S Corporation Tax Organizer

(See next page for Organizer)

CS Accounting

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|---------|----------|-------------|-------|-------|----------|------------|
| I ISP A | senarate | oroanizer | tor | each | 5 | corporatio |
| CLUC II | Depunic | OI ZUILLECI | , 0 , | Cucii | \sim | corpornino |

| S Corporation | n General Infor | mation | | | | | | | | | | | |
|--|--|----------------|------------|-------------|---------------|-----------------|--------------------------------------|--------------------|---------------------------|--|--------------|--|--|
| Legal name of S corporation EIN - | | | | | | | | | | | | | |
| S corporation address (check if new address) | | | | | | | | | | | | | |
| S Corporation | n Representative | | | | Titl | e | | | | | | | |
| | | | | | Em | | | | Phone (| Phone () | | | |
| ☐ Yes ☐ No Did the corporation have a change of business name during the year? | | | | | | | | | | | | | |
| Principal business activity Date business started / | | | | | | | | | / / | | | | |
| | duct or service | | | | | | | | Date bus | siness closed | / / | | |
| ☐ Yes ☐ No | | | | | | | | | | | | | |
| Accounting method: Cash Cash Other (specify) Yes No Does the corporation file under a calendar year? (If no, what is the fiscal year?) | | | | | | | | | | | | | |
| | | | der a cal | endar yea | ir? (If no, u | that is the fis | cal year?) | | | | | | |
| | n Specific Ques | | 1 | | 2:1 1 1 | 1.1 | 1 | | 12 | | | | |
| ☐ Yes ☐ No | Did the corpora | | | | | | | nutes ma | intained? | | | | |
| Yes No | Was the corpora | | | | | | | - C | untion on | an ostato? | | | |
| ☐ Yes ☐ No☐ Yes ☐ No☐ | Is any sharehold | | _ | | | | | | | stock issued and | 1 | | |
| | outstanding of | any foreign o | or domes | stic corpoi | ration? | | | | | | | | |
| ☐ Yes ☐ No | profit, loss, or c | | | | | | | | | of 50% or more | in the | | |
| ☐ Yes ☐ No | Did the corpora | | | | | | | | | | | | |
| ☐ Yes ☐ No | Did the corpora | | - | | | | | | | of the tax year? | | | |
| ☐ Yes ☐ No | | | • | | | | | | | ied to reduce am | ount of | | |
| ☐ Yes ☐ No | Was the corpora | ntion's S elec | tion tern | ninated or | revoked o | during the v | rear? | | | | | | |
| ☐ Yes ☐ No | | | | | | | | uthority (| over a fina | ancial account in | a foreign | | |
| ☐ Yes ☐ No | Was there a dist | ribution of r | roperty | or a trans | fer (by sale | e or death) o | of a shareholde | r interest | during th | ne tax vear? | | | |
| | | | | | | | | | 8 | | | | |
| ☐ 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 | | | | | ompensatio | n to any individ | dual? | | | | | |
| ☐ Yes ☐ No | Did the corpora | tion have a l | Paycheck | · Protectio | n Progran | n (PPP) loar | n that was forgi | ven in 20 | 23? | | | | |
| ☐ Yes ☐ No | At any time dur services); or (b) | | | | | | | | | payment for pro l asset)? | perty or | | |
| Principal Sh | areholders Owi | | | | • | | | | | | | | |
| | | Tax ID nu | | | | | | | Ownersh | | U.S. | | |
| Name/Title | | (SSN or E | IN) | Address | | | | | percenta | ge stock basis | citizen? | | |
| | | | | | | | | | | \$ | | | |
| | | | | | | | | | | \$ | | | |
| | | | | | | | | | | \$ | | | |
| How many s | nareholders were | there on the | last day | of the ve | ar? | | | | | | | | |
| | S – Provide the fo | | | | | was an offic | cer or 2% or mor | e owner o | f the corpo | ration during the | vear | | |
| | | g | 1 | insurance | 1 | ntributions | Distributions | | der loans | Loans repaid by o | | | |
| Shareholder/O | fficer name | Wages paid | premiui | ns paid | from shar | eholder | to shareholder | eholder to corpora | | ration to shareholder | | | |
| | | | | | | | | | | | | | |
| All Clients – | Additional inform | ation and doc | uments re | eauired | | New Clie | nts — <i>Additiona</i> | l informati | on and do | cuments required | | | |
| | business income, | | | | ır (per | Date incor | | | | | | | |
| books), bala | nce sheet, deprec | iation schedu | ile per bo | oks, and o | casĥ | | corporation | | Corpora | ation state domic | cile | | |
| | on of all business l | | | | | | corporation elec | ction | | | | | |
| | oration has emplorm 941, and any | | | | | • Provide | a copy of the A | | Incorpora | ation, bylaws, an | d any | | |
| | oration made pay | | | | | corporat | e resolutions. | | | | | | |
| contractors, | provide copies of | Form 1099-1 | VEC issu | ed. | | | | | | lles for book, tax | | | |
| | holders live in a c | | | | | • Enclose a | copies of return a copy of IRS Fo | orm 2553. | ast two yo Election bu | ears, including st a Small Business | are returns. | | |
| | States, provide details. The corporation may be subject to withholding requirements. • Enclose a copy of IRS Form 2555, Election by a Small Business Corporation, and IRS acceptance. | | | | | | | | | | | | |

