

From:

Scott C. Evans, C.P.A., P.C.
999 E Murray Holladay Rd Ste 104
Salt Lake City UT, 84117-4961
www.scecpa.com

2008 Client Organizer

This information is complete and correct to the best of my (our) knowledge.

Taxpayer signature _____ Date _____

Spouse signature _____ Date _____

Scott C. Evans, C.P.A., P.C.
999 E Murray Holladay Rd Ste 104
Salt Lake City, UT 84117-4961
801-266-9000
Fax 801-266-6400
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Dear :

This Client Organizer is designed to help you gather tax information needed to prepare your 2008 personal income tax return. We have preprinted certain information from your 2007 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. When you receive your completed tax return(s), please review all social security numbers and bank account information for accuracy. Report any discrepancies to our office immediately.

Enter 2008 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.

We will also need the following information:

- Forms W-2 for wages, salaries and tips.
- All Forms 1099 for interest, dividends, miscellaneous income, etc.
- All Forms 1098 for mortgage interest and property tax on real property, 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 cash and noncash charitable contributions.
- 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 us.

Thank you for the opportunity to serve you.

Sincerely,

Scott C. Evans, C.P.A., P.C.

Questions

Please check the appropriate box and include all necessary details.

| | Yes | No |
|--|--------------------------|--------------------------|
| Personal Information | | |
| 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"/> |
| If yes, provide: _____ | | |
| Have any of your phone numbers changed? | <input type="checkbox"/> | <input type="checkbox"/> |
| If yes, provide: _____ | | |
| 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 funds from the IRS or other taxing authority during the tax year? | <input type="checkbox"/> | <input type="checkbox"/> |
| Dependent Information | | |
| Did you claim a dependent last year that you cannot claim this year? | <input type="checkbox"/> | <input type="checkbox"/> |
| If yes, give name: _____ | | |
| Do you have any new dependents that can be claimed on your tax return? | <input type="checkbox"/> | <input type="checkbox"/> |
| If yes, provide name, social security number, and birth date: _____ | | |
| Did you pay for child care while you worked? | <input type="checkbox"/> | <input type="checkbox"/> |
| If yes provide day care provider name, address, amount, and federal identification number | | |
| Did you pay any expenses related to the adoption of a child during the year? | <input type="checkbox"/> | <input type="checkbox"/> |
| If yes provide amount: _____ | | |
| Purchases, Sales and Debt Information | | |
| 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"/> |
| If yes, provided closing documents (HUD statements) | | |
| 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"/> |
| If yes, include the HUD statement | | |
| Did you refinance a principal residence or second home this year? | <input type="checkbox"/> | <input type="checkbox"/> |
| If yes, include the HUD statement | | |
| Did you sell an existing business, rental, or other property this year? | <input type="checkbox"/> | <input type="checkbox"/> |
| If yes, include the HUD statement or closing documents | | |
| Did you incur any non-business bad debts this year? | <input type="checkbox"/> | <input type="checkbox"/> |
| Did you purchase a new hybrid or alternative motor vehicle this year? | <input type="checkbox"/> | <input type="checkbox"/> |
| If yes, include car purchase agreement from dealer | | |
| Did you pay any student loan interest this year? | <input type="checkbox"/> | <input type="checkbox"/> |
| Income Information | | |
| Did you have any foreign income or pay any foreign taxes during the year? | <input type="checkbox"/> | <input type="checkbox"/> |
| Did you have a foreign bank account at any time during the year? | <input type="checkbox"/> | <input type="checkbox"/> |
| If yes, list on a seperate sheet | | |
| Did you receive any income from property sold prior to this year? | <input type="checkbox"/> | <input type="checkbox"/> |

OVER

- Did you receive any lump-sum payments from a pension, profit sharing or 401(k) plan?
- Did you make any withdrawals from an IRA, Keogh, SIMPLE, or SEP account?
- Did you make any withdrawals/contributions from/to a retirement plan (including IRA) due to Midwestern Disaster area relief?
- Did you make any withdrawals or contributions from an education savings or 529 Plan account?
- If yes, provide contributions or withdrawals _____
- 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 tip income not reported to your employer this year?
- Did you cash any Series EE or I U.S. Savings bonds issued after 1989?

