Dairy Keper Co

S Corporation Tax Organizer

Use a separate organizer for each S corporation

S Corpo	ratio	n General Inform	ation									
Legal name of S corporation									EIN#			
S corpor	ration	address — (check	if new address	:)			,					
Tax Matters Individual Title												
Emai									Phone		10.	
Yes	No	Did the corporat	ion have a ch	ange of busine	ess name or a	ddress durii	ng the year?					
		ness activity										
Principa	al pro	duct or service					C.O.					
Yes		Was the primary				o realize a p	roht?					
Accoun			Accrual	Other (specif		1 . 1 !- (1 C	-12\					
Yes	No			er a calendar y	ear! (If no, w	nat is the jisci	ai year!)					
		n Specific Quest		1	ما مسمله ما نانس	aldoma vizith	a record of mir	ustos mai	ntained?	1000 P	- 10 Telephone	
Yes	No	Did the corporat Was the corpora						iules IIIai	illanieu:			
Yes	No	Is any sharehold	or in the corr	oration a disre	egarded entit	v a partners	hip, a trust, an	Scorpor	ation, or as	n estate?		
Yes Yes	No No	Did the corporat	ion own dire	ctly 20% or mo	ore, or own, o	directly or in	directly, 50% o	r more of	the total s	tock issued and		
165	140	outstanding of a	ny foreign or	domestic corp	oration?							
Yes	No	Did the corporat	tion own dire	ctly an interes	t of 20% or m	ore, or own, directly or indirectly, an interest of 50% or more in the						
		profit, loss, or ca										
Yes	No	Did the corporat	tion have any	outstanding s	shares of resti	ricted stock	at the end of th	e tax yea	the end of	the tay wear?		
Yes	No	Did the corpora	tion have any	outstandings	stock options	, warrants, 0	of Sililliar Histia	had torr	ne modifie	d to reduce am	ount of	
Yes	No	Did the corporal principal?	tion have any	non-snarenoi	der debt that	was cancen	ea, lorgiver, or	nau terr	ns moune	u to reduce aim		
Yes	No	Was the corporation's S election terminated or revoked during the year?										
Yes	No	At any time during the year, did the corporation have an interest in, or signature authority over a financial account in a foreign country?										
Yes	No	Was there a dist				e or death) c	of a shareholder	rinterest	during the	tax year?		
Yes	No	Does the corporation satisfy the following conditions? • 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 corporation	tion nav \$600	or more to an	v individual?	If ves. incl	ide a copy of F	orm 1099	-MISC for	each.	A STATE OF THE STA	
Anne and the second second	MANAGEMENT AND ADDRESS OF	AND DESCRIPTION OF THE PERSON			y marviadar.	II y co, in cir						
FIIIGH	pai Si	nareholders Owr							Ownershi	p Shareholder	U.S.	
Name/7	Title	Tax ID number (SSN or EIN)			Address			percentage		citizen?		

		and the second second second second second second second second										
-												
		1 11	Uhawa aya kiba	last day of the	x x x x x x x x x x x x x x x x x x x							
How n	nany s	shareholders were rs – <i>Provide the fo</i>	there on the	last day of the	barahaldar sub	a waa an affi	20/ 0r mar	a owner o	f the carno	ration during the	vear	
Snare	noiae	rs – Provide the to	nowing intern			ontributions	Distributions			Loans repaid by		
Shareholder/Office name		Office name	Wages paid	Health insurar premiums paid			to shareholder	to corpo		to shareholder		

		,										
All Cli	onte.	– Additional inform	ation and doc	uments required	1	New Clie	nts — <i>Additiona</i>	l informat	ion and doc	uments required		
Service Company of the service						Date inco				D		
 Provide the business income/financial statements for the year (per books), balance sheet, depreciation schedule per books, and cash 						State of incorporation						
reconciliation of all business bank accounts with ending cash balances. • If the S corporation has employees, provide a copy of Form W-3, Form 940, Form 941, and any state quarterly tax filing reports.					Date of S corporation election							
					Corporation state residence							
Form	940,	Form 941, and any poration made pay	state quarter vments of \$60	ly tax filing rep () or more to in-	orts. dependent	Provide a copy of the Articles of Incorporation, bylaws, and any						
conti	ractors	s, provide copies o	f Form 1099-N	MISC issued.		corporat	corporate resolutions.					
• If an	y shar	eholders live in a	different state	or outside the	United	Provide	 Provide a copy of the depreciation schedules for book, tax, and AMT. Provide copies of returns for the last two years, including state returns. 					
States, provide details. The corporation may be subject to withholding requirements.						Enclose a copy of IRS Form 2553, Election by a Small Business Corporation, and IRS acceptance.						

