

**Bonnie S Clark Cpa
8164 Capitola Ave
Fair Oaks, CA 95628-7602
916-966-3380**

Dear :

This Client Organizer is designed to help you gather tax information needed to prepare your 2011 personal income tax return. We have preprinted certain information from your 2010 personal income tax return to help you complete the organizer with minimal time and effort.

In your Client Organizer, all social security numbers and bank account numbers have been replaced with asterisks (**_*_*_****) and (****1234) to protect your privacy and personal information. If you need to change or update a social security number or bank account information, please contact this office. Do not indicate the social security number or bank account change on your Client Organizer. When you receive your completed tax return(s), please review all social security numbers and bank account information for accuracy. Report any discrepancies to this office immediately.

Enter 2011 information on the Client Organizer sheets provided. If any information does not apply to you or is incorrect, please draw a line through it or make the necessary corrections.

The Client Questionnaire asks about pertinent tax items necessary for preparing the most accurate tax return possible. Please answer all applicable questions and attach a statement when necessary for additional information not provided in the Client Organizer.

We will also need the following information:

- Forms W-2 for wages, salaries and tips.
- All Forms 1099 for interest, dividends, retirement, miscellaneous income, Social Security, state or local refunds, gambling winnings, etc.
- Brokerage statements showing investment transactions for stocks, bonds, etc.
- Schedule K-1 from partnerships, S corporations, estates and trusts.
- Statements supporting deductions for mortgage interest, taxes, and charitable contributions (including any Form 1098-C).
- Copies of closing statements regarding the sale or purchase of real property.
- Legal papers for adoption, divorce, or separation involving custody of your dependent children.
- Any tax notices sent to you by the IRS or other taxing authority.
- A copy of your income tax return from last year, if not prepared by this office.

IRS regulations require paid tax preparers who expect to prepare 11 or more federal individual or trust tax returns to file them electronically. To comply with this requirement your return will be electronically filed this year. The benefits of e-filing include a secure way to file tax returns and it provides proof of acceptance, usually within 48 hours, that the IRS has accepted your return for processing. Contact this office if you prefer your return be filed on paper.

In order to meet the filing deadline for your 2011 income tax return, your completed tax organizer needs to be received by our office no later than December 29, 2011. Any information received after that date may require an extension of time be filed for your return.

Thank you for the opportunity to serve you.

Sincerely,

Bonnie S Clark Cpa

Questions

Please check the appropriate box and include all necessary details and documentation .

	Yes	No
Personal Information		
Did your marital status change during the year?	<input type="checkbox"/>	<input type="checkbox"/>
If yes, explain: _____		
Did your address change from last year?	<input type="checkbox"/>	<input type="checkbox"/>
Can you be claimed as a dependent by another taxpayer?	<input type="checkbox"/>	<input type="checkbox"/>
Did you change any bank accounts that have been used to direct deposit (or direct debit) funds from (or to) the IRS or other taxing authority during the tax year?	<input type="checkbox"/>	<input type="checkbox"/>
Dependent Information		
Were there any changes in dependents from the prior year?	<input type="checkbox"/>	<input type="checkbox"/>
If yes, explain: _____		
Do you have any children under age 19 or a full-time student under age 24 with unearned income in excess of \$1,900?	<input type="checkbox"/>	<input type="checkbox"/>
Do you have dependents who must file a tax return?	<input type="checkbox"/>	<input type="checkbox"/>
Did you provide over half the support for any other person(s) during the year?	<input type="checkbox"/>	<input type="checkbox"/>
Did you pay for child care while you worked or looked for work?	<input type="checkbox"/>	<input type="checkbox"/>
Did you pay any expenses related to the adoption of a child during the year?	<input type="checkbox"/>	<input type="checkbox"/>
If you are divorced or separated with child(ren), do you have a divorce decree or other form of separation agreement which establishes custodial responsibilities?	<input type="checkbox"/>	<input type="checkbox"/>
Purchases, Sales and Debt Information		
Did you start a new business or purchase rental property during the year?	<input type="checkbox"/>	<input type="checkbox"/>
Did you acquire a new or additional interest in a partnership or S corporation?	<input type="checkbox"/>	<input type="checkbox"/>
Did you sell, exchange, or purchase any real estate during the year?	<input type="checkbox"/>	<input type="checkbox"/>
Did you purchase or sell a principal residence during the year?	<input type="checkbox"/>	<input type="checkbox"/>
Did you foreclose or abandon a principal residence or real property during the year?	<input type="checkbox"/>	<input type="checkbox"/>
Did you acquire or dispose of any stock during the year?	<input type="checkbox"/>	<input type="checkbox"/>
Did you take out a home equity loan this year?	<input type="checkbox"/>	<input type="checkbox"/>
Did you refinance a principal residence or second home this year?	<input type="checkbox"/>	<input type="checkbox"/>
Did you sell an existing business, rental, or other property this year?	<input type="checkbox"/>	<input type="checkbox"/>
Did you incur any non-business bad debts this year?	<input type="checkbox"/>	<input type="checkbox"/>
Did you have any debts canceled or forgiven this year?	<input type="checkbox"/>	<input type="checkbox"/>
Did you purchase a new hybrid, alternative motor, or electric motor energy efficient vehicle this year?	<input type="checkbox"/>	<input type="checkbox"/>
Did you pay any student loan interest this year?	<input type="checkbox"/>	<input type="checkbox"/>
Income Information		
Did you have any foreign income or pay any foreign taxes during the year?	<input type="checkbox"/>	<input type="checkbox"/>
Did you receive any income from property sold prior to this year?	<input type="checkbox"/>	<input type="checkbox"/>
Did you receive any lump-sum payments from a pension, profit sharing or 401(k) plan?	<input type="checkbox"/>	<input type="checkbox"/>
Did you make any withdrawals from or contributions to an IRA, Roth, Keogh, SIMPLE, SEP, 401k, or other qualified retirement plan?	<input type="checkbox"/>	<input type="checkbox"/>
Did you make any withdrawals from an education savings or 529 Plan account?	<input type="checkbox"/>	<input type="checkbox"/>
Did you receive any distributions from a Health savings account (HSA), Archer MSA, or Medicare Advantage MSA this year?	<input type="checkbox"/>	<input type="checkbox"/>
Did you receive any Social Security benefits during the year?	<input type="checkbox"/>	<input type="checkbox"/>
Did you receive any unemployment benefits during the year?	<input type="checkbox"/>	<input type="checkbox"/>

Did you receive any disability income during the year?	p	p
Did you receive tip income not reported to your employer this year?	p	p
Did any of your life insurance policies mature, or did you surrender any policies?	p	p
Did you cash any Series EE or I U.S. Savings bonds issued after 1989?	p	p

Itemized Deduction Information

Did you incur a casualty or theft loss during the year?	p	p
Did you pay out-of-pocket medical expenses (Co-pays, prescription drugs, etc.)?	p	p
Do you have evidence to substantiate charitable contributions?	p	p
Did you make any noncash charitable contributions (clothes, furniture, etc.)?	p	p
Did you donate a vehicle or boat during the year? If yes, attach Form 1098-C.	p	p
Did you have an expense account or allowance during the year?	p	p
Did you use your car on the job, for other than commuting?	p	p
Did you work out of town for part of the year?	p	p
Did you have any expenses related to seeking a new job during the year?	p	p
Did you make any major purchases during the year (cars, boats, etc.)?	p	p
Did you make any out-of-state purchases (by telephone, internet, mail, in person) that the seller did not collect state sales or use tax?	p	p

Miscellaneous Information

Did you make gifts of more than \$13,000 to any individual?	p	p
Did you have any educational expenses during the year?	p	p
Did you make any contributions to an education savings or 529 Plan account?	p	p
Did you make any contributions to a Health savings account (HSA) or Archer MSA?	p	p
Did you pay long-term health care premiums for yourself or your family?	p	p
Did you pay any COBRA health care coverage continuation premiums?	p	p
If you are a business owner, did you pay health insurance premiums for your employees this year?	p	p
Did you utilize an area of your home for business purposes?	p	p
Did you engage in any bartering transactions?	p	p
Are you an active participant in a pension or retirement plan?	p	p
Did you retire or change jobs this year?	p	p
Did you incur moving costs because of a job change?	p	p
Did you, your spouse, or your dependents attend a post-secondary school during the year, or plan to attend one in the coming year?	p	p
Did you pay any individual as a household employee during the year?	p	p
Did you make energy efficient improvements to your main home this year?	p	p
Were you a grantor or transferor for a foreign trust, or do you have an interest in or a signature or other authority over a bank account, securities account, or other financial account in a foreign country?	p	p
Did you receive correspondence from the State or the Internal Revenue Service? If yes, explain: _____	p	p
Do you want to designate \$3 to the Presidential Election Campaign Fund?		
If you check yes, it will not change your tax or reduce your refund.	p	p

General: 1040

Personal Information

Filing (Marital) status code (1 = Single, 2 = Married filing joint, 3 = Married filing separate, 4 = Head of household, 5 = Qualifying widow(er)) _____

Mark if you were married but living apart all year _____

Mark if your nonresident alien spouse does not have an ITIN _____

	Taxpayer	Spouse
Social security number	_____	_____
First name	_____	_____
Last name	_____	_____
Occupation	_____	_____
Designate \$3.00 to the presidential election campaign fund? (1 = Yes, 2 = No, 3=Blank)	<u>2</u>	_____
Mark if legally blind	_____	_____
Mark if dependent of another taxpayer	_____	_____
Taxpayer between 19 and 23, full-time student, with income less than 1/2 support? (Y, N)	_____	_____
Date of birth	_____	_____
Date of death	_____	_____
Work/daytime telephone number/ext number	_____	_____
Do you authorize us to discuss your return with the IRS (Y, N)	<u>Y</u>	_____

General: 1040, Contact

Present Mailing Address

Address _____

Apartment number _____

City/State postal code/Zip code _____

Foreign country name _____

Home/evening telephone number _____

Taxpayer email address _____

Spouse email address _____

General: 1040

Dependent Information

First Name	Last Name	Date of Birth	Social Security No.	Relationship	Months in home	Care expenses paid for dependent
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____

Credits: 2441

Child and Dependent Care Expenses

	Provider #1	Provider #2
Provider information:		
Name	_____	_____
Street address	_____	_____
City, state, and zip code	_____	_____
Social security number OR Employer identification number	_____	_____
Tax Exempt or Living Abroad Foreign Care Provider (1 = TE, 2 = LAFCP)	_____	_____
Amount paid to care provider in 2011	_____	_____
	Taxpayer	Spouse
Employer-provided dependent care benefits that were forfeited	_____	_____

General: Info

Direct Deposit/Electronic Funds Withdrawal Information

If you would like to have a refund deposited directly or a balance due debited directly into/from your bank account, please enter the following information:

Financial institution: Routing transit number _____ Name _____

Your account number _____ Type of account (1 = Savings, 2 = Checking, 3 = IRA*) _____

If you would like to use a refund to purchase U.S. Series I Savings bonds (in increments of \$50), enter a maximum amount up to \$5,000.** _____

*Refunds may only be direct deposited to established traditional, Roth or SEP-IRA accounts. Make sure direct deposits will be accepted by the bank or financial institution.

**To purchase U.S. Series I Savings bonds in someone else's name, please contact our office.

Income: W2

Salary and Wages

Please provide all copies of Form W-2 that you receive.

