

Taxpayer Information		Spouse Information	
Last name . . . . .	_____	Last name . . . . .	_____
First name . . . . .	_____	First name . . . . .	_____
Middle Initial . . . . .	_____	Middle Initial . . . . .	_____
Suffix . . . . .	_____	Suffix . . . . .	_____
Social security number . . . . .	_____	Social security number . . . . .	_____
Occupation . . . . .	_____	Occupation . . . . .	_____
Work phone . . . . .	_____	Work phone . . . . .	_____
Ext. . . . .	_____	Ext. . . . .	_____
Cell phone . . . . .	_____	Cell phone . . . . .	_____
E-mail address . . . . .	_____	E-mail address . . . . .	_____
Date of birth . . . . .	_____	Date of birth . . . . .	_____
Address . . . . .	_____		Apartment number . . . . .
City . . . . .	_____	State . . . . .	_____
Home phone . . . . .	_____	ZIP Code . . . . .	_____
Fax number . . . . .	_____		

Dependent Information					
First name	MI	Social Security Number	Date of Birth	Months Lived with Taxpayer	Child Care Expense
Last name	Suffix	Relationship			
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-----					
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Child and Dependent Care Provider Expenses			
Name	Address	ID Number	Amount Paid
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**Education Tuition and Fees**  
 Attach all Form 1098-Ts and a list of your qualified education expenses.

**Student Loan Interest Paid**  
 Enter total 2011 qualified student loan interest . . . . . \_\_\_\_\_

**Attach Form(s) W-2 – Wages, Salaries, Tips and Other Compensation**

Employer Name	2010 Amount
_____	_____
_____	_____
_____	_____

**Attach Form(s) 1099-R – Distributions from Pensions, Annuities, Retirement, Profit-Sharing, IRAs, etc**

1099-R Payer Name	2010 Amount
_____	_____
_____	_____
_____	_____

**Attach Form(s) SSA-1099 – Social Security/Railroad Benefits**

	Taxpayer	Spouse
Social Security Benefits from Form SSA-1099 . . . . .	_____	_____
Railroad Retirement Benefits from Form RRB-1099 . . . . .	_____	_____
Medicare B premiums withheld . . . . .	_____	_____
Medicare D premiums withheld . . . . .	_____	_____

**Attach Form(s) 1099-MISC – Miscellaneous Income**

1099-MISC Payer Name
_____
_____
_____

**Attach Form(s) 1099-INT – Interest Income**

1099-INT Payer Name	2010 Amount
_____	_____
_____	_____
_____	_____
_____	_____

**Attach Form(s) 1099-DIV – Dividend Income**

1099-DIV Payer Name	2010 Amount
_____	_____
_____	_____
_____	_____
_____	_____

**Attach Form(s) 1099-B, 1099-S – Sales of Stocks, Bonds, Real Estate, etc**

Attach all stock sale transaction information, including initial cost information.

**Other Government Forms to attach:**

Form(s) 1099-G – Certain Government Payments, Schedule K-1s – Partnership, S-Corporation, Trust or Estate Income, Form(s) W-2G – Gambling or Lottery Winnings, Form(s) 1099-Q – Payments from Qualified Education Programs

**Other Income:**

Alimony, jury duty, unreported tips, disability income, etc. Business, rentals, farms: Attach income and expenses for any business, rental or farm you own. Include a list of all new equipment acquired this year, including date of purchase and cost.

**Retirement Plan Contributions**

	Taxpayer	Spouse
Traditional IRA contributions made for 2011 . . . . .	_____	_____
Roth IRA contributions made for 2011 . . . . .	_____	_____
SEP, Keogh, Individual 401(k) or SIMPLE Contributions . . . . .	_____	_____

<b>Medical and Dental Expenses</b>	<b>2011 Amount</b>	<b>2010 Amount</b>
Prescription medications . . . . .	_____	_____
Health insurance premiums . . . . .	_____	_____
Doctors, dentists, etc . . . . .	_____	_____
Hospitals, clinics, etc . . . . .	_____	_____
Eyeglasses and contact lenses . . . . .	_____	_____
Miles driven for medical purposes:		
From 01/01/11 thru 06/30/11 . . . . .	_____	_____
From 07/01/11 thru 12/31/11 . . . . .	_____	_____
Other medical and dental expenses:		
_____	_____	_____
<b>Taxes</b>	<b>2011 Amount</b>	<b>2010 Amount</b>
Real estate taxes paid on principal residence . . . . .	_____	_____
Real estate taxes paid on additional homes or land . . . . .	_____	_____
Auto license registration fees based on the value of the vehicle . . . . .	_____	_____
Other personal property taxes. . . . .	_____	_____
<b>Interest Expenses</b>		
Home mortgage interest paid – Attach Form(s) 1098.		
<b>Lender's Name</b>	<b>2011 Amount</b>	<b>2010 Amount</b>
_____	_____	_____
_____	_____	_____
Points paid on loan to buy, build or improve main home		
<b>Lender's Name</b>	<b>2011 Amount</b>	
_____	_____	
<b>Cash/Check/Credit Contributions</b>	<b>2011 Amount</b>	<b>2010 Amount</b>
_____	_____	_____
_____	_____	_____
_____	_____	_____
<b>Noncash Charitable Contributions</b>		
Attach all receipts with details listing the following information: Donee, donee address, description of donation, date acquired and date contributed, your cost, value at time of donation, and how you acquired the property.		
<b>Miscellaneous Deductions</b>	<b>2011 Amount</b>	<b>2010 Amount</b>
Union and professional dues . . . . .	_____	_____
Professional subscriptions, books, supplies . . . . .	_____	_____
Uniforms and protective clothing (including cleaning) . . . . .	_____	_____
Job search costs . . . . .	_____	_____
Taxpayer educator expenses . . . . .	_____	_____
Spouse educator expenses . . . . .	_____	_____
Tax return preparation fees . . . . .	_____	_____
Safe deposit box rental . . . . .	_____	_____
Gambling losses (to the extent of gambling income) . . . . .	_____	_____
Other expenses (list):		
_____	_____	_____

		<b>Yes</b>	<b>No</b>
1	Did a lender cancel any of your debt in 2011? (Attach any Forms 1099-A or 1099-C) . . . . .	<input type="checkbox"/>	<input type="checkbox"/>
2	Did you make energy efficient improvements to your home or purchase any energy-saving property during 2011? If <b>yes</b> , please attach details . . . . .	<input type="checkbox"/>	<input type="checkbox"/>
3	Did you purchase a motor vehicle or boat during 2011? . . . . . If <b>yes</b> , attach documentation showing sales tax paid.	<input type="checkbox"/>	<input type="checkbox"/>
4	Did you purchase a hybrid or electric vehicle in 2011? If <b>yes</b> , enter year, make, model, and date purchased: _____	<input type="checkbox"/>	<input type="checkbox"/>
5	Did you donate a vehicle in 2011? If <b>yes</b> , attach Form 1098C . . . . .	<input type="checkbox"/>	<input type="checkbox"/>
6	What was the sales tax rate in your locality in 2011? . . . . _____% State ID . . . . _____		
7	Did your marital status change during 2011? . . . . . If <b>yes</b> , explain: _____	<input type="checkbox"/>	<input type="checkbox"/>
8	Were you or your spouse permanently and totally disabled in 2011? . . . . .	<input type="checkbox"/>	<input type="checkbox"/>
9	Do you have dependents who must file? . . . . .	<input type="checkbox"/>	<input type="checkbox"/>
10	Do you have children who are under age 19 or a full time student under age 24 with investment income greater than \$1900? . . . . .	<input type="checkbox"/>	<input type="checkbox"/>
11	Did you provide over half the support for any other person during 2011? . . . . .	<input type="checkbox"/>	<input type="checkbox"/>
12	Did you incur adoption expenses during 2011? . . . . .	<input type="checkbox"/>	<input type="checkbox"/>
13	Did you receive a total distribution from an IRA or other qualified plan that was partially or totally rolled over into another IRA or qualified plan within 60 days of the distribution? . . . . .	<input type="checkbox"/>	<input type="checkbox"/>
14	Did you receive any disability payments in 2011? . . . . .	<input type="checkbox"/>	<input type="checkbox"/>
15	Did you receive tip income <b>not</b> reported to your employer? . . . . .	<input type="checkbox"/>	<input type="checkbox"/>
16 a	Did you buy, sell, refinance, foreclose or abandon a principal residence or other real property in 2011? If <b>yes</b> , attach closing or escrow statements, 1099-C or 1099-A forms. . . . .	<input type="checkbox"/>	<input type="checkbox"/>
b	If you sold a home, did you claim the First-Time Homebuyer Credit when you purchased it? . . . . .	<input type="checkbox"/>	<input type="checkbox"/>
17	Did you incur any casualty or theft losses during 2011? . . . . .	<input type="checkbox"/>	<input type="checkbox"/>
18	Did you incur any non-business bad debts? . . . . .	<input type="checkbox"/>	<input type="checkbox"/>
19	Did you pay any individual for domestic services in 2011? . . . . .	<input type="checkbox"/>	<input type="checkbox"/>
20	Did you buy or sell any stocks or bonds in 2011? . . . . .	<input type="checkbox"/>	<input type="checkbox"/>
21	Did you use the proceeds from Series EE or I U.S. savings bonds purchased after 1989 to pay for higher education expenses? . . . . .	<input type="checkbox"/>	<input type="checkbox"/>
22	Did you incur any moving expenses? If <b>yes</b> , attach details . . . . .	<input type="checkbox"/>	<input type="checkbox"/>
23	Did you or your spouse elect continuation of COBRA coverage after your employment was involuntary terminated? . . . . .	<input type="checkbox"/>	<input type="checkbox"/>
24	Did you receive any income not included in this Tax Organizer? . . . . . If <b>yes</b> , please attach information.	<input type="checkbox"/>	<input type="checkbox"/>
25	Do you expect your income and deductions in 2012 to be the same as 2011? . . . . . If <b>no</b> , attach explanation of changes expected.	<input type="checkbox"/>	<input type="checkbox"/>
26	If you paid any alimony, enter recipient's SSN: _____ Alimony paid: _____		
27	Enter your state of residence . . . . . <b>Taxpayer</b> _____ <b>Spouse</b> _____		