| S Corporatio | n Balance Sheet | | | | | | |
|--|--|-----------------------|--|---|----------------|----|--|
| | Corporation assets at year end | | | Corporation debts and equity at year end | | | |
| Bank account | account end of year balance \$ Accou | | | nts payable at year end | \$ | | |
| Accounts rece | eivable at end of year | \$ | Payabl | es less than one year | \$ | | |
| Inventories | · | \$ | Payabl | es more than one year | \$ | | |
| Loans to shar | eholders | \$ | Mortga | ages, notes payable | \$ | | |
| Mortgages an | d loans held by corporation | \$ | Loans | from shareholders | \$ | | |
| Stocks, bonds | , and securities | \$ | Capita | l stock (common) | | \$ | |
| Other current | assets (include list) | \$ | Retain | ed earnings | | \$ | |
| S Corporation Income (include all Forms 1099-K received) | | | | | | | |
| Gross receipts | s or sales | \$ | Dividend income (include all 1099-DIV Forms) | | OIV Forms) | \$ | |
| Returns and a | | \$() | Capita | l gain/loss (include all 1099-E | \$ | | |
| Interest incon | ne (include all 1099-INT Forms) | \$ | Other income (loss) (include a statement) | | | \$ | |
| S Corporatio | n Cost of Goods Sold (for manufactur | ers, wholesalers, and | l busines | ses that make, buy, or sell good | is) | | |
| | peginning of the year | \$ | | als and supplies | , | \$ | |
| Purchases | 0 0 | \$ | | ory at the end of the year | | \$ | |
| Cost of labor | | \$ | | , | | • | |
| S Corporatio | n Expenses | ' | | | | | |
| Advertising | P | \$ | Meals - | – business | | \$ | |
| Annual corpo | oration fees | \$ | _ | supplies | | \$ | |
| Bad debts | | \$ | - | ization costs | | \$ | |
| Bank charges | | \$ | | n and profit sharing plans – | employee | \$ | |
| Business licer | ises | \$ | 1 | n and profit sharing plans – s | \$ | | |
| Cleaning/jan | itorial | \$ | | Professional education and training | | \$ | |
| Commissions | and fees | \$ | Rent o | r lease – car, machinery, equi | \$ | | |
| Compensation of officers | | \$ | Rent o | r lease – other business prop | erty | \$ | |
| Contract labo | r (include Forms 1099-NEC) | \$ | Rent p | aid | • | \$ | |
| Employee ber | nefit programs | \$ | Repair | s and maintenance | | \$ | |
| Entertainmen | t (not deductible) | \$ | Salarie | s and wages (include Forms V | V-2) | \$ | |
| Health care p | lans – employee | \$ | Taxes – payroll | | | \$ | |
| Health care p | lans – shareholder | \$ | Taxes – property | | | \$ | |
| Insurance (ot) | aer than health insurance) | \$ | Taxes – sales | | | \$ | |
| Interest – bus | iness credit cards | \$ | Telephone | | | \$ | |
| Interest – bus | iness loans/credit lines | \$ | Utilities | | | \$ | |
| Interest – mo | tgage | \$ | Other expense | | | \$ | |
| Internet servi | | \$ | Other expense | | | \$ | |
| Legal and pro | ofessional services | \$ | Other expense | | | \$ | |
| Car Expense | S (use a separate form for each vehicle) | | | | | | |
| Make/Model | | | | Date car placed in service | / / | | |
| ☐ Yes ☐ No Car available for personal use during off-duty hours? | | | | | | | |
| ☐ Yes ☐ No | Yes No Do you (or your spouse) have any other cars for personal use | | | Did you trade in your car this year? ☐ Yes ☐ No | | | |
| ☐ Yes ☐ No Do you have evidence? | | | | Cost of trade-in | Trade-in value | | |
| ☐ Yes ☐ No Is your evidence written? | | | | \$ | \$ | | |
| Mileage | | | | | ual Expenses | | |
| Beginning of year odometer | | | | Gas/oil | \$ | | |
| End of year odometer | | | | Insurance \$ | | | |
| Business mileage | | | | Parking fees/tolls \$ | | | |
| Commuting 1 | | | Registration/fees | \$ | | | |
| Other mileage | | | | Repairs | \$ | | |
| Generally, yo | enerally, you can use either the standard mileage rate or actual expenses to calculate the deductible costs of operating your car for business | | | | | | |

Generally, you can use either the standard mileage rate or actual expenses to calculate the deductible costs of operating your car for business purposes. However, to use the standard mileage rate, it must be used in the first year the car is available for business. In later years, you can 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 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, p | lease provide a state | ment with details) | | | |
| ☐ Yes ☐ No | Did the corporation | pay expenses to m | nake it accessible b | y individuals with | disabilities? | | | |
| ☐ Yes ☐ No | Did the corporation | pay any FICA on | employee wages fo | or tips above minir | num 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 | |
| | | \$ | | | | \$ | | |
| | | \$ | | | | \$ | | |
| | | \$ | | | | \$ | | |
| | | | \$ | | | | | |
| | | \$ | | L | | * | | |

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.

| D : D !: | | | |
|----------|-------|------|--|
| Taxpayer | Title | 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.