TAX ORGANIZER

Enclosed is your Tax Organizer for tax year 2011.

Your Organizer contains several sections that include common expenses and deductions that many taxpayers overlook. Please review these sections carefully. Depending upon your tax bracket, you may save as much as $35 for each $100 in deductible expenses you find in your 2011 records.
.
To complete the Organizer, enter all relevant information in the designated areas on each page. Please add any notes or questions that will help us prepare a complete and accurate return for you and to plan with you how to manage your tax situation in future years.

If you answer 'Yes' to any of the General Business and Investment questions, please provide detailed information with your answer.

When you are ready, please send your Organizer and any of the following that apply to your tax situation:

- Last year's tax return (if not in our possession)
- Original Form(s) W-2
- Schedule(s) K-1 from partnerships, S-corporations, estates or trusts
- Information about contributions to a pension or other retirement plan if this is the first year you received income from the plan
- Form(s) 1099 or statements reporting dividend, interest, retirement or other income
- Broker statements providing details of capital gains transactions
- Form(s) 1098 and copies of real estate tax bills, etc.
- Legal documents pertaining to the sale or purchase of real property

Please review the enclosed Tax Preparation Services Agrteement and return a signed copy to us. We can't begin work without it.

If you have any questions please give us a call.

Sincerely,

Tax Hotline
2340 S. Arlington Heights Rd., Suite 310
Arlington Heights, IL 60005
Telephone: 800-924-3091
Facsimile: 847-718-9584
Email: hotline.tax@gmail.com

Name ______________________ SSN ______________

Questions

If any of the following items apply to you or your spouse, please "X" the appropriate box and if possible, include details.

Basic Information

Yes	No		
☐	☐	**1**	Did your marital status change since last year?
☐	☐	**2**	Are there any changes in your dependents from last year?
☐	☐	**3**	Did you have any children under 19 (or 24 if a full time student) who received more than $950 in investment income?
☐	☐	**4**	Are all your dependents either US residents or citizens?
☐	☐	**5**	Did you provide over half of the support for someone you aren't claiming as a dependent?
☐	☐	**6**	Are you being claimed (or are eligible to be claimed) as a dependent on anyone else's return?
☐	☐	**7**	Were either you or your spouse in the military or National Guard?
☐	☐	**8**	Did you purchase or sell your principal residence?
☐	☐	**9**	Have you been notified by the IRS of changes to a prior year's return, or received any other tax correspondence?
☐	☐	**10**	Were there any changes to a prior year's income, deductions, or credits?
☐	☐	**11**	Did you make gifts of more than $13,000 to any one person?
☐	☐	**12**	Did you file Form 8839, Adoption Credit, in a previous year or incur adoption expenses in 2011?
☐	☐	**13**	Did you claim a First-time Homebuyer Credit for a home purchased in 2008?
☐	☐	**14**	Did you have a disposition or change in use of your main home for which you claimed the First-time Homebuyer Credit in 2008, 2009 or 2010?
☐	☐	**15**	Do you want to e-file your return?
		16	If you are due a refund, how do you want to receive it?

☐ Check sent to you in the mail ☐ Western Union® Reloadable MoneyWise™ Prepaid MasterCard®

☐ Apply to next year's estimates ☐ Other quick refund via a bank product

☐ Direct deposit (please provide a voided blank check) Type of account: ☐ Checking ☐ Savings

If you owe taxes, how do you want to pay them?

☐ Paper check sent with my return ☐ Credit card

☐ Direct debit from my bank account (please provide a voided blank check)

Type of account: ☐ Checking ☐ Savings

Income

Yes	No		
☐	☐	**17**	Did you have an interest in or signature authority over a financial account in a foreign country?
☐	☐	**18**	Were you the grantor of or transferor to a foreign trust?
☐	☐	**19**	Did you receive income from a foreign source or pay taxes to a foreign government?
☐	☐	**20**	Did you barter your services for goods or services from someone else?
☐	☐	**21**	Did you receive any tax-exempt income, such as interest or dividends from municipal bonds or a mutual fund account?
☐	☐	**22**	Did you make a loan to someone at an interest rate below market rate?
☐	☐	**23**	Did you receive, or expect to receive, a Schedule K-1 (or substitute K-1) from a trust, estate, partnership, or S corp?
☐	☐	**24**	Did you cash in any U.S. savings bonds?
☐	☐	**25**	Did you own an interest in a Real Estate Mortgage Investment Conduit (REMIC)?
☐	☐	**26**	Did you itemize your deductions in a previous year and receive a state or local refund, or a refund of any other deduction you itemized, in 2011? (If yes, attach Form 1099-G)
☐	☐	**27**	Did you receive disability income?
☐	☐	**28**	Do you have gambling winnings? (If yes, be sure to include in gambling expenses)
☐	☐	**29**	Did you receive any unemployment benefits?
☐	☐	**30**	During 2011, did you receive payments from a Long-Term Care insurance contract?
☐	☐	**31**	Did you receive employer-provided adoption benefits for a previous year?
☐	☐	**32**	Did you receive any distributions from a retirement plan? (If Yes, attach all 1099-Rs)
☐	☐	**33**	Did you "rollover" a retirement plan distribution into another plan?
☐	☐	**34**	Did you receive Social Security benefits?

Name ____________________ SSN ____________________

Questions (Cont.)

If any of the following items apply to you or your spouse, please "X" the appropriate box and if possible, include details.

