

## Questions

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

### Personal Information

Yes    No

Did your marital status change during the year?

—    —

If yes explain: \_\_\_\_\_

Did your address change from last year?

—    —

Can you be claimed as a dependent by another taxpayer?

—    —

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?

—    —  
Yes    No

### Dependent Information

Were there any changes in dependents from the prior year?

—    —

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 \$1,900?

—    —

Do you have dependents who must file a tax return?

—    —

Did you provide over half the support for any other person(s) during the year?

—    —

Did you pay for child care while you worked or looked for work?

—    —

Did you pay any expenses related to the adoption of a child during the year?

—    —  
Yes    No

### Purchases, Sales, and Debt Information

Did you start a new business or purchase rental property during the year?

—    —

Did you acquire a new or additional interest in a partnership or S corporation?

—    —

Did you sell, exchange, or purchase any real estate during the year?

—    —

Did you purchase or sell a principal residence during the year?

—    —

Did you foreclose or abandon a principal residence or real property during the year?

—    —

Did you acquire or dispose of any stock during the year?

—    —

Did you take out a home equity loan this year?

—    —

Did you refinance a principal residence or second home this year?

—    —

Did you sell an existing business, rental, or other property this year?

—    —

Did you incur any non-business bad debts this year?

—    —

Did you have any debts canceled or forgiven this year?

—    —

Did you purchase a new hybrid, alternative motor, or electric motor energy efficient vehicle this year?

—    —

Did you pay any student loan interest this year?

—    —  
Yes    No

### Income Information

Did you have any foreign income or pay any foreign taxes during the year?

—    —

Did you receive any income from property sold prior to this year?

—    —

Did you receive any lump-sum payments from a pension, profit sharing, or 401(k) plan?

—    —

Did you make any withdrawals from or contributions to an IRA, Keogh, SIMPLE, SEP, or other qualified retirement plan?

—    —

Did you make any withdrawals/contributions from/to a retirement plan (including IRA) due to Midwestern Disaster area relief?

—    —

Did you make any withdrawals from an education savings or 529 Plan account?

—    —

Did you receive any distributions from a Health savings account (HSA), Archer MSA, or Medicare Advantage MSA this year?

—    —

Did you receive any disability income during the year?

—    —

Did you receive any Social Security benefits during the year?

—    —

Did you receive any unemployment benefits during the year?

—    —

Did you receive tip income not reported to your employer this year?

—    —

Did any of your life insurance policies mature, or did you surrender any policies?

—    —

Did you cash any Series EE or I U S Savings bonds issued after 1989?

—    —  
Yes    No

### Itemized Deduction Information

Did you incur a casualty or theft loss during the year?

—    —

Do you have evidence to substantiate charitable contributions?

—    —

Did you make any noncash charitable contributions (clothes, furniture, etc.)?

—    —

Did you donate a vehicle or boat during the year? If yes, attach Form 1098-C

—    —

Did you have an expense account or allowance during the year?

—    —

Did you use your car on the job, for other than commuting?

—    —

Did you work out of town for part of the year?

—    —

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

Yes No

**Itemized Deduction Information, Continued**

- Did you have any expenses related to seeking a new job during the year? — —
- Did you make any major purchases during the year (cars boats etc)? — —
- 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? — —

Yes No

**Miscellaneous Information**

- Did you make gifts of more than \$13,000 to any individual? — —
- Did you have any educational expenses during the year? — —
- Did you make any contributions to an education savings or 529 Plan account? — —
- Did you make any contributions to a Health savings account (HSA) or Archer MSA? — —
- Did you pay long-term health care premiums for yourself or your family? — —
- Did you pay any COBRA health care coverage continuation premiums? — —
- Did you engage in any bartering transactions? — —
- Are you an active participant in a pension or retirement plan? — —
- Did you retire or change jobs this year? — —
- Did you incur moving costs because of a job change? — —
- Did you your spouse or your dependents attend a post-secondary school during the year? — —
- Did you pay any individual as a household employee during the year? — —
- Did you make energy efficient improvements to your main home this year? — —
- 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? — —
- Did you receive correspondence from the State or Internal Revenue Service? — —
- If yes explain: \_\_\_\_\_
- 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. — —
- Did you pay state and local real estate property taxes this year? If yes please attach a supporting statement — —

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.

Economic recovery payment received in 2009 (Do not enter more than \$250 per person) Taxpayer \_\_\_\_\_ Spouse \_\_\_\_\_  
 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 address \_\_\_\_\_ Payer's social security number \_\_\_\_\_  
 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:	_____	_____
_____	_____	_____
_____	_____	_____



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)	_____	_____

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.

**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

Taxpayer

Spouse

**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:

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

Preparer use only

	2009 Information	Prior Year Information
Taxpayer/Spouse/Joint (T S J)	_____ [2]	_____
Employer identification number	_____ [3]	_____
Business name	_____ [5]	_____
Principal business/profession	_____ [6]	_____
Business code	_____ [10]	_____
Business address if different from home address on Organizer Form ID:1040		_____
Address	_____ [13]	_____
City/State/Zip	_____ [14] _____ [15] _____ [16]	_____
Accounting method (1 = Cash 2 = Accrual 3 = Other)	_____ [17]	_____
If other:	_____ [19]	_____
Inventory method (1 = Cost 2 = LCM 3 = Other)	_____ [20]	_____
If other enter explanation:	_____ [22]	_____
Enter an explanation if there was a change in determining your inventory:		
	_____ [23]	_____
Did you "materially participate" in this business? (Y N)	_____ [24]	_____
If not number of hours you did significantly participate	_____ [26]	_____
Mark if you began or acquired this business in 2009	_____ [28]	_____
Mark if this business is considered related to qualified services as a minister or religious worker	_____ [29]	_____
Did you receive wages as a statutory employee or as a minister? (1 = Statutory employee 2 = Minister)	_____ [31]	_____
Medical insurance premiums paid by this activity	+ _____ [33]	_____
Long-term care premiums paid by this activity	+ _____ [35]	_____
Amount of wages received as a statutory employee	+ _____ [38]	_____

**Business Income**

	2009 Information	Prior Year Information
Gross receipts or sales	+ _____ [43]	_____
Returns and allowances	+ _____ [45]	_____
Other income:		_____
_____	+ _____ [47]	_____
_____	+ _____	_____
_____	+ _____	_____
_____	+ _____	_____
_____	+ _____	_____
_____	+ _____	_____

**Cost of Goods Sold**

	2009 Information	Prior Year Information
Beginning inventory	+ _____ [49]	_____
Purchases	+ _____ [51]	_____
Labor:		_____
_____	+ _____ [53]	_____
_____	+ _____	_____
Materials	+ _____ [55]	_____
Other costs:		_____
_____	+ _____ [57]	_____
_____	+ _____	_____
_____	+ _____	_____
_____	+ _____	_____
Ending inventory	+ _____ [59]	_____



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]

[Shaded area for Prior Year Information]

**Rent and Royalty Income**

**2009 Information**

**Prior Year Information**

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

[Shaded area for Prior Year Information]

**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] \_\_\_\_\_  
 \_\_\_\_\_ + \_\_\_\_\_  
 \_\_\_\_\_ + \_\_\_\_\_  
 \_\_\_\_\_ + \_\_\_\_\_  
 \_\_\_\_\_ + \_\_\_\_\_

[Large shaded area for Prior Year Information]

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

**Control Totals +**

**Form ID: Rent**



Preparer use only

	2009 Information	Prior Year Information
Taxpayer/Spouse/Joint (T S J)	[2]	
Employer identification number	[3]	
Description	[4]	
Principal Product	[5]	
State postal code	[6]	
Accounting method (1 = Cash 2 = Accrual)	[7]	
Agricultural activity code	[9]	
Did you "materially participate" in this business? (Y N)	[12]	
Mark if Schedule F net income or loss should be excluded from self employment income	[14]	
Medical insurance premiums paid by this activity	+ [16]	
Long-term care premiums paid by this activity	+ [18]	

**Cash or Accrual Income Items**

	2009 Information	Prior Year Information
Sales of livestock and other items you bought for resale:		
_____	+ [26]	
_____	+ [26]	
_____	+ [26]	
Cost or other basis of livestock and other items you bought for resale	+ [28]	
Sale of livestock produce grains other products you raised:		
_____	+ [30]	
_____	+ [30]	
_____	+ [30]	
Taxable crop insurance proceeds received in 2009	+ [32]	
Mark if electing to defer crop insurance proceeds to 2010	[34]	
Crop insurance proceeds deferred from 2008	+ [36]	
Accrual sales of livestock produce grains, and other products:		
_____	+ [38]	
_____	+ [38]	
_____	+ [38]	
Beginning inventory of livestock and other items	+ [40]	
Accrual cost of livestock, produce grains and other products purchased	+ [42]	
Ending Inventory of livestock and other items	+ [44]	

**Cash and Accrual Income Items**

	2009 Information	Prior Year Information
Total cooperative distributions you received	+ [46]	
Taxable cooperative distributions you received	+ [48]	
Total agricultural program payments	+ [50]	
Taxable agricultural program payments	+ [52]	
CRP payments received while enrolled to receive social security or disability benefits	+ [54]	
Commodity credit loans reported under election:		
_____	+ [56]	
_____	+ [56]	
Total commodity credit loans forfeited	+ [58]	
Taxable commodity credit loans forfeited	+ [60]	
Total crop insurance proceeds you received in 2009	+ [62]	
Custom hire (machine work) income	+ [64]	
Other income:		
_____	+ [66]	
_____	+ [66]	
_____	+ [66]	
_____	+ [66]	
_____	+ [66]	

