INTAKE – Business Return

Complete and return this form if you own a business.

Please Provide ___Balance Sheet
___Profit & Loss (Income Statement)
___Prior 2 Years Tax Return(s) *(if prepared elsewhere)*
___List of Fixed Assets (Buildings & Capitalized Assets)
___Depreciation Schedule for all Depreciable Assets *(except assets acquired in current year)*
___Organizational Documents (Bylaws, Shareholder Agreements, Articles of Incorporation, State Filings & Account Numbers, EIN Paperwork, etc.)

**** Additional items may be requested for the successful completion of work requested***

Business Name: _____ **Tax Year:** _____

SELECT Business Type:	Sections to Complete	IRS References
***Sole Proprietorship** ***Single Member LLC** *(Schedule C)*	**REQUIRED:** Section A, B, C, D, E, F, O **If applicable:** Section G, H, I, J, N	Instructions: https://www.irs.gov/pub/irs-pdf/i1040sc.pdf Form: https://www.irs.gov/pub/irs-pdf/f1040sc.pdf
***Partnership** ***Multi-Member LLC** *(Form 1065)*	**REQUIRED:** Section A, B, C, D, E, F, O **If applicable:** Section G, H, I, J, N **REQUIRED for Partnership:** Section K	Instructions: https://www.irs.gov/pub/irs-pdf/i1065.pdf Form: https://www.irs.gov/pub/irs-pdf/f1065.pdf
***Subchapter S Corporation** *(Form 1120-S)*	**REQUIRED:** Section A, B, C, D, E, F, O **If applicable:** Section G, H, I, J, N **REQUIRED for S-Corp:** Section L	Instructions: https://www.irs.gov/pub/irs-pdf/i1120s.pdf Form: https://www.irs.gov/pub/irs-pdf/f1120s.pdf
***Corporation** *(Form 1120)*	**Required:** Section A, B, C, D, E, F, O **If applicable:** Section G, H, I, J, N **Required for C-Corp:** Section M	Instructions: https://www.irs.gov/pub/irs-pdf/i1120.pdf Form: https://www.irs.gov/pub/irs-pdf/f1120.pdf

SECTIONS:

A – Business Contact Information
B – Business Information
C – Ownership Information
D – Business Questions
E – Financial Data – Income
F – Financial Data – Expenses
G – Business Use of Home
H – Depreciation
I – Inventory/Cost of Goods
J – Vehicle Business Use
K – Partnership Information
L – S-Corp Information
M – C-Corp Information
N – Notes/Comments
O – Certification Signature

Please do not hesitate to contact us if you have any questions.

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*** SECTION A * - Required**

Business

Name of Business ________________________________ Doing Business as: ______________________________

Date Formed/Filed: ____________ State Filed: ____________ Date Business Started Operating ______________

Address ____ City ____________________ State _____ Zip _________

Business E-Mail _________________________________ Business Phone ______________ Fax ______________

Primary Contact

Name ____ Title ________________________________

Address ____ City ____________________ State _____ Zip _________

E-Mail ____ Phone______________________

Alternate Contact

Name ____ Title ________________________________

Address ____ City ____________________ State _____ Zip _________

E-Mail ____ Phone______________________

*** SECTION B * - Required**

Employer Identification Number _________________________ Product or Service ____________________________

Description of Principal Business Activity ____

Accounting Method: Primary Contact _______________________________

☐ Cash ☐ Accrual ☐ Other (Specify)____________________

*** SECTION C * - Required**

OWNERSHIP INFORMATION *(Please list ALL partners – Use an addition sheet if necessary)*

Did any partnership interest change during the current year? _____ If so, please explain ______________________

____

At any time during the year did the company and/or partner(s) have an interest in a financial account in a foreign country? Yes / No

Name ____ Partner's Social Security # ____________________

Address ____ City ____________________ State _____ Zip ___________

Ownership Interest __________% Profit Share __________% Loss Share __________% Active Member? Yes / No

Partner's Original Capital Contribution ______________ Additional Contribution(s) ___________________________

Name ____ Partner's Social Security # ____________________

Address ____ City ____________________ State _____ Zip ___________

Ownership Interest __________% Profit Share __________% Loss Share __________% Active Member? Yes / No

