



## NEEDS ASSESSMENT QUESTIONNAIRE

### General Information

Company Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP \_\_\_\_\_

Contact: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_

Type of Legal / Tax Entity: S-Corp \_\_\_ C-Corp \_\_\_ LLC \_\_\_ Sole Proprietorship \_\_\_ State \_\_\_\_\_

Type of Business Entity: Retail \_\_\_ Service \_\_\_ Manufacturing \_\_\_ Wholesale \_\_\_ Non-Profit \_\_\_

Service and/or Product Sold: \_\_\_\_\_ [Business Code](#): \_\_\_\_\_

Start-up? Yes \_\_\_ No \_\_\_ Annual Sales: \$ \_\_\_\_\_ Annual Net Income \$ \_\_\_\_\_

How did you hear about us? Internet \_\_\_ Referral \_\_\_ Other \_\_\_\_\_

### Accounting Software

Do you currently own any accounting software? Yes \_\_\_ No \_\_\_

If so, what brand & version? \_\_\_\_\_

Are you currently having data entered in or using the software? Yes \_\_\_ No \_\_\_

Do you or does someone in your office plan to continue doing any data entry? Yes \_\_\_ No \_\_\_

### Bank Accounts

How many bank accounts for the business do you have? \_\_\_\_\_

Approximately how many checks are written and debit transactions posted per month? \_\_\_\_\_

Approximately how many deposit transactions are there per month? \_\_\_\_\_

May we have access to your online bank accounts (speeds up data entry)? Yes \_\_\_ No \_\_\_

### Credit Cards, Lines of Credit, Loans

Does the business use credit cards for purchases? Yes \_\_\_ No \_\_\_

How many credit card accounts does the business have? \_\_\_\_\_

Does the business have open lines of credit with the bank? Yes \_\_\_ No \_\_\_

Does the business have any long-term loans that it's paying on? Yes \_\_\_ No \_\_\_

### Accounts Payable

Do you have payments automatically paid out of the bank account or on a credit card? Yes \_\_\_ No \_\_\_

Do you enter the bills and then pay them at a later date? Yes \_\_\_ No \_\_\_

### Accounts Receivable

Approximately how many invoices per month are generated? \_\_\_\_\_

How often do you bill your customers? Weekly \_\_\_ Monthly \_\_\_ As Needed \_\_\_

Do you accept credit card payments? Yes \_\_\_ No \_\_\_

Do you require a deposit on work to be done or payment upfront? Yes \_\_\_ No \_\_\_

### Payroll

Does the company have employees that have taxes taken out of their checks? Yes \_\_\_ No \_\_\_

If so, how many Employees? \_\_\_\_\_

How often are employees paid? Weekly \_\_\_ Bi-weekly \_\_\_ Semi-Monthly (15<sup>th</sup> & 30<sup>th</sup>) \_\_\_

Who currently processes your payroll and payroll tax turns?

\_\_\_ Outside Payroll Service Who? \_\_\_\_\_

\_\_\_ Accounting Firm Who? \_\_\_\_\_

\_\_\_ In-House

Do you use individuals to perform work as a subcontractor (1099)? Yes \_\_\_ No \_\_\_

### Sales Tax

Do you collect/charge sales tax? Yes \_\_\_ No \_\_\_

If so, do you pay monthly or quarterly? Monthly \_\_\_ Quarterly \_\_\_

Is it prepared in-house or by an outside firm? In-House \_\_\_ Outside Firm \_\_\_

### Income Tax

Who currently prepares your company's year-end tax returns? \_\_\_\_\_

If no one, are you also looking for someone to prepare your taxes? Yes \_\_\_ No \_\_\_