

TAX ORGANIZER

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HOUGH & CO., P.A., C.P.A.s
P.O. BOX 1806
VENICE, FL 34284-1806

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I (We) have submitted this information for the sole purpose of preparing my (our) tax return(s). Each item can be substantiated by receipts, canceled checks, or other documents. This information is true, correct, and complete to the best of my (our) knowledge. I (We) understand and agree to the terms of the Engagement Letter attached hereto.

Taxpayer Signature

Date

Spouse Signature

Date

Home Email Address:

Business Email Address:

Home Phone:

Fax Number:

Taxpayer's Business Phone:

Spouse's Business Phone:



RE: Engagement Letter for Preparation of Individual Income Tax Return:

Dear Client:

We appreciate the opportunity to work with you. To minimize the possibility of a misunderstanding between us, we are setting forth pertinent information about the services we will perform for you.

We will prepare your ____ (**please complete**) federal and state (if necessary) individual income tax returns from information you furnish us and we may process them with an outside computer service. We will not audit or otherwise verify the data you submit, although we may ask you to clarify some of the information. We will furnish you with questionnaires to help you gather and organize the necessary information for us, in order to keep our fee to a minimum.

We must receive all information to prepare your return by March 25th to ensure that your return will be completed by April 15th. If we have not received all of your information by March 25th and your return is not completed by April 15th, you may be subject to late filing or late payment penalties.

The Florida Department of Revenue's Intangible Personal Property Tax has been discontinued, therefore you do not have to provide us with that information.

It is your responsibility to maintain, in your records, the documentation necessary to support the data used in preparing your tax returns, including but not limited to the auto, travel, entertainment, and related expenses and the required documents to support charitable contributions. If you have any questions as to the type of records required, please ask us for advice in that regard. It is also your responsibility to carefully examine and approve your completed tax returns before signing and mailing them to the tax authorities. We are not responsible for the disallowance of doubtful deductions or inadequately supported documentation, nor for resulting taxes, penalties and interest.

For tax years beginning in 2000, the IRS has provided that an individual taxpayer and his or her spouse, if applicable, may authorize the IRS to discuss the taxpayer's tax return with the CPA who signed the taxpayer's return as the return preparer. The authorization is granted by checking the "yes" box in the signature area of the tax return. By checking the "yes" box, you are granting the IRS permission to contact our firm with questions that may arise during the processing of your return. You would also be granting our firm the permission to (1) provide the IRS with any information that may be missing from your return, (2) call the IRS to inquire on the processing of your return or on the status of your refund, and (3) respond to any IRS notices that you have provided to our firm relating to mathematical errors, offsets, and return preparation. Please note that our firm will not receive separate copies of IRS notices; therefore, you must provide our firm with copies of any notices you receive from the IRS. Once elected, the authorization cannot be revoked. The authorization is valid for one year after the due date for filing the tax return. I hereby *grant/do not grant* (**circle one**) limited authorization for your firm to contact the IRS on our/my behalf as discussed in the above letter. If you fail to indicate a response, it is our firm's policy to mark the box that does grant authorization.

RE: Engagement Letter for Preparation of Individual Income Tax Return:

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We are responsible for preparing only the returns listed above. Our fee does not include responding to inquiries or examination by taxing authorities. However, we are available to represent you and our fees for such services are at our standard rates and would be covered under a separate engagement letter.

We will use our judgment to resolve questions in your favor where a tax law is unclear if there is a reasonable justification for doing so. Whenever we are aware that a possibly applicable tax law is unclear or that there are conflicting interpretations of the law by authorities (e.g., tax agencies and courts), we will explain the possible positions that may be taken on your return. We will follow whatever position you request, so long as it is consistent with the codes and regulations and interpretations that have been promulgated. If the IRS should later contest the position taken, there may be an assessment of additional tax plus interest and penalties. We assume no liability for any such additional penalties or assessments.

It is our firm's policy to retain copies of your tax returns for seven years, after which they will be destroyed.