Partner's Original Capital Contribution ______________ Additional Contribution(s) ___________________________

Name ____ Partner's Social Security # ____________________

Address ____ City ____________________ State _____ Zip ___________

Ownership Interest __________% Profit Share __________% Loss Share __________% Active Member? Yes / No

Partner's Original Capital Contribution ______________ Additional Contribution(s) ___________________________

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*** SECTION D * - Required**

- Did you "materially participate" in the operations of this business during the tax year? _____Yes _____No
- Did you start or acquire this business this tax year? _____Yes _____No

If you paid $600 or more to subcontractors, you must file form 1099-NEC for their labor cost by January 31st.

- Did you make any payments in this tax year that would require you to file Form(s) 1099? _____Yes _____No
- If "yes", did you or will you file required Form(s) 1099? _____Yes _____No

*** SECTION E * - Required - Financial Information**

INCOME

Gross Receipts/Sales _____ Returns/Allowances _____

*** SECTION F * - Required - Financial Information**

EXPENSES

Advertising/Marketing _____
Bad Debts _____
Bank Fees _____
Car/Truck Expense _____
Commissions/Fees _____
Continuing Education _____
Contract Labor *(paid to individual)* _____
Dues/Subscriptions _____
Employee Benefit Programs _____
Equipment *(under $2,500 per item)* _____
Insurance _____
Interest _____
Interest – Mortgage _____
Janitorial _____
Laundry/Cleaning _____
Legal/Professional _____
Licenses/Permits _____
Office Expense _____
Outside Services *(paid to business)* _____
Parking/Tolls _____
Postage _____
Printing/Copy _____
Rent/Lease - Property _____
Rent/Lease – Vehicle, equipment _____
Repairs/Maintenance _____
Security _____

Self-Employed Health Ins Premiums _____
Software/Support _____
Supplies _____
Taxes _____
Taxes – Payroll _____
Tools/Small Equipment_____
Travel - Meals _____
Meals *(report 100%)* _____
Uniforms _____
Utilities *(other)* _____
-Electric/Gas _____
-Internet _____ Bus. Use % _____
-Telephone _____ Bus. Use % _____
-Water/Trash _____
Wages *(non-officer)* _____
Compensation to officers _____
Other: *(specify expense)*
_____ _____
_____ _____
_____ _____
_____ _____
_____ _____
_____ _____
_____ _____
_____ _____
_____ _____

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*** SECTION G * - If Applicable**

BUSINESS USE OF HOME Do you have a home office? Yes / No *(if yes, complete this section)*

Form 8829 – Instructions: https://www.irs.gov/pub/irs-pdf/i8829.pdf Form: https://www.irs.gov/pub/irs-pdf/f8829.pdf

Home daycare? Yes/No *(Complete Daycare Intake if yes)*
Total Square Footage of Office _____
Total Square Footage of home _____
Mortgage Interest _____
Real estate taxes _____
Insurance _____
Rent _____
Repairs/Maintenance _____
Utilities (total) _____
Other expenses _____

DIRECT EXPENSES FOR HOME OFFICE:

_____ _____
_____ _____
_____ _____

DEPRECIATION OF HOME:

Basis/Fair market value _____
Value of land _____
Date purchased _____
Date began using for business _____
Prior depreciation taken _____

*** SECTION H * - If Applicable**

DEPRECIATION Any purchases that need to be depreciated? Yes / No *(if yes, complete this section)*

Form 4562 – Instructions: https://www.irs.gov/pub/irs-pdf/i4562.pdf Form: https://www.irs.gov/pub/irs-pdf/f4562.pdf

1) Description of property _____
Date purchased _____
Cost/Basis _____

2) Description of property _____
Date purchased _____
Cost/Basis _____

3) Description of property _____
Date purchased _____
Cost/Basis _____

4) Description of property _____
Date purchased _____
Cost/Basis _____

*** SECTION I * - If Applicable**

INVENTORY – COST OF GOODS SOLD Do you have an inventory? Yes / No *(if yes, complete this section)*

