

AT A MINIMUM, WE ASK THAT YOU COMPLETE THIS BRIEF TAX QUESTIONNAIRE AND UPLOAD TO OUR SECURED PORTAL NO LATER THAN MAY 1ST OR BE SUBJECT TO SURCHARGE. <u>Secured Portal Link</u>

REQUIRED – please complete and upload

CUST	CUSTOMER NAME:					
IF ANY OF THE FOLLOWING ITEMS PERTAIN TO YOUR BUSINESS IN 2024 PLEASE CHECK THE APPROPRIATE BOX AND PROVIDE ADDITIONAL INFORMATION IF NECESSARY.						
YES	NO	GENERAL INFORMATION				
		Do you have a QuickBooks or other accounting file for your business? If yes, please select one below:				
		QuickBooks DESKTOP QuickBooks ONLINE Professional Bookkeeper Other				
		QuickBooks DESKTOP Users Only: Please use the instructions below to provide us necessary information. Select "Yes" if complete.				
		Please provide a PDF of the Balance Sheet and Profit and Loss Statement for the tax year (2024) . IF YOU ARE A NEW CLIENT we will also need this information for the prior tax year (2023) for comparison. Upload this file to our <u>Secured Client Portal</u>				
		*If your incorporation is new for 2024 you can ignore the request for prior year data." QuickBooks ONLINE Customers or Users ONLY: Have you invited us as your accountant to your QuickBooks Online account? If no,				
		please follow the instructions below: 1. From the home screen, click on the Gear icon in the top right corner and select Manager Users 2. Go to the Accounting Firms tab				
		3. Enter the following email address info@themodelaccountant.com and click the Invite button				
		Do you need a paper copy of your tax return? If yes, additional processing & handling fees will apply to your return.				
YES	NO	ASSET INFORMATION If <u>yes</u> , provide details or copies of the documentation listed below.				
		Do you have business bank accounts? Provide copies of the December statements for all accounts .				
		Do any customers owe you money? Provide an updated list of amounts owed to you (accounts receivable summary).				
		If yes, is any of this money uncollectible (i.e., bad debts)? Notate which accounts receivable need to be written off.				
		Do you have inventory? Provide an accurate count or listing .				
		Did you purchase any business assets for more than \$2,500 each? Provide copies of all purchase receipts .				
		Did you dispose of any business assets? Provide a list of assets that are no longer in service .				
		Did you purchase or sell any real estate? Provide copies of all closing statements.				
YES	NO	LIABILITY INFORMATION If <u>yes</u> , provide details or copies of the documentation listed below.				
		Do you owe any vendors money? Provide an updated list of amounts you owe (accounts payable summary).				
		Do you have any business loans? Provide copies of the December statements for all loans.				
		Do you have any business credit cards? Provide copies of the statements showing activity through December 31 (usually the statements due in January or February for all accounts).				
		Do you file and pay sales tax? Provide copies of the December sales tax returns (prepared and filed in January).				
		Do you have payroll? Provide copies of the Forms W-2, W-3, 940, 941 and state unemployment returns (if we prepare your				
		payroll, no copies are necessary).				
		Do you have any related party debt? Provide a copy of the gareement & the amortization schedule.				



YES	NO	EQUITY INFORMATION If <u>yes</u> , provide details or copies of the documentation listed below.							
		As the business owner, did you personally contribute or withdraw money from the business? Provide details of money contributed and withdrawn (separate by owner).							
		Were there any ownership changes during the year? Provide updated ownership percentages .							
YES	NO	INCOME & EXPENSE INFORMATION If <u>yes</u> , provide details or copies of the documentation listed below.							
	110	Did you receive any Forms 1099? <i>Provide copies for our files</i> .							
		Did you pay anyone \$600 or more for rent, services (including parts and materials), prizes and awards, or other income? <i>Provide copies of any Forms 1099 that you issued for our files.</i>							
		Did you pay rent? If your lease agreement has been updated, provide a copy of your new rental agreement.							
		Did you pay insurance (include general liability, life, health, etc.)? Provide details of the amounts paid.							
		Did you make any charitable contributions? Provide copies of any giving statements that you received from the charitable organizations.							
		Did you make any major repairs and maintenance expenditures? Provide details of the amounts paid.							
		Did you use a personal vehicle for non-commuting business purposes? Provide the total business mileage driven during 2024 below. I hereby certify that in 2024 I drove miles for business purposes and have the written records to support a tax deduction.							
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Shareholder's / Officer's Information

