

Nevada 3225 McLeod Drive Las Vegas, NV 89121 Fax: 702.664.0545

Washington 732 Broadway, Suite 201 Tacoma, WA 98402 Fax: 253.238.0003

> Wyoming 1718 Capitol Avenue Cheyenne, WY, 82001

800.706.4741 www.AndersonAdvisors.com

Use this Organizer for LPs or LLCs taxed as Partnerships Holding Trading Accounts

## **IMPORTANT**

We will be unable to complete your tax return until we have received the completed tax organizer and required documentation including the client statement, payment information, corporate information & ownership information.

Anderson Business Advisors 3225 McLeod Drive Las Vegas, NV 89121

Toll Free: 800.706.4741 Local: 702.214.1100 Fax: 702.664.0545

E-Mail: organizers@andersonadvisors.com Secure Online Upload Page: https://andersonadvisors.com/upload-documents/



# FAX COVER PAGE

Attention: Tax Preparation Department

To: Anderson Business Advisors: 702.664.0545
Attention:
From:
Date:
Total Number of Pages: (including cover page)
THIS FAX INCLUDES THE FOLLOWING (Check all that apply)
<ul> <li>Client Statement</li> <li>Organizer for (Name:)</li> <li>Supporting Documents</li> <li>Other</li> </ul>

You may also upload all documents securely online at: https://andersonadvisors.com/upload-documents/

# **CLIENT STATEMENT**

In order to make the filing tax deadline, completed Tax Organizers and supporting documents are due in our offices 30 days prior to the return deadline. Tax returns are prepared in the order this information is received. In the event a Tax Organizer is received within the 30 day period prior to the tax deadline, client will pay an expedite fee of \$300 for timely completion. If received in the final two weeks before the deadline, we cannot guarantee the return will be completed timely; client will pay an additional \$250 for timely completion. It may become necessary to apply for an extension of time to file your tax return if there are unresolved issues, delays in processing, or if we do not receive all the necessary information from you on a timely basis. We will apply for an extension on all returns not filed with the taxing authorities within 3 business days of the filing deadline. All tax is still due and payable by the filing deadline to avoid all penalties and interest..

The scope of work in connection with the preparation of your ("the Client") federal and state tax returns is intended to be in compliance with the requirements issued by the various taxing authorities. Because tax laws are not always clear, honest differences of opinions may arise between our interpretation of laws and that of the various taxing authorities. We will assist you in resolving these differences in your favor whenever possible.

Client and/or your duly appointed representative agree not to hold Anderson Business Advisors ("Anderson") liable for interpretations made with regard to any of the information supplied by Client and used in the preparation of the tax returns. Unless compelled to do so by law, Anderson does not disclose any irregularities or provide statements with regard to the validity of the information supplied by Client to any taxing authority.

All tax returns are subject to review and acceptance by the various taxing authorities. In the event of an examination or other taxing authority, contact Anderson. We can respond or represent your position to the taxing authority; however, there is a fee for this service. You may appeal any adjustments proposed by a taxing authority.

Please review any completed tax returns carefully. As preparers, we have a responsibility both to the various taxing authorities with whom we file tax returns as well as to our clients. Any client will remain liable for the contents of tax returns prepared by Anderson with data provided by said client.

All tax return preparation fees must be paid before the tax return can be electronically processed. Once payment is received and the proper forms are signed to electronically file the tax return, Anderson will electronically file the tax return.

By signing this document I acknowledge this statement and the dates below.

Signature:		
Name on Credit Card:		
Last 4 digits of Credit (		

By submitting this form, you are authorizing Anderson Business Advisors to send you an invoice electronically (via email or Box.com) and to charge the credit card provided above five (5) days after the invoice has been submitted to you.

Would you like to use your prepaid tax package time for this return or have a quote prior to preparing your return? Yes No

Please be advised. This form must be completed as your official consent to prepare the return(s).



**Dear Valued Client:** 

This letter is to confirm and specify the terms of our engagement with you and to clarify the nature and extent of the services we will provide. In order to ensure an understanding of our mutual responsibilities, we ask all clients for whom returns are prepared to confirm the following arrangements.

We will prepare your 2017 federal and requested state tax returns from information that you will furnish us. We will not audit or otherwise verify the data you submit, although it may be necessary to ask you for clarification of some of the information. We will furnish you with questionnaires and/or worksheets to guide you in gathering the necessary information. Your use of such forms will assist in keeping pertinent information from being overlooked.

