

Partnership Tax Questionnaire

Please check the appropriate box and include all necessary details and documentation.

Preparation Checklist

	Yes	No
Sign and return the Engagement Letter.	☐	☐
Provide any oral or written amendments to the partnership agreement or operating agreement.	☐	☐
Provide copies of correspondence with tax authorities regarding changes to prior year(s) returns, if not already provided.	☐	☐

Partnership Information

Did the address of the partnership change?	☐	☐
<i>If yes, provide the new address _____</i>		
Did the partnership representative or designated individual (if representative is not a person) address or contact information change from last year?	☐	☐
<i>If yes, explain _____</i>		
Did the partnership make estimated tax payments?	☐	☐
<i>If yes, provide the dates and amounts paid to each government agency.</i>		
If there are any payments due, do you want them to be paid with electronic funds withdrawal?	☐	☐
<i>If yes, provide a voided check if the account information has changed since last year or it was never provided.</i>		
Did the partnership purchase any business assets this year?	☐	☐
<i>If yes, provide the invoice or receipt for all purchases including trade-in information.</i>		
Did the partnership dispose of any business assets this year?	☐	☐
<i>If yes, provide a description of the asset, date disposed and sales price.</i>		
Did the partnership have fewer than 25 full-time employees, and pay at least 50% of the premiums for each enrolled employee's health insurance coverage?	☐	☐
Did the partnership hire an individual from a targeted group under the Work Opportunity Tax Credit program?	☐	☐
<i>If yes, provide copies of certification for employees of targeted groups and associated wages paid.</i>		
Did the partnership provide paid medical and family leave to employees pursuant to a written policy?	☐	☐
<i>If yes, provide a copy of the policy and, for each applicable employee, the amount of wages paid, the employee's normal hourly wage rate and the number of hours for which the employee was paid.</i>		
Did the partnership start a SEP, SIMPLE IRA, 401(k) or profit-sharing plan this year?	☐	☐
<i>If yes, provide a copy of the plan and the startup costs for the plan.</i>		
Did the partnership make payments that require Form(s) 1099 to be filed?	☐	☐
<i>If yes, did the partnership file or will it file all required Forms 1099?</i>	☐	☐
Did the partnership make any payments that require Form 1042 and 1042-S to be filed?	☐	☐
Did the partnership take out a loan this year, including loans from partners/members and other related parties?	☐	☐
<i>If yes, provide information on how the loan was used. Also provide copies of the loan documents.</i>		
Were there any significant changes in the partnership's business or operations during the year?	☐	☐
<i>If yes, explain _____</i>		
If the partnership maintains inventory, was there a change in the method of determining quantities, cost, or valuations between opening and closing inventory during the year?	☐	☐
<i>If yes, explain _____</i>		
Did the partnership participate in any research and development (R&D) activities or perform an R&D tax credit study?	☐	☐
<i>If yes, provide details _____</i>		

Does the partnership do business in more than one state?	☐	☐
<i>If yes, list the states _____</i>		
<i>Also provide copies of supporting schedules reflecting inventory, real and personal property, rents, payroll and sales by state.</i>		
Did the partnership acquire, use, dispose of or hold any virtual currency/cryptocurrency (such as bitcoin)?	☐	☐
<i>If yes, provide details _____</i>		
Did the partnership, at any time during the tax year, have an interest in, or signature authority over, a foreign bank or securities account?	☐	☐
Was the partnership the grantor of, or transferor to, a foreign trust during the tax year?	☐	☐

Partner Information

Complete the Partners section of the Organizer Schedules.	☐	☐
Did any new partners join the partnership or any previously existing partners leave the partnership?	☐	☐
<i>If yes, explain _____</i>		
Did a partner sell or exchange any or all of their partnership interest in exchange for unrealized receivables (such as proceeds, services, or property where the partnership has a right to payment) or inventory items?	☐	☐
<i>If yes, explain _____</i>		
Did any partner transfer any capital to an existing or new partner, including any transfers for recently deceased partners?	☐	☐
<i>If yes, explain _____</i>		
Did any partner contribute cash or property to the partnership or take a cash distribution during the year?	☐	☐
<i>If yes, explain _____</i>		
Did any partner make a loan to the partnership during the year?	☐	☐
<i>If yes, include the information in the Partners section of the Organizer Schedules.</i>		
Did the partnership repay a loan from any partner during the year?	☐	☐
<i>If yes, include the information in the Partners section of the Organizer Schedules.</i>		
Did the partnership distribute any guaranteed payments to a partner (payments or credits to a partner without a regard to the income of the partnership)?	☐	☐
<i>If yes, include the information in the Partners section of the Organizer Schedules.</i>		
Did the partnership pay any health insurance premiums for partners?	☐	☐
<i>If yes, include the information in the Partners section of the Organizer Schedules.</i>		
Did the partnership make any contributions to a pension or IRA for partners?	☐	☐
<i>If yes, include the information in the Partners section of the Organizer Schedules.</i>		
Does the partnership pay life insurance premiums (other than group-term life) for officers of the partnership?	☐	☐
<i>If yes, provide amounts and indicate to which accounts these expenses were posted _____</i>		

Vehicles

Does the partnership own vehicles?	☐	☐
<i>If yes, answer the following questions and complete the Vehicles section of the Organizer Schedules.</i>		
Does the partnership have evidence to support the claimed business use?	☐	☐
<i>If yes, is the evidence written?</i>	☐	☐
Were the vehicles available for personal use during off-duty hours?	☐	☐
Were the vehicles used primarily by a more than five-percent owner or related person?	☐	☐
Is another vehicle available for personal use?	☐	☐
Provide a copy of the lease for any leased vehicles.	☐	☐

Regarding the partnership policy for vehicles:

Does the partnership maintain a written policy that prohibits all personal use of vehicles, including commuting, by employees?

☐☐

Does the partnership treat all use of vehicles by employees as personal use?

☐☐

Does the partnership provide more than five vehicles to employees and retain the information received from employees concerning the use of the vehicles?

☐☐

Does the partnership require or maintain copies of vehicle logs?

☐☐

COVID-19 Information

Did the partnership receive Paycheck Protection Program (PPP) funds?

☐☐

If yes, provide details of the amount of funds received. Include a copy of the application and documentation for loan forgiveness and the forgiveness response from the bank, if applicable.

Did the partnership receive any other funds/loans/grants (local, state, federal or other) related to the COVID-19 pandemic and economic recovery, such as an Economic Injury Disaster Loan (EIDL)?

☐☐

If yes, provide details _____

Did the partnership defer the deposit and payment of its share of Social Security tax for any quarter in 2020 (per the CARES Act)?

☐☐

If yes, provide details and the payroll tax returns for relevant quarters _____

Did the partnership claim the employee retention credit and/or credits for qualified leave wages paid to employees due to paid sick leave or expanded family and medical leave for reasons related to COVID-19?

☐☐

If yes, provide details and the payroll tax returns for relevant quarters _____

Partnership Organizer Schedules

PARTNERS

[illegible][illegible]

VEHICLES

[illegible]