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PILLERI ROMANO, P.C.
ZERO GOVERNORS AVENUE, SUITE 29
MEDFORD, MA 02155
TEL (781) 350-4833

2011 TAX ORGANIZER

**T
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This tax organizer has been prepared for your use in gathering the information needed for your 2011 tax return.

To save you time, selected information from your 2010 tax return has been entered in this organizer. Please line through any information that does not apply to your 2011 tax return.

In some cases, 2010 amounts have been included in a separate column. These amounts are for comparison purposes only. You do not need to change these prior year amounts.

If we may be of further assistance, please contact us at your convenience.

(781) 350-4833

REMOVE THIS SHEET PRIOR TO RETURNING THE COMPLETED ORGANIZER

**F
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2011 TAX ORGANIZER

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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	Date
Spouse Signature	Date



Questions (Page 1 of 4)

For any question answered Yes, please attach supporting detail or documents.

Personal Information:

- | | Yes | No |
|---|--------------------------|--------------------------|
| Did your marital status change during 2011? | <input type="checkbox"/> | <input type="checkbox"/> |
| If married, do you and your spouse want to file separate returns? | <input type="checkbox"/> | <input type="checkbox"/> |
| Did your address change during 2011? | <input type="checkbox"/> | <input type="checkbox"/> |
| Can you or your spouse be claimed as a dependent by another taxpayer? | <input type="checkbox"/> | <input type="checkbox"/> |

Dependents:

- | | | |
|--|--------------------------|--------------------------|
| Were there any changes in dependents from the prior year? | <input type="checkbox"/> | <input type="checkbox"/> |
| Note: Include non-child dependents for whom you provided more than half the support | | |
| Did you pay for child care while you worked or looked for work? | <input type="checkbox"/> | <input type="checkbox"/> |
| Do you have any children under age 18 with unearned income more than \$950? | <input type="checkbox"/> | <input type="checkbox"/> |
| Do you have any children age 18 or student children, aged 19 to 23, who did not provide more than half of their cost of support with earned income and that have unearned income of more than \$950? | <input type="checkbox"/> | <input type="checkbox"/> |
| Did you adopt a child or begin adoption proceedings during 2011? | <input type="checkbox"/> | <input type="checkbox"/> |

Purchases, Sales and Debt:

- | | | |
|---|--------------------------|--------------------------|
| Did you have any debts canceled, forgiven or refinanced during 2011? | <input type="checkbox"/> | <input type="checkbox"/> |
| Did you start a new business, purchase a new rental property, farm or acquire any new interest in any partnership or S corporation during 2011? | <input type="checkbox"/> | <input type="checkbox"/> |
| Did you sell an existing business, rental property, farm or any existing interest in a partnership or S corporation during 2011? | <input type="checkbox"/> | <input type="checkbox"/> |
| Did you sell, exchange or purchase any real estate in 2011? If so, please attach closing statements. | <input type="checkbox"/> | <input type="checkbox"/> |
| Did you withdraw any amounts from your Individual Retirement Account (IRA) or Roth IRA to acquire a principal residence? | <input type="checkbox"/> | <input type="checkbox"/> |
| Did you receive grants of stock options from your employer, exercise any stock options granted to you or dispose of any stock acquired under a qualified employee stock purchase plan? | <input type="checkbox"/> | <input type="checkbox"/> |
| Did you pay any student loan interest in 2011? | <input type="checkbox"/> | <input type="checkbox"/> |
| Are your total mortgages on your first and/or second residence greater than \$1,000,000? If so, please provide the principal balance and interest rate at the beginning and the end of the year. | <input type="checkbox"/> | <input type="checkbox"/> |
| Did you have an outstanding home equity loan at the end of 2011? If so, please provide the principal balance and interest rate at the beginning and end of the year. | <input type="checkbox"/> | <input type="checkbox"/> |
| Did you take out a home equity loan in 2011? | <input type="checkbox"/> | <input type="checkbox"/> |
| Are you claiming a deduction for mortgage interest paid to a financial institution and someone else received the Form 1098? | <input type="checkbox"/> | <input type="checkbox"/> |
| Did you or your mortgagee receive any mortgage assistance payments? If Yes, enclose and Forms 1098-MA. | <input type="checkbox"/> | <input type="checkbox"/> |



