



TAX RETURN ORGANIZER

Getting Started

Welcome to the Diamond Financial Tax Organizer. This organizer will assist you in gathering the information and documentation necessary for the preparation of your federal and state returns. This organizer is a fillable and printable PDF. **New Clients** please complete all sections that apply to you. **Current clients** please complete the sections that have changed from the previous tax year. For faster refunds, call as soon as possible to schedule your appointment. If you cannot meet in person, we can correspond by E-mail, fax, telephone, or by regular mail.

Thank You for the opportunity to prepare you tax returns.

Client Instructions to Complete Tax Return

Please do not send original documents. If mailing, send copies only. Keep all originals for your record keeping.

General Instructions:

1. Only complete the tax organizer sections that apply to your tax situation. Bring the completed organizer and your documents to your tax appointment. If mailing information, send copies only. **New Clients:** Include copy of last year's Federal & State Tax Returns.
2. You may make payment with credit card, check, and cash, or by PayPal by going to www.diamondfinancial.com
3. Diamond Financial will contact you to resolve any questions and discuss possible deductions and tax strategies. We will contact you by telephone when complete.
4. Diamond Financial will E-File your completed tax return after review and your approval with E-file authorization.
5. Fax, mail or E-mail signed Form 8879 E-file Authorization to Diamond Financial so we may E-file your tax return.

Please Note:

1. Send **copies** of tax documents listed in the tax organizer, **no originals** please. Keep your receipts for your own records.
2. If you have a small business, please download and complete the worksheet from the small business link on the website. Send copies of all business related 1099 income statements designated as income for the business.
3. If you have rental real estate, please download and complete the worksheet from the rental real estate link on the website.
4. Send 1099 income statements and 1098 mortgage interest statements.

Tax Documents Required to Complete Accurate Return

All W-2's & 1099's from all Employer
1099-INT for Interest, 1099-DIV for Dividends
1099-B Proceeds from Broker and Barter Exchange Transactions for Stocks, ETF's, Mutual Funds, etc.
Tax Reporting Statements from Brokerage firms
1099-G from State Income Tax Refund and 1099-G for State Unemployment
1099-R from IRA, Pensions, and 401(k) distributions and rollovers, HSA's, MSA's
K-1 Statements from Rental Real Estate, Royalties, Partnerships, S-Corp's, C-Corp's
SSA 1099 and RRB 1099 from social security and railroad benefits
1099-MISC for other income
1098-E for Student Loan Interest and 1098-T for Tuition
1098 Mortgage Interest Statement for all Mortgages and Lines of Credit (HELOC)
1098-C for Contribution of motor vehicles
Closing Statement (HUD-1) if Purchased or Refinanced a Home
1099-C Cancellation of debt
Federal and State tax return from previous year (new clients only)

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Personal information (please print clearly)

		Taxpayer	Spouse	
Last Name (According to SS card)				
First Name & Middle Initial				
Social Security Number				
Date of Birth				
Occupation				
Cell Phone				
Home Phone				
E-Mail Address				
State of Residency on 12/31				
Home Address				
Address				Apt #
City		State		Zip

Federal Filing Status (Check Box of Filing Status. Diamond Financial can help you determine this.)

<input type="checkbox"/>	1. Single			
<input type="checkbox"/>	2. Married Filing Jointly			
<input type="checkbox"/>	3. Married Filing Separate	Spouse Name:	Spouse Social Sec #:	
If MFS, did you live apart from spouse last 6 months of tax year? Y N Did Spouse itemize deductions? Y N				
<input type="checkbox"/>	4. Head of Household If someone else is using the exemption for your custodial child please fill out below.			
Name:		Social Security#:		
Relationship:		Number months live with you:		
<input type="checkbox"/>	5. Qualifying Widow	Spouse Date of Death:		

Dependent Information (Name must appear as on social security card)

If your dependent is between 19 and 23, he or she must be a full-time student for at least 5 months during the year to be eligible to qualify as a dependent. If your dependent children did not live with you, you must provide 8832, Release of Claim.

First Name	Last Name	MI	SSN	Relationship	Date of Birth	Date of Death	#Mos at Home	Student	
								Y	N
								Y	N
								Y	N
								Y	N
								Y	N

Electronic Filing And Direct Deposit Information

Use direct deposit for refund?	Y	N		
Account Type?	Checking	Savings	Name of Bank:	
Routing Number:			Account Number:	

State Tax Information

To be completed by new tax clients, or for any changes for current clients. Please list below state(s) you resided in the tax year.

