Bob Benkovich, LLC <u>Initial Business Questionnaire</u> Tax Preparation Services

P.O. Box 629, Virginia City, NV 89440 Phone: 775-847-0774 or 888-219-1119 FAX: 775-847-7808 bbll ctax preparation services @gmail.com

	What is the name of your company?		
2.	In what State is your company organized?		
.	What is the principal address for your company?		
١.	What is your business EIN:		
.	What type of business does your company do?		
5.	Your business taxpayer id code is		
٠.	Your IRS category principal business activity code		
3.	Your IRS category principal product or service code		
١.	Your business code number		
	Your total assets		
1.	Your accounting method: Cash Accrual Other (specify)		
	•	u file an 8832 form for entity taxation election? Yes No	
	A K-1 is required for each person who was a partner at any time during the tax year. Num		
	K-1s required:		
14.	Names and addresses for each partner or member (if an LLC):		
	SSN or Tax ID:	SSN or Tax ID:	
	0/ 1/24-22-4	0/ Interest	
	% Interest	% Interest	
	SSN or Tax ID:	SSN or Tax ID:	
	SSN or Tax ID: % Interest	SSN or Tax ID: % Interest	
	% Interest	% Interest	
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tic	% Interestny business entities, a copy of the pre	% Interest	