

2025 Tax Organizer for Corporations

Business Information

Business Information

Corporation's legal name				EIN	
Doing business as					
In care of name					
Street address, city, state, and ZIP					
Email					
Phone number		Cell number		Fax number	
Date incorporated	State of incorporation				

Yes No

Does the corporation file under a calendar year?

If "No," what is the tax year begin date? _____ Tax year end date? _____

Did the corporation conduct business activities in any state other than the resident state?

If "Yes," what states? _____

Is this a consolidated return?

If "Yes," is this a life / nonlife consolidated return? _____

Is the corporation a personal holding company?

Is the corporation a personal service corporation?

Is the corporation a qualified personal service corporation?

Is the corporation a cooperative association?

Is the corporation a homeowners association?

What accounting method does the corporation use?

Cash Accrual Other (describe) _____

What is the corporation's principal business activity? _____

What product or service does the corporation provide? _____

Is the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group?

If "Yes," provide the following information for the parent corporation

Employer ID number _____

Name _____

Estimates

	Federal		Resident State		Resident City	
	Date Paid	Amount	Date Paid	Amount	Date Paid	Amount
Overpayment applied from 2024						
First quarter						
Second quarter						
Third quarter						
Fourth quarter						
Additional payments						

Account Information for Deposits and Withdrawals

Name of Bank	Bank Routing Number	Bank Account Number	Type of Account		Use This Account for	
			Checking	Savings	Deposits	Withdrawals