RBSK PARTNERS PC

CPAs & Advisors ▪ Technology Consulting

2008 Client Organizer

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Copy for your file

TO: ______________ ________________

____

___________________, **IN** __________

Appointment Date:

Appointment Time:

Details:

Mail In:

This information is complete and correct to the best of my (our) knowledge. I (we) understand and agree with the engagement terms attached.

Taxpayer signature: ______________________________ Date: _______________

Spouse signature: ______________________________ Date: _______________

Phone number: ___________________ (Day) __________________(Evening)

E-mail address: _______________________@______________.______

Note: Your e-mail address is required to take advantage of the 1040 portal.

	Phone	Toll Free		Phone	Toll Free
Batesville	**812.934.5548**	**800.745.5529**	**Greensburg**	**812.663.7567**	**800.676.7567**
Brookville	**765.647.2566**	**800.676.2566**	**North Vernon**	**812.346.2066**	**800.676.7567**

RBSK Partners PC
www.rbskpartners.com

_____________ _______________
____
__________________, IN __________

Dear _____________:

Appointment Information

Since we are beginning a new year, it is once again time to prepare for the filing of your individual income tax returns. In an effort to serve you in a more timely and efficient manner, we are scheduling the preparation of all individual income tax returns during this tax filing season.

For those of you who have had appointments in the past, we have scheduled a specific date and time for you. If it has been your custom to just mail or deliver your information to our office, we have scheduled a date by which we would like to receive your information. Listed below are various items regarding this and the preparation of your tax returns.

If you are unable to keep your appointment or cannot provide the information by the date selected and need to reschedule, please call our office as soon as possible. We will be happy to schedule a new date for you. Or, if we have not scheduled an actual appointment for you and you would prefer to have one, please call our office as soon as possible. Phone numbers are listed at the end of the questionnaire.

Your scheduled appointment or date by which we would like to receive your information is noted on the cover page.

Client Organizer Instructions

This Client Organizer is designed to help you gather tax information needed to prepare your 2008 personal income tax returns. If we prepared your 2007 tax returns, we have preprinted certain information from those returns to help you complete the organizer with minimal time and effort.

Enter this year's information on the Client Organizer sheets provided. If any information does not apply to you or is incorrect, please draw a line through it or make the necessary corrections.

The Client Questionnaire asks pertinent tax items necessary for preparing the most accurate tax return possible. Please answer all applicable questions and attach a statement when necessary for additional information not provided in the Client Organizer.

We will also need the following information:

- Forms W-2 for wages, salaries and tips.
- All Forms 1099 for interest, dividends, miscellaneous income, etc.
- Brokerage statements showing investment transactions for stocks, bonds, etc.
- Schedule K-1 from partnerships, S corporations, estates and trusts.
- Statements supporting deductions for mortgage interest and taxes.
- Any tax notices sent to you by the IRS or other taxing authority.
- A copy of your income tax return from last year, if not prepared by this office.

Completion of Returns

Our goal is to complete your returns within a reasonable period of time after receiving your information and by the due date or special filing date for your returns. The actual completion time for your returns may vary depending on the complexity and the date we receive your information.

Extensions

An extension for time to file your returns may be necessary if **all** your information is not received by **March 31**. Any extension filed for our convenience will be at no charge to you assuming **all** your information was in by **March 31st**.

Engagement Terms

This letter is to confirm and clarify our understanding of the professional tax services our firm will provide. We will state the terms and objectives of our engagement and the nature and limitations of the services we will provide.

Services

Our engagement will be designed to perform the following services:

1) To prepare your Individual Federal and State income tax returns, with supporting schedules, for 2008.

2) Perform any bookkeeping necessary for preparation of the income tax returns.

3) To be available to answer your inquiries on specific tax matters and to discuss tax planning matters as the need arises.

It is our understanding that we are responsible for only the Federal and State of residence returns for 2008. If there are any additional returns you would like us to prepare, please let us know. The law provides various penalties that may be imposed when taxpayers fail to file required returns as well as complete and accurate returns.

We will use our judgment to resolve questions in your favor where the tax law is unclear, or where there are conflicts between the taxing authorities' interpretation of the law and what seem to be other supportable positions.

Your returns can of course be reviewed by taxing authorities. Any items resolved against you by the examining agent are subject to certain rights of appeal. In the event of an examination, we will be available to represent you. Fees for representation before a taxing authority will be billed separately from fees for income tax preparation.

Certain communications involving tax advice may be privileged and not subject to disclosure to the IRS. By disclosing the contents of those communications to anyone, or by turning over information about those communications to the government, you (or others) may be waiving this privilege. To protect this right to privileged communication, please consult with us or your attorney prior to disclosing any information about our tax advice.

Your Records

We will prepare the tax returns from information you provide. We will not audit or verify the data you submit, although we may ask you for clarification. Our work in connection with the preparation of the tax return does not include any procedures designed to discover defalcations or other irregularities, should any exist.

The Internal Revenue Code requires that you have documentation for travel and entertainment expense deductions, "listed property" deductions, as well as for charitable contributions. Your signature below indicates your compliance with those requirements. Call us if you have any questions regarding these deductions.

