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## **2008 TAX ORGANIZER**

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**This tax organizer has been prepared for your use in gathering the information needed for your 2008 tax return.**

**To save you time, selected information from your 2007 tax return has been entered within this organizer. Please line through any information which does not apply to your 2008 tax return.**

**In some cases, 2007 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.**

**REMOVE THIS SHEET PRIOR TO RETURNING THE COMPLETED ORGANIZER**

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## **Tax Organizer Legend:**

Throughout the tax organizer, you will find columns with the heading "TSJ".  
TSJ Codes - Enter "T" for taxpayer, "S" for spouse or "J" for joint.



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

Personal Information:

- Did your marital status change during 2008?
If married, do you and your spouse want to file separate returns?
Did your address change during 2008?
Can you or your spouse be claimed as a dependent by another taxpayer?

Dependents:

- Were there any changes in dependents from the prior year?
Did you pay for child care while you worked or looked for work?
Do you have any children under age 18 with unearned income more than \$900?
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 \$900?
Did you adopt a child or begin adoption proceedings during 2008?

Purchases, Sales and Debt:

- Did you have any debts canceled, forgiven or refinanced during 2008?
Did you start a new business, purchase a new rental property, farm or acquire any new interest in any partnership or S corporation during 2008?
Did you sell an existing business, rental property, farm or any existing interest in a partnership or S corporation during 2008?
Did you sell, exchange or purchase any real estate in 2008? If so, please attach closing statements.
Did you withdraw any amounts from your Individual Retirement Account (IRA) or Roth IRA to acquire a principal residence?
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?
Did you pay any student loan interest in 2008?
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.
Did you have an outstanding home equity loan at the end of 2008? If so, please provide the principal balance and interest rate at the beginning and end of the year.
Did you take out a home equity loan in 2008?
Are you claiming a deduction for mortgage interest paid to a financial institution for which someone else received the Form 1098?
Did you engage in any put or call transactions? If Yes, please provide details.
Did you close any open short sales during 2008?
Did you sell any securities not reported on your Form 1099-B?





Miscellaneous: (continued)

- Did you engage in any bartering transactions? .....
- Did you have any work outside of the U.S. or pay any foreign taxes? .....
- Did someone displaced by the storms in the Midwest live with you? .....

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

Gifts:

- Did you or your spouse make any gifts, including birthday, holiday, anniversary, graduation, etc., with a total (aggregate) value in excess of \$12,000 to any individual during the year? .....
- Did you or your spouse make any gifts to a trust for any amount during the year? .....
- Do you or your spouse have a life insurance trust? .....
- Did you assist in the purchase of any asset (auto, home) for any individual during the year? .....
- Did you forgive any indebtedness to any individual, trust or entity during the year? .....

<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>

If you answered Yes to any of the above gift questions, please complete Form 34 and/or 35 in the back of the Organizer.

Severance/Retirement:

- Did you retire or change jobs in 2008? .....
- Did you receive deferred, retirement or severance compensation? .....

<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>

Date

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

- Did you or your spouse turn age 70 1/2 during the year and have money in an IRA or other retirement account without taking any distribution? .....

<input type="checkbox"/>	<input type="checkbox"/>
--------------------------	--------------------------

Sale of Your Home:

- Did you sell your home in 2008? .....
- 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? .....

<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>

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

Additional Information:

- With respect to any trust you have created or for which you are the trustee, have any beneficiaries died during 2008? .....
- Did you or your spouse make any contributions to Qualified State Tuition Plans (Section 529 plans) during 2008? .....

<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>

If Yes, enter the following:

Name of Designated Beneficiary	Social Security Number	State Sponsoring Plan	Account Number	2008 Amount Contributed



# Personal Information, Dependent(s) and Wages

**Taxpayer:**

\_\_\_\_\_  
First Name and Initial

\_\_\_\_\_  
Last Name

\_\_\_\_\_  
Social Security Number

\_\_\_\_\_  
Occupation

\_\_\_\_\_  
Date of Birth (Mo/Da/Yr)

\_\_\_\_\_  
Daytime/Work Telephone Number

\_\_\_\_\_  
Evening/Home Telephone Number

\_\_\_\_\_  
Primary Email Address

\_\_\_\_\_  
Secondary Email Address

**Spouse:**

\_\_\_\_\_  
First Name and Initial

\_\_\_\_\_  
Last Name

\_\_\_\_\_  
Social Security Number

\_\_\_\_\_  
Occupation

\_\_\_\_\_  
Date of Birth (Mo/Da/Yr)

**Present Mailing Address:**

\_\_\_\_\_  
Street Address

\_\_\_\_\_  
Apartment Number

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
ZIP code

\_\_\_\_\_  
Foreign Country

May the IRS or other taxing authority discuss the return with the preparer?  Yes  No

Is the taxpayer claimed as a dependent on someone else's tax return?  Yes  No

Are you considered legally blind per IRS regulations?  Yes  No

Do you want to contribute to the Presidential Election Campaign Fund?  Yes  No

Stimulus payment received before any reductions  Yes  No

## Dependent Information:

Did dependent have income over \$3,500?

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 for which 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/TIER 1	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. Electronic filing is the only filing method that provides you with acknowledgement that the IRS has received your return and is processing it. If you are to receive a refund and use direct deposit with electronic filing, you will normally receive your refund in about 2 weeks.

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

If you qualify for electronic filing, would you like to file the return electronically with the IRS? 

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

Would you like your return prepared and filed electronically when you have a balance due? 

<input type="checkbox"/>	<input type="checkbox"/>
--------------------------	--------------------------

Would you like your federal return filed electronically only if your refund is greater than a certain minimum dollar amount? 

<input type="checkbox"/>	<input type="checkbox"/>
--------------------------	--------------------------

If Yes, enter the amount here.

If you qualify, would you like to file your state return electronically? 

<input type="checkbox"/>	<input type="checkbox"/>
--------------------------	--------------------------

If you file more than one state, do you want to file all of them electronically? 

<input type="checkbox"/>	<input type="checkbox"/>
--------------------------	--------------------------

**The IRS has implemented a program to allow taxpayers to e-file without mailing a signature document. In order to participate, please provide a 5-digit self-selected Personal Identification Number (PIN).**

Self-selected PIN:

Taxpayer PIN \_\_\_\_\_

Spouse PIN \_\_\_\_\_



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. If the account should be used for a refund anticipation loan, please mark both the refund anticipation loan box and either the checking or trad. savings box.

(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 [ ] Refund Anticipation Loan

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 \_\_\_\_\_

Do you want your refund deposited directly into your financial institution account? [Yes] [No]

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) \_\_\_\_\_

Owner of account ... [ ] Taxpayer [ ] Spouse [ ] Joint
Select type of account ... [ ] Checking [ ] Trad. Savings [ ] IRA Savings [ ] HSA Savings
[ ] Archer MSA Savings [ ] Coverdell Ed.Savings [ ] Refund Anticipation Loan

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 \_\_\_\_\_

Do you want your refund deposited directly into your financial institution account? [Yes] [No]

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) \_\_\_\_\_







# Business Income and Cost of Goods Sold

Name of Business: \_\_\_\_\_

Principal Business or Profession: \_\_\_\_\_

TSJ \_\_\_\_\_  
 Employer ID number \_\_\_\_\_  
 Street address \_\_\_\_\_  
 City, state and ZIP code \_\_\_\_\_  
 Method of inventory \_\_\_\_\_  
 Method of accounting \_\_\_\_\_

### Business Questions for 2008:

Did you dispose of this business?  Yes  No  
 If Yes, what was the disposition date? \_\_\_\_\_ (Mo/Da/Yr)  
 Was there a change in determining quantities, costs or valuations between opening and closing inventory?  Yes  No  
 Were you involved in the operations of this business on a regular, continuous and substantial basis?  Yes  No

