	Information							CLOC W	<i>э</i> ериние	organizer jo	enen EEe	
Legal name of LLC								EIN	<u> </u>	_		
LLC address	☐ (check if new add	dress)										
LLC Represe	ntative				Title							
220 Tepreseriant				Email			Pho	ne ()			
Principal bus	iness activity							'				
Principal pro	duct or service											
☐ Yes ☐ No	Was the primary	purpose of the	LLC	Cactivity to rea	lize a profit?							
	nethod: 🗖 Cash											
☐ Yes ☐ No	Does the LLC file	e under a calen	dar y	year? (If no, who	at is the fiscal y	rear?)						
☐ Yes ☐ No	Has the LLC mad	de the election	to be	taxed as a cor	poration?							
If the LLC is	an S corporation, p	provide a copy	of Fo	orm 2553, Electr	ion by a Small	Business	Corporation, an	d the accep	tance le	tter from th	e IRS.	
LLC Specific	Questions											
☐ Yes ☐ No												
☐ Yes ☐ No	Are all members	actively partic	ipati	ng in the busin	ess?							
☐ Yes ☐ No	Is any member in	the LLC a dis	rega	rded entity, a p	artnership, a	trust, an	S corporation,	or an estate	?			
☐ Yes ☐ No	Is the LLC a part	ner in another	partı	nership?								
☐ Yes ☐ No	Did any foreign or domestic corporation, partnership, trust, tax-exempt organization, individual, or estate own directly or indirectly 50% or more of the profit, loss, or capital of the LLC?											
☐ Yes ☐ No	Did the LLC own directly 20% or more, or own directly or indirectly, 50% or more of the total voting power of all classes of stock entitled to vote of any foreign or domestic corporation?											
☐ Yes ☐ No	Did the LLC have any debt that was cancelled, was forgiven, or had the terms modified so as to reduce principal amount of debt?											
☐ Yes ☐ No	At any time during the year, did the LLC have an interest in, or signature authority over a financial account in a foreign country?											
☐ Yes ☐ No												
☐ Yes ☐ No	 The LLC's total receipts for the tax year were less than \$250,000, and The LLC's total assets at the end of the tax year were less than \$1 million. 											
☐ Yes ☐ No				y individual? I	f yes, include	a copy o	f Form 1099-NI	EC for each				
Principal Mo	embers Ownersh	ip Information										
Name Tax ID number (SSN or EIN) Address			Address				Ownership percentage			U.S. citizen?		
IIC Other Tr	ancactions											
LLC Other Transactions Member name		Guaranteed payments	Health insurance premiums paid		Capital contribution from member		Distributions to member	Member lo			Loans repaid by LLC to member	
		Figure	7					1				
All Clients –	Additional informat	tion and docume	ents r	equired		New C	lients – <i>Additio</i>	onal informa	tion and	documents i	required	
Provide the income/financial statements for the year (per books)				s), balance	Date LLC formed					•		
sheet, depreciation schedule per books, and cash reconciliation of							LC formed in					
bank accounts with ending cash balance. • If the LLC has employees or paid independent contractors, provided the last of the					vide a copy	• Provid Opera	Provide copies of LLC's Articles of Organization and Operating Agreement (if any).					
of all W-2, W-3, 940, 941, 1096, 1099-NEC, 1099-MISC, and any oth issued to workers. • If any members live in a different state or outside the U.S., provide					Provide copies of depreciation schedules for book, tax, and AMT.							
The business may be subject to withholding requirements.						Provide copies of tax returns for last two years, including state returns (if applicable).						

LLC Balance Sheet										
LLC assets at year end				LLC debts and equity at year end						
Bank account end of year balance	\$	Accounts payable at year end				\$				
Accounts receivable at end of ye	\$	Payabl	Payables less than one year			\$				
Loans to members		\$	Payables more than one year			\$				
Mortgages and loans held by LLC		\$	Mortga	ages, note	es payable		\$			
Stocks, bonds, and securities		\$ Loa		from mei	mbers		\$			
Other current assets (include list,)	\$	LLC capital accounts			\$				
Inventories		\$					<u> </u>			
LLC Income (include all Forms 10	199-K received)									
Gross receipts or sales	\$	Divide	Dividends income (include all 1099-DIV Forms)			\$				
Returns and allowances		\$()	Capital	Capital gain/loss (include all 1099-B Forms)			\$			
Interest income (include all 1099-	-INT Forms)	\$	Other income (loss) (include a statement)				\$			
LLC Cost of Goods Sold (for ma	nufacturers, wholesal	ers, and businesses	that make	e, buy, or s	sell goods)					
Inventory at beginning of the year	ear	\$	Materia	als and s	upplies		\$			
Purchases		\$	Inventory at the end of the year				\$			
Cost of labor		\$			· · · · · · · · · · · · · · · · · · ·					
LLC Expenses		'								
Advertising		\$	Manag	ement fe	es		\$			
Bad debts		\$		– busines			\$			
Bank charges		\$		supplies			\$			
Business licenses	\$	 	zation co	osts		\$				
Commissions and fees	\$		Pension and profit sharing plans \$							
Contract labor	\$	Rent or	\$							
Employee benefit programs	\$	Rent or	\$							
Employee health care plans	\$	Repairs and maintenance \$								
*Entertainment	\$	1	Taxes – payroll \$							
Gifts	\$		Taxes – property \$							
Guaranteed payments to memb	\$	1	Taxes – sales \$							
Insurance (other than health insur	\$	Taxes -	- state			\$				
Interest – mortgage	\$	Teleph	one			\$				
Interest – other	\$	Utilitie				\$				
Internet service	\$	Wages \$								
Legal and professional services	\$	Other expense \$								
*Entertainment is no longer dec	luctible for taxes.									
Car Expenses (use a separate fo	rm for each vehicle)									
Make/Model				Date car	placed in service	/ /				
☐ Yes ☐ No Car available for										
☐ Yes ☐ No ☐ Do you (or your spouse) have any other cars for personal				ll use? Did you trade in your car this year? ☐ Yes ☐ No						
☐ Yes ☐ No Do you have evidence?				Cost of trade-in Trade-in value						
☐ Yes ☐ No Is your evidence			\$ \$							
Mileage				Actual Expenses						
Beginning of year odometer		Gas/oil								
End of year odometer			Insurance		\$					
Business mileage		Parking fees/toll			\$					
Commuting mileage		Registration/fees \$		1						
Other mileage					\$					
Generally, you can use either the standard mileage rate or actual expenses to figure										
poses. However, to use the stan-										
choose between either the stand										
Equipment Purchases – Enter t	the following informati	ion for depreciable a	ssets pui	rchased th	nat have a useful life	greater than one ye	ar			
Asset			Date pı	urchased	Cost	Date placed in serv	vice New or used			
					\$					

