

# The Rainey Accounting Firm, LLC

Certified Public Accounting  
3725 Vineville Avenue  
Macon, Georgia 31204

,

*2008 Client Organizer*

# The Rainey Accounting Firm, LLC

Certified Public Accounting  
3725 Vineville Avenue, Macon, Georgia 31204  
Tel : 478-314-2692 f Fax: 478-314-2694  
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Dear :

This Client Organizer is designed to help you gather tax information needed to prepare your 2008 personal income tax return. We have preprinted certain information from your 2007 personal income tax return to help you complete the organizer with minimal time and effort. The organizer is also a tool to remind you of items that you have had in the past and might not be easily remembered.

The information you provide to us is vital to preparing your return accurately and completely. There is a space at the end of the questionnaire for you to make this declaration by signing and dating in the spaces provided.

We have also included an engagement letter outlining the terms of your engaging our firm to prepare your returns. Please sign and date at the end of this letter indicating your acceptance of this engagement.

In your Client Organizer, all social security numbers and bank account numbers have been replaced with asterisks (\*\*\_\*\_\*\_\*\*\*) and (\*\*\*\*1234) to protect your privacy and personal information. If you need to change or update a social security number or bank account information that differs from the prior year's return, please inform us of these changes. When you receive your completed tax return(s), please review all social security numbers and bank account information for accuracy. Report any discrepancies to this office immediately.

Enter 2008 information on the Client Organizer sheets provided. **If you supply us with the supporting documents, then you need not enter this information in detail unless there are discrepancies or if further explanation is needed.** 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 about 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.**

By law all charitable contributions claimed as a deduction on your tax return must be substantiated by keeping a written record of the contribution. Acceptable written records used to substantiate each contribution include a cancelled check or bank record that supports the donation, or a written receipt or similar statement that includes (1) the name of the donee organization and (2) the date and amount of the contribution and (3) if any goods or services were received in exchange for the contribution. If the resulting returns are examined by the IRS, requests may be made for the written record of the contribution. It is recommended that for any charitable contributions claimed, you retain the written records for at least seven years.

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 showing income 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.

Like all providers of personal financial services, tax professionals are required by law to inform clients of their policies regarding privacy of client information. Our firm continues to adhere to professional standards of confidentiality that are even more stringent than those required by law. We have always protected the security and privacy of your personal and financial information.

### **Types of Nonpublic Personal Information We Collect**

The only nonpublic personal information we collect is provided to us by you or obtained with your authorization.

### **Parties to Whom We Disclose Information**

We do not disclose any nonpublic personal information obtained in the course of our practice except as required or permitted by law. Permitted disclosures may include providing information to our employees, or, in limited situations, to unrelated third parties who need that information to assist us in serving you. In all situations, we stress the confidential nature of the information being shared.

### **Protecting the Confidentiality and Security of Clients' Information**

We retain records relating to our professional services to better serve your professional needs and, in some cases, to comply with professional guidelines. In order to protect your nonpublic personal information, we maintain physical, electronic, and procedural safeguards that comply with our professional standards.

### **Due Date**

In order to meet the filing deadline for your 2008 income tax return, your completed tax organizer needs to be received by our office no later than March 18, 2009. Any information received after that date may require an extension of time to be filed for your return.

We appreciate the opportunity to serve you.

Sincerely,

The Rainey Accounting Firm, LLC

Jeb L. Rainey, CPA

Enclosures

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## Engagement Letter

Dear :

This letter is to confirm and specify the terms of our engagement with you and to clarify the nature and extent of the services we will provide. In order to ensure an understanding of our mutual responsibilities, we ask all clients for whom returns are prepared to confirm the following arrangements.

We will prepare your 2008 federal and state income tax returns from information which you will furnish to us. We will not audit or otherwise verify the data you submit, although it may be necessary to ask you for clarification of some of the information. We will furnish you with questionnaires and worksheets to guide you in gathering the necessary information. Your use of such forms will assist in keeping pertinent information from being overlooked as well as keeping the fee to a minimum.