Yes	No		
☐	☐	**35**	Did you convert a traditional IRA to a Roth IRA?
☐	☐	**36**	Did you exchange any securities or investments for something other than cash?
☐	☐	**37**	Do you have any short sales, commodity sales, or straddles?
☐	☐	**38**	Did you receive Form 2439?
☐	☐	**39**	Did you buy or sell any bonds?
☐	☐	**40**	Did you receive stock from a stock bonus plan with your employer?
☐	☐	**41**	Did you sell any other personal assets at a gain?
☐	☐	**42**	Did you sell any real estate (other than your home) during the year?
☐	☐	**43**	Did you sell any assets using the installment method?
☐	☐	**44**	Did you receive proceeds from a prior year installment sale?
☐	☐	**45**	Did you purchase a rental property?
☐	☐	**46**	Did you exchange any property for other property?
☐	☐	**47**	Did you receive any income not reported in this Organizer?

Business and Rental Property Income

Yes	No		
☐	☐	**48**	If you own rental property, do you qualify as a Real Estate Professional?
☐	☐	**49**	Did you start or acquire a new business?
☐	☐	**50**	Did you sell any part of an existing business, or sell business assets?
☐	☐	**51**	Did you cease operating any business or rental property?
☐	☐	**52**	Did you remove any of your business assets for personal use?

Business and Rental Property Deductions

Yes	No		
☐	☐	**53**	Did you use part of your home for business purposes?
☐	☐	**54**	Did you make any contributions to a Keogh or a self-employed SEP plan for 2011?
☐	☐	**55**	Do you pay for any health or long term care insurance through your business?
☐	☐	**56**	If you or your spouse are self-employed, are either of you covered under an employer's health plan?
☐	☐	**57**	Did you purchase any furniture or equipment for your business?

Other Deductions

Yes	No		
☐	☐	**58**	Did you make any contributions, or plan to make contributions, to a traditional or Roth IRA for 2011?
☐	☐	**59**	Did you make any contributions to HSA (Health Savings Account) in 2011?
☐	☐	**60**	Did you use your car on the job (other than to and from work)?
☐	☐	**61**	Did you work out of town for part of the year?
☐	☐	**62**	Did you incur any travel and entertainment expenses for business purposes?
☐	☐	**63**	Did you pay expenses for the care of your child or other dependent so you could work?
☐	☐	**64**	Did you lose property or have damage to a property due to a casualty, theft, or condemnation?
☐	☐	**65**	Did any security become worthless during 2011?
☐	☐	**66**	Did any debts become uncollectible during 2011?
☐	☐	**67**	Did you purchase a 'clean fuel' or electric hybrid vehicle in 2011?
☐	☐	**68**	Did you contribute less than an entire interest in any property to charity?
☐	☐	**69**	Did you refinance a mortgage or take out a home equity loan during 2011?
☐	☐	**70**	Did you incur moving expenses during the year due to a change of employment?
☐	☐	**71**	Did you pay any educational tuition or fees for you or a dependent?
☐	☐	**72**	Did you pay any student loan interest?
☐	☐	**73**	Did you make any federal or state estimated payments?
☐	☐	**74**	Did you make any energy efficient improvements to your main home in 2011?

TAX ORGANIZER

Basic Taxpayer Information

	First Name	Initial	Last Name	Suffix	Social Security No.
Taxpayer					
Spouse					

	Occupation	Date of Birth	Check if			
			Disabled	Blind	Dependent of Another	Presidential Election Contrib.
Taxpayer						
Spouse						

Street Address		Phone Res:	
City, State & Zip		Phone Work:	
E-mail Address		Cell Phone:	

School District ______________________________

Filing Status ☐ 1 - Single; 2 - Married filing joint; 3 - Married filing separate; 4 - Head of Household; 5 - Qualifying Widower

Dependent Information

	First Name	Last Name	Social Sec. No.	Relationship	Months in home	Date of Birth	Disabled or full time student
1							
2							
3							
4							
5							
6							

Wages and Salaries

	Employer Name	Wages	Federal Tax Withheld	FICA Withheld	Medicare Withheld	State Tax Withheld	Local Tax Withheld
1							
2							
3							
4							
5							
6							

Pensions and IRAs

	Payer's Name	Gross Distribution	Taxable Distribution	Federal Tax Withheld	IRA
1					
2					
3					
4					

Attestation and Signature:

To the best of my knowledge the enclosed information is correct and includes all income, deductions, and other information necessary for the preparation of this year's income tax returns for which I have adequate records.

Sign ______________________________ Date ______________

here ______________________________ Date ______________

Interest Income

Please provide copies of all Form 1099-INT or other statements reporting interest income.

* F/S/J - enter ownership (F)iler, (S)pouse, or (J)oint.

	*F/S/J	Payer	Taxable Interest Income Prior Year Amount	Taxable Interest Income Current Year Amount	Tax Exempt Interest Prior Year Amount	Tax Exempt Interest Current Year Amount	Specified Priv Act Interest Prior Year Amount	Specified Priv Act Interest Current Year Amount
1								
2								
3								
4								
5								
6								
7								
8								
9								
10								
11								
12								

Dividend Income

Please provide copies of all Form 1099-DIV or other statements reporting dividend income.

* F/S/J - enter ownership (F)iler, (S)pouse, or (J)oint.

