



11610 Andrew Street
Brainerd, MN 56401
(Business Hwy 371 S)

Phone - (218) 829-3501 - Brainerd
(218) 963-3424 - Nisswa

See page 4 for required documentation

I (We) assure you that the information provided in this form, along with any other information sheets provided for preparation of my (our) income tax returns is correct to the best of my (our) knowledge and belief. I (We) understand that payment for your services is due upon receipt of my (our) tax returns.

_____ Signature	_____ Signature	_____ Date
<u>Taxpayer(s)</u>	<u>Social Security #</u>	<u>Occupation</u>
<u>Date of Birth</u>		
Name(s) _____	- -	_____
_____	- -	_____
Address _____	_____	_____
Street	City	State
		Zip
If you have any refunds and you would like them to be directly deposited to your account, please provide :	Home Phone _____	
	Work Phone _____	
	Cell Phone _____	
_____ Voided check (for checking account)	Cell Phone _____	
_____ Deposit Slip (for savings account)	Fax _____	
_____ Same as your 2014 tax return	E-Mail _____	

Did you or do you plan to make IRA contributions for this year? Yes___ No___

Contributor	Type of Account (Traditional, Roth, Educ.)	Dates	Amounts	Yes___ No___
_____	_____	_____	_____	
_____	_____	_____	_____	

Did you and all members of your family have health insurance for the entire year? Yes___ No___

Did you have an interest in or a signature authority over a financial account in a foreign country? Yes___ No___

If Yes : Name of country _____

Did you pay \$1,900 or more to any one household employee this year? Yes___ No___

Do you want to designate \$3 to the federal presidential election campaign fund? Yes___ No___

Do you want to designate \$5 to the state elections campaign fund? Yes___ No___

Your choice(s) of political party? _____

Did you have a theft or casualty loss over 10% of your gross income after insurance proceeds? Yes___ No___

If yes, please explain : _____

Did you make gifts of more than \$14,000 to any one individual during the year? Yes___ No___

If yes, please explain : _____

Did you receive correspondence from the State or the IRS during the year? Yes___ No___

If yes, please explain : _____

If you want to donate to the Minnesota Nongame Wildlife fund, fill in the amount

Income Tax Return	\$ _____
Property Tax Return	\$ _____

Do you foresee any significant changes to your financial situation that will affect your tax liability for 2016? If so, please explain briefly : _____

Property Tax Refund: If you want us to prepare your Minnesota renter or homeowner property tax refund return form M-1PR, you need to provide us with your 2015 Certificate of Rent Paid or your 2016 Statement of Property Taxes Due. There is an additional fee for this service.

We will notify you by mail when your tax returns are completed. Please let us know if your mailing address is different from the address above. _____

Wage and Salary Income

(Attach all W-2s Received)

Employer	Gross Wages (Box 1)	Federal Tax	State Tax
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Retirement Income

(Attach all 1099s Received)

Payor	Gross Distribution	Taxable Distribution	Federal Tax	State Tax
Social Security	_____	_____	_____	_____
Social Security	_____	_____	_____	_____
Railroad Retirement	_____	_____	_____	_____
IRA's.....	_____	_____	_____	_____
Pensions.....	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Interest Income

(Attach All 1099 Forms Received including All Tax-Exempt Interest Received)

(If Interest is Received on a Contract For Deed, The Payor's Name, Address and Social Security # are Required)

Payor	Amount	Payor	Amount
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Dividend Income

(Attach All 1099 Forms Received including All Tax-Exempt Dividends)

Payor	Dividends	Qualified Dividends	Capital Gains	Tax Exempt	Foreign Tax
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

Miscellaneous Income

(Attach relevant forms)

Unemployment Compensation.....	_____	Estates or Trusts.....	_____
Alimony.....	_____	Royalties.....	_____
VA Pension.....	_____	Welfare Assistance.....	_____
VA Disability.....	_____	Partnership or S-Corp (provide K-1).....	_____
Tips and Gratuities.....	_____	Lawsuit Recoveries.....	_____
Directors Fees.....	_____	Cancellation of debt.....	_____
Prizes and Awards.....	_____	Other (Describe) :	_____
Worker's Compensation.....	_____	_____	_____

Security and Real Estate Sales

Foreclosures, abandonments, Ponzi scheme losses and other property transactions need to be listed here.

Description	Date Bought	Date Sold	Sales Price	Cost	Expenses
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

Medical and Dental Expenses

Medical Insurance.....	_____	Ambulance.....	_____
Medicare Insurance.....	_____	Medical Transportation:	
Long Term Care Insurance.....	_____	Mileage _____miles @ \$.23	
Taxpayer	_____		
Spouse	_____		
Name of Company _____			
Policy # (s): _____		Parking, Bus, Taxi.....	_____
Prescription Drugs.....	_____	Motels.....	_____
Glasses and Contacts.....	_____	Other Expenses (Describe) :	_____
Hearing Aids.....	_____		
Doctors, Dentists, Hospitals and Clinics :	_____		
_____	_____	Less HSA Reimbursements	_____
_____	_____	included above.....	(_____)
_____	_____	Less Insurance Reimbursements	_____
_____	_____	included above.....	(_____)
HSA Contributions.....	_____		

