

Client:

Tax Year ending: 12/31/16

**S CORPORATIONS - PARTNERSHIPS - LLC'S
TAX RETURN CHECKLIST**

Please provide LKM with the following checked items (some items may not apply):

- _____ 1. Verify all the client information on the attached **Information Review Sheet**. Please fill in any missing information
- _____ 2. **QuickBooks Clients; circle your edition/year: 2013, 2014, 2015, 2016, 2017** Password _____
- _____ 3. **QuickBooks Accountant's Copy -**
Send via Secure Client Portal, Email or USB flash drive **OR** use QB feature, "Send to Accountant" and, be sure to provide your Password. **Use "Dividing Date" 1/1/17**
- _____ 4. Review attached **Future Depreciation Report** to indicate any assets sold or scrapped and **please initial and date upon review** (be sure to indicate sales **price** and **date** sold or scrapped.)
- _____ 5. Detailed list of **new** fixed assets purchased during 2016 including **date and price of purchase**
- _____ 6. Have you financed any major equipment purchases this year? If so, attach details
- _____ 7. Loan Statements as of 12/31/16 (or Fiscal YE date _____) to establish interest expense and ending loan balance
- _____ 8. Inventory (take physical count) Total Value (at cost) on 12/31/16 (or Fiscal YE date _____)
- _____ 9. 2016 W-3 and Form 941 & 940 Reports; State ESD and L&I Reports; Officer W-2s, if applicable
- _____ 10. 2016 **State & City** Excise Returns.
Or, provide online Login _____ and Password _____
- _____ 11. Business Vehicle Data:
a. **Odometer** Readings as of 12/31/15 & 12/31/16 **OR** Total mileage for 2016
b. Total **business** mileage for 2016
- _____ 12. Were you required to issue 1099s for 2016? Yes_____ No_____ Not Sure _____ If yes, please provide copies of all 1099's and the 1096. If you are not sure, please contact us
- _____ 13. Bank and Credit Card Statements for 12/31/16
- _____ 14. Forms 1099-K that were issued to you from credit card merchants
- _____ 15. For the allocation of home office expense reimbursement, did your home office square footage change?
Yes_____ No_____
- _____ 16. Did the business pay employee health insurance? Yes_____ No_____
- _____ 17. Did the business have any Foreign Bank Accounts? Yes_____ No_____

Fiscal / Tax Year End: 12/31/16
Tax Return Due Date: 3/15/17