

# 2008 PERSONAL TAX DEDUCTION WORKSHEET

Name \_\_\_\_\_  
 D.O.B. \_\_\_\_/\_\_\_\_/\_\_\_\_ SS# \_\_\_\_\_  
 Occupation \_\_\_\_\_

Spouse Name \_\_\_\_\_  
 D.O.B. \_\_\_\_/\_\_\_\_/\_\_\_\_ SS# \_\_\_\_\_  
 Occupation \_\_\_\_\_

Phone- Home \_\_\_\_\_ CIRCLE ONE  
 Work \_\_\_\_\_ (Taxpayer/Spouse)  
 Cell \_\_\_\_\_ (Taxpayer/Spouse)

Email Address \_\_\_\_\_

Address \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_



## INCOME CHECKLIST

*(Attach Documentation)*

✓

Wages (W-2's) \_\_\_\_\_  
 Dividend Income (1099-DIV) \_\_\_\_\_  
 Interest Income (1099-INT) \_\_\_\_\_  
 State Refunds (1099-G) \_\_\_\_\_  
 Gambling Income (W-2G) \_\_\_\_\_  
 HSA/MSA Distributions (1099-SA) \_\_\_\_\_  
 Home Sale (1099-S) \_\_\_\_\_  
 IRA/Pension Pymts (1099-R) \_\_\_\_\_  
 Social Security (SSA-1099) \_\_\_\_\_  
 Stock Sales (1099-B) \_\_\_\_\_  
 Unemployment (1099-G) \_\_\_\_\_  
 Alimony \_\_\_\_\_  
 Jury Duty \_\_\_\_\_  
 Schedule K-1's \_\_\_\_\_  
 1099-Misc \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

## DEPENDENTS

Name                      D.O.B.                      SS# (Please verify)

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

## ESTIMATED TAXES PAID

DATE	IRS	STATE
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
<b>TOTAL</b>	_____	_____

## CHILD CARE CREDIT

Name & Address of Provider	SS#	Amount Paid
<small>(Please breakdown amounts paid per child)</small>		
_____	_____	_____
_____	_____	_____
_____	_____	_____

## PENSION PLANS

[not 401(k)]

Contributions for current year

	<i>Individual</i>	<i>Spouse</i>
IRA	\$ _____	\$ _____
ROTH-IRA	_____	_____
SEP/SIMPLE IRA	_____	_____
Conversion of Regular IRA to ROTH-IRA in 2008	_____	

## EDUCATION CREDITS (Form 1098-T)

### HOPE & LIFETIME LEARNING CREDIT

Student Name	Tuition & Fees Paid
1) _____	_____
2) _____	_____

Is student taking at least 1/2 credits of full-time status?	Has student completed at least 2 years of postsecondary education?
1) Y    N	1) Y    N
2) Y    N	2) Y    N

## STUDENT LOAN INTEREST (Form 1098-E)

Amount paid                      \$ \_\_\_\_\_

## STIMULUS PAYMENT

Amount received in 2008 \$ \_\_\_\_\_

## MEDICAL/HEALTH SAVINGS ACCOUNT CONTRIBUTIONS

2008 Contributions to: (Circle which)

	<i>Individual</i>	<i>Spouse</i>
MSA	\$ _____	\$ _____
HSA	\$ _____	\$ _____

# 2008 PERSONAL TAX DEDUCTION WORKSHEET

## ITEMIZED DEDUCTIONS

### ➤ **Medical/Dental Expenses**

Insurance premiums \$ \_\_\_\_\_  
(not pre-tax)

Long-term care premiums \_\_\_\_\_

Prescriptions (Medicine/drugs) \_\_\_\_\_

Out-of-pocket expenses for  
Doctors/Dentists/Hospitals/Eyecare \_\_\_\_\_

Medical miles driven \_\_\_\_\_

### ➤ **Home Mortgage Interest**

Paid-Financial Institutions \$ \_\_\_\_\_

Paid-Individuals \$ \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

SS# \_\_\_\_\_

### ➤ **Miscellaneous Deductions**

#### • **Employee business expenses**

Tools/Protective clothes \$ \_\_\_\_\_

Union dues \_\_\_\_\_

Other \_\_\_\_\_

Other \_\_\_\_\_

• Tax Preparation fees \_\_\_\_\_

• Teacher out-of-pocket expenses for  
supplies and books (up to \$250 ) \_\_\_\_\_

• Other Misc. Expenses (moving, alimony paid,  
etc) \_\_\_\_\_

\_\_\_\_\_

### ➤ **Taxes**

State Tax paid with  
previous year return \_\_\_\_\_

Real Estate \_\_\_\_\_

Personal Property \_\_\_\_\_

### ➤ **Contributions**

Checks \$ \_\_\_\_\_

Cash (Must have receipts) \$ \_\_\_\_\_

Non-Cash \_\_\_\_\_

(If over \$250, attach list showing description of  
property, charity name, address, date acquired, date  
contributed, your cost basis, value, and how valued)

Mileage for charitable work \_\_\_\_\_

## RENT EXPENSE

Did you have rent expense? Y or N

How much? \$ \_\_\_\_\_/mo or \$ \_\_\_\_\_/yr

Was heat included? Y or N

## PREFERENCES

How would you like to be contacted? Phone \_\_\_\_\_ Email \_\_\_\_\_  
(Please circle)

Federal and state election campaign funds?

(This does not change your tax or refund) Y or N

Would you like to donate to any of the following:

Breast Cancer Research? \$ \_\_\_\_\_

Endangered Resources? \$ \_\_\_\_\_

Fire Fighters Memorial? \$ \_\_\_\_\_

Multiple Sclerosis Research \$ \_\_\_\_\_

Packer Football Stadium? \$ \_\_\_\_\_

Prostate Cancer Research? \$ \_\_\_\_\_

Veteran's Trust Fund? \$ \_\_\_\_\_

## OUT OF STATE PURCHASES

Did you have any out-of-state purchases that you  
did not pay Wisconsin Sales Tax on?

If yes: Total \$ \_\_\_\_\_ x \$.055 = \$ \_\_\_\_\_

## ELECTRONIC FILING

Do you want to electronically file your tax returns?  
Y or N

5-digit PIN number# \_\_\_\_\_ spouse# \_\_\_\_\_

Do you want Direct Deposit? Y or N  
(If yes, we need a voided check.)

## SIGNATURE – PLEASE SIGN

I (we) certify that all the information listed is  
correct and complete, and may be relied upon to  
prepare my income tax returns.

\_\_\_\_\_  
(Taxpayer's Signature)

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
(Spouse's Signature)

\_\_\_\_\_  
(Date)