It is your responsibility to provide all the information required for the preparation of complete and accurate returns. You should retain all the documents, canceled checks, and other data that form the basis of income and deductions. These may be necessary to prove the accuracy and completeness of the returns to a taxing authority. You have the final responsibility for the tax returns and, therefore, you should review them carefully before you sign them.

Our work in connection with the preparation of your tax returns does not include any procedures designed to discover defalcations or other irregularities, should any exist. We will render such accounting and bookkeeping assistance as determined to be necessary for preparation of the tax returns.

We will use professional judgment in resolving questions where the tax law is unclear, or where there may be conflicts between the taxing authorities' interpretations of the law and oth er sup portable positions. Unless otherwise instructed by you, we will resolve such questions in your favor whenever possible.

The law provides various penalties that may be imposed when taxpayers understate their tax liability. If you would like information on the amount or the circumstances of these penalties, please contact us. Your returns may be selected for review by the taxing authorities. Any proposed adjustments by the examining agent are subject to certain rights of appeal. In the event of such government tax examination, we will be available upon request to represent you and will render additional invoices for the time and expenses incurred.

Our fee for these services will be based upon the amount of time required at standard billing rates plus out-of-pocket expenses. All invoices are due and payable upon presentation.

If the foregoing fairly sets forth your understanding, please sign the enclosed copy of this letter in the space indicated and return it to our office. However, if there are other tax returns you expect us to prepare, such as gift and/or property, please inform us by noting so just below your signature at the end of the returned copy of this letter.

We want to express our appreciation for this opportunity to work with you.

Sincerely,

Anderson Business Advisors Tax Team

Accepted By:

Date:

Additional Returns (if applicable):

Anderson Law Group, PLLC 3225 McLeod Drive Las Vegas, NV 89121

#### **PRIVACY POLICY**

Certified Public Accountants (CPAs), like all providers of personal financial services, are now required by law to inform their clients of their policies regarding privacy of client information. CPAs have been and continue to be bound by professional standards of confidentiality that are even more stringent than those required by law. Therefore, we have always protected your right to privacy.

### TYPES OF NONPUBLIC PERSONAL INFORMATION WE COLLECT

We collect nonpublic personal information about you that is either provided to us by you or obtained by us with your authorization.

### PARTIES TO WHOM WE DISCLOSE INFORMATION

For current and former clients, we do not disclose any nonpublic personal information obtained in the course of our practice except as required or permitted by law. Permitted disclosures include, for instance, providing information to our employees and, in limited situations, to unrelated third parties who need to know that information to assist us in providing services to you. In all such situations, we stress the confidential nature of information being shared.

### PROTECTING THE CONFIDENTIALITY AND SECURITY OF CURRENT AND FORMER CLIENTS' INFORMATION

We retain records relating to professional services that we provide so that we are better able to assist you with your professional needs and, in some cases, to comply with professional guidelines. In order to guard your nonpublic personal information, we maintain physical, electronic, and procedural safeguards that comply with our professional standards.

#### \*\*\*\*\*

Please call if you have any questions, because your privacy, our professional ethics, and the ability to provide you with quality financial services are very important to us.

# Partnership or LLC Information

2017

Taxpayer:										
	First Name and Initial					Last Name				
	Name of Corporation					Employer ID Number (EIN)	Signing Officer	Title		
							5 5			
	Street Address of Busin	ness				City	State	Zip		
	Daytime/Work Phone	Number	Cell Pho	ne		Email				
Return Information:										
	Mail Completed Return	n				City	State	Zip		
								Yes	No	
Entity Information:								105		
Liftity mornation.	Does your Entity have	a year end	other than D	ec?						
	If Vac When?		-							
	If Yes, When?									
	Is this the final tax retu	irn?								
	If Yes, what is the Disso	olution dat	- e7							
	ii res, what is the Diss	Jution dat	e:							
	State of Formation		State ID N	lo.		State Tax ID Number				
	What date was the Par	tnership or	r LLC formed	?		What is the principal busines	is?			
	What is the main prod	uct or servi	ice?							
	Webflie Number (TX o	nly)	SOS Nun	nber (CA onl	v)					
	··· · · · · · · · · · · · · · · · · ·	,,			,,					
Other Information:										
other mornation.	Accounting Method	Cash	Accrual	Other	if other	please explain				
								Vac	No	
								Yes	No	
	At any time during the year, did the entity have an interest in or signature authority over a financial account in a fore									
		5				ne real estate activities being re				
	If yes, did those members spend a majority of their working hours and at least 750 hour of service in 2014 *qualified activities in Real Estate?									
	Are they documented in writing?									
	Do you have a Corpora	ation that o	owns an inter	est in this en	tity?					
	If yes, please list name									
						ip or LLC or has a beneficial inte				
	Is the Partnership pub	licly traded	?							

# **Ownership Information**

## 2017

Please fill in all information - If shareholder is an individual, use Social Security Number. If shareholder is an entity, use the EIN number

	Name of Shareholder		U.S. Citizen If no, Where? Yes No		If no, Where?	Street Address	City
A	State	Zip			rity Number / EIN	Partnership? General/Limited Partner	Ownership
A							

	Name of Shareholder		U.S. C Yes	itizen No	lf no, Where?	Street Address	City
В							
	State	Zip	Soc	ial Secu	rity Number / EIN	Partnership? General/Limited Partner	Ownership
В							

	Name of Shareholder		U.S. Ci Yes		If no, Where?	Street Address	City
С				No			
	State	Zip	Social Security Number / EIN			Partnership? General/Limited Partner	Ownership
С							

	Name of Shareholder		Name of Shareholder U.S. Citizen If no, Where? Yes No		Street Address	City
D						
	State	Zip	Social Secu	rity Number / EIN	Partnership? General/Limited Partner	Ownership
D						

	Name of Shareholder		U.S. C Yes	itizen No	If no, Where?	Street Address	City
E							
	State	Zip	Soc	ial Secu	rity Number / EIN	Partnership? General/Limited Partner	Ownership
E							

Do you have more Partners/Members? .....



Yes

No

## **Financial Statements**

If you have a balance sheet and profit and loss statement please upload those documents or include them when you fax in this organizer, then you can skip this section.

## **Balance Sheets**

Amount Assets Cash in Bank on Last Day of Business Year Trade Notes and Accounts Receivable (for accrual basis only) Inventories Other Current Assets (attach statement) Other Investments (attach statement) Buildings and Other Depreciable Assets Less accumulated Depreciation Land Intangible Assets Les accumulated Amortization Total Assets Amount Liabilities and Capital Accounts Payable Mortgages and Notes Payable in Less Than 1 Year (accrual basis only) Other current liabilities (attach statement) All Non-recourse Loans Mortgages, Notes Payable in 1 Year or More Other Liabilities (Attach Statement) Common Stock Additional Paid in Capital Total Liabilities and Capital Amount Statement of Income **Business Income** Interest Received (Enclose all 1099-INT Forms) Dividends Received (Enclose all 1099-DIV Forms) Amount Expenses **Organization Costs** Bank Charges Office Supplies (Including Printing & Copies) **Business Licenses** Legal and Professional Services **Management Fees** Guaranteed Payments to Partners Other Expenses (Describe) Amount Other Other

Other Other Other

2017

# Sales of Stocks, Bonds, <u>Mutual Funds and Other Securities</u>

2017

	Yes		No				
Is the brokerage account in the name of this partnership/LLC?							
If no, s	kip thi	is se	ction.				
Please include the entire form 1099-B furnished from your Brokers along with a Gain/Loss Activity Report in Excel format. If the broker statements include the COST of the securities sold during the year and or you are sending printouts showing the cost of the securities sold, you do not need to complete this section.							

	De	scription	Date Sold (Mo/Da/Yr)	Date Acquired (Mo/Da/Yr)	Cost Basis	Sales Price
·						
;						
Do vou have more s	ales?					Yes No
Total Options Purchased in 2017	Total Options Sold in 2017	Capital Loss Carryover from prior Year:				

Provide any financial statements, general ledger, previous year's tax return, gain/loss activity reports in excel and 1099-B statements.

# Additional Information or Comments?

# Start-Up and Organizational Expenses

Record costs and fees prior to the beginning of operations.

	Yes	No	
Is this the first tax return filed by this Entity?			

If yes, complete the information below.

	Amount
Organizational costs	
Start-Up Costs	
Travel	
Professional Fees	
License & Permit Fees	
Equipment	
Supplies	
Other start-up costs	