



Gallagher Tax & Investment LLC

Tax Planning, Preparation & Business Advising

(612) 306 2830 / info@gallagherllc.com

3360A Annapolis Lane N. Plymouth, MN 55447

gallagherllc.com

Client Questionnaire for Forming an Entity

GENERAL INFORMATION

Client Name:

Address:

City State Zip:

Phone:

Mobile Phone:

Fax:

E-mail:

CPA Name:

CPA Address:

CPA City State Zip:

CPA Phone:

Referred By:

Entity Information – 1st Entity

Type of Entity (select one): Corporation LLC PLLC LP
 How Taxed (select one): C-Corp S-Corp Partnership Non-Profit SoleProprietorship

Purpose of Entity:

Entity Name Choice No 1:

Entity Name Choice No 2:

Entity Name Choice No 3:

Trademark/Logos: Do you anticipate requiring a trademark of the name or logo for the company that you want protected nation-wide? Yes No

How many employees do you intend to have in the first year?

If you will have employees, what is the first month that wages will be paid?

Who agrees to be the Registered Agent of the entity for official notices?

Registered Agent's Address*:

City State Zip:

**Minnesota requires a physical street address be published for the Registered Agent: a PO Box is not permitted.*

If Different from Registered Agent's address, list the mailing address to be published for the Entity:

INITIAL OWNERS		
Name	% Ownership	Capital Contribution
	%	\$
	%	\$
	%	\$
	%	\$

Initial Directors/Managers and Addresses*:

**Minnesota requires an address be published for each Director/Manager, PO Box is permitted*

Name:
 Address:
 City, ST Zip:

Name:
 Address:
 City, ST Zip:

Name:
 Address:
 City, ST Zip:

Officers:

President:
 VP:
 Secretary:
 Treasurer:

(Non-Profits require a minimum of three directors)

Entity Information – 2nd Entity (if applicable)

Type of Entity (select one): Corporation LLC PLLC LP
 How Taxed (select one): C-Corp S-Corp Partnership Non-Profit SoleProprietorship

Purpose of Entity:

Entity Name Choice No 1:

Entity Name Choice No 2:

Entity Name Choice No 3:

Trademark/Logos: Do you anticipate requiring a trademark of the name or logo for the company that you want protected nation-wide? Yes No

How many employees do you intend to have in the first year?

If you will have employees, what is the first month that wages will be paid?

Who agrees to be the Registered Agent of the entity for official notices?

Registered Agent's Address*:

City State Zip:

**Minnesota requires a physical street address be published for the Registered Agent: a PO Box is not permitted for this address.*

If Different from Registered Agent's address, list the mailing address to be published for the Entity:

INITIAL OWNERS		
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