

C-Corporation Organizer

C Corporation: _____
EIN # Name Date Incorporated

Address: _____
Mailing Address Suite# City State Zip code

Contact Name: _____ **Email:** _____
Name of officer signing return

Contact Phone: _____
Business Cell Home

***Mailing Address if different than the return Suite# City State Zip code

This C-Corp organizer is intended to help gather information, update information and serve as a guide in the preparation of your 1120 return. .

Please complete the following worksheets with as much detailed information as possible. If you have some of this information (income and expenses) already prepared on Quick Books, Quicken, Excel, or another format, please attach it to the organizer. If this is the case, please indicate “see attached” on the organizer. Please provide a profit and loss statement if it is available to you. If you are a new client, please provide a copy of last year’s business tax return.

Please Answer “Yes” or “No” to the following questions

	Yes	No
Is this the first year of your C Corporation?	<input type="checkbox"/>	<input type="checkbox"/>
Did the corporation change its name during the year?	<input type="checkbox"/>	<input type="checkbox"/>
Did the corporation change its address during the year?	<input type="checkbox"/>	<input type="checkbox"/>
Is there more than one shareholder in the corporation?	<input type="checkbox"/>	<input type="checkbox"/>
Do you intend to file the final return for the corporation this year?	<input type="checkbox"/>	<input type="checkbox"/>
What is the state of incorporation?		
What is the state of residency?		
What is the principal business activity of your corporation?		
How many shareholders did you have at the end of the year?		

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 E-Mail: MPTC@mikeparisitax.com

Tel: 718-837-3587 Fax: 718-236-8692
 Tel: 732-414-1830 Fax: 732-414-1829

Shareholder Information First Name, Last Name	Social Security Number	Shareholders Mailing Address Street address city, state, zip code	# of shares owned at the start of the year	# of shares owned at end of the year	Dates of ownership, if applicable	Percentage of Ownership

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<u>Income</u>	
What were the gross receipts or sales for the year?	\$
Was there any portion of the sales refunded or returned? If so, how much?	\$
What were the gross receipts from rental property?	\$
Did the corporation have any other income such as interest/dividends/capital gains? If so, please attach the statements.	\$

<u>Cost of Goods Sold</u> <i>(Cogs) Costs associated with the manufacturing a product. Ex: restaurants/retail sales/manufacturing business</i>	<i>Answer "yes" or "no" to the following questions.</i>	
**skip this section if not applicable	Yes	No
Does your business manufacture products for sale to customers?		
Are you a wholesale or retail business which maintains inventory?		
Opening cost of inventory?	\$	
Closing cost of inventory?	\$	
Cost of materials used in manufacturing?	\$	

<u>Balance Sheet</u>			
<u>Corporate Assets ending Dec. 31</u>		<u>Liabilities and Equity ending Dec. 31</u>	
Year end bank account balance	\$	Year end accounts payable	\$
Year end accounts receivable	\$	Payables more than a year	\$
Loans and mortgages held by Corporation	\$	Payables less than a year	\$
Stocks, bonds, securities	\$	Loans owed	\$
Inventory	\$	Capital stock	\$
Other assets such as equip. furn, bldg, land	\$	Retained earnings	\$

List any other corporate assets here:

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Shareholder Wages (issued w2) and Benefits

***for shareholders with more than 2% ownership*

Shareholder name	Gross wages paid to shareholder	Health insurance Premiums paid for shareholder	Capital contributions made by the shareholder	Shareholder loans to the Corporation	Loans repaid by the Corporation to the Shareholder
	\$	\$	\$	\$	\$

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