Electronic Mail

In the event that we use electronic mail at any time to communicate with each other, or with third parties, you acknowledge that we have advised you that electronic mail may be subject to a greater risk of interception or unauthorized access than wire-line telephone communication. If at any time you desire that we not use electronic mail, you will advise us of such desire and we will act in accordance with your instruction. If you do not so advise us, we will assume that you consent to the use of electronic mail for communications between our staff and you or other persons with respect to your matters.

Fees

Fees for our services reflect the complexity of issues encountered, technology used, any research that may be required, efficiency generated by staff expertise, other resources required in rendering these services, etc. If unanticipated needs arise or more services are required due to unexpected circumstances, we will discuss it with you before additional fees are incurred.

We will bill you monthly for these fees plus out-of-pocket expenses as work progresses. Our invoices are due and payable on presentation. A finance charge of 1.5 percent per month will be assessed on any unpaid balance. This is an Annual Percentage Rate of 18 percent.

By approving this agreement you are agreeing and promising to pay any finance charge that may be assessed, as indicated above, for any invoice which remains unpaid for more than thirty (30) days. You also promise to pay all court costs, expenses, and reasonable attorney fees incurred by RBSK Partners PC in collecting any amounts owed to them which are in default, and you promise to pay those sums of money, including reasonable attorney fees in addition to the amount of the invoice and in addition to the interest which is assessed.

In accordance with firm policies, work may be suspended if your account is overdue and will not be resumed until your account is paid in full or other payment arrangements are agreed upon. If we elect to terminate our services for nonpayment, our engagement will be deemed to have been completed upon written notification of termination, even if we have not completed your tax returns. You will be obligated to compensate us for all time expended and to reimburse us for all out-of-pocket expenditures through the date of termination.

Approval

If the above fairly sets forth your understanding, please sign the client organizer cover page and <u>return it to us together with your tax information</u>. At your request, we can provide you a copy of this letter along with the completed organizer.

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RBSK Partners pc

Questions

Please check the appropriate box and include all necessary details.

Personal Information

	YES	NO
1. Do all names and social security numbers match those in the social security system? If no, call your nearest SSA office or 1-800-772-1213 to correct the information.	☐	☐
2. Do you want to allocate $3 to the Presidential Election Campaign Fund? (If not answered, we will assume the same response as last year.)	☐	☐
3. Does your spouse want to allocate $3 to the Presidential Election Campaign Fund? (If not answered, we will assume the same response as last year.)	☐	☐
4. Did your marital status change during the year? If yes, explain: ________________	☐	☐
5. Did your address change from last year?	☐	☐
6. Can you be claimed as a dependent by another taxpayer?	☐	☐
7. Was there a death in your immediate family?	☐	☐
8. If you had estimates for 2008, did you pay them as scheduled and on time?	☐	☐
Did you pay your fourth quarter state estimate in December? (Mark "no" if paid in January.)	☐	☐
9. Did either you or your spouse become 65 years of age in 2008?	☐	☐
10. Did you and/or your spouse make gifts of more than $12,000 to any individual?	☐	☐
11. Were you a grantor or transferor for a foreign trust, have an interest in or a signature of other authority over a bank account, securities account, or other financial account in a foreign country?	☐	☐
12. Were you audited or did you receive correspondence from the State or the Internal Revenue Service? If yes, explain: ____	☐	☐
13. Indiana is now requiring all eligible individual income tax returns to be filed electronically.		
Would you like to direct deposit any refund?	☐	☐
Would you like to make any payments due by check?	☐	☐
or by automatic withdrawal? (provide date to withdrawal ______________)	☐	☐
Please provide bank account information on appropriate organizer page.		
14. Did you change any bank accounts that have been used to direct deposit (or direct debit) funds from (or to) the IRS or other taxing authority during the tax year?	☐	☐
15. Did you receive an economic stimulus (tax rebate) payment from the IRS? If yes, how much ________________?	☐	☐
16. We currently provide both a paper copy of your return and a copy on a secure web portal. Would you like to receive only the copy on the portal?	☐	☐

Dependent Information

YES NO

1. Were there any changes in dependents from the prior year? ☐ ☐
   If yes, explain: ____

2. Are any of your unmarried children who might be claimed as dependents 19 years of age or older? ☐ ☐
   If so, are they students? ☐ ☐

3. Do you have children from a previous marriage? If so, please provide a copy of Form 8332 for the noncustodial parent or a copy of the divorce decree to determine dependent status. ☐ ☐

Income Information

1. Did you cash any Series EE U.S. savings bonds issued after 1989 to be used for education purposes? ☐ ☐

2. Did you sell any stocks, bonds, or other investment property during the year? ☐ ☐
   If yes, please list the description, date acquired, date sold, sales price, cost or basis, and expenses of sale.

3. Did you have any wash sales of stock or securities? (A wash sale is a <u>loss</u> on sale where within a period beginning 30 days before the sale date and ending 30 days after that date substantially identical stock or securities is acquired. Such losses are not allowed.) ☐ ☐

4. Have you <u>personally</u> loaned anyone money which has become uncollectible? ☐
   ☐
   If yes, please provide a description of the debt, including the amount and due date, the debtor's name and relationship, the collections efforts made and why the debt is wholly worthless.

5. Did you have any securities or other investments which were deemed worthless during the year? Describe and list date acquired and amount invested. (Confirm this with your broker.) ☐ ☐

6. Did you receive any distribution from a profit-sharing plan, retirement plan, or an individual retirement arrangement? ☐ ☐

7. Did you "rollover" a profit-sharing or retirement plan distribution into another plan? ☐ ☐

8. Did you have any debts cancelled or forgiven? If yes, explain:_________________ ☐ ☐

9. Did you receive any disability income during the year? If so, who paid the premiums (you or your employer)? _________________ ☐ ☐

10. Did you receive any distributions from a Health Savings Account (HSA), Archer MSA or Medicare Advantage (MSA) this year? ☐ ☐

Business Information

1. Did you start a new business or purchase rental property during the year? ☐ ☐

2. Did you engage in any bartering transactions? ☐ ☐

YES NO

3. DO YOU HAVE AN AUTO THAT IS USED FOR BUSINESS PURPOSES (OTHER THAN TO AND FROM WORK) FOR WHICH YOU WERE NOT DIRECTLY REIMBURSED? IF YES: ☐ ☐
   a. What was the total mileage
      January - June #_______ July - December #_________
      What was the business mileage
      January - June #_______ July - December #_________

   b. Was the vehicle used for commuting? ☐ ☐
      If yes, what is the round trip distance normally commuted? #_______.

   c. Was the vehicle available for use during off-duty hours? ☐ ☐

   d. Do you have another vehicle for personal use? ☐ ☐

   e. Do you have sufficient records to support this deduction? ☐ ☐
      If yes, are they documented or written?

   f. Do you prefer to use actual auto costs instead of the standard mileage rate? ☐ ☐
      If yes, please provide actual costs such as fuel, insurance, license plates, interest on auto loan, etc.

4. DID YOU USE ANY PART OF YOUR HOME FOR BUSINESS PURPOSES? ☐ ☐
   IF YES:
   a. Was it used regularly and exclusively for business purposes? ☐ ☐

   b. Was it used for management or administrative purposes and there is no other fixed location where such activities are conducted? ☐ ☐

5. Did you purchase any business assets (furniture, equipment, vehicles, real estate, etc.) or convert any assets to business use? If yes, list the description, related business or activity, date placed in service, and cost or basis on the Asset List included in the organizer. Please bring settlement papers for purchases of real estate. ☐ ☐

6. Did you dispose of (sell, trade, junk) any business assets (including real estate)? If yes, list the description, date sold, sales price, and expenses of sale on the Asset List included in the organizer. Please bring settlement papers for sales or exchanges of real estate. ☐ ☐

7. Did you acquire a new or additional interest in a partnership or S corporation? ☐ ☐

8. Did you receive a distribution from an estate or trust? Please provide any Schedules K-1 (Form 1041). ☐ ☐

9. Has your business (Schedule C or Schedule F) sustained losses over the last several years? If so, is your business entered in to for a profit and will it stand ☐ ☐
   up to the increased IRS scrutiny related to businesses and hobby losses? ☐ ☐

Sales Information

1. For home sales, did you own and use your home as a principal residence for at least 2 of the 5 years before the sale? If not, specify the reason you sold your home. Please bring settlement papers and other relevant information. ☐ ☐

2. If you hold any installment sales contracts, were any collections made? ☐ ☐

YES NO

3. Did you sell an existing business, rental or interest in a partnership or S corporation? ☐ ☐

Adjustments to Gross Income

1. Are you covered by a pension or retirement plan? ☐ ☐

2. Did you contribute to an IRA, Roth IRA, Keogh, Simple or SEP for 2008? ☐ ☐
   If so, provide type of account and amount of contributions?________________

3. Did you convert existing traditional IRAs to ROTH IRAs in 2008? If so, list amounts converted for Taxpayer __________and Spouse_________. ☐ ☐

4. Did you incur moving costs because of a job change? (Note: There is a distance and time requirement.) ☐ ☐

5. Did you pay interest on a higher education loan? If so: ☐ ☐

   a. Are you a dependent on another taxpayer's return? ☐ ☐

   b. Was the student enrolled at least 1/2 time? ☐ ☐

   c. Was the debt incurred <u>solely</u> to pay for qualified education expenses? ☐ ☐

   d. Are you the individual legally obligated to make the loan payments under the terms of the loan? ☐ ☐

   e. For each loan, list the following:

	Loan 1	Loan 2
Student's name		
Amount of interest		

6. If you are a kindergarten through grade 12 teacher, counselor, principal or aide, did you personally pay for supplies, books and/or equipment? ☐ ☐
   If yes, list amount $__________.

7. Did you travel more than 100 miles from home to perform services as a National Guard or Reserve member? ☐ ☐
   If so, your travel expenses, including transportation, mileage, lodging, meals, etc., may be deductible. Please provide the detail of such amounts.

8. Did you have a medical savings account (MSA) in 2008, or did you receive payments or benefits (including accelerated death benefits) under a long-term care (LTC) insurance contract during 2008? ☐ ☐

9. Did you make contributions to a Health Savings Acccount (HSA)? ☐ ☐
   If so, what was the amount of your contributions? $ ________.
   Please provide the annual deductible $__________ and the number of months in the plan during 2008 _____ .
   (This is not a cafeteria/flexible spending plan.)

10. Did you pay real estate taxes during the year on your personal residence? ☐ ☐
    If detail is not already included in the State Information section question 1d., please provide amount here ___________

Itemized Deduction Information

YES NO

1. Did you purchase or refinance your principal home or your second home or make a home equity loan during the year?
   If yes, please bring settlement papers and other relevant information.

2. If you have a home equity loan, were the proceeds used to acquire, build or improve your home?

3. Did you pay mortgage insurance on a qualified personal residence for a mortgage issued after 12/31/06? If so, what was the amount? ____________________

4. Did you incur a casualty or theft loss during the year?
   If yes, was it related to a federally declared disaster?

5. Did you pay any sales tax on any major purchases during the year (car, aircraft, boat, mobile or prefabricated home or home building materials)?
   If yes, please provide the amount. $_________.

6. Do you have receipts and/or canceled checks for all charitable contributions, including the required receipt for donations of $250 or more indicating that no goods or services were received in return? (Note: Cash contributions with no receipt from the charity are not deductible.)

7. Did you make any noncash charitable contributions (clothes, furniture, vehicles, etc.)? Please note that no deduction is allowed for clothing or household items unless they are in good used condition or better and you can substantiate the condition.

8. Did you have any expenses related to seeking a new job during the year?

9. Did you have any mileage for medical purposes? If so please provide
   January - June #_____________ July - December #____________

Taxes Information

1. Did you receive tip income not reported to your employer this year?
   If yes, list amount $_________.

2. Do you have any children under age 19 or a full time student under age 24 with unearned income in excess of $1,800?

3. Did you pay any one household employee cash wages of $1,600 or more in 2008; withhold federal income tax during 2008 at the request of any household employee; or pay total cash wages of $1,000 or more in any calendar quarter of 2007 or 2008 to all household employees?

Credits Information

1. Did you incur any expenses or receive any employer-provided benefits in conjunction with adopting a child?

2. Did you pay someone to care for your child under age 13 so that you and your spouse could work?

3. Did you or your dependent (if dependent, it is treated as if it were the parent) pay tuition and fees (not room and board or other personal expenses) for any higher education or post-secondary education? **YES** ☐ **NO** ☐

If yes, please complete the following for each student:

	Student 1	Student 2
a. Student's name		
b. Year in school (1st, 2nd, 3rd, etc.)		
c. Name of educational institution		
d. State and county of educational instituition (Midwestern disaster relief allows additional credits for schools in certain areas.)		
e. Tuition and fees paid (reduced by any scholarships or grants)		
f. Date paid		
g. Date education began (for which the payment was made)		
h. Were tuition and fees paid to acquire or improve job skills?		
i. Has the student ever been convicted of a felony consisting of the possession or distribution of a controlled substance?		

4. Did you make any withdrawals from an education savings or 529 Plan account? ☐ ☐
   If so: Was the distribution used for qualified higher education expenses? ☐ ☐
   Did you recieve Form 1099-Q? (please provide it) ☐ ☐
   Total distributions $_________________
   Earnings included $_________________
   Was the account open for 12 months or will it be open for 12 months? ☐ ☐

5. Did you make any contributions to an education savings or 529 Plan account? ☐
   ☐
   Was it an Indiana College Choice 529 Education Savings Plan? ☐ ☐
   If so, please complete the questions in the state information section.

6. Were any improvements eligible for the energy efficiency credit installed on your main home during 2008? Eligible improvements include insulation, exterior windows and skylights, exterior doors, coated metal roofs, heat pumps, central air conditioners, water heaters and furnaces. If so, provide a copy of the energy efficiency certification provided by the manufacturer. ☐ ☐

7. If you are a residential home builder, did you sell any qualified energy efficient homes during 2008? If so, list the number of homes certified to have met the 50% energy efficient standard ________ and the 30% energy efficient standard ________ . ☐ ☐

8. Did you purchase a **new** hybrid or alternative motor vehicle this year? If so, please list the model and year, date purchased and cost. ☐ ☐

9. If you are a first time home buyer (including owning a home for the first time in 3 years) and purchased a home between April 8, 2008 and July 1, 2009, do you want to take the First-time homebuyer credit? ☐ ☐

State Information

1. ARE YOU AN INDIANA RESIDENT? ☐ ☐

If yes, please complete the Indiana General Information page attached and answer the following questions:

YES NO

a. Has the school district in which you reside changed from last year? ☐ ☐

If yes, what is the new district?________________.

b. Has either your county of principal residence and/or employment changed as of 1/1/08? If yes, please list the new counties for: ☐ ☐

Residence - Taxpayer_______________and Spouse_______________

Employment - Taxpayer_______________and Spouse_______________

c. Did you pay rent for your personal residence? ☐ ☐

If so, please list the landlord's name, address, number of months rented and total rent paid.

d. Did you pay real estate taxes on your principal place of residence during 2008? ☐ ☐

If yes, # of months lived in the home during 2008________.

