

QUARTERLY ESTIMATES PAID				
			Amount	Date Paid
Federal Tax	1st QTR		\$ _____	___/___/___
Estimates	2nd QTR		\$ _____	___/___/___
	3rd QTR		\$ _____	___/___/___
	4th QTR		\$ _____	___/___/___
(2011 Due Dates 4/18/11 6/15/11 9/15/11 and 1/17/12)				
Michigan Tax	1st QTR		\$ _____	___/___/___
Estimates	2nd QTR		\$ _____	___/___/___
	3rd QTR		\$ _____	___/___/___
	4th QTR		\$ _____	___/___/___
City Tax				
Estimates	Total		\$ _____	

CONTRIBUTIONS (MUST HAVE RECEIPTS)	
Total Of All Cash, Checks & Payroll Deductions	\$ _____
Total Value Of All NON-Cash* (Clothing & Merchandise)	\$ _____
Special Michigan Charities- Must Be Cash Or Check (Included In Above Totals)	
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
*Non-Cash Totals Over \$500 You Will Need To Provide The Name And Address Of Charity And The Fair Market Value Of The Items Donated	
Charity Miles	_____ Miles

MEDICAL, Dental, Optical	
Rx Drugs	\$ _____
Health Ins. Premiums You Paid	\$ _____
Medicare Ins. From SS Checks	\$ _____
Long-term Nursing Care Insurance	\$ _____
Nursing Home Care Or Nurses	\$ _____
Doctors, Dentist, Hospitals, Misc.	\$ _____
Eye Glasses, Contacts	\$ _____
Number Of Medical Miles	\$ _____

MISCELLANEOUS (List ONLY Unreimbursed Work Expenses)	
Safety Equipment	\$ _____
Tools	\$ _____
Supplies	\$ _____
Union Dues	\$ _____
Professional Dues & Licenses	\$ _____
Special Trade Miles (LOG MANDATORY)	\$ _____
Uniforms	\$ _____
Job Related Workshops	
1) Lodging	\$ _____
2) Meals	\$ _____
3) Transportation	\$ _____
4) Workshop Fees	\$ _____
Job Related Publications	\$ _____
Job Seeking Expenses	\$ _____
Job Seeking Miles Driven	\$ _____
Safe Deposit Box	\$ _____
Trust Fees	\$ _____
Tax Preparation Fee	\$ _____

TAXES	
Primary Residence Taxes Paid	\$ _____
TAXABLE VALUE for 2011	\$ _____
Other Property Taxes	\$ _____
Auto License Tags	\$ _____
Other Taxes Paid	\$ _____

INTEREST	
Home Mortgage -1st*	\$ _____
Home Mortgage -2nd*	\$ _____
Home Equity Loan	\$ _____
Investment Interest	
*If paid to an individual, list below:	\$ _____
Name _____	
Address: _____	
Social Security # _____	

RENTERS CREDIT INFORMATION	
Landlord _____	
Address _____	
Monthly Rent	\$ _____
Number Of Months _____	

**AMERICAN OPPORTUNITY  
EDUCATION CREDIT:**

We Will Need The Form 1098-T Provided By The School To File For The Credit. This Credit Is Expanded To Include The Cost Of Books And Supplies.

**RESIDENTIAL ENERGY  
CREDIT:**

The Following Items May Qualify: The Cost Of Certain High-Efficiency Heating And Air Conditioning Systems, Water Heaters And Stoves That Burn Biomass All Qualify. You May Also Include The Cost For Installing These Items. In Addition, The Cost Of Energy Efficient Windows And Skylights, Energy Efficient Doors, Qualifying Insulation And Certain Roofs Also Qualify For The Credit. The Cost Of Installing These Items Does Not Count. Please Provide The Receipt Along With Any Manufacturer's Certification Statement.

Michigan Has An Energy Credit For Eligible Taxpayers Who Have Purchased Any Of The Following Energy Star Rated Appliances: Dishwasher, Washer And/Or Refrigerator. The Credit Also Applies To The Following Star Rated Home Improvements: Insulation, Furnace, Water Heater And Windows. The Credit Is Available For Single Taxpayers With An Adjusted Gross Income Of Less Than \$37,501 Or Less Than \$75,001 Married Filing Jointly. Please Provide Us With Your Receipts.

**DEPENDENT CARE CREDIT:**

Please Provide The Following: The Provider's Name, Address, Social Security Number Or Identification Number Along With The Amount Paid To The Daycare Provider.