Below is a list of the Form(s) W-2 as reported in last year's tax return. If a particular W-2 no longer applies, mark the not applicable box.

T/S	Description	Prior Year Information	Mark if no longer applicable
---	_____	_____	---
---	_____	_____	---
---	_____	_____	---
---	_____	_____	---
---	_____	_____	---

Income: 1099R

Pension, IRA, and Annuity Distributions

Please provide all copies of Form 1099-R that you receive.

Below is a list of the Form(s) 1099-R as reported in last year's tax return. If a particular 1099-R no longer applies, mark the not applicable box.

T/S	Description	Prior Year Information	Mark if no longer applicable
---	_____	_____	---
---	_____	_____	---
---	_____	_____	---
---	_____	_____	---
---	_____	_____	---
---	_____	_____	---

Income: K1, K1T

Schedules K-1

Please provide all copies of Schedule K-1 that you receive.

Below is a list of the Schedule(s) K-1 as reported in last year's tax return. If a particular K-1 no longer applies, mark the not applicable box.

T/S/J	Description	Form	Mark if no longer applicable
---	_____	_____	---
---	_____	_____	---
---	_____	_____	---
---	_____	_____	---
---	_____	_____	---
---	_____	_____	---
---	_____	_____	---
---	_____	_____	---
---	_____	_____	---
---	_____	_____	---

Income: W2G

Gambling Income

Please provide all copies of Form W-2G that you receive.

Below is a list of the Form(s) W-2G as reported in last year's tax return. If a particular W-2G no longer applies, mark the not applicable box.

T/S	Description	Prior Year Information	Mark if no longer applicable
---	_____	_____	---
---	_____	_____	---
---	_____	_____	---

Educate: 1099Q

Qualified Education Plan Distributions

Please provide all copies of Form 1099-Q that you receive.

Below is a list of the Form(s) 1099-Q as reported in last year's tax return. If a particular 1099-Q no longer applies, mark the not applicable box.

T/S	Description	Prior Year Information	Mark if no longer applicable
---	_____	_____	---
---	_____	_____	---

Income: B1

Interest Income

Please provide all copies of Form 1099-INT.

T/S/J	Payer Name	Interest Income	Prior Year Information
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Income: B3

Seller Financed Mortgage Interest

T, S, J _____ Payer's name _____
 Payer's address _____ Payer's social security number _____
 Amount received in 2011 _____ Amount received in 2010 _____

Income: B2

Dividend Income

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

T/S/J	Payer Name	Ordinary Dividends	Qualified Dividends	Prior Year Information
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Income: D

Sales of Stocks, Securities, and Other Investment Property

Please provide copies of all Forms 1099-B and 1099-S.

T/S/J	Description of Property	Date Acquired	Date Sold	Gross Sales Price (Less expenses of sale)	Cost or Other Basis
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

Income: Income

Other Income

Please provide copies of all supporting documentation.

	2011 Information		Prior Year Information
	Taxpayer	Spouse	Prior Year Information
State and local income tax refunds	_____	_____	_____
Alimony received	_____	_____	_____
Unemployment compensation	_____	_____	_____
Unemployment compensation repaid	_____	_____	_____
Social security benefits	_____	_____	_____
Medicare premiums to be reported on Schedule A	_____	_____	_____
Railroad retirement benefits	_____	_____	_____

T/S/J	2011 Information	Prior Year Information
Other Income:	_____	_____
_____	_____	_____
_____	_____	_____

1040 Adj: IRA

Adjustments to Income - IRA Contributions

Please provide year end statements for each account and any Form 8606 not prepared by this office.

