

# TAX RETURN ORGANIZER

## All Clients MUST Sign Below

I have retained Aircrew Taxes to prepare my 2008 Income Tax returns. I verify that the information provided in this Organizer is accurate and complete. I understand it is my responsibility to include any and all information concerning income, deductions and other information necessary for the preparation of my personal income tax return. I have not overstated my deductions or understated my income. I understand it is my responsibility to review my Income Tax Return after Aircrew Taxes has prepared it. If I am billed for an amount due, I will be responsible for any resulting collection fees due to nonpayment and attorney's fees. The laws of Georgia shall be applicable to all aspects of this agreement. (If filing a joint return, both you and your spouse must sign.)

Taxpayer Signature \_\_\_\_\_ Spouse Signature \_\_\_\_\_ Date \_\_\_\_\_

## Client Instructions to Complete Tax Return

**Please do not send originals send copies only. You will need the originals to help resolve possible discrepancies.**

### General Instructions:

- 1) Complete the tax organizer filling in only the sections that apply to your tax situation. Send the completed organizer, and **copies only**, of your tax documents to Aircrew Taxes. New clients must include previous year's tax return.
- 2) Make payment with credit card, check, or authorized deduction from your refund.
- 3) Aircrew Taxes will contact you to resolve any questions and discuss possible deductions and tax strategies and then we will e-mail the return to you for review.
- 4) Contact Aircrew Taxes with any changes to your tax return.
- 5) Aircrew Taxes e-mails completed tax return with E-file authorization form to you.
- 6) Fax signed Form 8879 E-file Authorization to Aircrew Taxes so we may e-file your tax return.

### Please Note:

- 1) New Clients may send tax returns from up to three previous tax years for a missed deductions review.
- 2) **Send copy of tax documents as listed in the tax organizer, no originals please. Keep your receipts for your own records.**
- 3) If you have a **small business**, please download and complete the worksheet from the small business tab on the website. Send all business related 1099 income statements designated as income for the business.
- 4) If you have **rental real estate**, please download and complete the worksheet from the rental real estate tab on the website. Send any 1099 income statements and 1098 mortgage interest statements designated as income and mortgage interest for rentals.

## Tax Documents Required to Complete Accurate Return

- \_\_\_\_\_ Copy of all W-2s from all Employers
- \_\_\_\_\_ Copy of 1099-INT for Interest and 1099-DIV for Dividends
- \_\_\_\_\_ Copy of 1099-B Proceeds from Broker and Barter Exchange Transactions
- \_\_\_\_\_ Copy of Tax Reporting Statements from Brokers
- \_\_\_\_\_ Copy of 1099-G from State Income Tax Refund and 1099-G for State Unemployment
- \_\_\_\_\_ Copy of 1099-R from IRA, Pensions, and 401(k) distributions and rollovers
- \_\_\_\_\_ Copy of K-1 Statements form Rental Real Estate, Royalties, Partnerships, S-Corps
- \_\_\_\_\_ Copy of 1099's form Unemployment Compensation
- \_\_\_\_\_ Copy of SSA 1099 and RRB 1099 from social security benefits
- \_\_\_\_\_ Copy of 1099-MISC for other income, may need to fill out business worksheet
- \_\_\_\_\_ Copy of 1098-E for Student Loan Interest and 1098-T Tuition
- \_\_\_\_\_ Copy of 1098 Mortgage Interest Statement with Real Estate Taxes
- \_\_\_\_\_ Copy of 1098-C for Contribution of motor vehicles
- \_\_\_\_\_ Copy of Closing Statement if Purchased or Refinanced a Home
- \_\_\_\_\_ Copy of December 31 Pay Stub to Complete Non-taxable Per Diem Deductions

Office (770) 884-7565 Cell (678) 332-6905 Fax (770) 795-9799

Fax or E-mail Organizer to [aircrewtaxes@yahoo.com](mailto:aircrewtaxes@yahoo.com)

[www.aircrewtaxes.com](http://www.aircrewtaxes.com)

**Personal Information** (Please Print Clearly)

	Taxpayer	Spouse
Last Name (According to SS card)		
First Name		
Middle Initial		
Social Security Number		
Occupation		
Date of Birth (mm/dd/yyyy)		
E-Mail Address		
Work Phone		
Cell Phone		
Home Phone		
Fax Number		

**Tax Address:** This is your current state residency where you pay tax for this tax year and the address on your federal tax return.

