

2025 CORPORATION/PARTNERSHIP INFORMATION SHEET

BUSINESS NAME: _____

EIN: _____

PLEASE CIRCLE TYPE OF ENTITY: S-CORP C-CORP PARTNERSHIP

ARE YOU REGISTERED WITH THE STATE? YES NO **WHAT STATE ARE YOU REGISTERED WITH:** _____

PLEASE PROVIDE A COPY OF THE STATE REGISTRATION & EIN CONFIRMATION LETTER

DATE BUSINESS STARTED: _____

S ELECTION EFFECTIVE DATE: _____ (LETTER RECEIVED FROM IRS FOR S-CORP ELECTION)

WHAT DOES YOUR BUSINESS DO: _____

DO YOU PROVIDE A PRODUCT OR SERVICE: _____

BUSINESS ADDRESS: _____

CONTACT PERSON: _____

PHONE NUMBER: _____

ACCOUNTING METHOD: CASH ACCRUAL (PLEASE EXPLAIN WHY THIS METHOD IS BEING USED)

DID YOU PROVIDE A COPY OF A PROFIT & LOSS? YES NO

DID YOU PROVIDE A COPY OF A BALANCE SHEET? YES NO

IS THIS ACTIVITY A QUALIFIED TRADE/BUSINESS? YES NO

SPECIFIED SERVICE TRADE OR BUSINESS? YES NO

DO YOU HAVE EMPLOYEES? YES NO

DID YOU PROVIDE A PAYROLL SUMMARY & W3? YES NO

PLEASE LIST ALL SHAREHOLDERS OR PARTNERS- PLEASE SPECIFY GENERAL, LIMITED, PASSIVE

NAME	ADDRESS	SS #	% OF OWNERSHIP	PARTNER SPECIFIED

DID YOU DO WORK INSIDE CITY LIMITS, IF YES PLEASE LIST OUT EACH CITY & GROSS AMOUNT MADE IN EACH AND ANY ESTIMATED PAYMENTS MADE TO EACH:

CITY	GROSS AMOUNT	EST 1 ST QTR	EST 2 ND QTR	EST 3 RD QTR	EST 4 TH QTR

WE PROVIDE 1 COPY OF THE RETURN; ADDITIONAL COPIES MAY BE PROVIDED AS REQUESTED. THERE IS A \$45 FEE FOR EACH ADDITIONAL COPY. NUMBER OF ADDITIONAL COPIES? _____

PRINT: _____

SIGN: _____

DATE: _____