



**Tax Organizer for SMALL BUSINESS for 2017 Tax Returns**

*Please provide a copy of the last 3 years of tax returns if we did not prepare your previous tax return.*

**A. COMPANY INFORMATION**

Legal Business Name: \_\_\_\_\_

Business Trade or DBA Name: \_\_\_\_\_

Federal EIN: - Business Start Date: / / State Registered: \_\_\_\_\_

***Please provide IRS EIN Assignment Letter (form SS-4)***

Business Physical Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Mailing Address, if different from Physical Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

Entity Type:  S Corp  C Corp  LLC  Sole Proprietor

***If S Corp, provide IRS S Corp approval letter***  Other-

Was a previous year tax return filed?  Yes  No

If not prepared by our firm, who previously prepared your return? \_\_\_\_\_

**B. OWNER/MEMBER/PARTNER INFORMATION**

1. Owner Name: \_\_\_\_\_ % of Ownership \_\_\_\_\_

Social Security Number: - - Date of Birth: / /

Owners Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

2. Owner Name: \_\_\_\_\_ % of Ownership \_\_\_\_\_

Social Security Number: - - Date of Birth: / /

Owners Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

***If you have additional owners/members/partners, please attach the above information for each owner.***

**C. Notes:**



**Till & Butler** CPAs, PLLC  
 Certified Public Accountants

Business Name: \_\_\_\_\_

Tax Year: \_\_\_\_\_

**Schedule of Business Income & Expenses**

*The following should be provided if you cannot provide financials from Quickbooks or an accounting program. If you are using an accounting program, please provide us with a Balance Sheet and Profit & Loss statement, or contact us about providing your system's electronic file.*

**D. Business Income/Revenue:**

From received forms 1099-Misc	\$	
From received forms 1099-K (credit cards...)	\$	
All other income (do not include interest or dividends)	\$	
<b>Total Revenue</b>	<b>\$</b>	

**E. Cost of Goods Sold/Cost of Sales:**

Total dollar amount of all inventory at the beginning of the year	\$	
Total dollar amount of purchases during the year	\$	
Total dollar amount of all inventory at the end of the year	\$	
Total Sub-Contractors/Commissions/Closings/Direct Sales expenses	\$	

**F. Expenses (Provide the totals of your receipts for the year for each item below):**

Accounting	\$	Outside-Contract services	\$
Advertising/Marketing	\$	Parking fees and tolls	\$
Bad debts	\$	Permits and fees	\$
Bank charges	\$	Postage	\$
Cleaning and janitorial	\$	Printing	\$
Commissions	\$	Rent	\$
Computer services/supplies	\$	Repairs and maintenance	\$
Credit and collection costs	\$	Security	\$
Delivery and freight	\$	Supplies	\$
Dues and subscriptions	\$	Taxes & licenses	\$
Employee benefits	\$	Telephone	\$
Equipment rent	\$	Tools and small equipment	\$
Insurance	\$	Training and education	\$
Interest expense	\$	Uniforms	\$
Legal and professional	\$	Utilities	\$
Meals and entertainment	\$	Vehicle expenses (actual)	\$
Miscellaneous	\$	Wages-others	\$
Office expense	\$	Wages-owners/officers	\$
Other-_____	\$	Other-_____	\$

**G. Major Purchases over \$1000? Provide the following information (use additional pages as needed):**

Item:	Purchase Date:	\$ Purchase Price:
_____	_____	_____
Item:	Purchase Date:	\$ Purchase Price:
_____	_____	_____

**H. IF YOU SOLD or TRADED fixed assets during the year, please provide the details about the transaction(s)**

**I. If we did not prepare your prior year return, please provide us with a detailed depreciation schedule from your previous accountant.**

**J. Total Business Mileage:**

	<u>Make</u>	<u>Model</u>	<u>Number of Miles:</u>
Vehicle # 1-	_____	_____	# _____
Vehicle # 2-	_____	_____	# _____