2015 Individual Taxpayer Organizer Sole Proprietorship

(See next page for Organizer)

CS Accounting

1231 Schofield Ave Schofield, WI 54476 (715) 848-0539



Name of Taxpayer				SS#				
First	<i>M.I.</i>	Last	Email	I				
Occupation		Date of birth		Are yo	u new to our	firm?	Yes	No
Address		City		State		Zip		
County		Home phone		Work o	or cell			
Name of Spouse				SS#				
First	<i>M.I.</i>	Last	Email	ľ				
Occupation		Date of birth	1	Are yo	u new to our	firm?	Yes	No
(Enter information below only if different fro	om Taxpayer)			I				
Address		City		State		Zip		
County		Home phone		Work o	or cell			
If you moved during 2015, enter your pr	evious address	5.		Date of	fmove			
Were you divorced or separated during Have you received any notice from the I Same-sex married couples are required to where the married couple lives. Same-see Names of dependent children Child's full name	RS or state revo o file as Marrie	enue department wit ed Filing Jointly or M ples may also want to	arried Filing Sepa file amended ret	? Yes No arately for fee	eral returns, r tax years.	regardle	Coll	lege lent?
Did any of the children have income abc Is it anticipated that a different taxpayer		2	2	of the childre ident for tax y		2	Yes Jo	No
Other dependents or people who lived	with you							
Name	Social Security	/#	Date of birth	Relationship	Income			
If you are due a refund, would you like	t directly depo	sited into your bank	account? Name of	f bank				
Checking Savings Routing transi	t number		Account r	number				
Ask your tax preparer for information al	out depositing	g a refund into an IRA	A account or split	ting the depo	sit into more	than on	e acco	unt.

0	uesti	ons	— All Taxp	avers	ora. Ask your tax preparer for informat			
			-		?" if unsure about a question.			
T	Yes	No	Are either you or y					
ŀ	Yes	No			in 2015? Paid/Received \$	Recipient's SS#		
ŀ	Yes	No			for you, your spouse, and all depe	,	e year?	
ŀ	Yes	No	-		nce through a public exchange?			
。	Yes	No			inges in income or deductions ne	xt year, such as retire	ment?	
IAXE	Yes	No		-	mum tax (AMT) in previous years			
A LE &	Yes	No	Did you pay anyor	ne for domest	tic services in your home?			
LIFESTYLE & IAKES	Yes	No	Did you purchase a	a new energy	r-efficient car, truck, or van?			
	Yes	No	Are you involved i	n bankruptcy	y, foreclosure, repossession, or had	d any debt (including	g credit cards) cancelled?
Ī	Yes	No	Are you a member	of the milita	ry?			
	Yes	No	Were you a citizen	of or live in a	a foreign country, or receive incon	ne from a foreign inv	estment or ba	ank account?
	Yes	No	Would you like to a Designee's name	allow your ta	x preparer or another person to d Phone number	liscuss your return w	ith the IRS? PIN (any fi	ve digits)
	Yes	No	Were any children	born or adop	oted in 2015?			
	Yes	No	Were any children	Year in	Paid by you: <i>Tuition</i> \$	Student loan int	erest \$	Books \$
			attending college?	college	Paid by student: <i>Tuition</i> \$	Student loan int	erest \$	Books \$
NOL			Other expenses (add	statement if n	eeded)			
CHILDREN & EDUCATION	Yes	No	Did you pay any tu	uition for a p	rivate school for a dependent or ta	ake classes yourself?		
V & FI			Student				Amount paid	d \$
			Name and address of	school				
E	Yes	No	Did you pay for ch	ild or depend	dent care so you could work or go	to school? (add state	ment if needed	()
			Name of provider				EIN or SS #	
			Address				Amount paid	d \$
	Yes	No	Do you have any c	hildren who	earned more than \$2,100 of invest	tment income?		
	Yes	No	Did you, or will yo	u, contribute	any money to an IRA for 2015?			
ENTS	Yes	No	Did you roll over a	ny amounts	from a retirement account in 2015	?		
INVESTM	Yes	No	Did you sell or trar	nsfer any stoo	ck or sell rental or investment pro	perty?		
N.	Yes	No	Did you have any i	investments l	become worthless or were you a v	victim of investment	theft in 2015?	,
	Yes	No	Were you granted,	or did you e	xercise, any employee stock optio	ns during 2015?		
IONS	Yes	No	Did you pay any ir	nterest on a lo	oan for a boat or RV that has living	g quarters? If yes, pro	ovide details.	
DEDUCTIONS	Yes	No	Did you pay sales t	taxes on a ma	ijor purchase in 2015, such as a ve	hicle, boat, or home?	?	
DE	Yes	No	Did you have any 1	uninsured los	ss to your property in 2015?			
ESS	Yes	No	Did you work from	n a home offi	ce or use your car for business?			
BUSINESS	Yes	No	-	•	m an installment sale?			
20	Yes	No	Do you own a busi	ness or an in	terest in a partnership, corporatio	n, LLC, farming acti	vities, or othe	er venture?
-	Yes	No			home during the year? If yes, pro	-		
E	Yes	No	-		m the First-Time Homebuyer Crea			provide details.
HOME	Yes	No	-		r take a home equity loan? (Provi	~		
	Yes	No	Did you use any m	ortgage loan	proceeds for purposes other than	n to buy, build, or sub	stantially im	prove your home?

States of residence during 2015 and dates

School district

Income Worksheet

Provide to your preparer all Forms W-2, 1099-INT, 1099-DIV, 1099-R, 1099-MISC, and other income reporting statements. Do not list dollar amounts for the following forms. Your preparer will report the appropriate amounts.

	e "T" for taxpayer, "S" for spouse, "J" for j	joint			Pro	wide additional statemen	its if m	ore room is needed
	W-2—Wage and Tax Statement			1	1			
T/S	Employer name			T/S	Employ	er name		
	1)				4)			
	2)				5)			
	3)				6)			
Forms	1099-INT—Interest Income							
T/S/J	Name of issuer			T/S/J	Name of	f issuer		
	1)				4)			
	2)				5)			
	3)				6)			
Forms	1099-DIV—Dividends and Distributions							
T/S	Name of issuer			T/S	Name of	f issuer		
	1)				4)			
	2)				5)			
	3)				6)			
Forms	1099-R—Distributions From Pensions, An	nnuities, Ret	irement	t or Profit	-Sharing l	Plans, IRAs, Insurance Co	ontraci	ts, Etc.
T/S	Name of issuer			T/S	Name of	f issuer		
	1)				4)			
	2)				5)			
	3)				6)			
If the d	istribution is before age 59½, give a reasor	n to determin	e if an e	exception	to penalty	y applies.		
Tax-Ex	empt Interest (such as municipal bonds—	-include state	ement)					
Payer		\$		Payer				\$
Other I	ncome	1						
State ta	x refund		\$			Unreported tips	\$	
Alimor	ly .		\$			Other	\$	
Unemp	loyment compensation		\$				\$	
Social S	Security (taxpayer)—provide SSA-1099 or	RRB-1099	\$				\$	
Social S	Security (spouse)—provide SSA-1099 or R	RB-1099	\$				\$	
Busines	ss income (see Sole Proprietorship Tax Organ	ıizer)				Stock sales	See "	Sales and Exchanges
	income (see Rental Property Tax Organizer)					Sale of other property		sheet" below.
Sale	s and Exchanges Works	heet						
	information about sales of stock real est				11 E	1000 D 1000 C 1		atter a statements

Provide information about sales of stock, real estate, or other property, along with Forms 1099-B, 1099-S, or other supporting statements.

Description of property	Purchase date	Cost/basis	Sell date	Sale price
		\$		\$
		\$		\$
		\$		\$

Notes:

• When stock is sold, you will usually receive Form 1099-B, *Proceeds From Broker and Barter Exchange Transactions*, reporting the proceeds from the sale. However, your statement will not always provide the cost/basis information necessary to compute gain or loss. If the statement does not contain the cost/basis information, you must provide it. You may need to contact your broker for questions about cost/basis and purchase dates of your stock accounts.

• Often, "transfers" of stock or mutual funds within a brokerage account are actually sales of one type of stock and purchase of another. Even if you did not receive any cash from the transaction, you may have taxable gain or loss.

• If your stock dividends are automatically reinvested, the dividends will be taxable even though you did not receive any cash. The transaction is treated as if you had received cash and purchased additional stock. When the stock is sold, the amount reinvested over the years is taken into account. You may need to contact your broker for questions about the amount of reinvested dividends.

• If you sold property other than stock, your taxable gain or loss will be determined by your cost/basis. The cost/basis is usually the original purchase price plus improvements (the cost of repairs and maintenance are not taken into account for cost/basis).

Itemized Deductions Worksheet

Deductions must exceed \$6,300 Single, \$12,600 MFJ, \$9,250 HOH, or \$6,300 MFS to be a tax benefit.

		d 10% (7.5% for taxpa –include cost for depe				\$500 in noncash cha htributions. New rule	
		eimbursed by insurar				for all cash contribut	
Dentists	\$	Hospitals	\$	Cash			\$
Doctors	\$	Insurance	\$	Noncash contributions (FMV). Clothing or household			
Equipment \$ Prescriptions \$			items must be in good used condition or better.			\$	
Eyeglasses \$ Other \$			Did you transfer fu charity? Yes	unds from an IRA No	directly to a	\$	
Medical miles	:	@ 23¢		Charitable mileage			φ
		s paid for full or partia isiness use of the hom		Casualty and The			
State withhold			Reported on W-2			cted damage or loss	
State estimate	d taxes—paid in 2	.015	\$	theft, provide deta		1	
Real estate tax	-residence		\$			ons. The following r e of home, or auto m	
Real estate tax	-other		\$			nation on a separate	
Personal prop	erty taxes		\$	Were any expenses reimbursed by your employer? Yes No			
Property tax r	efund—received i	n 2015	\$()	Dues	\$	Supplies	\$
Foreign tax pa	id		\$	Investment	\$	Tax prep fees	\$
Other			\$	expenses			<i>.</i>
Other			\$	Job education	\$	Tools	\$
		year returns (do not		Job seeking	\$	Uniforms	\$
include interes	st or penalties)		\$	Legal fees	\$	Union dues	\$
		ax paid during 2015?	Yes No	Licenses	\$	Other	\$
Sales tax paid		oat, or home in 2015? he vaid \$ Data	Yes No	Safety equipment	\$	Other	\$
		1		Subscriptions	\$	Other	\$
Interest Paid. Do not include interest paid for full or partial business or rental-use property, including business use of the home. Provide all Forms 1098 or lender information and ID numbers.			Other Miscellaneous Deductions. The following deductions are subject to a 2% of income limit.			uctions are not	
Main home	\$	Equity loan	\$	Gambling losses	\$	Federal estate tax on IRD	\$
Second home	\$	Equity loan	\$	Impairment-	\$	Loss from box 2,	\$
Points	\$	Investment interest	\$	related expenses	*	K-1, Form 1065B	Т.
Did you pay a	mortgage insuran	ce premium when you	u purchased your	nome? Amount \$	Date		

Other Deductions or Questions

Notes: • Gambling losses are deductible only up to the amount of gambling winnings reported. A log must be kept to verify losses.
• Work clothing is not deductible if adaptable for every day wear. Exception for safety equipment, such as steel-toe boots.

• Legal expenses are deductible only if related to producing or collecting taxable income.

• Expenses to enable individuals, who are physically or mentally impaired, to work are generally deductible.

Adjustments Worksheet \$ Educator expenses. Classroom expenses of teachers, counselors, and principals. Maximum \$250 each. Health savings account deduction (HSA). \$ \$ Self-employed SEP, SIMPLE, and qualified plans. Some contributions for 2015 may be made in 2016. Self-employed health insurance deduction. Sole proprietors, partners, and 2% S corporation shareholders if not eligible for \$ employer coverage. \$ Penalty on early withdrawal of savings. IRA deduction. For traditional IRAs. Roth IRAs are not deductible. Some contributions for 2015 may be made in 2016. \$ Student loan interest deduction. Paid for taxpayers and dependents. Income limits apply. \$ \$ Tuition and fees deduction. Qualified tuition and fees if not claiming education credits. Income limits apply. Moving expenses. Job-related move and at least 50 mile increase in commuting distance. Ask preparer Business expenses of reservists, performing artists, and fee-based government officials. Ask preparer

Estimated Tax Payments — Tax Year 2015

Lotiniateu Tax i ayinento					
Installment	Date paid	Federal	Date paid	State	
First		\$		\$	
Second		\$		\$	
Third		\$		\$	
Fourth		\$		\$	
Amount applied from 2014 refund?		\$		\$	
Total		\$		\$	
Duine and Dallian	·	· ·	•		

Privacy Policy

The nature of our work requires us to collect certain nonpublic information. We collect financial and personal information from applications, worksheets, reporting statements, and other forms, as well as interviews and conversations with our clients and affiliates. We may also review banking and credit card information about our clients in the performance of receipt of payment. Under our policy, all information we obtain about you will be provided by you or obtained with your permission.

Our firm has procedures and policies in place to protect your confidential information. We restrict access to your confidential information to those within our firm who need to know in order to provide you with services. We will not disclose your personal information to a third party without your permission, except where required by law. We maintain physical, electronic, and procedural safeguards in compliance with federal regulations that protect your personal information from unauthorized access.

Tax Preparation Checklist

Please provide the following documentation:

All Forms W-2 (wages), 1099-INT (interest), 1099-DIV (dividends), 1099-B (proceeds from broker or barter transactions), 1099-R (pensions and IRA distributions), Schedules K-1 from partnerships, S corporations, estates and trusts, and other income reporting statements, including all copies provided from the payer.

Form 1095-A (for health insurance purchased through a public exchange), Form 1095-B (for health insurance purchased outside of a public exchange), or Form 1095-C (for employer-provided health insurance coverage).

If you are a new client, provide copies of last year's tax returns.

The completed Individual Income Tax Organizer. *Note:* If you choose not to fill out the organizer, you must at least answer the "Yes" or "No" questions under "Questions—All Taxpayers."

Copy of the closing statement if you bought or sold real estate.

Mileage figures for any automobile expenses claimed, including total mileage, commuting mileage, and business mileage.

Detail of estimated tax payments made, if any.

Income and deductions categorized on a separate sheet for business or rental activities.

List of itemized deductions categorized on a separate sheet for medical, taxes, interest, charitable, and miscellaneous deductions.

Copy of all acknowledgement letters received from charitable organizations for contributions made in 2015.

Tax Return Preparation

We will prepare your tax return based on information you provide. In the event your return is audited, you will be responsible for verifying the items reported. It is important that you review the return carefully before signing to make sure the information is correct. Unless otherwise stated, the services for preparation of your return do not include auditing, review, or any other verification or assurance.

Contact Us

There are many events that occur during the year that can affect your tax situation. Preparation of your tax return involves summarizing transactions and events that occurred during the prior year. In most situations, treatment is firmly established at the time the transaction occurs. However, negative tax effects can be avoided by proper planning. Please contact us in advance if you have questions about the tax effects of a transaction or event, including the following:

- Pension or IRA distributions.
- Significant change in income or deductions.
- Job change.
- Marriage.
- Attainment of age 59½ or 70½.
- Sale or purchase of a business.
- Sale or purchase of a residence or other real estate.
- Retirement.
- Notice from IRS or other revenue department.
- Divorce or separation.

- Self-employment.
- Charitable contributions of property in excess of \$5,000.
- Gifts (over \$14,000 to an individual).

