| | | | |
|--|-----------|-------------------------|-----------|
| Schedule K-1 (1065) Partnerships: | | | |
| Partnership's name | ID Number | Partnership's name | ID Number |
| | | | |
| Schedule K-1 (1120S) S Corporations: | | | |
| Corporation's name | ID Number | Corporation's name | ID Number |
| | | | |
| Schedule K-1 (1041) Estates or Trusts: | | | |
| Name of Trust or Estate | ID Number | Name of Trust or Estate | ID Number |
| | | | |

BUSINESS INCOME AND EXPENSES

Indicate the owner of this business: Taxpayer Spouse Joint

Business Name: _____

Business product or service: _____

Business Address: _____

City, State, and Zip Code: _____

Did you start or acquire this business during 2011? Yes No

Accounting Method: Cash Accrual Other (describe) _____

Method used to value inventory: Cost Lower of cost or market Other (describe) _____

| Income and Cost of Goods Sold | 2011 Amount | 2010 Amount |
|---|-------------|-------------|
| Gross receipts or sales | | |
| Returns and allowances | | |
| Other income (enclose description) | | |
| Inventory at beginning of year | | |
| Purchases less cost of items withdrawn for personal use | | |
| Cost of labor | | |
| Materials and supplies | | |
| Other costs | | |
| Inventory at end of year | | |

| Expenses | 2011 Amount | 2010 Amount | | 2011 Amount | 2010 Amount |
|---|-------------|-------------|-----------------------------------|-------------|-------------|
| Advertising | | | Taxes and licenses | | |
| Commissions and fees | | | Travel | | |
| Contract labor | | | Meals and entertainment | | |
| Depletion | | | Utilities | | |
| Employee benefits | | | Wages | | |
| Insurance (other than health) | | | Other: _____ | | |
| Mortgage interest | | | _____ | | |
| Other interest | | | _____ | | |
| Legal and professional fees | | | _____ | | |
| Office expenses | | | _____ | | |
| Pension and profit sharing | | | _____ | | |
| Rent - Vehicle, machinery | | | _____ | | |
| Rent - Other | | | _____ | | |
| Repairs and maintenance | | | _____ | | |
| Supplies | | | _____ | | |

Vehicle Information

Vehicle description _____ Date placed in service _____ Cost or basis _____

Business miles _____ Commuting miles _____ Other miles _____

Actual expenses such as gas, oil, repairs, etc _____ Parking fees and tolls _____

Sales, Purchases, and Disposition of Assets in 2011
(New clients, enclose detailed listing of all depreciable assets.)

| Asset description | Date acquired | Purchase price | Date sold | Sales Price |
|-------------------|---------------|----------------|-----------|-------------|
| | | | | |
| | | | | |

Business Use of Home

Area used exclusively for business _____ Total area of home _____

Was the home used as a day care facility? Yes No Date home placed in service _____

Casualty losses _____ Insurance _____ FMV of home _____

Mortgage interest _____ Repairs and maintenance _____ Value of land _____

Real estate taxes paid _____ Utilities and other expenses _____

RENTAL AND ROYALTY INCOME AND EXPENSES

Indicate the owner of this property: Taxpayer Spouse Joint

Description of property _____
 Location of property _____

Did you or your family use this property during the tax year for personal purposes for more than the greater of: (a) 14 days, or (b) 10% of the total days rented at fair market value? Yes No

Did you meet the Active Participation requirements for this property?
 (To meet these requirements, you must have participated in making management decisions or arranged for others to provide services in a significant and bona fide sense. Such management decisions include approving new tenants, deciding on rental terms, approving repair expenditures, or other similar decisions) Yes No

Was this property fully disposed of during 2011? Yes No

| Income | 2011 Amount | 2010 Amount |
|------------------------------|-------------|-------------|
| Rents received | | |
| Royalties received | | |

| Expenses | 2011 Amount | 2010 Amount |
|---|-------------|-------------|
| Advertising | | |
| Cleaning and maintenance. | | |
| Commissions | | |
| Insurance | | |
| Legal and other professional fees | | |
| Management fees | | |
| Mortgage interest paid to banks. | | |
| Other interest. | | |
| Repairs | | |
| Supplies | | |
| Taxes | | |
| Utilities | | |
| Other _____ | | |
| _____ | | |
| _____ | | |
| _____ | | |
| _____ | | |

