

Preparer use only**2024 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]

Enter an explanation if there was a change in determining your inventory: _____ [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 2024 _____ [30]
Did you make any payments in 2024 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 + _____ [40]
Long-term care premiums paid by this activity + _____ [44]
Amount of wages received as a statutory employee + _____ [47]

Business Income**2024 Information****Prior Year Information**

Gross receipts and sales _____ [52]

Returns and allowances + _____ [55]
Other income: _____ [57]

Cost of Goods Sold**2024 Information****Prior Year Information**

Beginning inventory + _____ [59]
Purchases + _____ [61]
Labor: _____ [63]

Materials + _____ [65]
Other costs: _____ [67]

Ending inventory + _____ [69]

Control Totals +**Form ID: C-1**

Principal business or profession

Prior Year Information

[illegible]

Form ID: C-2

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Principal business or profession _____ [3]

Taxpayer/Spouse/Joint (T, S, J) _____ [4]

State postal code _____ [5]

Business Use of Home**2024 Information****Prior Year Information**

Total area of home _____ [14]

Area used exclusively for business _____ [16]

Information for day-care facilities only:

Total hours used for day-care during this year _____ [18]

Total hours used this year, if less than 8784 _____ [20]

Special computation for certain day-care facilities:

Area used regularly and exclusively for day-care business _____ [22]

Area used partly for day-care business _____ [24]

List as direct expenses any expenses which are attributable only to the business part of your home.**List as indirect expenses any expenses which are attributable to the overall upkeep and running of your home.****2024 Information****Prior Year Information****Direct Expenses****Indirect Expenses**

Mortgage interest: + _____ [29] + _____ [31]

Real estate taxes: + _____ [37] + _____ [39]

Excess mortgage interest + _____ [42] + _____ [43]

Insurance + _____ [48] + _____ [50]

Rent + _____ [54] + _____ [55]

Repairs & maintenance + _____ [57] + _____ [58]

Utilities + _____ [60] + _____ [61]

Other expenses, such as: Supplies & Security system + _____ [63] + _____ [64]

+ _____ + _____

+ _____ + _____

+ _____ + _____

+ _____ + _____

+ _____ + _____

+ _____ + _____

+ _____ + _____

+ _____ + _____

+ _____ + _____

Excess casualty losses + _____ [66]

Carryovers:

Operating expenses + _____ [67]

Casualty losses + _____ [68]

Depreciation + _____ [70]

Business expenses not from business use of home, such as:

Travel, Supplies, Business telephone expenses + _____ [71]

Depreciation + _____ [75]

NOTES/QUESTIONS:

If you used your automobile for business purposes, please complete the following information.

Preparer use only

Description of business or profession _____ [3]

Vehicles

Vehicle 1 -	Date placed in service	_____	[4]
	Description	_____	[5]
	Comments	_____	
Vehicle 2 -	Date placed in service	_____	[9]
	Description	_____	[10]
	Comments	_____	
Vehicle 3 -	Date placed in service	_____	[14]
	Description	_____	[15]
	Comments	_____	
Vehicle 4 -	Date placed in service	_____	[19]
	Description	_____	[20]
	Comments	_____	

Vehicle Questions

	Vehicle 1	Prior Year	Vehicle 2	Prior Year	Vehicle 3	Prior Year	Vehicle 4	Prior Year
If you used your automobile for work purposes, answer the following questions:								
Was the vehicle available for off-duty personal use? (Y, N)	___ [60]	___	___ [62]	___	___ [64]	___	___ [66]	___
Was another vehicle available for personal use? (Y, N)	___ [68]	___	___ [70]	___	___ [72]	___	___ [74]	___
Do you have evidence to support your deduction? (Y, N)	___ [76]	___	___ [78]	___	___ [80]	___	___ [82]	___
Is this evidence written? (Y, N)	___ [84]	___	___ [86]	___	___ [88]	___	___ [90]	___

Vehicle Expenses

	Vehicle 1	Prior Year Information	Vehicle 2	Prior Year Information	Vehicle 3	Prior Year Information	Vehicle 4	Prior Year Information
Total miles for year	_____ [32]		_____ [34]		_____ [36]		_____ [38]	
Commuting miles	_____ [40]		_____ [42]		_____ [44]		_____ [46]	
Business miles	_____ [48]		_____ [50]		_____ [52]		_____ [54]	
Parking fees	+ _____ [92]		+ _____ [94]		+ _____ [96]		+ _____ [98]	
Tolls	+ _____ [100]		+ _____ [102]		+ _____ [104]		+ _____ [106]	
Gasoline	+ _____ [108]		+ _____ [110]		+ _____ [112]		+ _____ [114]	
Oil	+ _____ [116]		+ _____ [118]		+ _____ [120]		+ _____ [122]	
Repairs	+ _____ [124]		+ _____ [126]		+ _____ [128]		+ _____ [130]	
Maintenance	+ _____ [132]		+ _____ [134]		+ _____ [136]		+ _____ [138]	
Tires	+ _____ [140]		+ _____ [142]		+ _____ [144]		+ _____ [146]	
Car washes	+ _____ [148]		+ _____ [150]		+ _____ [152]		+ _____ [154]	
Insurance	+ _____ [156]		+ _____ [158]		+ _____ [160]		+ _____ [162]	
Interest	+ _____ [164]		+ _____ [166]		+ _____ [168]		+ _____ [170]	
Registration	+ _____ [172]		+ _____ [174]		+ _____ [176]		+ _____ [178]	
Licenses	+ _____ [180]		+ _____ [182]		+ _____ [184]		+ _____ [186]	
Property taxes	+ _____ [188]		+ _____ [190]		+ _____ [192]		+ _____ [194]	
Other vehicle expenses	+ _____ [196]		+ _____ [198]		+ _____ [200]		+ _____ [202]	
Vehicle rentals	+ _____ [204]		+ _____ [206]		+ _____ [208]		+ _____ [210]	
Inclusion amt (Preparer only)	+ _____ [212]		+ _____ [214]		+ _____ [216]		+ _____ [218]	
Depreciation	+ _____ [220]		+ _____ [222]		+ _____ [224]		+ _____ [226]	

Preparer use only

Activity name _____

Use the comments section to provide additional information about the asset. Enter information such as vehicle mileage (total, commuting and business), the total and business square footage of home, home expenses (total and business portion). See the EXAMPLE asset below.

		Description of Asset Acquired	Date Acquired	Cost or Basis
EXAMPLE		2024 Model T - (EXAMPLE ASSET)	03/09/24	25,750
		Comments: 22,500 job-related miles, 25,000 total miles		
1		Comments:		
2		Comments:		
3		Comments:		
4		Comments:		
5		Comments:		
6		Comments:		
7		Comments:		
8		Comments:		
9		Comments:		
10		Comments:		
11		Comments:		
12		Comments:		
13		Comments:		
14		Comments:		
15		Comments:		
16		Comments:		
17		Comments:		
18		Comments:		
19		Comments:		
20		Comments:		
21		Comments:		
22		Comments:		
23		Comments:		
24		Comments:		
25		Comments:		

Diligence Questions

SELF EMPLOYMENT DILIGENCE

Description of business (*Type of work, service rendered, product sold, business location, hours of operation*) _____

EIN# _____ Any Employees? _____ # years in business _____

What kind of records do you keep? *Check mark below*

Customer receipt book		Accounting Records		Business Stationary	
Paid expense receipts		Log Books		Car Travel log	
Computer records		Business Bank Acct		Car/Truck Expense	
Ledgers		Suppliers		Client Statements	
Advertising		Rental Expense		Insurance	
Form 1099 Misc received		Form 1099 Misc issued		Other:	

Business Phone _____ Business Website _____

Business Address _____

How do you advertise? _____

Do you have a license? _____ Is a license required for your occupation? _____

Did you file state and/or local sales tax returns for the tax year? _____

How Did you calculate your income? _____

How Did you calculate your expenses? _____

If you do not have any business expenses, explain why _____

Preparer Notes: _____

Taxpayer Signature (Business Owner/Subcontractor) _____ Date _____

MILEAGE

DISCUSSED WITH TAXPAYER THE MEHOD OF RECORDKEEPING FOR MILEAGE AND GAVE TAXPAYER A CALENDAR TO LOG IN DAILY MILEAGES FOR BUSINESS PURPOSES. DISCUSSED WITH TAXPAYER THE WAY TO LOG BEGINNING OF YEAR AND END OF YEAR ODOMETER READINGS.

WENT OVER THE REQUIREMENT OF NEEDING 3RD PARTY VERIFICATION FOR ODOMETER READINGS. (SAVED PROOF OF SERVICE RECORDS)

WENT OVER THE STANDARD MILEAGE RATE AND WHAT EXPENSES IT COVERS SUCH AS REPAIRS, LICENSE, FLUIDS, FUEL, ETC. THE ONLY EXPENSE THAT CAN BE USED IN ADDITION TO THE STANDARD MILEAGE RATE IS INTEREST PAID ON A LOAN FOR THE VEHICLE IF IN THE CASE OF THE SCHDEULE C TAXPAYER.

SIGNATURES:

TAXPAYER: _____ DATE: _____

SPOUSE: _____ DATE: _____
