

MICHAEL G. KISSELL, LTD.

CERTIFIED PUBLIC ACCOUNTANTS

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MICHAEL G. KISSELL, CPA

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December 31, 2015

Data For Business Income Tax Returns

Enclosed is the YEAR END INCOME TAX DATA form pertaining to your business income tax return to be filed for the year 2015.

You should take plenty of time to review and complete the form so that all sections of the form are completed accurately. If certain sections do not apply to you indicate so by writing NONE in that particular section. Understand tax returns are subject to review by taxing authorities. Your documentation should be retained to support the information provided within your return, especially business travel, entertainment deductions, business use percent of autos and other assets. Be aware penalties may be imposed on returns that are late or underpaid.

Your account must be current and the fee for your tax return preparation must be paid in full before the tax return will be sent to you.

Upon completion of the form, please sign and date in the signature section and send it to our office no later than January 15, 2016. ***We will not prepare your tax return unless this form is signed!***

The attached form is available in electronic format also. If you wish have it sent to you, send me an e-mail at mike@mgklt.com and I will forward the file to you.

Sincerely,

Michael Kissell, CPA

enclosure

Business Name _____

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Minneapolis, MN 55428
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Tel:(763) 533-0340
Fax:(763) 533-0063

Tax Year Ending _____ **2015** _____

YEAR END INCOME TAX DATA

FOR BUSINESS ONLY

Please complete this form and return it to us by _____ January 15, 2016 _____

The information required on this form is pertinent to the closing of your business books for the year and will have a direct bearing on your income tax return. Be sure that all information is accurate. It is imperative that we have this signed data sheet prior to completing your business income tax return.

If we may be of any assistance to you when preparing this form, please contact us at (763) 533-0340.

Please indicate the format of your file copy of tax return you prefer to receive from us. _____ Printed Copy
_____ PDF

Email Address: _____

***If applicable, please send either the back-up of your accounting
''''softwarg'br your 'year-end financial statement and sign below.**

Comments or Questions:

DECLARATION I HAVE REVIEWED THE INFORMATION GIVEN TO YOU ON THIS FORM AND TO THE BEST OF MY KNOWLEDGE IT IS TRUE, CORRECT, AND ACCURATE. I HAVE MAINTAINED THE UNDERLYING RECORDS REQUIRED BY LAW TO SUPPORT THIS INFORMATION AND IT IS READY FOR PREPARATION OF MY BUSINESS TAX RETURN. I AUTHORIZE MICHAEL G. KISSELL, LTD. TO PREPARE MY BUSINESS RETURN AND RETAIN COPIES OF APPROPRIATE DOCUMENTS.

**NOTE: PLEASE DO NOT FORGET
YOUR SIGNATURE AND DATE**



Signature _____
Date _____

**FOR ALL ITEMS BELOW, PLEASE INDICATE THE BALANCES
AS OF THE LAST DAY OF YOUR YEAR**

1. **ACTUAL CASH ON HAND OR PETTY CASH FUND AT YEAREND** \$ _____
2. **BUSINESS INVESTMENT ACCOUNT BALANCE** (i.e., savings account, money market fund, etc. Please include a photocopy of all statements) \$ _____
3. **INVENTORY OF ITEMS HELD FOR RESALE** (Do not include equipment or operating supplies to be used within your business.)
 (a) Inventory should be counted in a manner consistent with method used in previous years.
 (b) Inventory must be taken at fiscal year end.
INVENTORY MUST BE VALUED AT COST \$ _____
- COST OF INVENTORY TAKEN FROM BUSINESS FOR PERSONAL USE:** \$ _____
4. **ARE YOUR EXPENDITURES FOR SALES, TRAVEL AND ENTERTAINMENT EXPENSES PROPERLY SUBSTANTIATED**, i.e., date, name, amount, place, business purpose? Yes No
5. **PRINCIPAL BALANCES OF NOTES, CONTRACTS, LOANS, MORTGAGES, SALES TAXES, & PAYROLL TAXES PAYABLE** (from loan statements or telephone call to lender)

Chart of Account Code	TO WHOM OWED	FOR WHAT	Amount of Monthly Payments	Principal Balance of Note at Yearend

6. Do you have any outstanding employee advances at yearend (money you will take out of future paychecks)?
 Yes No
7. Are all employee allowances, advances, or reimbursements being substantiated and made for business expenses, accounted for in a reasonable period, and amounts returned to the employer when not substantiated?
 Yes No
8. Was there any change in the shares of ownership during the year? Yes No If yes, please explain.
 a. Did any shareholders change their address? Yes No
9. Are there any additional expenses of the business that were paid by officers/owners that have not been reimbursed? This could be items paid by personal check, credit cards, etc that you have not told us about before.
 Yes No If yes, attach list.
10. Did your business make any estimated tax payments? Yes No