Partner's Name	Partner's Address	Social Sec. # or FEIN	P&L% / % Owned



NATURAL DISASTER – BUSINESS LOSS YES NO Did you incur an unreimbursed loss (a loss in excess of insurance or FEMA reimbursement) in a federally declared disaster area?

If yes above, please complete this table and provide supporting records.

	Property A	Property B	Property C
Description of property			
City, State, Zip			
Date acquired			
Cost of property			
cost of property			
Date of loss			
Description of loss			
Was insurance claim made?	Yes:	Yes:	Yes:
	No:	No:	No:
Received FEMA assistance?	Yes:	Yes:	Yes:
	No:	No:	No:
Fair market value BEFORE loss			
Fair market value <u>AFTER</u> loss			
Total out of pocket expenses			

Partners Other Info – Please Identify	Partner 1	Partner 2	Partner 3	Partner 4
Capital contributed by partner				
Loans made to the partnership				
Loans made to the partner				
Guaranteed Payments made to the partner				

Additional Details (optional):

Thank you for completing the Corporate Tax Questionnaire for Tax Year 2024.

Please upload this completed questionnaire as well as any supporting documentation to your <u>Secured Client Portal</u> account as soon as possible to ensure timely delivery of your tax return.

Questions? Email info@themodelaccountant.com or call 305 307-8322



CORPORATE ORGANIZER				
Client's Name:				
Business Name:				
Principal Business Activity Including Product or	Service:			
Federal Employer Identification Number (FEIN)				
Date company formed:				
Business Address:				
City, State, Zip code				
Accounting Method Cash Accrual F	Hybrid	Calendar Year: From: To:		
Inventory Method Cost Lower C/M	_ Other			
UPLOAD ALL 1099S		EXPENSES CONTINUED		
Gross Receipts/Total Income		Janitorial Service		
Returns & Allowance		Laundry & Cleaning		
Other Income		Lease - Equipment		
COST OF GOOD SOLD		Lease - Auto		
Beginning Inventory		Legal & Professional Fees		
Purchases		Licenses & Permits		
Cost of Items for Personal Use		Meals		
Cost of Labor		Office Expense		
Materials & Supplies		Outside Services		
Other Costs		Parking & Tolls		
Ending Inventory		Pension & Profit Sharing Plans		
EXPENSES		Postage		
Accounting		Printing		
Advertising		Refuse Disposal		
Amortization (Upload Schedule)		Rent – Machinery / Equipment		
Answering Service		Rent – Other Business Property		
Bad Debt		Repairs		
Bank Service Charges		Security & Safety		
Car & Truck Expense		Storage		
Collection Expenses		Supplies		
Commissions		Taxes – Business		
Delivery / Freight Depreciation		Taxes – Payroll		
(Upload Schedule)				
Dues		Taxes – Property		
Publications		Taxes – Other		
Education Expense		Telephone		
Employee Benefit Programs		Theft / Casualty		
Gifts		Tools		
Guaranteed Payments		Travel – Airfare		
Insurance – Auto		Travel – Lodging		
Insurance – Other		Travel – Meals		
Interest - Auto		Uniforms		
Interest - Mortgage	Utilities			
Interest - Other		Wages & Salaries		



Other Expenses (Please List)			
Additional Details (optional):			
	<u> </u>	<u> </u>	<u> </u>

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