

# C Corporation Tax Organizer www.SchaumburgCPA.INFO Use a separate organizer for each C corporation

## C Corporation General Information

Legal name of C corporation	EIN# -
C corporation address <input type="checkbox"/> (check if new address)	
Date incorporated	State of incorporation
Tax Matters Individual	Corp. state residence
<input type="checkbox"/> Yes <input type="checkbox"/> No	Title
Phone ( )	
<input type="checkbox"/> Yes <input type="checkbox"/> No Did the corporation have a change of business name during the year?	
Principal business activity	
Principal product or service	
<input type="checkbox"/> Yes <input type="checkbox"/> No Was the primary purpose of the corporation's activity to realize a profit?	
<input type="checkbox"/> Yes <input type="checkbox"/> No Is the corporation a Personal Service Corporation (PSC)?	
Accounting method: <input type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify)	
<input type="checkbox"/> Yes <input type="checkbox"/> 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.
<b>New Clients</b>	<ul style="list-style-type: none"> <li>• Provide a copy of the Articles of Incorporation, bylaws, and any corporate resolutions.</li> <li>• Provide a copy of the depreciation schedules for book, tax, and AMT, and copies of tax returns for last two years, including state returns.</li> </ul>

## C Corporation Specific Questions

<input type="checkbox"/> Yes <input type="checkbox"/> No	Did the corporation hold an annual meeting with shareholders with a record of minutes maintained?				
<input type="checkbox"/> Yes <input type="checkbox"/> No	Is the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group?				
<input type="checkbox"/> Yes <input type="checkbox"/> No	Is any shareholder in the corporation a disregarded entity, a partnership, a trust, an S corporation, or an estate?				
<input type="checkbox"/> Yes <input type="checkbox"/> 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?				
<input type="checkbox"/> Yes <input type="checkbox"/> 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?				
<input type="checkbox"/> Yes <input type="checkbox"/> 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?				
<input type="checkbox"/> Yes <input type="checkbox"/> No	Did the corporation 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 or in the beneficial interest of a trust?				
<input type="checkbox"/> Yes <input type="checkbox"/> 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?				
<input type="checkbox"/> Yes <input type="checkbox"/> No	Did the corporation have an 80% or more change in ownership, including a change due to redemption of its own stock?				
<input type="checkbox"/> Yes <input type="checkbox"/> No	Did the corporation dispose of more than 65% of its assets in a taxable, nontaxable, or tax deferred transaction?				
<input type="checkbox"/> Yes <input type="checkbox"/> No	Did the corporation receive assets in a property-for-stock nontaxable exchange in which any of the transferred assets had a fair market basis or fair market value of more than \$1 million?				
<input type="checkbox"/> Yes <input type="checkbox"/> 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?				
<input type="checkbox"/> Yes <input type="checkbox"/> No	Was there a distribution of property or a transfer (by sale or death) of a shareholder interest during the tax year?				
<input type="checkbox"/> Yes <input type="checkbox"/> No	Does the corporation satisfy the following conditions? <ul style="list-style-type: none"> <li>• The corporation's total receipts for the tax year were less than \$250,000.</li> <li>• The corporation's total assets at the end of the tax year were less than \$250,000.</li> </ul>				
<input type="checkbox"/> Yes <input type="checkbox"/> No	Did the corporation pay \$600 or more to any individual? If yes, include a copy of Form 1099-MISC for each.				
<input type="checkbox"/> Yes <input type="checkbox"/> No	Did the corporation use any vehicles for business us? If yes, include total business miles for each vehicle.				
	<table style="width:100%; border: none;"> <tr> <td style="border: none;">Vehicle</td> <td style="border: none;">Total Miles</td> <td style="border: none;">Vehicle</td> <td style="border: none;">Total Miles</td> </tr> </table>	Vehicle	Total Miles	Vehicle	Total Miles
Vehicle	Total Miles	Vehicle	Total Miles		

## Principal Shareholders Ownership Information (include additional sheets as necessary)

Name/Title	Tax ID number (SSN or EIN)	Address	# Shares owned at start of year	# Shares owned at end of year	Dividends issued to shareholder during the year	U.S. 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

Shareholder/Office name	Wages paid	Health insurance premiums paid	Capital contributions from shareholder	Distributions to shareholder	Shareholder loans to corporation	Loans repaid by corporation to shareholder

**C Corporation Balance Sheet**

<i>Corporation assets at year end</i>		<i>Corporation debts and equity at year end</i>	
Bank account end of year balance	\$	Accounts 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	\$	Capital stock ( <i>preferred</i> )	\$
Stocks, bonds, and securities	\$	Capital stock ( <i>common</i> )	\$
Other current assets ( <i>include list</i> )	\$	Loans from shareholders	\$
Inventories	\$	Retained earnings	\$

**C Corporation Income (include all Forms 1099-K received)**

Gross receipts or sales	\$	Dividend income ( <i>include all 1099-DIV Forms</i> )	\$
Returns or refunds	\$ ( )	Capital gain/loss ( <i>include all 1099-B Forms</i> )	\$
Gross income from rental property owned by corporation	\$	Other income (loss) ( <i>include a statement</i> )	\$
Interest income ( <i>include all 1099-INT Forms</i> )	\$		

**C Corporation Cost of Goods Sold (only for manufacturers, wholesalers, and businesses that make, buy, or sell goods)**

Inventory at beginning of the year	\$	Inventory at the end of the year	\$
Purchases	\$	Materials and supplies used in manufacture or sales production	\$
Cost of labor related to sale or production of goods held for sale	\$		

**C Corporation Expenses**

Advertising	\$	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 ( <i>include Forms 1099-MISC</i> )	\$	Professional education and training	\$
Employee benefit programs	\$	Rent or lease – car, machinery, equipment	\$
Entertainment/business meals ( <i>in town</i> )	\$	Rent or lease – other business property	\$
Health care plans – employee	\$	Repairs and maintenance	\$
Health care plans – shareholder	\$	Salaries and wages ( <i>include Forms W-2</i> )	\$
Insurance ( <i>other than health</i> )	\$	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 for depreciable assets purchased that have a useful life greater than one year**

<i>Asset</i>	<i>Date purchased</i>	<i>Cost</i>	<i>Date placed in service</i>	<i>New or used?</i>
		\$		

**Equipment Sold or Disposed of During Year**

<i>Asset</i>	<i>Date out of service</i>	<i>Date sold</i>	<i>Selling price/FMV</i>	<i>Trade-in?</i>
			\$	

**C Corporation Business Credits (if answered Yes for any of the below, please provide a statement with details)**

<input type="checkbox"/> Yes <input type="checkbox"/> No	Did the corporation pay expenses to make it accessible by individuals with disabilities?	
<input type="checkbox"/> Yes <input type="checkbox"/> No	Did the corporation pay any FICA on employee wages for tips above minimum wage?	
<input type="checkbox"/> Yes <input type="checkbox"/> No	Did the corporation own any residential rental buildings providing qualified low-income housing?	
<input type="checkbox"/> Yes <input type="checkbox"/> No	Did the corporation incur any research and experimental expenditures during the tax year?	
<input type="checkbox"/> Yes <input type="checkbox"/> No	Did the corporation have employer pension plan start-up costs?	Total number of employees
<input type="checkbox"/> Yes <input type="checkbox"/> No	Did the corporation pay health insurance premiums for employees?	Total number of employees

**All Clients – Additional information and documents required**

- 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.