



4201 Bee Cave Rd.
Suite A-200
Austin, Texas 78746
P: 512-327-0909
F: 512-327-0904

12335 Hymeadow Dr.
Suite 400
Austin, TX 78750
P: 512-458-6151
F: 512-371-7128

Note: Save this form, complete the information, and email the completed form as an attachment to newclient@map-cpas.com

NEW CLIENT APPLICATION

PRELIMINARY INFORMATION

Company Name: _____

Principal of business name and title: _____

Telephone Number _____ Fax Number _____ Cell _____

E-Mail Address _____

Secondary contact name and title _____

Phone _____ Cell _____

E-Mail Address _____

Street Address _____

City _____ State _____ Zip _____

DUNS#: _____ Website: _____

Who referred you, or how did you hear of Mangold Anker Phillips? _____

What objectives do you want to accomplish in the initial interview appointment?

What long-term objectives do you want to achieve in working with Mangold Anker Phillips?

What is your preferred method of communication (telephone/email/meet in person/mailings)? _____

OTHER ADVISORS

Attorney? _____ Firm: _____

Describe your will or other estate instruments? _____

Financial planner: _____ Firm: _____

Banker: _____ Bank: _____

Who are your most influential business advisors, and how often do you contact them for advice? _____



GENERAL BUSINESS INFORMATION

We extend most income tax returns. Are you OK with extending your return, if necessary? __ Yes, __ No

Date of Incorporation/Formation _____ State _____ Fiscal Year End: _____

Form of Organization and tax classification

____ C-Corporation ____ S-Corporation ____ Partnership ____ Sole Proprietorship

____ Limited Liability Company and ____ Disregarded ____ Partnership ____ Corp ____ S Corp

Do you have a written business plan? _____

Do you have a written monthly, quarterly, or annual operating budget or forecast? _____ If so, describe what you prepare. _____

How is the business financed? _____

Annual Sales: \$_____ for the year ended _____.

Sales trend: _____

Number of Employees: _____

Industry: __ Professional __ Retail __ Wholesale __ Service __ Franchise __ Manufacturing __ Distributor

Other: _____

Does the company own any subsidiary organizations? _____

If yes, please explain relation of each: _____

Does any other company own an interest in this business? _____

If yes, please explain relationship: _____

What is your current pain, i.e. business problem? _____

How do you see Mangold Anker Phillips helping you address the challenges and opportunities?

What growth plans do you have? _____

Do you expect future capital needs or new financing? If so, why? _____

Are you concerned about any of your asset, liability, or income statement accounts to which we should pay particularly close attention? If so, please list. _____

Do you have a Retirement Plan? If so, what type (401K, pension plan, SEP, etc.)? _____

Who is the TPA? _____ Can we get a copy of the last 5500 filed? _____



OWNERSHIP INFORMATION

Shares/Units: Common _____ Preferred _____

Number of Shareholders/Partners/ Owners _____

Name	Active	Shares or %
_____	_____	_____
_____	_____	_____
_____	_____	_____

Buy/Sell Agreements in place? _____ Restrictions on Transfers? _____

CURRENT ACCOUNTING / CONSULTING RELATIONSHIP

Has the company ever had Financial Statements ___Compiled ___Reviewed ___Audited? If so, for what purpose (bank, investor, or internal)? _____

Basis of Accounting: Cash _____ Accrual _____ Tax Basis _____

Accounting and Bookkeeping Services: In House _____ Outside Independent _____

Name of Current Accountant _____

Name of Current Accounting Firm _____

Address _____

City _____ State _____ Zip _____

Telephone _____ Fax _____

E-Mail Address _____

Have you informed your current accountant that you are meeting with us? Yes _____, No _____, N/A _____

What DO you like about working with your current accountant? _____

What DON'T you like about working with your current Accountant? _____

FINANCIAL INFORMATION

Accounting System

Current accounting system, version and year: (Examples: QuickBooks Premier 2016, QuickBooks Online Plus, Sage 100 ERP) _____

Number of people who access the accounting system _____

How long have you used your current accounting system? _____

Is your accounting system doing everything you need? _____

List any integrated accounting systems, such as Micros POS, Fresh Books, Expensify, and Bill.com that you have. _____

What percentages of projects, if any, take longer than 30 days to complete? _____

Who is in charge of paying bills? _____

Who is in charge of reconciling the bank account? _____

Who is in charge of the general ledger / other bookkeeping? _____

Who is in charge of making deposits? _____

Who is in charge of tracing customer accounts / billing? _____

Do you prepare your own payroll? If so, what software program or payroll company do you use? _____

Accounts

Number of bank accounts _____ credit card accounts _____ lines of credit _____ other loans _____

Total number of transactions per month in all bank and credit card accounts combined (Less than 30, 30-59, 60-89, 90-119, 120-499, 500+) _____

Do you receive customer payments through credit cards, Pay Pal, or any other third-party system? _____

Please provide us with: the last 3 years of federal and state tax returns, written Operating Agreement, Partnership Agreement, Articles of Incorporation, and any Texas Franchise, IRS, or other state notices.