

**Prepared By:**

**Prepared For:**



**2015 Business Organizer**

# Questions

## S Corporation Preparation Checklist and Questionnaire (Form 1120S)

Please check the appropriate box and include all necessary details and documentation.

|                                                                                                                                                                                                        | Yes                      | No                       |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|--------------------------|
| <b>General Information</b>                                                                                                                                                                             |                          |                          |
| Were there any changes to the shareholders listed on the prior year return? If yes, please provide the necessary changes.                                                                              | <input type="checkbox"/> | <input type="checkbox"/> |
| Did any shareholder contribute additional capital, or make a loan to the S Corporation during the year? If yes, please provide details.                                                                | <input type="checkbox"/> | <input type="checkbox"/> |
| Did the S Corporation repay a loan from the shareholder during the year? If yes, please provide payment information.                                                                                   | <input type="checkbox"/> | <input type="checkbox"/> |
| Were there any changes in the shareholder's ownership in the S Corporation during the year? If yes, please provide the necessary changes.                                                              | <input type="checkbox"/> | <input type="checkbox"/> |
| Were there any changes in officers in the S Corporation during the year? If yes, please provide the necessary changes.                                                                                 | <input type="checkbox"/> | <input type="checkbox"/> |
| Did you provide us with your bank information? If yes, review the information provided and make the necessary changes.                                                                                 | <input type="checkbox"/> | <input type="checkbox"/> |
| Does the S Corporation own vehicles? If yes, please provide mileage and expense details.                                                                                                               | <input type="checkbox"/> | <input type="checkbox"/> |
| Did the S Corporation purchase any business assets this year? If yes, please provide details of the purchases.                                                                                         | <input type="checkbox"/> | <input type="checkbox"/> |
| Did the S Corporation dispose of any business assets this year? If yes, please provide details of the dispositions.                                                                                    | <input type="checkbox"/> | <input type="checkbox"/> |
| Did the S Corporation have a group health plan?                                                                                                                                                        | <input type="checkbox"/> | <input type="checkbox"/> |
| Did the S Corporation have fewer than 25 full-time employees, and pay at least 50% of the premiums for each enrolled employee's health insurance coverage?                                             | <input type="checkbox"/> | <input type="checkbox"/> |
| Did the S Corporation pay directly or reimburse the health insurance premiums paid for a greater than 2% shareholder and/or its employees?                                                             | <input type="checkbox"/> | <input type="checkbox"/> |
| <b>Shareholder Information</b>                                                                                                                                                                         |                          |                          |
| Were fringe benefits paid to shareholders who have a greater than 2% ownership in the S Corporation? If yes, were the benefits included on the shareholder's Form W-2?                                 | <input type="checkbox"/> | <input type="checkbox"/> |
| <b>S Corporation Information</b>                                                                                                                                                                       |                          |                          |
| Did the address of the S Corporation change? If yes, provide the new address. _____                                                                                                                    | <input type="checkbox"/> | <input type="checkbox"/> |
| Did the S Corporation make payments that require Form(s) 1099 to be filed? If yes, did the S Corporation file or will it file all required Forms 1099?                                                 | <input type="checkbox"/> | <input type="checkbox"/> |
| Did the S Corporation take out a loan this year? If yes, provide information on how the loan was used. Also provide copies of the loan documents. _____                                                | <input type="checkbox"/> | <input type="checkbox"/> |
| Were there any significant changes in the S Corporation's business or operations during the year? If yes, explain _____                                                                                | <input type="checkbox"/> | <input type="checkbox"/> |
| If the S Corporation maintains inventory, was there a change in the method of determining quantities, cost, or valuations between opening and closing inventory during the year? If yes, explain _____ | <input type="checkbox"/> | <input type="checkbox"/> |