

2018 BUSINESS QUESTIONNAIRE
CORPORATION, PARTNERSHIP, OR SCHEDULE C FILER



GENERAL INFORMATION

Name of Entity _____ EIN # _____ - _____
 Assumed Name filed with Secretary of State _____
 Your Name _____ Phone # _____
 Address (If Changed) _____ E-mail _____

AUTO MILEAGE DOCUMENTATION (WRITTEN RECORD REQUIRED)

NOTE: If the answer to #2 or #3 is no, you must recreate 3 months of auto logs before we can deduct any of your auto expenses.

	Yes	No
1 Is another vehicle available for personal use?		
2 Do you have evidence to support your mileage information reported above?		
3 If "Yes", is the evidence written in a log or other place?		

VEHICLE INFORMATION AND EXPENSES (WRITTEN RECORD REQUIRED)

		Vehicle 1	Vehicle 2
1	Auto Make, Model, & Year		
2	Total Miles in 2018 Jan 1 to Dec 31		
3	Business Miles in 2018 Jan 1 to Dec 31 (.545)		
4	Commuting Miles		
5	Tabs (Required information)		
	Auto Loan Interest paid in 2018		
6	Was this vehicle purchased in this tax year? ■ If yes, complete balance of line 6.	___ Yes ___ No	___ Yes ___ No
	Date of Purchase? (2018 purchases only)	Date ____/____/____	Date ____/____/____
	(Provide purchase agreement)	Price \$ _____	Price \$ _____
	Is it over 6,000lbs GVW?	___ Yes ___ No	___ Yes ___ No
	Loan balance end of year?		
7	Actual Expenses		
	Gas	\$ _____	\$ _____
	Oil	\$ _____	\$ _____
	Insurance	\$ _____	\$ _____
	Repairs/Maint.	\$ _____	\$ _____
	Other	\$ _____	\$ _____
	Lease Pymt's	\$ _____	\$ _____

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1. What is your total Cell Phone Service Expense? \$ _____
 Does your plan have multiple phone lines? (Family Plan) ___ Yes ___ No
 If Yes, what is the annual amount for non-business lines? \$ _____
 What is the BUSINESS use percentage for? **For Business Lines Only** _____%
2. What is your total Internet Expense (do NOT include cable TV)? \$ _____
 What is the BUSINESS use percentage for? _____%
3. Were payments made that required filing forms 1099? ___ Yes ___ No
 If Yes, were all required forms 1099 filed or will be filed? ___ Yes ___ No

TAX LAW CHANGES: THE TAX CUTS AND JOB ACT CHANGED HOW MEALS & ENTERTAINMENT EXPENSES ARE DEDUCTIBLE FOR 2018. PLEASE REVIEW THE CHART BELOW AND ENTER THE CORRESPONDING TOTALS FOR EACH TYPE OF EXPENSE.

Meals and Entertainment Deduction for 2018

Expense Type	Fed Law 2018	MN Law 2018
Office/Holiday Parties (for Employees)	100% deductible	100% deductible
Business Meals	50% deductible	50% deductible
Employee Travel Meals	50% deductible	50% deductible
Employee Meals – At Office	50% deductible	100% deductible
Business Entertainment	Not Deductible	50% deductible

Enter TOTAL COST for each category at 100%

- \$ _____ Office/Holiday Party Meals for Employees
 \$ _____ Business Meals
 \$ _____ Employee Travel Meals
 \$ _____ Employee Meals – At Office
 \$ _____ Business Entertainment

In an effort to be certain you gain all the tax advantages possible, please take a moment to complete these questions. Your answers to these questions are **VERY IMPORTANT** in determining your qualifications for the new 20% business deduction.

Date:	
Business Name	
Client Name	

WHAT DO YOU DO?

Does your business make a physical product?	Yes	No	unsure
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If YES - Describe your product here . . .

Does your business sell a service	Yes	No	unsure
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If YES - Describe your service here . . .

Do you "make something" in your business	Yes	No	unsure
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If YES - Describe what you make . . .

HOW DO YOU DO IT?

TYPE HERE: Describe to us how you generate your income. EXAMPLE: BBD sells it tax planning services to small businesses. We generate our revenue from tax preparation, accounting services and business consulting services.

WHO DO YOU SELL TO

TYPE HERE: Describe to us who your customers are.

YOUR INDUSTRY: Please check which occupation most closely resembles yours. (You can check more than one)

	INDUSTRY TYPE	Yes	No	% of revenue
Check each industry that applies. Please indicate what % of your annual revenue comes from that industry.	Accounting Services			
	Agriculture			
	Architect			
	Construction - New Homes			
	Construction - Remodel			
	Consulting - (Describe below)			
	Education/Training			
	Financial Planning Services			
	Health Services			
	Insurance Agent (commission income)			
	Legal Services - Attorney			
	Management Services			
	Manufacturing			
	Performing Arts			
	Real Estate Agent (commission income)			
	Retail Sales - List			
	Sales Agent Other - Describe			
	Skilled Trade Occupation - Electrician, Plumber, etc.			
	OTHER: List			
	Additional Details - Describe here.			

Do you have any other business activities besides what is listed here	Yes	No	unsure
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If YES - Describe ...