

# NYS LLC + Partnerships Organizer (IT-204-LL)

**Due date: March 15th**

<b>CHECK ONE</b>		LLC NAME:	EIN NO:
<input type="checkbox"/> SINGLE MEMBER LLC	TRADE NAME OF BUSINESS IF DIFFERENT FROM LEGAL NAME ABOVE:		<input type="checkbox"/> CHECK BOX IF THIS IS NEW ADDRESS
<input type="checkbox"/> MULTI-MEMBER	ADDRESS:		DATE BUSINESS STARTED:
<input type="checkbox"/> REGULAR PARTNERSHIP	CITY	STATE	ZIP
PRINCIPAL BUSINESS ACTIVITY:			CONTACT PERSON'S NAME:
IF THIS IS THE LAST YEAR OF YOUR BUSINESS, PLEASE CHECK BOX <input type="checkbox"/>			CONTACT PERSON'S TELEPHONE NUMBER:
			CONTACT PERSON'S EMAIL ADDRESS:

## Filing Requirements for LLC, LLP and Partnerships:

- Every Single Member LLC and Multi-member LLC or LLP that has income, gain or loss from NYS sources.
- Every Partnership whose NYS source gross income is equal or greater than \$1 million.
- The filing fee varies from \$25 (Single member LLC) up to \$4,500 (multi-member LLC or LLP). The fee must be paid by direct withdrawal from your bank account when e-filing Form IT-204-LL.

## Bank Account Info

BANK'S NAME > \_\_\_\_\_

BANK ROUTING NO. >   
(9-DIGIT NUMBER ON BOTTOM LEFT CORNER OF YOUR CHECK, OR ASK YOUR BANK)

BANK ACCOUNT NO. >

CHECKING     SAVINGS  
 PERSONAL     BUSINESS

Please Initial

## Credit Card Info

I will pay by:

- Check - Date sent:     /    /
- Credit Card

Our fee is \$125 for single member LLC, \$150 for multi-member LLCs and Regular Partnerships, payable with your request to us.

**YOUR SECURITY CODE >**  
**FOR VISA / MC / DISCOVER -**  
 THE LAST 3 DIGITS ON THE  
 BACK OF YOUR CARD  
**FOR AMERICAN EXPRESS -**  
 THE 4 DIGITS ON RIGHT SIDE OF  
 THE FRONT OF THE CARD

CARD NUMBER  EXP. DATE

SECURITY CODE  SIGNATURE

\_\_\_\_\_  
**PRINT NAME ON CARD**