

# McCoy Tax & Accounting, LLC

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**Please note:**

- If we have not received all necessary information from you by April 1<sup>st</sup>, we cannot guarantee your tax return will be completed and filed by the IRS filing deadline. If necessary, we will file an extension on your behalf. Be aware that this is an extension of time to file, not a payment extension. Any tax balance due would need to be paid with the extension in order to avoid potential late payment penalties. We assume no liability for late filing or late payment penalties that are beyond our control.

## INDIVIDUAL INCOME TAX INFORMATION FOR 2025

### **TAXPAYER**

Name \_\_\_\_\_ Soc. Sec. No. \_\_\_\_\_ Birth Date \_\_\_\_\_

### **SPOUSE**

Name \_\_\_\_\_ Soc. Sec. No. \_\_\_\_\_ Birth Date \_\_\_\_\_

Address \_\_\_\_\_ Phone #1 \_\_\_\_\_

Occupation: Taxpayer \_\_\_\_\_ Spouse \_\_\_\_\_ Phone #2 \_\_\_\_\_

County of Residence on Jan. 1, 2025 \_\_\_\_\_ Email (print clearly) \_\_\_\_\_

### **DEPENDENTS \***

Name (First, Middle Initial, Last)	College Student	Birth Date	Soc. Sec. No.	Relationship	Months in your home in 2025

\*Please be sure that this is "your year" to claim a dependent whose exemption alternates between different taxpayers.

\*IRS Form 8332, signed by the custodial parent, is required in order for a non-custodial parent to claim a child as a dependent.

### **SOURCES OF INCOME**

#### **Salaries & Wages** (attach W-2s)

\_\_\_\_\_ \$ \_\_\_\_\_  
\_\_\_\_\_ \$ \_\_\_\_\_  
\_\_\_\_\_ \$ \_\_\_\_\_  
\_\_\_\_\_ \$ \_\_\_\_\_

#### **Interest & Dividends** (attach 1099s)

\_\_\_\_\_ \$ \_\_\_\_\_  
\_\_\_\_\_ \$ \_\_\_\_\_  
\_\_\_\_\_ \$ \_\_\_\_\_  
\_\_\_\_\_ \$ \_\_\_\_\_

Overtime and tip income may be deductible. Detailed information regarding overtime/tips must be reported by your employer on form W-2 or a separate statement.

#### **Other Income** (attach forms)

(Social Security, Pension, Unemployment, Gambling, Canceled Debt)

\_\_\_\_\_ \$ \_\_\_\_\_  
\_\_\_\_\_ \$ \_\_\_\_\_  
\_\_\_\_\_ \$ \_\_\_\_\_  
\_\_\_\_\_ \$ \_\_\_\_\_

#### **For Schedule C Self Employment income,**

**Schedule E Rental income, and**

**Schedule F Farm income, please include**

**necessary records of income and expenses.**

(Organizers specific to these activities are available online as a printable pdf at [www.mccoytax.com](http://www.mccoytax.com))

- Please let us know if some or all of a Required Minimum Distribution (RMD) amount is a Qualified Charitable Distribution (QCD)

#### **Capital Gain/Loss from sale of stocks or other assets**

Please attach Form 1099-B, brokerage statements, and any other relevant documents showing sale price and basis information. We MUST have basis information to accurately calculate reportable gain or loss.

**ADJUSTMENTS TO INCOME**

Educator Expenses \$ \_\_\_\_\_  
 Student Loan Interest Paid \$ \_\_\_\_\_  
 HSA Contributions (not through payroll) \$ \_\_\_\_\_  
 Type of HSA: Individual \_\_\_\_\_ Family \_\_\_\_\_  
 HSA Distributions \$ \_\_\_\_\_  
 Indiana Private/Homeschool # of children K-12 \_\_\_\_\_  
 Vehicle loan interest paid (restrictions apply) \$ \_\_\_\_\_  
 Purchase Date \_\_\_\_\_ VIN \_\_\_\_\_

