

2012 Tax Year
INCOME TAX ORGANIZER
MASH Accounting & Consulting LLP
1110 N. Brand Blvd Suite 304, Glendale, CA 91202

YOUR PERSONAL INFORMATION

Name(s)
 And
 Address:

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Filing Status:

- | | |
|--|----------------------------|
| | Single |
| | Married, Filing Jointly |
| | Married, Filing Separately |
| | Head of Household |
| | Widow(er) |

Filer's Date of Birth Spouse's Date of Birth Contact Phone # Email Address:

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DEPENDENTS – Please list all dependents, regardless of age, that did not provide more than 1/2 of their own support. Do not list spouse.

Name of Dependents & Relationship	Date of Birth	Social Security #	Months in your home in 2012	Full Time Student 5 months or more?

CHILD & DEPENDENT CARE

Qualifying Child's Name	Provider's Name & Address	Provider's ID#	Amount Paid

WAGES INCOME - Please provide all W-2 Forms provided by your employer(s).

INTEREST & DIVIDEND INCOME - Please provide any 1099 Forms you received

Name of Payer	Gross Amount Received

CANCELLED DEBTS: Did you have any debts that were cancelled in 2012? Common examples include credit card debt and mortgage debt that has been partially or completely forgiven. Yes__No__

*If yes, please provide all 1099-C or 1099-A forms that you received.

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OTHER INCOME – Please provide all 1099 Forms and Schedule K-1's.

	Amount
Commissions and Fees	
Prizes and Awards	
Alimony Received	
State Income Tax Refunds	
Unemployment Compensation	
Disability (may qualify for exclusion)	
Social Security Benefits-Filer	
Social Security Benefits-Spouse	
Pension, 401K, 403B, 457, Simple, Traditional and Roth IRA Distributions	
Retirement Plan Rollovers	
Gambling Winnings	
Other	

RENTAL AND ROYALTY INCOME AND DEDUCTIONS

	<i>Property A</i>	<i>Property B</i>	<i>Property C</i>
Type of Property			
Property Location			
Rental Income			
Royalty Income			
Advertising			
Auto and Travel			
Cleaning and Maintenance			
Commissions			
Insurance			
Professional Fees			
Management Fees			
Mortgage Interest Paid			
Other Interest			
Repairs			
Supplies			
Taxes			
Utilities			
Depreciation (discuss with tax consultant)			
Other			

STOCK OR PROPERTY SALES – Please provide broker statements, Forms 1099-B, or real estate transaction papers.

Name of Stock or Property Description	Number of Shares	Date Acquired	Date Sold	Amount of Sales Price	Cost or Other Basis	Expense of Sale	Depreciation or Depletion

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DEDUCTIONS – MEDICAL AND DENTAL EXPENSES		Un-Reimbursed Amount
List All Expenses or Provide Supplemental Documentation		
Prescription Drugs and Insulin (Do not include payments from Flex Spending Account)		
Doctors and Dentists (Do not include payments from Flex Spending Account)		
Hospitals (Do not include payments from Flex Spending Account)		
Insurance Premiums You Paid for Medical and Dental Care (do not include pretax insurance premiums deducted from your paycheck)		
Medicare Premiums		
Transportation Expense or Vehicle Miles for Medical Purposes		
Other (List below - including hearing aids, dentures, eyeglasses, braces, wheelchairs, etc.)		

DEDUCTIONS – REAL ESTATE TAXES --Please provide all real estate tax bills		Amount
Real Estate Tax-Main Home		
Real Estate Tax-Vacation or 2 nd Home		
Real Estate Tax-Investment Property		

DEDUCTIONS – INTEREST —Please provide all Form 1098's		Amount
Home Mortgage Interest paid to Financial Institutions (Form 1098)		
Home Mortgage Interest paid to Individuals (provide name, address and SS#)		
Private Mortgage Insurance (PMI) for mortgages signed after 01/01/2007		
Investment Interest (margin interest, etc)		

DEDUCTIONS – CHARITABLE CONTRIBUTIONS		Amount
Cash Contributions -		
Non-Cash Contributions -		

DEDUCTIONS - MISCELLANEOUS		Amount
Alimony Paid (list recipient's name and SSN)		
Forfeited Interest Penalty for Premature Withdrawal		
Employment Firm Fees		
Teachers – Classroom Supplies and Expenses		
Employee Expenses: Tools, Clothing, Uniforms, Union & Professional Dues		
Subscriptions to Professional Journals, Licenses etc...		
Un-reimbursed Business Mileage (circle applicable expenses)		
Tax Return Preparation Fees or Legal Fees (if for income protection or production)		
Investment Expenses		
Safe Deposit Box		

Did you relocate in 2012 for employment purposes: Yes ___ No ___
 Do you maintain a home office in 2012: Yes ___ No ___

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SELF-EMPLOYMENT INCOME AND EXPENSES

INCOME	Amount
Type of Income	

Main Product or Principal Activity

EXPENSES

		Amount			Amount
Advertising			Legal and Professional Services		
Car and Truck Expenses:			Office Expenses		
Fuel			Pension / Profit Sharing Plans		
Repairs & Maintenance			Interest:		
Title, Registration Fees, Etc			Bank Loans		
Business Mileage	miles		Credit Cards		
Commissions Paid			Vehicle Loans		
Depreciation (discuss with tax consultant)			Other		
Employee Benefit Programs			Other		
Insurance (Other than Health)			Rent or Lease:		
Telephone (do not include 1 st line)			Machinery & Equipment		
Internet Access			Other (Land, Animals, etc.)		
Contract Services			Other Business Property		
Postage & Shipping			Other		
Gasoline, Fuel, Oil for Equipment			Cost of Goods Sold:		
Supplies			Inventory (Beginning of Year)		
Travel			Purchases of Goods		
Meals & Entertainment			Inventory (End of Year)		
Utilities			Other Expenses:		
Gross Wages Paid					
Employment Taxes Paid on Wages:					
FICA			Health Insurance (employee policies)		
940 and State UC Taxes			Health Insurance (owner's policy)		

COLLEGE TUITION (Please provide all Forms 1098-T)

Name of Student	Relationship	Classification (Circle)	Tuition Paid
		Fr-So-Jr-Sr-Other	
		Fr-So-Jr-Sr-Other	
		Fr-So-Jr-Sr-Other	

*School(s) Attended: _____

*Amounts Paid for Required Course Materials: _____

Estimated Taxes Paid

<u>Federal</u>		<u>State</u>	
Date Paid	Amount	Date Paid	Amount

IRA/SEP Contributions

Date Paid	Roth, SEP or Traditional	Filer Amount	Spouse Amount

Other Comments