	*F/S/J	Payer	Ordinary Dividends Prior Year Amount	Ordinary Dividends Current Year Amount	Qualified Dividends Prior Year Amount	Qualified Dividends Current Year Amount	Capital Gains Prior Year Amount	Capital Gains Current Year Amount
1								
2								
3								
4								
5								
6								
7								
8								
9								
10								
11								
12								

Income or Loss from Partnerships, S Corporations, and Trusts

	Name	Income	Loss	Other Expenses	Passive (Yes / No)	*P/S/T
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
13						
14						
15						
16						
17						
18						
19						
20						

*P/S/T - enter entity type (P)artnership, (S) Corporation, (T)rust

Gains or Losses from Sales of Stocks, Securities or Other Assets

	Kind of Property and Description	Date acquired	Date sold	Sales Price	Cost or other basis
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					
16					
17					
18					
19					
20					

Other Income

		Prior Year Amount	Current Year Taxpayer	Current Year Spouse
1	Taxable refunds of state and local income taxes			
2	Alimony received			
3	Business income or (loss) - Schedule C			
4	Other gains or (losses) - Form 4797			
5	Rents and royalties - Schedule E pg 1			
6	Farm income or (loss) - Schedule F			
7	Unemployment compensation			
8	Total social security benefits			
9	Tips			
10	Child care taxable benefits			
11	Prizes and awards			
12	Scholarships and fellowships			
13	Other income not provided for in this organizer			
14				
15				
16				

Adjustments to Income

		Prior Year Amount	Current Year Taxpayer	Current Year Spouse
1	Educator expenses			
2	Business expenses of reservists, performing artists and fee-based gov officials			
3	Health savings account deduction			
4	Moving expenses			
5	Self-employed SEP, SIMPLE, and qualified plans			
6	Penalty on early withdrawal of savings			
7	Alimony paid			
8	Your IRA contribution			
9	Spouse's IRA contribution			
10	Student loan interest			
11	Tuition and fees			

Itemized Deductions

		Prior Year Amount	Current Year Amount
1a	Medical and dental expenses (other than long-term care premiums)		
1b	Long-term care premiums Taxpayer Spouse		
2	Other state and local taxes paid not reported elsewhere in this Organizer		
3	State and local income taxes paid		
4	Real estate taxes		
5	Personal property taxes		
6	Other taxes		
7	Home mortgage interest and points reported on Form 1098		
8	Home mortgage interest not reported on Form 1098 Name: Address: SSN:		
9	Home mortgage points not reported on Form 1098		
10	Qualified mortgage insurance premiums		
11	Investment interest paid		
12	Gifts to charity by cash or check		
13	Gifts to charity other than by cash or check		
14	Mileage driven to charitable activities		
15	Casualty and theft losses - Form 4684		
16	Unreimbursed employee expenses		
	Travel expenses (exclude meals)		
	Meals and entertainment		
	Parking and tolls (enter other vehicle information on Page 7)		
	Telephone used for employer's business (allocate cost)		
	Professional organization or union dues		
	Educational expenses required to maintain your job		
	Office in home required by employer		
	Tools and equipment		
	Uniform and protective clothing		
	Professional journals subscriptions		
	Job seeking costs		
	Other		
17	Tax preparation fees		
18	Other expenses		
	Investment expenses		
	Safe deposit box rental		
	Other		
19	Other miscellaneous deductions		

Education Expenses

	Student's Name	Type of Expense	Year of School	Amount
1				
2				
3				
4				
5				
6				

Child or Dependent Care Expenses

	Persons or Organizations Who Provided the Care		Social Security or ID Number	Amount Paid
	Name	Address		
1				
2				
3				
4				

Federal, State and Local or Other Estimated Taxes Paid

Federal Estimates

	Enter Payment Information	Filer and/or Joint Payments		Spouse Only Payments	
		Date Paid	Amount	Date Paid	Amount
1	Overpayment from last year				
2	First quarter payment				
3	Second quarter payment				
4	Third quarter payment				
5	Fourth quarter payment				
6					
7					

State Estimates

Enter two-letter state abbreviation **State** ________ **State** ________ **State** ________ **State** ________

	Enter Payment Information	Date Paid	Amount	Date Paid	Amount	Date Paid	Amount	Date Paid	Amount
1	Overpayment from last year								
2	First quarter payment								
3	Second quarter payment								
4	Third quarter payment								
5	Fourth quarter payment								
6									
7									
8									

Local or Other Estimates

Enter description **Desc 1** __________ **Desc 2** __________ **Desc 3** __________ **Desc 4** __________

	Enter Payment Information	Date Paid	Amount	Date Paid	Amount	Date Paid	Amount	Date Paid	Amount
1	Overpayment from last year								
2	First quarter payment								
3	Second quarter payment								
4	Third quarter payment								
5	Fourth quarter payment								
6									
7									
8									

Vehicle Information and Expenses

		Vehicle One	Vehicle Two
1	Description of vehicle		
2	Is the vehicle used in a business or by an employee?		
3	Cost (including sales tax)		
4	Date placed in service		
5	Business miles:		
	January 1 to June 30		
	July 1 to December 31		
6	Commuting miles (daily commuting miles times the number of trips to work)		
7	Other personal use miles		
8	Total miles driven		
9	Gas and oil expenses		
10	Repairs and maintenance		
11	Auto insurance		
12	Registration, licenses, and fees		
13	Other auto expenses (identify)		
14	Auto rentals		

Auto Mileage Documentation

		Yes	No
1	Is another car available for personal use?		
2	Do you have evidence to support your mileage information reported above?		
3	If "Yes," is the evidence written in a log or other place?		

