

YEAR END TAX PLANNER



Taxpayer & Business Information

First Name & Middle Initial:
Last Name:
Social Security Number:
Business name:
EIN Number (Business Tax ID):
Phone Number:
Email Address:

Planning Information

Total Business Income from January - Year to Date: _____

Estimate of total categorized expense January - Year to Date

Purchases		Legal & Professional Fees	
Cost of Items for Personal Use		Licenses & Permits	
Cost of Labor		Meals	
Materials & Supplies		Office Expense	
Other Costs		Outside Services	
Ending Inventory		Parking & Tolls	
Accounting		Pension & Profit Sharing Plans	
Advertising		Postage	
Amortization (Bring Schedule)		Printing	
Answering Service		Refuse Disposal	
Bad Debt		Rent- Machinery / Equipment	
Bank Service Charge		Rent - Other Business Property	
Car & Truck Expenses		Repairs	
Collection Expense		Security & Safety	
Commissions		Storage	
Delivery / Freight		Supplies	
Depreciation (Bring Schedule)		Taxes - Business	
Dues / Publications		Taxes - Payroll	
Education Expense		Taxes - Property	
Employee Benefit Programs Gifts		Taxes - Other	
Guaranteed Payments		Telephone	
Insurance - Auto		Theft/ Casualty	
Insurance - Other		Tools	
Interest - Auto		Travel - Airfare	
Interest - Mortgage		Travel - Lodging	
Interest - Other		Travel - Meals	
Janitorial Service		Travel - Other	
Laundry & Cleaning		Uniforms	
Lease - Equipment		Utilities	
Lease - Auto		Wages & Salaries	

Additional Income from Year to Date - December 31st

Source of additional income	Amount

Additional Expenses from Year to Date - December 31st

Source of additional expenses	Amount

Did you make an estimated tax payments?

STATE	Amount	FEDERAL	Amount
January 1 - March 31		January 1 - March 31	
April 1 - June 30		April 1 - June 30	
July 1 - September 30		July 1 - September 30	
October 1 - December 31		October 1 - December 31	

W-2 Paystub Information (2 Most Recent Paystubs - Please Provide Copies)

Paystub 1	Amount	Paystub 2	Amount
Gross Earnings YTD		Gross Earnings YTD	
State Withholding YTD		State Withholding YTD	
Federal Withholding YTD		Federal Withholding YTD	
Deductions		Deductions	

Do you have an EFTPS account? Yes / No

EIN:
PIN:
Password:

Do you have a My FTB account? Yes / No

EIN:
PIN:
Password:

Do you have an IRS account? Yes / No

EIN:
PIN:
Password:

Do you have an EDD account? Yes / No

EIN:
PIN:
Password: