S Corporation Tax Organizer

requirements.

Use a separate organizer for each S corporation

GG
CPA

3 Corporatio	ii dellerai illiori	IIalivii										/ I / I
Legal name of S corporation								EIN	-	-		
S corporation	address 🗖 (chec	k if new addre	ess)									
S Corporation Representative Titl					itle							
	En					ail			Phone ()		
☐ Yes ☐ No		tion have a c	change o	f business	name du	ring the yea	r?					
Principal bus										siness started	/	
	duct or service				, ,, ,,	. 11	Ci.o.		Date bus	siness closed	/	
	Was the primar			•	's activity	to realize a	profit?					
	nethod: Cash			, ,,		aleat in the Go	aal 112212)					
	Does the corpor		der a car	endar yea	ir: (15 no, a	mut is the fis	cai year:)					
	•		annual i	maatina ri	rith charal	aldono virith	a masand of mi	inutes ma	intainad?	,		
☐ Yes ☐ No☐ Yes ☐ No☐	Did the corpora Was the corpora							mutes ma	ппашеи:			
☐ Yes ☐ No	Is any sharehold							n S corpoi	ration or	an estate?		
☐ Yes ☐ No	Did the corpora										nd	
- 165 - 110	outstanding of					arreetry or n	indirectly, 6676	01 111010 0	i tric total	stock issued at		
☐ Yes ☐ No	Did the corpora profit, loss, or ca									t of 50% or more	e in tl	he
☐ Yes ☐ No	Did the corpora											
☐ Yes ☐ No	Did the corpora	tion have an	y outsta	nding sto	ck options	, warrants,	or similar instr	uments at	the end	of the tax year?		
☐ Yes ☐ No	Did the corpora principal?	tion have an	y non-sh	areholde	r debt that	was cancel	led, forgiven, o	or had teri	ns modifi	ied to reduce ar	noun	ıt of
☐ Yes ☐ No		ntion's S elec	tion term	ninated or	revoked	during the y	rear?					
☐ Yes ☐ No	Was the corporation's S election terminated or revoked 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?											
☐ Yes ☐ No	Was there a dist	ribution of p	roperty	or a trans	fer (by sal	e or death) o	of a shareholde	r interest	during th	ne tax year?		
	Does the corpor	ation satisfy	the follo	wing con	ditions?					-		
☐ Yes ☐ No	 The corporation's total receipts for the tax year were less than \$250,000, and The corporation's total assets at the end of the tax year were less than \$250,000. 											
☐ Yes ☐ No	_							dual?				
	Did the corporation pay \$600 or more of nonemployee compensation to any individual? If yes, include a copy of Form 1099-NEC for each.											
☐ Yes ☐ No	Did the corpora											
☐ Yes ☐ No	At any time dur services); or (b)										opert	ty or
Principal Sh	areholders Owi			er wise an	эроэс от и	aigitai asset	(Of a intartetar	Titterest ii	i a aigita	i ussetj.		
1 TillCipai Sil	arenoiders owi	Tax ID nu							Ownersh	hip Shareholde	, T	U.S.
Name/Title		(SSN or E.		Address					percenta	'		itizen?
										\$		
										\$		
										\$		
How many sl	nareholders were	there on the	last dav	of the ve	ar?							
	s – Provide the fo					was an offic	cer or 2% or mor	e owner o	f the corpo	oration during the	year	
			Health i	insurance		ntributions	Distributions	1	der loans	Loans repaid by		
Shareholder/O	fficer name	Wages paid	premiun	ns paid	from shar	eholder	to shareholder	to corpor	ation	to shareholder		
AU 01: 1						la ou				_	_	
All Clients – Additional information and documents required New Clients – Additional information and documents required												
						Date incorporated						
reconciliation of all business bank accounts with ending cash balances.					State of incorporation Corporation state domicile S. Date of S corporation election							
 If the S corp 	oration has emple	oyees, provid	le a copy	of Form V	V-3,		•		Incorpor	ation bylavia a	nd a	nv
Torne 710, Torne 711, and any state quarterly tax ming reports.						Provide a copy of the Articles of Incorporation, bylaws, and any corporate resolutions.						
 If the S corporation made payments of \$600 or more to independent contractors, provide copies of Form 1099-NEC issued. 						• Provide a copy of the depreciation schedules for book, tax, and AMT.						
• If any shareholders live in a different state or outside the United						 Provide copies of returns for the last two years, including state returns. Enclose a copy of IRS Form 2553, Election by a Small Business Corporation, 						
States, prov	ide details. The co	orporation ma	ay be sub	ject to wit	hholding		acceptance.	,1111 ZJJJ, .	ысыын оу	, a oniun businesi	, corp	oranon,

S Corporatio	n Balance Sheet						
	Corporation	assets at year end		Corporation debts and equity at year en			d <u>CPA</u>
Bank account end of year balance			\$	Accou	nts payable at year end		\$
Accounts rece	s receivable at end of year \$ Pay			Payabl	es less than one year	\$	
Inventories	Inventories		\$	Payabl	es more than one year		\$
Loans to shar	eholders		\$	Mortga	ages, notes payable		\$
Mortgages an	d loans held by co	rporation	\$	Loans	from shareholders		\$
Stocks, bonds	, and securities		\$	Capita	l stock (common)		\$
Other current	assets (include list)	\$	Retain	ed earnings		\$
S Corporatio	n Income (include	all Forms 1099-K rece	ived)				
Gross receipts	s or sales		\$	Divide	nd income (include all 1099-L	DIV Forms)	\$
Returns and a	allowances		\$()	Capita	l gain/loss (include all 1099-E	Forms)	\$
Interest incon	ne (include all 1099-	-INT Forms)	\$	Other	income (loss) (include a staten	ient)	\$
S Corporatio	n Cost of Goods S	old (for manufacture	rs, wholesalers, and	l busines	ses that make, buy, or sell good	ls)	
	peginning of the ye		\$		als and supplies	-	\$
Purchases	0 0 7		\$		ory at the end of the year		\$
Cost of labor			\$,
S Corporatio	n Expenses						
Advertising	рошооо		\$	Meals	– business		\$
Annual corpo	oration fees		\$		supplies		\$
Bad debts	ration ices		\$		ization costs		\$
Bank charges			\$		n and profit sharing plans –	emplovee	\$
Business licer			\$		n and profit sharing plans – s		\$
Cleaning/jan			\$		sional education and training		\$
Commissions			\$	Rent or lease – car, machinery, equipment		\$	
Compensation of officers		\$	Rent or lease – other business property		\$		
Contract labor (include Forms 1099-NEC)		\$	Rent p	* *	or ty	\$	
Employee benefit programs		\$	_	s and maintenance		\$	
Entertainment (not deductible)		\$	_	s and wages (include Forms V	V-2)	\$	
Health care plans – employee		\$		- payroll	· _,	\$	
Health care plans – shareholder			\$		- property		\$
Insurance (other than health insurance)			\$	Taxes -	<u> </u>		\$
	iness credit cards		\$	Telephone		\$	
	iness loans/credit	lines	\$	Utilities		\$	
Interest – mo			\$	Other expense		\$	
Internet servi			\$	Other expense			\$
	ofessional services		\$	Other expense			\$
		rm for each vehicle)	·		_ 1		
Make/Model		im for odon vomoto,			Date car placed in service	/ /	
☐ Yes ☐ No					Date car praced in service / /		
☐ Yes ☐ No		for personal use during off-duty nours? our spouse) have any other cars for personal use			Did you trade in your car t	l No	
☐ Yes ☐ No	Do you have evice	* ' '			Cost of trade-in	Trade-in value	1140
☐ Yes ☐ No					\$	\$	
Mileage					+	µ Ф ual Expenses	
Beginning of year odometer				Gas/oil	\$		
End of year odometer				Insurance	\$		
Business mileage				Parking fees/tolls	\$		
Commuting mileage				Registration/fees	\$		
Other mileage				Repairs	\$		
	,	e standard mileage	rate or actual expe	enses to	calculate the deductible cost	<u> </u>	r car for business
					irst year the car is available		

then choose between either the standard mileage rate method or actual expenses.

Equipment Purchases — Enter the following information for depreciable assets purchased that have a useful life greater than one year								
Asset	Date purchased	Cost	Date placed in service	New or used?				
		\$						
		\$						
		\$						
		\$						

Equipment S	old or Disposed of I	During Year					C P A		
Asset				Date out of service	Date sold	Selling price/FMV	Trade-in?		
						\$			
						\$			
						\$			
						\$			
S Corporation	n Business Credits	(if answered Yes for	any of the below, p	lease provide a state	ement with details,				
☐ Yes ☐ No	Did the corporation	Did the corporation pay expenses to make it accessible by individuals with disabilities?							
☐ Yes ☐ No	Did the corporation pay any FICA on employee wages for tips above minimum wage?								
☐ Yes ☐ No	Did the corporation own any residential rental buildings providing qualified low-income housing?								
☐ Yes ☐ No	Did the corporation incur any research and experimental expenditures during the tax year?								
☐ Yes ☐ No	Did the corporation have employer pension plan start-up costs? Total number of employees								
☐ Yes ☐ No	Did the corporation pay health insurance premiums for employees? Total number of employees								
☐ Yes ☐ No	Did the corporation purchase and place in service any electric vehicles or energy efficient commercial building property?								
State Estima	ted or Pass-Throug	h Entity (PTE) Tax	Payments — Tax	Year 2023					
State		Amount	Date Paid	State		Amount	Date Paid		
		\$				\$			
		\$				\$			
		\$		İ		\$			

Tax Return Preparation

We will prepare the corporation's tax return based on information provided. In the event the 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 the corporation's return do not include auditing, review, or any other verification or assurance.

Taxpayer Responsibilities

- You agree to provide us all income and deductible expense information. If additional information is received after we begin working on the return, you will contact us immediately to ensure the completed tax returns contain all relevant information.
- You affirm that all expenses or other deduction amounts are accurate and that you have all required supporting written records. In some cases, we will ask to review documentation.
- You must be able to provide written records of all items included on the return if audited by either the IRS or state tax authority. We can provide
 guidance concerning what evidence is acceptable.
- You must review the return carefully before signing to make sure the information is correct.
- Fees must be paid before the tax return is delivered to you or filed for you. If you terminate this engagement before completion, you agree to pay a fee for work completed. A retainer may be required for preparation of returns.
- Keep a copy of the tax return and any related tax documents. You may be assessed a fee if you request a duplicate copy in the future.

Signatures. By signing/typing below, you acknowledge that you have read, understand, and accept your obligations and responsibilities.

Taxpayer Title Date	D : D !!			
		m:.1	Date	

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 express written 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.