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, vehicles,etc.)?
- Did you use your car on the job, for other than commuting?
- Did you work out of town for part of the year?
- Did you have any educational expenses?
- 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.)?
- If yes, indicate item and costs" _____
- 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?

Miscellaneous Information

- Did you make gifts of more than \$12,000 to any individual?
- Did you pay long-term health care premiums for yourself or your family?
- If yes, provide amount: _____
- Did you engage in any bartering transactions?
- Did you contribute to a traditional IRA Account?
- If yes, provide amount: _____
- Did you contribute to a ROTH IRA Account?
- If yes, provide amount: _____
- Did you contribute to a nondeductible IRA Account?
- If yes, provide amount: _____
- Did you incur moving costs because of a job change?
- If yes, provide costs on a seperate sheet of paper.
- Did you, your spouse, or your dependents attend a post-secondary school during the 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 the Internal Revenue Service?
- If yes, provide: _____
- Did you receive an economic stimulus (tax rebate) payment from the IRS?
- Did you pay any real estate property taxes this year?
- If yes, provide amount: _____
- Are you an educator? (teacher or administrator K - 12 only)
- If yes, provide educator expenses _____
- Are you legally blind?

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 | _____ | _____ |
| Was taxpayer between 19 and 23 and full-time student? (1 = Yes, 2 = No) | _____ | _____ |
| Mark if member of U.S. Armed Forces in 2008 | _____ | _____ |
| Date of birth | _____ | _____ |
| Date of death | _____ | _____ |
| Work/daytime telephone number/ext number | _____ | _____ |
| Do you authorize us to discuss your return with the IRS (1 = Yes, 2 = No) | <u>1</u> | _____ |

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 2008 | _____ | _____ |
| | 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*) _____

*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 |
|-----|-------------|------------------------|------------------------------|
| ___ | _____ | _____ | ___ |
| ___ | _____ | _____ | ___ |

Income: Income **Economic Stimulus Payment (Rebate)**

Enter the amount of the stimulus payment (before offset) you received below. If you filed a joint return in 2007, and your filing status did not change in 2008, fill in only the Taxpayer/Joint column. However, if your filing status changed to married filing joint in 2008 and your spouse received a separate payment, enter the amount in the Spouse column.

| | Taxpayer/Joint | Spouse |
|---|----------------|--------|
| Economic stimulus payment (rebate) received in 2008 | _____ | _____ |
| Mark if you did not receive an economic stimulus payment (rebate) | ___ | ___ |

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 2008 _____ Amount received in 2007 _____

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.

| | 2008 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 | _____ | _____ | _____ |
| Veterans' disability or death benefits | _____ | _____ | _____ |
| Other Income: | | | |
| T/S/J | | 2008 Information | Prior Year Information |
| _____ | | _____ | _____ |
| _____ | | _____ | _____ |

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 2008 -

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 2008

Roth IRA Contributions for 2008 -

Mark if you want to contribute the maximum Roth IRA contribution

Enter the total Roth IRA contributions made for use in 2008

Educate: Educate

Higher Education Deductions and/or Credits

Complete this section if you paid interest on a qualified student loan in 2008 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 | 2008 Information | Prior Year Information |
|-----|--------------------------------------|------------------|------------------------|
| ___ | _____ | _____ | _____ |
| ___ | _____ | _____ | _____ |

Complete this section if you paid qualified education expenses for higher education costs in 2008.

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 2 years of post-secondary education; has had no drug convictions in 2008 and has not claimed the Hope credit in more than one prior tax year.

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 | 2008 Information | Prior Year Information |
|----------------------|----------------|-------------------|------------------|------------------------|
| ___ | _____ | _____ | _____ | _____ |
| Address _____ | | City _____ | State ___ | Zip code _____ |

Taxpayer

Spouse

Prior Year Information

Educator expenses:

| | | | |
|-------|-------|-------|-------|
| _____ | _____ | _____ | _____ |
|-------|-------|-------|-------|

Other adjustments:

| | | | |
|-------|-------|-------|-------|
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |