

MM Tax Service, Inc.

Maria A. Migel, E.A.

2025 Schedule C Business Income and Expense Organizer (Sole Proprietors or Single Member LLCs)

Business Name: _____

Owner Name: _____

Service/Product: _____

Total Business Income/Sales: _____

If you received any 1099s, please include them in your Total Business Income and submit them with your tax information.

Did you make any payments that would require you to file 1099s? Yes ☐ No ☐

If yes, please submit copies with your tax documentation

Do you have a home office? Yes ☐ No ☐

If yes, please also complete the Home Office Organizer

Do you have a business mileage log? Yes ☐ No ☐

Do you have receipts to substantiate your expenses? Yes ☐ No ☐

Expense Type	Amount	Expense Type	Amount
Advertising		Parking & Tolls	
Bank Charges		Postage & Delivery	
Business Licenses & Fees		Rent	
Commissions		Repairs/Maintenance	
Credit Card Processing Fees		Small Tools	
Subcontract Labor		Supplies	
Employee Benefits		Taxes - Payroll	
Employee Health Insurance		Taxes - Property	
Insurance		Taxes - Sales	
Interest		Telephone	
Internet		Travel	
Legal & Professional Fees		Utilities	
Meals (list total)		Wages	
Office Supplies		Other:	

Cost of Goods Sold Information

Cost of Inventory Purchased:

Year-End Inventory:

Auto Expenses

Vehicle Year/Make/Model:

Business Miles Driven:

Total Miles Driven:

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