

**Prepared For:**

**Prepared By:**

**Brammer, Begnaud & Lattimore  
3025 Plaza Circle  
Port Arthur, TX 77642-5563  
409-983-1669  
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**bblcpa.com**

**2009 Client Organizer**

**Brammer, Begnaud & Lattimore**  
**3025 Plaza Circle**  
**Port Arthur, TX 77642-5563**  
**409-983-1669**

,

Dear :

This Client Organizer is designed to help you gather tax information needed to prepare your 2009 personal income tax return. We have preprinted certain information from your 2008 personal income tax return to help you complete the organizer with minimal time and effort.

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, please contact this office. Do not indicate the social security number or bank account change on your Client Organizer. 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 2009 information on the Client Organizer sheets provided. 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, retirement, miscellaneous income, Social Security, state or local refunds, gambling winnings, 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, taxes, and charitable contributions (including any Form 1098-C).
- Copies of closing statements regarding the sale or purchase of real property .
- Legal papers for adoption, divorce, or separation involving custody of your dependent children .
- **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.

In order to meet the filing deadline for your 2009 income tax return, your completed tax

organizer needs to be received by our office no later than March 15, 2010. Any information received after that date may require an extension of time be filed for your return.

If you would like to discuss the information in your completed organizer or the preparation of your 2009 tax return, please call our office for an appointment.

**Please review the personal information page and make sure that we have your current email address.**

Thank you for the opportunity to serve you.

Sincerely,

Brammer, Begnaud & Lattimore

**Brammer, Begnaud & Lattimore**  
**3025 Plaza Circle**  
**Port Arthur, TX 77642-5563**  
**409-983-1669**

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 2009 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 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 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 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 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,

Brammer, Begnaud & Lattimore

Accepted By: \_\_\_\_\_

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

## Questions

Please check the appropriate box and include all necessary details and documentation .

	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 \$1900?	<input type="checkbox"/>	<input type="checkbox"/>
Do you have dependents who must file a tax return?	<input type="checkbox"/>	<input type="checkbox"/>
Did you provide over half the support for any other person(s) during the year?	<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 purchase or sell a principal residence during the year?	<input type="checkbox"/>	<input type="checkbox"/>
Did you foreclose or abandon a principal residence or real property 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 have any debts canceled or forgiven this year?	<input type="checkbox"/>	<input type="checkbox"/>
Did you purchase a new hybrid, alternative motor, or electric motor energy efficient 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, SEP, or other qualified retirement plan?	<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 Social Security benefits during the year?	<input type="checkbox"/>	<input type="checkbox"/>

Did you receive any unemployment benefits during the 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?	<input type="checkbox"/>	<input type="checkbox"/>
Do you have evidence to substantiate charitable contributions?	<input type="checkbox"/>	<input type="checkbox"/>
Did you make any noncash charitable contributions (clothes, furniture, etc.)?	<input type="checkbox"/>	<input type="checkbox"/>
Did you donate a vehicle or boat during the year? If yes, attach Form 1098-C.	<input type="checkbox"/>	<input type="checkbox"/>
Did you have an expense account or allowance during the year?	<input type="checkbox"/>	<input type="checkbox"/>
Did you use your car on the job, for other than commuting?	<input type="checkbox"/>	<input type="checkbox"/>
Did you work out of town for part of the year?	<input type="checkbox"/>	<input type="checkbox"/>
Did you have any expenses related to seeking a new job during the year?	<input type="checkbox"/>	<input type="checkbox"/>
Did you make any major purchases during the year (cars, boats, etc.)?	<input type="checkbox"/>	<input type="checkbox"/>
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?	<input type="checkbox"/>	<input type="checkbox"/>

**Miscellaneous Information**

Did you make gifts of more than \$13,000 to any individual?	<input type="checkbox"/>	<input type="checkbox"/>
Did you have any educational expenses during the year?	<input type="checkbox"/>	<input type="checkbox"/>
Did you make any contributions to an education savings or 529 Plan account?	<input type="checkbox"/>	<input type="checkbox"/>
Did you make any contributions to a Health savings account (HSA) or Archer MSA?	<input type="checkbox"/>	<input type="checkbox"/>
Did you pay long-term health care premiums for yourself or your family?	<input type="checkbox"/>	<input type="checkbox"/>
Did you pay any COBRA health care coverage continuation premiums?	<input type="checkbox"/>	<input type="checkbox"/>
Did you engage in any bartering transactions?	<input type="checkbox"/>	<input type="checkbox"/>
Are you an active participant in a pension or retirement plan?	<input type="checkbox"/>	<input type="checkbox"/>
Did you retire or change jobs this year?	<input type="checkbox"/>	<input type="checkbox"/>
Did you incur moving costs because of a job change?	<input type="checkbox"/>	<input type="checkbox"/>
Did you, your spouse, or your dependents attend a post-secondary school during the year?	<input type="checkbox"/>	<input type="checkbox"/>
Did you pay any individual as a household employee during the year?	<input type="checkbox"/>	<input type="checkbox"/>
Did you make energy efficient improvements to your main home this year?	<input type="checkbox"/>	<input type="checkbox"/>
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?	<input type="checkbox"/>	<input type="checkbox"/>
Did you receive correspondence from the State or the Internal Revenue Service? If yes, explain: _____	<input type="checkbox"/>	<input type="checkbox"/>
Do you want to designate \$3 to the Presidential Election Campaign Fund? If you check yes, it will not change your tax or reduce your refund.	<input type="checkbox"/>	<input type="checkbox"/>
Did you pay state and local real estate property taxes this year? If yes, please attach a supporting statement.	<input type="checkbox"/>	<input type="checkbox"/>

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	_____	_____
Taxpayer between 19 and 23, full-time student, with income less than 1/2 support? (Y, N)	_____	_____
Date of birth	_____	_____
Date of death	_____	_____
Work/daytime telephone number/ext number	_____	_____
Do you authorize us to discuss your return with the IRS (Y, N)	_____	_____

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 2009	_____	_____
	Taxpayer	Spouse

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\*, 4 = Savings Bonds) \_\_\_\_\_

\*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
___	_____	_____	___
___	_____	_____	___

Credits: Cr-4 **Making Work Pay and Government Retiree Credit**

Enter the amount of the economic recovery payment you received below.

	Taxpayer	Spouse
Economic recovery payment received in 2009 (Do not enter more than \$250 per person)	_____	_____
Did you receive a government pension or annuity but not qualify for Social Security benefits? (Y/N)	___	___

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 2009 \_\_\_\_\_ Amount received in 2008 \_\_\_\_\_  
 Amount received in 2009 \_\_\_\_\_ Amount received in 2008 \_\_\_\_\_

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.

	2009 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	_____	_____	_____

T/S/J	2009 Information	Prior Year Information
Other Income:	_____	_____
_____	_____	_____
_____	_____	_____

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

**Traditional IRA Contributions for 2009 -**

If you want to contribute the maximum allowable traditional IRA contribution amount,

enter the applicable code: (1 = Deductible only, 2 = Both deductible and nondeductible)

Enter the total traditional IRA contributions made for use in 2009

**Roth IRA Contributions for 2009 -**

Mark if you want to contribute the maximum Roth IRA contribution

Enter the total Roth IRA contributions made for use in 2009

Educate: Educate

### Higher Education Deductions and/or Credits

Complete this section if you paid interest on a qualified student loan in 2009 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	2009 Information	Prior Year Information
____	_____	_____	_____
____	_____	_____	_____

Complete this section if you paid qualified education expenses for higher education costs in 2009.

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 4 years of post-secondary education; has had no drug convictions in 2009.

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	2009 Information	Prior Year Information
____	_____	_____	_____	_____
	Address _____	City _____	State _____	Zip code _____
		Taxpayer	Spouse	Prior Year Information

Educator expenses:

_____	_____	_____	_____
-------	-------	-------	-------

Other adjustments:

_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Itemized: A1 **Medical and Dental Expenses**

T/S/J		2009 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	_____	_____

Itemized: A1 **Tax Expenses**

T/S/J		2009 Information	Prior Year Information
—	State/local income taxes paid	_____	_____
—	2008 state and local income taxes paid in 2009	_____	_____
—	Sales tax paid on actual expenses	_____	_____
—	Real estate taxes paid	_____	_____
—	Personal property taxes	_____	_____
—	Other taxes	_____	_____

  

T/S/J	Description of new motor vehicle purchased between 2/17/09 - 12/31/09:	Date	Purchase Price (Before Taxes)	Sales/Excise Tax Paid
—	_____	_____	_____	_____

Itemized: A2 **Interest Expenses**

T/S/J		2009 Information	Prior Year Information	
—	Home mortgage interest: From Form 1098	_____	_____	
Other, such as: Home mortgage interest paid to individuals				
T/S/J	Name	SSN	2009 Information	Prior Year Information
—	_____	_____	_____	_____
Address _____				

  

T/S/J		2009 Information	Prior Year Information
—	Investment interest expense, other than on K-1s:	_____	_____
Refinancing Information:			
	Refinance #1		Refinance #2
T/S/J	Description	_____	_____
	Total points paid	_____	_____
	Date of refinance	_____	_____
	Total number of payments	_____	_____
	Reported on Form 1098 in 2009	_____	_____

Itemized: A3 **Charitable Contributions**

T/S/J		2009 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		2009 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

**2009 Information**

**Prior Year Information**

Taxpayer/Spouse/Joint (T, S, J) \_\_\_\_\_ [2]  
 Description: \_\_\_\_\_ [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**

**2009 Information**

**Prior Year Information**

Gross rents received + \_\_\_\_\_ [18]  
 Gross royalties received + \_\_\_\_\_ [20]

**Rent and Royalty Expenses**

**2009 Information**

**Percent if not 100%**

**Prior Year Information**

Advertising + \_\_\_\_\_ [22] \_\_\_\_\_ [23]  
 Auto + \_\_\_\_\_ [25] \_\_\_\_\_ [26]  
 Travel + \_\_\_\_\_ [28] \_\_\_\_\_ [29]  
 Cleaning and maintenance + \_\_\_\_\_ [31] \_\_\_\_\_ [32]  
 Commissions:  
 \_\_\_\_\_ + \_\_\_\_\_ [34] \_\_\_\_\_ [36]  
 \_\_\_\_\_ + \_\_\_\_\_  
 Insurance:  
 \_\_\_\_\_ + \_\_\_\_\_ [37] \_\_\_\_\_ [39]  
 \_\_\_\_\_ + \_\_\_\_\_  
 Legal and professional fees + \_\_\_\_\_ [40] \_\_\_\_\_ [41]  
 Management fees  
 \_\_\_\_\_ + \_\_\_\_\_ [43] \_\_\_\_\_ [45]  
 \_\_\_\_\_ + \_\_\_\_\_  
 Mortgage interest paid to banks, etc (Form 1098) + \_\_\_\_\_ [46] \_\_\_\_\_ [47]  
 Other mortgage interest + \_\_\_\_\_ [49] \_\_\_\_\_ [50]  
 Qualified mortgage insurance premiums + \_\_\_\_\_ [52] \_\_\_\_\_ [53]  
 Other interest:  
 \_\_\_\_\_ + \_\_\_\_\_ [55] \_\_\_\_\_ [57]  
 \_\_\_\_\_ + \_\_\_\_\_  
 Repairs + \_\_\_\_\_ [58] \_\_\_\_\_ [59]  
 Supplies + \_\_\_\_\_ [61] \_\_\_\_\_ [62]  
 Taxes:  
 \_\_\_\_\_ + \_\_\_\_\_ [64] \_\_\_\_\_ [66]  
 \_\_\_\_\_ + \_\_\_\_\_  
 \_\_\_\_\_ + \_\_\_\_\_  
 Utilities + \_\_\_\_\_ [67] \_\_\_\_\_ [68]  
 Depreciation + \_\_\_\_\_ [70] \_\_\_\_\_ [71]  
 Depletion + \_\_\_\_\_ [73] \_\_\_\_\_ [74]  
 Other expenses:  
 \_\_\_\_\_ + \_\_\_\_\_ [79] \_\_\_\_\_  
 \_\_\_\_\_ + \_\_\_\_\_  
 \_\_\_\_\_ + \_\_\_\_\_  
 \_\_\_\_\_ + \_\_\_\_\_

Refinancing points paid this year:  
 Description \_\_\_\_\_ [81]  
 Total points paid/Current amort (**Prep use only**) \_\_\_\_\_ + \_\_\_\_\_  
 Date of Refinance \_\_\_\_\_ Total # Payments \_\_\_\_\_ Reported on 1098 in 2009 \_\_\_\_\_



