

**2024 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	_____
Cell phone	_____	Cell phone	_____
Other phone	_____	Other 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

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

<b>Dependents</b>	<b><u>1</u></b>	<b><u>2</u></b>	<b><u>3</u></b>	<b><u>4</u></b>
Name	_____	_____	_____	_____
Birthdate	_____	_____	_____	_____
Relationship	_____	_____	_____	_____
Social Security #	_____	_____	_____	_____
Grade	_____	_____	_____	_____
School Name	_____	_____	_____	_____
School City	_____	_____	_____	_____
K-12 Tuition/Fees	\$_____	\$_____	\$_____	\$_____
↳ Illinois education credits are available for tuition and fees paid for kindergarten through high school.				
Childcare costs	\$_____	\$_____	\$_____	\$_____
↳ Federal credits are available 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, <b>attach Form 1098-T and statement from the college/university</b> showing payments made.				
Bright Start contributions	\$_____	\$_____	\$_____	\$_____
↳ To receive Illinois credit for Bright Start or Bright Directions, <b>Illinois requires the account number</b> . Please provide copy of year-end statement.				
529 Plan distributions	\$_____	\$_____	\$_____	\$_____
↳ Provide 1099Q for all distributions from Education Savings Accounts. Were all distributions used for qualified education expenses? Y/N				

**Direct deposit** my refund (yes or no) \_\_\_\_\_  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? (yes/no) \_\_\_\_\_

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.

<b>Interest Income - From whom?</b>	Amount	<b>Pensions &amp; IRA Distributions - provide Form 1099-R</b>	Amount
_____	\$ _____	_____	\$ _____
_____	\$ _____	_____	\$ _____
_____	\$ _____	_____	\$ _____

<b>Dividend Income - From whom?</b>	Amount	<b>Social Security Income - provide Form SSA-1099</b>
_____	\$ _____	Self \$ _____
_____	\$ _____	Spouse \$ _____
_____	\$ _____	

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



**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
<b>RENTAL PROPERTIES - address</b>	_____	_____	_____
<b>Rental Income</b>	\$ _____	_____	_____
<b>Expenses:</b>			
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)		<b>Were Form 1099's issued to any subcontractors? Y/N</b>	

**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	\$ _____	\$ _____
<b>Costs of Good Sold (if applicable)</b>		
Purchases	\$ _____	\$ _____
<b>Expenses -</b>		
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/N**

Square footage of dedicated home office \_\_\_\_\_  
 Total square footage of home \_\_\_\_\_