	2008 Amount	2007 Amount
Health insurance premiums paid for yourself and your dependents		

### Income:

	2008 Amount	2007 Amount
Gross receipts or sales		
Less returns and allowances		

### Cost of Goods Sold:

	2008 Amount	2007 Amount
Beginning inventory		
Purchases less cost of items withdrawn for personal use		
Cost of labor (do not include amounts paid to yourself)		
Materials and supplies		

Other Costs of Cost of Goods Sold:

Description	2008 Amount	2007 Amount
Ending inventory		

### Other Income:

Description	2008 Amount	2007 Amount





# Business Expenses

Name of Business: \_\_\_\_\_  
 Principal Business or Profession: \_\_\_\_\_

Business Expenses: **Enter all expenses at 100 percent**

If these expenses are to be divided between two or more businesses, please enter the percentage to apply to this business . . . . . %

	2008 Amount	2007 Amount
Parking fees and tolls .....		
Local transportation .....		
Travel expenses .....		
Meals and entertainment .....		

Other Business Expenses:

Description	2008 Amount	2007 Amount

Reimbursements: **Please list only reimbursements NOT reported in Box 1 of your Form W-2**

	2008 Amount	2007 Amount
Amount received for other expenses .....		
Amount received for meals and entertainment .....		

If you are a statutory employee, does your employer's reimbursement plan for meals and entertainment allow for offset of other reimbursements?  Yes  No

### Vehicle:

If these vehicle expenses are to be divided between two or more businesses, please enter the percentage to apply to this business \_\_\_\_\_ %

Description of vehicle .....

Date vehicle was placed in service ..... (Mo/Da/Yr) \_\_\_\_\_

Do you (or your spouse) have another vehicle available for personal purposes?  Yes  No

Was your vehicle available for personal use during off-duty hours?  Yes  No

	2008	2007
Total miles .....		
Total business miles .....		
Total business miles after June 30 .....		
Average daily commuting miles .....		
Total commuting miles for the year .....		
Gasoline and oil .....		
Repairs .....		
Insurance .....		
Interest .....		
Taxes .....		
Value of employer provided vehicle .....		
Temporary vehicle rentals .....		
Fair market value of leased vehicle .....		
Vehicle leases .....		

Other Vehicle Expenses:

Description	2008 Amount	2007 Amount



# Business Use of Home

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Name of Business: \_\_\_\_\_

Principal Business or Profession: \_\_\_\_\_

### Partial Use of Your Home for Business:

Square footage of home used exclusively for business .....

Total square footage of home .....

Total hours home was used for day care during the year .....

2008	2007

Was your home used for day care purposes for the entire year? .....

Were improvements made to the home and/or home office since the time you began using the home for business? .....

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

### Expenses: Enter all expenses at 100 percent

Direct expenses benefit the business part of your home.

Example: Cost of painting or repairs made to the specific area or room used for business.

Indirect expenses are required for keeping up and running your entire home.

Example: Real estate taxes.

	Direct Expenses		Indirect Expenses	
	2008 Amount	2007 Amount	2008 Amount	2007 Amount
Casualty losses .....				
Deductible mortgage interest paid to:				
Financial institutions .....				
Individuals .....				
Real estate taxes .....				
Insurance .....				
Repairs and maintenance .....				
Utilities .....				
Rent .....				

### Other Expenses:

Description	Direct Expenses		Indirect Expenses	
	2008 Amount	2007 Amount	2008 Amount	2007 Amount

### Seller-Financed Mortgage Interest Information:

Name of Individual to Whom Mortgage Interest Was Paid	Identification Number of Individual	Address of Individual to Whom Mortgage Interest Was Paid





Individual Retirement Account (IRA):

TS \_\_\_\_\_
Name of payer \_\_\_\_\_

IRA Questions for 2008:

- 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 2008 from a traditional IRA, Roth IRA or Qualified Education Account?
Did you convert a traditional IRA to a Roth IRA in 2008?
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.

Table with 2 columns: Yes, No. Rows corresponding to the questions above.

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

Total value of all traditional IRAs on December 31, 2008
Outstanding rollovers on December 31, 2008
IRA distributions received during 2008
Total distributions converted to Roth IRAs
Amount of Qualified Disaster Recovery Assistance Distributions

Table with 5 rows for inputting values for the items listed above.

Contributions: Please enclose copies of all Forms 5498

IRA:
Contributions in 2008 for the 2008 tax return
Contributions in 2009 for the 2008 tax return
Amount for 2008 you choose to be treated as nondeductible
Roth IRA:
Contributions made for the 2008 tax year

Table with 4 rows for inputting contribution values.

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

Table with columns: TSJ, Name of Payer, 2008 Gross Distributions, Taxable Amount, Federal Tax Withheld, State Tax Withheld, Is this a Rollover?, IRA?, 2007 Gross Distributions.

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

Have you established a self-employed retirement or SIMPLE plan with deductible contributions?
Do you wish to contribute the maximum amount allowed?

Contributions to:

Simplified employee pension
Defined benefit plan
Defined contribution plan
SIMPLE plan

Complex table for Self-Employed Retirement Plan with sub-tables for Taxpayer and Spouse, including Yes/No columns and 2008 Amount input fields.





**Rental and Royalty  
Property and Equipment & Depletion**

Location of Property: \_\_\_\_\_

Property and Equipment: Please attach a list if more space is needed

**Acquisitions:**

X if not new	Description	Date Acquired (Mo/Da/Yr)	Cost

**Dispositions:**

Description	Date Acquired (Mo/Da/Yr)	Cost	Date Sold (Mo/Da/Yr)	Selling Price

**Percentage Depletion Information:**

Production Type	Royalty Income	
	2008 Amount	2007 Amount





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 _____	
	2008 Amount	2007 Amount	2008 Amount	2007 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 2008				
Social security benefits received				
Social security benefits repaid in 2008				
Medicare premiums withheld				
Tier 1 railroad retirement benefits received				
Tier 1 railroad retirement benefits repaid in 2008				
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

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

TS	2008 Amount	2007 Amount

Other Income:

TSJ	Nature and Source	2008 Amount	2007 Amount

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

TSJ	Nature and Source	2008 Amount	2007 Amount

Alimony Paid or Received:

TSJ	Recipient's Name	Recipient's Social Security No.	Alimony Received?	2008 Amount	2007 Amount



Itemize real estate taxes by state.

Medical and Dental Expenses:

Prescription medicines and drugs
Total medical insurance premiums paid (Do not include medicare premiums paid)
Long-term care expenses
Total insurance reimbursement
Number of miles traveled for medical care
Number of miles traveled for medical care after June 30
Lodging
Doctors, dentists, etc.
Hospitals
Lab fees
Eyeglasses and contacts

Table with 3 columns: TSJ, 2008 Amount, 2007 Amount. Rows correspond to the medical and dental expense categories.

Taxpayer long-term care insurance premiums paid
Spouse long-term care insurance premiums paid

Table with 2 columns: 2008 Amount, 2007 Amount. Rows correspond to the long-term care insurance categories.

Other Medical Expenses:

Table with 4 columns: TSJ, Description, 2008 Amount, 2007 Amount. For listing other medical expenses.

Taxes Paid: Please include copies of your tax bills

Personal property taxes paid (include vehicle taxes)
General sales taxes paid on specified items

Table with 3 columns: TSJ, 2008 Amount, 2007 Amount. Rows correspond to the general tax categories.

Table with 4 columns: TSJ, Real Estate Taxes, 2008 Amount, 2007 Amount. For listing real estate taxes.

Other Taxes Paid:

Table with 4 columns: TSJ, Description, 2008 Amount, 2007 Amount. For listing other taxes paid.

If you purchased or sold your home in 2008, did you include any taxes from your closing statement in the amounts above? Yes No



Mortgage Questions for 2008:

If you purchased or sold your home, did you include any mortgage interest from your closing statement in the amount below? . . .
Did you refinance your home? (If Yes, please enclose the closing statement.) . . .
If Yes, how many years is your new mortgage loan? . . .
Did you purchase a new home or sell your former home during the year? . . .
If Yes, please enclose the closing statements from the purchase and sale of your new and former homes.

Yes No
Yes No
Yes No
Yes No

Home Mortgage Interest Paid To Financial Institutions:

Table with 5 columns: TSJ, Paid To, Did You Receive Form 1098? (Yes/No), 2008 Amount, 2007 Amount

Other Home Mortgage Interest Paid:

Table with 5 columns: TSJ, Paid To (Name/Address), ID Number, 2008 Amount, 2007 Amount

Deductible Points:

Table with 5 columns: TSJ, Paid To, Did You Receive Form 1098? (Yes/No), 2008 Amount, 2007 Amount

Mortgage Insurance Premiums:

Premiums paid or accrued for qualified mortgage insurance.

Table with 2 columns: TSJ, 2008 Amount

Investment Interest Expense:

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

Table with 4 columns: TSJ, Paid To, 2008 Amount, 2007 Amount



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.

Table with 4 columns: TSJ, Organization or Description of Contribution, 2008 Amount, 2007 Amount

Table with 4 columns: TSJ, Conservation Real Property, 2008 Amount, 2007 Amount. Includes rows for 100% limit and 50% limit.

Table with 4 columns: TSJ, Description, 2008 Miles, 2007 Miles. Includes rows for volunteer work before and after July 1, 2008.

Table with 3 columns: TSJ, Description, 2008 Amount. Includes row for cash contributions made on or after May 2, 2008.

Noncash Contributions Totaling Less Than or Equal to \$5000:

Table with 4 columns: TSJ, Description of Donated Property, 2008 Amount, 2007 Amount

Noncash Contributions Totaling More Than \$5000:

Form with fields for: TSJ, Description of the donated property, Donee organization name, Donee organization address, Date the property was acquired by the taxpayer, Date the property was donated, Cost or basis of the donated property, Fair market value of the donated property, and checkboxes for appraisal methods and acquisition methods.



Miscellaneous Itemized Deductions:

Union and professional dues
Tax preparation fee
Professional subscriptions
Hobby expense (To extent of income)
Safe deposit box
Uniforms and protective clothing
Work tools
Gambling losses
Estate taxes

Table with 3 columns: TSJ, 2008 Amount, 2007 Amount

Other Itemized Deductions:

Examples:

- Certain legal and accounting fees
Investment expenses
Custodial fees
Employment agency fees
Certain educational expenses

Table with 4 columns: TSJ, Description, 2008 Amount, 2007 Amount

Casualty or Theft Loss:

TSJ \_\_\_\_\_

Property description \_\_\_\_\_

Which of the following describes the type of property that sustained the casualty or theft loss?

- Personal use, Business use, Income producing, Employee Use, Personal use due to Hurricane Katrina, Personal use attributable to a federally declared disaster, Personal use attributable to Midwestern disaster area

Date acquired (Mo/Da/Yr) \_\_\_\_\_

Date damaged or lost (Mo/Da/Yr) \_\_\_\_\_

Original cost or other basis \_\_\_\_\_

Fair market value before casualty \_\_\_\_\_

Fair market value after casualty \_\_\_\_\_

Cost of replacement \_\_\_\_\_

Insurance reimbursement \_\_\_\_\_



# Employee Business Expenses

TS: \_\_\_\_\_ Occupation: \_\_\_\_\_

Business Expenses: **Enter all expenses at 100 percent**

If these expenses are to be divided between Schedule A (Itemized Deductions) and one or more businesses, please enter the percentage to apply to Schedule A \_\_\_\_\_ %

	2008 Amount	2007 Amount
Parking fees and tolls .....		
Local transportation .....		
Travel expenses .....		
Meals and entertainment .....		
Other Business Expenses:		

Description	2008 Amount	2007 Amount

Reimbursements: **Please list only reimbursements NOT reported in Box 1 of your Form W-2**

	2008 Amount	2007 Amount
Amount received for other expenses .....		
Amount received for meals and entertainment .....		

Does your employer's reimbursement plan for meals and entertainment allow for offset of other reimbursements?  Yes  No

### Vehicle:

If these vehicle expenses are to be divided between Schedule A (Itemized Deductions) and one or more businesses, please enter the percentage to apply to Schedule A \_\_\_\_\_ %

Description of vehicle .....