Amount of real estate taxes paid during 2008 $_________.

e. Did you receive a property tax refund during 2008? ☐ ☐

If yes, please provide the amount $___________.

f. Did you make any contributions to Indiana Colleges? ☐

☐

If yes, please list the date, amount and college.

g. Did you make any purchases on which sales taxes were not paid and state use taxes are due (by telephone, internet, mail or in person)? ☐

☐

If so, summarize the cost of 2008 purchases.

h. Did you install new (upgrade and not a replacement) insulation, weather stripping, double pane windows, storm doors or windows in your principal residence during 2008? ☐ ☐

If so, was that part of your residence built before Jan. 1, 2005? ☐ ☐

If yes, please provide information regarding the item purchased, the purchase price, the place of purchase, the date of purchase, the date of installation and the amount paid for labor.

i. Did you pay premiums during 2008 for Indiana Partnership long-term care insurance? If yes, enter premiums paid $___________. ☐ ☐

Note: The following information must be included in the policy in order to qualify for this Indiana deduction:

"This policy qualifies under the Indiana Long-term Care program for Medicaid Asset Protection. This policy may provide benefits in excess of the asset protection provided in the Indiana Long-term Care Program."

j. Did you make a contribution to the Indiana College Choice 529 Education Savings Plan? If so: Total contributions $______________________ ☐ ☐

Plan account number ______________________

Was the account open for 12 months or will it be open for 12 months? ☐ ☐

2. ARE YOU A RESIDENT OF A STATE OTHER THAN INDIANA? ☐ ☐

If yes, please complete the state's General Information page, if attached.

Contact Information:

Phone Toll Free Fax

Batesville	812.934.5548 / 800.745.5529 / 812.934.5560
Brookville	765.647.2566 / 800.676.7567 / 812.663.8886
Greensburg	812.663.7567 / 800.676.7567 / 812.663.8886
North Vernon	812.346.2066 / 800.676.7567 / 812.346.0928

Form ID: IN

Indiana General Information

School corporation name (as of January 1 of tax year) ______ [1]
School corporation code (as of January 1 of tax year) ______ [2]

	Taxpayer	Spouse
County of residence (as of January 1 of tax year)	____[3]	____[4]
County of employment (as of January 1 of tax year)	____[5]	____[6]

Household employment taxes:

Employee Name ______ Employee SSN ______ [7]
Income ______ State Tax Withheld ______
County Tax Withheld ______ County Code ______

Contribution

Amount of contribution you wish to make to:

Nongame and Endangered Wildlife Fund ______ [8]

College Credit

Taxpayer, Spouse (T,S)___ Eligible institution name #1______ [9]
Date of contribution ______ Amount of contribution ______

Taxpayer, Spouse (T,S)___ Eligible institution name #2______
Date of contribution ______ Amount of contribution ______

Taxpayer, Spouse (T,S)___ Eligible institution name #3______
Date of contribution ______ Amount of contribution ______

Renter's Information

Taxpayer, Spouse, Joint (T,S,J) ___ Principal address #1 ______ [10]
Landlord name and address ______
Number of months rented ____ Total rent paid ______

Taxpayer, Spouse, Joint (T,S,J) ___ Principal address #2 ______
Landlord name and address ______
Number of months rented ____ Total rent paid ______

Part-year Resident and Nonresident Information

If you were a part-year resident during the tax year, enter the dates you lived in Indiana

Part-year residency dates:	Taxpayer	Spouse
From	______[11]	______[13]
To	______[12]	______[14]

Other state(s) lived in during the tax year (Part-year resident or full-year nonresident)

Taxpayer, Spouse(T,S)	State Postal Code	From Date	To Date
___	____	______	______[15]
___	____	______	______
___	____	______	______
___	____	______	______

	Taxpayer	Spouse
State of residence (Nonresidents only)	____[16]	____[17]

NOTES/QUESTIONS:

General: 1040

Personal Information

Filing (Marital) status code (1 = Single, 2 = Married filing joint, 3 = Married filing separate, 4 = Head of household, 5 = Qualifying widow(er)) ___

Mark if you were married but living apart all year ___

	Taxpayer	Spouse
Social security number		
First name		
Last name		
Occupation		
Designate $3.00 to the presidential election campaign fund? (1 = Yes, 2 = No, 3=Blank)		
Mark if legally blind		
Mark if dependent of another taxpayer		
Was taxpayer between 19 and 23 and full-time student? (1 = Yes, 2 = No)		
Mark if member of U.S. Armed Forces in 2008		
Date of birth		
Date of death		
Work/daytime telephone number/ext number		
Do you authorize us to discuss your return with the IRS (1 = Yes, 2 = No)		

General: 1040, Contact

Present Mailing Address

Address ___
Apartment number ___
City/State postal code/Zip code ___
Home/evening telephone number ___
Taxpayer email address ___
Spouse email address ___

General: 1040

Dependent Information

First Name	Last Name	Date of Birth	Social Security No.	Relationship	Months lived in your home	Care expenses paid for dependent

Credits: 2441

Child and Dependent Care Expenses

	Provider #1	Provider #2
Provider information:		
Name		
Street address		
City, state, and zip code		
Social security number OR Employer identification number		
Tax Exempt or Living Abroad Foreign Care Provider (1 = TE, 2 = LAFCP)		
Amount paid to care provider in 2008		

	Taxpayer	Spouse
Employer-provided dependent care benefits that were forfeited		

General: Info

Direct Deposit/Electronic Funds Withdrawal Information

If you would like to have a refund deposited directly or a balance due debited directly into/from your bank account, please enter the following information:

Financial institution routing transit number ___
Name of financial institution ___
Your account number ___ Type of account (1 = Savings, 2 = Checking, 3 = IRA*) ___

*Refunds may only be deposited to established traditional, Roth or SEP-IRA accounts. Make sure direct deposits will be accepted by the bank or financial institution.

Income: W2

Salary and Wages

Please provide all copies of Form W-2 that you receive.
Below is a list of the W-2's as reported in last year's tax return. If a particular W-2 no longer applies, mark the not applicable box.

T/S	Description	Prior Year Information	Mark if no longer applicable
___	___	___	___
___	___	___	___
___	___	___	___
___	___	___	___
___	___	___	___

Income: 1099R

Pension, IRA, and Annuity Distributions

Please provide all copies of Form 1099-R that you receive.
Below is a list of the 1099-R's as reported in last year's tax return. If a particular 1099-R no longer applies, mark the not applicable box.

T/S	Description	Prior Year Information	Mark if no longer applicable
___	___	___	___
___	___	___	___
___	___	___	___
___	___	___	___

Income: K1, K1T

Schedule K-1s

Please provide all copies of Schedule K-1s that you receive.
Below is a list of the K-1s as reported in last year's tax return. If a particular K-1 no longer applies, mark the not applicable box.

T/S/J	Description	Form	Mark if no longer applicable
___	___	___	___
___	___	___	___
___	___	___	___
___	___	___	___

Income: W2G

Gambling Income

Please provide all copies of Form W-2G that you receive.
Below is a list of the W-2Gs as reported in last year's tax return. If a particular W-2G no longer applies, mark the not applicable box.

T/S	Description	Prior Year Information	Mark if no longer applicable
___	___	___	___
___	___	___	___

Educate: 1099Q

Qualified Education Plan Distributions

Please provide all copies of Form 1099-Q that you receive.
Below is a list of the 1099-Q's as reported in last year's tax return. If a particular 1099-Q no longer applies, mark the not applicable box.

T/S	Description	Prior Year Information	Mark if no longer applicable
___	___	___	___
___	___	___	___

Income: Income

Economic Stimulus Payment (Rebate)

Enter the amount of the stimulus payment (before offset) you received below. If you filed a joint return in 2007, and your filing status did not change in 2008, fill in only the Taxpayer/Joint column. However, if your filing status changed to married filing joint in 2008 and your spouse received a separate payment, enter the amount in the Spouse column.

	Taxpayer/Joint	Spouse
Economic stimulus payment (rebate) received in 2008	___	___
Mark if you did not receive an economic stimulus payment (rebate)	_	_

Income: B1

Interest Income

Please provide all copies of Form 1099-INT.

T/S/J	Payer Name	Interest Income	Prior Year Information

Income: B3

Seller Financed Mortgage Interest

T, S, J _ Payer's name ________

Payer's address ________ Payer's social security number ________

Amount received in 2008 ________ Amount received in 2007 ________

Income: B2

Dividend Income

Please provide copies of all Form 1099-DIV or other statements reporting dividend income.

T/S/J	Payer Name	Ordinary Dividends	Qualified Dividends	Prior Year Information

Income: D

Sales of Stocks, Securities, and Other Investment Property

Please provide copies of all Forms 1099-B and 1099-S.

T/S/J	Description of Property	Date Acquired	Date Sold	Gross Sales Price (Less expenses of sale)	Cost or Other Basis

Income: Income

Other Income

Please provide copies of all supporting documentation.

	2008 Information		Prior Year Information
State and local income tax refunds			
	Taxpayer	**Spouse**	**Prior Year Information**
Alimony received			
Unemployment compensation			
Unemployment compensation repaid			
Social security benefits			
Medicare premiums to be reported on Schedule A			
Railroad retirement benefits			
Veterans' disability or death benefits			

Other Income:

T/S/J		2008 Information	Prior Year Information

1040 Adj: IRA

Adjustments to Income - IRA Contributions

Please provide year end statements for each account and any Form 8606 not prepared by this office.

	Taxpayer	Spouse
Traditional IRA Contributions for 2008 -		
If you want to contribute the maximum allowable traditional IRA contribution amount, enter the applicable code: (1 = Deductible only, 2 = Both deductible and nondeductible)	___	___
Enter the total traditional IRA contributions made for use in 2008	________	________
Roth IRA Contributions for 2008 -		
Mark if you want to contribute the maximum Roth IRA contribution	___	___
Enter the total Roth IRA contributions made for use in 2008	________	________

Educate: Educate

Higher Education Deductions and/or Credits

Complete this section if you paid interest on a qualified student loan in 2008 for qualified higher education expenses for you, your spouse, or a person who was your dependent when you took out the loan.

T/S	Qualified student loan interest paid	2008 Information	Prior Year Information
___	________	________	________
___	________	________	________

Complete this section if you paid qualified education expenses for higher education costs in 2008.
Qualified education expenses include tuition and fees required for enrollment or attendance at an eligible educational institution.

Please provide all copies of Form 1098-T.

T/S	Ed Exp Code*	Student's SSN	Student's First Name	Student's Last Name	Qualified Expenses	Prior Year Information
___	_	________	________	________	________	________
___	_	________	________	________	________	________
___	_	________	________	________	________	________
___	_	________	________	________	________	________

***Education Expense Code: 1 = Hope credit; 2 = Lifetime learning credit; 3 = Tuition and fees deduction**

The student qualifies for the Hope Credit when enrolled at least half-time in a program leading to a degree, certificate, or recognized credential; has not completed the first 2 years of post-secondary education; has had no drug convictions in 2008 and has not claimed the Hope credit in more than one prior tax year.

1040 Adj: 3903

Job Related Moving Expenses

Complete this section if you moved to a new home because of a new principal work place.

Description of move	________
Taxpayer/Spouse/Joint (T, S, J)	___
Mark if the move was due to service in the armed forces	_
Number of miles from old home to new workplace	________
Number of miles from old home to old workplace	________
Mark if move is outside United States or its possessions	_
Transportation and storage expenses	________
Travel and lodging (not including meals)	________
Total amount reimbursed for moving expenses	________

1040 Adj: OtherAdj

Other Adjustments to Income

Alimony Paid:

T/S	Recipient name	Recipient SSN	2008 Information	Prior Year Information
___	________	________	________	________

Address ________ **City** ________ **State** ___ **Zip code** ________

	Taxpayer	Spouse	Prior Year Information
Educator expenses:			
________	________	________	________
________	________	________	________
Other adjustments:			
________	________	________	________
________	________	________	________
________	________	________	________

Itemized: A1

Medical and Dental Expenses

T/S/J		2008 Information	Prior Year Information
__	Medical and dental expenses		
__	Medical insurance premiums you paid		
__	Long-term care premiums you paid		
__	Prescription medicines and drugs		
__	Miles driven for medical items 1/1/08 through 6/30/08 ______ 7/1/08 through 12/31/08		

Itemized: A1

Tax Expenses

T/S/J		2008 Information	Prior Year Information
__	State/local income taxes paid		
__	2007 state and local income taxes paid in 2008		
__	Sales tax paid on actual expenses		
__	Real estate taxes paid		
__	Personal property taxes		
__	Other taxes		

Itemized: A2

Interest Expenses

T/S/J		2008 Information	Prior Year Information
__	Home mortgage interest: From Form 1098		

Other, such as: Home mortgage interest paid to individuals

T/S/J	Name	SSN	2008 Information	Prior Year Information
__				

Address ____________________

T/S/J		2008 Information	Prior Year Information
__	Investment interest expense, other than on K-1s:		

Refinancing Information:

	Refinance #1	Refinance #2
T/S/J	__	__
Description		
Total points paid		
Date of refinance		
Total number of payments		
Reported on Form 1098 in 2008		

Itemized: A3

Charitable Contributions

T/S/J		2008 Information	Prior Year Information
__	Contributions made by cash or check		
__	Volunteer miles driven		
__	Noncash items, such as: Goodwill, Salvation Army		

Itemized: A3

Miscellaneous Deductions

T/S/J		2008 Information	Prior Year Information
__	Unreimbursed expenses		
__	Union dues		
__	Tax preparation fees		
	Other expenses, subject to 2% AGI limitation:		
__			
__			
__	Safe deposit box rental		
__	Investment expenses, other than on K1s:		
	Other expenses, not subject to the 2% AGI limitation:		
__			
__			
__	Gambling losses: (Enter only if you have gambling income)		

Form ID: ELF

Electronic Filing

Please note that not all returns qualify for electronic filing under IRS rules

If you qualify for electronic filing, mark if you would like to file the return electronically with the IRS X [1]

Mark if you would like your return prepared and filed electronically only if you receive a refund ___ [4]

Mark if you would like your return prepared and filed electronically if your refund is greater than a certain amount ___ [5]

Enter the minimum refund amount here ___ [6]

Mark if you are filing a balance due return electronically and you want to pay the amount due by debiting your financial institution account ___ [7]

The IRS requires a Personal Identification Number (PIN) be used in signing returns that are electronically filed. Each taxpayer and spouse, if applicable, must provide a 5 digit self-selected PIN of your choice other than all zeroes.

