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2009 Income Tax Organizer Page 1

This tax organizer is designed to help you collect and organize the information needed to properly prepare your 2009 Federal and State income tax returns. Please use last year's return as a guideline and if your names, address, and dependents have changed note the change or corrections below.

Part 1 Basic Taxpayer Information: (Skip if all information is the same as last year.)

Taxpayer

Spouse

Name _____

Soc. Sec. # _____

Occupation _____

Date of Birth _____

Address, Home and Work Phone Numbers _____

Do you want \$3 to go to the presidential campaign? Taxpayer _____ Spouse _____
Dependents full name Age Social Security Number Relationship

(use additional sheet if necessary)

Part 2 Income:

Taxpayer

Spouse

W-2 Income (total) _____

Interest Earned _____

Dividends Earned _____

Unemployment Compensation _____

Social Security Benefits _____

Pension & Annuity Income _____

Other Income; like lottery
winnings, Alimony or a bonus
not included on a W-2. _____

Part 3 Adjustments to Income:

IRA Contributions, Student Loan Interest,
Qualified Higher Education Expenses, _____
Moving Expenses, HSA Accounts, _____
penalty due to an early withdrawal
from a savings account, Alimony
paid, etc. _____

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Part 4 Itemized Deductions Schedule A:

Medical: Doctors, Dentists, Hospitals, Lab fees,
Glasses, Contacts, Prescription drugs, & others. _____

Medical miles _____ x.24 = _____ + Parking fees _____ = _____

Health Insurance Premiums. _____

The amount of medical expenses that exceed 7.5%
of your adjusted gross income are deductible.

Taxes

State and local income taxes paid _____

Real estate taxes _____

Personal property taxes (from vehicle registration
labeled, Own.Tax & Prior O.T.) _____

Deductible interest paid _____

Home Mortgage 1st and maybe a 2nd Mortgage _____

Amortized points on refinanced Mortgage _____

Investment interest (margin interest) _____

Charitable Contributions: Cash and/or check _____

Donations other than money (like clothes, house
hold goods, etc to Goodwill, or Salvation Army) _____

Job related expenses (union dues, uniforms, job
education, travel, licenses, tools, magazines
and other expenses not paid by your employer.) _____

Miscellaneous deductions (tax prep fees, investment
expenses, safe deposit box fees, etc.) _____

Job related expenses, and miscellaneous deductions that
exceed 2% of your adjusted gross income are deductible

Part 5 Day care: (if applicable)

Day care providers	Address	ID Number	Amount paid in 2009
_____	_____	_____	_____
_____	_____	_____	_____

(use additional sheet if necessary)

**Additional sections for Self-employed, Rental properties, Stock sales, Farming activities
& others are on another worksheets. Please call if you need it & I did not send you one.**

Items for discussion: _____

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Part 6 Self-Employed Schedule C:

Name and type of business	_____
(Skip if the same as last year)	_____
Income: Total income before expenses	_____
Expenses and Deductions:	
Advertising	_____
Auto expenses (use part 6)	_____
Insurance	_____
Interest	_____
Mortgage & Other (List Separately)	_____
Legal & Professional fees	_____
Office expenses	_____
Rent or Lease payments	_____
Repairs and Maintenance	_____
Supplies	_____
Taxes and Licenses	_____
Utilities	_____
Other Expenses:	_____
_____	_____
_____	_____

(Use additional Sheet if needed)

Part 7 Auto Expenses:

Use this section for all auto expenses Sch. C,E,F, & Employee business exp.

	Vehicle 1	Vehicle 2
Description of vehicle	_____	_____
Date placed in service	_____	_____
Total miles this year	_____	_____
Total business miles	_____	_____
Total commuting miles	_____	_____

Part 8 Business Use Of The Home Expenses:

Mortgage Interest	_____		Real Estate Taxes	_____
Repairs & Maintenance	_____		Utilities	_____
Home Owners Insurance	_____		Homeowners Assoc. Fees	_____
Other Expenses:	_____			_____
	_____			_____

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Part 9 Rental & Royalty Income Schedule E:

Property Kind and Location
(Leave blank if same as last year)

	1. _____	2. _____
Income	Property 1	Property 2
Rent Received	_____	_____
Royalties Received	_____	_____
Expenses		
Advertising	_____	_____
Automobile (Use Part 6)	_____	_____
Cleaning & Maintenance	_____	_____
Deprec. (Preparer Use)	_____	_____
Insurance	_____	_____
Mortgage Interest	_____	_____
Other Interest	_____	_____
Repairs	_____	_____
Supplies	_____	_____
Taxes	_____	_____
Travel (other than auto)	_____	_____
Utilities	_____	_____
Other Expenses	_____	_____
_____	_____	_____
_____	_____	_____

Part 10 Sale of Stocks Bonds Investments etc. Schedule D:

Description	Date Acquired	Date Sold	Sale Price	Cost or Basis
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Part 11 Farm Income Schedule F:

Principal Product	_____
Income	
Sale of Livestock	_____
Sale of Crops	_____
Pasture Rental Income	_____
Other Income	_____
Expenses	
Feed, Seed, & Fertilizer	_____
Hired Hands Payments	_____
Mortgage Interest & Other Interest	_____
Rent or Lease Payments	_____
Taxes	_____
Utilities	_____
Other Expenses	_____
_____	_____
_____	_____