

2009	1040	US	Tax Organizer
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**Haynes & Associates, P.C.**  
**405 North Oak Street**  
**Roanoke, TX 76262-6105**  
 Telephone number: **(817) 491-1300**  
 Fax number:  
 E-mail address:

**Tax Return Appointment**

Date:  
 Time:  
 Location:

This tax organizer will assist you in gathering information necessary for the preparation of your 2009 tax return. Please enter all pertinent 2009 information.

**CLIENT INFORMATION**

Taxpayer

Spouse

First name and initial . . .		
Last name . . . . .		
Title/suffix . . . . .		
Social security number . .		
Occupation . . . . .		
Date of birth (m/d/y) . . . .		
Date of death (m/d/y) . . . .		
1=blind . . . . .		
Home phone . . . . .		
Work phone . . . . .		
Work extension . . . . .		
Cell phone . . . . .		
E-mail address . . . . .		

Address	In care of . . . . .	
	Street address . . . . .	
	Apartment number . . . . .	
	City . . . . .	
	State . . . . .	
	ZIP code . . . . .	

**DEPENDENTS**

Dependent No.

Dependent No.

First name . . . . .		
Last name . . . . .		
Title/suffix . . . . .		
Date of birth (m/d/y) . . . .		
Social security number . .		
Relationship . . . . .		
Months lived at home . . . .		

Dependent No.

Dependent No.

First name . . . . .		
Last name . . . . .		
Title/suffix . . . . .		
Date of birth (m/d/y) . . . .		
Social security number . .		
Relationship . . . . .		
Months lived at home . . . .		

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Please enter all pertinent 2009 information. If you have attached a government form for an item, check the box and do not enter a 2009 amount.

**WAGES, SALARIES AND TIPS**

Employer name:

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

2009 Amount	2008 Amount
Attach Forms W-2	

**INTEREST INCOME**

Payer name:

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

Attach Forms 1099-INT	

**DIVIDEND INCOME**

Payer name:

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

Attach Forms 1099-DIV	

**PENSIONS, IRA AND GAMBLING INCOME**

Payer name:

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

Attach Forms 1099-R & W-2G	

Winnings not reported on W-2G. ....

Total gambling losses .....

**OTHER GOVERNMENT FORMS - INCOME**

<input type="checkbox"/>	Form 1099-B - Sales of stock (also include transaction history) .....
<input type="checkbox"/>	Form 1099-MISC - Miscellaneous income .....
<input type="checkbox"/>	Form 1099-S - Sales of real estate (also include closing statements) .....
<input type="checkbox"/>	Form 1099-G - State tax refunds .....

Attach Forms 1099	
Attach Forms 1099	

Taxpayer:

<input type="checkbox"/>	Form SSA-1099 - Social security benefits .....
<input type="checkbox"/>	Form 1099-G - Unemployment compensation .....

Attach Forms 1099	
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Spouse:

<input type="checkbox"/>	Form SSA-1099 - Social security benefits .....
<input type="checkbox"/>	Form 1099-G - Unemployment compensation .....

Attach Forms 1099	
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**MISCELLANEOUS INCOME**

Taxpayer: Alimony received .....

Spouse: Alimony received .....

Other: \_\_\_\_\_


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### RETIREMENT PLAN CONTRIBUTIONS

Taxpayer: Traditional IRA contributions (1=maximum) . . . . .  
 Roth IRA contributions (1=maximum) . . . . .  
 Self-employed, SEP, SIMPLE, & qualified plan contributions (1=maximum) . . . . .  
 Spouse: Traditional IRA contributions (1=maximum) . . . . .  
 Roth IRA contributions (1=maximum) . . . . .  
 Self-employed, SEP, SIMPLE, & qualified plan contributions (1=maximum) . . . . .

2009 Amount	2008 Amount

### OTHER GOVERNMENT FORMS - DEDUCTIONS

Form 1098-E - Student loan interest . . . . .  
 Form 1098-T - Tuition and related expenses . . . . .

Attach Forms 1098	

### ADJUSTMENTS TO INCOME

Taxpayer:  
 Self-employed health insurance premiums . . . . .  
 Educator expenses . . . . .  
 Expenses from rental of personal property . . . . .  
 Other adjustments to income:  
 \_\_\_\_\_  
 \_\_\_\_\_  
 Alimony paid - Recipient name & SSN . . . . .  
 \_\_\_\_\_


Spouse:  
 Self-employed health insurance premiums . . . . .  
 Educator expenses . . . . .  
 Expenses from rental of personal property . . . . .  
 Other adjustments to income:  
 \_\_\_\_\_  
 \_\_\_\_\_  
 Alimony paid - Recipient name & SSN . . . . .  
 \_\_\_\_\_


### MEDICAL AND DENTAL EXPENSES

Prescription medicines and drugs . . . . .  
 Doctors, dentists and nurses . . . . .  
 Hospitals and nursing homes . . . . .  
 Insurance premiums . . . . .  
 Long-term care premiums - taxpayer . . . . .  
 Long-term care premiums - spouse . . . . .  
 Insurance reimbursement . . . . .  
 Out-of-pocket lodging and transportation expenses . . . . .  
 Number of medical miles . . . . .  
 Other: \_\_\_\_\_  
 \_\_\_\_\_


### TAXES PAID

State income taxes - 1/09 payment on 2008 state estimate . . . . .  
 State income taxes - paid with 2008 state extension . . . . .  
 State income taxes - paid with 2008 state return . . . . .  
 State income taxes - paid for prior years and/or to other states . . . . .


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**TAXES PAID (continued)**

City/local income taxes - 1/09 payment on 2008 city/local estimate. ....

City/local income taxes - paid with 2008 city/local extension. ....

City/local income taxes - paid with 2008 city/local return. ....

State and local sales taxes (except autos and special items) .....

Sales taxes paid on vehicles, boats, and aircraft. ....

Use taxes paid on 2009 purchases. ....

Use taxes paid on 2008 state return. ....

New passenger auto's, light trucks & motorcycles purchased 2/17/09 - 12/31/09. ....

Sales tax on auto's not included above. ....

Sales taxes paid on boats, aircraft, and other special items. ....

Real estate taxes - principal residence. ....

Real estate taxes - property held for investment. ....

Foreign income taxes. ....

Personal property taxes (including automobile fees in some states) ...

2009 Amount	2008 Amount
Attach Vehicle/Tax Information	
Attach Tax Notice	

**INTEREST PAID**

Home mortgage interest and points paid:

\_\_\_\_\_

\_\_\_\_\_

Home mortgage interest not on Form 1098 (include name, SSN, & address of payee):

\_\_\_\_\_

\_\_\_\_\_

Points not reported on Form 1098:

\_\_\_\_\_

\_\_\_\_\_

Mortgage insurance premiums on post 12/31/06 contracts. ....

Investment interest (interest on margin accounts):

\_\_\_\_\_

\_\_\_\_\_

Passive interest. ....

Attach Forms 1098	

**CASH CONTRIBUTIONS**

NOTE: No deduction is allowed for cash or check contributions unless the donor maintains a bank record, or a written communication from the donee, showing the name of the organization, contribution date(s), and contribution amount(s).

\_\_\_\_\_

\_\_\_\_\_

Volunteer expenses (out-of-pocket). ....

Number of charitable miles. ....


**NONCASH CONTRIBUTIONS**

NOTE: No deduction is allowed for contributions of clothing and household items that are not in good used condition or better, in addition, a deduction for any item with minimal monetary value may be denied.

\_\_\_\_\_

\_\_\_\_\_


**MISCELLANEOUS DEDUCTIONS**

Union and professional dues. ....

Tax return preparation fee. ....

Safe deposit box rental. ....

Investment expenses. ....

Estate tax, section 691(c). ....

Unreimbursed employee expenses:

\_\_\_\_\_

\_\_\_\_\_

Other: \_\_\_\_\_

\_\_\_\_\_