Purchases, Sales and Debt (continued):

- | | Yes | No |
|--|--------------------------|--------------------------|
| Did you engage in any put or call transactions? If Yes, please provide details. | <input type="checkbox"/> | <input type="checkbox"/> |
| Did you close any open short sales during 2011? | <input type="checkbox"/> | <input type="checkbox"/> |
| Did you sell any securities not reported on your Form 1099-B? | <input type="checkbox"/> | <input type="checkbox"/> |

Itemized Deductions:

- | | | |
|---|--------------------------|--------------------------|
| Did you contribute property (other than cash) with a fair market value of more than \$5,000 to a charitable organization? | <input type="checkbox"/> | <input type="checkbox"/> |
| Did you incur any casualty or theft losses during the year? | <input type="checkbox"/> | <input type="checkbox"/> |
| Did you make any large purchases, such as motor vehicles and boats? | <input type="checkbox"/> | <input type="checkbox"/> |
| Did you incur any casualty or loss attributable to a federally declared disaster? | <input type="checkbox"/> | <input type="checkbox"/> |

Miscellaneous:

- | | | | | |
|---|---|--------------------------|--|--|
| Did you or your spouse have any transactions pertaining to a medical savings account (MSA) during 2011? | <input type="checkbox"/> | <input type="checkbox"/> | | |
| If you received a distribution from an MSA, please include Form 1099-SA. | | | | |
| Did you or your spouse have any transactions pertaining to a health savings account (HSA) during 2011? | <input type="checkbox"/> | <input type="checkbox"/> | | |
| If you received a distribution from an HSA, please include Form 1099-SA. | | | | |
| Did you or your spouse contribute to a Roth IRA or convert an existing IRA into a Roth IRA? | <input type="checkbox"/> | <input type="checkbox"/> | | |
| Did you or your spouse roll into a Roth IRA any distributions from a retirement plan, an annuity plan, tax shelter annuity or deferred compensation plan? | <input type="checkbox"/> | <input type="checkbox"/> | | |
| In 2010 did you or your spouse convert an IRA into a Roth IRA and not elect to include the taxable amount in your 2010 taxable income? | <input type="checkbox"/> | <input type="checkbox"/> | | |
| Did you rollover any amounts from a qualified retirement plan to a Roth IRA or Designated Roth Account and not elect to include the taxable distribution in your 2010 taxable income? | <input type="checkbox"/> | <input type="checkbox"/> | | |
| Did you withdraw any amounts from your IRA to pay for higher education expenses incurred by you, your spouse, your children or grandchildren? | <input type="checkbox"/> | <input type="checkbox"/> | | |
| Did you withdraw amounts from a Coverdell Education Savings Account or Qualified Education Program (Section 529 plan)? If Yes, include Form 1099-Q. | <input type="checkbox"/> | <input type="checkbox"/> | | |
| Did you or your dependents incur any post-secondary education expenses, such as tuition? | <input type="checkbox"/> | <input type="checkbox"/> | | |
| If you or your spouse are self-employed, are you or your spouse eligible to be covered under an employer's health plan at another job? If Yes, how many months were you covered? | <input type="checkbox"/> | <input type="checkbox"/> | | |
| | <table border="1" style="display: inline-table; width: 50px; height: 20px; vertical-align: middle;"><tr><td style="text-align: center;">Months</td></tr><tr><td style="text-align: center;"> </td></tr></table> | Months | | |
| Months | | | | |
| | | | | |
| Did you move to a different home because of a change in the location of your job? | <input type="checkbox"/> | <input type="checkbox"/> | | |
| 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? | <input type="checkbox"/> | <input type="checkbox"/> | | |
| Did you receive unreported tip income of \$20 or more in any month of 2011? | <input type="checkbox"/> | <input type="checkbox"/> | | |
| Did you or your spouse receive distributions from long-term care insurance contracts? | <input type="checkbox"/> | <input type="checkbox"/> | | |
| If Yes, please include Form 1099-LTC. | | | | |
| Were you or your spouse a grantor or transferor for a foreign trust, have an interest in or a signature or other authority over a bank account, securities account or other financial account in a foreign country? | <input type="checkbox"/> | <input type="checkbox"/> | | |
| Did you or your spouse own any foreign financial assets? | <input type="checkbox"/> | <input type="checkbox"/> | | |
| Did you create or transfer money or property to a foreign trust? | <input type="checkbox"/> | <input type="checkbox"/> | | |
| Did you purchase a new alternative technology vehicle, including a qualified plug-in electric drive motor vehicle in 2011? | <input type="checkbox"/> | <input type="checkbox"/> | | |



Miscellaneous: (continued)

- | | Yes | No |
|--|--------------------------|--------------------------|
| Did you use gasoline or special fuels for business or farm purposes (other than for a highway vehicle) during the year? | <input type="checkbox"/> | <input type="checkbox"/> |
| Have you received a punitive damage award or an award for damages other than for physical injuries or illness? | <input type="checkbox"/> | <input type="checkbox"/> |
| Were you notified by the IRS or other taxing authority of any changes in prior year returns? | <input type="checkbox"/> | <input type="checkbox"/> |
| Did you lose your job during 2011 because of foreign competition and pay for your own health insurance? | <input type="checkbox"/> | <input type="checkbox"/> |
| Did you install any alternative energy equipment in your residence such as solar water heaters, solar electricity equipment (photovoltaic) or fuel cells? | <input type="checkbox"/> | <input type="checkbox"/> |
| Did you install any energy efficiency improvements, or energy property in your residence such as exterior doors or windows, insulation, heat pumps, furnaces, central air conditioners or water heaters? | <input type="checkbox"/> | <input type="checkbox"/> |
| Have you been an identity theft victim and have you contacted the IRS? | <input type="checkbox"/> | <input type="checkbox"/> |
| If Yes, please furnish the 6-digit identity protection PIN issued to you by the IRS | | _____ |
| Did you engage in any bartering transactions? | <input type="checkbox"/> | <input type="checkbox"/> |
| Did you make gifts of more than \$13,000 to any individual? | <input type="checkbox"/> | <input type="checkbox"/> |
| Did you have any foreign income or pay any foreign taxes during 2011? | <input type="checkbox"/> | <input type="checkbox"/> |

Severance/Retirement:

- | | | |
|---|--------------------------|--------------------------|
| Did you retire or change jobs in 2011? | <input type="checkbox"/> | <input type="checkbox"/> |
| Did you receive deferred, retirement or severance compensation? | <input type="checkbox"/> | <input type="checkbox"/> |

If Yes, enter the date received (Mo/Da/Yr).

Date

- | | | |
|--|--------------------------|--------------------------|
| Did you or your spouse turn 70 1/2 during the year and have money in an IRA or other retirement account while not taking a distribution? | <input type="checkbox"/> | <input type="checkbox"/> |
|--|--------------------------|--------------------------|



Sale of Your Home:

Did you sell your home in 2011?

If Yes, did you own and occupy the home as your principal residence for at least two years of the five-year period prior to the sale?

Did you ever rent out this property?

Did you ever use any portion of the home for business purposes?

Have you or your spouse sold a principal residence within the last two years?

At the time of the sale, the residence was owned by the: Taxpayer Spouse Both

Additional Information:

For any trust you created or that you are trustee, have any beneficiaries died during 2011?

Did you or your spouse make any contributions to Qualified State Tuition Plans (Section 529 plans) during 2011?

If Yes, enter the following:

Name of Designated Beneficiary	Social Security Number	State Sponsoring Plan	Account Number	2011 Amount Contributed



Personal Information

Taxpayer:

First Name and Initial	Last Name		ON FILE Social Security Number
Occupation	Date of Birth (Mo/Da/Yr)	Date of Death (Mo/Da/Yr)	

Spouse:

First Name and Initial	Last Name		Social Security Number
Occupation	Date of Birth (Mo/Da/Yr)	Date of Death (Mo/Da/Yr)	

Contact Information:

Street Address		Apartment Number	
City	State	ZIP or Postal Code	
Province or County			
Foreign Country			
Taxpayer Daytime/Work Phone	Spouse Daytime/Work Phone		
Taxpayer Evening/Home Phone	Spouse Evening/Home Phone		
Taxpayer Cell Phone	Spouse Cell Phone		
Taxpayer Fax Number	Spouse Fax Number		
Taxpayer Email Address			
Spouse Email Address			
Preferred Method of Contact			

May the IRS or other taxing authority discuss the return with the preparer?

