

## **2025 INDIVIDUAL TAXPAYER ORGANIZER**

**\*\*\*MUST RETURN FOR TAX PREPARATION\*\*\***

Circle One: Drop-Off (no appointment) In-Person Appointment Requested Virtual Appointment Requested

**Taxpayer:** \_\_\_\_\_ Last 4 of SSN: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Taxpayer Phone #: \_\_\_\_\_ Taxpayer Email: \_\_\_\_\_

**Spouse:** \_\_\_\_\_ Last 4 of SSN: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Spouse Phone #: \_\_\_\_\_ Spouse Email: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Resident State: \_\_\_\_\_ Did you move during 2025? \_\_\_\_\_ Marital Status as of 12/31/2025: \_\_\_\_\_

Have you received any notices from the IRS or state department within the past year? (Y or N) \_\_\_\_\_

**DEPENDENTS** – This can include children and any person that you provide more than 50% of their financial support. **Please include proof of residency. If more than 4, please attach a separate list.**

Full Name	Social Security #	Date of Birth	New? (Y/N)

**INCOME TAX REFUNDS:** The IRS is phasing out the use of paper checks. We HIGHLY RECOMMEND electing for direct deposit for your refund.

If applicable, would you like your tax refund directly deposited into your bank account? (Y or N) \_\_\_\_\_

Bank Name: \_\_\_\_\_ Checking or Savings (C or S): \_\_\_\_\_

Routing Number: \_\_\_\_\_ Account Number: \_\_\_\_\_

**IMPORTANT QUESTIONS: Please answer with Yes or No. Additional docs may be required!**

- \_\_\_\_ Did you purchase an **energy efficient** vehicle or new energy-efficient improvements to your home? If yes, **include purchase and financing agreement.**
- \_\_\_\_ Do you own or have financial interest in a **foreign bank** or financial account?
- \_\_\_\_ At any time during the tax year, did you receive, sell, exchange, or otherwise acquire any financial interest in any **virtual currency** (Cryptocurrency, Bitcoin, etc.)? If yes, **attach Form 1099-DA.**
- \_\_\_\_ Did you have **health insurance** through the **Marketplace** (i.e. Healthcare.gov)? If yes, **attach Form 1095A.**
- \_\_\_\_ Were any children born or adopted in 2025? If yes, **include birth certificate and Social Security card.**
- \_\_\_\_ Were any children attending **college** in 2025? If yes, **include Form 1098-T.**
- \_\_\_\_ Did you pay for any **dependent care** so you could work or go to school? If yes, **include daycare report/s.**
- \_\_\_\_ Did you, or will you, contribute any money to an **IRA** for 2025? Traditional or Roth (T or R) \_\_\_\_\_
- \_\_\_\_ Did you make any **charitable contributions** in 2025? If yes, **include totals.**
- \_\_\_\_ Did you receive **tips** or **overtime** in 2025? If yes, **include your final paystub/s.**
- \_\_\_\_ Did you purchase a new personal vehicle in 2025? If yes, **include purchase and financing agreement.**

***Continued on next page...***

\_\_\_\_ Did you receive income through **gig work**, such as Uber, Instacart, or DoorDash, in 2025? If yes, **please provide year-end summary of income and expenses.**

---

**Other Information:**

Amount of Educator Expenses (for qualifying educators only): \$\_\_\_\_\_

SEP, SIMPLE or other Retirement Contributions: \$\_\_\_\_\_

---

**ESTIMATED PAYMENTS: This is extremely important that you provide us with the date and amount of any estimated income tax payments made to the IRS. Please add any additional payments to the comment section at the end of this organizer.**

IRS Payment Date	Amount	Method (Check/Online)	Confirmation #

---

**By signing below you acknowledge that you have provided accurate and true answers to the questions in this organizer. If filing jointly, both spouses need to sign this organizer for it to be complete.**

Taxpayer: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Spouse: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**ANY OTHER IMPORTANT INFORMATION (list below or attach):**