Inventory at beginning of year _____
Purchases less items for personal use _____
Cost of Labor (not paid to yourself) _____
Materials and Supplies _____
Other Costs _____
Inventory at end of year _____

*** SECTION J * - If Applicable**

VEHICLE Do you use your vehicle for business? Yes / No *(if yes, complete this section)*

Topic no 510 – Business use of car – Reference https://www.irs.gov/taxtopics/tc510
Publication 462 – Travel, Gift, and Car Expense – Reference https://www.irs.gov/publications/p463

Date placed in service for business _____
Year, Make, Model _____
Business miles for tax year _____
Total miles for tax year _____
Was vehicle available for personal use? Yes / No
Other vehicle available for personal use? Yes / No

REQUIRED – Do you have evidence to support your deduction? Yes / No
If "Yes", is the evidence written? Yes / No

*****YOU NEED TO KEEP WRITTEN DOCUMENTATION TO SUPPORT THIS DEDUCTION – E.g. MILEAGE LOG *****

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*** SECTION K * - Partnership (Form 1065)**

PARTNERSHIP - ADDITIONAL INFORMATION Detailed explanations can be found on the IRS website.

EXPENSES

Bad Debts _____
Charitable Contributions _____
Depletion _____
Guaranteed Payment to Partners _____
Retirement plans _____
Other Expense (describe) _____
Other Expense (describe) _____
Other Expense (describe) _____

OTHER INFORMATION

*What type of entity is filing this return? (check applicable box)

___ Domestic general partnership
___ Domestic limited partnership
___ Foreign partnership
___ Domestic limited liability company
___ Domestic limited liability partnership

*Business Activity Code _____
*Business Activity _____
*Product or Service _____
*Partnership Representative _____

At the end of the tax year:

*Did any foreign or domestic corporation, partnership (including any entity treated as a partnership), trust, or tax-exempt organization, or any foreign government own, directly or indirectly, an interest of 50% or more in the profit, loss, or capital of the partnership? _____Yes _____No

At the end of the tax year, did the partnership:

*Own directly 20% or more, or own, directly or indirectly, 50% or more, of the total voting power of all classes of stock entitled to vote of any foreign or domestic corporation? _____Yes _____No

*Own directly an interest of 20% or more, or own, directly or indirectly, an interest of 50% or more in the profit, loss, or capital in any foreign or domestic partnership (including an entity treated as a partnership) or in the beneficial interest of a trust? _____Yes _____No

*Is this partnership a publicly traded partnership, as defined in section 469(k)(2)? _____Yes _____No

*During the tax year, did the partnership have any debt that was canceled, was forgiven, or had the terms modified so as to reduce the principal amount of the debt? _____Yes _____No

*During the tax year, did the partnership have any debt that was canceled, was forgiven, or had the terms modified so as to reduce the principal amount of the debt? _____Yes _____No

*During the current or prior tax year, did the partnership distributed any property received in a like-kind exchange or contributed such property to another entity (other than disregarded entities wholly owned by the partnership throughout the tax year) ? _____Yes _____No

*Does the partnership have any foreign partners? _____Yes _____No

*At any time during tax year, did the partnership (a) receive (reward, award, or payment for property or services); or (b) sell, exchange, or otherwise dispose of a digital asset (or financial interest in a digital asset)? _____Yes _____No.

PARTNERS' CAPITAL ACCOOUNTS

*Capital Contributed Cash _____
Property _____

*Distribution Cash _____
Property _____

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*** SECTION L * - S Corporation (Form 1120-S)**

S-CORP - ADDITIONAL INFORMATION Detailed explanations can be found on the IRS website.

*S election effective date _____

*Date Incorporated _____

*Number of Shareholders _____

EXPENSES

Bad Debts _____

Charitable Contributions _____

Depletion _____

Energy Efficient Commercial Building Deduction -

Discuss with preparer

Pension, Profit-Sharing _____

Other Expense (describe) _____

Other Expense (describe) _____

OTHER INFORMATION

*Business Activity Code _____

*Business Activity _____

*Product or Service _____

*At any time during the tax year, was any shareholder of the corporation a disregarded entity, a trust, an estate, or a nominee or similar person? _____Yes _____No

At the end of the tax year, did the corporation:

*Own directly 20% or more, or own, directly or indirectly, 50% or more of the total stock issued and outstanding of any foreign or domestic corporation? _____Yes _____No

Own directly an interest of 20% or more, or own, directly or indirectly, an interest of 50% or more in the profit, loss, or capital in any foreign or domestic partnership (including an entity treated as a partnership) or in the beneficial interest of a trust? _____Yes _____No

During the tax year, did the corporation have any non-shareholder debt that was canceled, was forgiven, or had the terms modified so as to reduce the principal amount of the debt? _____Yes _____No

During the tax year, was a qualified subchapter S subsidiary election terminated or revoked? _____Yes _____No

*At any time during tax year, did the partnership (a) receive (reward, award, or payment for property or services); or (b) sell, exchange, or otherwise dispose of a digital asset (or financial interest in a digital asset)? _____Yes _____No

*Any loans from shareholder(s)? _____Yes _____No

Beginning of tax year balance _____

End of tax year balance. _____

SHAREHOLDERS' ANALYSIS

*Contributions Cash _____

*Distributions Cash _____

Property _____

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*** SECTION M * - C Corporation (Form 1120)**

CORPORATION - ADDITIONAL INFORMATION Detailed explanations can be found on the IRS website.

INCOME

Dividends Income _____

Interest Income _____

Gross Rents Income _____

Gross Royalties Income _____

Other Income (describe) _____

Other Income (describe) _____

Capital Gain Net Income -
Discuss with preparer

EXPENSES

Bad Debts _____

Charitable Contributions _____

Depletion _____

Energy Efficient Commercial Building Deduction -
Discuss with preparer

Pension, Profit-Sharing _____

Other Expense (describe) _____

Other Expense (describe) _____

OTHER INFORMATION

*Business Activity Code _____ *Business Activity -_____

*Product or Service _____

At the end of the tax year:

*Did any foreign or domestic corporation, partnership (including any entity treated as a partnership), trust, or tax-exempt organization own directly 20% or more, or own, directly or indirectly, 50% or more of the total voting power of all classes of the corporation's stock entitled to vote? _____Yes _____No

*Did any individual or estate own directly 20% or more, or own, directly or indirectly, 50% or more of the total voting power of all classes of the corporation's stock entitled to vote? _____Yes _____No

At the end of the tax year, did the corporation:

*Own directly 20% or more, or own, directly or indirectly, 50% or more of the total voting power of all classes of stock entitled to vote of any foreign or domestic corporation? _____Yes _____No

*Own directly an interest of 20% or more, or own, directly or indirectly, an interest of 50% or more in any foreign or domestic partnership (include entities treated as partnerships) or in beneficial interest of a trust? _____Yes _____No

*During this tax year, did the corporation pay dividends (other than stock dividends and distributions in exchange for stock) in excess of the corporation's current and accumulated earnings and profits? _____Yes _____No

*At any time during this tax year, did one foreign person own, directly or indirectly, at least 25% of the total voting power of all classes of the corporation's stock entitled to vote or at least 25% of the total value of all classes of the corporation's stock? _____Yes _____No

*Enter the number of shareholders at the end of the tax year (if 100 or fewer) _____

*Enter the available NOL carryover from prior tax years _____

* During this tax year, did the corporation have an 80%-or-more change in ownership, including a change due to redemption of its own stock? _____Yes _____No

* At any time during this tax year, did the corporation (a) receive a digital asset (as a reward, award, or payment for property or services); or (b) sell, exchange, or otherwise dispose of a digital asset (or a financial interest in a digital asset)? _____Yes _____No

RETAINED EARNINGS

*Increase in Retained Earnings _____

*Decrease in Retained Earnings Cash _____ Stock _____ Property _____

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*** SECTION N ***

COMMENTS/NOTES *(please list any changes or additional information for your business that may pertain to the preparation of the tax return)*

_____

_____

_____

_____

_____

_____

_____

_____

*** SECTION O * - REQUIRED**

I certify that I have listed all income, all expenses, and I have documentation to prove the figures entered on this worksheet for preparation of m income tax return.

Name (Print): _____ **Signature:** _____

Date: _____ **Title:** _____

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