

Engagement Letter for BOI Filing Services

Company Entity Name (client): _____

Dear Client:

We are pleased to assist you with filing your initial Beneficial Ownership Information (BOI) report as required by the Corporate Transparency Act. This letter outlines the terms of our engagement and the nature and limitations of the services we will provide.

Engagement Scope: Our services will be limited to the preparation and filing of the initial BOI report for the company named in this engagement letter. This engagement does not include any updates or amendments to the BOI report after the initial filing.

Our Responsibilities:

- Prepare and file the initial BOI report based on the information you provide, including information obtained directly from the company's beneficial owners.
- Maintain confidentiality of your information in accordance with AICPA professional standards.
- Implement appropriate data security measures to protect your information.

Your Responsibilities:

- Assess and determine your filing obligations under the Corporate Transparency Act.
- Provide complete and accurate information necessary for the BOI report using the attached **Entity Information Form 1**, and **Beneficial Owner Information Form 3**. A separate Form 3 is required for each beneficial owner holding 25% or more AND each individual with substantial control.
- Submit completed documents to us using one of the following methods:
 - Submit online form
 - Upload to <https://cunningham.cpa/upload> - deadline is 12/15/2024
 - Mail to:
Cunningham CPA, PC
12526 High Bluff Drive, Ste 300
San Diego, CA 92130
- Respond promptly to our requests for additional information or clarification.
- Review the completed BOI report before filing and inform us of any changes.

Fees:

- Base price for single-member LLCs: \$250
- Additional beneficial owners: \$25 each

- Requesting FinCEN ID numbers for entity and/or beneficial owners: \$25 each
- Contacting beneficial owners for ID and address information by email, regular mail, and up to two email follow-ups: \$50 per owner

Payment is due in advance, except for existing clients with current credit approval.

Confidentiality: We are committed to maintaining the confidentiality of your information. All information you provide to us during this engagement will be kept confidential and will not be disclosed to third parties without your consent, except as required by law or professional standards.

Data Security: We use various email and document management systems to enhance efficiency and accessibility. We employ industry-standard security measures to protect the integrity of your data. However, by engaging our services, you acknowledge and accept that there remains an inherent risk of unauthorized access or interception by third parties.

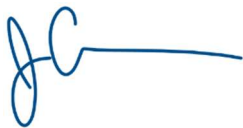
Correspondent Firms: To provide comprehensive services, we may engage qualified third-party professionals or correspondent firms. These parties adhere to our confidentiality and data protection protocols. By engaging our services, you authorize us to utilize such resources as we deem necessary.

Applicable Professional Standards: This engagement will be performed in accordance with the AICPA's Statement on Standards for Consulting Services (SSCS).

Limitation of Liability: Our liability for any claims arising from this engagement is limited to the total amount of fees paid for these services.

If you agree with the terms of our engagement as described in this letter, please sign below and return it to us along with the completed forms for the Entity, Entity Filer, and each Beneficial Owner. We appreciate the opportunity to serve you.

Sincerely,



Jonathan Cunningham, CPA

Cunningham CPA PC

Accepted By:

- **Signature:** _____
- **Name:** _____ **Title:** _____

Payment Information – *Not required for current clients.*

Credit Card Details:

- Cardholder Name: _____
- Credit Card Type: Visa MasterCard American Express Discover
- Card Number: _____
- Expiration Date (MM/YY): _____ CVV (Security Code): _____
- Billing Address: _____
- City, State, ZIP: _____

Authorization for Charges

By signing below, I authorize **Cunningham CPA PC** to charge my credit card for the fees associated with the preparation and filing of the Beneficial Ownership Information (BOI) report as outlined in this engagement letter. I understand that these charges will be processed upon acceptance of this engagement and that payment is non-refundable.

Authorized Signature for Payment

- **Signature:** _____
- **Date:** _____

Form 1 of 3: BOI Reporting Entity

Request FinCEN ID (\$25)

- Legal name of business: _____
- Number of beneficial owners / control persons: _____
- State of Formation: _____
- Address: _____
- City, State, ZIP: _____
- TID: _____
 - EIN SSN/ITIN Foreign
 - If foreign, enter the Country: _____

List DBA / Fictitious Names (if any):

Form 2 of 3: Company Information

Entity formed on or after 1/1/2024: Yes No **If yes, please complete this page, else skip to Form 3 of 3.**

Please provide Company Applicant details (this is the person who filed formation documents to establish the Entity with the State):

- FinCEN ID: _____ (if available)
- First Name: _____
- Last Name: _____
- Date of Birth (DOB): _____
- Street Address: _____ Suite/Apt: _____
- City: _____ State: _____ ZIP Code: _____
Business or Residential

Identifying Document Type (select one):

State DL State/Local/Tribal ID U.S. Passport Foreign Passport

Country or State or Tribe of Issuance: _____

Image of Document

Attach or insert an image of the identifying document in the space below:

Form 3 of 3: Beneficial Owner Information (a)

(Duplicate this page for each beneficial owner)

- Check if parent/guardian information is provided instead of minor child information.
- Check if beneficial ownership is held exclusively through exempt entities and enter the entity legal name as the Last Name.

- FinCEN ID: _____ (if available)
 - Request FinCEN ID if one is not available (\$25)
- First Name: _____
- Last Name: _____
- Date of Birth (DOB): _____
- Home Street Address (no P.O. Box): _____
Suite/Apt: _____
- City: _____ State: _____ ZIP Code: _____
- eMail address: _____

Identifying Document

- Cunningham CPA PC to request document image from Beneficial Owner (\$50)

-or- (select one type):

State DL State/Local/Tribal ID U.S. Passport Foreign Passport

State or Tribe or Country of Issuance: _____

Image of Document

Attach or insert an image of the identifying document in the space below

Form 3 of 3: Beneficial Owner Information (b)

(Duplicate this page for each beneficial owner)

- Check if parent/guardian information is provided instead of minor child information.
- Check if beneficial ownership is held exclusively through exempt entities and enter the entity legal name as the Last Name.

- FinCEN ID: _____ (if available)
 - Request FinCEN ID if one is not available (\$25)
- First Name: _____
- Last Name: _____
- Date of Birth (DOB): _____
- Home Street Address (no P.O. Box): _____
Suite/Apt: _____
- City: _____ State: _____ ZIP Code: _____
- eMail address: _____

Identifying Document

- Cunningham CPA PC to request document image from Beneficial Owner (\$50)

-or- (select one type):

State DL State/Local/Tribal ID U.S. Passport Foreign Passport

State or Tribe or Country of Issuance: _____

Image of Document

Attach or insert an image of the identifying document in the space below

Form 3 of 3: Beneficial Owner Information (c)

(Duplicate this page for each beneficial owner)

- Check if parent/guardian information is provided instead of minor child information.
- Check if beneficial ownership is held exclusively through exempt entities and enter the entity legal name as the Last Name.

- FinCEN ID: _____ (if available)
 - Request FinCEN ID if one is not available (\$25)
- First Name: _____
- Last Name: _____
- Date of Birth (DOB): _____
- Home Street Address (no P.O. Box): _____
Suite/Apt: _____
- City: _____ State: _____ ZIP Code: _____
- eMail address: _____

Identifying Document

- Cunningham CPA PC to request document image from Beneficial Owner (\$50)

-or- (select one type):

State DL State/Local/Tribal ID U.S. Passport Foreign Passport

State or Tribe or Country of Issuance: _____

Image of Document

Attach or insert an image of the identifying document in the space below

Form 3 of 3: Beneficial Owner Information (d)

(Duplicate this page for each beneficial owner)

- Check if parent/guardian information is provided instead of minor child information.
- Check if beneficial ownership is held exclusively through exempt entities and enter the entity legal name as the Last Name.

- FinCEN ID: _____ (if available)
 - Request FinCEN ID if one is not available (\$25)
- First Name: _____
- Last Name: _____
- Date of Birth (DOB): _____
- Home Street Address (no P.O. Box): _____
Suite/Apt: _____
- City: _____ State: _____ ZIP Code: _____
- eMail address: _____

Identifying Document

- Cunningham CPA PC to request document image from Beneficial Owner (\$50)

-or- (select one type):

State DL State/Local/Tribal ID U.S. Passport Foreign Passport

State or Tribe or Country of Issuance: _____

Image of Document

Attach or insert an image of the identifying document in the space below

Form 3 of 3: Beneficial Owner Information (e)

(Duplicate this page for each beneficial owner)

- Check if parent/guardian information is provided instead of minor child information.
- Check if beneficial ownership is held exclusively through exempt entities and enter the entity legal name as the Last Name.

- FinCEN ID: _____ (if available)
 - Request FinCEN ID if one is not available (\$25)
- First Name: _____
- Last Name: _____
- Date of Birth (DOB): _____
- Home Street Address (no P.O. Box): _____
Suite/Apt: _____
- City: _____ State: _____ ZIP Code: _____
- eMail address: _____

Identifying Document

- Cunningham CPA PC to request document image from Beneficial Owner (\$50)

-or- (select one type):

State DL State/Local/Tribal ID U.S. Passport Foreign Passport

State or Tribe or Country of Issuance: _____

Image of Document

Attach or insert an image of the identifying document in the space below

Form 3 of 3: Beneficial Owner Information (f)

(Duplicate this page for each beneficial owner)

- Check if parent/guardian information is provided instead of minor child information.
- Check if beneficial ownership is held exclusively through exempt entities and enter the entity legal name as the Last Name.

- FinCEN ID: _____ (if available)
 - Request FinCEN ID if one is not available (\$25)
- First Name: _____
- Last Name: _____
- Date of Birth (DOB): _____
- Home Street Address (no P.O. Box): _____
Suite/Apt: _____
- City: _____ State: _____ ZIP Code: _____
- eMail address: _____

Identifying Document

- Cunningham CPA PC to request document image from Beneficial Owner (\$50)

-or- (select one type):

State DL State/Local/Tribal ID U.S. Passport Foreign Passport

State or Tribe or Country of Issuance: _____

Image of Document

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