State	Still Resident		Date Moved In	Date Moved Out	County	School District
	Y	N				
	Y	N				



Important Questions

If any of the following items pertain to you or your spouse, check the appropriate box and provide additional information if necessary below.

YES	NO	
		Did your marital status change during the year?
		Did your address change during the year?
		Were you or could you have been claimed as a dependent on another person's tax return?
		Were there any changes in the number of dependents?
		Were any of your unmarried children who might be claimed as dependents age 19 or older on 12/31?
		Did you have any children under 19 or full time students under 24 on 12/31 with investment income (interest, dividends, capital gains, etc.)?
		Do taxpayer and/or spouse want \$3 to allocate to the Presidential Election Campaign Fund?
		Did you receive unreported tip income of \$20 or more in any month?
		Did you cash any series EE or I US Savings bonds issued after 1989 to pay for qualified higher education expenses for qualified higher education for yourself, spouse, or your dependents?
		Did you receive any disability income?
		Did you start a business or farm, purchase rental or royalty property, or acquire an interest in a partnership, S corporation, LLC, trust, or REMIC?
		Did you purchase or dispose of any business assets (furniture, equipment, vehicles, real estate, etc.) or convert any personal assets to business use?
		Did you buy or sell any stocks, mutual funds, ETF's, bonds or other investments?
		Did you sell or plan to sell any dividend generating stocks or mutual funds during the first 60 days of this current year?
		Did you make any qualified residential energy-efficient improvements or purchases to your main home?
		Did you purchase a new alternative motor vehicle (hybrid, advanced lean burn, fuel cell, and plug in)?
		Did you have any debts cancelled or forgiven?
		Does anyone owe you money, which has become uncollectible?
		Did you receive a distribution from a retirement plan (401k, IRA, SEP, SIMPLE, Qualified Plan, etc.)?
		Did you make a contribution to a retirement plan (401k, IRA, SEP, SIMPLE, Qualified Plan, etc.)?
		Did you transfer or rollover any amounts from one retirement plan to another retirement plan?
		Did you convert part or all of your Traditional, SEP, or SIMPLE IRA to a Roth IRA?
		Did you receive a distribution from an Education Savings Account or Qualified Tuition Program?
		Did you, your spouse or dependent incur any tuition expenses to attend college, university or vocational school?
		Did you incur a loss because of damaged or stolen property?
		Did you work out of town for part of the year?
		Did you use your car on the job other than commuting to and from home and work?
		Did you apply your refund from last year's taxes to this year's estimated income taxes?
		If you have a refund of taxes, do you want this applied to next year's estimated taxes?
		Do you expect your income this year to be different from last year?
		May the IRS discuss your tax return with Diamond Financial?
		Did you have an interest in or signature authority over a foreign financial account?
		Was your home rented out or used for business?
		Did you have a medical savings account (MSA, or HSA) that you made contributions too?
		Did you receive LTC insurance payments or receive any accelerated death benefits from a life insurance?
		Did you incur moving expenses due to change of employer and/or employment location?
		Did you engage the services of any household employees?
		Did you or spouse make any gifts to an individual?
		Were you or spouse beneficiary of COBRA premium assistance for any month during the tax year?
		Were you notified or audited by either the IRS or the state-taxing agent in the last two years?

Other Information You Believe We May Need

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Stocks & Bonds Sold

Required even if providing 1009-B Proceeds from Broker and Barter Exchange transactions and year-end broker statements. Must have purchase date, cost, sales date and sale proceeds for each sale.

Description & Quantity	Date Acquired	Date Sold	Sales Price Less Commissions		Cost/Purchase Price Plus Commissions	
			\$		\$	
			\$		\$	
			\$		\$	
			\$		\$	
			\$		\$	
			\$		\$	

Alimony Received

Taxpayer Amount \$		Spouse Amount \$	
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Educator Expenses

Unreimbursed amounts spent on books, supplies, and materials used in the classroom by a kindergarten to 12th grade teacher.

Taxpayer Amount \$		Spouse Amount \$	
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Moving Expenses (active duty member of military only)

Only job related moves are deductible. Meals are NOT deductible.

Old Home (city):	Old Work (city):	Transportation/Storage	\$
New Home (city):	New Work (city):	Fuel/Oil	\$
Miles from Old Home to Old Work:	Date Moved:	Lodging/Travel	\$
Miles from New Home to New Work:	Miles from Old Home to New Work:	Parking Fees/Tolls	\$

Self-Employed Contributions to SEP, SIMPLE, and Qualified Plans

Type of Plan	Taxpayer Amount	Spouse Amount
Money Purchase Plan	\$	\$
Profit Sharing Plan	\$	\$
Defined Benefit Plan	\$	\$
SEP Plan	\$	\$
SIMPLE Plan	\$	\$
Individual 401(k) Plan	\$	\$
Roth 401(k) Plan	\$	\$

Alimony Paid (eliminated for divorce or separation after 12/31/18)

Recipient Social Security Number:	Amount Paid \$
Recipient Social Security Number:	Amount Paid \$

Traditional and Roth IRA Contributions

	Taxpayer	Spouse
Traditional IRA Contribution Amount Made this tax year	\$	\$
Roth IRA Contribution Amount Made this tax year	\$	\$

Education Savings Contributions (List contributions made for each student.)

Student Name	Coverdale (ESA)	529 Savings Plan	Pre-Paid College Tuition
	\$	\$	\$
	\$	\$	\$
	\$	\$	\$

Student Loan Interest Deduction

Not required if providing 1098-E. If additional expense list total below.

Student loan interest paid during tax year. Provide Form 1098-E.	Taxpayer/Spouse	Dependents
	\$	\$
	\$	\$



Educational Deduction and Credit Information

Please provide a copy of 1098-T for each student and complete form below.

Name of Student	Student 1	Student 2
What amount in Box 2 (if Box 1 is blank), Form 1098-T, was actually paid by you, student loans or by your dependent?	\$	\$
Amounts paid for Books and required Supplies?	\$	\$
529 Plan amount withdrawn (if applicable)	\$	\$
Year of College/Was student at least halftime?	Year Y N	Year Y N

Medical Expenses

Do not include amounts paid by insurance, pre-tax payroll deductions, or from Flexible Spending Accounts.

Prescriptions	\$	Medical Equipment and Supplies	\$
Health Insurance Premiums-After Tax	\$	Medical Travel Miles during tax year	miles
Physician/Dentist/Chiropractor	\$	Medical Lodging	\$
Hospital and Clinics	\$	Lasik and Radial Keratotomy	\$
Lab and X-ray	\$	Other-Including COBRA or Specify:	\$
Long Term Care Insurance	\$	Other:	\$
Eyeglasses and Contacts	\$	Other:	\$

Taxes Paid (Illinois homeowners must include parcel index number (PIN) for each Illinois property.)

Real Estate taxes on Principal Residence	\$	Vehicle Excise/Advalorem Tax (except IL)	\$
Real Estate taxes on Second Home or Land	\$	Personal Property Tax (except IL)	\$
Real Estate taxes on Vacation Home	\$	Sales tax on Motor Vehicle or Boat	\$
Illinois PIN:		Additional PIN	

Charitable Contributions

You need to have an acknowledgement if any single cash contribution is over \$250. If you donated any household goods, please estimate the value and include the name and any address of the charitable organization. Vehicle donations over \$500, send 1098C.

CASH	Donee Name:		\$	Donee Name:		\$
	Donee Name:		\$	Donee Name:		\$
	Donee Name:		\$	Donee Name:		\$
	Donee Name:		\$	Donee Name:		\$
	Donee Name:		\$	Donee Name:		\$
	Donee Name:		\$	Donee Name:		\$
VEHICLE	Donated To:				If Fair Market Value greater than \$500, provide the following:	
	Make, Model, Year			Date Acquired		Original Cost \$
	Condition, Mileage	miles		How was vehicle acquired?		
	Date of Vehicle Donation				Fair Market Value on Date of Contribution \$	
NON-CASH ITEMS *(only need if FMV greater than \$500)	Name of Charity					
	Address of Charity					
	City, State, Zip					
	Donation Description					
	Date of Donation					
	Fair Market Value	\$		\$		\$
	*How Acquired					
	*Donor's Cost	\$		\$		\$



Casualty/Theft & Loss (only federal declared disasters)

Description of Casualty Event	Date of Event	Description of Property	Date Acquired	Value Before Event	Value After Event	Insurance Reimbursement

Miscellaneous Expenses

Investment Expenses	\$ _____	IRC Section 691(c) Estate Tax Deduction	\$ _____
Margin or Investment Interest Paid	\$ _____	Losses from Ponzi-type Investment Schemes	\$ _____
Gambling Losses	\$ _____	Amortizable Premium on Taxable Bonds	\$ _____
Hobby Cost Of Goods Sold Expenses	\$ _____	Unrecovered Investment in Annuity	\$ _____

Job Expenses (NO LONGER DEDUCTIBLE UNTIL 2025 EXCEPT FOR AL, AR, CA, HI, IA, MN, NY)

Non-reimbursed employee related business expenses enter below. Go to www.diamondfinancial.com for professional deduction forms.

Vehicle Expense

Year, Make and Model Vehicle			Do you have evidence to support the deduction?	Y	N
Date First Used for Business			Is this evidence written?	Y	N
Type of Vehicle: Car/Van/Truck			Is another vehicle available for person use?	Y	N
Total Mileage Driven		miles	Was this vehicle available for personal use during off duty hours?	Y	N
Business Mileage Driven		miles	Was this vehicle leased?	Y	N
Actual Expenses: Gas, Oil, Repairs, Insurance, etc.	\$ _____		Was this vehicle used for hire?	Y	N

Home Office -To be deductible, must have been required by employer. Airline personnel are not qualified.

Area Used for Business (Square Feet)	Sq/ft	Real Estate Taxes	\$ _____
Total Square Footage of Home	Sq/ft	Insurance-Homeowner/Renters	\$ _____
Number of Days in Year Office was in Home	\$ _____	Repairs and Maintenance	\$ _____
Date Home Office Established	\$ _____	Utilities (water, gas, electric, garbage, etc.)	\$ _____
Fair Market Value of Home when Office began	\$ _____	Rent expense if renting	\$ _____
Original Cost of Home	\$ _____	Association dues	\$ _____
Land Value on Property Tax Statement	\$ _____	Other, Specify:	\$ _____
Building Value on Property Tax Statement	\$ _____	Other, Specify:	\$ _____
Mortgage Interest	\$ _____	Other, Specify:	\$ _____

-If purchased assets for home office, please provide information below. -

Office Supplies	\$ _____	Filing Cabinets Date of Purchase	\$ _____
Furniture Date of Purchase	\$ _____	Calculator Date of Purchase	\$ _____
Computer Date of Purchase	\$ _____	Other: _____ Date of Purchase	\$ _____
Printer Date of Purchase	\$ _____	Other: _____ Date of Purchase	\$ _____

What are adequate records according to the IRS Publication 463 Travel, Entertain, Gift and Car Expenses?

You should keep the proof you need in an account book, diary statement of expense, or similar record. You should also keep documentary evidence that, together with your record, will support each element of an expense. You generally must have documentary evidence, such as receipts, cancelled checks, or bills, credit card statements, or bank statements to support your expenses. Documentary evidence is not needed if your travel expense other than lodging is less than \$75 or you have a transportation expense for which a receipt is not readily available. Documentary evidence ordinarily will be considered adequate if it shows the amount, date, place, and essential character of the expense. You must generally provide a written statement of the business purpose of an expense. However, the degree of proof varies according to the circumstances in each case. If the business purpose of an expense is clear from the surrounding circumstances, then you do not need to give a written explanation. If you do not have complete records to prove an element of an expense, then you must prove the element your own written or oral statements containing specific information about the element, and other supporting evidence that is sufficient to establish the element.

If the element is the description of a gift, or the cost, time, place, or date of and expense, the supporting evidence must be either direct evidence or documentary evidence. Direct evidence can be written statements, or oral testimony of your guests or other witness setting forth the detailed information about the element. Documentary evidence can be receipts, paid bills, or similar evidence. Airline crew under an accountable plan (United, American, etc.) supply year-end city travel summary from employer.



Child Care Expenses Credit

Qualifying expense for care that allows you to work or look for work. Deduction only allowed for children under age 13.

NOTE: Care Provider's Social Security Number or ID Number is required to receive credit!

Care Provider's Name	Provider's Address	Provider's Tax ID	Child's Name	Amount
				\$
				\$
				\$
				\$

Other Tax Credits

Do you have a Qualified Mortgage Interest Credit Certificate issued by federal or state government?

Y N

Did you adopt a child this year?

Y N

Additional Tax Payments Made to Federal or State

Quarterly Tax Payments	Date Payment Made	Federal Amount	State Amount	Local Amount
First Quarter due 4/15/xx		\$	\$	\$
Second Quarter due 6/15/xx		\$	\$	\$
Third Quarter due 9/15/xx		\$	\$	\$
Fourth Quarter due 1/15/xx		\$	\$	\$

Taxes Paid with Extensions to Federal or State

Federal Amount \$ State of: \$ State of: \$

State Tax Renter's Credit

If you paid rent in CA, IN, MA, MI, MN, NJ, WI or any other state with a renter's credit, please complete the following section. Minnesota residents provide a copy of your Certificate of rent Paid (CRP).

Landlord's Name					
Landlord's Address					
Apartment Address					
Monthly Rent	\$	Total Rent Paid	\$	Dates Rented	