Interest Paid

Deductible Home Mortgage:	Financial Institution	Amount Paid
Interest Paid to Banks and Other Financial Institutions :		
List All Mortgages and Equity Loans	_____	_____
(Attach all Forms 1098 received)	_____	_____
Deductible Mortgage Insurance:		
(only applies to new mortgages)	_____	_____
Points paid on purchase or refinance of mortgage loans :		
(Include copy of settlement statement)	_____	_____
Interest Paid to Individuals on a Contract For Deed : (Payee's Name, Address		
and Social Security Number must be included; failure to provide is subject to a fine)		
Name.....	_____	_____
Address.....	_____	_____
Social Security Number.....	_____	_____
Investment Interest :	Interest Paid to	Amount Paid
Investment Loan Relates to :		
Brokerage Margin Account:	_____	_____
Other (Describe)	_____	_____
_____	_____	_____
Student Loan Interest :		
Student's Name.....	_____	_____
Interest Paid (Attach Forms 1098-E).....	_____	_____

Contributions

Only amounts given to qualified charitable organizations qualify. Examples of NON-DEDUCTIBLE amounts are to Political Organizations and Candidates, Dues and Fees paid to lodges and fraternal orders, Raffles, Bingo, and Pull Tabs.

Please list all of your qualified charitable gifts here as you may receive a deduction on your State return even if you do not itemize deductions on your Federal return.

Cash Contributions :

Religious Organizations.....	_____
Schools.....	_____
United Way.....	_____
Boy Scouts / Girl Scouts.....	_____
Other (Please list) :	_____
_____	_____
_____	_____
_____	_____
_____	_____
Volunteer Mileage : _____miles @ .14	_____

Non-Cash Contributions:

- 1) Complete the worksheet included with your organizer.
- 2) You must have a receipt stating the amount received by the organization from the sale of a donated vehicle, boat, etc.

If TOTAL Non-Cash Contributions are:

Less than \$250: Receipt not required if impractical.

Document donations with written description.

More than \$250: Receipts required.

The IRS requires proof for ALL cash contributions to qualified charitable organizations.
(receipt, cancelled check, bank statement, credit card statement, etc.)

Taxes Paid

Auto Licenses : List separately

(Describe) : _____

Real Estate Taxes :

Home..... _____
M-1PR Refund Received..... () _____
Second home/Cabin..... _____
Land..... _____

Sales Tax - on these major purchases: vehicle, boat, home building materials, etc.

Income Taxes :

Prior Years Refunds Received..... _____
Prior Years Additional Payments..... _____
Estimated Tax Payments:
Prior Year 4th Installment Due January 15, 2015..... _____
1st Installment Due April 15, 2015..... _____
2nd Installment Due June 15, 2015..... _____
3rd Installment Due Sept 15, 2015..... _____
4th Installment Due Jan 15, 2016..... _____

Date Paid	Federal	State
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Other Deductions

Alimony Paid..... _____
Name and Social Security # of Recipient _____

Work or Job Related Expenses :
Union and Professional Dues..... _____
Work Supplies..... _____
Tools and Safety Equipment..... _____
Required Uniforms and Laundry..... _____
Trade Journals and Subscriptions..... _____
Other (Describe) _____

Tax Preparation Fee..... _____
Safe Deposit Box..... _____
Investment Fees and Expenses..... _____
IRA Maintenance Fees..... _____
Adoption Expenses..... _____
Explain _____
Moving Expenses (over 50 miles)..... _____
Explain _____
Mileage: _____ miles @ \$.23 _____

Your Continuing Education :
(Enter information for your dependents education on the dependent questionnaire)
Tuition and Fees..... _____
Books and Supplies..... _____
Travel or Miles @ \$.575 _____

Job Hunting Expenses..... _____
Other Items (Describe) : _____

If you have expenses for business, work, or farm use of your personal automobile, fill in the required information on the separate information questionnaires.

Please bring the following documents with your information:

- W-2 Forms for wages and gambling winnings.
- 1099 Forms for Interest, Dividends, Stock Transactions, Real Estate Sales, and Miscellaneous Income.
- 1099 Forms for Pension and IRA Distributions.
- 1099 Forms for Unemployment Compensation received.
- K-1 Forms for Partnerships, S-Corporations, Estates and Trusts.
- 1098 Forms for Interest Paid on Mortgages.
- 1098-E Forms for Interest Paid on Student Loans.
- 1098-T Forms for Tuition payments.
- 1099-C Forms for Cancellation of Debt.
- SSA-1099 Forms for Social Security Benefits received.
- RRB-1099 Forms for Railroad Retirement Benefits received.
- 1095 Forms for Health Insurance.
- Real Estate Sales / Purchases Closing Statements.
- Contract For Deed - Name, Address, and Social Security Number Info
- Refinancing Loan Closing Statements.
- Any Tax Notices from the Internal Revenue Service or State Department of Revenue.

- Credits:**
- Mortgage Interest Credit:**
Mortgage Interest Certificate.
- Child & Dependent Care Credit:**
Qualifying expenses
- Education Credits:**
Forms 1098-T and cost of books.
- Solar, Wind & Geothermal Energy:**
Receipts for qualified property.
- Adoption Credit:**
Receipts for qualified expenses.
- Energy Credits:**
Receipts for energy efficient costs.

Payment for tax preparation is expected at the time your returns are filed. All unpaid balances are subject to a 1 1/2% per month (18% annual rate) service charge.