Corporation assets at year end	t		Corporation debts	and equity at year	end
Bank account end of year balance	\$	Accoun	ts payable at year end	\$	
Accounts receivable at end of year	\$	Payables less than one year			\$
Loans to shareholders	\$	Payables more than one year			\$
Mortgages and loans held by corporation	\$	Mortgages, notes payable			\$
Stocks, bonds, and securities	\$	Loans from shareholders			\$
Other current assets (include list)	\$	Capital	stock (common)		\$
Inventories	\$	Retained earnings			\$
S Corporation Income (include all Forms 1099-K	received)				
Gross receipts or sales	\$	Divider	nd income (include all 1099	9-DIV Forms)	\$
Returns and allowances	\$() Capital gain/loss (include all 1099-B Forms)			\$
Interest income (include all 1099-INT Forms)	\$		ncome (loss) (include a sta		\$
S Corporation Cost of Goods Sold (for manufacture)		The second secon		CHARLE SECTION AND THE PLAN OF CHARLE	- 1
Inventory at beginning of the year	\$		als and supplies		 \$
Purchases	\$	Inventory at the end of the year			\$
Cost of labor	\$	art dation just the date of the just			
S Corporation Expenses	1 4				1
Advertising	\$	Legal and professional services			 \$
Adverusing Annual corporation fees	\$	Management fees			\$
Bad debts	\$		supplies	***************************************	\$
Bank charges	\$	Organization costs			\$
Business (in town) meals	\$	Pension and profit sharing plans – employee			\$
Business licenses	\$	Pension and profit sharing plans – shareholder			\$
Cleaning/janitorial	\$	Professional education and training			\$
Commissions and fees	\$	Rent or lease – car, machinery, equipment			\$
Compensation of officers	\$	Rent or lease – other business property			\$
Contract labor (include Forms 1099-MISC)	\$	Rent paid			\$
Employee benefit programs	\$	Repairs and maintenance			\$
Entertainment	\$	Salaries and wages (include Forms W-2)			\$
Health care plans – employee	\$	Taxes – payroll			\$
Health care plans – shareholder	\$	Taxes – property			\$
Insurance (other than health insurance)	\$	Taxes – sales			\$
Interest – business credit cards	\$	Telephone			\$
Interest – business loans/credit lines	\$	Utilities			\$
Interest - mortgage	\$	Other expense			\$
Internet service	\$	Other expense			\$
Car Expenses (use a separate form for each vehi			nasi yang adap ang		
Make/Model			Date car placed in servi		
Yes No Car available for personal use d	uring off-duty hor	urs?	No. 1 Company of the second se		
Yes No Do you (or your spouse) have an			Did you trade in your c	s No	
Yes No Do you have evidence?	7		Cost of trade-in Trade-in val		ie
Yes No Is your evidence written?		•	\$	\$	
Mileage				Actual Expenses	
Beginning of year odometer			Gas/oil	\$	
End of year odometer			Insurance	\$	
Business mileage			Parking fees/tolls	\$	
Commuting mileage			Registration/fees	\$	
The Albert Manager of Control of the Control of Control			Repairs	\$	

Asset	Date purchased	Cost	Date placed in service	New or used?
	\$	3		
	\$	3		
	\$	3		
	\$;		

Equipn	nent S	old or Disposed of During Year					
Asset		Date out of se	rvice	Date sold	Selling price/FMV	Trade-in?	
					\$		
					\$		
					\$		
				2	\$		
S Corp	oratio	n Business Credits (if answered Yes for any of the below, please provide a					
Yes	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	Did the corporation own any residential rental buildings providing qualified 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?	Tot	Total number of employees			

Tax Return Preparation

We will prepare your tax return based on information you provide. In the event your 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 your return do not include auditing, review, or any other verification or assurance.

Taxpayer Responsibilities

- You agree to provide us all income and deductible expense information. If you receive additional information after we begin working
 on your return, you will contact us immediately to ensure your completed tax returns contain all relevant information.
- You affirm 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 your documentation.
- You must be able to provide written records of all items included on your 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 your tax return is delivered to you or filed 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 your 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. For a joint return, both taxpayers must sign.

Taxpayer	Spouse	Date		

Privacy Policy

The nature of our work requires us to collect certain nonpublic information. We collect financial and personal information from applications, worksheets, reporting statements, and other forms, as well as interviews and conversations with our clients and affiliates. 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 firm has procedures and policies in place to protect your confidential information. We restrict access to your confidential information to those within our firm 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.