James R. Bowers

“Taxes & More”

810-687-9014

2009 INCOME TAX ORGANIZER

CLIENT NAME: ____

Employment & Other Income Data:

_____ *All W-2 Forms for the Current Year*
_____ *Interest and Dividend Income Statement Forms 1099-INT & 1099-DIV*
_____ *State and City Income Tax Refunds from 2009 Forms 1099-G*
_____ *Proceeds from Stock Sales Forms 1099-B*
*(***IMPORTANT:***We must have Date Acquired, Cost, Number of Shares, Date Sold, and Sale Proceeds)*
_____ *Sale of any Real Estate Forms 1099-S*
_____ *Pensions, Annuities, IRA & other Retirement Distributions Forms 1099-R*
_____ *Any Partnership, S-Corp, and/or Trust Income Schedules K-1*
_____ *Unemployment Compensation Forms 1099-G*
_____ *Social Security Benefit Forms*
_____ *All Miscellaneous Income Forms 1099-MISC or 1099-NEC*
_____ *Gambling Income, Lottery Income, Prizes, Awards, Jury Duty, etc.*
_____ *Other Income and Source*____

****SPECIAL NOTE FOR CLIENTS WITH BUSINESS AND/OR RENTALS****
PLEASE CALL OUR OFFICE IF YOU NEED A SPECIAL C- E CHECKLIST

Adjustments to Income:

_____ *Educator Expenses $* ______________
_____ *Moving Expenses Required for New Employment $*______________
_____ *Contributions to any IRA, SEP, or other Retirement Plans $*________________
_____ *Self Employed Persons Health Insurance Premiums $*________________
_____ *Student Loan Interest Info Forms*
_____ *Other Adjustments and Source* ____

Medical & Dental:

_____ *Medical Insurance Premiums Paid $*________________
_____ *Long Term Care Premiums $*________________
_____ *Prescription Drug Costs $*________________
_____ *Doctor, Dentist, Dentures, Hospital, Ambulances, etc $*________________
_____ *Eye Glasses, Contacts, Hearing Aids, etc $*________________
_____ *Medical Mileage* _________________
______*Other Medical Costs Incurred $*____

Taxes Paid:

_____ *State & City Taxes Paid on Previous Years Returns $_______________*
_____ *Real Estate Taxes Paid on* ***Principal Residence*** *$_______________*
(We Need Original Statement or Bill from City, County, Township, etc for the Michigan Credit)
______*Taxable Value of Your Homestead $_______________*
_____ *Real Estate Taxes on other Properties $________________*
_____ *Sales Tax Paid on Large Items (Boat, Mobile Homes, Motorcycle, Building Materials, etc)*
_____ *Auto License Registrations (Motor Vehicles Only) $_______________*
_____ *Other Taxes $____*
_____ *Sales Tax Paid on* ***NEW*** *Vehicle Purchases ________________________*

Interest Paid:

_____ *Mortgage Interest Forms 1098*
_____ *Second Mortgage Interest Paid on Forms 1098 or 2nd Home, etc*
_____ *Land Contract Interest Paid Including Payees Name, Address, and SSN*
_____ *Points Paid $_______________*
_____ *Qualified Mortgage Insurance Premiums $ _______________*

Donations & Contributions:

_____ *Original Statements from Church if Over $1000*
_____ *Any Other Miscellaneous Cash Contributions $_______________*
_____ *Any Non-Cash Contributions to Goodwill, Salvation Army, etc $_______________*
_____ *Any Large Non-Cash Donation that Needed Appraisal Completed-Please Bring Appraisal*

Miscellaneous Deductions:

_____ *Union Dues if not on W-2 Form $_______________*
(**IMPORTANT:** *For Trades- Please Bring Industry Calculations)*
_____ *Required Employment Education Expenses $_______________*
_____ *Job Related Mileage ______________ Job Search Expense $_______________*
_____ *Uniforms, Safety Shoes, Tools, etc $_______________*
_____ *Other Job Related Job Expenses $_______________*
_____ *Safety Deposit Box $___________ Tax Preparation Fees $__________*
_____ *Gambling Losses (Limited to Winnings) $_______________*

Tax Credits:

_____ *Child Care Expenses/Babysitting $__________________ ____________________*
Name(s) of Care Provider ___________________ ____________________
Complete Address _________________________ ____________________
E.I.N. or SSN ____________________________ ____________________
Child(rens) Name Cared For ________________ ____________________
________________ ____________________

_____ *Education Expenses (Tuition Only) $_______________ $____________________*
Student name ___________________________ ____________________
Year of College __________________________ ____________________
Books __________ Supplies _________ Equipment __________

Other Important Questions for 2009

Did you purchase a new or replacement home in 2008, 2009, or 2010 Y_____ N _____

Date Purchased ___________________________
Cost of New Home ________________________

Did you purchase any energy efficient appliances, home improvements, etc?
*Any and all energy efficient items must meet **ENERGY STAR** ratings*

Windows	________________________
Insulation	________________________
Furnaces	________________________
Refrigerator	________________________
Ext Doors	________________________
Metal Roof	________________________
Boiler	________________________
Bldg Material	________________________
Pump or Fan	________________________
Water Heater	________________________
Washer	________________________
Dishwasher	________________________

Are you a retiree of **ANY** governmental department or agency? Y _______

Did you pay energy cost recovery surcharges on your utility bills? Y _______

Did you receive any non-taxable income not shown on any form?

Child Support	$ ___________	FIA Benefits	$ ___________
SSI	$ ___________	Vets Disability	$ ___________
Family Loans	$ ___________	Alimony	$ ___________
Worker Comp	$ ___________	Food Stamps	$ ___________

Did you pay any estimated taxes for 2009?

Federal	1Q _______	2Q _______	3Q _______	4Q _______
State	1Q _______	2Q _______	3Q _______	4Q _______
City	1Q _______	2Q _______	3Q _______	4Q _______

SPECIAL NOTE: ***Any income not documented on an employer provided form such as a W-2 or 1099 (child care, office cleaning, tips, casual labor, etc) must be documented on a daily basis in the logbook provided.***