Vehicle Information

Vehicle description _____ Date placed in service _____ Cost or basis _____

Business miles _____ Commuting miles _____ Other miles _____

Actual expenses such as gas, oil, repairs, etc _____ Parking fees and tolls _____

Travel expenses _____

Sales, Purchases, and Disposition of Assets in 2011
 (New clients, enclose detailed listing of all depreciable assets.)

| Asset description | Date acquired | Purchase price | Date sold | Sales price |
|-------------------|---------------|----------------|-----------|-------------|
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ITEMIZED DEDUCTIONS (continued)

| | 2011 Amount | 2010 Amount |
|--|----------------|----------------|
| Casualty and Theft Losses Casualty and theft losses (enclose supporting documentation with description of the casualty, description of the property, date acquired, cost of property, insurance reimbursements, and the fair market value before and after the casualty) | | |

Miscellaneous Deductions

Unreimbursed Employee Business Expenses **T = Taxpayer S = Spouse**

Vehicle Information T or S
 Vehicle description _____ Date placed in service _____ Cost or basis _____
 Business miles _____ Commuting miles _____ Other miles _____
 Actual expenses such as gas, oil, repairs, etc _____ Parking fees and tolls _____
 Travel expenses _____

Vehicle Information T or S
 Vehicle description _____ Date placed in service _____ Cost or basis _____
 Business miles _____ Commuting miles _____ Other miles _____
 Actual expenses such as gas, oil, repairs, etc _____ Parking fees and tolls _____
 Travel expenses _____

Sales, Purchases, and Disposition of Assets in 2011

(New clients, enclose detailed listing of all depreciable assets.)

| T S | Asset description | Date acquired | Purchase price | Date sold | Sales price |
|-----|-------------------|---------------|----------------|-----------|-------------|
| | | | | | |
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Business Use of Home T or S

Area used exclusively for business _____ Total area of home _____ Date home placed in service _____
 Casualty losses _____ Insurance _____ FMV of home _____
 Mortgage interest _____ Repairs and maintenance _____ Value of land _____
 Real estate taxes paid _____ Utilities and other expenses _____

| | 2011 Amount | 2010 Amount |
|---|----------------|----------------|
| Unreimbursed employee business expenses (such as union dues, small tools, travel, etc) | | |
| Tax preparation fees | | |
| Other miscellaneous expenses (such items include safe deposit box rental, certain appraisal fees, expenses related to investment income, etc...enclose supporting documentation) | | |
| Other Miscellaneous Deductions Other miscellaneous deductions (such items include gambling losses, estate tax deduction, amortization of bond premium, etc... enclose supporting documentation) | | |

AA A

CHILD AND DEPENDENT CARE EXPENSES (Enter expenses paid for each dependent in Dependent's section)

| Care provider name | Address | SSN or EIN | Amount paid during 2011 |
|--------------------|---------|------------|-------------------------|
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HIGHER EDUCATION EXPENSES (Please enclose all copies of 2011 Form 1098-T)

| Student name | Educational Institution | Fr | So | Jr | Sr | Oth | Tuition and Fees |
|--------------|-------------------------|----|----|----|----|-----|------------------|
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FEDERAL AND STATE ESTIMATED TAX PAYMENTS

| Federal estimated payments | Date paid | Amount paid |
|-------------------------------|-----------|-------------|
| Applied from 2010 overpayment | | |
| 1st Quarter payment | | |
| 2nd Quarter payment | | |
| 3rd Quarter payment | | |
| 4th Quarter payment | | |

| State: | | Date paid | Amount paid | Date paid | Amount paid | Date paid | Amount paid |
|-------------------------------|--|-----------|-------------|-----------|-------------|-----------|-------------|
| State estimated payments | | | | | | | |
| Applied from 2010 overpayment | | | | | | | |
| 1st Quarter payment | | | | | | | |
| 2nd Quarter payment | | | | | | | |
| 3rd Quarter payment | | | | | | | |
| 4th Quarter payment | | | | | | | |