Business Use of Home

	Yes	No
Do you use any part of your home regularly and exclusively for business?		

Total area of home (in square feet)	
Total area used for business	
House Insurance	
Repairs and Maintenance	
Utilities	
Rent	
Property Taxes	
Mortgage Interest	
Home Equity Loan Interest	
Internet	
Phone	

Comments

Name ______________________ SSN ______________

Seller Financed Mortgage Interest

*F/S/J				Current Year Amount	Prior Year Amount
	1	Name ________ Address ________	SSN/EIN ________	1	
	2	Name ________ Address ________	SSN/EIN ________	2	
	3	Name ________ Address ________	SSN/EIN ________	3	
	4	Name ________ Address ________	SSN/EIN ________	4	
	5	Name ________ Address ________	SSN/EIN ________	5	
	6	Name ________ Address ________	SSN/EIN ________	6	
	7	Name ________ Address ________	SSN/EIN ________	7	
	8	Name ________ Address ________	SSN/EIN ________	8	
	9	Name ________ Address ________	SSN/EIN ________	9	
	10	Name ________ Address ________	SSN/EIN ________	10	
	11	Name ________ Address ________	SSN/EIN ________	11	
	12	Name ________ Address ________	SSN/EIN ________	12	
	13	Name ________ Address ________	SSN/EIN ________	13	
	14	Name ________ Address ________	SSN/EIN ________	14	
	15	Name ________ Address ________	SSN/EIN ________	15	
	16	Name ________ Address ________	SSN/EIN ________	16	
	17	Name ________ Address ________	SSN/EIN ________	17	
	18	Name ________ Address ________	SSN/EIN ________	18	
	19	Name ________ Address ________	SSN/EIN ________	19	
	20	Name ________ Address ________	SSN/EIN ________	20	
	21	Name ________ Address ________	SSN/EIN ________	21	
	22	Name ________ Address ________	SSN/EIN ________	22	
	23	Name ________ Address ________	SSN/EIN ________	23	
	24	Name ________ Address ________	SSN/EIN ________	24	

Name ________________________ SSN ________________

Self-Employed Business Income and Expenses (Schedule C)

Enter "X" in one box: ☐ Filer ☐ Spouse

General Information

1 Employer Identification Number ________ (do not enter Social Security Number)
2 Principal business or profession ________
3 Business name ________
4 Business address ________
5 City ________ State ____ Zip ____

General Check Boxes (Enter "X" where applicable)

6 Accounting Method ☐ Cash ☐ Accrual ☐ Other - (Specify) ________
7 Did you "materially participate" in this business? ☐ Yes ☐ No
8 Check ('X') if you started or acquired this business in 2011. ☐
9 Did you make any payments in 2011 that would require you to file Form(s) 1099? ☐ Yes ☐ No

Business Income

* Report statutory income as W-2 income.

			Current Year Amount	Prior Year Amount
10	Income reported on 1099 MISC	10		
11	Gross merchant card and third party network receipts and sales	11		
	Gross receipts or sales not reported on Form 1099 or Form W-2			
12		12		
13		13		
14		14		
15		15		
16	Returns and allowances	16		
17	Other income	17		

Inventory (Enter "X" where applicable)

18 Method(s) used to value closing inventory ☐ Cost ☐ Lower of cost or market ☐ Other
19 Any change in determining quantities, costs, or valuations between opening and closing inventory? ☐ Yes ☐ No

			Current Year Amount	Prior Year Amount
20	Inventory at the beginning of year	20		
21	Purchases less cost of items withdrawn for personal use	21		
22	Cost of labor	22		
23	Materials and supplies	23		
24	Other Costs	24		
25	Inventory at end of year	25		

Assets Placed in Service This Year

	Description:		Date Placed In Service	Purchase Amount
A		A		
B		B		
C		C		
D		D		
E		E		
F		F		
G		G		

Name ______________________ SSN ______________

Business ______________________

Self-Employed Business Expenses Cont. (Schedule C)

Expenses

			Current Year Amount	Prior Year Amount
41	Advertising	**41**		
42	Contract labor	**42**		
43	Commissions and fees	**43**		
44	Depletion	**44**		
45	Employee benefit programs (other than on line 51)	**45**		
46	Insurance (other than health)	**46**		
	Interest:			
47	Mortgage (paid to banks, etc.)	**47**		
48	Other	**48**		
49	Legal and professional services	**49**		
50	Office expense	**50**		
51	Pension and profit-sharing plans	**51**		
	Rent or Lease:			
52	Machinery rental or lease	**52**		
53	Equipment rental or lease	**53**		
54		**54**		
55		**55**		
56		**56**		
	Other business property rental or lease			
57		**57**		
58		**58**		
59		**59**		
60	Repairs and maintenance	**60**		
61	Supplies (not included in inventory cost of goods sold)	**61**		
62	Taxes and licenses	**62**		
	Travel, Meals, and Entertainment:			
	Travel			
63		**63**		
64		**64**		
65		**65**		
66		**66**		
	Meals and entertainment			
67	Enter "X" in the box if subject to DOT hours of service limits	**67**	☐	☐
68		**68**		
69		**69**		
70		**70**		
71		**71**		
72	Utilities	**72**		
73	Wages	**73**		
	Other Expenses			
74		**74**		
75		**75**		
76		**76**		
77		**77**		
78		**78**		
79		**79**		
80		**80**		
81		**81**		
82		**82**		

