

2024 Tax Organizer for Corporations Business Information

Business Information

Corporation's legal name		EIN	
Doing business as			
In care of name			
Street address, city, state, and ZIP			
Email			
Phone number		Cell number	
			Fax number
Date incorporated		State of incorporation	

Yes No

Does the corporation file under a calendar year?
 If "No," what is the tax year begin date? _____ Tax year end date? _____

Did the corporation conduct business activities in any state other than the resident state?
 If "Yes," what states? _____

Is this a consolidated return?
 If "Yes," is this a life / nonlife consolidated return? _____

Is the corporation a personal holding company?

Is the corporation a personal service corporation?

Is the corporation a qualified personal service corporation?

Is the corporation a cooperative association?

Is the corporation a homeowners association?

What is the corporation's main business activity? _____

What product or service does the corporation provide? _____

What accounting method does the corporation use?
 Cash Accrual Other (describe) _____

What is the corporation's principal business activity? _____

What product or service does the corporation provide? _____

Is the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group?
 If "Yes," provide the following information for the parent corporation
 Employer ID number _____
 Name _____

Estimates

	Federal		Resident State		Resident City	
	Date Paid	Amount	Date Paid	Amount	Date Paid	Amount
Overpayment applied from 2023	_____	_____	_____	_____	_____	_____
First quarter	_____	_____	_____	_____	_____	_____
Second quarter	_____	_____	_____	_____	_____	_____
Third quarter	_____	_____	_____	_____	_____	_____
Fourth quarter	_____	_____	_____	_____	_____	_____
Additional payments	_____	_____	_____	_____	_____	_____

Account Information for Deposits and Withdrawals

Name of Bank	Bank Routing Number	Bank Account Number	Type of Account		Use This Account for	
			Checking	Savings	Deposits	Withdrawals

Officer Information

Corporation Name:

EIN:

Name Title Address City, State, and ZIP	ID Number	Percentage of Time Devoted or Stock Owned			Compensation
		Time	Common	Preferred	

Sale of Stock, Real Estate, or Other Property

Corporation Name: _____

EIN: _____

Sale of Capital Assets (including assets not reported on Form 1099-B)

Provide all brokerage statements

Description of Property	Date Purchased	Date Sold	Sales Price	Cost

Installment Sale Income

Description of property: _____

Date acquired _____	Date sold _____		
		2024	Prior Years
Selling price		_____	
Mortgages assumed		_____	
Cost of property sold		_____	
Depreciation allowed		_____	
Commissions and expense of sale		_____	
Gross profit percentage		_____	
Interest received		_____	
Principal payments received		_____	

Property was sold to a related party