LLC Tax Organizer

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TAX A	ND ACCOUNTING SER	RVICE, IN

LLC General	Information								1	organizer joi	
Legal name of LLC							EIN	[_		
LLC address	(check if new add	dress)									
LLC Represe	C Representative				Title						
1					Email			Pho	ne ()	
Principal bus	iness activity										
	duct or service										
	Was the primary				lize a profit?						
	nethod: 🗆 Cash			1 20							
	Does the LLC file				, ,	ear?)					
	Has the LLC mad										
	an S corporation, p	provide a copy	of Fo	orm 2553, Electi	ion by a Small	Business (Corporation, an	d the accep	tance le	tter from th	e IRS.
LLC Specific											
☐ Yes ☐ No	Does the LLC has agreement and the	articles of organ	iizati	on)		r of the L	LC's existence, p	olease provid	е а сору	of the operat	ing
☐ Yes ☐ No	Are all members		_								
☐ Yes ☐ No	Is any member ir			, ,	artnership, a t	trust, an S	S corporation,	or an estate	?		
☐ Yes ☐ No	Is the LLC a part										
☐ Yes ☐ No	Did any foreign of indirectly 50% or	more of the p	rofit,	loss, or capital	of the LLC?						
☐ Yes ☐ No	Did the LLC owr stock entitled to	n directly 20% ovote of any for	or mo eign	ore, or own dir or domestic co	ectly or indire rporation?	ectly, 50%	or more of the	e total votin	g powe	r of all class	ses of
☐ Yes ☐ No	Did the LLC have	e any debt that	was	cancelled, was	forgiven, or l	nad the te	erms modified	so as to red	uce prir	ncipal amou	nt of debt?
☐ Yes ☐ No	At any time duri	ng the year, did	d the	LLC have an i	nterest in, or s	ignature	authority over	r a financial	accoun	t in a foreig	n country?
☐ Yes ☐ No	Was there a distri	ibution of prop	erty	or a transfer (b	y sale or deat	h) of an l	LLC interest d	uring the ta	x year?		
□ Yes □ No	Does the LLC sat The LLC's total The LLC's total	receipts for th	e tax	year were less	than \$250,000 vere less than), and \$1 million	n.				
☐ Yes ☐ No	Did the LLC pay	\$600 or more t	o any	y individual? I	f yes, include	a copy of	f Form 1099-N	EC for each.			
☐ Yes ☐ No	Did the LLC have	e a Paycheck P	rotec	tion Program ((PPP) loan tha	t was for	given in 2022?	•			
Principal Mo	embers Ownersh	ip Informatior	1								
Name		Tax ID numbe (SSN or EIN)	r	Address				Ownership percentage	Memb membe	er or er-manager	U.S. citizen?
LLC Other Tr	ansactions										
Member name	Guaranteed Health insurance		Capital contributions from member Distributions to member				Loans repa to member				
All Clients – Additional information and documents required					New Clients – Additional information and documents required						
• Provide the income/financial statements for the year (per books sheet, depreciation schedule per books, and cash reconciliation of					Date LLC formed State LLC formed in						
bank accounts with ending cash balance.						de copies of LI	LC's Articles	of Org	anization a	nd	
• If the LLC has employees or paid independent contractors, prov of all Forms W-2, W-3, 940, 941, 1096, 1099-NEC, 1099-MISC, and					Opera	nting Agreeme de copies of de	nt (if any).	Ü			
forms issued to workers. • If any members live in a different state or outside the U.S., provi				ide details.	AMT. • Provide copies of tax returns for last two years, include						
					eturns (if appl	licable).					



