2024 TAX ORGANIZER

Kolodziej Eisen & Fey LLC Certified Public Accountants

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PERSONAL INFOR	MATION - Upda	ate if any changes	or new clien	t			
Name							
Occupation				Occupation			
E-Mail			E-Ma	E-Mail Cell phone			
Cell phone			Cell				
Other phone			Othe	r phone			
Date of birth			Date	of birth			
Address							
Preferred method of c	ontact		_				
Was health insurance	purchased throug	h Exchange? You	r N If YES	, you must provide Fo	orm 1095-A from Healthcare.gov.		
Unemployment recei	ived Self \$	Spouse S	S	Print Form 1099-	-G from website, will not be mailed		
Did you make improve	ements to your ho	me that qualifies f	or energy cr	edits? Y or N			
Did you buy a vehicle	that qualifies for	the clean vehicle	credit? Y or	N If Yes, please pr	ovide copy of invoice.		
<u>Dependents</u>	<u>1</u>		<u>2</u>	3	<u>4</u>		
Name							
Birthdate							
Relationship							
Social Security #							
Grade							
School Name							
School City							
K-12 Tuition/Fees	\$	 \$		<u> </u>	\$		
→ Illinois education cred	its are available for t	uition and fees paid for	r kindergarten	through high school.			
Childcare costs	\$			\$	 \$		
→ Federal credits are ave	ailable for daycare an	nd preschool fees. Prov	ide the name, o	address, and EIN of the d	laycare provider on the next page.		
College Tuition paid	\$	\$		\$	\$		
→ To receive college cred		98-T and statement fro	om the college/	university showing payn	nents made.		
Bright Start contribution		·		\$			
	-	=	inois requires		lease provide copy of year-end statement.		
529 Plan distributions	\$	\$		\$	\$		
					alified education expenses? Y/N		
Direct deposit my refun If new account - Ro				ty retund in the same a			
				or Savings (circle one)			
			_		option? (yes/no)		
Income - Please provid	de copies of all W	7-2's and 1099's. P	rovide Form	1099-B for stock ar	nd mutual fund sales.		
For Rental Income, ple	ease complete Su	pplemental Schedu	ile for Renta	l or Self-Employme	nt Income (page 3)		
If you received 1099-Mi	sc or 1099-NEC for	rms, list related expe	enses on the S	upplemental Schedule	for Rental or Self-Employment Income.		
<u>Interest Income</u> - From	n whom?	Amount	Pensions	& IRA Distributions	- provide Form 1099-R Amount		
					<u> </u>		
	\$ <u></u>				\$		
Dividend Income - Fro	m whom?	Amount	Social So	<u>curity Income</u> - provi	de Form SSA-1099		
<u>Dividend income</u> - Fro		Amount	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 -	2024 Limit is	\$7,000. If you	are 50 or older, lim	nit is \$8,000.		
2024 Traditional IRA contribu	itions must be	made by 4/15/2	25 Self \$	Self \$ Spouse \$		
2024 Roth IRA Contributions	by 4/15/25	Self \$ Spouse \$				
Did you rollover an amount fro	Self			Attach Form 1099-R		
Did you convert an amount to					Attach Form 1099-R	
TAXES, DEDUCTIONS & CRI	FDITS					
Estimated Tax Pmts Date	Federal	State	HSA contribution	ns \$	Attach Form 5498-SA	
		\$			Attach Form 1099-SA	
,		\$			medical purposes? Y or N	
		\$ \$	2024 limits- Self		Family \$8,300	
		\$		•	ional \$1,000 is allowed.	
(duc 1/13/23)	Ψ	Ψ	If you are age 33 c	order an addit.	ionai \$1,000 is anowed.	
ITEMIZED DEDUCTIONS						
Taxes Paid			Medical Ex	<u>xpenses</u>		
Primary residence property tax	kes \$		_ Doctors & d	dentists	\$	_
Other property taxes paid	\$		_ Prescription	ıs	\$	_
Sales tax vehicle purchases				aring aids etc.	\$	
Sales tax major purchases				les driven		_
Description			_ Medical ins	urance paid	\$	_
Interest Paid			If health insu	rance acquired fro	om Health Insurance Marketp	lace
Mortgage interest	\$		provide Fo	rm 1095-A.		
				care premiums	Self \$	_
	\$			_	Spouse \$	_
Refinance points paid	Loan	years				
Charitable Contributions - Contributions	Cash		Noncash C	ontributions	\$	
Name					'	_
Name			(Description.	fair market value	, organization name and	
Name\$			address must be provided for combined donations over \$500)			
Contributions over \$250 requi		Miles driven for charity				
1	r					
MISCELLANEOUS CREDI						
Child Care Credit (paid for c	care of child ur	nder 13 which e	enables you to work)) Enter amount p	paid per child on front page).
Provider Name				SSN or FEIN		
Provider Address						
	Φ.					
Student loan interest						
Did you buy, sell, send, or ex	change crypt	o currency (Bi	tcoin, Etherum, etc	c.)? Y or N		
Other Miscellaneous Inform	<u>ation</u>					
Did you sell your house in 202	24? If ye	es, provide closin	g papers from sale, pu	irchase date and co	ost of prior residence.	
Other information						

SUPPLEMENTAL SCHEDULE FOR RENTAL OR SELF-EMPLOYMENT INCOME

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PROVIDE CLOSING STATEMEN	T FOR ANY PROPERTIES PUR	CHASED OR SOLD DURING TI	HE YEAR.
	Property 1	Property 2	Property 3
RENTAL PROPERTIES - addres	s		
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 purchase	s & repairs)	Were Form 1099's issued to a	ny subcontractors? Y/N
PROFIT OR LOSS FROM BUSI	NESS (Non-amployee companse)	tion including amounts reported	on Form 1000-NFC or 1000-Mis
Description of Self-Employment -			
Total gross income	\$		
Costs of Good Sold (if applicable)			
Purchases	\$	\$	
T.	·	·	
Expenses -	Φ.	•	
Advertising	\$	<u> </u>	
Auto expenses	\$	<u> </u>	
Business # of miles driven			
Bank charges & fees	\$		
Commissions	\$	\$	
Computer/internet	\$	\$	
Insurance	\$	\$	
Interest - mortgage/other	\$	<u>\$</u> _	
Uniforms/laundry & cleaning	\$	<u>\$</u> _	
Legal & professional fees	\$		
Office supplies, postage & expenses		<u> </u>	
Outside services	\$	<u> </u>	
Parking & tolls	\$	<u> </u>	
Rent or lease - vehicle or machinery	\$	<u> </u>	
Rent - other business property	\$		
Repairs & maintenance	\$		
Supplies	\$	<u> </u>	
Taxes and licenses	\$	<u> </u>	
Travel	\$	<u> </u>	
Meals - business	\$		
Entertainment - other than meals	\$	<u> </u>	
Utilities	\$	<u> </u>	
Telephone/cell phone	\$		
Other (description)	\$	\$	
Major purchases Desc	\$	Desc	\$
Desc	\$	Desc	<u> </u>
(provide details on major purchase			
Were Form 1099's issued to any st	ubcontractors? Y/N Squa	re footage of dedicated home offic I square footage of home	e