IRA Contributions:  
 Traditional - Taxpayer \$ \_\_\_\_\_  
 - Spouse \$ \_\_\_\_\_  
 Roth - Taxpayer \$ \_\_\_\_\_  
 - Spouse \$ \_\_\_\_\_  
 Indiana 529 Plan: Contributions \$ \_\_\_\_\_  
 Acct. # \_\_\_\_\_

**2025 QUARTERLY ESTIMATED TAX PAYMENTS** (not W-2 withholdings)**Federal:**

Due Date	Date Paid	Amount Paid
April 15, 2025 (1 <sup>st</sup> Qtr)	_____	\$ _____
June 15, 2025 (2 <sup>nd</sup> Qtr)	_____	\$ _____
Sept. 15, 2025 (3 <sup>rd</sup> Qtr)	_____	\$ _____
Jan. 15, 2026 (4 <sup>th</sup> Qtr)	_____	\$ _____

**State:**

Date Paid	Amount Paid
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____

**SCHEDULE A - ITEMIZED DEDUCTIONS**

**Medical Expenses** (out-of-pocket) **Amount**  
 Drs., Hospitals, Prescriptions, etc. \$ \_\_\_\_\_  
 Medical Travel -- Miles \_\_\_\_\_  
 Health Insurance (not through employer) \$ \_\_\_\_\_  
 \* Including membership in a health sharing ministry  
 \* If health insurance was through the Healthcare.gov Marketplace, you must include Form 1095-A  
 Long-term Care Insurance \$ \_\_\_\_\_

**Taxes Paid**  
 Real Estate Tax – Personal Residence \$ \_\_\_\_\_  
 Real Estate Tax – Other Property \$ \_\_\_\_\_  
 Vehicle – County Wheel/Excise Tax \$ \_\_\_\_\_

**Interest Paid** (attach 1098) **Amount**  
 Mortgage Interest Paid – Residence \$ \_\_\_\_\_  
 Investment Interest Paid \$ \_\_\_\_\_

**Contributions** (attach receipt or statement)

_____	\$ _____
_____	\$ _____
_____	\$ _____
Contributions to an Indiana College/Univ.	\$ _____

**CHILD CARE EXPENSE**

Number of Children Under 13 \_\_\_\_\_  
 Total Childcare Paid in 2025 \$ \_\_\_\_\_  
 Provider Name \_\_\_\_\_  
 Provider Address \_\_\_\_\_  
 Provider ID Number \_\_\_\_\_

**COLLEGE TUITION & EXPENSES**

(attach Form 1098-T and Tuition Statement)  
 If a taxpayer or dependent attended college in 2025 we will need information indicating amounts paid for tuition and qualified expenses paid in 2025 in order to determine available tax credits. Form 1098-T alone may not be sufficient.

**RENT PAID - PERSONAL RESIDENCE**

Indiana Property Location \_\_\_\_\_  
 Landlord's Name & Address \_\_\_\_\_  
 Number of Months Rented in 2025 \_\_\_\_\_ Total Rent Paid in 2025 \$ \_\_\_\_\_

**COMPLIANCE**

The IRS requires all filers to answer the following question: "At any time during 2025 did you receive, sell, exchange, or otherwise dispose any financial interest in any virtual currency? (Bitcoin for example) Yes \_\_\_\_\_ No \_\_\_\_\_  
 If you answer Yes, we will need additional information.

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Contribution to Presidential Election Fund? Taxpayer \_\_\_\_\_ Spouse \_\_\_\_\_ or Indiana Endangered Wildlife Fund? Amount \$ \_\_\_\_\_

If you would like your refund to be direct deposited, please include the necessary information below or attach a voided check.

Bank Name \_\_\_\_\_ 9-digit Routing Number \_\_\_\_\_  
 Type of Account: \_\_\_\_\_ Checking \_\_\_\_\_ Savings \_\_\_\_\_ Account Number \_\_\_\_\_  
 If we prepared your return last year and you would like to use the same direct deposit account, check here \_\_\_\_\_

- Please note that our office will be closed for lunch from 12:30 to 1:30 during tax season. A drop box is available outside our door.
- Please drop off or mail tax forms and information to our office in advance. We will call or email with questions and offer review appointments as needed before finalizing the tax return.