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## New Corporation Checklist

Date: \_\_\_\_\_ Office: \_\_\_\_\_ Client #: \_\_\_\_\_

Business Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Phone number: \_\_\_\_\_

Email: \_\_\_\_\_

EIN: \_\_\_\_\_

Entity Classification:

1120

LLC

Other: \_\_\_\_\_

1120-S

990 Non Profit

1120-H

1065 Partnership

Owner(s) Name(s): \_\_\_\_\_ Owner(s) % \_\_\_\_\_

\_\_\_\_\_ Owner(s) % \_\_\_\_\_

Owner(s) Phone: \_\_\_\_\_

\_\_\_\_\_

Alternate Email: \_\_\_\_\_

Bookkeepers Name: \_\_\_\_\_

Bookkeepers Phone: \_\_\_\_\_

Bookkeepers Email: \_\_\_\_\_

Software: \_\_\_\_\_

State(s) filing: \_\_\_\_\_

***Please provide your IRS letter(s) and formation documents.***

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