PARTNERSHIP TAX ORGANIZER (1065)

Partnership NameAddress		Tax Period		
		Federal ID#		
		State ID#		
Tele	phone: Fax:	Email:		
	vide a general ledger, trial balance, depreciation schedution, provide the following information:	iles, balance sheet, and profit and loss statem	nent by ac	tivity. In
1.	Copies of correspondence with tax authorities regarding	g changes to prior year(s) returns.	DONE	<u>N/A</u>
2.	Details of changes in ownership.			
3.	For each shareholder: TIN, compensation, percer shareholders, time devoted to business, date owner received.			
4.	Schedule of all fringe benefits paid on behalf of more relatives) and indicate which benefits have been include			
5.	Schedule of loans to or from shareholders, officers an payment schedules.	d related parties, including interest rates and		
6.	Copies of all deferred compensation plans and agreem	ents.		
7.	Did the partnership make any payments that would require the partnership file all 1099s?.	uire it to file 1099s?		
8.	Copies of all federal and state payroll reports including	g Forms W-2 or W-3, 940, 941		
9.	Copies of Forms 1099 or 1096, 5500, 1042, 547 partnership.	1, 5472, 8865, 8858, 8886 <u>filed by the</u>		
10.	Copies of Forms 1099, 1099B. 5471, 5472, 8865, 885 partnership.	58, 8886 and Schedules K-1 received by the		
11.	Schedule of built-in gains.			
12.	List of all entries in prepaid, accrued, and income amounts of all federal, state and local income tax payn			
13.	Schedule of all interest and dividend income, not inclu	ded on Forms 1099.		
14.	Schedule of assets acquired or sold during the year inclu price, including any trade-in allowance. Include Form copies of invoices, if applicable.			
15.	Copy of the inventory uniform capitalization computat	ion.		
16.	Schedule of charitable contributions (cash and non cas	h).		

Partnership TAX ORGANIZER (1120S)

		DONE	<u>N/A</u>
17.	Detail of any lobbying expenses.		
18.	Schedule of any club dues paid.		
19.	List of potential non-deductible expenses such as penalties and life insurance premiums Provide copies of notices to employees of life insurance policies, if required.		
20.	Vehicle and mileage data for company-owned passenger vehicles.		
21.	Information to compute the domestic production activities deduction.		
22.	List of all entries in miscellaneous income or expense accounts.		
23.	Detail of meal and entertainment expenses.		
24.	List of each type of trade or business activity or rental activity, indicating the date started or acquired.		
25.	List of activities conducted in other states, including gross receipts, inventory, real and personal property, payroll, and rents by state.		
26.	Can the Internal Revenue Service and state tax authority(ies) discuss questions about this return with the preparer?		
27.	Does the partnership have any foreign bank or financial accounts? If yes, provide details including the highest balance in each account during the year		