

## 2018 Tax Organizer and Questionnaire for Small Business Owners

This tax organizer can be filled-out and submitted to us with the necessary documents attached. Once we receive it, we will review it and call you with any questions and set a conference date if necessary in order to complete your return.

If you use quickbooks or some other form of tracking your information, we can go from that. Please provide us an electronic copy of the files.

## **Section 1, General Information**

1.	First Year in business?
2.	Whose business is it?
3.	Principal Bus./Profession?
4.	Business Name:
5.	Business Address:
6.	City, State, Zip:
	Other Accounting Method(Circle One): Cash Basis Accrual Basis
	Employer Identification Number:
	Type of Business Entity(Circle One)?
	Sole Proprietorship Corporation Partnership LLC LLP Other:
Sec	etion 2, Income
2.	Gross Receipts or Sales \$ Returns & Allowances \$ Other Income \$
Cos	st of Goods Sold - If Applicable
4.	Inventory at Beginning of the Year \$
	Inventory at End of the Year \$
	Purchases \$
7.	Cost of Items for Personal Use \$
	Cost of Labor \$
9.	Materials and Supplies \$
	Other Costs \$

2018 Tax Questionnaire

Sec	tion 3, Expenses
2. 3. 4. 5. 6. 7. 8. 9. 10. 11. 12. 13. 14. 15. 16. 17. 18. 19. 20. 21.	Advertising Car and Truck Expenses* Commissions Employee Benefit Programs Insurance (other than health) Health Insurance Premiums for Self* Mortgage Interest (paid to banks, etc.) Other Interest Legal and Professional Office Expense Pension and Profit Sharing Plans Rent - Vehicles, Machinery, & Equipment Rent - Other Business Property Repairs Supplies Taxes - Real Estate Taxes - Other Travel Other* Total Meals and Entertainment Utilities
*A	Wages  tach a detailed schedule including miles driven for business and actual out of pocket enses.
Sec	tion 4, Additional Information
1.	Did you acquire or dispose of any business assets (including real estate) during the year? Yes No
	If yes, attach a detailed schedule, forms are following for your convenience.
2.	Did you have a home office during the year? Yes No  If Yes, Please Complete the following if not included in Section 3:  1. Rent 2. Utilities 3. Insurance 4. Janitorial 5. Misc. 6. % of exclusive business use

Form ID: OrgDp	Depreciation - Asset List	92

Preparer use only

Activity name	
HOW TO REPORT DISPOSALS: Use the	hlank line directly helow the asset information to indicate any asset disposals

HOW TO KEPORT DISPOSALS: Use the blank line directly below the asset information to indicate any asset disposals. Enter the date of the disposal and/or sale proceeds, if applicable. Enter additional information regarding the asset disposal in the comments section, such as if the asset was sold on installment, traded for other asset(s), disposed of due to casualty, or sold to a related party. See the EXAMPLE asset below.

Asset No.	Description of Property	Date in Service	Cost or Basis
	Comments	Date Sold/Disposed	Sales Price
EXAMPLE	Machinery and equipment (EXAMPLE ASSET)	11/21/11	42,500
	Collected in 5 equal payments over 2 yrs	03/09/18	20,000
	<u> </u>		
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Form	ID:	OrgDp2	

## **Depreciation - Asset Acquisitions**

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	Preparer	use only

Activity name

Use the comments section to provide additional information about the asset. Enter information such as vehicle mileage (total, commuting and business), the total and business square footage of home, home expenses (total and business portion). See the EXAMPLE asset below.

	1	Description of Asset Acquired	Date Acquired	Cost or Basis
EXAMPLE		2018 Model T - (EXAMPLE ASSET)	03/09/18	25,750
	Comments:	22,500 job-related miles, 25,000 total miles	<u> </u>	
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