Traditional IRA Contributions for 2011 -

If you want to contribute the maximum allowable traditional IRA contribution amount,

enter the applicable code: (1 = Deductible only, 2 = Both deductible and nondeductible)

Enter the total traditional IRA contributions made for use in 2011

Taxpayer

Spouse

Roth IRA Contributions for 2011 -

Mark if you want to contribute the maximum Roth IRA contribution

Enter the total Roth IRA contributions made for use in 2011

Educate: Educate

Higher Education Deductions and/or Credits

Complete this section if you paid interest on a qualified student loan in 2011 for qualified higher education expenses for you, your spouse, or a person who was your dependent when you took out the loan.

T/S	Qualified student loan interest paid	2011 Information	Prior Year Information
_____	_____	_____	_____
_____	_____	_____	_____

Complete this section if you paid qualified education expenses for higher education costs in 2011.

Qualified education expenses include tuition and fees required for enrollment or attendance at an eligible educational institution.

Please provide all copies of Form 1098-T.

T/S	Ed Exp Code*	Student's SSN	Student's First Name	Student's Last Name	Qualified Expenses	Prior Year Information
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____

*Education Expense Code: 1 = American opportunity credit; 2 = Lifetime learning credit; 3 = Tuition and fees deduction

The student qualifies for the American opportunity credit when enrolled at least half-time in a program leading to a degree, certificate, or recognized credential; has not completed the first 4 years of post-secondary education; has no felony drug convictions on student's record.

1040 Adj: 3903

Job Related Moving Expenses

Complete this section if you moved to a new home because of a new principal work place.

Description of move	_____
Taxpayer/Spouse/Joint (T, S, J)	_____
Mark if the move was due to service in the armed forces	_____
Number of miles from old home to new workplace	_____
Number of miles from old home to old workplace	_____
Mark if move is outside United States or its possessions	_____
Transportation and storage expenses	_____
Travel and lodging (not including meals)	_____
Total amount reimbursed for moving expenses	_____

1040 Adj: OtherAdj

Other Adjustments to Income

Alimony Paid:

T/S	Recipient name	Recipient SSN	2011 Information	Prior Year Information
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Address _____ City _____ State _____ Zip code _____

	Taxpayer	Spouse	Prior Year Information
Educator expenses:	_____	_____	_____
_____	_____	_____	_____
Other adjustments:	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

IRS regulations require paid tax preparers who expect to prepare a certain amount of federal individual tax returns to file them electronically. To comply with this requirement your return will be electronically filed this year if it qualifies for electronic filing under IRS rules. Taxpayers may choose to file a paper return instead of filing electronically.

Mark if you want to file a paper return even if you qualify for electronic filing _____

Do you want to receive email notification when your electronically filed return is accepted by the taxing agency? (Y, N) _____

Mark if you are filing a balance due return electronically and you want to pay the amount due by debiting your financial institution account _____

The IRS requires a Personal Identification Number (PIN) be used in signing returns that are electronically filed.

Each taxpayer and spouse, if applicable, must provide a 5 digit self-selected PIN of your choice other than all zeroes.

Taxpayer self-selected Personal Identification Number (PIN) _____

Spouse self-selected Personal Identification Number (PIN) _____

NOTES/QUESTIONS:

1 Preparer use only

	2011 Information	Prior Year Information
Taxpayer/Spouse/Joint (T, S, J)	_____	
Employer identification number	_____	
Business name	_____	
Principal business/profession	_____	
Business code	_____	
Business address, if different from home address on Organizer Form ID:1040		
Address	_____	
City/State/Zip	_____	
Accounting method (1 = Cash, 2 = Accrual, 3 = Other)	_____	
If other:	_____	
Inventory method (1 = Cost, 2 = LCM, 3 = Other)	_____	
If other enter explanation:	_____	

Enter an explanation if there was a change in determining your inventory:		

