

**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 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 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 \_\_\_\_\_

Commissions/fees \_\_\_\_\_

Contract labor \_\_\_\_\_

Employee benefits \_\_\_\_\_

**Insurance:**

Property/hazard \_\_\_\_\_

Liability \_\_\_\_\_

Workers compensation \_\_\_\_\_

Other \_\_\_\_\_

**Interest: (not vehicle loans)**

Mortgage \_\_\_\_\_

Business loan \_\_\_\_\_

Credit line \_\_\_\_\_

Other \_\_\_\_\_

**Professional fees:**

Accounting \_\_\_\_\_

Legal \_\_\_\_\_

Other \_\_\_\_\_

Office expenses \_\_\_\_\_

Pension contributions \_\_\_\_\_

Rent or lease (equipment) \_\_\_\_\_

Rent or lease (real estate) \_\_\_\_\_

Repairs & Maintenance \_\_\_\_\_

Supplies \_\_\_\_\_

**Taxes:**

Payroll \_\_\_\_\_

Property \_\_\_\_\_

Utilities \_\_\_\_\_

Wages (gross, not net) \_\_\_\_\_

**Travel (not personal vehicle):**

Parking/Tolls \_\_\_\_\_

Car/truck rental \_\_\_\_\_

Air/Train/Bus \_\_\_\_\_

Taxi/tips \_\_\_\_\_

Lodging \_\_\_\_\_

Meals & Entertainment \_\_\_\_\_

Bank fees \_\_\_\_\_

Merchant account fees \_\_\_\_\_

Business gifts \_\_\_\_\_

Dues \_\_\_\_\_

Books/Publications \_\_\_\_\_

Software (annual) \_\_\_\_\_

Postage & Delivery \_\_\_\_\_

Printing & Reproduction \_\_\_\_\_

Conventions/Trade shows \_\_\_\_\_

Professional education \_\_\_\_\_

Trash & Recycling \_\_\_\_\_

Licenses/Permits \_\_\_\_\_

Uniforms/Safety gear \_\_\_\_\_

Small tools \_\_\_\_\_

Telephone (not cell) \_\_\_\_\_

Cell phone total \_\_\_\_\_

% business use \_\_\_ x total = \_\_\_\_\_

Internet access total \_\_\_\_\_

% business use \_\_\_ x total = \_\_\_\_\_

Other \_\_\_\_\_

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 Personal Vehicle organizer @ <http://www.advisortaxservices.com/forms.html>**