Date paid	Amount paid Federal	Amount paid State	Amount paid City/Local

11. Does your business have a pension plan? Yes No
 If yes, what type? 401K Keogh SEP IRA SIMPLE Other _____
 If yes, are all qualified employees covered by the plan? Yes No If yes, do you plan contributions this year? Amt, if known, for employees _____ for yourself _____

12. Have you disposed of any equipment, furniture or vehicles during the year? Yes No
 If yes, fill in details below.
13. Have you traded in any equipment, furniture, vehicles for new or additional assets? Yes No
 If yes, fill in the details below and attach purchase papers.
14. Have you acquired any equipment, furniture, vehicles during the year? Yes No
 If yes, attach purchase papers if not already submitted.
15. Were any assets purchased with personal funds? Yes No

Description of Old Asset	Date of Disposition	Sales price or insurance proceeds / Expense of sale	Date of Purchase	Amount of new purchase: Cash / Note increase	Description of New Asset	N (New) U (Used) P (From Personal Use)

16. Did you make any expenditure for disabled access to your business? Yes No

If yes, amount \$ _____ Description: _____

17. **ACCOUNTS RECEIVABLE** (invoices your customer owes you that are unpaid at year end. You should have detailed records that equal the total shown here. This is not required if you are a cash basis taxpayer) \$ _____

LESS UNCOLLECTABLE CUSTOMER BAD DEBTS to be charged off this year

NAME	How old is amount due?	Amount

(Attach additional list if necessary) **LESS TOTAL BAD DEBTS TO WRITEOFF** (_____)

NET COLLECTIBLE ACCOUNTS RECEIVABLE YEAR END \$ _____

18. **ACCOUNTS PAYABLE** (Bills your business owes as of year end. This is not required if you are a cash basis taxpayer)

PERTAINS TO BUSINESS ONLY - NOT PERSONAL
 (Do not show payroll taxes, sales taxes, or loan balances here)

TO WHOM OWED	DESCRIPTION (Mdse, Supplies, Truck exp, etc.)	Account Code	Amount
			\$
		Total this page	\$

Complete only if not previously submitted for this tax year.

A. IF YOU HAVE A COMPANY OWNED OR LEASED VEHICLE ON YOUR BOOKS*

	Vehicle #1	Vehicle #2	Vehicle #3	Business Use of Personal Vehicle
Description plus gross vehicle weight				
Date put into business use (If leased, attach lease agreement)				
Cost or other Basis If leased, value when first leased				
Life of Lease				
Odometer reading at end of year:				
Total miles driven during the year:				
... Total business miles				
... Total commuting miles				
Actual expenses (gas, oil, repairs, lease expense)				
Interest				
Personal property tax				
If there are personal or commuting miles, how was this fringe benefit treated?				
Business parking and tolls				
Was the vehicle available for personal use?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Was the vehicle used primarily by a more than 5% owner or related person?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you have evidence to support the business miles claimed?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Is the evidence in writing?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you have a written policy that prohibits personal use of vehicles other than for commuting? If these questions are answered no, the deduction may be disallowed.	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

*** Do not report with personal information.**

Identify any vehicle that is electric or uses clean burning fuel _____.

Officer and/or Owner

- B.** Are any life insurance premiums paid through your business? Yes No
If yes, are they included in your P&L? Yes No If yes, who is beneficiary of policy?

What is the premium paid? \$ _____/month \$ _____ for the year.
If business is beneficiary, what is cash value at year end? \$ _____.

- C.** Are any medical, long-term care or disability insurance premiums paid for officers and/or owners? Yes No

If yes, are they included in your P&L? Yes No
If yes, are all qualifying employees covered by the business plan? Yes No
If yes, for each officer/owner, what is the premium paid?

Name	Type of Ins.	\$ _____ Month	\$ _____ Year
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

If the business is an S Corp, are the premiums included in shareholder wages? Yes No
If No, how were they treated? _____

- D.** Are there any qualified medical or health savings accounts (MSA/HSA)? Yes No
If yes, how much was paid for whom?

Name	Employer contribution	Employee contribution

- E.** Do you have business income from 'Qualified Production Activities' relating to manufacturing, producing, growing, extracting, installing, developing, substantially improving or creating property? Yes No