Name ______________________________ SSN ____________________

Business ______________________________

Vehicle Information (Schedule C)

		Vehicle 1 -		Vehicle 2 -	
		Current Year Amount	Prior Year Amount	Current Year Amount	Prior Year Amount
1	Date vehicle was placed in service . . 1				
2	Cost of vehicle 2				
3	Total miles driven for the year 3				
4	Business miles driven during the year . 4				
	January 1 to June 30				
	July 1 to December 31				
5	Commuting miles included on line 3 . . 5				
6	Parking fees and tolls 6				
7	Vehicle Interest 7				
8	Vehicle Personal Property tax 8				
	Actual Expenses				
9	Gasoline, oil and repairs 9				
10	Vehicle Insurance 10				
11	Vehicle registration fees 11				
12	Vehicle lease or rental 12				
13	------------------------------------ 13				

		Vehicle 3 -		Vehicle 4 -	
		Current Year Amount	Prior Year Amount	Current Year Amount	Prior Year Amount
1	Date vehicle was placed in service . . 1				
2	Cost of vehicle 2				
3	Total miles driven for the year 3				
4	Business miles driven during the year . 4				
	January 1 to June 30				
	July 1 to December 31				
5	Commuting miles included on line 3 . . 5				
6	Parking fees and tolls 6				
7	Vehicle Interest 7				
8	Vehicle Personal Property tax 8				
	Actual Expenses				
9	Gasoline, oil and repairs 9				
10	Vehicle Insurance 10				
11	Vehicle registration fees 11				
12	Vehicle lease or rental 12				
13	------------------------------------ 13				

Name ______________________ SSN ______________

Business ______________________ Copy ________

Self-Employed Office in Home Expenses

			Current Year Amount	Prior Year Amount
Area of Home				
1	Area used regularly and exclusively for business, regularly for daycare	**1**		
2	Total area of home	**2**		
Daycare only				
3	Multiply days used for daycare during year by hours used per day	**3**		
Expenses related to entire home including business portion				
4	Casualty losses	**4**		
5	Excess mortgage interest	**5**		
6	Insurance	**6**		
7	Rent	**7**		
8	Repairs and maintenance	**8**		
9	Utilities	**9**		
10	Other expenses	**10**		
Additional expenses related to business portion only				
11	Casualty losses	**11**		
12	Excess mortgage interest	**12**		
13	Insurance	**13**		
14	Rent	**14**		
15	Repairs and maintenance	**15**		
16	Utilities	**16**		
17	Other expenses	**17**		

Name ______________________ SSN ______________

Installment Sale Income

New Sale (Only)

Note: If the property was sold this year complete the New Sale section.

	Description	Selling price including mortgages DO NOT include interest	Mortgages the buyer assumed	Cost or other basis of property	Commissions and other expenses of sale
1					
2					
3					
4					
5					
6					

	Description	Date Acquired	Date Sold	Interest	Principal
1					
2					
3					
4					
5					
6					

Prior Year Sale (Only)

Note: If the property was sold in a previous year complete the Prior Year Sale section below.

	Description	Date Acquired	Date Sold	Payments Received in 2011	
				Interest	Principal
1					
2					
3					
4					
5					
6					

	Description	Gross profit percentage	Payments received in prior years (DO NOT include interest)
1			
2			
3			
4			
5			
6			

Name ______________________ SSN ______________

Real Estate Rentals and Royalties

Kind of Property ______________________

Address ______________________

City ______________ State ________ Zip ____________

		Current Year Info	Prior Year Info
1	Owner of property (Enter Filer, Spouse, or Joint) 1		
2	Enter "X" If you actively participated? 2	☐	☐
3	Enter "X" if property was used for personal use by you or your family for more than 14 days or 10% of the total days rented? 3	☐	☐
3a	If entered ("X"), enter the number of days of personal use? 3a		
3b	If entered ("X"), enter the number of days rented? 3b		

Income

		Current Year Amounts	Prior Year Amounts
4	Royalty received 4		
5	Rent received 5		
5a	If rental real estate, enter the percent of ownership if less than 100% . . . 5a		
5b	Rental use percentage for property used partially for personal use only . . 5b		

Property Expense

		Current Year Amounts	Prior Year Amounts
6	Advertising 6		
7	Cleaning and maintenance 7		
8	Commissions 8		
9	Insurance 9		
10	Legal and other professional fees 10		
11	Management fees 11		
12 a	Qualified mortgage interest paid to banks, etc. 12a		
b	Other mortgage interest paid to banks, etc. 12b		
13	Other interest 13		
14	Repairs 14		
15	Supplies 15		
16 a	Real estate taxes 16a		
b	Other Taxes 16b		
17	Utilities 17		

Assets Placed in Service This Year

Description:		Date Placed In Service	Purchase Amount
A	______________________ A		
B	______________________ B		
C	______________________ C		
D	______________________ D		
E	______________________ E		
F	______________________ F		
G	______________________ G		

Name ____________________ SSN ____________________

Property ____________________

Other Expenses (Schedule E)

Other Expense

			Current Year	Prior Year
18		18		
19		19		
20		20		
21		21		
22		22		
23		23		
24		24		
25		25		

Travel Expenses

			Current Year	Prior Year
26		26		
27		27		
28		28		
29		29		
30		30		
31		31		
32		32		
33		33		

Meals and Entertainment Expense

			Current Year	Prior Year
34		34		
35		35		
36		36		
37		37		
38		38		
39		39		
40		40		
41		41		

