

# 2021 Partnership General Information

## Name and Address Information

Employer ID number	1	
Legal Name of Entity	2	
DBA (Doing business as)	3	
In care of	4	
Address	5	Suite # 6
City	7	
<b>U.S. ONLY:</b> State, ZIP, County	8	9 10
<b>Foreign ONLY:</b> Province/State, Country, Postal Code	11	12 13
Phone number	14	

## General Information

<b>A</b> Principal business activity	15	
<b>B</b> Principal product or service	16	
<b>C</b> Business code number	17	
<b>E</b> Business start date	18	
<b>G</b> Mark applicable boxes:		
<input type="checkbox"/> 19 Initial return	<input type="checkbox"/> 20 Final return	<input type="checkbox"/> 21 Amended return
<input type="checkbox"/> 22 Address change		<input type="checkbox"/> 24 Name change
<b>H</b> Accounting method:		
<input type="checkbox"/> 25 Cash	<input type="checkbox"/> 26 Accrual	Other <input type="checkbox"/> 27
<b>K</b> <input type="checkbox"/> 28 Aggregated activities for section 465 at-risk purposes		
<input type="checkbox"/> 29 Grouped activities for section 469 passive activity purposes		

## Other Information

Resident state	33
Misc code 1	34
Misc code 2	35
Invoice #	36
Preparer fee	37
Firm #	38
Preparer #	39
Data entry operator #	40
ERO #	41

## If not a calendar year:

Fiscal year beginning	30
Fiscal year ending	31
<input type="checkbox"/> 32 52-53 week tax year election	

Entity Name Control	42
<b>Use this field only if Name Control is obtained from IRS by contacting Business &amp; Specialty Help Line at 1-800-829-4933.</b>	

## Client information

Email	43	
Cell	44	FAX 45

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