Sole Proprietorship Tax Organizer

EIN (if applicable)

Sole Proprietor General Information

Name of sole proprietor

Business name (if different)

Business address (if different from home address)

D: : 11	·			D		1
<u>^</u>	siness activity			Dat	te business starte	a
	oduct or service	1				
Yes No	1 /1 1		•			
Yes No		A				
Yes No		<u> </u>	ears?			
Accounting r		Other (specify)				
	Does the business file under a c	alendar year? (I	f no, what is the fiscal year?)			
•	etor Specific Questions					
Yes No						
Yes No	, , , , , , , , , , , , , , , , , , , ,					
Yes No	, ,	MISC? List nam	e and social security number (SSN		whom you paid \$	5600 or more.
	Name			SSN		
	Name			SSN		
Yes No	Did you make, or do you plan t	o make, any cor	ntributions to a self-employed r	retirement plan?		
	Type of plan			Amou	unt contributed	\$
Yes No	Did you pay for your own healt	h/dental insura	ance? If Yes, provide amount of pr	emiums paid during	g the year.	\$
Yes No	Did you have any employees?					
Yes No	Did you have any bartering tran	nsactions in 201	5?			
Sole Proprie	etor Business Income					
Gross receipt	ts or sales (<i>if you received Forms</i> 10)	99-MISC. list na	me of payer and amount separately	y from gross receipts	s or sales)	\$
Form 1099	10	\$	Form 1099-K)) 8	\$	1
Form 1099		\$	Form 1099-K		\$	
		,			T	\$
oral of all Fe	orms 1099-MISC and 1099-K recei	ved				
	orms 1099-MISC and 1099-K recei allowances	ved				
Returns and	allowances					\$ (\$
Returns and Other incom	allowances e (not included in gross receipts abou	ne)	of Form W-2) if you are not cla	assified as an empl	ovee. If you rece	\$ (\$
Returns and Other incom F orm 1099-M	allowances e (<i>not included in gross receipts abo</i> a /ISC. You may receive Form 1099	ve) -MISC (instead				\$ (\$ eive Form 10
Returns and Other income F orm 1099-M MISC, you an	allowances e (<i>not included in gross receipts abor</i> AISC. You may receive Form 1099 re generally required to file Schec	ve) -MISC (instead lule C, Profit or .				\$ (\$ eive Form 10
Returns and Other income F orm 1099-M MISC, you an nust pay sel	allowances e (<i>not included in gross receipts abor</i> AISC . You may receive Form 1099 re generally required to file Schec If-employment (SE) tax on the inco	ne) I-MISC (instead lule C, Profit or Iome.	Loss From Business, claim any ex	xpenses associated		\$ (\$ eive Form 10
Returns and Other income F orm 1099-IV MISC, you au nust pay self Sole Proprie	allowances e (not included in gross receipts above AISC. You may receive Form 1099 re generally required to file Schee If-employment (SE) tax on the inco etor Cost of Goods Sold (for man	ne) I-MISC (instead lule C, Profit or Iome.	Loss From Business, claim any ex	xpenses associated		\$ (\$ eive Form 10 e received, a
Returns and Other income F orm 1099-M MISC, you an nust pay sel Sole Proprie nventory at	allowances e (<i>not included in gross receipts abor</i> AISC . You may receive Form 1099 re generally required to file Schec If-employment (SE) tax on the inco	ne) I-MISC (instead lule C, Profit or Iome.	Loss From Business, claim any ex	xpenses associated		\$ (\$ eive Form 10 e received, a \$
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Returns and Other income Form 1099-M MISC, you an nust pay self Sole Proprie Inventory at Purchases Cost of labor	allowances e (not included in gross receipts above AISC. You may receive Form 1099 re generally required to file Scheck If-employment (SE) tax on the inco etor Cost of Goods Sold (for many the beginning of the year	ne) I-MISC (instead lule C, Profit or Iome.	Loss From Business, claim any ex	xpenses associated		\$ (\$ eive Form 10 e received, a \$ \$ \$
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Depreciation. If property you acquire to use in your business is expected to last more than one year, you generally cannot deduct the entire cost as a business expense. Depreciation spreads out the cost of a business asset allowing you to recover the cost or other basis of property over a period of years. It is an annual allowance for the wear and tear, deterioration, or uselessness of property. The IRS has outlined a useful life (a set number of years) for most assets.