It is your responsibility to provide all the information required for the preparation of complete and accurate returns. You should retain all the documents, cancelled checks and other data that form the basis of income and deductions. These may be necessary to prove the accuracy and completeness of the returns to a taxing authority. **You have the final responsibility for the income tax returns and, therefore, you should review them carefully before you sign and file them.**

Our work in connection with the preparation of your income tax returns does not include any procedures designed to discover defalcations and/or irregularities, should any exist. We will render such accounting and bookkeeping assistance as determined to be necessary for preparation of the income tax returns.

The filing deadline for the tax return is April 15, 2009. In order to meet this filing deadline, the information needed to complete the return should be received in this office no later than March 18, 2009.

**If an extension of the time is required, any tax due with this return must be paid with that extension. Any amounts not paid by the filing deadline may be subject to interest and late payment penalties.**

The law provides various penalties that may be imposed when taxpayers understate their tax liability. If you would like information on the amount or the circumstances of these penalties, please contact us.

Your returns may be selected for review by the taxing authorities. Any proposed adjustments by the examining agent are subject to certain rights of appeal. In the event of such government tax examination, we will be available upon request to represent you under a separate engagement

letter for that representation and will render additional invoices for the time and expenses incurred.

Our fee for these services will be based upon the amount of time required at standard billing rates plus out-of-pocket expenses. All invoices are due and payable upon presentation.

If the foregoing fairly sets forth your understanding, please sign the enclosed copy of this letter in the space indicated and return it to our office. However, if there are other tax returns you expect us to prepare, please inform us by noting so at the end of the return copy of this letter.

We want to express our appreciation for this opportunity to work with you.

Very truly yours,

The Rainey Accounting Firm, LLC

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Client Acknowledgement and Acceptance:

Accepted By (Taxpayer Signature): \_\_\_\_\_

Date: \_\_\_\_\_

Comments or Additional Requests: \_\_\_\_\_

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## 2008 Client Organizer

### Questions

Please check the appropriate box and include all necessary details.

|  | Yes                      | No                       |
|--|--------------------------|--------------------------|
| <b>Personal Information</b>  |                          |                          |
| Did your marital status change during the year?  | <input type="checkbox"/> | <input type="checkbox"/> |
| If yes, explain: _____   |                          |                          |
| Did your address change from last year?  | <input type="checkbox"/> | <input type="checkbox"/> |
| Can you be claimed as a dependent by another taxpayer?   | <input type="checkbox"/> | <input type="checkbox"/> |
| 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? | <input type="checkbox"/> | <input type="checkbox"/> |
| <b>Dependent Information</b>   |                          |                          |
| Were there any changes in dependents from the prior year?  | <input type="checkbox"/> | <input type="checkbox"/> |
| If yes, explain: _____   |                          |                          |
| Do you have any children under age 19 or a full-time student under age 24 with unearned income in excess of \$1800?  | <input type="checkbox"/> | <input type="checkbox"/> |
| Did you pay for child care while you worked or looked for work?  | <input type="checkbox"/> | <input type="checkbox"/> |
| Did you pay any expenses related to the adoption of a child during the year?   | <input type="checkbox"/> | <input type="checkbox"/> |
| <b>Purchases, Sales and Debt Information</b>   |                          |                          |
| Did you start a new business or purchase rental property during the year?  | <input type="checkbox"/> | <input type="checkbox"/> |
| Did you acquire a new or additional interest in a partnership or S corporation?  | <input type="checkbox"/> | <input type="checkbox"/> |
| Did you sell, exchange, or purchase any real estate during the year?   | <input type="checkbox"/> | <input type="checkbox"/> |
| Did you acquire or dispose of any stock during the year?   | <input type="checkbox"/> | <input type="checkbox"/> |
| Did you take out a home equity loan this year?   | <input type="checkbox"/> | <input type="checkbox"/> |
| Did you refinance a principal residence or second home this year?  | <input type="checkbox"/> | <input type="checkbox"/> |
| Did you sell an existing business, rental, or other property this year?  | <input type="checkbox"/> | <input type="checkbox"/> |
| Did you incur any non-business bad debts this year?  | <input type="checkbox"/> | <input type="checkbox"/> |
| Did you purchase a new hybrid or alternative motor vehicle this year?  | <input type="checkbox"/> | <input type="checkbox"/> |
| Did you pay any student loan interest this year?   | <input type="checkbox"/> | <input type="checkbox"/> |
| <b>Income Information</b>  |                          |                          |
| Did you have any foreign income or pay any foreign taxes during the year?  | <input type="checkbox"/> | <input type="checkbox"/> |
| Did you receive any income from property sold prior to this year?  | <input type="checkbox"/> | <input type="checkbox"/> |
| Did you receive any lump-sum payments from a pension, profit sharing or 401(k) plan?   | <input type="checkbox"/> | <input type="checkbox"/> |
| Did you make any withdrawals from or contributions to an IRA, Keogh, SIMPLE, or SEP account?   | <input type="checkbox"/> | <input type="checkbox"/> |
| Did you make any withdrawals/contributions from/to a retirement plan (including IRA) due to Midwestern Disaster area relief?                                       | <input type="checkbox"/> | <input type="checkbox"/> |
| Did you make any withdrawals from an education savings or 529 Plan account?  | <input type="checkbox"/> | <input type="checkbox"/> |
| Did you receive any distributions from a health savings account (HSA), Archer MSA, or Medicare Advantage (MSA) this year?  | <input type="checkbox"/> | <input type="checkbox"/> |
| Did you receive any disability income during the year?   | <input type="checkbox"/> | <input type="checkbox"/> |
| Did you receive tip income not reported to your employer this year?  | <input type="checkbox"/> | <input type="checkbox"/> |
| Did any of your life insurance policies mature, or did you surrender any policies?   | <input type="checkbox"/> | <input type="checkbox"/> |
| Did you cash any Series EE or I U.S. Savings bonds issued after 1989?  | <input type="checkbox"/> | <input type="checkbox"/> |

