

2025 SMALL BUSINESS TAX ORGANIZER

COMPLETED ORGANIZER RECEIVED ON:

RECEIVED BY:

REFERRED BY:

This organizer will help you organize your business tax information so that MainStreet can maximize your tax savings.
If this is your first time with MainStreet, please provide a copy of your prior 2 years business tax returns (if applicable).

PART 1: COMPANY INFORMATION

Company Name:

Industry:

Entity Type:

☐ Sole Proprietor/DBA (non) ☐ Partnership ☐ LLC ☐ S-CORP ☐ C-CORP

Company Address:

EIN # (if applicable):

Date of Incorporation (Not required for Sole Prop's):

State of Incorporation:

S-Election Date (if applicable):

Company Ownership: Include information on additional owners in the ADD ADDITIONAL OWNERS section on last page.

Owner #1 Name:

Owner #2 Name:

Percentage of Ownership:

Percentage of Ownership:

SSN/EIN:

SSN/EIN:

Address:

Address:

Phone #:

Phone #:

Email:

Email:

If using QuickBooks or QuickBooks Online, send accountants file to accountant or give access to accountant, and then skip to page 5.

PART 2: COMPANY FINACIALS

Skip this section by simply attaching an accurate 2024 Profit & Loss Statement and Balance Sheet!

Income:

List the amount(s) & type(s) of income your company received in 2025. *(Report selling of assets in the Fixed Asset section Below)*

Income Type: ☐ Sales (Gross) ☐ Rental ☐ Interest ☐ 1099* ☐ Other; _____ Amount: _____Income Type: ☐ Sales (Gross) ☐ Rental ☐ Interest ☐ 1099* ☐ Other; _____ Amount: _____Income Type: ☐ Sales (Gross) ☐ Rental ☐ Interest ☐ 1099* ☐ Other; _____ Amount: _____Income Type: ☐ Sales (Gross) ☐ Rental ☐ Interest ☐ 1099* ☐ Other; _____ Amount: _____

* Independent Contractor; Attach any 1099 forms to this organizer

COST OF GOODS SOLD:

List the cost of inventory associated with your business in the table below.

Description	Amount
Total amount of inventory remaining on December 31, 2024	
Total amount of inventory purchased during 2025	
Total amount of inventory remaining on December 31, 2025	

OPERATING EXPENSES:

Fill in the following business expenses as completely as possible. Remember, business expenses reduce taxable income.

Expense Account	Amount	Description
Accountant Fees		The total cost of tax prep fees, bookkeeping, payroll, etc.
Bank Fees		The total cost of bank fees, credit card fees, etc.
Computer Expense		Cost of operating & application software, virus protection, repairs, in etc. for the year.
Dues/Subscriptions		The cost of membership dues, publication subscriptions, etc.
Education/Certification & Training		The total cost of certification, training, workshops, etc.
Employee Leasing		The fees related to temporary or leased employees (not wages).
Equipment Rental		The total spent to rent equipment for the company.
Fuel		The total amount spent of gas/fuel for vehicle for the year.
Income Tax (C-Corp Only)		The amount of income tax paid by the business.
Independent Contractor		Payments made to non-employees.
Insurance		Insurance for business, workers comp, liability, etc.
Interest on Vehicle		Interest paid to a bank on a loan for vehicle.
Internet		The total cost of internet fees for the year.
Legal Professional Services		The total cost of attorneys, consultants, hr professionals, etc.
Marketing/Advertising		The total cost of advertising, promotional materials, sponsorships, website, graphic design, signage, consulting, etc.
Meals Only		The total cost of business meals. Includes of employee parties &/or lunches, sales lunches, business travel meals, etc.
Office Expense		Office expenses are more service-related items such as janitorial supplies, cleaning services, water cooler, etc.
Office Supplies		Office Supplies are small items that are used within the office such as paper, staples, pens, etc.
Operating Expense		Cost directly related to the general operation of the company, such as software, merchant fees, etc.
Owner's Health Care		The total share of insurance premiums & other medical expenses paid BY THE COMPANY for owner.
Payroll - Officers Wages		The gross amount of wages paid to officers.
Payroll - Wages		The gross amount of wages paid to employees.
Per Diem		The amount paid to employees/owners for business travel expenses.*
Phone/Communications		Total cost of cell phone/land line fees for the year.
Postage/Shipping		The total cost of businesses shipping/mail, including postage.
Rent		The total amount for non-resident office rent/lease payments.

