



# LLC Formation Assessment

New Assessment Questionnaire Submission

## 01. Applicant Profile

|                      |              |
|----------------------|--------------|
| Applicant Name       |              |
| Email Address        |              |
| Country of Residence |              |
| Applicant Status     | U.S. Citizen |

A. U.S. Resident Information

|                            |                    |
|----------------------------|--------------------|
| Current State              |                    |
| Primary Business Operation | My home state only |
| Multiple States            |                    |
| International Countries    |                    |
| Already Operating          | Yes                |
| Current Business Name      |                    |
| Current Entity Type        |                    |
| Current Registration State |                    |
| Current EIN                | Yes                |
| Business Type              | Manufacturing      |
| Other Business Type        |                    |
| Amazon Inventory           | Yes                |
| Property Locations         |                    |
| SaaS Investors             | Yes                |

**B. Non-U.S. Resident Information**

|                          |     |
|--------------------------|-----|
| Country of Residence     |     |
| Country of Tax Residence |     |
| ITIN                     | Yes |
| EIN                      | Yes |
| Existing U.S. Company    | Yes |
| Existing Entity Type     |     |
| Existing Company State   |     |
| Year Formed              |     |
| Business Type            |     |
| U.S. Office              |     |
| U.S. Employees           |     |
| U.S. Inventory           |     |
| U.S. Contractors         |     |

**02. Ownership & Operations**

|                         |     |
|-------------------------|-----|
| Number of Owners        | Two |
| Non-U.S. Owner          | Yes |
| Employees               |     |
| Office                  |     |
| Warehouse               |     |
| Inventory               |     |
| Independent Contractors |     |

03. Financial Expectations

|                          |                |
|--------------------------|----------------|
| Estimated Annual Revenue | Under \$50,000 |
| Expected Annual Profit   | Under \$50,000 |

04. Banking & Payment Needs

|                            |
|----------------------------|
| U.S. Business Bank Account |
| Stripe                     |
| PayPal                     |
| Payment Processor          |

05. Business Priorities

|                        |                       |
|------------------------|-----------------------|
| Highest Priority       | Lowest Formation Cost |
| Raise Investment       |                       |
| Hire Employees         |                       |
| Expand Internationally |                       |
| Own Real Estate        |                       |
| Preferred State        | Delaware              |

06. Additional Services Required

|                    |
|--------------------|
| Requested Services |
|--------------------|

07. Recommended Strategy

Recommended State

Alternative State(s)

Recommended Entity

Federal Tax Classification

Why This Recommendation?

08. Compliance Considerations

Applicable Compliance Items [compliance]