### Itemized Deduction Information

Did you incur a casualty or theft loss during the year?

Do you have evidence to substantiate charitable contributions?

**General Rules:** The law requires that you have a receipt, letter, or other written communication from the charity (showing the name of the charity, the date and amount of the contribution) documenting all charitable contributions made in cash and that you have a receipt or a bank record (e.g. cancelled check) documenting all contributions made by check or by other monetary means. For contributions of property, you generally need a receipt which contains the name of the charity, a description of the property, and the date and location of the contribution.

**Contributions of \$250 or more:** For all individual donation of \$250 or more (cash or property), the law requires a receipt (written acknowledgement) from the charity to which you made the donation stating the date and amount of the contribution as well as a statement as to whether you received anything in return for your contribution. If you received goods or services in return for the contribution, the receipt should include a description and an estimate of the value of the goods or services received in return for the contribution. If the goods or services received consist solely of intangible religious benefits, the receipt should include a statement to that effect.

Did you make any noncash charitable contributions (clothes, furniture, vehicles, etc.)?

**Contributions of Clothing or Household items:** Generally, a deduction is not allowed for a charitable contribution of clothing or household items unless the items are in good used condition or better. Household items generally included furniture, furnishings, electronics, appliances, linens, and other similar items.

**Contributions of Vehicles, Boats, or Airplanes of more than \$500:** If you are claiming a deduction of more than \$500 for a vehicle, a boat, or an airplane you contributed to charity, the law requires that you obtain a Form 1098-C or other written acknowledgement containing the same information shown on form 1098-C from the charity in order to deduct your contribution.

Did you have an expense account or allowance during the year?

Did you use your car on the job, for other than commuting?

Do you have the required documentation for Travel, Entertainment, Gift and Listed property expenses?