Taxpayer self-selected Personal Identification Number (PIN) ___ [2]

Spouse self-selected Personal Identification Number (PIN) ___ [3]

NOTES/QUESTIONS:

Cancellation of Debt #1

Please provide all Forms 1099-C

If the debt cancelled on Form 1099-C is related to a business, rental, farm or farm rental, enter the Form 1099-C Activity below

Enter a brief description of the debt (i.e. type of debt) and why it was cancelled to assist in determining tax ramifications:

____

Taxpayer/Spouse/Joint (T, S, J) __[1]
State postal code ___[3]
Name of creditor ______________________________[4]
Form 1099-C Activity (C = Schedule C, E = Schedule E page 1, F = Farm, 4835 = Form 4835) _______[7]
Date canceled **(Box 1)** ______________[9]
Amount of debt canceled **(Box 2)** + ____________________[10]
Interest if included in box 2 **(Box 3)** + ____________________[11]
Bankruptcy (if checked) **(Box 6)** __[12]
Fair market value of property **(Box 7)** + ____________________[13]

	Control Totals +	

Cancellation of Debt #2

Please provide all Forms 1099-C

If the debt cancelled on Form 1099-C is related to a business, rental, farm or farm rental, enter the Form 1099-C Activity below

Enter a brief description of the debt (i.e. type of debt) and why it was cancelled to assist in determining tax ramifications:

____

Taxpayer/Spouse/Joint (T, S, J) __[1]
State postal code ___[3]
Name of creditor ______________________________[4]
Form 1099-C Activity (C = Schedule C, E = Schedule E page 1, F = Farm, 4835 = Form 4835) _______[7]
Date canceled **(Box 1)** ______________[9]
Amount of debt canceled **(Box 2)** + ____________________[10]
Interest if included in box 2 **(Box 3)** + ____________________[11]
Bankruptcy (if checked) **(Box 6)** __[12]
Fair market value of property **(Box 7)** + ____________________[13]

	Control Totals +	

Cancellation of Debt #3

Please provide all Forms 1099-C

If the debt cancelled on Form 1099-C is related to a business, rental, farm or farm rental, enter the Form 1099-C Activity below

Enter a brief description of the debt (i.e. type of debt) and why it was cancelled to assist in determining tax ramifications:

____

Taxpayer/Spouse/Joint (T, S, J) __[1]
State postal code ___[3]
Name of creditor ______________________________[4]
Form 1099-C Activity (C = Schedule C, E = Schedule E page 1, F = Farm, 4835 = Form 4835) _______[7]
Date canceled **(Box 1)** ______________[9]
Amount of debt canceled **(Box 2)** + ____________________[10]
Interest if included in box 2 **(Box 3)** + ____________________[11]
Bankruptcy (if checked) **(Box 6)** __[12]
Fair market value of property **(Box 7)** + ____________________[13]

	Control Totals +	

Form ID: 5695

Residential Energy Credit

68

The Energy Tax Incentives Act of 2005 provides credits for energy efficient improvements made to personal residences beginning in 2006. There are certain restrictions and limits but some of the home improvements that may qualify include, solar electric, solar water heating and fuel cell property costs. Please provide copies of any 2006 and 2007 Form 5695 not prepared by this office.

Taxpayer/Spouse/Joint (T, S, J)		__[1]
Enter the total amount of costs for qualified solar electric property	+	____________________[2]
Enter the total amount of costs for qualified solar water heating property	+	____________________[3]
Enter the total amount of costs for qualified fuel cell property	+	____________________[4]
Enter the total amount of kilowatt capacity of the qualified fuel cell property		____________[5]

NOTES/QUESTIONS:

First-Time Homebuyer Credit

If you or your spouse purchased a principal residence after April 8, 2008, and before July 1, 2009, you may qualify for the First-Time Homebuyer Credit. The home must be located within the United States and neither party may have owned, or held an ownership interest in, a home during the three year period prior to the home's purchase date. If your home was purchased within the first 6 months of 2009 enter your information. There is a special rule that allows homes purchased after December 31, 2008, and before July 1, 2009, to be used for calculating the 2008 First-Time Homebuyer Credit.

Principal residence address, if different from home address on Organizer Form ID: 1040

Address ______ [1]

City/State/Zip code ______ [2] ______ [3] ______ [4]

Date home acquired (After 4/8/08 and before 7/1/09) ______ [5]

Purchase price of the home ______ [7]

Mark if home was purchased from a related party ___ [8]

Has the home been sold or is no longer being used as the principal residence? (1 = Yes, 2 = No) ___ [10]

In the period three years prior to the purchase date had the:

Taxpayer owned a home or had ownership interest in a home? (1 = Yes, 2 = No) ___ [11]

Spouse owned a home or had ownership interest in a home? (1 = Yes, 2 = No) ___ [12]

If you are filing married filing separately, were you married on the purchase date? (1 = Yes, 2 = No) ___ [13]

If you own the principal residence with another person enter their name and percentage of ownership

Other owner name ______ [16]

Percentage of ownership ______

NOTES/QUESTIONS: