

2 0 2 4 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.

Company Name

Federal ID Number

Company Address – to be used on the tax return

Your Name

Phone #

Email Address

- | Yes | No | TAX COMPLIANCE MATTERS |
|--------------------------|--------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> | Have all W-2s, W-3s and 1099s been issued? |
| <input type="checkbox"/> | <input type="checkbox"/> | Did you maintain a mileage log for all vehicles used for business? |
| <input type="checkbox"/> | <input type="checkbox"/> | Do you have records to support business purposes for meals and travel expenses? |
| <input type="checkbox"/> | <input type="checkbox"/> | Do you maintain records to support business purposes for expense reimbursements to shareholders/members/partners and employees? |
| <input type="checkbox"/> | <input type="checkbox"/> | Do you have documentation to support charitable contributions? |
| <input type="checkbox"/> | <input type="checkbox"/> | Do you have EFTPS, MyTax Illinois, or other online tax payment accounts?
Please provide logins/passwords so we may clarify any issues |
| <input type="checkbox"/> | <input type="checkbox"/> | Do you have any overdue taxes? Payroll, sales, or business |
| <input type="checkbox"/> | <input type="checkbox"/> | Do you have any foreign income or a foreign bank account? |
| <input type="checkbox"/> | <input type="checkbox"/> | If your employees receive tips, were those tips reported as wages? |
| <input type="checkbox"/> | <input type="checkbox"/> | Did your business pay or incur any expenses to provide access to persons with disabilities? |
| <input type="checkbox"/> | <input type="checkbox"/> | Did you receive an EIDL loan from SBA? Provide activity and balance at year end |
| <input type="checkbox"/> | <input type="checkbox"/> | Did you receive financial assistance funds from any other sources? |
| <input type="checkbox"/> | <input type="checkbox"/> | Did you purchase fuel to operate business equipment or vehicles off-road ?
Provide # gallons and type of fuel for off-road use |
| <input type="checkbox"/> | <input type="checkbox"/> | Did your company offer an employee pension plan in 2024? |

(OVER)

- | Yes | No | TAX COMPLIANCE MATTERS |
|--------------------------|--------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> | Will you offer a profit sharing contribution on your Pension/401k plan? |
| <input type="checkbox"/> | <input type="checkbox"/> | Did your business offer health insurance benefits? |
| <input type="checkbox"/> | <input type="checkbox"/> | Are there any credits or deductions related to your industry you qualify for? |
| <input type="checkbox"/> | <input type="checkbox"/> | 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 |
|--------------------------|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | Did you receive any letters or tax notices from the IRS or any other tax authorities? |
| <input type="checkbox"/> | <input type="checkbox"/> | Did you change or add states where you operate or make sales? |
| <input type="checkbox"/> | <input type="checkbox"/> | Did you operate or make sales in the City of St Louis? |
| <input type="checkbox"/> | <input type="checkbox"/> | Did you engage in any new activities? |
| <input type="checkbox"/> | <input type="checkbox"/> | Did you incur any theft or casualty losses during the year? |
| <input type="checkbox"/> | <input type="checkbox"/> | Did you retire or sell any assets currently listed on the depreciation schedule? |
| <input type="checkbox"/> | <input type="checkbox"/> | Did you purchase any single assets over \$2,500? Provide list with description, date and amount |
| <input type="checkbox"/> | <input type="checkbox"/> | Did you engage in bartering or trading of goods or services during the year? |
| <input type="checkbox"/> | <input type="checkbox"/> | Did you receive any debt forgiveness? |
| <input type="checkbox"/> | <input type="checkbox"/> | Did you have any uncollectible accounts? |
| <input type="checkbox"/> | <input type="checkbox"/> | Did you refinance or restructure debt? |
| <input type="checkbox"/> | <input type="checkbox"/> | Did you have any major repairs performed on equipment, property or facilities? |
| <input type="checkbox"/> | <input type="checkbox"/> | Did you loan money to officers, members or shareholders? Provide copy of note |
| <input type="checkbox"/> | <input type="checkbox"/> | Did the company repay any loans to owners? |
| <input type="checkbox"/> | <input type="checkbox"/> | Did the company pay life insurance premiums for officers or employees? |
| <input type="checkbox"/> | <input type="checkbox"/> | Were there any ownership changes in 2024? |
| <input type="checkbox"/> | <input type="checkbox"/> | Were there any changes in officers or directors in 2024? |
| <input type="checkbox"/> | <input type="checkbox"/> | Are there any other matters we should be aware of? |

Proceed to Page 3

Please make sure that you provide us with the following information:

Copies of W-2, W-3 and 1099s (if we did not prepare them)

Login and passwords for your EFTPS, MyTax Illinois and any other online tax accounts so that we can easily clarify issues – even if you provided last year as passwords are subject to change

QuickBooks desktop login, passwords, and the version for your backup file

If you use QB Online, please send us an invitation if we are not already connected to your file

Loan, line of credit, and credit card statements as of 12/31 and interest for the year

Copies of invoices for any single item asset purchases over \$2,500 – vehicles, equipment, furniture, fixtures, or improvements

If your company operates in multiple states, please provide a breakdown of sales and wages by location

Monthly statements for all bank accounts.

I have compiled the information provided and answers contained in this document. I certify that the information is complete and correctly reflects my business operations for the 2024 tax year.

Officer Signature

Date