



Year-End Business Data Sheet

**All amounts should be reported as of 12/31/16.
Please complete all that apply to your business.**

**This information will assist in completing your tax return.
RETURN THIS FORM TO LET US KNOW YOUR ACCOUNTING IS READY FOR REVIEW.**

Tell us how to access your accounting records by checking the appropriate solution below:

QuickBooks Desktop backup enclosed or uploaded to client portal (*password: _____*)

QuickBooks Online (*accounting for January through December is ready for review*)

Other (*records are enclosed or uploaded to client portal*)

A Cash: Checking account(s)

Savings account(s)
(Reconciled balance)

Cash on hand

B Ending inventory (at cost)

C Accounts payable total

D Accounts receivable total

E Customer advanced deposit(s) and/or unredeemed gift cards

F Construction contractors: Please provide job cost sheets for jobs in progress at year-end. Please call if you need worksheet format.

G Information on credit cards and loans for business & mortgages (required)

Name of creditor	Loan balance	Interest paid/year
<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"/>

H Did you purchase anything through the business that was for personal use? Yes No
If yes, please explain.

I Vehicle information

Vehicle 1

Vehicle 2

Vehicle 3

Year and make
Total miles for the year
Business miles for the year
Commuting miles for the year

- J** Do you have evidence to support the business miles? Yes No
- K** Is the evidence for business miles written evidence? Yes No
- L** Do you have another vehicle available for personal use? Yes No
- M** Insurance paid for shareholder/partner or proprietor:

**Note: If your business is an S-corporation, we will need the health insurance amount for your W-2 preparation.*

Provider	Health insurance amount	Life insurance amount	Disability insurance amount

- N** Do you provide service(s) or deliver product(s) in states other than Pennsylvania? Yes No
If yes, please list the states and corresponding income: _____
- O** Do you have a capitalization policy? Yes No
- P** Did you acquire any new assets or equipment greater than \$2,500? Yes No
If yes, please provide a list and indicate if new or used, or provide a copy of the invoice.
- Q** Did you make any payments in 2016 that would require you to file Form(s) 1099? Yes No
If yes, did you file or will you file all required Form(s) 1099? Yes No
- R** Please provide us with all Form(s) 1099-K received.
- S** List any gift card sales not included in income: \$ _____
- T** Did you purchase health insurance for your employees? Yes No
If yes, did you purchase through the Small Business Health Options Program (SHOP) Marketplace via a broker or the website?

U Please review the attached depreciation schedule. Indicate if sold or scrapped, and when. If an asset was sold, please list the sale price.

To the best of my knowledge, the above information is true and correct.

Signature: _____ Date: _____
Title: _____

DID YOU KNOW? NEW FILING DEADLINE FOR FORMS 1099

The new deadline for filing Forms 1099 with the IRS is **January 31, 2017**. If you issue these forms from your business, please note the change in due date. Keep in mind, these forms are still due to contractors by January 31, so it's important to prepare and file them early, if possible.