2025 Individual Tax Organizer

Personal Information

Taxpayer

First name	M.I.	Last name	Suffix	Date of birth	SSN or ITIN

Occupation	Email	Phone number

ID type	ID number	Issuing state	Issue date	Expiration date

Street	City	State	ZIP Code

Spouse

First name	M.I.	Last name	Suffix	Date of birth	SSN or ITIN

Occupation	Email	Phone number

ID type	ID number	Issuing state	Issue date	Expiration date

Filing status: ☐ Single ☐ Married filing jointly ☐ Married filing separately ☐ Head of household ☐ Qualifying surviving spouse

Select all that apply to 2025	Taxpayer	Spouse
Legally blind	☐	☐
Permanently and totally disabled	☐	☐
Claimed as a dependent on another individual's tax return	☐	☐
Full-time student	☐	☐
Designate $3 to the Presidential Election Campaign Fund	☐	☐
Spouse is not filing a tax return (MFS)		☐
Spouse had no income (MFS)		☐

Dependent Information

Name (first and last)	**Relationship**	**Date of birth**	**SSN or ITIN**	**Months in home**	**Received income**	**Disabled**	**Full time student**	**Childcare expenses**
					☐	☐	☐	
					☐	☐	☐	
					☐	☐	☐	

Refund preference

☐ Direct deposit ☐ Paper check

☐ Apply to 2026 estimated taxes

Balance due preference

☐ Bank draft ☐ Credit card

☐ Mail a check ☐ Payment plan

Banking information

Financial institution _____

Account holder _____

Routing number _____

Account number _____

Type of account ☐ Checking ☐ Savings

Personal or business ☐ Personal ☐ Business

Select if applicable to account: ☐ IRA ☐ Non-U.S.

2025 Life Events

☐ **None apply**

- ☐ Changed marital status
- ☐ Taxpayer, spouse, or a dependent changed their name with the SSA
- ☐ Received notice or letter from the IRS or a state revenue agency
- ☐ First time filing a tax return
- ☐ Taxpayer, spouse, or a dependent passed away during the year
- ☐ Taxpayer, spouse, or a dependent received an identity protection PIN (IP PIN) from the IRS
- ☐ Had a baby or adopted a child
- ☐ Member of the Armed Forces
  Duty type _____
- ☐ Changed address during the year

2025 Financial Events

☐ **None apply**

- ☐ Bought, sold, or refinanced a home or rental property
- ☐ Incurred property damage or theft caused by a federally declared disaster
- ☐ Converted or rolled over any retirement accounts
- ☐ Received, sold, exchanged, gifted or otherwise disposed of a digital asset
- ☐ Had a financial interest in or signature authority over a foreign account or trust
  - ☐ *Combined value of foreign account(s) exceed $10,000*
- ☐ Gifted more than $19,000 total to one or more individual(s)
- ☐ Purchased health insurance through the Marketplace or a public exchange
- ☐ Had health insurance coverage for the entire year (CA, DC, MA, NJ, and RI only)

2025 Income Sources

	Number of forms		Number of forms
☐ Employment (W-2)	_____	☐ Rent (1099-MISC)	_____
☐ Retirement distribution (1099-R)	_____	☐ Royalties (1099-MISC)	_____
☐ Social Security (SSA-1099)	_____	☐ ESA or 529 distribution (1099-Q)	_____
☐ Self-employment (1099-NEC or 1099-K)	_____	☐ HSA or MSA distribution (1099-SA)	_____
☐ State or local tax refund (1099-G)	_____	☐ Partnership (Schedule K-1)	_____
☐ Unemployment compensation (1099-G)	_____	☐ S-corporation (Schedule K-1)	_____
☐ Interest (1099-INT)	_____	☐ Estate or trust (Schedule K-1)	_____
☐ Dividends (1099-DIV)	_____	☐ Gambling (W-2G)	_____
☐ Sold stocks or investments (1099-B)	_____	☐ Farming	_____
☐ Canceled debt (1099-C)	_____	☐ Other income not listed above	_____

2025 Adjustments and Credits

☐ **None apply**

- ☐ Higher education expenses
- ☐ Child or dependent care expenses
- ☐ HSA contributions
- ☐ IRA contributions
- ☐ Student loan interest
- ☐ Plug-in electric vehicle purchase
  Date acquired _____
  Vehicle year, make, and model _____
- ☐ Adoption expenses — Amount $ _____
- ☐ Alimony paid — $ _____
  Date of divorce or separation _____
  Recipient's SSN _____
- ☐ Educator expenses — $ _____
- ☐ Household employee expenses — $ _____
- ☐ Energy-efficient home improvements — $ _____
- ☐ Armed Forces moving expenses — $ _____

Deductions

Medical and dental	
Medical and dental expenses	$

Casualty and theft	
Casualty and theft losses	$
☐ *Check if caused by federally declared disaster*	

Taxes paid	
State and local income taxes	$
Sales taxes	$
Real estate taxes	$
Personal property taxes	$

Gambling	
Gambling losses	$

Interest paid	
Mortgage interest	$
Vehicle loan interest	$

Other miscellaneous deductions	
	$
	$
	$
	$
	$
	$

Charitable contributions	
Donations to charity (cash)	$
Donations to charity (non-cash)	$

Estimated Taxes

Overpayments and estimated tax payments				
	Federal		State:	
Description	Date	Amount	Date	Amount
2024 overpayment applied to 2025				
First quarterly payment				
Second quarterly payment				
Third quarterly payment				
Fourth quarterly payment				
Additional payment(s)				