\$

\$ \$

\$

Equipment S	old or Disposed of During Year							
Asset		Date of	Date out of service		Selling pric	Selling price/FMV		
					\$			
					\$			
					\$			
					\$			
LLC Busines	s Credits (if answered Yes for any of the below	v, please provide a state	ment with	details)				
☐ Yes ☐ No								
☐ Yes ☐ No	Did the business pay any FICA on employee wages for tips above minimum wage?							
☐ Yes ☐ No								
☐ Yes ☐ No	s □ No Did the business incur any research and experimental expenditures during the tax year?							
☐ Yes ☐ No	Did the business have employer pension p	olan start-up costs?		Total number of	nployees			
☐ Yes ☐ No	Did the business pay health insurance pre	miums for employees	nployees? Total number of e		employees			
Estimated Ta	x Payments — Tax Year 2021							
Installment		Date paid	Federal		Date paid	State		
First			\$			\$		
Second			\$			\$		
Third			\$			\$		
Fourth			\$			\$		
Amount applied from 2019 overpayment?			\$			\$		
Total			\$			\$		
COVID-19 Re	lated							
☐ Yes ☐ No	Did the business receive a Paycheck Protection Program loan?							
☐ Yes ☐ No	Did the business receive an Economic Injury Disaster Loan or Emergency Advance through the SBA?							
☐ Yes ☐ No	Did the business delay payment of employer payroll taxes?							
☐ Yes ☐ No	Did the business receive a payroll tax credit for sick leave paid to employees due to COVID-19?							
☐ Yes ☐ No	No Did the business receive a payroll tax credit for paid family leave paid to employees due to COVID-19?							
☐ Yes ☐ No Did the business receive a payroll tax credit for a business suspension or slowdown?								
Tax Ret	urn Preparation							

We will prepare the tax return based on information provided. In the event the return is audited, you will be responsible for verifying the items reported. It is important that you review the return carefully before signing to make sure the information is correct. Unless otherwise stated, the services for preparation of the return do not include auditing, review, or any other verification or assurance.

Taxpayer Responsibilities

- You agree to provide us all income and deductible expense information. If additional information is received after we begin working on the return, you will contact us immediately to ensure the completed tax returns contain all relevant information.
- You affirm that all expenses or other deduction amounts are accurate and that you have all required supporting written records. In some cases, we will ask to review documentation.
- You must be able to provide written records of all items included on the return if audited by either the IRS or state tax authority. We can provide guidance concerning what evidence is acceptable.
- You must review the return carefully before signing to make sure the information is correct.
- Fees must be paid before the tax return is delivered to you or filed for you. If you terminate this engagement before completion, you agree to pay a fee for work completed. A retainer is required for preparation of late returns.
- You should keep a copy of the tax return and any related tax documents. You may be assessed a fee if you request a copy in the future.

Signatures. By signing below, you acknowledge that you have read, understand, and accept your obligations and responsibilities.

Taxpayer	Title	Date

Privacy Policy

The nature of our work requires us to collect certain nonpublic information. We collect financial and personal information from applications, worksheets, reporting statements, and other forms, as well as interviews and conversations with our clients and affiliates. We may also review banking and credit card information about our clients in the performance of receipt of payment. Under our policy, all information we obtain about you will be provided by you or obtained with your permission.

Our firm has procedures and policies in place to protect your confidential information. We restrict access to your confidential information to those within our firm who need to know in order to provide you with services. We will not disclose your personal information to a third party without your permission, except where required by law. We maintain physical, electronic, and procedural safeguards in compliance with federal regulations that protect your personal information from unauthorized access.