

RANDALL A. LENZ

ATTORNEY-AT-LAW · CERTIFIED PUBLIC ACCOUNTANT

199 14TH STREET, NE SUITE 1907

ATLANTA, GEORGIA 30309-3688

(404) 815-1731, CELL (404) 323-1731, FAX (404) 815-0717

RLENZ@ATL.MINDSPRING.COM

CORPORATION TAX ORGANIZER (1120)

Corporation Name	_____	Tax Period	_____
Address	_____	Federal ID#	_____
	_____	State ID#	_____

Please provide an end of the year balance sheet and profit and loss statement. If you have a Quickbooks file, you can e-mail the file to rlenz@atl.mindspring.com or print out and fax or send a standard Profit & Loss and standard Balance Sheet. In addition, please provide the following information:

	<u>DONE</u>	<u>N/A</u>
1. Copies of correspondence with tax authorities regarding changes to prior year returns.	_____	_____
2. Details of changes in stock ownership.	_____	_____
3. For each corporate officer provide SS#, compensation, percentage of ownership and time devoted to business.	_____	_____
4. Schedule of loans to/from shareholders, officers and related parties including interest rates and payment schedules.	_____	_____
5. Detailed analysis of entries in prepaid, accrued, and income tax expense accounts, including dates and amounts of all federal, state and local income tax payments and refunds.	_____	_____
6. Copies of Forms 1099, 941, 940, 5500, 1042 and W-2 that have been filed.	_____	_____
7. Schedule of all interest and dividend income.	_____	_____
8. Schedule of assets acquired and/or sold during the year including date acquired, date sold sales or purchase price, including any trade-in allowance.	_____	_____
9. Copy of the inventory uniform capitalization computation.	_____	_____
10. Schedule of contributions.	_____	_____
11. Detail of any lobbying expenses.	_____	_____
12. List expenses, such as penalties and life insurance premiums.	_____	_____

- 13. Schedule of any club dues paid. _____
- 14. Vehicle and mileage data for company-owned passenger vehicles. _____
- 15. Details of miscellaneous income/expense accounts. _____
- 16. Furnish total of meal and entertainment expenses. _____
- 17. List of activities conducted in other states. _____