Is the taxpayer claimed as a dependent on someone else's tax return?

Yes	No
X	

Are you considered legally blind per IRS regulations?

Do you want to contribute to the Presidential Election Campaign Fund?

Taxpayer		Spouse	
Yes	No	Yes	No



Dependents and Wages

Dependent Information:

Did dependent have income over \$3,700?



First Name and Initial	Last Name	Social Security Number	Date of Birth (Mo/Da/Yr)	Relationship to Taxpayer	Months Lived in Your Home	X if Disabled	Yes or No

Please provide the name of any person living with you who is claimed as a dependent on someone else's tax return _____

Please list the years that a release of claim to exemption is given for a dependent child not living with you _____

Wages and Salaries: Please enclose all copies of your current year Forms W-2

TS	Employer's Name	Taxable Wages	Tax Withheld				
			Federal	FICA/TIER1	Medicare	State	Local



Electronic Filing

Electronic Filing: Please enclose all copies of your current year Forms W-2

Electronic filing is the means by which your return is transmitted directly to the IRS. The IRS has implemented an electronic filing mandate requiring certain preparers to file all returns that they prepare electronically. Some states also require certain preparers to electronically file state returns prepared. The IRS and some states allow taxpayers to elect not to file their returns electronically.

Do not electronically file the federal return

Do not electronically file the state return(s)

The IRS requires the use of a 5-digit self-selected Personal Identification Number (PIN) in lieu of mailing a signature document when electronically filing.

Would you like to use a randomly generated PIN?

Yes	No
<input type="checkbox"/>	<input type="checkbox"/>

Taxpayer

Spouse

If No, please enter a 5-digit self-selected PIN:

Taxpayer PIN _____

Spouse PIN _____



Direct Deposit and Withdrawal

Direct Deposit and Electronic Withdrawal Account Information:

The IRS and certain states allow refunds to be deposited directly into your financial institution account, regardless of the means used to file the return. For balance due returns to be filed electronically, the IRS and many states allow the entire amount due to be paid using electronic withdrawal. If you would like to have your refund deposited directly into your account or pay a balance due by using an electronic withdrawal, please complete the following information.

(To properly file your return, please attach a voided check or a copy of a monthly statement for your account.)

Owner of account Taxpayer Spouse Joint

Select type of account Checking Trad. Savings IRA Savings HSA Savings
 Archer MSA Savings Coverdell Ed.Savings

Name of financial institution

Financial Institution Routing Transit Number (if known)
(Use the routing number from a check, NOT a deposit slip. They can be different.
The Routing Transit Number must begin with 01 through 12 or 21 through 32.)

Your account number

Is this a business account?

Do you want your refund deposited directly into your financial institution account?

If you are filing a balance due return electronically, do you want to pay the amount due using an electronic withdrawal?

What amount do you want withdrawn if not the entire balance due?

What date do you want the withdrawal done? (Mo/Da/Yr)

Yes	No

Owner of account Taxpayer Spouse Joint

Select type of account Checking Trad. Savings IRA Savings HSA Savings
 Archer MSA Savings Coverdell Ed.Savings

Name of financial institution

Financial Institution Routing Transit Number (if known)
(Use the routing number from a check, NOT a deposit slip. They can be different.
The Routing Transit Number must begin with 01 through 12 or 21 through 32.)

Your account number

Is this a business account?

Do you want your refund deposited directly into your financial institution account?

If you are filing a balance due return electronically, do you want to pay the amount due using an electronic withdrawal?

What amount do you want withdrawn if not the entire balance due?

What date do you want the withdrawal done? (Mo/Da/Yr)

Yes	No



IRA, Pension, Annuity and Retirement Plan Information

Individual Retirement Account (IRA):

TS T
 Name of payer

IRA Questions for 2011:

Are you covered by an employer's retirement plan?
 If no, is your spouse covered by an employer's retirement plan?
 Do you want to limit your IRA contribution to the maximum amount deductible on your tax return?
 If no, do you want to contribute the maximum allowable amount to your IRA even though you may not qualify for an IRA deduction?
 Did you receive distributions in 2011 from a traditional IRA, Roth IRA or Qualified Education Account?
 Did you convert a traditional IRA to a Roth IRA in 2011?
 Did you use your IRA as security for a loan this year?
 Did you have any transactions with your IRA during the year?
 If Yes, please explain.

Yes	No
X	

IRA Values, Rollovers, and Distributions: Please enclose copies of all Forms 1099-R

Total value of all traditional IRAs on December 31, 2011
 Outstanding rollovers on December 31, 2011
 IRA distributions received during 2011
 Total distributions converted to Roth IRAs
 Total retirement plans converted to Roth IRAs

Contributions: Please enclose copies of all Forms 5498

IRA:
 Contributions in 2011 for the 2011 tax return
 Contributions in 2012 for the 2011 tax return
 Amount for 2011 you choose to be treated as nondeductible

Roth IRA:
 Contributions made for the 2011 tax year

Pensions and Annuities: Please enclose all Forms 1099-R and any nontaxable distribution details

TSJ	Name of Payer	2011 Gross Distributions	Taxable Amount	Federal Tax Withheld	State Tax Withheld	Is this a		2010 Gross Distributions
						Rollover?	IRA?	

Self-Employed Retirement Plan: Please enclose copies of all Forms 1099-R

Taxpayer		Spouse	
Yes	No	Yes	No
2011 Amount		2011 Amount	

Have you established a self-employed retirement or SIMPLE plan with deductible contributions?
 Do you want to contribute the maximum amount allowed?
Contributions to:
 Simplified employee pension plan
 Defined benefit plan
 Defined contribution plan
 SIMPLE plan



Miscellaneous Income, Adjustments and Alimony

Please enclose Forms: W-2G, 1099-MISC, 1099-RRB, 1099-SSA, 1099-SA, 1099-LTC, 1099-G and 1098-E

Miscellaneous Income and Adjustments:

	TSJ _____		TSJ _____	
	2011 Amount	2010 Amount	2011 Amount	2010 Amount
Taxable pensions and annuities received				
Nontaxable pensions and annuities received				
Federal withholding on pensions and annuities				
State withholding on pensions and annuities				
Unemployment compensation received				
Unemployment compensation repaid in 2011				
Social security benefits received				
Social security benefits repaid in 2011				
Medicare premiums withheld				
Tier 1 railroad retirement benefits received				
Tier 1 railroad retirement benefits repaid in 2011				
Taxable IRA distributions				
Nontaxable IRA distributions				
Total lump sum social security received				
Lump sum taxable social security				
Other federal withholding				
Other state withholding				

State and Local Income Tax Refunds:

TSJ	State	City	Tax Year	Income Tax Refund	
				State	Local

Other Income:

TSJ	Nature and Source	2011 Amount	2010 Amount

Alimony Paid or Received:

TSJ	Recipient's Name	Recipient's Social Security No.	Alimony Received?	2011 Amount	2010 Amount



Miscellaneous Adjustments

Educator Expenses: Deduction for amounts paid by educators of kindergarten through Grade 12

TS	2011 Amount	2010 Amount

Health Savings Accounts (HSAs)

TS	Description	2011 Amount	2010 Amount
	Contributions made for 2011		
	Distributions received from all HSAs in 2011		

Were all distributions from your HSA for unreimbursed medical expenses? Did you or your spouse enroll in Medicare? If yes, what month did you enroll? What month did your spouse enroll?	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; text-align: center;">Yes</td> <td style="width: 50%; text-align: center;">No</td> </tr> <tr> <td style="text-align: center;"> </td> <td style="text-align: center;"> </td> </tr> <tr> <td style="text-align: center;"> </td> <td style="text-align: center;"> </td> </tr> </table>	Yes	No					
Yes	No							

Other Adjustments to Income: Please enclose all Forms 1098-E for Student Loan Interest Paid

TSJ	Nature and Source	2011 Amount	2010 Amount



Itemized Deductions - Mortgage Interest and Points

Mortgage Questions for 2011:

	<input type="checkbox"/>	<input type="checkbox"/>
If you purchased or sold your home, did you include any mortgage interest from your closing statement in the amount below? . . .	<input type="checkbox"/>	<input type="checkbox"/>
Did you refinance your home? (If Yes, please enclose the closing statement.)	<input type="checkbox"/>	<input type="checkbox"/>
If Yes, how many years is your new mortgage loan? _____		
Did you purchase a new home or sell your former home during the year?	<input type="checkbox"/>	<input type="checkbox"/>
If Yes, please enclose the closing statements from the purchase and sale of your new and former homes.		
If Yes, also, did you (or your spouse, if married) have an ownership interest in a principal residence in the US during the 3 year period prior to the purchase of this home?	<input type="checkbox"/>	<input type="checkbox"/>
If Yes, did you (and your spouse, if married at the time of purchase) own and use the same home as a principal residence in the U.S. for any 5 consecutive year period during the 8 year period ending on the purchase date of the new home?	<input type="checkbox"/>	<input type="checkbox"/>

Home Mortgage Interest Paid To Financial Institutions:

TSJ	Paid To	Did You Receive Form 1098?		2011 Amount	2010 Amount
		Yes	No		

Other Home Mortgage Interest Paid:

TSJ	Paid To		ID Number	2011 Amount	2010 Amount
	Name	Address			

Deductible Points:

TSJ	Paid To	Did You Receive Form 1098?		2011 Amount	2010 Amount
		Yes	No		

Mortgage Insurance Premiums:

Premiums paid or accrued for qualified mortgage insurance.

TSJ	2011 Amount	2010 Amount

Investment Interest Expense:

Interest paid on money you borrowed that is allocable to property held for investment.

TSJ	Paid To	2011 Amount	2010 Amount



Itemized Deductions - Contributions

Cash Contributions:

You cannot deduct a cash contribution, regardless of the amount, unless you keep as a record of the contribution a bank record (such as a canceled check, a bank copy of a canceled check, or a bank statement containing the name of the charity, the date, and the amount) or a written communication from the charity. The written communication must include the name of the charity, date of the contribution, and amount of the contribution. Clothes and household items donated must be in good, used condition or better in order to be deductible unless the item donated is worth more than \$500 and you have the item's value appraised. Attach a copy of the appraisal. Include any vehicles donated to charity. Attach Forms 1098-C received from the charity.

TSJ	Organization or Description of Contribution	2011 Amount	2010 Amount

TSJ	Conservation Real Property	2011 Amount	2010 Amount
	100% limit		
	50% limit		

TSJ	Description	2011 Miles	2010 Miles
	Number of miles traveled performing volunteer work for qualified charitable organizations		

Noncash Contributions Totaling Less Than or Equal to \$500:

TSJ	Description of Donated Property	2011 Amount	2010 Amount

Noncash Contributions Totaling More Than \$500:

TSJ _____
 Description of the donated property _____

Donee organization name _____

Donee organization address _____

Date the property was acquired by the taxpayer (Mo/Da/Yr) _____

Date the property was donated (Mo/Da/Yr) _____

Cost or basis of the donated property

Fair market value of the donated property

Which of the following methods was used to determine the fair market value? CAUTION: Generally, contributions in excess of \$5,000 of similar property will require an appraisal (does not apply to marketable securities)

- Appraisal
 Thrift shop value
 Catalog
 Comparable sale

Other - please explain _____

Which of the following describes how this donated property was acquired?

- Purchase
 Gift
 Inheritance
 Exchange



Federal Tax Payments

Refund Application:

If you have an overpayment of 2011 taxes, do you want the excess:

Refunded Yes No
 Applied to your 2012 estimated tax liability Yes No

Federal Estimated Tax Payments:

2011 1st Quarter Estimate (Due 04-18-2011)
 2011 2nd Quarter Estimate (Due 06-15-2011)
 2011 3rd Quarter Estimate (Due 09-15-2011)
 2011 4th Quarter Estimate (Due 01-17-2012)

Amount Due	Date Paid if Not Date Due (Mo/Da/Yr)	Amount Paid

2010 overpayment applied to 2011 estimate

Tax Planning Information for Tax Year 2012:

Do you expect any of the following to occur in 2012?

	Yes	No
A change in your marital status	<input type="checkbox"/>	<input type="checkbox"/>
A change in the number of your dependents	<input type="checkbox"/>	<input type="checkbox"/>
A substantial change in your income	<input type="checkbox"/>	<input type="checkbox"/>
A substantial change in your withholding	<input type="checkbox"/>	<input type="checkbox"/>
A substantial change in deductions	<input type="checkbox"/>	<input type="checkbox"/>

If you answered Yes to any of the above questions, please provide details.



State and City Tax Payments

State and City Estimated Tax Payments:

2011 1st Quarter Estimate
 2011 2nd Quarter Estimate
 2011 3rd Quarter Estimate
 2011 4th Quarter Estimate

TSJ ____ State/City _____		
Amount Due	Date Paid if Not Date Due (Mo/Da/Yr)	Amount Paid

2010 overpayment applied to 2011 estimate

Balance of prior year(s)' tax paid in 2011 plus
 amount paid with 2010 extensions

Estimated tax payments for 2010 paid in 2011

State and City Estimated Tax Payments:

2011 1st Quarter Estimate
 2011 2nd Quarter Estimate
 2011 3rd Quarter Estimate
 2011 4th Quarter Estimate

TSJ ____ State/City _____		
Amount Due	Date Paid if Not Date Due (Mo/Da/Yr)	Amount Paid

2010 overpayment applied to 2011 estimate

Balance of prior year(s)' tax paid in 2011 plus
 amount paid with 2010 extensions

Estimated tax payments for 2010 paid in 2011

State and City Estimated Tax Payments:

2011 1st Quarter Estimate
 2011 2nd Quarter Estimate
 2011 3rd Quarter Estimate
 2011 4th Quarter Estimate

TSJ ____ State/City _____		
Amount Due	Date Paid if Not Date Due (Mo/Da/Yr)	Amount Paid

2010 overpayment applied to 2011 estimate

Balance of prior year(s)' tax paid in 2011 plus
 amount paid with 2010 extensions

Estimated tax payments for 2010 paid in 2011



General Information:

Daytime telephone number (including area code)

Taxpayer
Spouse

Yes No
[] []

Has your address changed from 2010?

Do you qualify for the blind exemption?

Taxpayer
Spouse

Are you a noncustodial parent?

[] []

Total purchases in 2011 subject to Massachusetts use tax

[]

Sales/use tax paid to other state or jurisdiction

[]

Residency Information:

From To
(Mo/Da/Yr) (Mo/Da/Yr)

If you did not live in Massachusetts for all of 2011, enter the dates you did live in Massachusetts

Enter the state names other than Massachusetts where you had income

Voluntary Contributions:

Do you want to contribute \$1.00 to the Massachusetts Election Campaign Fund?

Yes No
[] []
[] []

Taxpayer
Spouse

Enter the amount you wish to contribute on your 2011 tax return to:

Organ Transplant Fund []

Endangered Wildlife Conservation []

Massachusetts AIDS Fund []

Massachusetts United States Olympic Fund []

Massachusetts Military Family Relief Fund []

Rental Deduction Information:

Name of landlord

Rent paid []

Enter Any Additional Massachusetts Information:

[]
[]



Schedule HC Private Health Insurance

Name of Insurance Company or Administrator

Taxpayer
Spouse

Federal Identification Number of Insurance Company

Taxpayer
Spouse

Subscriber Number

Taxpayer
Spouse

Schedule HC Government - Subsidized Health Insurance

Taxpayer **Spouse**

Commonwealth Care	<input type="checkbox"/>	<input type="checkbox"/>
MassHealth	<input type="checkbox"/>	<input type="checkbox"/>
Medicare	<input type="checkbox"/>	<input type="checkbox"/>
Veterans Administration Program Enrollment	<input type="checkbox"/>	<input type="checkbox"/>
Tri-Care	<input type="checkbox"/>	<input type="checkbox"/>
Other (see instructions). Enter names(s) of provider(s) below	<input type="checkbox"/>	<input type="checkbox"/>
Applied for MassHealth or Commonwealth Care in 2011 and denied	<input type="checkbox"/>	<input type="checkbox"/>

Name of Other Provider

Taxpayer
Spouse

Months Covered by Health Insurance (if not all of 2011)

	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
Taxpayer	—	—	—	—	—	—	—	—	—	—	—	—
Spouse	—	—	—	—	—	—	—	—	—	—	—	—

Other Information

Taxpayer **Spouse**

Not issued Form MA 1099-HC