

SMALL BUSINESS CHECKLIST | DW AGOSTO TAX PLANNING, LLC

This form is for Sole Proprietors or Single-Member LLCs. Other businesses need to provide a Profit and Loss and a Balance Sheet. The purpose of this form is to compile your data and necessary documentation. Please complete to reduce billable time.

TAXPAYER NAME: _____

EIN (if not SS) _____

BUSINESS NAME: _____

CASH ACCOUNTING? _____

ADDRESS IF DIFFERENT FROM HOME: _____

WHEN DID THE BUSINESS BEGIN OPERATIONS? _____ STATE? _____

ARE YOU UP-TO-DATE ON YOUR...?

	YES	NO	DON'T KNOW	N/A	IF NO, PLEASE EXPLAIN
FEDERAL TAXES					
STATE TAXES					
STATE ANNUAL FILING					
LOCAL LICENSE					
SALES TAX					
EMPLOYMENT TAXES					

EARNED INCOME _____

HOME OFFICE?

INTEREST INCOME _____

TOTAL SQ FT OF HOME _____

EXPENSES:

SQ FT OF WORK SPACE _____

ADVERTISING _____

VEHICLE MILEAGE?

BANK FEES _____

VEHICLE 1 TYPE _____

1099 LABOR _____

TOTAL MILES DRIVEN _____

INSURANCE _____

BUSINESS MILES DRIVEN _____

MORTG INTEREST _____

OTHER INTEREST _____

LEGAL _____

VEHICLE 2 TYPE _____

ACCOUNTING _____

TOTAL MILES DRIVEN _____

OFFICE SUPPLIES _____

BUSINESS MILES DRIVEN _____

PENSION/401K _____

OFFICE RENT _____

EQUIP RENT _____

REPAIRS _____

COST OF GOODS SOLD

If you maintain inventory, or sell goods, we should discuss that individually.

MAINTENANCE _____

SUPPLIES _____

TAXES (FED) _____

TAXES (STATE) _____

TAXES (PAYROLL) _____

TAXES (SALE) _____

LICENSES _____

TRAVEL MEALS _____

TRAVEL HOTEL _____

PARKING _____

ENTERTAINMENT _____

PHONE/INTERNET _____

UTILITIES _____

WAGES _____

OTHER: _____

ASSETS:

Attach a list of all purchased assets, including dates and costs.

Attach a list of all assets sold or no longer in use, including dates and income, if any.