LLC Balance	Sheet						
	LLC ass	sets at year end			LLC debts and e		
Bank account end of year balance			\$	Accou	ints payable at year end		\$
Accounts rece	eivable at end of y				les less than one year	\$	
Inventories			\$	Payab	les more than one year		\$
Loans to men	nbers		\$	Morte	ages, notes payable		\$
Mortgages an	d loans held by Ll	LC	\$		from members		\$
	, and securities		\$	LLC c	apital accounts		\$
	assets (include list	.)	\$		1		
		099-K, Forms 1099-MISO	C. and Forms 1099-N	EC recei	ved)		
Gross receipts			\$		end income (include all 1099-	DIV Forms)	\$
Returns and a			\$()		al gain/loss (include all 1099-	<u> </u>	\$
	ne (<i>include all 1099</i>	-INT Forms)	\$		income (loss) (include a state		\$
		nufacturers, wholesald				ment)	Ι Ψ
	peginning of the ye		\$		ials and supplies		\$
Purchases	beginning of the ye	eai	\$		tory at the end of the year		\$
Cost of labor			\$	niven	tory at the end of the year		D
	-		Φ				
LLC Expense	S					1000/ 1 1	T &
Advertising			\$		for business in restaurants (\$
Bad debts			\$		– other business meals (50%	deduct.)	\$
Bank charges			\$	 	supplies		\$
Business licer			\$		nization costs		\$
Commissions			\$		on and profit sharing plans		\$
Contract labo			\$	Rent or lease – car, machinery, equipment			\$
	nefit programs		\$	Rent or lease – other business property			\$
	alth care plans		\$	Repairs and maintenance			\$
*Entertainment		\$	Taxes – payroll			\$	
Gifts			\$	Taxes – property			\$
Guaranteed p	ayments to memb	ers	\$	Taxes – sales			\$
Insurance (ot)	ier than health insu	rance)	\$	Taxes – state			\$
Interest – mo	rtgage		\$	Telephone			\$
Interest – oth	er		\$	Utilities			\$
Internet servi	ce		\$	Wages			\$
Legal and pro	ofessional services		\$	Other expense			\$
*Entertainme	nt is no longer dec	ductible for taxes.					
Car Expense	S (use a separate fo	rm for each vehicle)					
Make/Model					Date car placed in service	/ /	
☐ Yes ☐ No		personal use during	off-duty hours?		•		
☐ Yes ☐ No		spouse) have any oth		ıl use?	Did you trade in your car t	his vear? ☐ Yes ☐] No
☐ Yes ☐ No	Do you have evid	<u> </u>	1		Cost of trade-in	Trade-in value	
☐ Yes ☐ No	Is your evidence				\$	\$	
- 165 - 110	15 your evidence	Mileage			•	tual Expenses	
Beginning of year odometer				Gas/oil	\$		
End of year odometer				Insurance	\$		
	Business mileage Jan. – June July – Dec.			Parking fees/tolls	\$		
Commuting mileage			Registration/fees	\$			
Other mileage			Repairs \$				
		ne standard mileago r	ate or actual evpor	nses to	calculate the deductible cost	J	ır car for husiness
					irst year the car is available		
		standard mileage rat					j zz, j ou cuit
					ırchased that have a useful life	greater than one ve	ar
Assal	J.1.4000 Entol	with the same of the same	101 aopiooiable a		www.hasad Cast	Data dan one ye	ruina Naru au usad?

Equipment Purchases — Enter the following information for depreciable assets purchased that have a useful life greater than one year							
Asset	Date purchased	Cost	Date placed in service	New or used?			
		\$					
		\$					
		\$					
		\$					
		\$					
		\$					



Equipment Sold or Disposed of During Year									
Asset		Date	ate out of service Date s		Selling price/FMV		Trade-in?		
					\$				
					\$				
					\$				
					\$				
LLC Busines	s Credits (if answered Yes for any of the belov	v, please provide a sta	tement with a	letails)					
☐ Yes ☐ No	Did the business pay expenses to make it a	accessible by individ	uals with dis	sabilities?					
☐ Yes ☐ No	Did the business pay any FICA on employ	Did the business pay any FICA on employee wages for tips above minimum wage?							
☐ Yes ☐ No	Did the business own any residential rental buildings providing qualified low-income housing?								
☐ Yes ☐ No	Did the business incur any research and experimental expenditures during the tax year?								
☐ Yes ☐ No	Did the business have employer pension p	lan start-up costs?	1 7						
☐ Yes ☐ No	Did the business pay health insurance pre-	miums for employee	yees? Total number of employees						
Estimated Tax Payments — Tax Year 2022									
Installment		Date paid	Fee	deral D	ate paid		State		
First			\$			\$			
Second			\$			\$			
Third			\$			\$			
Fourth			\$			\$			
Amount applied from 2021 overpayment?			\$			\$			
Total			\$			\$			

Tax Return 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	Daime on Delian			
	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.