

PREMIER TAXES INC. 2667 CAMINO DEL RIO SOUTH STE 105-3 SAN DIEGO, CA 92108 Ph: 619.500.6033 Fx: 619.489.3613 EM: alberto@premiertaxes.net www.premiertaxes.net

C Corporation Tax Organizer Use a separate organizer for each C corporation **C** Corporation General Information Legal name of C corporation EIN# C corporation address ☐ (check if new address) Date incorporated State of incorporation Corp. state residence Tax Matters Individual Phone (☐ Yes ☐ No Did the corporation have a change of business name during the year? Principal business activity Principal product or service ☐ Yes ☐ No | Was the primary purpose of the corporation's activity to realize a profit? ☐ Yes ☐ No Is the corporation a Personal Service Corporation (PSC)? Accounting method: □ Cash □ Accrual □ Other (specify) ☐ Yes ☐ No Does the corporation file under a calendar year? (If no, what is the fiscal year?) \$ Total assets of the corporation at the end of the tax year. If there are no assets at the end of the tax year, enter 0. **New Clients** Provide a copy of the Articles of Incorporation, bylaws, and any corporate resolutions. Provide a copy of the depreciation schedules for book, tax, and AMT, and copies of tax returns for last two years, including state returns. **C Corporation Specific Questions** ☐ Yes ☐ No Did the corporation hold an annual meeting with shareholders with a record of minutes maintained? ☐ Yes ☐ No Is the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? ☐ Yes ☐ No Is any shareholder in the corporation a disregarded entity, a partnership, a trust, an S corporation, or an estate? ☐ Yes ☐ No Did any foreign or domestic corporation, 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 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 not already included in a listing of affiliated groups? Did the corporation own directly an interest of 20% or more, or own, directly or indirectly, an interest of 50% or more in any ☐ Yes ☐ No foreign or domestic partnership or in the beneficial interest of a trust? ☐ Yes ☐ No At any time during the 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 the total value of all classes of the corporation's stock? ☐ Yes ☐ No Did the corporation have an 80% or more change in ownership, including a change due to redemption of its own stock? ☐ Yes ☐ No Did the corporation dispose of more than 65% of its assets in a taxable, nontaxable, or tax deferred transaction? Did the corporation receive assets in a property-for-stock nontaxable exchange in which any of the transferred assets had a fair ☐ Yes ☐ No market basis or fair market value of more than \$1 million? ☐ 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 ☐ Yes ☐ No Was there a distribution of property or a transfer (by sale or death) of a shareholder interest during the tax year? Does the corporation satisfy the following conditions? ☐ Yes ☐ No • The corporation's total receipts for the tax year were less than \$250,000. The corporation's total assets at the end of the tax year were less than \$250,000. Did the corporation pay \$600 or more to any individual? If yes, include a copy of Form 1099-MISC for each. ☐ Yes ☐ No ☐ Yes ☐ No Did the corporation use any vehicles for business us? If yes, include total business miles for each vehicle. Total Miles Total Miles Principal Shareholders Ownership Information (include additional sheets as necessary) Tax ID number # Shares owned # Shares owned Dividends issued to share-U.S. (SSN or EIN) Name/Title Address at start of year at end of year holder during the year citizen? How many shareholders were there on the last day of the year?

Shareholders – Provide the following information for any shareholder who was an officer or 2% or more owner of the corporation during the year												
Wages paid					Loans repaid by corporation to shareholder							
		Health insurance	Health insurance Capital contributions	Health insurance Capital contributions Distributions	Health insurance Capital contributions Distributions Shareholder loans							

C Corporation Balance Sheet											
Corporation assets at year end			Corporation debts and equity at ye			, , ,	_	l			
Bank account end of year balance	\$			Accounts payable at year end				\$			
Accounts receivable at end of year	\$				ess than one year			\$			
Loans to shareholders	\$		Payables more than one year				\$	-			
Mortgages and loans held by corporation		\$		Capital stock (preferred)				\$			
Stocks, bonds, and securities		\$		Capital stock (common)				\$			
Other current assets (include list)		\$		Loans from shareholders			\$				
Inventories	\$		Retained earnings			\$					
C Corporation Income (include all Forms 1099-K received)											
Gross receipts or sales	\$		Dividend income (include all 1099-DIV Forms)				\$				
Returns or refunds	\$ (,		Capital gain/loss (include all 1099-B Forms)				\$			
Gross income from rental property owned by corporation	ı \$		Other income (lo		ss) (include a statement)		\$				
Interest income (include all 1099-INT Forms)	\$										
C Corporation Cost of Goods Sold (only for manufacturers	s, wholesaler	s, and bu	ısinesses tha	at make,	buy, or sell g	oods)					
Inventory at beginning of the year	\$		Inventory at the end of the year			\$					
Purchases	\$		Materials and supplies used in manufacture		\$						
Cost of labor related to sale or production of goods held	\$		or sales p	or sales production							
for sale											
C Corporation Expenses											
Advertising	\$	5 Lega		Legal and professional services			\$				
Annual corporation fees	\$	\$		Management fees			\$				
Bank fees and charges	\$	\$		Office supplies				\$			
Charitable contributions	\$	\$		Organization costs				\$			
Cleaning/janitorial	\$	\$		Pension & profit sharing plans – employee				\$			
Commissions and fees	\$	\$		Pension & profit sharing plans – shareholder				\$			
Contract labor (include Forms 1099-MISC)	\$	\$		Professional education and training				\$			
Employee benefit programs	\$	\$		Rent or lease – car, machinery, equipment				\$			
Entertainment/business meals (in town)	\$	\$		Rent or lease – other business property				\$			
Health care plans – employee	\$	\$		Repairs and maintenance				\$			
Health care plans – shareholder	\$	\$		Salaries and wages (include Forms W-2)				\$			
Insurance (other than health)	\$	\$		Taxes – payroll				\$			
Interest – business credit cards	\$	\$		Taxes – property				\$			
Interest – business loans/credit lines	\$	\$		Taxes – sales				\$			
Interest – mortgage	\$	\$		Telephone				\$			
Internet service	\$	Utilities					\$				
Other Expenses — List out type and expense amount											
\$			\$				\$				
\$			\$			\$					
Equipment Purchases – Enter the following information fo	r depreciable	assets p	urchased th	at have	a useful life g	reater than one ye	ar				
Asset	·	1	nurchased	Cost		Date placed in serv		New or used?			
		<u> </u>		\$,					
Equipment Sold or Disposed of During Year											
Asset		Date out of service		Date	sold	Selling price/FMV		Trade-in?			
						\$					
C Corporation Business Credits (if answered Yes for any	of the helow	nleaso n	rovide a etai	tement	with details)	1.7					
•		· · ·									
1 1 1											
☐ Yes ☐ No Did the corporation own any residential re	, ,					ısino?					
☐ Yes ☐ No Did the corporation incur any research and						6.					
☐ Yes ☐ No Did the corporation have employer pensio	_					mnlovees					
☐ Yes ☐ No Did the corporation pay health insurance p	•	•			Total number of employees Total number of employees						
		empio	yees:	10tal	ramber of el	inployees					
All Clients – Additional information and documents required			, :=	*		045 =		4000			
 Provide the business income/financial statements for the 	.e vear •P	rovide c	copies of For	·m W-3.	Form 940, Fo	orm 941. Form 109	16. F	orm 1099-MIS			

- Provide the business income/financial statements for the year (per books), balance sheet, dividends paid out, estimated tax payments (include amounts and date paid), depreciation schedule per books, and cash reconciliation of all business bank accounts with ending cash balances.
- Provide copies of Form W-3, Form 940, Form 941, Form 1096, Form 1099-MISC (independent contractors), and any state tax filing reports.
- If any shareholders live in a different state or outside the United States, provide details. The corporation may be subject to withholding requirements.