Business Tax Organize (page 1 of 2)

	Quickbooks file
pass	sword:
	Financial statements

	Company:					-			
Tax entity type	Sole Proprietor	C Corporation S Corpora	ship If an LLC, pl	If an LLC, please check the tax entity					
Legal name of busin	ess			EIN#:					
Business address					(check if new address)				
Tax matters individu	dualTitle Did the business have a change of business name during the year			Phone					
Principal business ac	tivity								
Principal product or Yes No Yes No Accounting method Yes No	Was the primary pu If a Corporation or L Cash A	rpose of the corporation's activ LC, is the Corp/LLC a Personal S ccrual Other on file under a calendar year? (i	Service Corporati	on (PSC/PLLC					
\$	Total assets of the b	ousiness at the end of the tax ye	ar. (includes cas	h, furniture, vehicles,	and all other	assets)			
New Clients	Provide a copy of the Provide a copy of the including state retu	ne Articles of Incorporation, byla ne depreciation schedules for bo rns.	aws, Operating A ook, tax, and AM	greements and any c T, and copies of tax re	orporate reso eturns for last	olution two years			
Principal Ownership	Information (include	all owners if owned any portion, a	t any part of the ye # Shares or	ar; include additional sh # Shares or	neets as necess Dividends	sary) I l			
	Tax ID number		% owned	% owned	issued				
Name/Title	(SSN or EIN)	Address	beg. Year	end Year	(if C Corp)	U.S citizen?			
	,		J		, , , , , , , , , , , , , , , , , , ,				
•		l ne last day of the year: rmation for any shareholder			1				
	Wages or Guaranteed Contrib		Contributions fr	om Distributions to	owner loans	Company loans			
Shareholder/Owner	Pmts	Health Insurance premiums paid	owners	owners	to business	to owners			
Company Specific Q Yes No	Did the corporation Is the business a sul Is any owner consider Are there any foreign Did the business own Did the business had Did you have any entertions.	hold an annual meeting with socidiary in an affiliated group of lered a disregarded entity, a particular of a provide ake any contributions to qualificate any debt that was cancelled enployees? Please provide copies ereive or dispose/transfer any associated and a provide or dispose/transfer any associated and a provide copies or dispose or di	r a parent-subsid rtnership, a trust, e details. ed charities? If ye er business? If ye during the year? es of 941s and W	iary controlled group an S corporation, or es, please provide all s, provide details. If yes, provide detail 2 for the year.	o? an estate? statements fr ls.	om charity.			
Yes No Yes No Yes No Yes No Yes No	during the year? Does the business have a retirement plan? Or a plan to make contributions to a self-employed retirement plan? Did the business pay for health/dental insurance for any owners? If so, please provide amounts and names for each owner. Did the business have any bartering transactions during the year? At any time during the year, did the corporation have an interest in, or signature authority over a financial account in a foreign country? Was there a distribution of property or a transfer (by sale or death) of a shareholder interest during the tax year?								
Yes No	was there a distribu	ition of property or a transfer (b	y sale or death) (oi a shareholder inter	est during th	e tax year?			

Amount applied from prior year's refund?

Third Fourth

Business Tax Organizer

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	Company:								
Yes No	Did the corneration hav \$600 or r	more to any individ	dual? If yes inclu	ide a cons	of Form 10	QQ_MISC for e	ach		
Yes No	Did the corporation pay \$600 or more to any individual? If yes, include a copy of Form 1099-MISC for each. Note: Requirements to issue a 1099 to companies and/or individuals is provided in IRS instructions for 1099-MISC.								
	Amounts paid with a credit/debit	· ·							
	·	•		ayments n	iaue by casi	i, check, bilipa	ay, or certain		
□ Vas □ Na	paypal transactions will require a								
☐ Yes ☐ No	Are all owners/shareholders activ			41	4141				
Yes No	Did the business receive any IRS or State letters or notifications during the year that we should be aware of? If yes, please provide copies.								
Yes No	Have you provided company financial statements as of the end of the fiscal year (typically Dec 31st)?								
	Income statement and Balance sh	eet; these statem	ents should tie to	the your	beginning b	alance as of J	anuary 1st and		
	your last year's tax return. Backu	p QB file fully reco	nciled or comple	te financia	als (P&L and	Balance shee	t).		
Yes No	Are all bank statements reconciled						•		
Yes No			=						
Yes No	Are all credit card statements reconciled and the balances in accounting software match statements? Are all loans and line of credits reconciled and match to the statements?								
Yes No	Did you purchase or sell any real e				documents	(HUD-1).			
Yes No	Did you purchase any vehicles or			_			rmation. Did		
Yes No	you sell or dispose of any compan								
	Please provide all interest stateme						vear.		
Yes No	Did you have inventory? If yes, pro								
163110	related items.	ovide details of se	S and end	ing invent	ory, parenas	es, and other	0031 01 80003		
Vehicle Expenses									
Yes No	Does the company own vehicles d	lirectly (i.e. Title in	the business na	me)? If so	o, provide de	tails.			
Yes No	Does the company reimburse employees for use of their personal vehicles? If so, provide details.								
Yes No	Does the company reimburse employees for use of their personal vehicles? If so, please answer below. Does the company, if a corporation (S-Corporation or C-Corporation) have a written accountable plan explaining the								
1e3 140	policy for required reimbursements under IRS Sec. 62(a)(2)(A) and Regs. Sec. 1.62-2.								
Yes No	Were all required documents mai					ne frame?			
Meals & Entertainm	-								
Yes No	For any meals & entertainment ex	penses, does the	company keep p	roper reco	ords includin	g the followir	ng:		
	business purpose, dates, amount,	and who attende	d each event?						
Travel Expenses									
Yes No	Did the company have business tr	avel expenses for	the year?						
Yes No	Were all travel expenses accounted for properly and separated into travel, lodging, transportion and meal categories?								
General Business Cr									
Yes No	Did the business pay expenses to	make it accessible	by individuals w	ith disabil	ities?				
Yes No	Did the business pay any FICA on employee wages for tips above minimum wage?								
Yes No	Did the business own any residential rental buildings providing qualified low-income housing?								
Yes No	Did the business incur any research and experimental expenditures during the year?								
Yes No	Did the business have employer pension plan start-up costs?								
Yes No	Did the business hire any workers	from hardship car	tegories?						
Estimated Tax Paym									
	Installment	Date paid	Federal		Date paid	State			
First			\$			\$			
Second			\$			\$			
Third			\$			\$			

\$

If you are unable to provide any of the above requested items, please provide details as to the circumstances.