Name ______________________________ SSN ______________________

Property ______________________________

Vehicle Information (Schedule E)

		Vehicle 1 -		Vehicle 2 -	
		Current Year Amount	Prior Year Amount	Current Year Amount	Prior Year Amount
1	Date vehicle was placed in service . . 1				
2	Cost of vehicle 2				
3	Total miles driven for the year 3				
4	Business miles driven during the year . 4				
	January 1 to June 30				
	July 1 to December 31				
5	Commuting miles included on line 3 . . 5				
6	Parking fees and tolls 6				
7	Vehicle Interest 7				
8	Vehicle Personal Property tax 8				
Actual Expenses					
9	Gasoline, oil and repairs 9				
10	Vehicle Insurance 10				
11	Vehicle registration fees 11				
12	Vehicle lease or rental 12				
13	------------------------------------ 13				

		Vehicle 3 -		Vehicle 4 -	
		Current Year Amount	Prior Year Amount	Current Year Amount	Prior Year Amount
1	Date vehicle was placed in service . . 1				
2	Cost of vehicle 2				
3	Total miles driven for the year 3				
4	Business miles driven during the year . 4				
	January 1 to June 30				
	July 1 to December 31				
5	Commuting miles included on line 3 . . 5				
6	Parking fees and tolls 6				
7	Vehicle Interest 7				
8	Vehicle Personal Property tax 8				
Actual Expenses					
9	Gasoline, oil and repairs 9				
10	Vehicle Insurance 10				
11	Vehicle registration fees 11				
12	Vehicle lease or rental 12				
13	------------------------------------ 13				

Name ____________________ SSN ____________________

K-1 Income

Please provide copies of all Schedule K-1s, or other statements, reporting income from partnerships, S corporations, or estates and trusts.

* F/S/J - enter ownership (F)iler, (S)pouse, or (J)oint.

*F/S/J		Entity Name	Enter "S" if K1 (1120S) Enter "P" if K1 (1065) Enter "E" if K1 (1041)		Unreimbursed Partnership Exp. Current Year
	1			1	
	2			2	
	3			3	
	4			4	
	5			5	
	6			6	
	7			7	
	8			8	
	9			9	
	10			10	
	11			11	
	12			12	
	13			13	
	14			14	
	15			15	
	16			16	
	17			17	
	18			18	
	19			19	
	20			20	
	21			21	
	22			22	
	23			23	
	24			24	
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	31			31	
	32			32	
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	35			35	
	36			36	
	37			37	
	38			38	
	39			39	
	40			40	
	41			41	
	42			42	
	43			43	
	44			44	
	45			45	
	46			46	
	47			47	
	48			48	
	49			49	
	50			50	

My tax return preparer, TaxRite, Inc., has informed me that they may be required to electronically file my 2011 individual income tax return Form 1040, 1040A, 1040EZ, 1041 or Form 990-T if they file it with the IRS on my behalf. I do not want to file my return electronically and choose to file my return on paper forms. My preparer will not file my paper return with the IRS. I will file my paper return with the IRS myself. I was not influenced by Tax Rite, Inc. or any member of their firm to sign this statement.

Taxpayer Signature: ___________________________________Date:__________

Spouse's Signature: ___________________________________Date:__________

Privacy Notice

At ***Tax Hotline****,* we place the highest importance on respecting and protecting the privacy of our customers. Our relationship with you is our most important asset. We want you to feel comfortable and confident when using our services. As tax advisors and tax preparers, we have always protected your right to privacy. Like all providers of personal financial services, we are now required by law to inform our clients of our policies regarding privacy of client information.

Types of Nonpublic Personal Information We Collect

We collect nonpublic personal information about you that is provided to us by you or obtained by us with your authorization.

Parties to Whom We Disclose Information

For current and former clients, we do not disclose any nonpublic personal information obtained in the course of our business except as required or permitted by law. Permitted disclosures include, for instance, providing information to our employees. We restrict access to nonpublic personal information about you to those employees who need to know that information to provide services to you. In all such situations, we stress the confidential nature of information being shared.

Protecting the Confidentiality and Security of Current and Former Clients' Information

We retain records relating to professional services that we provide so that we are better able to assist you with your professional needs and, in some cases, to comply with professional guidelines. In order to guard your nonpublic personal information, we maintain physical, electronic, and procedural safeguards that comply with our professional standards. Please call if you have any questions, because your privacy, our professional ethics, and the ability to provide you with quality financial services are very important to us.

Tax Preparation Services Agreement

This Tax Preparation Services Agreement (hereinafter "Agreement") is made between Tax Hotline as tax preparer and Client as named below:

WHEREAS, Tax Hotline is a qualified, experienced tax preparer that is knowledgeable about federal income taxes and is ready, willing, and able to provide tax preparation services to client according to the terms and conditions of this agreement;

WHEREAS, Client is in need of tax preparation services and wants Tax Hotline to perform such services for Client according to the terms and conditions of this Agreement:

NOW THEREFORE, the parties agree as follows:

1. Tax Hotline agrees to prepare Client's individual federal, and if applicable, state and local tax returns for calendar year 2011 based on the information provided by client. Tax Hotline shall not provide any services under this Agreement for any other year other than 2011, or for any other person other than Client unless specifically agreed to in writing.

2. Client will provide Tax Hotline with all necessary documents to evidence Client's income, expenses, deductions, credits, and purchase and sale of assets information as requested by Tax Hotline. It is Client's responsibility to maintain appropriate records to substantiate all documents and information provided to Tax Hotline and to respond to Tax Hotline inquires in a timely manner so that Tax Hotline can prepare Client's returns by the appropriate due date. Failure of Client to maintain adequate records to support a claimed deduction, expense, or credit may result in such deduction, expense, or credit being disallowed and further subject Client to the imposition of penalties and interest. Tax Hotline will not be responsible for any penalties and interest resulting from Client's failure to maintain adequate records.

3. It is Client's responsibility to review the tax returns before they are filed to determine that all income has been correctly reported and that you have substantiation for your deductions. Client is responsible for filing the returns by the due dates.

4. If Client's tax returns, as prepared by Tax Hotline, are later selected for review or audit by taxing authorities, Tax Hotline will assist Client in the Client's preparation for such review or audit. Tax Hotline or its employees will not, however, attend the review or audit.

Additional Terms and Conditions

5. Acceptance

By enrolling and/or using the Tax Hotline Services, you are agreeing, without limitation or qualification, to be bound by, and to comply with, these Terms and Conditions and any other posted guidelines or rules applicable to any Tax Hotline Service. All such guidelines and rules are hereby incorporated by reference into the Terms and Conditions.

6. Conditions and Restrictions on Use

Use of Tax Hotline Services is subject to compliance with these Terms and Conditions. You acknowledge and agree that Tax Hotline may terminate your access to the Tax Hotline or to any of its Services should you fail to comply with the Terms and Conditions or any other guidelines and rules published by Tax Hotline. Any such termination shall be in Tax Hotline's sole discretion and may occur without prior notice, or any notice. Tax Hotline further reserves the right to terminate any user's access to the Tax Hotline or to any its Services for any conduct that Tax Hotline, in its sole discretion, believes is or may be directly or indirectly harmful to other users, to Tax Hotline or its subsidiaries, affiliates, or business contractors, or to other third parties, or for any conduct that violates any local, state, federal, or foreign laws or regulations.

7. No Resale, Assignment of Sublicensing

You agree not to resell, assign, sublicense, otherwise transfer, or delegate your rights or obligations in the Tax Hotline program without prior express written authorization of Tax Hotline.

8. Authorized Users

Tax Hotline benefits are available to the individual enrolled and his/her dependents as defined by the most current IRS code.

9. Disclaimer

Tax Advice

Tax Hotline is pleased to answer your tax questions based on the information you provide. Inadequate or incorrect information provided by the member to Tax Hotline may lead to an incorrect answer for which Tax Hotline cannot be held responsible. You, the member, are responsible for providing accurate information and/or documentation to Tax Hotline.

Tax Hotline makes every effort to keep abreast of changes in tax law but is not responsible for inconsistent interpretations of the tax code by the IRS and/or tax courts regarding specific tax matters. Advice limited to personal federal taxation.

Tax Return Preparation

Tax Hotline guarantees to provide professional, accurate, error-free tax returns, taking advantage of every allowable deduction and tax credit. If Tax Hotline makes an error in the preparation of your tax return, Tax Hotline will pay penalties and interest caused by such error under the following terms and conditions:

A) Tax Hotline will reimburse you, after you pay the IRS, for the amount of the penalty and interest paid by you that you would otherwise not have been required to pay, due to either of the following three situations in connection with your membership and use of the Tax Hotline program, but only if you meet all of the conditions described in below:

1. The penalties and/or interest are assessed against you by the IRS for a tax return and are due solely to an arithmetic error made by Tax Hotline, and not to an incorrect entry of data or any other reason; or
2. The penalties and/or interest assessed against you by the IRS are due solely to incorrect written advice provided to you by Tax Hotline and your reliance on that written advice results in your payment of a penalty and/or interest to the IRS. (This excludes any verbal communication with you by telephone or otherwise in connection with these services.)
3. The penalties and/or interest are assessed against you by the IRS for a tax year return due solely to an error made by Tax Hotline in the preparation of your tax return that results in your payment of a penalty and/or interest to the IRS when Tax Hotline prepared and signed your tax return.

(B) Tax Hotline will only pay the penalties and interest described above in Section (A) above, if all of the following conditions are met:

1. The penalty or interest must *not* be due to an incorrect entry of data by you or any third party (including through any automated tax data import feature). The penalty or interest must not be due to your failure to follow instructions given to you by Tax Hotline, your failure to correct and resolve errors identified by Tax Hotline, a claim by you for an improper or unsupportable deduction, a failure to report income, your failure to provide all necessary information to Tax Hotline, or any other reason outside the control of Tax Hotline.
2. You notified Tax Hotline at Attn: 2340 South Arlington Heights Rd., Suite 310, Arlington Heights, Illinois, 60005, within 30 days after you learned of the mistake or received a notice from any tax authority regarding your tax return. In addition, you sent Tax Hotline complete documentation of the penalty and interest including all correspondence to and from each tax authority, a copy of your tax returns as filed with each tax authority, proof that you paid the penalty and/or interest, and any other relevant information Tax Hotline reasonably requests.
3. You took any action reasonably requested by Tax Hotline, including filing an amended tax return if necessary, to limit any further penalties and interest from accruing.
4. The penalty and interest was for a return filed before its due date, or if the filing date is properly extended, before its extended due date. If you filed your return late, Tax Hotline will not pay interest from the due date of the return to the date you actually filed your return.
5. You have complied with all terms and conditions of this Agreement, and you have not intentionally provided any incorrect or false information in connection with your tax return.
6. You were a member in good standing with Tax Hotline or one of its affiliated programs at the time the return was prepared, and you have paid the applicable

fee, if any, to Tax Hotline for preparation of your tax return(s) at the time of the initial filing or printing of your tax return.

