	2	024 BUSINE	SS INFORMATIO	N SHEET	
1) If we did not prepare the busin	ess tax return l	ast year, please p	provide us a copy.		
2) Complete this INFORMATION	N SHEET and s	end it to us with	the business INCOME ST	TATEMENT and BA	LANCE SHEET.
Company Name					
Doing Business As (if any)					
Employer ID Number (EIN)					
Date Incorporated/Organized					
Business Address					
Name of Signing Officer					
SSN of Signing Officer					
Title or Designation					
Contact Phone Number					
Email Address					
Date of S-Corp Election					
Business Code (for new clients only)					
*If you do not know, describe the type	of business:				
OWNERS INFORMATION					
Full Name	SSN	% of Ownership	Street Address	City	State, Zip Code