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 acitivity? _____

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

2024

Schedule C - Profit or Loss from Business

Name: SSN:

General Business Information

TS ____ Professional product or service _____ Employer ID number _____

Business name _____

Business address, city, state, ZIP _____

Accounting Method: ☐ Cash ☐ Accrual ☐ Other (specify) _____

☐ This business started or was acquired during 2024. ☐ This business was disposed of during 2024.

Select if this business is for:

☐ Professional gambler ☐ Newspaper delivery and you are under 18 years of age

☐ Exempt Notary income ☐ A clergy

Yes	No	
☐	☐	Payments of $600 or more were paid to an individual, who is not your employee, for services provided for this business.
☐	☐	If "Yes," did you file Forms 1099 for the individuals?
☐	☐	Did you receive a Paycheck Protection Program (PPP) loan for this business prior to June 1, 2021?
☐	☐	If "Yes," was any portion of the loan forgiven in 2024?

Income

	2024	2023		2024	2023
Gross receipts or sales			Other income		
Returns & allowances					

Expenses

	2024	2023		2024	2023
Advertising			Repairs & maintenance		
Car & truck expenses			Supplies		
Commissions & fees			Taxes & licenses		
Contract labor			Travel		
Depletion			Total meals		
Employee benefit programs			Utilities		
Insurance (other than health)			Wages		
Interest - mortgage			Family health coverage payments for taxpayer, spouse or dependents		
Interest - other			Other expenses (list)		
Legal & professional services					
Office expenses					
Pension & profit-sharing plans					
Rent or lease (vehicles, machinery, & equipment)					
Rent (other business property)					

Cost of Goods Sold

	2024		2024	
Inventory at beginning of year		Materials & supplies		
Purchases		Other costs		
Cost of personal use items		Inventory at end of year		
Cost of labor		☐ There was a change in inventory method.		

2024

Expenses Related to Business

Name: SSN:

Auto Expense

Name of business vehicle is used for _____

Description of vehicle _____ Date vehicle was placed in service _____

Yes	No		Yes	No	
☐	☐	Was this vehicle available for use during off-duty hours?	☐	☐	Do you have evidence to support your deduction?
☐	☐	Was another vehicle available for personal use?	☐	☐	If "Yes," is the evidence written?

Number of miles the vehicle was driven during 2024	2024	2023
Business		
Commuting		
Other		

Total number of miles the vehicle was driven in prior years	2024	2023
Business		
Total		

Expenses	2024	2023
Garage rent		
Gas		
Insurance		
Licenses		
Oil		
Parking fees		
Rental fees		
Interest		
Property tax		

	2024	2023
Repairs		
Tires		
Tolls		
Lease addback		
Other expenses		

Business Use of Home

Name of business home is used for _____

What is the total square footage of your home that was used regularly and exclusively for business? _____

What is the total square footage of your home? _____

For daycare facilities not used exclusively for business, complete the following questions:

How many days during the year was the area used? _____ How many hours per day was the area used? _____

☐ The daycare facility was in operation for the entire year.

Expenses	Office Expenses 2024	Office Expenses 2023	Home Expenses 2024	Home Expenses 2023
Mortgage interest				
Real estate taxes				
Excess mortgage interest				
Excess real estate taxes				
Insurance				
Rent				
Repairs & maintenance				
Utilities				
Other expenses				

In the "Office expenses" column, enter those expenses that pertain exclusively to your office; in the "Home expenses" column, enter those expenses that pertain to the entire dwelling.

Asset Listing for 2024

Name: SSN:

Assets for:

Description of property	Date Acquired	Cost / Basis	Date Disposed of	Sales Price	Expense of Sale

2024

Schedule E - Income or Loss from Rental Real Estate & Royalties

Name: SSN:

General Property Information

TSJ ____

Property description _____

Address, city, state, ZIP _____

Select the property type

☐ Single family residence ☐ Vacation / short-term rental ☐ Land ☐ Self-rental
☐ Multi-family residence ☐ Commercial ☐ Royalties ☐ Other _____

Number of days property was rented _____ Number of days property was used for personal use _____

If the rental is a multi-dwelling unit and you occupied part of the unit, enter the percentage you occupied _____

☐ This property was placed in service during 2024.
☐ This property was disposed of during 2024.
☐ This property is your main home or second home.
☐ This property was owned as a qualified joint venture.

	Yes	No
Payments of $600 or more were paid to an individual, who is not your employee, for services provided for this rental.	☐	☐
If "Yes," did you file Forms 1099 for the individuals?	☐	☐

Income

	2024	2023		2024	2023
Rent Income			Royalties from oil, gas, mineral, copyright or patent		

Expenses

	Rental Unit Expenses		Rental and Homeowner Expenses	
Advertising				
Auto & travel				
Cleaning & maintenance				
Commissions				
Insurance				
Legal & professional fees				
Management fees				
Mortgage interest				
Other interest				
Repairs				
Supplies				
Taxes				
Utilities				
Depletion				
Other expenses (list)				

If this Schedule E is for a a multi-unit dwelling and you lived in one unit and rented out the other units, use the "Rental and homeowner expenses" column to show expenses that apply to the entire property. Use the "Rental unit expenses" column to show expenses that pertain ONLY to the rental portion of the property.

If the Schedule E is not for a multi-unit property in which you lived in one unit, complete just the "Rental unit expenses" column.

2024

Form 4835 - Farm Rental Income and Expenses

Name: SSN:

General Information

TSJ ____ Employer ID number _____

Description _____

☐ This farm was disposed of during 2024

Income

	2024	2023
Income from production of livestock, produce, grains, and other crops		
Total cooperative distributions		
Total agricultural payments		
Commodity Credit Corporation (CCC) loans:		
CCC loans reported		
CCC loans forfeited		
Crop insurance proceeds:		
Amount received in 2024		
☐ You elect to defer to 2025		
Amount deferred from 2023		
Other income		

Expenses

	2024	2023
Car & truck expenses		
Chemicals		
Conservation expenses		
Custom hire (machine work)		
Employee benefit programs		
Feed purchased		
Fertilizers & lime		
Freight & trucking		
Gasoline, fuel, & oil		
Insurance (other than health)		
Interest - mortgage (paid to banks, etc.)		
Interest - other		
Labor hired (less jobs credit)		
Pension & profit-sharing plans		
Rent - vehicles, machinery & equipment		
Rent - other (land, animals, etc.)		
Repairs & maintenance		
Seeds & plants purchased		
Storage & warehousing		
Supplies purchased		
Taxes		
Utilities		
Veterinary, breeding, & medicine		
Other expenses (list)		

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	