S Corporation Tax Organizer

(See next page for Organizer)

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S Corporation Tax Organizer

Use a separate organizer for each S corporation

S Corporatio	n General Infor	mation										
Legal name o	f S corporation	EIN –										
S corporation	address 🛛 (chec	k if new addre	ess)									
S Corporation	prporation Representative Title						le					
_	Em				nail			Phone (()			
□ Yes □ No	Did the corpora	ition have a o	change of	business	s name du	ring the yea	ır?					
Principal business activity Date business started									siness started	/ /		
Principal pro	incipal product or service Date business closed / /									/ /		
🗆 Yes 🗆 No	Was the primar	y purpose of	the S cor	poration	's activity	to realize a	profit?					
	nethod: 🛛 Cash			, ,,								
□ Yes □ No	Does the corpor	ration file un	der a cale	endar yea	ar? (If no, u	vhat is the fis	cal year?)					
S Corporatio	n Specific Ques	stions										
🗆 Yes 🗖 No	Did the corpora	tion hold an	annual n	neeting w	vith shareł	nolders with	n a record of mi	inutes ma	intained?)		
🗆 Yes 🗖 No	Was the corpora	ation a C cor	poration l	before it	elected to	be an S corp	ooration?					
🗆 Yes 🗖 No	Is any sharehole	der in the co	rporation	a disrega	arded enti	ty, a partner	rship, a trust, ai	n S corpo	ration, or	an estate?		
🗆 Yes 🕒 No						directly or in	ndirectly, 50% o	or more o	f the total	l stock issued and	l	
	outstanding of	, 0		<u> </u>			11 .1 .	11 .1		6 = 00/		
□ Yes □ No	profit, loss, or c									t of 50% or more i	n the	
🗆 Yes 🗅 No	Did the corpora		•	-								
🗆 Yes 🗆 No	Did the corpora				<u> </u>					· · · · · ·		
🗆 Yes 🗖 No	Did the corpora principal?	ition have an	iy non-sha	areholde	r debt that	t was cancel	led, forgiven, c	or had teri	ms modif	ied to reduce amo	ount of	
🗆 Yes 🗅 No	Was the corpora	ation's S elec	tion term	inated or	revoked	during the y	/ear?					
□ Yes □ No	At any time dur country?	ring the year	, did the c	corporati	on have a	n interest in	, or signature a	uthority o	over a fina	ancial account in	a foreign	
🗆 Yes 🗖 No	Was there a dist	tribution of p	property o	or a trans	fer (by sal	e or death)	of a shareholde	er interest	during th	ne tax year?		
			~ ·			,			0	5		
🗆 Yes 🗖 No	 Does the corporation satisfy the following conditions? 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	Did the corpora If yes, include a	tion pay \$60	0 or more	e of nonei	mployee c			dual?				
□ Yes □ No	Did the corpora	A 7				n (PPP) loar	n that was forgi	iven in 20	23?			
□ Yes □ No	^		•		-					payment for prop	perty or	
	services); or (b)											
Principal Sh	areholders Owi	nership Info	rmation									
Name/Title		Tax ID nu (SSN or E		Address					Ownersl percenta		U.S. citizen?	
										\$		
										\$		
								\$				
I loss			Jaci -	of 11	a#2					Ψ		
	nareholders were						80/					
Snarenolder	S – Provide the fo	llowing inform	r		1			1		pration during the y		
Shareholder/O	fficer name	Wages paid	Health insurance aid premiums paid		from shar	ontributions eholder	Distributions to shareholder	to corpor	der loans ration	Loans repaid by c to shareholder	orporation	
All Clients -	Additional inform	ation and doc	uments re	auired		New Clie	nts – Additiona	l informati	on and do	cuments required		
					ir (per							
• Provide the business income/financial statements for the year (per books), balance sheet, depreciation schedule per books, and cash reconciliation of all business bank accounts with ending cash balances.					Date incorporated State of incorporation Corporation state domicile							
					Date of S corporation election							
• If the S corporation has employees, provide a copy of Form W-3, Form 940, Form 941, and any state quarterly tax filing reports.					Provide a copy of the Articles of Incorporation, bylaws, and any					d any		
	orm 941, and any oration made pay					corporat	te resolutions.		-	-		
contractors,	provide copies of	f Form 1099-1	NEC issue	ed.						iles for book, tax,		
• If any shareholders live in a different state or outside the United												
	ide details. The co	prporation ma	ay be subj	ect to wit	thholding	and IRS	acceptance.	,	LICCI 1011 01	1 ~ Unuu Dusincos (201 01111011	
requirement	requirements.											

Corporation	1.	Corporation debts and equ		and equity at year			
Bank account end of year balance	\$	Accounts payable at year end			\$		
Accounts receivable at end of ye	ear	\$		less than	<u> </u>		\$
nventories		\$			n one year		\$
Loans to shareholders		\$		es, notes p	<i>v</i>		\$
Mortgages and loans held by co	rporation	\$		om shareh			\$
Stocks, bonds, and securities		\$	Capital stock (common)			\$	
Other current assets (include list)		\$	Retained	l earnings			\$
S Corporation Income (include	all Forms 1099-K rec	eived)					
Gross receipts or sales		\$	Dividenc	d income (include all 1099	9-DIV Forms)	\$
Returns and allowances		\$()	Capital gain/loss (include all 1099-B Forms)			\$	
nterest income (include all 1099-	-INT Forms)	\$	Other income (loss) (<i>include a statement</i>)			\$	
S Corporation Cost of Goods S	old (for manufacture	ers, wholesalers, and	d businesse	es that mak	e, buy, or sell go	ods)	
nventory at beginning of the ye	ear	\$	Materials	s and sup	olies		\$
Purchases		\$	Inventor	y at the er	nd of the year		\$
Cost of labor		\$					
S Corporation Expenses							
Advertising		\$	Meals – k	business			\$
Annual corporation fees		\$	Office su	pplies			\$
Bad debts		\$	Organiza	ation costs			\$
Bank charges		\$	Pension and profit sharing plans – employee		\$		
Business licenses		\$	Pension and profit sharing plans – shareholder		\$		
Cleaning/janitorial		\$	Professional education and training		\$		
Commissions and fees		\$	Rent or lease – car, machinery, equipment		\$		
Compensation of officers		\$	Rent or le	ease – oth	er business pro	operty	\$
Contract labor (<i>include Forms</i> 10	99-NEC)	\$	Rent paid	d		× v	\$
Employee benefit programs		\$	Repairs a	and maint	enance		\$
Entertainment (not deductible)		\$	Salaries a	and wages	s (include Forms	s W-2)	\$
Health care plans – employee		\$	Taxes – p	<u> </u>			\$
Health care plans – shareholder		\$	Taxes – p	property			\$
Insurance (other than health insurance)		\$	Taxes – sales			\$	
Interest – business credit cards		\$	Telephone			\$	
nterest – business loans/credit	lines	\$	Utilities			\$	
Interest – mortgage		\$	Other expense			\$	
Internet service		\$	Other expense			\$	
Legal and professional services		\$	Other expense			\$	
Car Expenses (use a separate for	rm for each vehicle)						
Make/Model			T	Date car p	laced in service	e / /	
	personal use during	g off-duty hours?		cui p		- / /	
	pouse) have any ot		al use? I	e? Did you trade in your car this year?			□ No
T Yes D No Do you have evid	<u> </u>	percon		Cost of trade-in Trade-in value			
				4		\$	
□ Yes □ No Is your evidence written? <i>Mileage</i>						Actual Expenses	
Beginning of year odometer				Gas/oil	21	\$	
End of year odometer				Insurance		\$	
Business mileage				Parking fe	es/tolls	\$	
Commuting mileage						\$	
Other mileage					\$		
Generally, you can use either th			enses to ca	lculate the		osts of operating y	
purposes. However, to use the s							5
ourposes. However, to use the s hen choose between either the s Equipment Purchases – Enter t	standard mileage ra	te method or actua	al expenses	s.			

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

Equipment Sold or Disposed of During Year							
Asset		Date out of service	Date sold	Selling price/FMV	Trade-in?		
				\$			
				\$			
				\$			
				\$			
S Corporatio	n Business Credits (if answered Yes for any of the below, <i>j</i>	please provide a state	ement with details)				
□ Yes □ No	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						
	Did the corporation purchase and place in convice any o	loctric vobiclos or o	porav officient com	moreial building pro	portu?		

□ Yes □ No | Did the corporation purchase and place in service any electric vehicles or energy efficient commercial building property?

State Estimated or Pass-Through Entity (PTE) Tax Payments — Tax Year 2023							
State	Amount	Date Paid	State	Amount	Date Paid		
	\$			\$			
	\$			\$			
	\$			\$			
	\$			\$			

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 below, you acknowledge that you have read, understand, and accept your obligations and responsibilities.

Privacy Policy			
Taxpayer	Title	Date	

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.