OPERATING EXPENSES CONTINUED:

Repairs & Maintenance - Building		The cost of maintenance & repairs to building and property.
Repairs & Maintenance - Equipment		The cost of repairing & maintaining equipment for office use.
Repairs & Maintenance - Vehicle		Repairs & maintenance on vehicle including oil change, inspections, car wash, etc.
Small Tools		Office equipment (value is less than \$250) used for your business.
Storage Unit Rental		The cost of storage unit rental fees.
Taxes - Payroll Taxes		Taxes paid for employees portion of taxes.
Taxes - Property Taxes		The amount of taxes paid on a non-resident office.
Taxes & Licenses		The total amount sales tax, payroll tax, unemployment tax, & license fees paid by the business.
Travel - Hotel		The cost of hotel accommodations for business travel.
Travel - Other Business		The total cost of airline tickets, conference/expo fees, etc.
Travel - Rental Car		The total cost of renting a car for business use.
Travel - Taxi Fares		The costs of taxis for business travel, DO NOT include rental cars.
Utilities		The total amount of utilities paid for a non-resident office.
Vehicle Insurance		Insurance paid for vehicle for the year.
Vehicle Leasing		Total lease payment made for vehicle.
Vehicle Mileage (Total Mileage for the Year)		The total business miles driven (not \$) in 2024 (commuting not included).
Vehicle Registration Tax		Annual tax & registration fees paid for vehicle.
Website		Anything over \$500 for website development is considered an asset.

* Per Diem does not include actual expenses for hotels, rental cars, etc. Per Diem is generally a flat amount paid to an employee prior to business travel that is meant to cover all expenses. (Ex: \$180 per Diem for a one night trip out of town. 2024 Rates: www.gsa.gov/portal/category/21287)

EXPENSES UNIQUE TO INDEPENDENT AND/OR SUMMER SALES CONTRACTORS:

Summer Rent:	\$	<input type="text"/>	Shirts & Hat w/Logos:	\$	<input type="text"/>
Recruiting:	\$	<input type="text"/>	Incentives for Techs:	\$	<input type="text"/>
Health Insurance Premiums (Paid as self-employed person)	\$	<input type="text"/>	Monitoring Fees Paid by you for Customers	\$	<input type="text"/>
Contract Buyout Paid by you for Customers	\$	<input type="text"/>	Activation Fees Paid by you for Customers	\$	<input type="text"/>

TEMPORARY SALES LOCATION INFORMATION: If more than 3 cities, attach additional sheets if necessary.

City:	State:	From:	To:
<input type="text"/>	<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>

OTHER BUSINESS EXPENSES:

List all other business expenses incurred in 2025. Attach additional sheets if necessary.

HOME OFFICE EXPENSES:

Total Square Footage of Home

% of Shared Area(s) Used for Business

Square Footage of Area(s) Used Exclusively for Business (office, storage, production, etc)

of Months Operating Business from Home During 2025

Square Footage of Area(s) Used for Both Business & Personal Use

List the total expenses paid on the home during the year.

Rent/Mortgage Interest/Premium Ins Payment

Utilities (electricity, water, gas, trash, etc)

Property tax Paid on Home

HOA Fees

Home Repairs

Maintenance Costs

Home Insurance

HOME OFFICE DEDUCTION

The "Home Office Deduction" by definition is available to Sole Proprietors only, however, other entity owners can still write off home office expenses by personally leasing their home office space to their company.

To do so, create a lease agreement between you & your company, just as if you were renting the space to someone else.

Ask for More Information!

BANK ACCOUNTS as of December 31, 2025 List your **company** bank account balances. If you do not have separate business bank accounts, write "NA."

