LLC Tax Organizer

Use a separate organizer for each LLC

ACCOUNTING

LLC General	Information										
Legal name o	f LLC							EIN		-	
LLC address	□ (check if new add	lress)						1			
LLC Represer	ntative				Title						
1					Email			Pho	ne ()	
Principal bus	iness activity				-			1		· ·	
Principal pro	duct or service										
🗆 Yes 🗖 No	Was the primary	purpose of the	LLC	Cactivity to rea	lize a profit?						
0	nethod: 🛛 Cash 🛛			, ,,							
	Does the LLC file under a calendar year? (If no, what is the fiscal year?) Has the LLC made the election to be taxed as a corporation?										
					*						
	an S corporation, p	provide a copy	of Fo	orm 2553, Elect	ion by a Small	Business (<i>Corporation,</i> an	d the accept	ance le	tter from th	e IRS.
LLC Specific											
□ Yes □ No	Does the LLC have agreement and the	articles of organ	izati	on)	, , , , , , , , , , , , , , , , , , ,	r of the Ll	LC's existence, p	olease provide	а сору	of the operat	ing
□ Yes □ No	Are all members		-								
□ Yes □ No	Is any member in		-		artnership, a f	rust, an S	S corporation,	or an estate?)		
□ Yes □ No	Is the LLC a part		•	*	• • • •					11 .1	
□ Yes □ No	Did any foreign of indirectly 50% or	more of the pr	ofit,	loss, or capital	of the LLC?	•	0				-
□ Yes □ No	Did the LLC own stock entitled to v					ctly, 50%	or more of the	e total voting	g powe	r of all class	es of
□ Yes □ No	Did the LLC have		<u> </u>		<u>^</u>	ad the te	erms modified	so as to redu	ice prir	ncipal amou	nt of debt
□ Yes □ No	At any time durin				~						
□ Yes □ No	Was there a distri	· ·				-				0	<u> </u>
□ Yes □ No	Does the LLC sat	· · ·	2		5	,		0	<u> </u>		
	• The LLC's total receipts for the tax year were less than \$250,000, and										
	• The LLC's total			•							
□ Yes □ No	Did the LLC pay			y individual? I	f yes, include	a copy of	f Form 1099-N	EC for each.			
Principal Me	embers Ownershi	-		1					1		1
Name		Tax ID numbe (SSN or EIN)	r	Address				Ownership percentage	Memb membe	er or er-manager	U.S. citizen?
LLC Other Tra	ansactions										
Member name		Guaranteed payments		ilth insurance niums paid	Capital contra from member	ibutions	Distributions to member	Member lo the LLC	ans to	Loans repa to member	id by LLC
	Additional informat			-			lients – Additie	onal informat	ion and	documents r	equired
• Provide the income/financial statements for the year (per books), balance						Date LLC formed					
sheet, depreciation schedule per books, and cash reconciliation of business bank accounts with ending cash balance.					or business	State LLC formed in					
• If the LLC h	as employees or p	aid independe				• Provide copies of LLC's Articles of Organization and Operating Agreement (if any).					
of all W-2, V	V-3, 940, 941, 1096,						de copies of de		chedule	es for book.	tax, and
issued to we		ont state or or	teida	the US prov	ide dotaile	AMT.					
• If any members live in a different state or outside the U.S., provide details. The business may be subject to withholding requirements.						de copies of tax eturns (if appl	<pre>c returns for icable).</pre>	last tw	o years, inc	luding	

	LLC assets at year end			LLC debts an	d equity at year end	
Bank account	\$	Accounts payable at year end			\$	
Accounts rece	\$	Payab	Payables less than one year		\$	
Loans to mem	bers	\$	Payab	les more than one year		\$
Mortgages and	d 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 (nclude all Forms 1099-K received)					
Gross receipts	or sales	\$	Dividends income (include all 1099-DIV Forms)			\$
Returns and a	llowances	\$()	Capital gain/loss (include all 1099-B Forms)			\$
Interest incom	e (include all 1099-INT Forms)	\$	Other income (loss) (<i>include a statement</i>)			\$
LC Cost of G	oods Sold (for manufacturers, who	lesalers, and businesses	that ma	ke, buy, or sell goods)		
	eginning of the year	\$		ials and supplies		\$
Purchases	<u> </u>	\$	Inventory at the end of the year			\$
Cost of labor		\$				
LLC Expenses	3	1				
Advertising		\$	Mana	gement fees		\$
Bad debts		\$		– business		\$
Bank charges		\$	Office supplies			\$
Business licen	Ses	\$	Organization costs			\$
Commissions		\$	Pension and profit sharing plans			\$
Contract labor		\$	Rent or lease – car, machinery, equipment			\$
Employee benefit programs		\$	Rent or lease – other business property		\$	
Employee hea		\$	Repairs and maintenance			\$
*Entertainmer	*	\$	Taxes – payroll			\$
Gifts		\$	Taxes – property			\$
Guaranteed p	ayments to members	\$	Taxes – sales			\$
Insurance (oth	er than health insurance)	\$	Taxes – state			\$
Interest – mor	tgage	\$	Telephone			\$
Interest – othe		\$	Utilities			\$
Internet servic	e	\$	Wages			\$
Legal and pro	fessional services	\$	Other expense			\$
<u> </u>	nt is no longer deductible for taxes					
	(use a separate form for each vehic					
Make/Model				Date car placed in servic	ce / /	
	Do you (or your spouse) have any	<u> </u>	l use?	Did you trade in your car this year?		□ No
				Cost of trade-in Trade-in value		
	Is your evidence written?			\$	\$	
	Mileage				Actual Expenses	
Beginning of year odometer				Gas/oil \$		
End of year odometer				Insurance	\$	
Business mileage				Parking fees/tolls	\$	
Commuting n			Registration/fees	\$		
Other mileage				Repairs	\$	
Generally, you	can use either the standard milea er, to use the standard mileage rat			gure the deductible costs	of operating your c	

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 service	Date sold	Selling price/FMV	Trade-in?		
				\$			
				\$			
				\$			
				\$			
LLC Busines	s Credits (if answered Yes for any of the below, please provid	e a statement with a	letails)				
🗆 Yes 🗅 No	Did the business pay expenses to make it accessible by individuals with disabilities?						
🗆 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 experimental expenditures during 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 premiums for employees? Total number of employee	ees
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Estimated Tax Payments — Tax Year 2023

Date paid	Federal	Date paid	State
	\$		\$
	\$		\$
	\$		\$
	\$		\$
	\$		\$
	\$		\$
	Date paid	Date paid Federal \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	Date paid Federal Date paid \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$

COVID-19 Related

🗆 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	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 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

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.