

New Business Formation Sheet

ABOUT YOU:

| | Your name: | | | | |
|---------|---|------------------|--------------|----------------------------------|--|
| | Your Phone Number: | ur Phone Number: | | | |
| | Your Address: | | | | |
| | Vous amail address: | | | | |
| N D O L | Your email address: | | | ···· | |
| 4BOU | IT THE BUSINESS: | | | | |
| | Desired name for the business: | | | | |
| | Backup choice: | | | | |
| | Second backup choice: | | | | |
| | What does the business do? | | | | |
| | Your business partners names (if any): _ | | | | |
| | | | | | |
| | | | | | |
| | Official business address: | | | | |
| | Which state(s) would you like to file in? | · | | | |
| | Do you also need an EIN? | ☐ Yes | □No | □Don't know | |
| | Do you have any employees? | ☐ Yes | \square No | (or will you very soon?) | |
| | Do you need a sales tax account? | ☐ Yes | □No | □Don't know | |
| | Do you need an operating agreement? | ☐ Yes | □No | (your bank may require it) | |
| | Do you need a Quickbooks Online acct? | '□ Yes | □No | (<u>strongly</u> recommended) | |
| | About how many transactions will the b | ousiness | have ea | ch month? | |
| | How will you be filing the business taxe | s? | | | |
| | ☐ S Corp ☐ Partnership ☐ C Corp | _ □ 0 | n mv ov | vn personal tax return Don't kno | |