LLC Tax Organizer

(See next page for Organizer)



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LLC Tax Organizer

LLC General Information									
Legal name of LLC						EIN		_	
LLC address ☐ (check if new add	dress)								
LLC Representative			Title						
			Email			Pho	ne ()	
Principal business activity									
Principal product or service									
☐ Yes ☐ No Was the primary			alize a profit?						
Accounting method: ☐ Cash ☐									
☐ Yes ☐ No Does the LLC file			, ,	iear?)					
☐ Yes ☐ No Has the LLC made			•						
If the LLC is an S corporation, p	provide a copy	of Form 2553, Elec	ction by a Small	Business	Corporation, an	d the accept	ance le	tter from the	e IRS.
LLC Specific Questions									
☐ Yes ☐ No Does the LLC has agreement and the	ve an operating articles of organ	g agreement? (If th nization)	nis is the first ye	ar of the L	LC's existence, բ	olease provide	? а сору	of the operat	ing
☐ Yes ☐ No Are all members	actively partic	ipating in the bus	iness?						
☐ Yes ☐ No Is any member in		<u> </u>	partnership, a	trust, an	S corporation,	or an estate	?		
☐ Yes ☐ No Is the LLC a part									
☐ Yes ☐ No Did any foreign of indirectly 50% or		rporation, partner rofit, loss, or capit		exempt o	organization, ir	ndividual, oi	: estate	own directl	y or
☐ Yes ☐ No Did the LLC own		or more, or own d eign or domestic o		ectly, 50%	6 or more of the	e total votin	g powe	er of all class	ses of
☐ Yes ☐ No Did the LLC have				nad the te	erms modified	so as to redu	ice prin	icipal amou	nt of debt?
☐ Yes ☐ No At any time during									
				-					
☐ Yes ☐ No Was there a distribution of property or a transfer (by sale or death) of an LLC interest during the tax year? ☐ Yes ☐ No Does the LLC satisfy the following conditions? • 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.									
						ICC for each			
☐ Yes ☐ No Did the LLC pay			ii yes, iiiciude	а сору о	1 FOIIII 1099-W	15C for each	i.		
Principal Members Ownersh	1				I	Ozumawalaina	Manah	- AH - OH	U.S.
Name	Tax ID number Ownership Member or				citizen?				
						, 0			
						-			
						-			
LLC Other Transactions	T =	T ·	T =		T=:	T		Т _	
Member name	Guaranteed	Health insurance	Capital contr		Distributions to member	Member lo	ans to	Loans repa to member	
TVIETHUET THITTE	payments	premiums paid	Jrom memoer		to member	the LLC		to member	
All Clients - Additional informa	tion and docum	ents required	<u> </u>	New C	lients — Additid	anal informa	tion and	d documents	required
• Provide the income/financial statements for the year (per books), balance					requireu				
 Provide the income/financial statements for the year (per books), balance sheet, depreciation schedule per books, and cash reconciliation of business 			State LLC formed in						
bank accounts with ending cash balance.				Provide copies of LLC's Articles of Organization and					
 If the LLC has employees or p of all W-2, W-3, 940, 941, 1096, 				Opera	ating Agreeme	nt (if any).			
of all W-2, W-3, 940, 941, 1096, workers.	1077-11113C, a1	na any omer form	5 155ueu 10	Provide copies of depreciation schedules for book, tax			tax, and		
• If any members live in a differ			vide details.	AMT. • Provide copies of tax returns for last two years, included the copies of tax returns for last two years.			luding		
The business may be subject to withholding requirements.				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 year	\$	Payables less than one year			\$		
Loans to members	\$	Payab	les more than one year		\$		
Mortgages and loans held by LLC	\$	Mortg	ages, notes payable		\$		
Stocks, bonds, and securities	\$	Loans	from members		\$		
Other current assets (include list)	\$	LLC c	apital accounts		\$		
Inventories	\$						
LLC Income (include all Forms 1099-K received)							
Gross receipts or sales	\$	Divid	ends income (<i>include all 1099</i>	9-DIV Forms)	\$		
Returns and allowances	\$ ()	Capita	al gain/loss (include all 1099-l	B Forms)	\$		
Interest income (include all 1099-INT Forms)	\$	Other	income (loss) (include a state	ment)	\$		
LLC Cost of Goods Sold (for manufacturers, wholeso	alers, and businesses	that m	ake, buy, or sell goods)				
Inventory at beginning of the year	\$	Materials and supplies			\$		
Purchases	\$	Inven	tory at the end of the year		\$		
Cost of labor	\$						
LLC Expenses							
Advertising	`		gement fees		\$		
Bad debts	\$	Meals	– business		\$		
Bank charges	\$	Office supplies			\$		
Business licenses	\$	Orgar	ization costs		\$		
		Pensio	on and profit sharing plans	\$			
Contract labor	\$ Re		or lease – car, machinery, equ	\$			
Employee benefit programs \$		Rent o	or lease – other business proj	\$			
Employee health care plans \$		Repairs and maintenance			\$		
Entertainment	\$	Taxes – payroll			\$		
Gifts	\$	Taxes – property			\$		
Guaranteed payments to members	\$	Taxes – sales			\$		
Insurance (other than health insurance)	\$	Taxes – state			\$		
Interest – mortgage	\$	Telephone			\$		
Interest – other	\$	Utilities			\$		
Internet service	\$	Wage			\$		
Legal and professional services	\$	Other expense			\$		
Car Expenses (use a separate form for each vehicle)							
Make/Model			Date car placed in service / /				
☐ Yes ☐ No Car available for personal use during off-duty hours?							
☐ Yes ☐ No Do you (or your spouse) have any other cars for persona			e? Did you trade in your car this year? Yes		l No		
☐ Yes ☐ No Do you have evidence?			Cost of trade-in Trade-in value				
☐ Yes ☐ No Is your evidence written?			\$				
Mileage			Actual Expenses				
Beginning of year odometer			Gas/oil	\$			
End of year odometer			Insurance \$				
Business mileage			Parking fees/tolls \$				
Commuting mileage			Registration/fees \$				
Other mileage			Repairs \$				
Generally, you can use either the standard mileage r			-I -	<u> </u>			

choose between either the standard mileage rate method or actual expenses.

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 out of sea	rvice Date sold	Selling price/FMV	Trade-in?		
			\$			
			\$			
			\$			
			\$			
			\$			
			\$			
LLC Business Credits (if answered Yes for any of the belo						
☐ Yes ☐ No Did the business pay expenses to make it	· · · · · · · · · · · · · · · · · · ·					
☐ Yes ☐ No 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 e	1 1	ring the tax year?				
☐ Yes ☐ No Did the business have employer pension plan start-up costs? Total number of employees						
☐ Yes ☐ No Did the business pay health insurance pre	emiums for employees?	Total number of employees				
Estimated Tax Payments — Tax Year 2018						
Installment	Date paid	Federal	Date paid	State		
First	\$		\$	\$		
Second	\$		\$			
Third	\$		\$			
Fourth	\$		\$			
Amount applied from 2017 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	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.