Please see our Privacy Policy which is posted on our website; www.houghcpa.com, this policy may change from time to time.

We will ask both of you to approve a draft copy of your return before electronic transmission to the Internal Revenue Service.

Fees for our services will be at our standard rates plus computer charges and out-of-pocket expenses. Payment for service is due when rendered and interim billings may be submitted as work progresses and expenses are incurred. We reserve the right to stop work on any account that is 30 days past due, in accordance with our firm's stated collection policy. A service charge of 1 1/2% per month is applied to all past due accounts. Further details on our fee policy is available upon request.

If any dispute arises among the parties, they agree to try first in good faith to settle the dispute by mediation administered by the American Arbitration Association (AAA) under its Rules for Professional Accounting and Related Services Disputes. All unresolved disputes shall then be decided by final and binding arbitration in accordance with the Rules for Professional Accounting and Related Services Disputes of the AAA. Fees charged by any mediators, arbitrators, or the AAA shall be shared equally by all parties. **IN AGREEING TO ARBITRATION, WE BOTH ACKNOWLEDGE THAT IN THE EVENT OF A DISPUTE EACH OF US IS GIVING UP THE RIGHT TO HAVE THE DISPUTE DECIDED IN A COURT OF LAW BEFORE A JUDGE OR JURY AND INSTEAD WE ARE ACCEPTING THE USE OF ARBITRATION FOR RESOLUTION.**

We are pleased to have you as a client and look forward to a long and mutually satisfying relationship.

If the foregoing fairly sets forth your understanding, please sign and date in the space indicated on the front page of this Tax Organizer.

LIFE EVENTS CHECK LIST

Change is a constant part of every life. In order to determine how Hough & Company may best serve you, please complete the form below and return it to us.

Common Life Events:

Check events that occurred in your life during the past year:

- | | | |
|---|--|---|
| <input type="checkbox"/> New child or grandchild | <input type="checkbox"/> Change in marital status | <input type="checkbox"/> Death of family member |
| <input type="checkbox"/> New job or promotion | <input type="checkbox"/> Change in estate plan | <input type="checkbox"/> New investments or insurance |
| <input type="checkbox"/> Receipt of an inheritance | <input type="checkbox"/> Sale or purchase of home | <input type="checkbox"/> Retirement |
| <input type="checkbox"/> Major investment gain/loss | <input type="checkbox"/> Start/purchase a business | <input type="checkbox"/> Gain/loss business partner |
| <input type="checkbox"/> Health concerns | <input type="checkbox"/> Sold or acquired assets | <input type="checkbox"/> Other _____ |

Areas of Interest or Concern:

Check the topics that are of concern which you would like to discuss with us, or about which you would like to be contacted:

- | | | |
|--|--|--|
| <input type="checkbox"/> Retirement planning | <input type="checkbox"/> Education funding | <input type="checkbox"/> Investment review |
| <input type="checkbox"/> Estate planning | <input type="checkbox"/> Income tax planning | <input type="checkbox"/> Survivor benefit planning |
| <input type="checkbox"/> Major asset purchase/lease | <input type="checkbox"/> Eldercare planning | <input type="checkbox"/> Health/LTC planning |
| <input type="checkbox"/> Business/executive benefits | <input type="checkbox"/> Business continuation | <input type="checkbox"/> Charitable giving |
| <input type="checkbox"/> Pers. property/liability ins. | <input type="checkbox"/> Disability income | <input type="checkbox"/> Other _____ |

Additional Comments and Notes:

Contacting You:

Telephone: _____

Best time to call: _____

- Please contact me as soon as possible

HOUGH 
& COMPANY, P.A.
CERTIFIED PUBLIC ACCOUNTANTS

Each of us has certain life objectives.
Hough & Company, P.A., C.P.A.s offers a broad range of financial and related services.
Help us to more fully serve your tax and financial needs by sharing the following information.

Personal Objectives						
Please indicate the relative importance of each of the following personal objectives to you and your spouse.						
	<u>YOU</u>			<u>SPOUSE</u>		
<u>Objective</u>	<u>Very</u>	<u>Somewhat</u>	<u>Not</u>	<u>Very</u>	<u>Somewhat</u>	<u>Not</u>
Saving regularly						
Making a major purchase (e.g., second home, car)						
Taking a dream vacation						
Minimizing personal income taxes						
Developing or revising your investment strategy						
Investing for a comfortable retirement income						
Providing for your children's education						
Providing for your grandchildren's education						
Making gifts to relatives						
Making gifts to charity						
Minimizing estate tax						
Determining how your estate assets will be distributed						
Avoiding probate costs						
Minimizing the burden of health care costs						
Providing for your family in the event of your or your spouse's death						
Providing for your family in the event of your or your spouse's disability						
Changing or modifying career						
Assistance in planning, coordinating and monitoring family financial and healthcare needs						
Other						
Financial Planning Goals						

From the above, please list the most important.						
	<u>YOU</u>			<u>SPOUSE</u>		
<u>Goal</u>	<u>Very</u>	<u>Somewhat</u>	<u>Very</u>	<u>Somewhat</u>		
a.						
b.						
c.						
d.						

2012	1040	US	Client Information	1
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Hough & Company, PA, CPAs
 248 S Nokomis Ave PO Box 1806
 Venice, FL 34285
 Telephone number: 941-488-7768
 Fax number: 941-484-3975
 E-mail address: cpa@houghcpa.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	
	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	

Daytime Phone

- 1 = Work
- 2 = Home
- 3 = Mobile

2012	1040	US	Dependents	2
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Please add, change or delete information for 2012.

DEPENDENTS

	Dependent	Dependent	
First name.....			<p style="text-align:center;">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 style="text-align:center;">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	<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.....			

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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

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?

2012	1040	US	Miscellaneous Questions (continued)
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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

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? |

2012	1040	US	Miscellaneous Questions
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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"/> | 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? |
| <input type="checkbox"/> | <input type="checkbox"/> | Were there any changes in dependents? |
| <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 receive any disability income? |
| <input type="checkbox"/> | <input type="checkbox"/> | Did you buy or sell any stocks, bonds or other investment property? |
| <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 receive a distribution from or make a contribution to a retirement plan (401(k), IRA, etc.)? |
| <input type="checkbox"/> | <input type="checkbox"/> | Did you transfer or rollover any amount from one retirement plan to another? |
| <input type="checkbox"/> | <input type="checkbox"/> | Did you convert part or all of your traditional/SEP/SIMPLE IRA to a Roth IRA? |
| <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? |
| <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 use your car on the job (other than to and from work)? |
| <input type="checkbox"/> | <input type="checkbox"/> | Do you want to electronically file your tax return? |
| <input type="checkbox"/> | <input type="checkbox"/> | May the IRS discuss your tax return with your preparer? |
| <input type="checkbox"/> | <input type="checkbox"/> | Was your home rented out or used for business? |
| <input type="checkbox"/> | <input type="checkbox"/> | Were you notified or audited by either the IRS or the State taxing agency? |

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
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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)	

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									

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	TS	2011 Amount
Total gambling losses			
Winnings not reported on Form W-2G			

10, 13.1, 13.2

2012	1040	US	Miscellaneous Income	14.1
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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 Amount		2011 Amount	
	Taxpayer	Spouse	Taxpayer	Spouse
Social security benefits (SSA-1099, box 5).....				
Medicare premiums paid (SSA-1099)				
Tier 1 RR retirement benefits (RRB-1099, box 5) ..				
1=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				
Income from rental of personal property				
Income subject to S/E tax:				

Other income (1099-MISC, box 3)				

TAX WITHHELD (not entered elsewhere)

Federal income tax withheld				
State income tax withheld.....				
Local income tax withheld.....				