

Individual Income Tax Organizer for

2008

Compliments of:

Thomas A. Lawler, C.P.A., P.C.

Certified Public Accountants

One Albion Street Second Floor

Wakefield, MA 01880-2801

Voice (781) 246-0964 Fax (781) 246-1077

TomLawler@TALCPA.com

Personal Data

Taxpayer Name		SSN	
Spouse's Name		SSN	
Address		Apt no.	
Address			
City	State	ZIP	
County		School District	
Taxpayer phone Daytime:	Ext:	Evening:	Ext: Cell:
Spouse phone Daytime:	Ext:	Evening:	Ext: Cell:
Taxpayer email		Spouse email	
Taxpayer occupation		Spouse occupation	
Taxpayer Date of Birth	Blind	Active military	Do you want \$3 to go to the Presidential Election Campaign Fund?
Spouse's Date of Birth	Blind	Active military	Does your spouse want \$3 to go to the Presidential Election Campaign Fund?
Date and time of this year's appointment		Economic Stimulus Payment Amount	

Your Dependents

Dependent # 1			Dependent # 2			Dependent # 3		
First name	M.I.	First name	M.I.	First name	M.I.	First name	M.I.	First name
Last name	Suffix	Last name	Suffix	Last name	Suffix	Last name	Suffix	Last name
SSN/ITIN			SSN/ITIN			SSN/ITIN		
Relationship			Relationship			Relationship		
No. of months lived with you			No. of months lived with you			No. of months lived with you		
Age/DOB			Age/DOB			Age/DOB		
Qualifying child care expenses incurred and paid in 2008			Qualifying child care expenses incurred and paid in 2008			Qualifying child care expenses incurred and paid in 2008		
Portion of qualifying expenses provided by your employer			Portion of qualifying expenses provided by your employer			Portion of qualifying expenses provided by your employer		
Hope Credit qualified expenses paid			Hope Credit qualified expenses paid			Hope Credit qualified expenses paid		
Lifetime Learning Credit qualified expenses paid			Lifetime Learning Credit qualified expenses paid			Lifetime Learning Credit qualified expenses paid		
Tuition and Fees Deduction			Tuition and Fees Deduction			Tuition and Fees Deduction		
Minor child with income over \$850?			Minor child with income over \$850?			Minor child with income over \$850?		

2008 Estimates:	Federal			State			Local		
	Amount paid	Date paid	Check no.	Amount paid	Date paid	Check no.	Amount paid	Date paid	Check no.
April 15, 2008									
June 16, 2008									
Sept. 15, 2008									
Jan. 15, 2009									
2007 overpayment applied									
2007 Balance due									
2007 Refund									
Additional payments made									
Additional payments made									
Additional payments made									

Miscellaneous Information

Name:

SSN:

Yes No

General Information

		1. Were there any changes to your filing status or number of dependents during 2008?
		2. Can you or your spouse be claimed as a dependent by someone else?
		3. Did you incur any childcare expenses?
		4. Did you have a change in residence or job location during the year?
		5. Did you move during 2008? From where? _____ Date of move _____
		6. Did you reside in more than one state during 2008? If yes, which states? _____
		7. Did you receive any notices from the IRS or the state taxing agency? If yes, please attach.
		8. Would you like a copy of your tax return sent to you via email?
		9. Did you receive an Economic Stimulus Payment? How much? _____ If yes, please bring IRS Notice 1378 to your appointment.

Yes No

Income Information

		1. Have you received all W-2s from all employers? How many W-2s are attached? _____
		2. Did you use your vehicle on the job other than for commuting to work?
		3. Did you have an employer-provided vehicle which you drove home or used personally? If so, enter the lease value. \$ _____
		4. Did you work out of town at any time during the year?
		5. Did you earn income from a state other than the state in which you live? If yes, what state and how much? _____
		6. Did you or your spouse receive any tips not reported to your (or your spouse's) employer?
		7. Did you receive any disability income during the year? \$ _____. Attach 1099-R.
		8. Did you have an interest in or signature over a bank or brokerage account in a foreign country? Were you a grantor of or transferor to a foreign trust?
		9. Did you earn interest from, or are you an authorized signature holder on, a foreign bank account?
		10. Did you have any income from, or pay taxes to, a foreign country?
		11. Did you engage in any bartering transactions during 2008?
		12. Did you surrender any U.S. Savings Bonds during 2008?
		13. Did you receive any state or local income tax refunds from prior years?
		14. Do you or your spouse have any IRA accounts?
		15. Did you recharacterize any IRAs this year?
		16. Did you or your spouse "roll over" a profit-sharing or retirement plan distribution into another plan?
		17. Did you receive a Schedule K-1 from a partnership, S corporation, or trust? If so, please attach.
		18. Did you or your spouse receive any social security benefits during the year? Attach Form(s) SSA-1099.
		19. Did you receive any type of prize, award, or gambling winnings during 2008?
		20. Did you receive any of the following: Unemployment Income, Combat Pay, Jury Duty and/or Alimony, or Maintenance Received? If so, what and how much? _____
		21. Did you receive any income not shown in this organizer? If so, please list. _____
		22. Does anyone owe you money that has become uncollectible?

Comments: _____

Miscellaneous Information

Name:

SSN:

Yes No

Business Information

- | | | |
|--------------------------|--------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> | 1. Did you start a new business or purchase any rental property during 2008? |
| <input type="checkbox"/> | <input type="checkbox"/> | 2. Have you purchased any business assets (furniture, equipment, etc.) or converted any assets to business use? If yes, please list on an attached sheet the date placed in service, cost or basis of asset, business use percentage, etc. |
| <input type="checkbox"/> | <input type="checkbox"/> | 3. Did you dispose of any business assets (including real estate)? If yes, please list on an attached sheet the date removed from service, selling price and expense of sale. |
| <input type="checkbox"/> | <input type="checkbox"/> | 4. Did you own rental property? What percentage of time did you spend managing your rentals? _____ |
| <input type="checkbox"/> | <input type="checkbox"/> | 5. Did you purchase any gasoline, diesel, or special fuels for non-highway business use? |

Yes No

Other Information

- | | | |
|--------------------------|--------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> | 1. Were any tuition costs paid during 2008 (even if classes were attended in another year)? |
| <input type="checkbox"/> | <input type="checkbox"/> | 2. Did anyone in your household attend higher education classes in 2008? |
| <input type="checkbox"/> | <input type="checkbox"/> | 3. Did you incur a loss due to damaged or stolen property? |
| <input type="checkbox"/> | <input type="checkbox"/> | 4. Did you purchase, sell, or refinance your principal home or your second home or make a home equity loan during the year? If yes, please provide all escrow, closing, and other pertinent documentation and information. |
| <input type="checkbox"/> | <input type="checkbox"/> | 5. Did you purchase a home, for the first time, as a principal residence after April 8, 2008? If yes, please provide closing documentation. |
| <input type="checkbox"/> | <input type="checkbox"/> | 6. Did you make any gifts to any one person in 2008 in excess of \$12,000? If so, are you splitting this gift with your spouse? |
| <input type="checkbox"/> | <input type="checkbox"/> | 7. Did you pay wages to any household employees (babysitter, housekeeper, nanny, etc.)? |

To itemize deductions, bring receipts and documentation for these types of expenses:

- | | |
|--------------------------|---|
| <input type="checkbox"/> | Prescriptions, first-aid |
| <input type="checkbox"/> | State/local income taxes |
| <input type="checkbox"/> | Mortgage interest |
| <input type="checkbox"/> | Tax preparation fees |
| <input type="checkbox"/> | Gambling losses (up to amount of winnings) |
| <input type="checkbox"/> | Cash donations to charity (provide all receipts) |
| <input type="checkbox"/> | Medical/Dental/Vision expenses and insurance premiums, mileage and lodging for seeking medical care (but not meals) |
| <input type="checkbox"/> | Real estate and personal property taxes paid in 2008 |
| <input type="checkbox"/> | Unreimbursed employee/work-related expenses (if self-employed, do not include items reported on Schedule C) |
| <input type="checkbox"/> | Fair market value of property donated to charity |
| <input type="checkbox"/> | Purchase price of new goods donated or used in volunteer work |