Address		Apt. #	
City		State	
		ZIP	

**Federal Filing Status** (Check Box of Filing Status)

<input type="checkbox"/>	<b>1 Single</b>
<input type="checkbox"/>	<b>2 Married Filing Jointly</b>
<input type="checkbox"/>	<b>3 Married Filing Separate</b> Spouse Name _____ Spouse Soc Sec # _____
If <b>MFS</b> , Did you live apart from your spouse during the last 6 months of 2008?(Y or N) Did your spouse itemize deductions?(Y or N)	
<input type="checkbox"/>	<b>4 Head of Household:</b> If someone else is using the exemption for your custodial child please fill out below if claiming status.
Name:	Social Security #:
Relationship:	Number months lived with you:
<input type="checkbox"/>	<b>5 Qualifying Widow</b> Spouse's Date of Death _____

**Dependent Information** (Name must appear as on the social security card)

If your dependent is between 19 and 23, they must be a full-time student for at least 5 months during the year to qualify for the Earned Income Credit. If your dependent children did not live with you, you must provide form 8832, Release of Claim or a copy of your divorce decree.

First Name	Last Name	MI	SSN	Relationship	Date of Birth	# Mos at Home	Care Expenses	Student
					/ /			Y or N
					/ /			Y or N
					/ /			Y or N
					/ /			Y or N
					/ /			Y or N

**Electronic Filing and Direct Deposit/Electronic Funds Withdrawal Information**

File federal return electronically?	Y or N	File state return electronically?	Y or N
Use direct deposit for tax refund?	Y or N	Use electronic funds withdrawal for balance due?	Y or N
Account Type? Circle One	Checking or Saving	Name of Bank?	
Routing Number?		Account Number?	
Would you like to pay your tax preparation fees out of the refund?	There is a small bank charge for this service.		Y or N
Taxpayer's Drivers License #		Spouse's Drivers License #	

**State Tax Information**

Please circle yes or no below if you are a resident of a state at the end of the year. If you paid taxes to more than one state, you may receive a separate W2 for each state and we need all W2's.

State	Still Resident	Date Moved In	Date Moved Out	County	School District
	Y or N				
	Y or N				
	Y or N				



## Interest Income

Not required if providing all 1099-INT interest statements.

Owner SS#	Bank/Institution	Box Numbers and Amounts in each Box from each separate 1099-INT

## Dividend Income

Not required if providing all 1099-DIV dividend or 1099-B broker statements

Owner SS#	Institution	Box Numbers and Amounts in each Box from each separate 1099-DIV

## Stocks & Bonds Sold

Required even if providing 1099-B Proceeds From Broker and Barter Exchange

Transactions and year-end broker statements. Must have purchase date, cost, sales date and sales proceeds for each sales.

Description and Quantity	Date Acquired	Date Sold	Sales Price Less Commissions	Cost/Purchase Price Plus Commissions
	/ /	/ /2008	\$	\$
	/ /	/ /2008	\$	\$
	/ /	/ /2008	\$	\$
	/ /	/ /2008	\$	\$
	/ /	/ /2008	\$	\$
	/ /	/ /2008	\$	\$

## State Income Tax Refunds and Unemployment Compensation

Not required if providing 1099-Gs and/or 1099-G for unemployment benefits.

State Refunds Received in 2008 (this tax year)	State	Amount	\$	State	Amount	\$
Additional State Tax paid in 2008 when filed	State	Amount	\$	State	Amount	\$
Did you itemize last year?	Taxpayer	Y or N		Spouse	Y or N	
State Unemployment Compensation Received	State	Amount	\$	State	Amount	\$
State Unemployment Benefits Repaid	State	Amount	\$	State	Amount	\$

## Alimony Received

Taxpayer Amount	\$	Spouse Amount	\$
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## IRA, Pension, 401(k), and Annuities Distributions and Rollovers

Not required if providing all 1099-R statements for distributions and rollovers. Circle T or S for taxpayer or spouse.

Taxpayer or Spouse	T or S Distribution #1	T or S Distribution #2	T or S Distribution #3
Name of payer institution			
Gross distribution from 1099-R box 1			
Reason for distribution			
Amount of Rollover			
Name of receiving institution			
Type of account (401k, IRA, Pension, Roth)			

## Social Security Benefits and Other Income

Not required if providing SSA 1099s and RRB 1099s.

	Taxpayer	Spouse
Amounts for Social Security Benefits	\$	\$
Amounts for Railroad Benefits	\$	\$
Amounts for 1099 MISC not requiring Schedule C for business income	\$	\$
Amounts for 1099 MISC not requiring Schedule C for business income	\$	\$

## Educator Expenses

Un-reimbursed amounts spent on books, supplies, and materials used in the classroom by kindergarten to 12<sup>th</sup> grade teacher.

Taxpayer Amount	\$	Spouse Amount	\$
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## Moving Expenses

Only job related moves are deductible. Meals are NOT deductible.

Old Primary Residence	Old Work (BASE)	Transportation Expense	\$
New Primary Residence	New Work (BASE)	Storage Expense	\$
Miles from Old HOME to New BASE	Date Moved	/ /2008	Travel Expense
Miles from Old HOME to Old BASE	Mileage Driven During Move	Lodging Expense	\$

## Self-Employed Contributions to SEP, SIMPLE and Qualified Plans

Type of Plan	Taxpayer Amount	Spouse Amount
Money Purchase Plan	\$	\$
Profit Sharing Plan	\$	\$
Defined Benefit Plan	\$	\$
SEP Plan	\$	\$
SIMPLE Plan	\$	\$
Individual 401(k) Plan	\$	\$
Roth 401(k) Plan	\$	\$

## Alimony Paid

Recipients Social Security Number	Amount Paid	\$
Recipients Social Security Number	Amount Paid	\$

## Traditional And Roth IRA Contributions

	Taxpayer	Spouse
Traditional IRA Contribution Amount Made this tax year	\$	\$
Roth IRA Contribution Amount Made this tax year	\$	\$
Non-Deductible IRA	\$	\$

## Education Savings Accounts

List contributions made on or before 12/31/08	Student Name	Amount
Excess Contributions to Coverdell Education Plan (amounts in excess of \$2,000)		\$
Contributions to State Prepaid tuition Program	State Plan Name	\$
Contributions to State College Savings 529 Plan	State Plan Name	\$

## Student Loan Interest Deduction

Not required if providing 1098-E. If additional expense list total below.

	Taxpayer	Spouse
Qualified Student Loan Interest Paid in 2008	\$	\$

## Educational Deduction and Credit Information

Please provide 1098-T and complete form below.

You may claim qualified expenses and fees for yourself, your spouse, and your dependent children as Tuition and Fees Deduction or the Hope Credit and Lifetime Learning Credit. You must file a joint return if married. Charges and fees associated with room, board, student activities, insurance, books, transportation, and living expense are not deductible. For the Lifetime Learning Credit you may be taking as little as one course, and can be taking it to improve or acquire job skills rather than obtaining a degree. You can only obtain the deduction or credit for the same student.

Provide 1098T	Student 1	Student 2
Name of Student		
Name of School and City and State where located		
Amount of Qualified Expenses? 529 Plan Amount Withdrawn	\$	\$
Year in College and was student at least halftime?	1 <sup>st</sup> 2 <sup>nd</sup> 3 <sup>rd</sup> 4 <sup>th</sup> Grad, Yes or No	1 <sup>st</sup> 2 <sup>nd</sup> 3 <sup>rd</sup> 4 <sup>th</sup> Grad, Yes or No
Was hope Credit Claimed in 2007 or 2006	2007 Y or N   2006 Y or N	2007 Y or N   2006 Y or N

## Medical Expenses

**Do not include amounts paid by insurance or from Flexible Spending Accounts.**

Prescriptions	\$	Medical Equipment and Supplies	\$
Health Insurance Premiums – <b>After Tax</b>	\$	Medical Travel - # Miles 01/01/08 -06/30/08	miles
Physician/Dentist/Chiropractor	\$	Medical Travel - # Miles 07/01/08 -12/31/08	miles
Hospital and Clinics	\$	Medical Lodging	\$
Lab and X-ray	\$	Lasik and Radial Kerotomy	\$
Long Term Care Insurance	\$	Other – Including COBRA or Specify:	\$
Eyeglasses and Contacts	\$	Other	\$

## Taxes Paid

Real estate taxes on Principal Residence	\$	Vehicle Excise or Advalorem Tax	\$
Real estate taxes on Second Home or Land	\$	Personal Property Tax (boat or airplane)	\$
Real estate taxes on Vacation Home	\$	Sales Tax on Motor Vehicle or Boat	\$

## Homeowner Mortgage Interest and Points Information

**Not required if providing all 1098 Mortgage Interest Statements from mortgage company. If you purchased, sold or refinanced, send a copy of the closing statement. Do not include any rental real estate 1098 mortgage interest below.**

Primary mortgage interest Lender _____	\$	Qualified Mortgage Insurance Premiums	\$
Primary mortgage interest Lender _____	\$	Did you sell your home in 2008?	Y or N
Equity line loan Lender _____	\$	Number of years lived in home before selling?	
Second mortgage Lender _____	\$	Did you purchase your home in 2008?	Y or N
Vacation Home mortgage Lender _____	\$	Did you refinance your home in 2008?	Y or N
Origination or Discount Points	\$	Number of years you refinanced?	

## Charitable Contributions

**You need to have an acknowledgement if any single cash contribution is over \$250. If you donated any household goods, please estimate the value and include the name and address of the charitable organization. Vehicle Donation over \$500 send 1098C**

<b>Cash</b>	Donee Name: _____	\$	Donee Name: _____	\$
	Donee Name: _____	\$	Travel for Charitable Purposes	Miles
<b>Vehicle</b>	Vehicle Donated to: _____		Date of Vehicle Donation	
	FMV <\$500	\$	Make & Year of Vehicle	
	Purchase Date		Original Purchase Price	\$
<b>Non-Cash Items</b>	Name of Charity			
	Address of Charity			
	City, State, Zip			
	Donation Description			
	Date of Donation	2008	2008	2008
	Date Acquired			
	How Acquired (Circle)	Purchase Gift Created Bequest	Purchase Gift Created Bequest	Purchase Gift Created Bequest
	Original Cost of Items	\$	\$	\$
	Fair Market Value	\$	\$	\$
How Valued (Circle)	Thrift Replacement Equal sale	Thrift Replacement Equal sale	Thrift Replacement Equal sale	

## Casualty/Theft & Loss

Description of Casualty Event	Date Of Event	Description of Property	Date Acquired	Value Before Event	Value After Event	Insurance Reimbursement
				\$	\$	\$

## Miscellaneous Expenses

Tax Prep Fees Paid in 2008.	\$	Margin or Investment Interest Paid	\$
Tax Prep Software/Books/Publications.	\$	Certain Attorney and Accounting Fees	\$
Tax Prep Mailing/Fed Ex Fees Paid in 2008.	\$	Safe Deposit Box Rental.	\$
Investment Expense.	\$	IRA Management Fees.	\$

## Job Expenses/W-2 Employee Deductions

**If you have another job or your spouse has a job with non-reimbursed employee related business expenses enter below.**

Union Dues and Professional Dues	\$	Meals and Entertainment Expense	\$	Other _____	\$
Professional Subscriptions	\$	Office Supplies	\$	Other _____	\$
Uniform and Protective Clothing	\$	Office Equipment	\$	Other _____	\$
Job Search Costs	\$	Licenses	\$	Other _____	\$
Local Parking Fees and Transportation	\$	Telephone Calls	\$	Other _____	\$
Travel Expense Lodging	\$	Cell Phone	\$	Other _____	\$
Travel Expense Airfare	\$	Pager	\$	Other _____	\$
Travel Expense Car Rental	\$	Internet	\$	Other _____	\$
Business Gifts	\$	Postage	\$	Other _____	\$
Education Expense Job Related	\$	Other _____	\$	Other _____	\$

### Vehicle Expense - Mileage rate for 2008 is 48.5 cents per mile.

Year & Make and Model Vehicle		Do you have evidence to support the deduction?	Yes or No
Date First Used for Business		Is this evidence written?	Yes or No
Type of Vehicle: Car, Van, Truck		Is another vehicle available for personal use?	Yes or No
Total Mileage		Was the vehicle available for personal use during off duty hours?	Yes or No
Business Mileage		Was the vehicle leased?	Yes or No
Commuting Mileage		Was the vehicle used for hire?	Yes or No
Personal Mileage		Actual Expenses: Gas, Oil, Repairs, Insurance, ect.	\$

### Home Office – To be deductible must have been required by employer.

Area Used for Business - Square Footage/Room	Sq/ft	Mortgage Interest	\$
Total Area - Square Footage of Home	Sq/ft	Real Estate Taxes	\$
Number of Days in Year Office was in Home		Insurance – Homeowners/Renters	\$
Date of Using Room as Home Office	\$	Repair and Maintenance	\$
Fair Market Value of Home with Home Office	\$	Utilities Except Water per Month	\$
Cost of Home with Home Office	\$	Rent Paid for Year	\$
Improvement to Home Office	\$	Other Specify: _____	\$
Land Value on Property Tax Statement	\$	Other Specify: _____	\$
Building Value on Property Tax Statement	\$	Other Specify: _____	\$

## What are adequate records according IRS Publication 463 Travel, Entertainment, Gift and Car Expenses?

You should keep the proof you need in an account book, diary statement of expense, or similar record. You should also keep documentary evidence that, together with your record, will support each element of an expense. You generally must have documentary evidence, such as receipts, cancelled checks, or bills to support your expenses. Documentary evidence is not needed if your travel expense other than lodging is less than \$75 or you have a transportation expense for which a receipt is not readily available. Documentary evidence ordinarily will be considered adequate if it shows the amount, date, place, and essential character of the expense. You must generally provide a written statement of the business purpose of an expense. However, the degree of proof varies according to the circumstances in each case. If the business purpose of an expense is clear from the surrounding circumstances, then you do not need to give a written explanation. If you do not have complete records to prove an element of an expense, then you must prove the element your own written or oral statements containing specific information about the element, and other supporting evidence that is sufficient to establish the element. If the element is the description of a gift, or the cost, time, place, or date of and expense, the supporting evidence must be either direct evidence or documentary evidence. Direct evidence can be written statements, or oral testimony of your guests or other witness setting forth the detail information about the element. Documentary evidence can be receipts, paid bills, or similar evidence.



## Child Care Expenses Credit

Qualifying expense for care that allows you to work or look for work. Deduction only allowed for children under age 13.

NOTE: Social Security Number or ID Number is required to receive credit!

Care Provider's Name	Provider's Address	Provider's No.	Child's Name	Amount
				\$
				\$
				\$
				\$

## Other Tax Credits

Do you have a Qualified Mortgage Interest Credit Certificate issued by federal or state government?	Y or N
Did you adopt a child this year?	Y or N
Did you purchase solar or fuel cell energy for your home?	Y or N
Did you buy an electric/hybrid motor vehicle?	Y or N
Are you a first home buyer in the District of Columbia?	Y or N
Did you use alcohol or ethanol as fuel in your vehicle	Y or N
Did you purchase your main home in the United States after April 9, 2008, and before July 1, 2009	Y or N

## Additional Tax Payments Made to Federal or State

Quarterly Tax Payments	Date Payment Made	Federal Amount	State Amount	Local Amount
First Quarter due 4/15/08		\$	\$	\$
Second Quarter due 6/15/08		\$	\$	\$
Third Quarter due 9/15/08		\$	\$	\$
Fourth Quarter due 1/15/08		\$	\$	\$

## Taxes Paid with Extensions to Federal or State

Federal Amount	\$	State of _____ amount	\$	State of _____ amount	\$
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## State Tax Renters Credit

If you paid rent in CA, IN, MA, MI, MN, NJ, WI or any other state in 2008 with a renters credit please complete the following section, Minnesota residents provide a copy of your Certificate of Rent Paid (CRP)

Landlords Name					
Landlords Address					
Apartment Address					
Monthly Rent	\$	Total Rent Paid	\$	Dates Rented	