

PARTNERSHIP/LLC TAX ORGANIZER
FORM 1065
(SHORT VERSION)

Organization Name _____	Tax Period _____
Address _____	Federal ID # _____
_____	State ID # _____

Provide a general ledger, trial balance, depreciation schedules, balance sheet and profit and loss statement. In addition, provide the following information:

	<u>DONE</u>	<u>N/A</u>
1. Copies of correspondence with tax authorities regarding changes to prior year returns.	_____	_____
2. Details of partner/member ownership changes.	_____	_____
3. For each partner/member, TIN, address, percentage of ownership/profit/loss, and general or limited classification. Identify the Tax Matters Partner/Member.	_____	_____
4. Copy of most recent operating agreement.	_____	_____
5. Schedule of all payments or distributions to or for partners/members including descriptions, amounts and the accounts to which these amounts have been posted.	_____	_____
6. Schedule of loans to/from partners/members and related parties including interest rates and payment schedules.	_____	_____
7. Schedule of all fringe benefits paid on behalf of partners/members and indicate which benefits have been included in their guaranteed payments.	_____	_____
8. Detailed analysis of entries in prepaid and accrued expense accounts.	_____	_____
9. Copies of all federal and state payroll reports filed.	_____	_____
10. Copies of Forms 1096/1099, 5500, 1042, 8804, 8805, 5471, 8865, 8858, and 8886 that have been <u>filed</u> .	_____	_____
11. Copies of Forms 1099, 5471, 8865, 8858, 8886 and Schedules K-1 that have been <u>received</u> .	_____	_____
12. Schedule of all interest and dividend income not included on Forms 1099.	_____	_____
13. Schedule of assets acquired and/or sold during the year including date acquired, date sold, sales or purchase price, including any trade-in allowance. Form HUD-1 for real estate.	_____	_____
14. Copy of the inventory uniform capitalization computation.	_____	_____
15. Schedule of contributions.	_____	_____
16. Details of any lobbying expenses.	_____	_____

PARTNERSHIP/LLC TAX ORGANIZER (1065)
(SHORT VERSION)

- | | <u>DONE</u> | <u>N/A</u> |
|--|-------------|------------|
| 17. List of potential non-deductible expenses, such as penalties and life insurance premiums. | _____ | _____ |
| 18. Schedule of any club dues paid. | _____ | _____ |
| 19. Vehicle and mileage data for partnership/LLC owned passenger vehicles. | _____ | _____ |
| 20. Information to complete domestic activities production deduction. | _____ | _____ |
| 21. List details of all entries in miscellaneous income/expense accounts. | _____ | _____ |
| 22. Detail of meal and entertainment expenses. | _____ | _____ |
| 23. List each type of trade or business activity or rental activity and indicate the date started or acquired. | _____ | _____ |
| 24. List activities conducted in other states, including gross receipts by state. | _____ | _____ |
| 25. Can the Internal Revenue Service discuss questions about this return with the preparer?
Yes ___ No ___ | | |

COMMENTS OR EXPLANATIONS