Comments: _____

Miscellaneous Information

Name:

SSN:

Information to bring to your appointment:

Driver's license & social security card (for identity verification)

Copy of your 2007 income tax return (for comparison and review for all includible information)

Preprinted IRS label received

Original W-2s and other statements of income received from employers

1099s and other statements reporting interest/dividend/miscellaneous income

Records of other income received (tips, self-employment, SSI, combined bank reporting statements)

Cancelled checking/savings slip (for direct deposit/direct debit information)

IRS Notice 1378 for Economic Stimulus Payment

Concerns to discuss with preparer: _____

Child & Dependent Care

Name:

SSN:

Child Care Provider's Social Security Number or Employer ID Number			
Child Care Provider's Name			
Child Care Provider's Address			
Child Care Provider's City State Zip		Child Care Provider's Phone	
Amount Paid in 2008		Amount Paid in 2007	
Child Care Provider's Social Security Number or Employer ID Number			
Child Care Provider's Name			
Child Care Provider's Address			
Child Care Provider's City State Zip		Child Care Provider's Phone	
Amount Paid in 2008		Amount Paid in 2007	
Child Care Provider's Social Security Number or Employer ID Number			
Child Care Provider's Name			
Child Care Provider's Address			
Child Care Provider's City State Zip		Child Care Provider's Phone	
Amount Paid in 2008		Amount Paid in 2007	
Child Care Provider's Social Security Number or Employer ID Number			
Child Care Provider's Name			
Child Care Provider's Address			
Child Care Provider's City State Zip		Child Care Provider's Phone	
Amount Paid in 2008		Amount Paid in 2007	
Child Care Provider's Social Security Number or Employer ID Number			
Child Care Provider's Name			
Child Care Provider's Address			
Child Care Provider's City State Zip		Child Care Provider's Phone	
Amount Paid in 2008		Amount Paid in 2007	
Child Care Provider's Social Security Number or Employer ID Number			
Child Care Provider's Name			
Child Care Provider's Address			
Child Care Provider's City State Zip		Child Care Provider's Phone	
Amount Paid in 2008		Amount Paid in 2007	

Wages and Salaries

Please attach all W-2(s).

Name:

SSN:

TS		Federal I.D. No.		Company Name			
		Federal wages	2008	2007	Federal tax	2008	2007
		State wages	2008	2007	State tax	2008	2007
		Locality	2008	2007	Local tax	2008	2007

TS		Federal I.D. No.		Company Name			
		Federal wages	2008	2007	Federal tax	2008	2007
		State wages	2008	2007	State tax	2008	2007
		Locality	2008	2007	Local tax	2008	2007

TS		Federal I.D. No.		Company Name			
		Federal wages	2008	2007	Federal tax	2008	2007
		State wages	2008	2007	State tax	2008	2007
		Locality	2008	2007	Local tax	2008	2007

TS		Federal I.D. No.		Company Name			
		Federal wages	2008	2007	Federal tax	2008	2007
		State wages	2008	2007	State tax	2008	2007
		Locality	2008	2007	Local tax	2008	2007

TS		Federal I.D. No.		Company Name			
		Federal wages	2008	2007	Federal tax	2008	2007
		State wages	2008	2007	State tax	2008	2007
		Locality	2008	2007	Local tax	2008	2007

TS		Federal I.D. No.		Company Name			
		Federal wages	2008	2007	Federal tax	2008	2007
		State wages	2008	2007	State tax	2008	2007
		Locality	2008	2007	Local tax	2008	2007

TS		Federal I.D. No.		Company Name			
		Federal wages	2008	2007	Federal tax	2008	2007
		State wages	2008	2007	State tax	2008	2007
		Locality	2008	2007	Local tax	2008	2007