

Preparer use only

	2025 Information	Prior Year Information
Taxpayer/Spouse/Joint (T, S, J)	_____ [2]	
Employer identification number	_____ [3]	
Business name	_____ [5]	
Principal business/profession	_____ [6]	
Business code	_____ [12]	
Business address, if different from home address on Organizer Form ID: 1040		
Address	_____ [15]	
City/State/Zip	_____ [16]    _____ [17] _____ [18]	
Accounting method (1 = Cash, 2 = Accrual, 3 = Other)	_____ [19]	
If other:	_____ [21]	
Inventory method (1 = Cost, 2 = LCM, 3 = Other)	_____ [22]	
If other enter explanation:	_____ [24]	
_____	_____ [24]	
_____	_____ [24]	
Enter an explanation if there was a change in determining your inventory:	_____ [25]	
_____	_____ [25]	
_____	_____ [25]	
Did you "materially participate" in this business? (Y, N)	_____ [26]	
If not, number of hours you did significantly participate	_____ [28]	
Mark if you began or acquired this business in 2025	_____ [30]	
Did you make any payments in 2025 that require you to file Form(s) 1099? (Y, N)	_____ [31]	
If "Yes", did you or will you file all required Forms 1099? (Y, N)	_____ [33]	
Mark if this business is considered related to qualified services as a minister or religious worker	_____ [35]	
Did you receive wages as a statutory employee or as a minister? (1 = Statutory employee, 2 = Minister)	_____ [37]	
Medical insurance premiums paid by this activity	+ _____ [41]	
Long-term care premiums paid by this activity	+ _____ [45]	
Amount of wages received as a statutory employee	+ _____ [48]	

**Business Income**

	2025 Information	Prior Year Information
Gross receipts and sales		
_____	+ _____ [53]	
_____	+ _____	
_____	+ _____	
_____	+ _____	
Returns and allowances	+ _____ [56]	
Other income:		
_____	+ _____ [58]	
_____	+ _____	
_____	+ _____	

**Cost of Goods Sold**

	2025 Information	Prior Year Information
Beginning inventory	+ _____ [60]	
Purchases	+ _____ [62]	
Labor:		
_____	+ _____ [64]	
_____	+ _____	
Materials	+ _____ [66]	
Other costs:		
_____	+ _____ [68]	
_____	+ _____	
_____	+ _____	
Ending inventory	+ _____ [70]	

Control Totals +



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Principal business or profession \_\_\_\_\_

Preparer use only Carryovers	Non-QBI & Tax	For QBI & Tax	AMT
Operating	+ [19]	+ [20]	+ [21]
Short-term capital		+ [22]	+ [23]
Long-term capital		+ [24]	+ [25]
28% rate capital		+ [26]	+ [27]
Section 1231 loss		+ [28]	+ [29]
Ordinary business gain/loss	+ [31]	+ [32]	+ [33]
Section 179	+ [34]	+ [35]	+ [36]

NOTES/QUESTIONS: