S Corporation Tax Organizer

(See next page for Organizer)



Bonnet Hamilton CPAs, LLC 14530 East Broad Street Reynoldsburg, OH 43068 614-947-1700

Use a separate	oroanizer	for each	S cor	noratio

S Corporation	n General Infor	mation									
Legal name of S corporation EIN -											
S corporation	address 🗖 (chec	k if new addre	ess)								
S Corporation	n Representative				Titl	e					
•	-				Em	ail			Phone ()	
☐ Yes ☐ No	Did the corpora	tion have a o	change of	business	name du	ring the yea	r?				
Principal bus	iness activity								Date bus	iness started	/ /
Principal pro	duct or service								Date bus	siness closed	/ /
☐ Yes ☐ No Was the primary purpose of the S corporation's activity to realize a pro t?											
Accounting n	nethod: 🖵 Cash			, ,,,							
☐ Yes ☐ No	1		der a cale	ndar yea	ir ? (If no, น	hat is the fis	cal year?)				
	n Specific Ques										
☐ Yes ☐ No	Did the corpora							inutes ma	intained?		
☐ Yes ☐ No	Was the corpora										
☐ Yes ☐ No	Is any sharehole										
□ Yes □ No	Did the corpora outstanding of					directly or i	ndirectly, 50% (or more of	f the total	stock issued and	l
□ Yes □ No										of 50% or more	in the
	pro t, loss, or c										
☐ Yes ☐ No	Did the corpora									£414	
☐ Yes ☐ No☐ Yes ☐ No☐	Did the corpora		•							ed to reduce am	ount of
,	principal?							n nau terr	nis modi	ed to reduce and	
☐ Yes ☐ No	Was the corpora							.1		. 1	
☐ Yes ☐ No	country?									ncial account in	a foreign
☐ Yes ☐ No	Was there a dist					e or death) o	of a shareholde	r interest	during th	e tax year?	
□ Yes □ No	Does the corporation satisfy the following conditions? 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	Did the corpora If yes, include a					ompensatio	n to any individ	dual?			
☐ Yes ☐ No	Did the corpora	tion have a I	Paycheck 1	Protectio	n Progran	n (PPP) loar	n that was forgi	iven in 20	22?		
Principal Sh	areholders Owi	nership Info	rmation								
Name/Title		Tax ID nu (SSN or E.		Address					Ownersh percentag	<i>'</i>	U.S. citizen?
										\$	
										\$	
										\$	
										s	
Цом тапу с	hareholders were	there on the	last day	of the we	ar?						
	's – <i>Provide the fo</i>					n was an offic	cer or 2% or mor	o owner of	f the corno	ration during the v	ıoar
Onarcholaci	3 Trovide the lo	nowing inion	Health in		T	ntributions	Distributions	T	der loans	Loans repaid by o	
Shareholder/O	fficer name	Wages paid	premium		from shar		to shareholder	to corpor		to shareholder	
All Clients –	Additional inform	ation and doc	umente rec	nuired		New Clie	nts — Additiona	l informati	on and doo	cuments required	
				-	r (por			i illioilliati	on and doc	uments required	
 Provide the business income/ nancial statements for the year (per books), balance sheet, depreciation schedule per books, and cash reconciliation of all business bank accounts with ending cash balances. If the S corporation has employees, provide a copy of Form W-3, 			Date incorporated State of incorporation								
			Date of S corporation election								
			Corporation state residence								
Form 940, Form 941, and any state quarterly tax ling reports.				Provide a copy of the Articles of Incorporation, bylaws, and any							
 If the S corporation made payments of \$600 or more to independent contractors, provide copies of Form 1099-NEC issued. 			corporate resolutions.								
• If any shareholders live in a different state or outside the United				 Provide a copy of the depreciation schedules for book, tax, and AMT. Provide copies of returns for the last two years, including state returns. 							
	ide details. The co	rporation ma	ıy be subje	ect to wit	hholding						
requirement	requirements. Enclose a copy of IRS Form 2553, Election by a Small Business Corporation,										

S Corporatio	n Balance Sheet						
	Corporation	assets at year end			Corporation debts a	nd equity at year en	d
Bank account	end of year balan	ce	\$	Accounts payable at year end			\$
Accounts rece	eivable at end of y	ear	\$	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 co	orporation	\$	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	eived)				
Gross receipts	s or sales		\$	Divide	nd income (include all 1099-I	OIV Forms)	\$
Returns and a	allowances		\$()	Capita	l gain/loss (include all 1099-E	3 Forms)	\$
Interest incom	ne (include all 1099	-INT Forms)	\$	Other	income (loss) (include a staten	nent)	\$
S Corporatio	n Cost of Goods S	Sold <i>(for manufacture</i>	ers, wholesalers, and	l busines	ses that make, buy, or sell good	is)	
Inventory at l	peginning of the ye	ear	\$	Materi	als and supplies		\$
Purchases			\$	Invent	ory at the end of the year		\$
Cost of labor			\$				
S Corporatio	n Expenses						
Advertising	•		\$	Meals	for business in restaurants (1	00% deduct.)	\$
Annual corpo	oration fees		\$	Meals	- other business meals (50%	deduct.)	\$
Bad debts			\$	Of ce	supplies	•	\$
Bank charges			\$		ization costs		\$
Business licer			\$		n and pro t sharing plans -	employee	\$
Cleaning/jan	itorial		\$	Pensio	n and pro t sharing plans -	shareholder	\$
Commissions and fees		\$	Professional education and training			\$	
Compensation of of cers		\$	Rent o	r lease – car, machinery, equi	pment	\$	
Contract labor (include Forms 1099-NEC) \$		\$	Rent o	r lease – other business prop	erty	\$	
Employee bene t programs \$		\$	Rent p	aid		\$	
*Entertainment \$		\$	Repair	s and maintenance		\$	
Health care plans – employee \$		\$	Salarie	s and wages (include Forms V	V-2)	\$	
Health care plans – shareholder		\$	Taxes -	- payroll		\$	
Insurance (other than health insurance)		\$	Taxes – property			\$	
	iness credit cards		\$	Taxes – sales			\$
Interest – bus	iness loans/credit	lines	\$	Telephone			\$
Interest - mo	rtgage		\$	Utilitie	es	\$	
Internet servi			\$	Other expense		\$	
	ofessional services		\$	Other	expense		\$
	nt is no longer dec						
Car Expense	S (use a separate fo	rm for each vehicle)					
Make/Model					Date car placed in service / /		
☐ Yes ☐ No		personal use during					
☐ Yes ☐ No		o 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 evid				Cost of trade-in	Trade-in value	
☐ Yes ☐ No Is your evidence written?			s s				
		Mileage				tual Expenses	
Beginning of year odometer				Gas/oil	\$		
	End of year odometer			Insurance	\$		
Business mile		Jan. – June	July–Dec.		Parking fees/tolls	\$	
Commuting					Registration/fees	\$	
Other mileag					Repairs	\$	
					calculate the deductible cost		
purposes. Ho	wever, to use the	standard mileage ra	ite, it must be used	in the	rst year the car is available	ior business. In la	ter 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 S	old or Disposed of During Year					
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	□ 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	No Did the corporation own any residential rental buildings providing quali ed 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			
Toy Dot	urn Proporation					

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 veriex cation 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 af rm 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 led for you. If you terminate this engagement before completion, you agree to pay a fee for work completed. A retainer is required for preparation of late returns.
- You should keep a copy of the tax return and any related tax documents. You may be assessed a fee if you request a copy in the future.

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

Taxpayer	Title	Date	

Privacy Policy

The nature of our work requires us to collect certain nonpublic information. We collect nancial and personal information from applications, worksheets, reporting statements, and other forms, as well as interviews and conversations with our clients and af liates. 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 rm has procedures and policies in place to protect your con dential information. We restrict access to your con dential information to those within our rm who need to know in order to provide you with services. We will not disclose your personal information to a third party without your 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.