

1065 TAX RETURN ORGANIZER (OTHER INCOME)

FOR INTERNAL USE ONLY BY THE BRUNTON – MCCARTHY CPA FIRM CHARTERED

FOR TAX YEAR ENDED: Month _____ Year _____**CURRENT DATE** _____

TO AVOID DELAY WITH YOUR RETURN PLEASE ANSWER ALL QUESTIONS AND PROVIDE COPIES OF ALL DOCUMENTS REQUESTED

1. Name of Partnership _____ Telephones: Home _____ Office _____
2. Address _____ Cell _____ Fax _____
 _____ Email _____
3. U.S. taxpayer identification number, if any _____
4. State / County of Formation _____ Date of Formation _____
5. Name and address of individual to whom return is to be sent _____

6. Name and address of individual to whom you would like an additional copy of the return to be sent _____

7. How many partners does the partnership have? _____
- 7a. Name, address, and tax identification number of each partner including their ownership percentage _____

8. Status of each partner (Domestic, foreign, general, limited) _____

9. Has the company ever filed a U.S. tax return? Yes No If "Yes" please provide the latest one.
10. Did the partnership have any transactions with related parties? Yes No
 If "Yes" please describe on a separate page. (Examples would include rent paid between the partnership and a partner or family member of a partner, loans or interest advanced or paid between the partnership and a partner or family member of a partner, and business transactions with a partner or family member of a partner. These are only a few examples.)
11. Have financial statements been prepared for the partnership for the current tax year? Yes No
 If "Yes", please attach a copy.
 If "No", has a "trial balance" been prepared for the partnership? Yes No
 If you are not intending to have either financial statements or a "trial balance" prepared please provide us with the details of all the company's transactions for the tax year and the beginning and ending capital account balance of each partner.
12. Did the partnership itself own directly or indirectly 50% or more of the voting stock of any U.S. corporation, foreign corporation, foreign partnership, or foreign disregarded entity at year end? Yes No
13. Did any individual, (or corporation, partnership, trust or association) own directly or indirectly 50% or more of the partnership's interest at year end? Yes No
 If "Yes" please list: Name _____, % owned _____
14. Did any person or entity own directly or indirectly 25% or more of the interest of the partnership at any time during the year? Yes No
15. If "Yes", please list the names, addresses and percentages of each: _____

16. At any time during the calendar year did the partnership have a bank account, securities account or other account outside the United States? Yes No If yes, please explain _____
Provide the Name and Address of the Institution (bank, stockbrokerage, Trust Co., Life Insurance Co., etc.), account number and maximum balance of each account.
17. Please attach any of the following that was not previously provided to us:
- A copy of the Partnership Agreement,
 - A copy of any mortgage documents,
 - A copy of the Deed and Settlement Statement (Statement of Adjustments) from the purchase of all real estate owned by the partnership,
18. Did the partnership pay any U.S. Federal or State income tax? Yes No
If "Yes" give details including payment dates _____
19. Who is the partnership's state registered agent? _____
20. Has the company filed all required State Annual Reports and Registration Statement? Yes No

U.S. INCOME EARNED

21. Did the partnership receive business income from the United States during the year? Yes No
If yes, please attach a statement describing the nature of the business, the income and expenses for the year, details of assets purchased or sold and information about U.S. office premises and U.S. agents.
22. Did the partnership receive any rental income from U.S. real estate? If yes, please contact our office. Yes No
23. Did the partnership sell U.S. real estate during the year? If yes, please contact our office Yes No
24. Did you receive any other income from U.S. sources? Yes No
If yes, please describe, including payor and amount _____

OTHER

25. Provide details and amounts of any taxes withheld or paid in the U.S. during the year. Also provide details of charitable contributions, casualty or theft losses in the U.S. and any business expenses.
26. Have you answered all questions & supplied all documents requested on this questionnaire? Yes No
If "No" please explain, otherwise your tax return may be delayed and/or the fee may be increased because of the extra time required. _____

Signed _____

PLEASE RETURN TO: THE BRUNTON – MCCARTHY CPA FIRM CHARTERED, 4710 NW 2ND AVENUE, #101, BOCA RATON , FL 33431
Tel (561) 241-9991 Fax (561) 241-6332 Email: tax@taxintl.com Website: www.taxintl.com

Please include a US \$500 retainer with this organizer.

If you wish, retainers can be paid on-line with a credit card. Please go to our website
www.taxintl.com and scroll down to PayPal on the lower right hand side.