

Strategic Tax & Accounting, LLC

S Corporation Tax Organizer

Preparation Method: Mail In _____ Drop Off _____ Waiting _____

Tax Year: _____

If you are a new client, please Attach prior year S Corporation tax return (Form 1120S)

Legal Name of Entity: _____ Employer ID _____

Address: _____ Suite: _____
City: _____ State: _____ Zip: _____ Phone: _____

Principal Industry: _____ Principal Product/Service: _____

Business Start/Organization Date: _____ Date of S election (Form 2553): _____

State of Incorporation: _____ State Withholding Number: _____

States In Which You Do Business: _____

Books In Care of: _____

Address: _____

City: _____ State: _____ Zip _____

Contact person: _____

Phone Number: _____

Did you purchase equipment, tools, machinery or other items with a useful life of over 1 year
for use in the business? Yes _____ No _____

If yes:

Items: Date Purchased: Cost:

1) _____

2) _____

3) _____

4) _____

5) _____

Shareholder Information:

Shareholder 1

Social Security #	_____
First Name	_____
Middle Initial	_____
Last Name	_____
Address	_____
City	_____ State _____
Zip	_____
Phone	_____
Shares at Start of Year	_____
Shares transferred (+/-)	_____
Shares at End of Year	_____

Shareholder 2

Social Security #	_____
First Name	_____
Middle Initial	_____
Last Name	_____
Address	_____
City	_____ State _____
Zip	_____
Phone	_____
Shares at Start of Year	_____
Shares transferred (+/-)	_____
Shares at End of Year	_____

Shareholder 3

Social Security #	_____
First Name	_____
Middle Initial	_____
Last Name	_____
Address	_____
City	_____ State _____
Zip	_____
Phone	_____
Shares at Start of Year	_____
Shares transferred (+/-)	_____
Shares at End of Year	_____

Shareholder 4

Social Security #	_____
First Name	_____
Middle Initial	_____
Last Name	_____
Address	_____
City	_____ State _____
Zip	_____
Phone	_____
Shares at Start of Year	_____
Shares transferred (+/-)	_____
Shares at End of Year	_____

Officer Responsible for Tax Return:

Officer Name: _____

Officer SSN: _____

Officer Title: _____

Officer Phone: _____

Address: _____
City _____ State _____ Zip _____

If you use bookkeeping software or a bookkeeper, attach a Profit & Loss Report and Balance Sheet

OR

Fill out the below information

OR

If you have a bank account and credit card out of which you do all business transactions, you may attach 12 months statements and check copies for those accounts. Additional compilation fee will be added to the cost of completing the tax return.

Income

Gross Reciepts: _____
 Less Returns: _____
 Interest Income: _____
 Dividends: _____
 Investment Sale: _____

Cost of Good Sold

Do you manufacture and/or sell goods? If so:
 Beginning Inventory (January 1): _____
 Purchased Inventory (less personal use) _____
 Cost of Labor: _____
 Ending Inventory (December 31): _____

Deductions

Accounting	_____	Insurance	_____	Salary/Wages	_____
Advertising	_____	P&C	_____	Sales Expense	_____
Automobile	_____	Liability	_____	Security	_____
Bad Debts	_____	Workes Comp	_____	Software	_____
Bank Charges	_____	Other	_____	Supplies & Materials	_____
Cell Phone	_____	Janitorial	_____	Website	_____
Commissions	_____	Cleaning	_____	Taxes	_____
Computer	_____	Legal & Prof	_____	City	_____
Consultants	_____	Marketing	_____	Franchise	_____
Collection costs	_____	Meals & Ent	_____	Property	_____
Delivery	_____	Meeting/Seminar	_____	Personal Property	_____
Discounts given	_____	Office Exp	_____	Licenses	_____
Dues	_____	Parking & Tolls	_____	Telephone	_____
Ed & Training	_____	Payroll Process	_____	Tools	_____
Empoyee Benefits	_____	Permits/Licenses	_____	Travel	_____
Freight	_____	Postage/Shipping	_____	Uniforms	_____
Fuel	_____	Printing	_____	Utilities	_____
Gifts	_____	Recruiting	_____	Waste Removal	_____
Health Ins	_____	Repairs & Maint	_____	Other	_____
Ind. Contractors	_____	Rent	_____		_____
Interest	_____	Building	_____		_____
Internet	_____	Equipment	_____		_____

Balance Sheet

Assets

Cash	_____
Accounts Receivable	_____
Less: Bad Debts	_____
Inventories	_____
Other Current Assets	_____
Inventory	_____
Loans to Shareholders	_____
Notes Receivable	_____
Other Investments	_____
Depreciable Assets	_____
Less: Accumulated Depr	_____
Depletable Assests	_____
Less: Accumulated Depl	_____
Land	_____
Intangible Assets	_____
Less: Accumulated Amort	_____
Other Assets	_____
Total Assets	=====

Liabilities

Accounts Payable	_____
Short-term Notes Payable	_____
Other Current Liabilities	_____
Non-recourse Loans	_____
Loans From Shareholders	_____
Long-term Notes Payable	_____
Other Liabilities	_____
Total Liabilities	=====
Equity	
Capital Stock	_____
Paid-in Capital	_____
Retained Earnings	_____
Adjustment to S/H equity	_____
Total Equity	=====
Total Liabilities & Capital	=====