

2008 Tax Organizer

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Thank you for choosing **Tax Crew**

Please complete the sections of the Organizer that apply to you and mail the organizer and copies of your applicable forms to the address below. We recommend that you keep the originals of your forms in your possession.

Forms W-2
 Copy of last year's tax return (new clients)
 Flight Information (please see Per Diem Calculation page)

Forms 1099, 1099R, 1099-MISC, Forms 1098, 1098G
 Schedules K-1
 Any other information notices you have received

New Clients: Who referred you to Tax Crew?

Free Electronic Filing	The IRS requires us to keep a signed copy of Form 8879. Once we complete your return we'll provide you with the information for lines 1-5. Select a 5 digit PIN, sign the form and mail to us.	To e-file your return, initial here.
Authority to discuss your return with IRS	Tax preparers may discuss return preparation, refund and payment issues with the IRS on your behalf.	If you authorize Tax Crew to discuss these matters for you, please initial here:

A. Personal Information

	Name (as it appears on your Social Security Card)	Social Security	Occupation	Birth date	Pres election campaign fund
Taxpayer					Yes <input type="checkbox"/> No <input type="checkbox"/>
Spouse					Yes <input type="checkbox"/> No <input type="checkbox"/>

Tax Address – address in the state where you pay state income taxes.

Mailing Address – where you want us to mail correspondence – if different than your tax address.

Telephone	Second phone	Fax	Best method/time to contact you

Email address _____ **Check here to receive tax news by email.**

Direct Deposit For direct deposit of your refund, please include a voided check or include bank information:

Routing Transit Number		Full account number		Checking or savings (circle one)
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Filing Status (circle one)

Single Married Filing Jointly Qualifying Widow(er) Spouse's date of death _____

Married Filing Separately Spouse name _____ Spouse Social Security number _____

Did you live with your spouse any time after June 30? Yes No

<input type="checkbox"/> Head of Household - If you are the custodial parent, but someone else is claiming the exemption, complete this section. List other dependents in Section B.	Name		SSN		No. mos living w/you
	Relationship		Who is claiming this exemption		

B. Dependent Information

Name (as on Social Security card)	SSN	Birth Date	Relationship	Mos at home in 2008	Income >\$3300?	Code+
					Yes <input type="checkbox"/> No <input type="checkbox"/>	
					Yes <input type="checkbox"/> No <input type="checkbox"/>	
					Yes <input type="checkbox"/> No <input type="checkbox"/>	
					Yes <input type="checkbox"/> No <input type="checkbox"/>	

+Codes L=Dependent who lived with you; CN=Child who did not live with you due to divorce or separation (include copy of Form 8332 or divorce decree); Y=Child was a full time student for at least 5 months and age 19-24; O=Other dependent (other than child) who did not live with you.

C. General Questions

Did you receive an economic stimulus payment in 2008?		How much were you qualified to receive from your 2007 return?	
Was your 2007 tax return filed before November 28, 2008?		If your rebate was kept for unpaid taxes or another reason, please explain below	
Do you have children under age 24 with investment income over \$1800 in 2008? If yes, please attach 1099s.			
Did you have any debts cancelled, forgiven or refinanced? If yes, include any 1099-Cs you received.			
Did you have any bank or financial accounts in foreign countries with a combined value over \$10,000?			

First Time Home Buyer Tax Credit

If you purchase your first home between April 8, 2008 and July 1, 2009, you are eligible for a tax credit of the lesser of \$7,500 or 10% of the purchase price. The credit is in the form of an interest free loan that is paid back over 15 years beginning with your 2010 tax return. You do not qualify for this credit if you owned a main home in the three year prior period. Check here if you want to take this credit.

New Clients

Please circle the Federal form you filed last year	1040 <input type="checkbox"/>	1040A <input type="checkbox"/>	1040EZ <input type="checkbox"/>
Amount of last year's Federal refund		Amount of last year's State refund	
Or additional tax due		Or additional tax due	

D. Miscellaneous Income

Unemployment compensation	Alimony received
Social Security income	Other

E. Adjustments to Income

Contributions to Traditional IRA made between last January 1 and April 15 of this year		If you previously filed Form 8606 (non-deductible IRA contributions) enter amount on Line 12 of last 8606 of filed				
Contributions to Roth IRA made between last January 1 and April 15 of this year		Contributions to Self Employed Retirement Plan made between last January 1 and April 15 of this year				
Would you like us to calculate your maximum allowed contribution to a:	Traditional IRA?	Yes No	Roth IRA?	Yes No	Self-employed retirement plan?	Yes No
Alimony payments	Name and Social Security Number of recipient					

Retirement Plan Distributions, Rollovers, Recharacterizations

401(k)/Traditional IRA	Distribution	Distribution	Distribution	Distribution
Name of payer				
Gross distribution				
Distribution date				
Basis in account (non-tax deductible contributions)				
Amount of prior distributions				
Reason for distribution (first home purchase, higher education costs, converted to Roth IRA, etc)				
Amount rolled over				
Name of receiving institution				
New account type (Roth, Traditional Ira)				
Roth IRA				
Name of payer				
Gross distribution				
Distribution date				
Reason for distribution				
Basis in account (your contributions)				
Amount of prior distributions				
Value of account on December 31				

Military Reservists: 2006 legislation eliminated the early withdrawal penalty for retirement account withdrawals while on active duty. If you previously paid the penalty, we can amend your prior year tax returns to claim your additional refund.	Did you incur an early withdrawal penalty while on active duty in 2008?	Yes No
	Did you spend at least 180 days in 2008 as an active military reservist?	Yes No

F. Interest Income (please enclose copies of interest statements)

Institution	Amount	Institution	Amount

G. Dividend Income (please enclose copies of dividend statements)

Institution	Box 1 Dividends	Box 2A Capital Gains	Box 2B 28%	Box 2C Qual. 5yr gain	Box 6A Foreign tax

H. Child Care Credit

Provider's Name and Address	Tax ID or Social Security #	Care provided for:	Amount paid

I. Education Savings Accounts

For contributions made on or before 12/31	Student/Beneficiary	Amount
Coverdell Education Savings Plan		
Coverdell Education Savings Plan		
State College Savings 529 Plan	St. Plan:	
State Prepaid Tuition Program	St. Plan:	

J. Education Deductions and Credits

You may claim a deduction or credit for qualified tuition and related expenses you pay for yourself, your spouse, or a dependent for whom you claim an exemption on your tax return. Married taxpayers must file a joint return to qualify. Qualified expenses include tuition and fees required for enrollment or attendance at an eligible educational institution. Student activity fees, and fees for course-related books, equipment and supplies are qualified expenses only if they must be paid directly to the institution as a condition of enrollment or attendance. Taxpayers may not claim both the deduction and the credit for the same student. Based on the information you provide below, we will determine your greatest tax benefit.

Student's Name			
School Name			
School City and State			
Qualified expenses paid			
Year in college	1 st 2 nd 3 rd 4 th Grad Student	1 st 2 nd 3 rd 4 th Grad Student	1 st 2 nd 3 rd 4 th Grad Student
At least half-time student?	Yes No	Yes No	Yes No
Number of years Hope Credit was claimed for student (circle one)	1 year 2 years Never claimed	1 year 2 years Never claimed	1 year 2 years Never claimed
Amount of 529 Plan withdrawal			

Educator Expenses

Classroom expenses incurred by educators teaching kindergarten through 12th grade

K. Medical Expenses

Do not include amounts reimbursed by insurance or flexible savings accounts. Your out of pocket expenses must be over 7.5 percent of your income to be deductible. Some states also allow a medical deduction. Disability and Accident insurance premiums are not deductible.

Prescriptions/co-pays	Physician, Dentist, Chiropractor fees/co-pays
Contacts/Glasses	Lab/Hospital Fees/co-pays
Insurance Premiums - Do not include pretax	Counseling/Psychotherapy fees/co-pays
COBRA premiums	Other transportation/lodging costs
Medical Travel—Miles driven 01/01/08-06/30/08	Medical Travel—Miles driven 07/01/08-12/31/08

Q. Small Business/Self-Employed Income

Business Name		Ownership (circle one)	Taxpayer Spouse Joint
Business address (if different than home address)			
Gross Income		Parking fees, tolls	
Income reported to you on Form 1099 (please include copies)		Pension and profit-sharing plans	
Returns and allowances		Rent or lease a Vehicles, machinery, equipment	
Advertising		Other business property	
Bad debts from sales or service		Repairs and maintenance	
Car and truck expenses		Supplies	
Type & year of vehicle		Taxes and licenses	
Date first used for business	/ /	Travel costs	
Do you have another car for personal use?		Meals and entertainment	
Number of miles driven for business use		Telephone	
Number of miles driven for commuting		Utilities	
Number of miles driven for personal use		Wages	
Do you have another vehicle available for personal use?		Other expenses	
Was your vehicle available for off-duty hours?		Inventory at the beginning of the year	
Commissions and fees		Purchases less cost of items used personally	
Depletion		Cost of labor (do not include your salary)	
Insurance (other than health)		Materials and supplies	
Interest		Other costs	
Legal & professional services		Inventory at the end of the year	
Office expense		Cost of goods sold	
Description of asset used in business	Date placed in service	Cost or basis	Percentage business use

Vehicle Expense The IRS requires written documentation of business miles to claim the deduction.

Vehicle year, make & model		Do you have another car available for personal use?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Vehicle type (circle one)	<6,000lbs 6,000lbs-13,000lbs >13,000lbs	Do you have evidence to support your deduction?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Date first used for business		Is this evidence written?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Number of miles driven for business 01/01-06/30/08		Was the vehicle leased?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Number of miles driven for business 07/01-12/31/08		Monthly lease payment	
Number of miles driven for commuting – all year		Number of miles driven for personal use – all year	

Actual vehicle expenses – To claim actual vehicle expenses instead of the standard mileage rate, please complete this section

Purchase price or cost basis in vehicle		Gasoline, oil, repairs, insurance, etc.	
Section 179 expense elected		Vehicle registration, license	

Business Use of Home

Total square footage of home		Total homeowner's/renter's insurance premium	
Square footage of area used for exclusively for business		Total annual utilities	
Homeowners - Total home mortgage interest paid		Total real estate taxes	
Homeowners - Home purchase price/cost basis		Date you first used home office	
Renters - Annual rent paid		Number of months used as home office last year	

Additional information, notes:

R. Stock, Bond, Securities Sales We must have this following information to accurately calculate capital gains/losses. If your broker does not provide it in your yearend account statement, please contact your broker for this information. Attach sheets if necessary.

Quantity and description	Purchase date	Date sold	Sales price minus commissions	Purchase price or basis including commissions

S. Rental and Royalty income

Property	Date first used as rental	Purchase Price	Cost of land	Ownership %	Address
1					
2					
3					

Property	1	2	3	Property	1	2	3
Rents received				Mgmt fees			
Advertising				Mortgage Interest			
Automobile mileage 01/01-06/30				Property Tax			
Automobile mileage 07/01-12/31							
Association dues				Repairs			
Cleaning/Maint				Supplies			
Commissions				Telephone			
Insurance				Travel to property			
Legal/Prof fees				Utilities			

Number of days of personal use of property.

Property 1 2 or 3	Property improvements, upgrades, capital expenditures	Date purchased	Cost

Sale of Rental Property: Please include copies of the purchase and sale Settlement Statements and (for new clients) copies of tax returns for the years the property was used as a rental.

Energy Credits

Hybrid/Alternative fuel vehicles may qualify for a tax credit if purchased after January 1, 2006. Please include a copy of your Manufacturer's Certificate and sales receipt to claim your credit. If you purchased a hybrid/alternative fuel vehicle in 2008, please list the purchase date: ____/____/____.

The Emergency Economic Stabilization Act of 2008, signed into law on October 3, 2008, extends tax credits for energy efficient home improvements (windows, doors, roofs, insulation, HVAC and non-solar water heaters). Tax credits for these residential products had expired at the end of 2007, but will now be available for purchases made in 2009. However, improvements made during 2008 are not eligible for a tax credit.

T. Crewmember Deductions

Please enter category totals in shaded areas below. Additional itemization is provided for your convenience to illustrate the items that are deductible. The IRS requires receipts for individual expenses over \$75.00. If the expense is under \$75.00, the IRS accepts a record in a logbook or journal that lists the expense, date and cost.

Non-taxable per diem (listed on your W-2 in box 12 with code 'L')	\$	Uniform Luggage		Business phone	
		Flight bag		If you are on reserve, your monthly cell phone bill is deductible. If you are a schedule holder, deduct business related calls. Calls to scheduling, code-a-phone, voice response and calls to home area while on a trip are business related calls.	
Transportation		Garment bag			
Tips for van divers		Luggage repair			
Rental cars/taxi fares/parking		Luggage tags			
Co-terminal transportation		Miscellaneous luggage items			
Cab/parking fares for short calls		Suitcase		Answering machine/service	
Transportation to training/meetings		Tote bag/Purse		Business related phone calls	
Total Transportation expenses	\$	Wheels for luggage		Calling cards/Collect/Hotel phone calls	
Union and professional dues		Total luggage purchase/repair	\$	Call waiting	
Union Initiation fees/Union dues		Bid service, Computer fees		Cell phone purchase	
Professional organizations		Bid service/trip trading fees		Monthly prorated cell fees (line holders)	
Total Union & professional dues	\$	ISP fees (prorated to business use)		Monthly cell fees on reserve	
Work related publications	\$	Layover Internet access fees		Pager purchase/usage fees	
Uniform purchase, cleaning, repair		Total bid service, computer fees	\$	Second telephone line	
Belt		Work equipment, supplies		Voicemail	
Coat		Accessories used on layovers		Total business phone	\$
Dress		Alarm clock		Training/Education/Job Hunting	
Dry cleaning		ATM/check cashing fees on layovers		Books	
Epaulets		Batteries		Course fees	
Jacket		Business cards		Dry cleaning/laundry in training	
Hair clips		Cockpit keys/corkscrew/flashlight		Hotel	
Hat		Cockpit supplies (maps etc)		Maintaining/additional ratings	
Laundry		Computer supplies (toner, paper)		Other job-hunting fees/expenses	
Maternity dress		Copying/fax/mailing costs		Proficiency training/simulator time	
Nametags/Wings		Currency converter/Exchange fees		Resume printing/mailing	
Pants		Earpiece (pilots)		Transportation/Parking	
Scarf/		FAA medical certificate		Total job-hunting/Training	\$
Serving garments		Hair dryer/ Curling iron/Clothes iron		Training dates	City
Shirt		ID replacement		Special/Temporary Assignment	
Shoe repair		Loss of license insurance		Commuting/Local transportation/Tips	
Shoe shines		Manuals /Organizer		Dry cleaning/Laundry	
Support hose		Passport/Visa fees and photos		Housing/ Utilities/Phone	
Sweater		Portable security dvc/smoke detector		Shipping/storage	
Tie		Sunglasses (pilots only)		Total Temporary Assignment	\$
Uniform alterations/repair		Upgrade training expenses		Dates	City
Vest		Voltage converter			
Total uniform expense	\$	Total work equipment, supplies	\$		

Commuter Apartment Moving Expenses

- If you transferred to a new base and incurred moving expenses, please list below:
The IRS defines your primary workplace as your tax home and does not allow a deduction for the cost of maintaining a commuter place. An exception to this is if you have a second job in the area of your residence. In those cases, the IRS allows a deduction for the cost of commuting from one job to another.

Old base		New base		Travel Expense	
Distance driven to transport belongings				Shipping Expense	
Date moved		/	/	Lodging expense during move	

U. K-12 Education Credits (For residents of AZ, IL, IA and MN)

You may claim a credit on your state return in these states for the following qualified expenses:

AZ- Fees and donations to a public or charter school located in Arizona for extracurricular or character education programs. Expenses over \$250.00 are carried over to the following year.

IL - Tuition, fees, book rental, band and lab equipment rental fees paid directly to private, public or religious schools.

IA - Tuition and textbook costs paid to an Iowa accredited not-for-profit school. Certain extracurricular program expenses qualify, such as activity fees, club dues, and school sports fees.

MN - Tuition and fees paid to private or public schools. Also costs of education supplies including up to \$400 towards the purchase of a home computer and educational software.

Student's Name	Expenses	School Name	School Address

V. State Tax Information (Please complete first 3 columns even if you did not move. If you moved to a new state, please include date of move)

State	County	School District	Date Entered State	Date Left State

W. State Renters Credit (If you paid rent at your tax address, you may qualify for a renter's tax credit in CA HI IN MA MI MN NJ WI).

Address rented					
Landlord's name/address					
Total monthly rent		Your portion		Months rented	
Is heat included in rent?					Yes <input type="checkbox"/> No <input type="checkbox"/>

NJ Residents only, please complete roommate information below:

Roommate's Name	Roommate's Social Security Number	Roommate's Share of monthly rent

X. State Specific Items

	Amount																				
CA	Expenses associated with the purchase and installation of solar energy equipment																				
	If you have a Registered Domestic Partner, please provide name and Social Security Number																				
CT	CT Residents, please provide the following information for your state property tax credit																				
	<table border="1"> <thead> <tr> <th>Property</th> <th>District</th> <th>List or Bill #</th> <th>Date Paid</th> <th>Amount</th> </tr> </thead> <tbody> <tr> <td>Home</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Auto</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Auto</td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>	Property	District	List or Bill #	Date Paid	Amount	Home					Auto					Auto				
Property	District	List or Bill #	Date Paid	Amount																	
Home																					
Auto																					
Auto																					
DC	For DC First Time Home Buyers Credit (first home purchase in DC or , please list: following information																				
	Address of Qualifying home, if different than your address on the front of the organizer																				

	Lot Number		Square Number		Closing Date		
	Do you have a carryover credit from 2007?			Percentage of home owned			
DE	Clothing and expenses incurred for service as an active volunteer firefighter						
FL	A state Intangible tax return is required if you own securities valued at more than \$250,000 or \$500,000 if you are married filing jointly. Please include copies of your investment statements with your organizer.						
GA	Amount spent on home care services for persons over 62.						
HI	Cost of child restraint system						
ID	Cost of insulation purchased in 2008 and installed in primary residence						
IN	For installation installed in your primary residence, please list:						
	Age of house		Purchase date		Installation date		Amount paid
MA	Please provide Form 1090HC.						
	Qualified commuter expenses paid for public transportation (MBTA transit/rail, tolls paid through FastLane account)						
	Legally married same sex partners must file as MFJ or MFS. Please include partner's name, Social Security Number and birth date						
MI	Please provide the property tax statement showing the taxable value of your house.						
MN	Please send us your Certificate of Rent Paid (renters) or Statement of Property Taxes Payable (homeowners)						
MT	First Time Homebuyers Savings Account contributions						
OH	Job training expenses you incurred after layoff or furlough						
VT	Please include your 2008/2009 property tax bill						

Y. Foreign Domicile

Date foreign residence began		Date foreign residence ended	
Will foreign residence last at least 1 year?		Are you subject to tax in the base country?	Yes No
Country of citizenship		If yes, what type of tax?	
Did family members live abroad with you?		Type of work Visa you were issued	
Have you filed Form 2555 previously?	Yes No	If yes, what year?	

If you kept a home in the United States while you were based outside of the U.S., please list dates, address and relationship of occupants:

If you were in the United States during the tax year (excluding work related purposes, such as layovers or training, please complete below:

Date arrived US	Date left US	Date arrived US	Date left US	Date arrived US	Date left US
/ /	/ /	/ /	/ /	/ /	/ /
/ /	/ /	/ /	/ /	/ /	/ /
/ /	/ /	/ /	/ /	/ /	/ /

Privacy Policy

The privacy of your client information has always been important to us, and we have always been bound by professional standards of confidentiality. We collect nonpublic personal information about you that is provided by you or obtained by us with your authorization. This information may come from various sources, including information we receive from personal interviews, tax organizers, worksheets and other documents necessary to provide professional services to you.

We do not disclose any nonpublic personal information about our clients or former clients to anyone, except as permitted or required by law, or when necessary to process transactions requested by a client.

We restrict access to nonpublic personal information about you to members of our firm who need to know that information in order to provide you professional services. We retain records relating to the professional services that we provide you in accordance with accounting and government standards.

We employ physical, electronic, and procedural security safeguards to protect your nonpublic personal information.

World's Best Rates on Per Diem Calculations and Tax Preparation

Tax Preparation fees (N/C = no charge for form with tax preparation)

Crew Package Our Best Deal! (Does not include state return)	1040, Schedules A&B, 2106, Per Diem Report	120.00	1040 without meal expense calculation	1040, A, B	95.00
State return (price per state)		20.00	Injured spouse/Innocent spouse	8379/8857	20.00
Local return		20.00	Investment interest expense	4952	10.00
Married couples (additional)		20.00	Investment tax for children under 14	8615	20.00
Additional tax on retirement income	5329	20.00	Mortgage interest credit	8396	10.00
Alternative Minimum Tax	6251	20.00	Moving expenses	3903	10.00
Business use of home	8829	20.00	Non-deductible IRA	8606	10.00
Charitable non-cash contributions over \$500	8283	20.00	Parents reporting child's income	8814	20.00
Casualty Loss/Theft	4685	20.00	Partnership/S-Corp/Estate (per schedule)	K-1	20.00
Child care credit	2441	10.00	Passive activity loss	8582	20.00
Child tax credit		N/C	Rental Property (per property)	E	20.00
Additional child tax credit	8812	10.00	Sale of business assets	4797	40.00
Earned Income Credit	EIC	10.00	Sec 1256 Contracts and Straddles	6781	20.00
Education credit/deduction	8863	20.00	Self employed/small business	C	30.00
Extension of time to file	4868/2688	N/C	Self employment tax	SE	N/C
Farm Income	F	40.00	Stock/bond distributions	D	20.00
Foreign earned income exclusion	2555	40.00	Traditional IRA to Roth IRA rollover		10.00
Household employee taxes	H	20.00	Telephone Excise Tax Credit	8913	40.00

Other Items

Per Diem Calculation only Please send us your 12 monthly activity statements or logbook showing flight information. It's not necessary to complete the tax organizer if we are only calculating your per diem expenses.	40.00	Per Diem Calculation & Form 2106 (Employee Expenses) Please complete Section W of Tax Organizer, including amount of non-taxable per diem you received for the year.	50.00
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Please fax a copy of my Per Diem Report to:	Name	Fax number

Special handling for tax organizers postmarked after March 22	20.00	
Withhold your tax preparation fee from your refund	31.00	
Total		

<input type="checkbox"/> Please bill my credit card	<input type="checkbox"/> I have enclosed a check	<input type="checkbox"/> Withhold my fee from my refund
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Credit Card Payment Information		
Name on credit card	Card Number	Expires on
Billing address (if different than on front of organizer)	Signature authorizing credit card charge	

Refer a Friend	Our best advertising is a personal referral. For every new client you refer to Tax Crew, we'll send you a check for \$10.00 as our thank you. Tell your friends to include your name on the front of the organizer.
Free Tax Evaluation	If we haven't prepared your returns in the past, you may have paid too much income tax. We'll evaluate your returns for the last three years at no charge and with no obligation to amend the return. We'll advise you of any additional refund due. If you decide to file an amended return, our fee is \$125.00 per year and includes all forms required for Federal and State amendments. All we need to get started are: a copy of the return you already filed, copies of your W-2s, Activity statements showing layover information and a completed tax organizer for and deductions you did not claim on the original return.

Rates and terms listed on this organizer are effective through December 31, 2009 and are subject to change thereafter.