7. The penalty or interest must not be based upon incorrect advice you receive from Tax Hotline that you knew was incorrect at the time you filed your return.

In no event will Tax Hotline reimburse you for more than an aggregate of the interest and penalties owed to the IRS based upon all tax returns you filed for the tax year. THIS STATES TAX HOTLINE'S ENTIRE OBLIGATION AND LIABILITY, AND YOUR SOLE AND EXCLUSIVE REMEDY FOR ANY ERRORS IN YOUR RETURN CAUSED BY TAX HOTLINE.

10. Arbitration, Governing Law and Forum Disputes

Unless expressly stated to the contrary elsewhere, all legal issues arising from or related to the use of the Services shall be construed in accordance with, and all questions with respect thereto shall be determined by, the laws of the State of Illinois applicable to contracts entered into and wholly to be performed within said state. Any controversy or claim arising out of or relating to these Terms and Conditions or any user's use of the Services shall be settled by binding arbitration in accordance with the commercial arbitration rules of the American Arbitration Association. Any such controversy or claim shall be arbitrated on an individual basis, and shall not be consolidated in any arbitration with any claim or controversy of any other party. The arbitration shall be conducted in Chicago, Illinois and judgment on the arbitration award may be entered into in any state or federal court in Illinois having jurisdiction thereof. Any party seeking temporary or preliminary injunctive relief may do so in any state or federal court in Illinois having jurisdiction thereof. Except as set forth above, the state and federal courts of Illinois shall be the exclusive forum and venue to resolve disputes arising out of or relating to these Terms and Conditions or any user's use of the Services. By using the Services and thereby agreeing to these Terms and Conditions, users consent to personal jurisdiction and venue in the state and federal courts in Illinois with respect to all such disputes.

11. Changes in Terms and Conditions and Changes in Products and Services

Tax Hotline reserves the right to modify its Services from time to time, for any reason, and without notice, including the right to terminate the Services. Tax Hotline reserves the right to modify these Terms and Conditions from time to time, without notice. Please review the Terms and Conditions on our website www.taxhotline.net from time to time so you will be apprised of any changes.

12. Merger

These Terms and Conditions constitute the entire agreement between the parties with respect to the subject matter contained herein and supersedes any other agreement, proposals and communications, written or oral, between Tax Hotline's representations and you with respect to the subject matter hereof; except that any other terms and conditions located on any individual Tax Hotline web site or in connection with its Services are incorporated herein by reference to the extent they do not conflict with these Terms and Conditions.

13. Non-waiver and Separability
Tax Hotline' failure to exercise any right or provision of these Terms and Conditions shall not constitute a waiver of such right or provision. If a court of competent jurisdiction holds any provision of these Terms and Conditions to be invalid, the parties nevertheless agree that the court should endeavor to give effect to the parties' intentions as reflected in the provision, and agree that the other provisions of these Terms and Conditions remain in full force and effect.

14. Relationship of Parties
You acknowledge and agree that you and Tax Hotline are independent contractors under these Terms and Conditions, and nothing herein shall be construed to create a partnership, joint venture, agency, or employment relationship. Neither party pursuant to these Terms and Conditions has authority to enter into agreements of any kind on behalf of the other and neither party shall be considered the agent of the other. You agree not to market the services of Tax Hotline or represent the services offered in any Tax Hotline program without the express written authorization of Tax Hotline.

15. Successors and Assigns Bound
Without in any way limiting the prohibition on your resale, assignment, sublicensing, or other transfer of rights or obligations, these Terms and Conditions shall be binding upon and inure to the benefit of the parties hereto and their respective heirs, successors, and assigns.

16. Termination; Survival
These Terms and Conditions shall continue in effect for as long as you use the Services, unless specifically terminated earlier by Tax Hotline. All provisions of these Terms and Conditions which impose obligations continuing in their nature shall survive termination of these Terms and Conditions.

17. Violations of Terms and Conditions
Should you violate these Terms and Conditions or any other rights of Tax Hotline, Tax Hotline reserves the right to pursue any and all legal and equitable remedies against you, including, without limitation, terminating your enrollment in the Program.

Accepted this _______day of _________2012.

Tax Hotline

By:______________________

2340 S. Arlington Heights. Rd.
Suite 310
Arlington Heights, IL 60005
Tel: 847/690-9890 Fax: 847/718-9584

____
Client Signature

____
Name

____
Address

____
City/State/Zip

____
Telephone/Fax/Email

Program & ID No.:____________________

TaxHotline

Tax Preparation

Billing Information:	Shipping Information:
First and Last Name	First and Last Name
Company Name	Company Name
Address	Address
City State Zip	City State Zip
Phone Fax	Phone Fax
Email	Email

Mark if Billing Information is the same as Shipping Information: ☐

Tax Preparer: ____

Total amount due: _____________________________________

How to pay: ☐ Visa ☐ MasterCard ☐ Discover Card
☐ Check enclosed (please make payable to TaxHotline, Inc.)

Credit Card # _____________________________________Exp. Date ________
CVV Code ________

Name on card ____

Authorizing Signature ____