

## **CORPORATE / PARTNERSHIP CLIENT CHECKLIST (Page 1)**

We request the following information in order to facilitate the preparation of your business tax return. You may provide this information in paper format or email the data to pcrunk@axiomcpa.com.

Busine	ess name:
Conta	ct's name:
Phone	number:Email:
IF YOL	J <u>use</u> quickbooks:
	Back-up copy of your QuickBooks. Files smaller than 5MB may be emailed to <a href="mailto:pcrunk@axiomcpa.com">pcrunk@axiomcpa.com</a> . Larger files may be sent using Axiom's electronic dropbox at <a href="https://www.axiomcpa.com/dropbox">www.axiomcpa.com/dropbox</a>
	Please indicate version you are using:
	Password (if applicable):
IF YOU	J DON'T USE QUICKBOOKS provide a copy of your:
	Trial Balance
	Balance Sheet
	Profit & Loss Statement
	Year-end Accounts Payable detail and aging summary.
	Year-end Accounts Receivable detail, and aging summary.
THE FO	OLLOWING INFORMATION IS NEEDED whether or not you use QuickBooks:
	Copies of quarterly and annual Payroll Tax Returns unless these were prepared by Axiom.
	Copies of all December 31st bank statements and your December year-end cash account reconciliations.
	Copy of Sales Tax Returns for entire year and year-end tax liability, unless these were prepared by Axiom.
	Copies of notes on new loans.
	Year-end balance on each outstanding loan.



## **CORPORATE / PARTNERSHIP CLIENT CHECKLIST (Page 2)**

	Copies of all invoices for new asset purchases incluvehicles provide the bill of sale and the financing at Copies of any forms HUD-1 for real estate purchase Details of all assets disposed of, if any.  Details and dates of any change in ownership.	agreement.	ed in service. For new
If not	separately stated in your chart of accounts provided	d details of:	
	Owner's compensation		
	Health insurance premiums paid for owner	rs	
	Meals and entertainment expense		
If you	have automobiles used in the business provide the	following for EA	ACH automobile.
		Auto 1	Auto 2
	Make & Model		
	Date first used in your business		
	Name of employee using the vehicle		
	Business miles driven		
	Miles driven for commuting (to and from work)	+	+
	Other personal miles driven	+	+
	Total miles driven in 2009	=	=
	Do you have evidence of the above stated	mileage?	□Yes □No
	Is the evidence in writing?		□Yes □No



## **CORPORATE / PARTNERSHIP CLIENT CHECKLIST (Page 3)**

Deferr	ed compensation/profit sharing questions
1.	Does the company have a profit sharing plan (401k, SEP, etc)?
2.	If there is taxable income from the business do you want to consider a profit sharing plan contribution?
3.	Given your current cash situation how much of a contribution can you afford to make?  \$
	oove information and the information provided as a result of this request is true and to the best of my knowledge.
Signati	ure Date
Print n	name