☐ Checking ☐ Savings _____

☐ Checking ☐ Savings _____

☐ Checking ☐ Savings _____

☐ Cash on Hand _____

FIXED ASSETS: *Report assets that were purchased (P) or sold (S) in 2025 used for business. Attach req. documents and additional sheets if necessary. If the asset used for both personal & business purposes, please report the % of business use.*

Type of Asset	(P)(S)	Date	% Biz Use	Amount	Desc. of Asset(s)	Req. Doc
Computer Equip.						
Office Equip.						
Shop Equip.						
Land/Building(s)						
Vehicle(s)						
Phone(s)						
Website Development						
Other						

*If the asset was purchased personally in a prior year and converted to a business asset in 2025 provide proof of the asset's current value. If more than one asset, please attach sheet or email a spreadsheet to accountant.

BALANCE SHEET ACCOUNTS:

Fill in the following account balances as of **December 31, 2025** (Some accounts may not apply to your business)

Account	Amount	Description
Accounts Receivable		
Office Accounts Payable		
Note(s) Receivable		
Note(s) Payable		
Wage(s) Payable		
Payroll Advances		
Unpaid Payroll Taxes		
PPP LOAN		Was it Forgiven: Answer Yes or No? Date:

QUESTIONS/COMMENTS:

Please list all of the questions and/or comments you have in regards to the answers you have provided or issued not discussed in this organizer and we will see that they are answered.

[illegible]

ALL INFORMATION I HAVE GIVEN IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE.

SIGNATURE: _____ **DATE:** _____

PART 3: PAYMENT AUTHORIZATION

Payment Information:

How will you pay your returns when they are completed?

☐ Same as Personal Return ☐ Prepaid Retainer (Check) ☐ Credit Card* ☐ ACH Payment

By selecting CREDIT CARD, you authorize MainStreet to charge this account **upon completion of the work.*

Credit Card #: Expiration Date:
Name on Card: Security Code:
Address on Card: City:
State: Zip Code:

☐ VISA ☐ AMEX ☐ DISCOVER ☐ MASTER CARD ☐ OTHER:

Required Information for ACH Payment (a voided check may be included instead).

Account Name(s): Name of Bank:
Bank Routing #: Checking Account #:

AUTHORIZATION:

I have fully read and understand the terms and disclosures of this agreement (see below) and understand that **my tax return(s) will not be released or e-filed/filed until all invoices associated with the preparation of my tax return(s) have been paid in full.**

Terms and disclosure statement: Payment to MainStreet Tax and Accounting is due at the time the accountant has finished the work on the tax return(s). This may be before signatures have been acquired and before the tax return(s) have been e-filed/filed. If a credit card has been provided, it will be charged at that time. An email and receipt will be sent. If a credit card is not provided, a retainer may be required. Should a credit card be declined, client agrees to pay a finance charge of 18% per annum on all past due invoices. In the event that any balance is not paid as agreed upon, the client agrees to pay a collection fee equal to 40% of the unpaid balance. In the event of a lawsuit to collect the unpaid balance(s), the client further agrees to pay court costs and attorney fees. By signing this sheet, the client agrees to the terms listed and grants MainStreet Tax & Accounting permission to run a credit check if necessary and to run payment.

I AUTHORIZE MAINSTREET TO PROCESS PAYMENT ONCE MY TAX RETURN IS COMPLETED.

SIGNATURE: _____ DATE: _____

Thank you for trusting MainStreet with your tax return preparation!

ADD ADDITIONAL OWNERS

Owner #3 Name:

Percentage of Ownership:

SSN/EIN:

Address:

Phone #:

Email:

Owner #4 Name:

Percentage of Ownership:

SSN/EIN:

Address:

Phone #:

Email:

Owner #5 Name:

Percentage of Ownership:

SSN/EIN:

Address:

Phone #:

Email:

Owner #6 Name:

Percentage of Ownership:

SSN/EIN:

Address:

Phone #:

Email:

Owner #7 Name:

Percentage of Ownership:

SSN/EIN:

Address:

Phone #:

Email:

Owner #8 Name:

Percentage of Ownership:

SSN/EIN:

Address:

Phone #:

Email: