



_____ C CORPORATION TAX QUESTIONNAIRE

GENERAL CORPORATION INFORMATION

Legal Name

Trade Name/DBA

EIN

Year End

Address

City

State

Zip Code

Principal Business Activity

Principal Product or Service

SHAREHOLDER OWNERSHIP INFORMATION

Please provide detailed information about each shareholder in the entity for the tax year. For every shareholder, please provide their Full Name, Tax Identification Number (TIN) or Social Security Number (SSN), current Address, and their Ownership Percentage in the entity.

Full Name	TIN/SSN	Address	Own %

CORPORATION SPECIFIC QUESTIONS

Please answer each of the following questions to the best of your knowledge.

Was the primary purpose of the Corporation activity to realize a profit?	<input type="radio"/> Yes	<input type="radio"/> No
Did the corporation hold an annual meeting with shareholders with a record of minutes maintained?	<input type="radio"/> Yes	<input type="radio"/> No
Is the corporation a subsidiary in an affiliated group or a parent-subsiary controlled group?	<input type="radio"/> Yes	<input type="radio"/> No
Is any shareholder in the corporation a disregarded entity, a partnership, a trust, an Corporation, or an estate?	<input type="radio"/> Yes	<input type="radio"/> No
Did any foreign or domestic corporation, partnership, trust, or tax-exempt organization own directly 20% or more, or own, directly or indirectly, 50% or more of the total voting power of all classes of the corporation's stock entitled to vote?	<input type="radio"/> Yes	<input type="radio"/> No
Did any individual or estate own directly 20% or more, or own, directly or indirectly, 50% or more of the total voting power of all classes of the corporation's stock entitled to vote?	<input type="radio"/> Yes	<input type="radio"/> No
Did the corporation own directly 20% or more, or own, directly or indirectly, 50% or more of the total voting power of all classes of stock entitled to vote of any foreign or domestic corporation not already included in a listing of affiliated groups?	<input type="radio"/> Yes	<input type="radio"/> No
Did the corporation own directly an interest of 20% or more, or own, directly or indirectly, an interest of 50% or more in any foreign or domestic partnership or in the beneficial interest of a trust?	<input type="radio"/> Yes	<input type="radio"/> No
At any time during the tax year, did one foreign person own, directly or indirectly, at least 25% of the total voting power of all classes of the corporation's stock entitled to vote or the total value of all classes of the corporation's stock?	<input type="radio"/> Yes	<input type="radio"/> No
Did the corporation have an 80% or more change in ownership, including a change due to redemption of its own stock?	<input type="radio"/> Yes	<input type="radio"/> No
Did the corporation dispose of more than 65% of its assets in a taxable, nontaxable, or tax deferred transaction?	<input type="radio"/> Yes	<input type="radio"/> No
At any time during the year did the corporation have an interest in, or signature authority over, a financial account in a foreign country?	<input type="radio"/> Yes	<input type="radio"/> No
Did the corporation pay \$600 or more of nonemployee compensation to any individual?	<input type="radio"/> Yes	<input type="radio"/> No
If Yes, did you issue Form 1099-NEC?	<input type="radio"/> Yes	<input type="radio"/> No
Was there a distribution of property or a transfer (by sale or death) of a shareholder interest during the tax year?	<input type="radio"/> Yes	<input type="radio"/> No
At any time during this tax year, did the corporation (a) receive a digital asset (as a reward, award, or payment for property or services); or (b) sell, exchange, or otherwise dispose of a digital asset (or a financial interest in a digital asset)?	<input type="radio"/> Yes	<input type="radio"/> No

CORPORATION BUSINESS CREDITS

Please answer each of the following questions to the best of your knowledge.

Did the Corporation pay expenses to make it accessible by individuals with disabilities?	<input type="radio"/> Yes	<input type="radio"/> No
Did the Corporation pay any FICA on employee wages for tips above minimum wage?	<input type="radio"/> Yes	<input type="radio"/> No
Did the Corporation own any residential rental buildings providing qualified low-income housing?	<input type="radio"/> Yes	<input type="radio"/> No
Did the Corporation incur any research and experimental expenditures during the tax year?	<input type="radio"/> Yes	<input type="radio"/> No
Did the Corporation have employer pension plan start-up costs?	<input type="radio"/> Yes	<input type="radio"/> No
Did the Corporation pay health insurance premiums for employees?	<input type="radio"/> Yes	<input type="radio"/> No
Did the Corporation purchase and place in service any electric vehicles or energy efficient commercial building property?	<input type="radio"/> Yes	<input type="radio"/> No

ACCOUNT INFORMATION

To facilitate any direct debits or direct deposits associated with your tax return, please provide your bank account details. Note that we will only schedule payments or arrange for direct deposits after you have reviewed, signed, and confirmed the amounts on your return. Any bank account information not specified in this questionnaire will not be used during the return preparation process. This ensures that all financial transactions related to your tax return are conducted securely and according to your confirmed instructions

Use account information for:

- ☐ Direct deposit of refund
- ☐ Direct debit of balance due

Account type:

- ☐ Checking
- ☐ Savings

Name of Financial Institution

Routing Number

Account Number

ESTIMATED TAX PAYMENTS

Please provide details of any estimated tax payments made for the tax year. For each payment, specify whether it was for federal or state taxes. If it was a state payment, indicate the state name. Additionally, include the amount paid and the date of payment for each.

Date	Jurisdiction (IRS or List State)	Amount Paid