Equipment Sold or Disposed of During Year				
Asset	Date out of service	Date sold	Selling price/FMV	Trade-in?
			\$	
			\$	
			\$	
			\$	

Disposition of Property. A disposition of property occurs when you sell property for cash or other property, you exchange property for other property, you transfer property to satisfy a debt, you abandon property, your bank forecloses or repossesses your property, or your property is damaged, destroyed, or stolen and you receive property or money in payment.

Business Use of the Home

Area of home must be exclusively used for business except for storage or day care. Note: Managing rental activities or investments does not qualify for business use of the home.

All Taxpayers	For Day Care Only	
A) Business use area (square footage)	1) Hours used for day care	
B) Total area of home (square footage)	2) Total hours in year	8,760 hrs.

Enter below only the expenses paid during the period the home was used for business.

Direct expenses benefit only the business use portion of the home. This includes painting or repairs exclusively for the business area.

Indirect expenses are for keeping up and running the entire home, such as mortgage interest and property taxes. If you hought or sold your home during 2014, copy this worksheet and fill out one for each home

If you bought of sold your h	onie during 2014, cop	y this worksheet an	iu iii out one foi each nome.		
	Direct	Indirect		Direct	Indirect
Mortgage interest	\$	\$	Repairs and maintenance	\$	\$
Property taxes	\$	\$	Utilities	\$	\$
Insurance	\$	\$	Other	\$	\$
Depreciation of the Home					
Lower of cost or fair market	value of home	\$	Improvements?	Yes No	
Value of land		\$	Casualty losses in 2015?	Yes No	
Depreciable basis of home		\$	Use as an employee?	Yes No	

1) Exclusive Use Test—Business Use of Home

The exclusive use test is met if an area of the home is used only for business. The area can be a room or other separately identifiable space. The space does not need to be marked off by a permanent partition. This test is not met if the taxpayer uses the area both for business and for personal purposes, such as a den used for business during the day and TV viewing during the evening. Storage of inventory or product samples—exception to exclusive use test. A taxpayer using part of a home for business to store inventory or product samples is not required to meet the exclusive use test. However, the taxpayer must meet all the following tests.

- The taxpayer is in the business of selling products at wholesale or retail.
- The inventory or product samples are kept in the home for use in the business.
- The taxpayer's home is the only fixed location of the business.
- The storage space is used on a regular basis.
- The storage space is a separately identifiable space suitable for storage.

2) Regular Use Test—Business Use of Home

The exclusive use test is not required for:

• A home used as a day care facility.

product samples.

The regular use test means a taxpayer must use a specific area of the home for business on a regular basis. Incidental or occasional business use is not regular use. All facts and circumstances are considered in determining whether the business use is regular.

3) Trade or Business Use Test—Business Use of Home

• An area used on a regular basis for storage of inventory or

To satisfy the trade or business use test, the portion of the home used for business must be used in connection with a trade or business. If the business use is for a profit-seeking activity that is not a trade or business, the deduction is not allowed.

4) Principal Place of Business Test—Business Use of Home

A trade or business can have more than one location. To qualify for a business use of home deduction, the home must be the principal place of business for that trade or business. To make this determination, the following are considered. • The relative importance of the activities performed at each

A home office qualifies under this test if:

- The home office is used exclusively and regularly for administrative or management activities of the trade or business.
- There is no other fixed location where substantial administrative or management activities are conducted.
- place where business is conducted, and • The amount of time spent at each place where business is conducted.

Self-Employment (SE) Tax

- SE tax is a Social Security and Medicare tax primarily for individuals who are self-employed. It is similar to the Social Security and Medicare tax withheld from the pay of most wage earners. Your payments of SE tax contribute to your coverage under the Social Security system. Social Security coverage provides you with retirement benefits, disability benefits, survivor benefits, and hospital insurance (Medicare) benefits.
- You must pay SE tax if your net earnings from self-employment were \$400 or more, or you had church employee income of \$108.28 or more. The SE tax rules apply no matter how old you are and even if you are already receiving Social Security or Medicare benefits.
- For 2015, the SE tax rate on net earnings is 15.3% (12.4% for Social Security plus 2.9% for Medicare). Only the first \$117,000 (2014) of combined wages, tips, and net earnings is subject to the 12.4% Social Security part of SE tax.