**Electronic Filing and Direct Deposit of Refund** **Yes**  **No**

If your tax return is eligible for Electronic Filing, would you like to file electronically? . . . . .

The Internal Revenue Service is able to deposit many refunds directly into taxpayers' accounts.  
If you receive a refund, would you like direct deposit? . . . . .

If **yes**, please provide a voided check (not a deposit slip) if your bank account information has changed.  
What type of account is this? . . . . . Checking  Savings

Federal		State			Local		
Date	Amount	Date	Amount	ID	Date	Amount	ID

**Additional Information** (Enter any additional information here and attach any documents.)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Car And Truck Expenses**  
(Employees use ORG17 – Employee Business Expenses)

ORG18

for: ORG19

GENERAL INFORMATION-	Vehicle 1	Vehicle 2	Vehicle 3
1 Description of vehicle . . . . .			
2 Date placed in service . . . . .			
3 Enter detail on lines 3a and 3b, or total on line 3c:			
<b>a</b> Ending mileage reading . . . . .			
<b>b</b> Beginning mileage reading . . . . .			
<b>c Total miles</b> for the year (line 3a less line 3b) . . . . .			
4 <b>a</b> Business miles 01/01/2011 thru 06/30/2011 . . . . .			
<b>b</b> Business miles 07/01/2011 thru 12/31/2011 . . . . .			
5 Total commuting miles . . . . .			
STANDARD MILEAGE RATE	Vehicle 1	Vehicle 2	Vehicle 3
6 Do you qualify for standard mileage? ( <b>Preparer Use</b> ) . . . . .	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
7 Is this a leased vehicle? . . . . .	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
ACTUAL EXPENSES	Vehicle 1	Vehicle 2	Vehicle 3
8 Gasoline, oil, repairs, insurance, etc . . . . .			
9 Vehicle registration fee (excluding property tax) . . . . .			
10 Vehicle lease or rental fee . . . . .			
11 Inclusion amount ( <b>Preparer Use Only</b> ) . . . . .			
12 Depreciation ( <b>Preparer Use Only</b> ) . . . . .			
13 Parking fees, tolls, and local transportation . . . . .			
14 Portion of vehicle registration fee based on value . . . . .			
15 Interest on vehicle . . . . .			
DEPRECIATION/DISPOSITIONS	Vehicle 1	Vehicle 2	Vehicle 3
16 Cost or basis . . . . .			
17 Is this an electric vehicle? . . . . .	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
18 Is this qualified Indian reservation property? . . . . .	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
19 Type of vehicle ( <b>Preparer Use</b> ) . . . . .			
20 Section 179 expense ( <b>Preparer Use</b> ) . . . . .			
21 Qualified Property for Economic Stimulus? ( <b>Preparer Use</b> ) . . . . .	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
22 Qualified Property for Qualified Disaster Area? ( <b>Preparer Use</b> ) . . . . .	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
23 Kansas Disaster Zone? ( <b>Preparer Use</b> ) . . . . .	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
24 Qualified GO Zone Property ( <b>Preparer Use</b> ) . . . . .	<input type="checkbox"/> Reg <input type="checkbox"/> Ext <input type="checkbox"/> N/A	<input type="checkbox"/> Reg <input type="checkbox"/> Ext <input type="checkbox"/> N/A	<input type="checkbox"/> Reg <input type="checkbox"/> Ext <input type="checkbox"/> N/A
25 Percentage for SDA? ( <b>Preparer Use</b> ) . . . . .	<input type="checkbox"/> 100%/50% <input type="checkbox"/> 30% <input type="checkbox"/> No	<input type="checkbox"/> 100%/50% <input type="checkbox"/> 30% <input type="checkbox"/> No	<input type="checkbox"/> 100%/50% <input type="checkbox"/> 30% <input type="checkbox"/> No
26 Elect OUT of SDA? ( <b>Preparer Use</b> ) . . . . .	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
27 Elect 30% in place of 50% SDA ( <b>Preparer Use</b> ) . . . . .	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
28 Date sold . . . . .			
29 Date acquired, if different from line 2 . . . . .			
30 Sales price . . . . .			
31 Expense of sale . . . . .			
32 Gain/loss basis, if different ( <b>Preparer Use</b> ) . . . . .			
33 AMT gain/loss basis, if different ( <b>Preparer Use</b> ) . . . . .			
VEHICLE QUESTIONS	Vehicle 1	Vehicle 2	Vehicle 3
34 Is another vehicle available for personal use? . . . . .	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
35 Was vehicle available during off duty hours? . . . . .	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
36 Was vehicle used primarily by a greater than 5% owner or related person? . . . . .	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
37 Do you have evidence to support the business use claimed? . . . . .			<input type="checkbox"/> Yes <input type="checkbox"/> No
38 If <b>yes</b> , is the evidence written? . . . . .			<input type="checkbox"/> Yes <input type="checkbox"/> No

# Business Income and Expenses

ORG19

## GENERAL INFORMATION

1 Check ownership . . . . .  Taxpayer     Spouse     Joint

2 Business name . . . . . \_\_\_\_\_

3 a Business street address . . . . . \_\_\_\_\_

    b 1 City, State and Zip Code, or . . . . . \_\_\_\_\_

    2 Foreign country . . . . . \_\_\_\_\_

4 Principal business/profession . . . . . \_\_\_\_\_

5 Employer ID number . . . . . \_\_\_\_\_

6 Business code (Preparer Use Only) . . . . . \_\_\_\_\_

7 Was this business fully disposed of in a fully taxable transaction during 2011? . . . . .  Yes     No

8 Accounting method:  
     Cash       Accrual       Other (specify)  \_\_\_\_\_

9 Method used to value closing inventory:  
     Cost       Lower of       Other (explain)  \_\_\_\_\_  
                     cost or  
                     market

10 Was there a change in determining quantities, costs, or valuations between opening/closing inventory?  
     (If yes, attach explanation) . . . . .  Yes     No

11 Did you materially participate in the operation of this business during 2011? . . . . .  Yes     No

12 Did you start or acquire this business during 2011? . . . . .  Yes     No

13 a Did you make any payments in 2011 that require you to file Forms 1099? . . . . .  Yes     No

    b If yes, did you or will you file all the required Forms 1099? . . . . .  Yes     No

14 At-risk determination:

    a Is all of the investment in this activity at risk? . . . . .  Yes     No

    b Is some of the investment in this activity not at risk? . . . . .  Yes     No

15 Did you have unallowed passive losses in 2010? . . . . .  Yes     No

16 a Treat all MACRS assets for this activity as qualified Indian reservation property? . . . . .  Yes     No

    b Treat all assets acquired after August 27, 2005 as qualified GO Zone property? . . . . .  Regular     Extension     No

    c Treat all assets acquired after May 4, 2007 as qualified Kansas Disaster Zone property? . . . . .  Yes     No

    d Was this business located in a Qualified Disaster Area? . . . . .  Yes     No

Complete ORG51 for Asset Acquisitions and ORG50 for Dispositions.

INCOME	2011	2010
17 Gross receipts or sales . . . . .		
18 Returns and allowances plus other adjustments . . . . .		
19 Other income (include federal/state gas tax credit/refund) . . . . .		

COST OF GOODS SOLD – IF APPLICABLE	2011	2010
20 Inventory at beginning of year . . . . .		
21 Purchases . . . . .		
22 Items withdrawn for personal use . . . . .		
23 Cost of labor (do not include your salary) . . . . .		
24 Materials and supplies . . . . .		
25 Other costs . . . . .		
26 Inventory at end of year . . . . .		

**Business Income and Expenses (continued)**

**ORG19**

EXPENSES	2011	2010
Business name _____		
<b>27</b> Advertising . . . . .		
<b>28</b> Car and truck expenses (complete ORG18) . . . . .		
<b>29</b> Commissions and fees . . . . .		
<b>30</b> Contract labor . . . . .		
<b>31</b> Depletion . . . . .		
<b>32</b> Depreciation and Section 179 deduction ( <b>Preparer Use Only</b> ) . . . . .		
<b>33</b> Employee benefit programs:		
<b>a</b> Employee health insurance premiums . . . . .		
<b>b</b> Other employee benefit programs . . . . .		
<b>34</b> Insurance (other than health) . . . . .		
<b>35</b> Self-employed health insurance attributable to this business . . . . .		
<b>36</b> Interest:		
<b>a</b> Mortgage paid to banks not reported to you on Form 1098 . . . . .		
<b>b</b> Other . . . . .		
<b>37</b> Legal and professional services . . . . .		
<b>38</b> Office expenses . . . . .		
<b>39</b> Pension and profit-sharing plans . . . . .		
<b>40</b> Rent or lease:		
<b>a</b> Machinery and equipment (enter vehicle lease on ORG18) . . . . .		
<b>b</b> Other business property . . . . .		
<b>41</b> Repairs and maintenance . . . . .		
<b>42</b> Supplies (not included in cost of goods sold) . . . . .		
<b>43</b> Taxes and licenses not reported to you on Form 1098 . . . . .		
<b>44</b> Travel, meals, and entertainment:		
<b>a</b> Travel . . . . .		
<b>b</b> Meals and entertainment subject to 50% limit . . . . .		
<b>c</b> Meals subject to 80% limit . . . . .		
<b>d</b> Meals and entertainment not subject to limit . . . . .		
<b>45</b> Utilities . . . . .		
<b>46</b> Gross wages . . . . .		
<b>47</b> Other expenses:		
_____ . . . . .		
_____ . . . . .		
_____ . . . . .		
_____ . . . . .		
_____ . . . . .		
_____ . . . . .		
_____ . . . . .		
_____ . . . . .		
<b>48</b> Expenses for business use of your home ( <b>Preparer Use Only</b> ) . . . . .		
Complete ORG20 for Business Use of Home.		
<b>49</b> Qualified pension plan start-up costs . . . . .		

# Rent and Royalty Income and Expenses

ORG25

## BASIC PROPERTY INFORMATION

Property description: \_\_\_\_\_  
 Property type: \* \_\_\_\_\_ If type is other, enter a description: \_\_\_\_\_  
 Location (street address): \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_ Zip: \_\_\_\_\_  
 Foreign Country: \_\_\_\_\_

1 Check property owner . . . . .  Taxpayer     Spouse     Joint

	Yes	No
2 a Did you make any payments that would require you to file Form(s) 1099? . . . . .	<input type="checkbox"/>	<input type="checkbox"/>
b If <b>yes</b> , did you or will you file all required Forms(s) 1099? . . . . .	<input type="checkbox"/>	<input type="checkbox"/>

3 a Enter the ownership percentage (if not 100%). . . . . _____		
b If not 100%, are you reporting 100% of the income and expenses? . . . . .	<input type="checkbox"/>	<input type="checkbox"/>

4 Is this a rental property? (If **yes**, answer questions 5 through 11; if **no**, skip to question 12.) . . . . .  Yes  No

5 Did you have personal use of this property or rent it for part of the year at less than fair rental value? . . . . .  Yes  No

6 For all rental properties, **enter the number of days** during 2011 that:

a The property was rented (or available for rent) at fair rental value . . . . .		
b The property was used personally or rented at less than fair rental value . . . . .	_____	_____
c You owned the property, if not the entire year . . . . .	_____	_____

7 a Does this rental have multiple living units and you live in one of the units? . . . . .	<input type="checkbox"/>	<input type="checkbox"/>
b If <b>yes</b> , enter percentage of rental use . . . . .	_____	_____

8 Did you actively participate in this property's management during 2011? . . . . .  Yes  No

9 Did you materially participate in this property's management during 2011? . . . . .  Yes  No

10 Do you want to treat this property as non-passive? . . . . .  Yes  No

11 Did this property have unallowed passive losses in 2010? . . . . .  Yes  No

12 Did you dispose of this property in a fully taxable transaction? . . . . .  Yes  No

13 Check this box if some of this investment was **not** at-risk . . . . .  Yes  No

14 a Treat all MACRS assets for this activity as qualified Indian reservation property? . . . . .  Yes  No

  b Treat all assets acquired after August 27, 2005 as qualified GO Zone property? . . . . . **Regular**  **Extension**  **No**

  c Treat all assets acquired after May 4, 2007 as qualified Kansas Disaster Zone property? . . . . .  Yes  No

  d Was this activity located in a Qualified Disaster Area? . . . . .  Yes  No

Complete ORG51 for Asset Acquisitions and ORG50 for Dispositions.

INCOME	2011	2010
15 Rents received . . . . .		
16 Royalties received . . . . .		

- \* Property Types:**
- 1 Single family residence
  - 2 Multi-family residence
  - 3 Vacation/short-term rental
  - 4 Commercial
  - 5 Land
  - 6 Royalties
  - 7 Self-rental
  - 8 Other



**Rent and Royalty Income and Expenses (continued)**

**ORG25**

<b>EXPENSES</b>		<b>2011</b>	<b>2010</b>
	Property location . . . . . _____		
<b>17</b>	Advertising . . . . . _____		
<b>18 a</b>	Automobile (complete ORG18 for autos) . . . . . _____		
<b>b</b>	Travel . . . . . _____		
<b>19</b>	Cleaning and maintenance . . . . . _____		
<b>20</b>	Commissions . . . . . _____		
<b>21 a</b>	Mortgage insurance premiums — qualified . . . . . _____		
<b>b</b>	Other insurance . . . . . _____		
<b>22</b>	Legal and professional fees . . . . . _____		
<b>23</b>	Management fees . . . . . _____		
<b>24 a</b>	Mortgage interest paid to banks — qualified . . . . . _____		
<b>b</b>	Mortgage interest paid to banks — other . . . . . _____		
<b>25</b>	Other interest . . . . . _____		
<b>26</b>	Repairs . . . . . _____		
<b>27</b>	Supplies . . . . . _____		
<b>28 a</b>	Real estate taxes . . . . . _____		
<b>b</b>	Other taxes . . . . . _____		
<b>29</b>	Utilities . . . . . _____		
<b>30</b>	Other expenses:		
<b>a</b>	_____ . . . . . _____		
<b>b</b>	_____ . . . . . _____		
<b>c</b>	_____ . . . . . _____		
<b>d</b>	_____ . . . . . _____		
<b>e</b>	_____ . . . . . _____		
<b>31 a</b>	Depreciation and Section 179 deduction <b>(Preparer Use Only)</b> . . . . . _____		
<b>b</b>	Depletion <b>(Preparer Use Only)</b> . . . . . _____		