Did you "materially participate" in this business? (Y, N)	_____	
If not, number of hours you did significantly participate	_____	
Mark if you began or acquired this business in 2011	_____	
Did you make any payments in 2011 that require you to file Form(s) 1099? (Y, N)	_____	
If "Yes", did you or will you file all required Forms 1099? (Y, N)	_____	
Mark if this business is considered related to qualified services as a minister or religious worker	_____	
Did you receive wages as a statutory employee or as a minister? (1 = Statutory employee, 2 = Minister)	_____	
Medical insurance premiums paid by this activity	+ _____	
Long-term care premiums paid by this activity	+ _____	
Amount of wages received as a statutory employee	+ _____	

Business Income

	2011 Information	Prior Year Information
Merchant card and third party network receipts and sales (from Form 1099-K)		
_____	+ _____	
_____	+ _____	
_____	+ _____	
Gross receipts and sales not from merchant cards and third party networks	+ _____	
Returns and allowances	+ _____	
Other income:		
_____	+ _____	
_____	+ _____	
_____	+ _____	
_____	+ _____	

Cost of Goods Sold

	2011 Information	Prior Year Information
Beginning inventory	+ _____	
Purchases	+ _____	
Labor:		
_____	+ _____	
_____	+ _____	
Materials	+ _____	
Other costs:		
_____	+ _____	
_____	+ _____	
_____	+ _____	
Ending inventory	+ _____	

Control Totals +

Business

Preparer use only

Principal business or profession _____

	2011 Information	Prior Year Information
Advertising	+ _____	_____
Car and truck expenses	+ _____	_____
Commissions and fees	+ _____	_____
Contract labor	+ _____	_____
Depletion	+ _____	_____
Depreciation	+ _____	_____
Employee benefit programs (Include Small Employer Health Insurance Premiums credit):	+ _____	_____
_____	+ _____	_____
Insurance (Other than health):	+ _____	_____
_____	+ _____	_____
Interest:		_____
Mortgage (Paid to banks, etc.)	+ _____	_____
Other:		_____
_____	+ _____	_____
_____	+ _____	_____
Legal and professional services	+ _____	_____
Office expense	+ _____	_____
Pension and profit sharing:		_____
_____	+ _____	_____
_____	+ _____	_____
Rent or lease:		_____
Vehicles, machinery, and equipment	+ _____	_____
Other business property	+ _____	_____
Repairs and maintenance	+ _____	_____
Supplies	+ _____	_____
Taxes and licenses:		_____
_____	+ _____	_____
_____	+ _____	_____
_____	+ _____	_____
_____	+ _____	_____
Travel, meals, and entertainment:		_____
Travel	+ _____	_____
Meals and entertainment	+ _____	_____
Meals (Enter 100% subject to DOT 80% limit)	+ _____	_____
Utilities	+ _____	_____
Wages (Less employment credit):		_____
_____	+ _____	_____
_____	+ _____	_____
Other expenses:		_____
_____	+ _____	_____
_____	+ _____	_____
_____	+ _____	_____
_____	+ _____	_____
_____	+ _____	_____

Preparer use only Carryovers	Regular	AMT
Operating	+	+
Schedule D - Short-term	+	+
Schedule D - Long-term	+	+
Schedule D - 28% rate	+	+
Form 4797 - Part I	+	+
Form 4797 - Part II	+	+
Section 179	+	

Please provide all Forms 1099-K

Preparer use only

	2011 Information	Prior Year Information
Taxpayer/Spouse/Joint (T, S, J)	_____	[]
Employer identification number	_____	
Description	_____	
Principal Product	_____	
State postal code	_____	
Accounting method (1 = Cash, 2 = Accrual)	<u> 1 </u>	
Agricultural activity code	_____	
Did you "materially participate" in this business? (Y, N)	_____	
Did you make any payments in 2011 that require you to file Form(s) 1099? (Y, N)	_____	
If "Yes", did you or will you file all required Forms 1099? (Y, N)	_____	
Mark if Schedule F net income or loss should be excluded from self employment income	_____	
Medical insurance premiums paid by this activity	+ _____	_____
Long-term care premiums paid by this activity	+ _____	_____

Schedule F Income

Sales Code**		2011 Information	Prior Year Information
Specified income (from Form 1099-K)			
- _____	+	_____	[]
- _____	+	_____	
- _____	+	_____	
- _____	+	_____	
- _____	+	_____	
Non-specified income (not from Form 1099-K)			
- _____	+	_____	[]
- _____	+	_____	
- _____	+	_____	
- _____	+	_____	
- _____	+	_____	

**** Sales Codes**

1 = Cash sales of items bought for resale
 2 = Cash sales of items raised
 3 = Accrual sales
 4 = Custom hire (machine work)
 5 = Other income

Cash Income Items

	2011 Information	Prior Year Information
Cost or other basis of livestock and other items you bought for resale	+ _____	[]
Taxable crop insurance proceeds received in 2011	+ _____	
Mark if electing to defer crop insurance proceeds to 2012	_____	
Crop insurance proceeds deferred from 2010	+ _____	

Accrual Income Items

	2011 Information	Prior Year Information
Beginning inventory of livestock and other items	+ _____	[]
Accrual cost of livestock, produce, grains, and other products purchased	+ _____	
Ending Inventory of livestock and other items	+ _____	

Preparer use only

Description

Cash and Accrual Income Items

	2011 Information	Prior Year Information
Total cooperative distributions you received	+ _____	_____
Taxable cooperative distributions you received	+ _____	_____
Total agricultural program payments	+ _____	_____
Taxable agricultural program payments	+ _____	_____
CRP payments received while enrolled to receive social security or disability benefits	+ _____	_____
Commodity credit loans reported under election:		
_____	+ _____	_____
_____	+ _____	_____
Total commodity credit loans forfeited	+ _____	_____
Taxable commodity credit loans forfeited	+ _____	_____
Total crop insurance proceeds you received in 2011	+ _____	_____

Farm Expenses

	2011 Information	Prior Year Information
Car and truck expenses	+ _____	_____
Chemicals	+ _____	_____
Conservation expenses	+ _____	_____
Custom hire (machine work)	+ _____	_____
Depreciation	+ _____	_____
Employee benefit programs (Include Small Employer Health Insurance Premiums credit)	+ _____	_____
Feed purchased	+ _____	_____
Fertilizers and lime	+ _____	_____
Freight and trucking	+ _____	_____
Gasoline, fuel, and oil	+ _____	_____
Insurance (Other than health)	+ _____	_____
Mortgage interest (Paid to banks, etc.)	+ _____	_____
Other interest	+ _____	_____
Labor hired (Less employment credit)	+ _____	_____
Pension and profit sharing	+ _____	_____
Rent - vehicles, machinery, and equipment	+ _____	_____
Rent - other	+ _____	_____
Repairs and maintenance	+ _____	_____
Seed and plants purchased	+ _____	_____
Storage and warehousing	+ _____	_____
Supplies purchased	+ _____	_____
Taxes:		
_____	+ _____	_____
_____	+ _____	_____
_____	+ _____	_____
Utilities	+ _____	_____
Veterinary, breeding, and medicine	+ _____	_____
Other expenses:		
_____	+ _____	_____
_____	+ _____	_____
_____	+ _____	_____
_____	+ _____	_____
_____	+ _____	_____
_____	+ _____	_____
_____	+ _____	_____
_____	+ _____	_____
_____	+ _____	_____
Preproductive period expenses	+ _____	_____

Control Totals +

Farm

1 Preparer use only

Description

Preparer use only Carryovers	Regular	AMT
Operating	+	+
Schedule D - Short-term	+	+
Schedule D - Long-term	+	+
Schedule D - 28% rate	+	+
Form 4797 - Part I	+	+
Form 4797 - Part II	+	+
Section 179	+	
Excess farm loss	+	+

Client Notes

Submit questions and provide additional information to your tax return preparer here.

Taxpayer name(s)

Social security number
