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C-CORPORATION

QUESTIONNAIRE

C-Corporation Tax Organizer

	EIN	Name	•		Date Incorpora	ated
Address:	Mailing Address		 City	State	Zip Code	
Contact Name:			_ Email:			
Contact Phones:						
	(Office)	(Home)			(Mobile)	
	Contact Mailing Address	Suit		City	State	Zip Code

This Organizer is provided to help you gather and organize information relating to preparation of your corporate income tax returns. Please provide us with a copy of the corporation's tax returns for the last year filed if you are a first-time client of Tax Pros Plus LLC.

If you maintain your organization's books using a bookkeeping system such as QuickBooks, Quicken or Excel, you can provide us with a profit and loss statement and balance sheet rather than completing the income and expense and balance sheet sections of this organizer.

If you would like our accounting staff to prepare organizational income and expense reports for you, there will be an additional fee to do so. If you prefer this option, please provide us with the following documents:

- o Business bank statements for all months of the year
- Credit card statements (for business-use credit cards)
- Receipts for cash purchases not shown on bank or credit card statements
- Checkbook register
 - Identify all checks by entering an expense category in the memo section
 - Identify a personal withdrawal of funds from your business account as "Shareholder Distribution
 - Identify a deposit of personal funds to your business account as "Shareholder Contribution." If contributions and distributions were made for more than one shareholder during the year, provide separate information for each shareholder.

Filing Information. Please answer "Yes" or "No" to ALL of the following questions.	Yes	No
Did the Corporation conduct business activities in any state other than SC? If yes, which		
states did the corporation conduct business activities in?		
What is the state of incorporation?		
What is the Corporation's state of residence?		
What date was the Corporation first authorized to do business in the resident state?		
Did the Corporation have a change of business name during the year?		
Is there a change of address for the year?		
Is this a personal service corporation?		
What is the principal business activity of the Corporation?		
What accounting method does the Corporation use? Cash 🗌 Accrual 🗌 Other (describe)		
Does the Corporation file under a calendar year? (If not, what is the fiscal year?)		
Did any entity own more than 50% of the Corporations voting stock on the last day of yr?		
How many shareholders were there on the last day of the year?		

	S	Shareholder Information			
First Name–Last Name (Enter information for all shareholders who owned shares at any time during the year)	Social Security Number	Shareholder Mailing Address Street Address City, State, Zip	% of shares owned at start of year	% of shares owned at end of year	Dividends issued to shareholder during the year

Corporation Balance Sheet			
Corporation assets at year end		Corporation Debts and Equity at year end	
Bank account end of year balance	\$	Accounts payable at year end	\$
Accounts receivable at end of year	\$	\$	
Loans to Shareholders	\$	Payables more than 1 year	\$
Mortgages and loans held by €orp .	\$	Capital stock (Preferred)	\$
Stocks, bonds and securities	\$	Capital stock (Common)	\$
Other current assets (describe)	\$	Loans from shareholders	\$
Inventories	\$	Retained Earnings	\$
Income			
What were the business gross receipts or	sales for the y	year? \$	
What portion of receipts were reported or	n Form 1099-	K? \$	
What portion of gross sales listed above w	vas refunded	or returned? \$	
What were the gross receipts from rental	property own	ned by the Corporation	
(Do not include rental income in gross receipt	s for the busine	ess activity) \$	
Did the Corporation have any other incom	e from this b	usiness activity not included in gross receipts above	?
(If the Corporation had investment or capit	ital gain incon	<i>ne for the year, complete the</i> Yes D No D	
Interest/Dividend and/or Capital Gains We	orksheets on I	Page 7 of this Organizer)	
Describe any other income of the Corpora	tion not inclu	ıded elsewhere in this Organizer.	
Cost of Goods Sold (COGS)			
		facturers generally must account for COGS. COGS in	ncludes all
costs associated with manufacturing a pro	-		
Do you manufacture or produce a produce			
Do you operate a wholesale or retail busin	less where yo	·	
		Yes No	
What was the opening cost of inventory o	n the first day	y of the year? \$	
What was the cost of purchases of produc	t (less cost of i	items withdrawn for personal us e) ? \$	
Cost of labor related to sale or production	of goods hele	d for sale \$	
Materials and supplies used in manufactur	re or sales pro	oduction \$	
Other costs of goods not listed above (list	these on separ	rate detail worksheet) \$	
Closing inventory at end of year		\$	

Business Expenses		Business Expenses	
Advertising	\$	Professional education & training	\$
Auto (Complete auto worksheet, page 6)		Rent (office, leasehold, storage)	\$
Bank fees and charges	\$	(1099-MISC to unincorporated payees required)	
Cell phone (100% of cost) \$ (x		Rent or lease	\$
Business use%) =	\$	(vehicles, machinery, and equipment)	
Charitable contributions			
Commissions and fees	\$	Repairs and maintenance	\$
Computers, equipment, furniture		Software (Enter on depreciation worksheet)	
(Complete the Asset Depreciation		Supplies and small tools	\$
Worksheet shown at bottom of this page)		(Do not include equipment purchases – see	
Contract labor	s	Depreciation Worksheet below)	
(You must issue a 1099 Misc to any	Ş	Taxes - Local & business licenses	\$
unincorporated entity to whom you paid \$600 or more for the year)		Taxes - Payroll (941, 940 & State)	\$
Dues and Subscriptions	Ş	Taxes - State	\$
Employee benefit programs	\$	Annual corporation fees	\$
Health Insurance (employee)	\$	Telephone expense (Do not include cost of	\$
Health Insurance (shareholder)	\$	main home phone line)	
Insurance (other than health)	\$	Travel (Complete Travel Expense	
Internet service	\$	Worksheet on Page 5 of this organizer)	
Interest – Mortgage (business)	\$	Utilities (Do not include home office)	\$
Interest – Business credit cards	\$	Wages (W-2s issued to employees) Provide	\$
	Ċ.	copies of W-3, Annual 940 &	
Interest – Business loans/credit line	\$	Quarterly 941 reports filed.)	
Laundry/cleaning/janitorial	\$	Other Expenses	
Legal and professional services	\$		\$
Local (in-town) meals	\$		\$
Entertainment	\$		\$
Merchant credit card fees	\$		\$
Office expense	\$		\$
(Do not include equipment purchases – see			\$
Depreciation Worksheet below)	\$		0
Parking & tolls	·		\$
Postage & shipping	\$		\$

Asset Depreciation Worksheet

- You must report the purchase and disposition of all assets you used in your business.
- For each asset bought or sold, provide the following information:

Assets purchased listing			Assets sold or disposed of listing			
Description	Date Bought	Cost	Description	Disposition date	Sales price	

Travel Expense Worksheet

Meal Per Diem (Important facts)

- For each day a 2% shareholder of the company traveled away from home for business outside the metro area, the Corporation may claim the actual cost of shareholder lodging and meals. For meals only, the Corporation may reimburse the shareholder a daily per diem amount instead of actual costs.
- For each day a non-shareholder employee of the company traveled away from home for business outside the metro area, the Corporation may choose between claiming the actual cost of employee meals and lodging; or it can reimburse the employee a daily per diem amount for meals and lodging.
- The daily per diem amount varies depending on the city and country the employee traveled to. To calculate the per diem, amount the Corporation is entitled to reimburse, provide a detailing of each city the employee travelled to for business during the year and the number of days in each city.
- The Corporation can alternate between actual expenses and the per diem method for each business trip; however, it may not use both per diem and actual for the same business trip.
- The Corporation may reimburse a partial per diem if an employee or shareholder traveled outside metro area for less than a full day.

City visited (for per diem)	# of days in city	City visited (for per diem)	# of days in city
Travel Expenses		Travel Expenses	
Airfare	\$	Lodging	\$
Bus, train, taxi	\$	Parking & tolls	\$
Entertainment	\$	Other travel (describe below)	
Meals - actual receipts			\$
(Do not include cost of meals where you are			\$
claiming the daily per diem rate)	\$		\$

Business Use of Automobile

Documentation must be kept proving business use of Corporation-owned or shareholder-owned vehicles.

- If a shareholder or an employee used his or her automobile for active conduct of Corporation business:
 - The Corporation can provide reimbursement for actual operational expenses of the vehicle or it can reimburse using an allowable standard mileage rate.
 - A written log or other record must be maintained and submitted to the Corporation. o For each shareholder or employee for whom the Corporation paid auto-expense reimbursements during the year, the Corporation should maintain a written record of the expenses incurred and the reimbursements paid.
- The Corporation may claim actual operational expenses incurred for vehicles that are owned by the Corporation. o Proof of business use in the form of a mileage log or a written calendar must be maintained unless it can be shown the vehicle was 100% business use.
 - If the business provided a vehicle for employee use, complete Section B below.

For any vehicle that was used by a 5% or more owner of the business, additional information must be reported to IRS. Complete Section A shown below.

Provide the following information fo		ection A d by a 5% or more owner of the b	ousiness
Purchase price of vehicle		\$	
Description (Model and year of vehicle)			
Date vehicle was first used in your bu	siness		
For this tax year only, enter the numb	er of miles your ve	ehicle was used for:	
Busines	s miles (not includi	ing commute miles)	
Commu	ıting miles		
All othe	er personal-use mi	iles	
Interest paid on auto loan used to pu	chase this vehicle	\$	
Was the vehicle available for persona	l use? Yes 🗌 No 🗌		
Was the vehicle used primarily by a 5°	% or more owner o	of the Corporation? Yes 🗌 No 🗌]
Is another personal-use auto available	e? Yes 🗌 No 🗌		
Was the standard mileage rate used la	ast year? Yes 🗌 🛛	No	
		ection B	
Additional Questions for Corporation	•	~ _ ~	
Does the Corporation maintain a writ	ten policy prohibit	ing all personal use of company ve	ehicles?
			Yes 🗌 No 🗌
Does the Corporation maintain a write	1 01	<u> </u>	Yes 🗌 No 🗌
Does the Corporation treat all use of	0 1 0	-	Yes 🗌 No 🗌
Does the Corporation provide more the	nan five vehicles to	employees and keep records?	Yes 🗌 No 🗌
Automobile Expenses			
Mileage reimbursement amount paid	to shareholders a	nd employees for the year \$	
Garage rent	\$	Repairs	\$
Gas	\$	Tires	\$
Insurance	\$	Tolls	\$
Licenses	\$	Registration fees	\$
Oil	\$	Other expenses (list):	\$
Parking fees	\$		\$
Lease payments	\$		\$

Information relating to deductions and a qualify. Answer "Yes" or "No" and provide			tion may	Yes	No		Details	
Did the Corporation purchase a plug-in e								
Did the Corporation pay wages to any er	nployees who w	ere memb	ers of a					
targeted group?								
Did the Corporation initiate a new 401K	plan during the	year?						
Did the Corporation pay for disabled acc	ess equipment o	or improve	ments					
during the year?								
Did the Corporation provide for or reimb	ourse employees	s for childc	are expens	ses	_			
during the year?	Ĩ							
Did the Corporation make energy-efficie	ncy improveme	nts?						
Did the Corporation manufacture or buil	-							
If so, the following additional informatio	n will be needed	l to compl	ete the					
Corporation's return:								
Gross receipts from sales of dom		ced produc	t					
Cost of domestically produced g								
Expenses, deductions or losses d man dust	lirectly allocable	to the do	nestic					
productExpenses, deductions or losses in	ndiractly allocab	la ta tha d	omostic					
product.	nunecuy anotab	de to the u	omestic					
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 Wages hald for the year 								
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complete to the best of my knowledge. I further affirm that I have documentation/receipts to support this information.