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1040 INDIVIDUAL TAX RETURNS FOR 2011
MINIMUM REQUIRED INFORMATION WE NEED FROM YOU
44 ITEM CHECKLIST

We will do everything possible to prepare your tax return in the most efficient and timely manner. In order to do so, **please complete this brief checklist in order to MAXIMIZE your TAX SAVINGS.** This checklist *(#44 requires signatures)* should be reviewed carefully and place an "X" in front of the items that are applicable to you and fill in any additional information needed. Please return this completed checklist and the *supporting tax documents* with you for your scheduled tax appointment (or include this completed checklist when you mail or drop-off your tax information).

I. GENERAL

Taxpayer'sName:______________________________Occupation:__________________

Date of Birth:________________________________ Business Phone:________________

Spouse'sName:________________________________Occupation:__________________

Date of Birth:_________________________________ Business Phone:________________

Home or Cell Phone:_________________ Fax: __________________ Email: ____________________

Preferred Method of Contact (i.e. cell phone, e-mail, etc.): ______________________________________

Who to contact: __________________ Best Time:___________________

1. Your return will be prepared for Electronic filing due to mandate imposed by the IRS and States. You can opt-out of e-filing for the IRS and some states (not New York). If available, would you like to opt-out of Electronic filing? (Circle one: Yes or No)
   E-file signature authorization form(s) will be obtained after return is completed.
   Both taxpayers must sign whether filing joint or married filing separate returns.

2. If you anticipate a tax refund and you plan to ***direct deposit*** your refund into your bank account, please fill out the following information and also **provide a copy of a voided check or a savings account deposit slip.**

   Bank Name: ___________________________ Routing #: _________________

   Account #: ____________________________

   Type of Account (circle one): Checking Savings

   If you have a balance due, would you like the amount automatically withdrawn?
   (Circle one: Yes or No)

3. Did you make **estimated tax payments** for the 2011 tax year (paid in 2011 or 2012)? If so, please list below:

Due Dates	**Federal** Date Paid | Amount	**State** Date Paid | Amount	**City** Date Paid | Amount
1st Qtr 4-15-11	________|________	________|________	________|________
2nd Qtr 6-15-11	________|________	________|________	________|________
3rd Qtr 9-15-11	________|________	________|________	________|________
4th Qtr 1-17-12	________|________	________|________	________|________

4. If applicable, do you want us to prepare **quarterly tax estimates** for the 2012 tax year? (Circle one) Yes or No

   If you have a refund on the 2011 tax returns, do you want all of it applied to your 2012 estimates? (Circle one) Yes or No

5. Did you move or have a **change of address**? If so, please provide the date you moved, the old address and new address, if you live within city limits, the county of residence and the school district.

6. Did you have a change of **marital status** or a **change in dependents**? If yes, provide the name, social security number, birth date, number of months that dependent(s) lived in your home and the relationship of dependents (son, daughter, etc). Please let us know if the change is to add the dependent(s) or remove the dependent(s). Please note that the name on the tax return must match the name on the individual's social security card.

7. Please note if any dependents have 2011 earned income over $3,700. If so, note if dependent was a full-time student at least 5 months in 2011. Note if any dependents have 2011 unearned income (such as interest, dividends, capital gains) over $950. Note if any dependents will or have filed their own 2011 tax return. Please indicate if you are requesting us to file separate returns for dependents.

8. Can you, your spouse or any dependents be claimed as a dependent by another taxpayer? If so, please explain.

9. Divorced or separated parents claiming dependents must have a signed ***Form 8332*** (Release of Claim to Exemption for Child of Divorced or Separated Parents). **IRS will not accept a copy of the divorce or separation papers.**

10. Did you make any out of state, internet or catalog purchases with no sales tax paid? Amount $ ____________

11. Did you have any income in states other than New York? If so, please explain._____________
____

12. Did you receive a notice from the IRS, any state or any city? If so, please give us a copy of the notice as soon as possible.

13. Did you **sell**, **exchange** or **purchase** any **real estate** in 2011? If so, please attach closing statement(s) and basis information.

    Did you occupy the property as your principal residence for at least two years out of the five-year period prior to the sale? (Circle one: Yes or No)

14. Did you pay in excess of $1,000 in any quarter or $1,700 during the year for domestic services performed in or around your home to individuals who could be considered household employees? If yes, provide name(s), social security number(s) and amount(s).

15. Do you have any **foreign income**? Were you or your spouse a grantor or transferor for a **foreign trust**, 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 (note— this can be a direct interest or an interest through another entity such as a hedge fund, partnership, etc.)? Did you create or transfer money or property to a foreign trust?

