

2025 TAX ORGANIZER

Kolodziej Eisen & Fey LLC Certified Public Accountants

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PERSONAL INFORMATION - Update if any changes or new client

Name _____ Spouse's name _____
Occupation _____ Occupation _____
E-Mail _____ E-Mail _____
Phone _____ Phone _____
Date of birth _____ Date of birth _____
Address _____
Preferred method of contact _____

Was health insurance purchased through Exchange? Y or N If Yes, you must provide Form 1095-A from Healthcare.gov.

Unemployment received Self \$_____ Spouse \$_____ Print Form 1099-G from website, will not be mailed!

Did you make improvements to your home that qualifies for energy credits? Y or N If yes, provide details.

Did you buy a vehicle that qualifies for the clean vehicle credit? Y or N If Yes, please provide copy of invoice.

Did you earn income from tips? Y or N If yes, how much? \$_____

Did you earn overtime? Y or N If yes, provide last pay stub of 2025 or statement from employer.

DEPENDENTS

1 2 3 4

Name _____
Birthdate _____
Relationship _____
Social Security # _____
Grade _____
School Name _____
School City _____
Trump account? Y or N _____

↪ Form 4547 gets filed with 2025 tax return to create account. See tax letter or www.trumpaccounts.gov for details.

K-12 Tuition/Fees \$_____ \$_____ \$_____ \$_____

↪ Illinois education credits are available for tuition and fees paid for kindergarten through high school.

Childcare costs \$_____ \$_____ \$_____ \$_____

↪ Federal credits for daycare and preschool fees. Provide the name, address, and EIN of the daycare provider on the next page.

College Tuition paid \$_____ \$_____ \$_____ \$_____

↪ To receive college credits, attach Form 1098-T and statement from the college/university showing payments made.

Bright Start contribution \$_____ \$_____ \$_____ \$_____

↪ To receive Illinois credit for Bright Start/Bright Directions, Illinois requires the account number. Please provide year-end statement.

Provide 1099Q for all distributions from Education Savings Accounts.

Bank information

Deposit my refund in the same account as last year

If new account - Routing # _____ Account # _____
Bank name _____ Checking or Savings (circle one)

Balance due tax returns can be paid with direct debit from bank account. Are you interested in this option? Y or N

Income - Please provide copies of all W-2's and 1099's. Provide Form 1099-B for stock and mutual fund sales.

For Rental Income, please complete Supplemental Schedule for Rental or Self-Employment Income (page 3)

If you received 1099-Misc or 1099-NEC forms, list related expenses on the Supplemental Schedule for Rental or Self-Employment Income.

Interest Income - Provide 1099-INT Amount
\$ _____
\$ _____

Pensions & IRA Distributions - provide Form 1099-R Amount
\$ _____
\$ _____

Dividend Income - Provide 1099-DIV Amount
\$ _____
\$ _____

Social Security Income - provide Form SSA-1099
Self \$ _____
Spouse \$ _____

Do you have a foreign bank or investment account? Y or N (If yes, provide statement and include income above)

Traditional and Roth IRAs - 2025 Limit is \$7,000. If you are 50 or older, limit is \$8,000.

2025 Traditional IRA contributions **must** be made by 4/15/26 Self \$ _____ Spouse \$ _____

2025 Roth IRA Contributions **must** be made by 4/15/26 Self \$ _____ Spouse \$ _____

Did you rollover an amount from an IRA? Self \$ _____ Spouse \$ _____ Attach Form 1099-R

Did you convert an amount to a Roth IRA? Self \$ _____ Spouse \$ _____ Attach Form 1099-R

TAXES, DEDUCTIONS & CREDITS

Estimated Tax Pmts	Date	Federal	State
1st (due 4/18/25)	_____	\$ _____	\$ _____
2nd (due 6/16/25)	_____	\$ _____	\$ _____
3rd (due 9/15/25)	_____	\$ _____	\$ _____
4th (due 1/15/26)	_____	\$ _____	\$ _____

HSA contributions \$ _____ Attach Form 5498-SA

HSA distributions \$ _____ Attach Form 1099-SA

*Were all HSA distributions used for medical purposes? Y or N

2025 limits Self only \$4,300 Family \$8,550

If you are age 55 or older an additional \$1,000 is allowed.

ITEMIZED DEDUCTIONS

Taxes Paid

Primary residence property taxes \$ _____

Other property taxes paid \$ _____

Sales tax vehicle purchases \$ _____

Interest Paid

Mortgage interest _____ \$ _____

_____ \$ _____

_____ \$ _____

Refinance points paid \$ _____ Loan years _____

Charitable Contributions - Cash

Name _____ \$ _____

Name _____ \$ _____

Name _____ \$ _____

Contributions over \$250 require a receipt

Medical Expenses

Doctors & dentists \$ _____

Prescriptions \$ _____

Glasses, hearing aids etc. \$ _____

Medical miles driven _____

Medical insurance paid \$ _____

Long term care premiums Self \$ _____

Spouse \$ _____

Noncash Contributions \$ _____

(Description, fair market value, organization name and address must be provided for combined donations over \$500)

Miles driven for charity _____

MISCELLANEOUS CREDITS/DEDUCTIONS

Vehicle Interest on New Vehicle Assembled in the U.S. - Provide invoice from vehicle purchase.

Amount \$ _____ VIN _____ Loan origination date _____

Teacher/Educator Expense Deduction (for educators only) Amount spent for out-of pocket costs \$ _____

Child Care Credit (for care of child under 13 which enables you to work) Enter amount paid per child on front page.

Provider Name _____ SSN or FEIN _____

Provider Address _____

Student loan interest \$ _____

Did you buy, sell, send, or exchange crypto currency (Bitcoin, Ethereum, etc.)? Y or N

Other Miscellaneous Information

Did you sell your house in 2025? ____ If yes, provide closing papers from sale, purchase date and cost of prior residence.

Other information -

SUPPLEMENTAL SCHEDULE FOR RENTAL OR SELF-EMPLOYMENT INCOME

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Complete this optional worksheet if you have Rental Income or Self-Employment Income

PROVIDE CLOSING STATEMENT FOR ANY PROPERTIES PURCHASED OR SOLD DURING THE YEAR.

	Property 1	Property 2	Property 3
RENTAL PROPERTIES - address			
Rental Income	\$ _____	_____	_____
Expenses:			
Advertising	\$ _____	_____	_____
Auto & travel	\$ _____	_____	_____
Cleaning & maintenance	\$ _____	_____	_____
Commissions	\$ _____	_____	_____
Insurance	\$ _____	_____	_____
Interest	\$ _____	_____	_____
Legal & professional fees	\$ _____	_____	_____
Repairs	\$ _____	_____	_____
Supplies	\$ _____	_____	_____
Real estate tax	\$ _____	_____	_____
Utilities	\$ _____	_____	_____
Other (description) _____	\$ _____	_____	_____
Major repairs & purchases	\$ _____	_____	_____
(provide details on major purchases & repairs)		Were Form 1099's issued to any subcontractors? Y/N	

PROFIT OR LOSS FROM BUSINESS (Non-employee compensation including amounts reported on Form 1099-NEC or 1099-Misc)

Description of Self-Employment -	_____	_____
Total gross income	\$ _____	\$ _____
Tips included in gross income above	\$ _____	\$ _____
Costs of Good Sold (if applicable)		
Purchases	\$ _____	\$ _____
Expenses -		
Advertising	\$ _____	\$ _____
Auto expenses	\$ _____	\$ _____
Business # of miles driven	_____	_____
Bank charges & fees	\$ _____	\$ _____
Commissions	\$ _____	\$ _____
Computer/internet	\$ _____	\$ _____
Insurance	\$ _____	\$ _____
Interest - mortgage/other	\$ _____	\$ _____
Uniforms/laundry & cleaning	\$ _____	\$ _____
Legal & professional fees	\$ _____	\$ _____
Office supplies, postage & expenses	\$ _____	\$ _____
Outside services	\$ _____	\$ _____
Parking & tolls	\$ _____	\$ _____
Rent or lease - vehicle or machinery	\$ _____	\$ _____
Rent - other business property	\$ _____	\$ _____
Repairs & maintenance	\$ _____	\$ _____
Supplies	\$ _____	\$ _____
Taxes and licenses	\$ _____	\$ _____
Travel	\$ _____	\$ _____
Meals - business	\$ _____	\$ _____
Entertainment - other than meals	\$ _____	\$ _____
Utilities	\$ _____	\$ _____
Telephone/cell phone	\$ _____	\$ _____
Other (description) _____	\$ _____	\$ _____
Major purchases	Desc. _____ \$ _____	Desc. _____ \$ _____
	Desc. _____ \$ _____	Desc. _____ \$ _____

(provide details on major purchases & repairs over \$2,500)

Were Form 1099's issued to any subcontractors? Y/ Square footage of office
 Total square footage of home