2 0 2 3 BUSINESS TAX QUESTIONNAIRE

Please answer each question as accurately as possible. The information you provide will help ensure the accuracy of your tax returns, thereby reducing the likelihood of audits, interest and penalties, and will assist in ensuring that you receive all deductions for which you are qualified.

| Comp | oany Na | ame | Federal ID Number | |
|-----------|--------------|--|--|--|
| Comp | oany Ad | ddress – to be used on the tax return | | |
| Your Name | | Phone # | Email Address | |
| Yes [] | No [] | TAX COMPLIANCE MATTERS Have all W-2s, W-3s and 1099s been issu | ed? | |
| [] | [] | Did you maintain a mileage log for all vehicles used for business? | | |
| [] | [] | Do you have records to support business purpose for meals and travel expenses? | | |
| [] | [] | Do you maintain records to support business purposes for expense reimbursements to shareholders/members/partners and employees? | | |
| [] | [] | Do you have documentation to support charitable contributions? | | |
| [] | [] | Do you have EFTPS, MyTax Illinois, or other online tax payment accounts? Please provide logins/passwords so we may clarify any issues | | |
| [] | [] | Do you have any overdue taxes? Payroll, sales or business | | |
| [] | [] | Do you have any foreign income or a foreign bank account? | | |
| [] | [] | If your employees receive tips, were those tips reported as wages? | | |
| [] | [] | Did your business pay or incur any expenses to provide access to persons with disabilities? | | |
| [] | [] | Did you receive an EIDL loan from SBA? I | Provide activity and balance at year end | |
| [] | [] | Did you receive financial assistance funds | from any other sources? | |
| [] | [] | Did you purchase fuel to operate business Provide # gallons and type of fuel for off-ro | • • | |
| [] | [] | Did your company offer an employee pens | • | |

| Yes [] | No [] | TAX COMPLIANCE MATTERS Will you offer a profit sharing contribution on your Pension/401k plan? | | |
|-----------|-----------------|--|--|--|
| [] | [] | Did your office offer health insurance benefits? | | |
| [] | [] | Are there any credits or deductions related to your industry you qualify for? | | |
| [] | [] | Please list all shareholders/partners/officers in your business, the office they hold and the approximate number of hours each works in the business each year | | |
| | | | | |
| Yes [] | No [] | OTHER INFORMATION IMPACTING TAX PREPARATION Did you receive any letters or tax notices from the IRS or any other tax authorities? | | |
| [] | [] | Did you change or add states where you operate or make sales? | | |
| [] | [] | Did you operate or make sales in the City of St Louis? | | |
| [] | [] | Did you engage in any new activities? | | |
| [] | [] | Did you incur any theft or casualty losses during the year? | | |
| [] | [] | Did you retire or sell any assets currently listed on the depreciation schedule? | | |
| [] | [] | Did you purchase any singe assets over \$250? Provide list with description,date and amount | | |
| [] | [] | Did you engage in bartering or trading of goods or services during the year? | | |
| [] | [] | Did you receive any debt forgiveness? | | |
| [] | [] | Did you have any uncollectible accounts? | | |
| [] | [] | Did you refinance or restructure debt? | | |
| [] | [] | Did you have any major repairs performed on equipment, property or facilities? | | |
| [] | [] | Did you loan money to officers, members or shareholders? Provide copy of note | | |
| [] | [] | Did the company repay any loans to owners? | | |
| [] | [] | Did the company pay life insurance premiums for officers or employees? | | |
| [] | [] | Were there any ownership changes in 2023? | | |
| [] | [] | Were there any changes in officers or directors in 2023? | | |
| [] | [] | Are there any other matters we should be aware of? | | |

Proceed to page 3

| Officer Sign | nature | Date |
|--------------|---|----------------------------------|
| | npiled the information provided and answers contained in this document e and correctly reflects my business operations for the 2023 tax year. | . I certify that the information |
| Moi | nthly statements for all bank accounts. | |
| If yo | our company operates in multiple states, please provide a breakdown o | f sales and wages by location |
| • | pies of invoices for any single item asset purchases over \$250 – vehicles improvements | , equipment, furniture, fixtures |
| Loa | an, line of credit, and credit card statements as of 12/31 and interest for | the year |
| If yo | ou use QB Online, please send us an invitation if we are not already co | nnected to your file |
| Qui | ickbooks desktop login, passwords and the version for your backup file | |
| - | gin and passwords for your EFTPS, MyTax Illinois and any other can easily clarify issues – even if you provided last year as passw | |
| Co | pies of W-2, W-3 and 1099s (if we did not prepare them) | |
| | | |