16. Did you make **gifts** of more than **$13,000** to any individual? If so, please indicate if you need us to file the required gift tax returns.

17. Did you have any new or special issues during the 2011 tax year? Any expected for 2012? If so, please explain____
    ____

II. INCOME

18. Please provide all ***W-2*** *wage statements from employers,* ***W-2G*** and ***K-1*** forms (from partnerships, S-Corporations and trusts).

19. Please provide all Form ***1099*** information statements received ***(interest, dividend, retirement income, social security, unemployment compensation***, ***state tax refunds***).

20. All tax exempt investment income information reports are also needed.

21. ***1099B*** Forms or brokerage statements reporting all ***stock sales and date of sales*** for 2011, as well as **purchase date** and **cost** information and any reinvested dividends you already paid tax on to reduce any gain. If you do not have this information, please call your broker to obtain a printout of the cost and sale information.

22. **1099-R** Forms reporting all ***IRA*** roll-overs and pension distributions during the year.

23. List of ***non-taxable income*** amount and type. (i.e. VA payments, welfare, ADC and housing allowance, etc.).

24. Do you have **self-employed business income**? If so, provide **income** and **expenses** totaled for each business (i.e. advertising, real estate taxes, utilities, repairs, maintenance, insurance, etc). Include **business miles** driven as substantiated by your mileage log book for 2011. Provide information for **new assets** or major improvements including description, date acquired and amount paid. Please also provide information of any **old assets disposed** including date disposed, how disposed (sold, abandoned, etc.), proceeds if applicable (including any potential insurance proceeds). If desired, call us and we can fax a form to help you organize this information.

25. Do you have **rental property income**? If so, provide **income** and **expenses** totaled by property (i.e. advertising, real estate taxes, utilities, repairs, maintenance, insurance, etc). Include **business miles** driven as substantiated by your mileage log book for 2011. Provide information for **new assets** or major improvements including description, date acquired and amount paid. Please also provide information of any **old assets disposed** including date disposed, how disposed (sold, abandoned, etc.), proceeds if applicable (including any potential insurance proceeds). If desired, call us and we can fax a form to help you organize this information.

26. Any unreported tip income of $20 or more in any month of 2011? Amount $________________

27. Any debts canceled, forgiven or refinanced during 2011? If so, provide amount and details. $____________________

28. Any **alimony received** during 2011? Amount $___________________

29. Do you have any **other income**? Please explain, provide income amount and related expense information if applicable.

III. ADJUSTMENTS TO INCOME

30. Educational employees (Kindergarten **-** Grade 12) ***out-of-pocket expenses*** (up to $250).
    Amount $________________

31. **Health Savings Account** (HSA)/Medical Savings Account (MSA) contributions made in 2011 and date established. In addition, please provide the amount of the annual deductible (as this may change from year to year), the amount of the non-reimbursed medical expenses for 2011, and list if the account is for family or individual. If you received a distribution, include Form **1099-SA**.

32. Did you pay for **self-employed medical insurance** coverage? If so, what was the dollar amount of premiums paid? Amount $________________

33. Did you make contributions to a self-employed **SEP**, **SIMPLE** or other qualified plan for 2011? If so, provide what type of plan and how much was contributed for the participant(s).
    Amount $________________

34. Did you participate in any retirement plan? If so, explain.

    Copy of 2011 ***retirement contributions to or withdrawals from*** IRA, Roth IRA, pension, etc.

    Did you make any payments to or withdrawals from an **IRA** during the year? If so, provide details. If you made a withdrawal and you were under age **59 ½**, let us know where you spent the funds, so that we can help you determine if you meet an exception to the 10% early withdrawal penalty. Please note if the retirement plan is Pension, Traditional IRA, Roth IRA, Non-deductible IRA, etc.

    Did you or your spouse turn age **70 ½** during the year and have money in an IRA or other retirement account without taking any distribution? (Circle one) Yes / No

    If you were 70 ½ or older, did you make a direct transfer from IRA to charitable organization as a donation? (Circle one) Yes / No

35. Did you make **alimony payments**? If so, provide the social security number, name of the recipient and the amount paid.

36. For you or your dependents - need Form **1098-T**, amount of ***tuition and fees paid*** and **year of college** (1, 2, 3, 4 or +4).

37. If paying ***college loans*** back, need institution name and amount of interest paid in 2011, Form **1098-E** Student Loan Int.

38. Did you contribute or withdraw amounts from a Coverdell Education Savings Account or Qualified Education Program (**Section 529 plan**)? If so, provide information and include Form 1099-Q, if received.

39. **ITEMIZED DEDUCTIONS -** Itemizing your deductions may be a benefit to you. We will guide you to the most advantageous position. Generally, the IRS will allow, at least, a **"standard" deduction** of **$5,800** for singles and **$11,600** for married individuals filing a joint return who do not "itemize" deductions. Below are some of the items which must add up to more than the "standard" deduction in order to itemize.

    IF YOU FEEL THAT YOU MAY BE ABLE TO **ITEMIZE**, WE WILL NEED INFORMATION REGARDING:

    MEDICAL (you do not need to send your receipts to us, just provide a summary amount of the expenses paid)

    _______ Total of any ***Medical Expenses*** you paid in 2011

    _______ Doctor

    _______ Dentist

    _______ Prescription medication

    _______ Glasses and contact lenses

    _______ Other medical expenses (please provide details)

    _______ Total ***miles traveled for medical treatment***

    _______ ***Medical Insurance premiums*** paid fully by you and not previously listed in Part III as a self-employed adjustment.

    _______ ***Medical Insurance premiums*** paid by deduction from your pay on an after-tax basis (do not list pre-tax deductions)

    _______ ***Long-term care insurance premiums*** - unreimbursed (*bring for possible reduction state income tax return*).

    NOTE: Total medical expenses which exceed 7.5% of your Adjusted Gross Income are included in itemized deductions. Very few individuals qualify for medical expenses on their federal return, but medical information is needed as it *may be useable on state return*.

    TAXES

    _______ State and local income taxes ***PAID*** during **2011** (do not list those already listed on page 2 as estimates paid and do not list the state and local taxes reported on your W-2's or 1099's.)

    _______ Real estate taxes ***PAID*** in **2011 (see 42a if not itemizing).**

    _______ Sales tax paid in **2011** if large item purchased such as a car, truck, boat, etc. **(see 42b if not itemizing)**.

INTEREST PAID

Provide all ***year-end lender loan statements***-Form **1098** (including those refinanced or paid-off during the year)

Principal residence and 2nd home mortgages as well as Home Equity Loans. If you have Home Equity Loan Interest, were the loan proceeds used to buy, build or substantially improve your primary residence? (Circle one) Yes / No

Are your total mortgages on your first and/or second residence greater than $1,000,000? If so, please provide the principal balance at the beginning and end of the year.

Mortgage interest paid to individuals (**Name, social security number and Address needed**).

Investments

CONTRIBUTIONS

You are required to have receipts for <u>all</u> contributions. Cash contributions of $250 or more require written documentation from the donee organization. If you have non-cash contributions totaling more than $500, you will need to submit the receipts to us so that we can obtain the information needed to complete a special tax return schedule.

________ Charitable contributions of cash
________ Charitable contributions of property and type of property (non-cash)
________ Volunteer miles

OTHER
________ Casualty and theft losses
________ Union dues
________ Tax preparation fee
________ Unreimbursed job related expenses
________ Safe deposit box
________ Other

40. TAX CREDITS

a. Name, address and identification number of all ***child care providers*** and amount paid to each and separated by each child.

b. Did you purchase a new alternative technology vehicle, including a qualified plug-in electric drive motor vehicle in 2011? (Circle one: Yes or No)

c. American Opportunity or Lifetime Education Credits - you provide the information listed on Page 4 and #36 and we'll help to determine whether the tuition and fees deduction or the Education Credit is more advantageous. [For you or your dependents-need <u>***tuition and fees paid***</u> in 2011 and <u>year of college</u> (1, 2, 3, 4 or +4).

d. Earned Income Credit. Was Earned Income Credit previously disallowed?
(Circle one.) Yes or No

41. EXPLANATION - Please include an explanation for any information requested in this 1040 required information checklist that is not being submitted. (Ex. Not applicable, not ready, information coming later, etc.

42.

a. NEW: Home Real Estate Taxes Paid in 2011, even if you do not itemize $_________________.

b. NEW: If you bought a new motor vehicle in 2011, you may be able to deduct any state or local sales or excise taxes on the purchase, even if you do not itemize. State and local taxes paid $_____________. Purchase price of vehicle $_________________.

c. NEW: Purchase of certain home improvements which qualify for tax credits. If so, indicate description of improvement made, cost and verify the improvement has a manufacture's certification indicating it is energy efficient__________________________________.

43. **<u>New York</u>**

Do you maintain living quarters in New York State? If yes, enter address(es) below:

____

____

____

Were the living quarters maintained for you or by you the entire year? (Circle one: Yes or No)

Enter the number of days spent in New York State during 2011: ____________.

44. AUTHORIZATION

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.

Taxpayer Signature________________________ Spouse Signature________________________

Date Signed______________________________ Date Signed____________________________