



## BUSINESS ORGANIZER

### GENERAL INFORMATION

Company	EIN	
Principal Business or profession		
Business Address	City	Zip
Business Email	Business Phone Number	

Entity Type <i>(Circle one)</i>	Sole Proprietor	S Corp	Partnership
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Was there an ownership change?	Yes / No
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### OWNER INFORMATION

Shareholder/Partner Name	SSN	Percent Owned
Address	City	Zip
Email	Phone Number	

Shareholder/Partner Name	SSN	Percent Owned
Address	City	Zip
Email	Phone Number	

Shareholder/Partner Name	SSN	Percent Owned
Address	City	Zip
Email	Phone Number	

BUSINESS INCOME		
	Amount	Notes
Reported on Form(s) 1099		
Other Income		
Other Income		

BUSINESS EXPENSES		
	Amount	Amount
Compensation of Officers (W-2)		De Minimis Supplies/Repairs
Employee Salaries and Wages (W-2)		Equipment Rent
Repairs and Maintenance		Insurance
Bad Debts		Officer Health Insurance
Rent		Employee Health Insurance
State Franchise or Income Taxes/Fees		Liability
Payroll Taxes		Internet/ Website
SS		Janitorial
MED		Laundry and Cleaning
FUTA		Legal and Professional
SUI		Meals
Other Taxes		Entertainment
Licenses		Office Expense
Interest		Outside Services/Contractors
Advertising		1099s issued?
SEP/401(k)/Solo 401(k)/SIMPLE Cont		Payroll Processing Fees
Accounting		Parking Fees and Tolls
Automobile/Truck Expense		Permits and Fees
Bank Charges		Postage
Charitable Contributions		Printing
Cleaning		Security
Client Gifts (\$25 max per client)		Supplies
Commissions		Telephone
Computer Services and Supplies		Tools
Credit and Collection Costs		Training/Continuing Education
Delivery and Freight		Travel
Discounts		Uniforms
Dues and Subscriptions		Utilities
De Minimis Supplies/Repairs		Other:
Equipment Rent		Other:

### ACCOUNT BALANCES

Include Bank Accounts (traditional, Paypal, Venmo, Cashapp, etc.), Virtual Currency, Credit Cards, Loans, etc.

Account	Ending Balance	Account	Ending Balance

### COST OF GOODS SOLD

	Amount	Notes
Inventory at Beginning of Year		
Purchases		
Cost of Labor		
Inventory at End of Year		

### BUSINESS MILEAGE

Vehicle	Date in Service	Total Mileage	Business

### ASSET PURCHASES

Asset	Date Purchased	Amount	Condition

### ASSET DISPOSALS

Asset	Date Sold	Amount	Exchange/Trade?

### HOME OFFICE (EXCLUSIVE USE ONLY)

Home Square Footage		Office/Storage Square Footage
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## Business Tax Drop-Off Checklist

**Tax Engagement Agreement:** Please sign the agreement, which contains the **price quote estimate**.

**Address, Email(s), and Phone Number(s):** Has any of your contact info changed? Y / N  
If so, please provide updated info below.

**Virtual Currency:** At any time during 2025, did your company sell, send, exchange, or otherwise acquire any financial interest in any? (Bitcoin, Etherium, Dogecoin, etc.) Y / N

**Foreign Owners:** Are any owners of the business non-US Citizens? Y / N  
Who? \_\_\_\_\_ Resident Country? \_\_\_\_\_

**Foreign Income:** Does the business have any foreign income? Y / N

**Ownership:** Was there a change in ownership during 2025? Y / N

**States:** Do you do business in multiple states? Y / N

**Return Copy:** Do you want to receive a hard copy of your tax return, or digital only? Y / N

**Business Info:** If you do not have financial statements, complete the Business Organizer.

**2024 Tax Return:** If DPFT did not prepare your 2024 business return, please provide a copy.

**Retirement Plan:** Is there a company retirement plan? Y / N  
If so, what type?  401(K)  SEP  Simple

**Quickbooks:** Do you use Quickbooks? Y / N  
If so, **Desktop or Online?** (Circle one). Please provide the login information:  
Username: \_\_\_\_\_ Password: \_\_\_\_\_ Desktop Year: \_\_\_\_\_

**Personal Return Pick-Up:** If BA Tax Pros repares your 1040, do you want to pick up all returns at the same time? Y / N

**NOTES:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### FOR OFFICE USE ONLY: Tax Pick-Up Checklist

Signed Engagement Letter  Signed EF Forms  
 Payment