Date vehicle was placed in service ..... (Mo/Da/Yr) \_\_\_\_\_

Do you (or your spouse) have another vehicle available for personal purposes?  Yes  No

Was your vehicle available for personal use during off-duty hours?  Yes  No

	2008	2007
Total miles .....		
Total business miles .....		
Total business miles after June 30 .....		
Average daily commuting miles .....		
Total commuting miles for the year .....		
Gasoline and oil .....		
Repairs .....		
Insurance .....		
Taxes .....		
Value of employer provided vehicle .....		
Temporary vehicle rentals .....		
Fair market value of leased vehicle .....		
Vehicle leases .....		
Other Vehicle Expenses:		

Description	2008 Amount	2007 Amount



# Child/Dependent Care Expenses & Education Expenses

## Child/Dependent Care Expenses:

### General Information:

TSJ .....

Were you or your spouse a full time student or disabled?  Yes  No  
Did you pay an individual for services performed in your home?  Yes  No

Expenses incurred in 2007 but paid in 2008 .....  
Employer-provided dependent care benefits that were forfeited in 2008 .....  
2007 carryover used in grace period .....

### Child/Dependent Care Providers:

**Provider 1:**

Name .....  
Street address .....  
City, state and ZIP code .....  
Social security number OR .....  
Employer identification number .....  
Telephone number (California only) .....

	2008 Amount	2007 Amount
Expenses incurred and paid in 2008 .....		
Expenses incurred and not paid in 2008 .....		

**Provider 2:**

Name .....  
Street address .....  
City, state and ZIP code .....  
Social security number OR .....  
Employer identification number .....  
Telephone number (California only) .....

	2008 Amount	2007 Amount
Expenses incurred and paid in 2008 .....		
Expenses incurred and not paid in 2008 .....		

### Qualifying Persons for Child/Dependent Care Expenses:

First Name and Initial	Last Name	Social Security Number	2008 Expenses Incurred	2007 Expenses Incurred

### Higher Education Expenses for Education Credits and/or Tuition Fees Deduction:

Qualified expenses are for post-secondary education tuition and related expenses. They do not include room, board or books.

**Please enclose copies of all Forms 1098-T**

First Name and Initial	Last Name	Social Security Number	Grade	2008 Qualified Expenses



Refund Application:

If you have an overpayment of 2008 taxes, do you want the excess:

Refunded .....  Yes  No  
 Applied to your 2009 estimated tax liability  Yes  No

Federal Estimated Tax Payments:

2008 1st Quarter Estimate ..... (Due 04-15-2008)  
 2008 2nd Quarter Estimate ..... (Due 06-16-2008)  
 2008 3rd Quarter Estimate ..... (Due 09-15-2008)  
 2008 4th Quarter Estimate ..... (Due 01-15-2009)

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

2007 overpayment applied to 2008 estimate .....

Tax Planning Information for Tax Year 2009:

Do you expect any of the following to occur in 2009?

	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.




General Information:

County of residence .....

Jury duty pay returned to employer .....

Do you qualify as deaf or disabled? ... Taxpayer Spouse Yes No Yes No

Residency Information:

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

If you did not live in Hawaii for all of 2008, enter the dates you did live in Hawaii .....

Enter the state names other than Hawaii for which you had income .....

Voluntary Contributions:

Enter the amount of political contributions made during 2008 .....

Do you wish to contribute \$2 to the Hawaii Election Campaign Fund? ... Taxpayer Spouse Yes No Yes No

Low-Income Household Renters:

Address .....

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

Dates occupied .....

Owner's name .....

Owner's address .....

Owner's tax ID number .....

Enter total rent paid .....

Enter Any Additional Hawaii Information:

Empty box for additional information