

Business Questionnaire & Organizer: Tax Year _____ Advisor Tax Services

Name _____ Signature _____ Date _____

Section A - New clients or new business, complete all; prior clients, enter only changes from last year

Business name (if any) _____ LLC ? Y N

Business address (if any) _____

Principal business or profession _____

What product or service do you provide ? _____

Y N Have you registered your business or trade name with the Secretary of State office ?

Y N If you began business this year, did you incur expenses prior to startup (legal, marketing, etc.) ?

Section B - All clients circle Y or N for all questions During the past year, did you or your business

Y N have a federal tax ID number (EIN#) ? If yes, please provide _____

Y N purchase or sell your business ?

Y N have employees ? If yes, were any family members ? Y N

Y N pay for services provided to your business by any individuals, LLCs, partnerships or attorneys ?
If yes, you may be required to issue a 1099 to anyone that you paid \$600 or more and copy to IRS

Y N buy items out of state or via the internet for which you paid no sales tax (use tax may be due) ?

Y N accept credit cards ?

Y N use any part of your home exclusively and regularly for your business ?

If yes, see our Business Use of Home organizer @ <http://www.advisortaxservices.com/forms.html>

Y N conduct business in multiple states ?

Y N have any barter income (exchange of services or product with a customer) ?

Y N purchase any business assets (items costing \$500 or more and having a useful life greater than 1 year such as equipment, computers, furniture, vehicles, real estate, etc.) ?
If yes, provide the following information for each item or group of items

Description	Date purchased	Date placed in service	Cost
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Y N sell any business assets ?

Item	Date sold	Amount	Item	Date sold	Amount
_____	_____	_____	_____	_____	_____

Y N carry an inventory (products for resale or materials to make products) ?

If yes, provide the following information. (Note: value is based on your cost, not retail value)

Inventory (items for resale) purchases during year _____

Material (items used to create product) purchases during year _____

Inventory/materials (including finished goods) on hand at year end _____

Section C – Business Income (for this business only, do not include other income such as wages !)

- Y N Did you receive any forms 1099-K from credit card companies ?
- Y N Did you receive any forms 1099-MISC from customers ?
- Y N N/A If yes, did the amount reported to you include reimbursed expenses ?
- Y N Did you verify amounts on forms 1099-MISC & 1099-K against your records ?

Gross Income _____ Refunds to customers _____

Section D – Business Expenses (enter type of expense where it says “Other”, ex. Website hosting)

Advertising/Marketing _____	Travel (not personal vehicle):
Commissions/fees _____	Parking/Tolls _____
Contract labor _____	Car/truck rental _____
Employee benefits _____	Air/Train/Bus _____
Insurance:	Taxi/tips _____
Property/hazard _____	Lodging _____
Liability _____	Meals _____
Workers compensation _____	Bank fees _____
Other _____	Merchant account fees _____
Interest: (not vehicle loans)	Business gifts _____
Mortgage _____	Dues & Subscriptions _____
Business loan _____	Books & Publications _____
Credit line _____	Software (annual fees) _____
Other _____	Postage & Delivery _____
Professional fees:	Printing & Reproduction _____
Accounting _____	Conventions/Trade shows _____
Legal _____	Professional education _____
Other _____	Trash & Recycling _____
Office expenses _____	Licenses/Permits _____
Pension contributions _____	Uniforms/Safety gear _____
Rent or lease (equipment) _____	Small tools _____
Rent or lease (real estate) _____	Telephone (not cell) _____
Repairs & Maintenance _____	Cell phone total _____
Supplies _____	% business use ___ x total = _____
Taxes:	Internet access total _____
Payroll _____	% business use ___ x total = _____
Property _____	Other _____
Utilities _____	_____
Wages (gross, not net) _____	_____

Personal Vehicle Use: description _____ Total miles _____ Business miles _____

NOTE: if you used more than 1 vehicle for business purposes or wish to deduct actual costs, please use our Business use of Vehicle organizer @ <http://www.advisortaxservices.com/forms.html>