

- |  | Yes                      | No                       |
|--|--------------------------|--------------------------|
| 1 Did you receive an economic stimulus payment in 2009? ..... <input type="checkbox"/> <input type="checkbox"/>  | <input type="checkbox"/> | <input type="checkbox"/> |
| If you received social security, railroad retirement, veterans disability compensation or some pension benefits you would probably have received an extra \$250 payment in 2009. Report the amount here .....  |                          |                          |
| 2 Did a lender cancel any of your debt in 2009? (Attach any Forms 1099-A or 1099-C) ..... <input type="checkbox"/> <input type="checkbox"/>  | <input type="checkbox"/> | <input type="checkbox"/> |
| 3 Did you add energy efficient property to your home in 2009? This refers to solar energy, solar water heating, fuel cell, small wind energy or a geothermal heat pump ..... <input type="checkbox"/> <input type="checkbox"/>                       | <input type="checkbox"/> | <input type="checkbox"/> |
| 4 Did you purchase a motor vehicle or boat during 2009? ..... <input type="checkbox"/> <input type="checkbox"/>  | <input type="checkbox"/> | <input type="checkbox"/> |
| If <b>yes</b> , attach documentation showing sales tax paid.   |                          |                          |
| 5 Did you purchase a hybrid vehicle in 2009? If <b>yes</b> , enter year, make, model, and date purchased: _____ <input type="checkbox"/> <input type="checkbox"/>  | <input type="checkbox"/> | <input type="checkbox"/> |
| 6 Did you donate a vehicle in 2009? If <b>yes</b> , attach Form 1098C ..... <input type="checkbox"/> <input type="checkbox"/>  | <input type="checkbox"/> | <input type="checkbox"/> |
| 7 What was the sales tax rate in your locality in 2009? ..... % State ID ..... <input type="checkbox"/> <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> |
| 8 Did your marital status change during 2009? ..... <input type="checkbox"/> <input type="checkbox"/>  | <input type="checkbox"/> | <input type="checkbox"/> |
| If <b>yes</b> , explain: _____   |                          |                          |
| 9 Were you or your spouse permanently and totally disabled in 2009? ..... <input type="checkbox"/> <input type="checkbox"/>  | <input type="checkbox"/> | <input type="checkbox"/> |
| 10 Do you have dependents who must file? ..... <input type="checkbox"/> <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> |
| 11 Do you have children who are under age 19 or a full time student under age 24 with investment income greater than \$1900? .... <input type="checkbox"/> <input type="checkbox"/>  | <input type="checkbox"/> | <input type="checkbox"/> |
| 12 Did you provide over half the support for any other person during 2009? ..... <input type="checkbox"/> <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> |
| 13 Did you incur adoption expenses during 2009? ..... <input type="checkbox"/> <input type="checkbox"/>  | <input type="checkbox"/> | <input type="checkbox"/> |
| 14 Did you receive a total distribution from an IRA or other qualified plan that was partially or totally rolled over into another IRA or qualified plan within 60 days of the distribution? ..... <input type="checkbox"/> <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 15 Did you receive any disability payments in 2009? ..... <input type="checkbox"/> <input type="checkbox"/>  | <input type="checkbox"/> | <input type="checkbox"/> |
| 16 Did you receive tip income <b>not</b> reported to your employer? ..... <input type="checkbox"/> <input type="checkbox"/>  | <input type="checkbox"/> | <input type="checkbox"/> |
| 17 Did you buy, sell, refinance, foreclose or abandon a principal residence or other real property in 2009? If <b>yes</b> , attach closing or escrow statements, 1099-C or 1099-A forms. .... <input type="checkbox"/> <input type="checkbox"/>      | <input type="checkbox"/> | <input type="checkbox"/> |
| 18 Did you incur any casualty or theft losses during 2009? ..... <input type="checkbox"/> <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> |
| 19 Did you incur any non-business bad debts? ..... <input type="checkbox"/> <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> |
| 20 Did you pay any individual for domestic services in 2009? ..... <input type="checkbox"/> <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> |
| 21 Did you buy or sell any stocks or bonds in 2009? ..... <input type="checkbox"/> <input type="checkbox"/>  | <input type="checkbox"/> | <input type="checkbox"/> |
| 22 Did you use the proceeds from Series EE or I U.S. savings bonds purchased after 1989 to pay for higher education expenses? .. <input type="checkbox"/> <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> |
| 23 Did you incur any moving expenses? If <b>yes</b> , attach details ..... <input type="checkbox"/> <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> |
| 24 Did you receive any income not included in this Tax Organizer? ..... <input type="checkbox"/> <input type="checkbox"/>  | <input type="checkbox"/> | <input type="checkbox"/> |
| If <b>yes</b> , please attach information.   |                          |                          |
| 25 Do you expect your income and deductions in 2010 to be the same as 2009? ..... <input type="checkbox"/> <input type="checkbox"/>  | <input type="checkbox"/> | <input type="checkbox"/> |
| If <b>no</b> , attach explanation of changes expected.   |                          |                          |
| 26 If you paid any alimony, enter recipient's SSN: _____ Alimony paid: _____ <input type="checkbox"/> <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> |
| 27 Enter your state of residence ..... Taxpayer _____ Spouse _____   | <input type="checkbox"/> | <input type="checkbox"/> |

**Electronic Filing and Direct Deposit of Refund**

- |  | Yes                      | No                       |
|--|--------------------------|--------------------------|
| If your tax return is eligible for Electronic Filing, would you like to file electronically? ..... <input type="checkbox"/> <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| The Internal Revenue Service is able to deposit many refunds directly into taxpayers' accounts.  |                          |                          |
| If you receive a refund, would you like direct deposit? ..... <input type="checkbox"/> <input type="checkbox"/>                                      | <input type="checkbox"/> | <input type="checkbox"/> |
| If <b>yes</b> , please provide a voided check (not a deposit slip) if your bank account information has changed.                                     |                          |                          |
| What type of account is this? ..... Checking <input type="checkbox"/> Savings <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> |

**Estimated Tax Paid**

Federal		State			Local		
Date	Amount	Date	Amount	ID	Date	Amount	ID

**Additional Information** (Enter any additional information here and attach any documents.)

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