**General Rules:** The law disallows an otherwise allowable deduction for any expense for traveling (including meals and lodging), entertainment, gifts, or listed property [e.g. passenger vehicles, computers (unless used exclusively at your place of business), and cell phones], unless the expense is substantiated by adequate records or by sufficient evidence corroborating your own statements. In addition, the regulations generally require you to maintain documentary evidence (such as receipts, paid bills, etc.) for **1)** any lodging expenditure, and **2)** any other expenditure of \$75 or more. **For business travel,** the documentation should include the amount, date, place, and business purposes of the travel. **For business entertainment expenses,** the documentation should include the amount, date, description of gift, and business relationship of recipient of the gift. **For listed property,** the documentation should include the amount (e.g. cost), business or investment use based on mileage, etc., date of the expenditure, and business or investment purpose of the property.

Did you work out of town for part of the year?

Did you have any educational expenses?

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

Did you make any major purchases during the year (cars, boats, etc.)?

Did you make any out-of-state purchases (by telephone, internet, mail, in person) that the seller did not collect state sales or use tax?

### Miscellaneous Information

Did you make gifts of more than \$12,000 to any individual?

Did you make any contributions to an education savings or 529 Plan account?

Did you pay long-term health care premiums for yourself or your family?

Did you engage in any bartering transactions?

Are you covered by a pension or retirement plan?

Did you retire or change jobs this year?

|   |          |          |
|---|----------|----------|
| Did you incur moving costs because of a job change?   | <b>P</b> | <b>P</b> |
| Did you, your spouse, or your dependents attend a post-secondary school during the year?  | <b>P</b> | <b>P</b> |
| Did you make energy efficient improvements to your main home this year?   | <b>P</b> | <b>P</b> |
| Were you 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? | <b>P</b> | <b>P</b> |
| Did you receive correspondence from the State or the Internal Revenue Service? If yes, explain: _____   | <b>P</b> | <b>P</b> |
| Do you want to designate \$3 to the Presidential Election Campaign Fund? Checking yes will not change your tax or reduce your refund.   | <b>P</b> | <b>P</b> |
| Did you receive an economic stimulus (tax rebate) payment from the IRS?   | <b>P</b> | <b>P</b> |
| Did you pay state and local real estate property taxes this year? If yes, please attach a supporting statement  | <b>P</b> | <b>P</b> |

**Communication Methods**

Our default method of delivery for client tax data organizers is via e-mail. If you did not receive this package via e-mail, would you like to next year? **P P**

Please indicate your preferred e-mail address: \_\_\_\_\_

If you prefer to receive your information in paper format via U.S. Mail, please indicate to the right, as we are glad to accommodate you. **P P**

**Taxpayer Declaration:** This information is complete and correct to the best of my (our) knowledge.

Taxpayer Name (Please Print): \_\_\_\_\_

Taxpayer Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Spouse Name (Please Print): \_\_\_\_\_

Spouse Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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                                  | _____           | _____         |
|   | <b>Taxpayer</b> | <b>Spouse</b> |
| 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 direct 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 social security number \_\_\_\_\_  
 Payer's address \_\_\_\_\_ Amount received in 2008 \_\_\_\_\_ Amount received in 2007 \_\_\_\_\_  
 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 |
|--|-------------------------|-------------------------------|------------------------|
|  | Taxpayer                | Spouse                        | Prior Year Information |
| State and local income tax refunds             | _____                   | _____                         | _____                  |
| 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:                                  | _____                   | _____                         | _____                  |
| <b>T/S/J</b>                                   | <b>2008 Information</b> | <b>Prior Year Information</b> |                        |
| _____  | _____                   | _____                         |                        |
| _____  | _____                   | _____                         |                        |

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 |
| <b>Traditional IRA Contributions for 2008 -</b>   |          |        |
| If you want to contribute the maximum allowable traditional IRA contribution amount,<br>enter the applicable code: (1 = Deductible only, 2 = Both deductible and nondeductible) |          |        |
| Enter the total traditional IRA contributions made for use in 2008  | _____    | _____  |
| <b>Roth IRA Contributions for 2008 -</b>  |          |        |
| 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        |
|----------------|----------------|-----------------|------------------|-------------------------------|
| _____          | _____          | _____           | _____            | _____                         |
| <b>Address</b> | _____          | <b>City</b>     | <b>State</b>     | <b>Zip code</b>               |
|                |                | <b>Taxpayer</b> | <b>Spouse</b>    | <b>Prior Year Information</b> |

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       |
| —  | _____  | _____            | _____                  |
| Address _____  |  | _____            | _____                  |
| T/S/J  |  | 2008 Information | Prior Year Information |
| —  | Investment interest expense, other than on K-1s: | _____            | _____                  |
|  |  | Refinance #1     | Refinance #2           |
| Refinancing Information:                                   |  |                  |                        |
| 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) | _____            | _____                  |

**1** Preparer use only

|   | 2008 Information | Prior Year Information |
|---|------------------|------------------------|
| Taxpayer/Spouse/Joint (T, S, J)   | _____ [2]        | [ ]                    |
| Description: <b>-</b>   | _____ [3]        |                        |
| _____   | _____ [4]        |                        |
| _____   | _____ [5]        |                        |
| State postal code   | _____ [6]        |                        |
| Type of activity (1 = Rental real estate, 2 = Substantially nondepreciable property, 3 = Royalty) | _____ [7]        |                        |
| Percentage of ownership if not 100%   | _____ [9]        | _____                  |
| Business use percentage, if not 100% (Not vacation home percentage)                               | _____ [11]       | _____                  |

**Rent and Royalty Income**

|                          | 2008 Information | Prior Year Information |
|--------------------------|------------------|------------------------|
| Gross rents received     | + _____ [18]     | [ ]                    |
| Gross royalties received | + _____ [20]     |                        |

**Rent and Royalty Expenses**

|   | 2008 Information | Percent if not 100%      | Prior Year Information |
|---|------------------|--------------------------|------------------------|
| Advertising                                     | + _____ [22]     | _____ [23]               | [ ]                    |
| Auto and travel                                 | + _____ [25]     | _____ [26]               |                        |
| Cleaning and maintenance                        | + _____ [28]     | _____ [29]               |                        |
| Commissions:                                    |                  |                          |                        |
| _____   | + _____ [31]     | _____ [33]               |                        |
| _____   | + _____          | _____                    |                        |
| Insurance:                                      |                  |                          |                        |
| _____   | + _____ [34]     | _____ [36]               |                        |
| _____   | + _____          | _____                    |                        |
| Legal and professional fees                     | + _____ [37]     | _____ [38]               |                        |
| Management fees                                 |                  |                          |                        |
| _____   | + _____ [40]     | _____ [42]               |                        |
| _____   | + _____          | _____                    |                        |
| Mortgage interest                               | + _____ [43]     | _____ [44]               |                        |
| Qualified mortgage insurance premiums           | + _____ [46]     | _____ [47]               |                        |
| Other interest:                                 |                  |                          |                        |
| _____   | + _____ [49]     | _____ [51]               |                        |
| _____   | + _____          | _____                    |                        |
| Repairs   | + _____ [52]     | _____ [53]               |                        |
| Supplies  | + _____ [55]     | _____ [56]               |                        |
| Taxes:  |                  |                          |                        |
| _____   | + _____ [58]     | _____ [60]               |                        |
| _____   | + _____          | _____                    |                        |
| _____   | + _____          | _____                    |                        |
| _____   | + _____          | _____                    |                        |
| _____   | + _____          | _____                    |                        |
| Utilities                                       | + _____ [61]     | _____ [62]               |                        |
| Depreciation                                    | + _____ [64]     | _____ [65]               |                        |
| Depletion                                       | + _____ [67]     | _____ [68]               |                        |
| Other expenses:                                 |                  |                          |                        |
| _____   | + _____ [73]     | _____                    |                        |
| _____   | + _____          | _____                    |                        |
| _____   | + _____          | _____                    |                        |
| _____   | + _____          | _____                    |                        |
| _____   | + _____          | _____                    |                        |
| Refinancing points paid this year:              |                  |                          |                        |
| Description                                     | _____ [75]       |                          |                        |
| Total points paid/Current amort (Prep use only) | _____ + _____    |                          |                        |
| Date of Refinance                               | _____            | Reported on 1098 in 2008 |                        |