



Business Income and Expenses

First Name				Last Name				Tax Year	
Business Name				*Business Type					
Business Address [check if same as home address]:				<input type="checkbox"/>					
If we have the information from a previous filing, check On File.				Business Start Date		On File	<input type="checkbox"/>		
Business is registered with the state:		Yes <input type="checkbox"/> No <input type="checkbox"/>	If yes, what state			On File	<input type="checkbox"/>		
Business is registered with the IRS:		Yes <input type="checkbox"/> No <input type="checkbox"/>	If yes, list EIN			On File	<input type="checkbox"/>		
Business entity:	Sole Proprietor <input type="checkbox"/> Single Member LLC <input type="checkbox"/> Non-profit <input type="checkbox"/> None of these <input type="checkbox"/>					On File	<input type="checkbox"/>		

(section A) BUSINESS INCOME

*Total cash received or additional sales (if all your income was submitted on a 1099, then enter \$0 in the box)	\$
Total of all 1099s (NEC, Misc, K) income for this business type if forms not submitted	\$

(section B) BUSINESS EXPENSES

Use the grid for itemizing

8	Advertising:	\$		\$
10	Commission and fees (paid in staffing, payment processing, bank fees, storage fee)	\$		\$
11	Contract labor (amount paid to staff that does NOT receive a W-2):	\$		\$
14	Employee health insurance and benefits:	\$		\$
15	Insurance for property or business (not home or vehicle):	\$		\$
16a	Interest for mortgage (for additional business property not home office):	\$		\$
16b	Interest for loans and credit cards used for business:	\$		\$
17	Legal and professional services (attorneys, consultants, educators, image agents):	\$		\$
18	Office expenses (electronics, furniture, subscriptions) [<i>please itemize this expense</i>]:	\$		\$
19	Pension / Profit Sharing (paid to employees):	\$		\$
20a	Rent or lease vehicle (not personal vehicle):	\$		\$
20a	Rent or lease equipment or machinery:	\$		\$
20b	Rent or lease property (not home office):	\$		\$
21	Repairs & maintenance of office (not home office):	\$		\$
22	Supplies (materials, clothing for business, cleaning supplies, etc.):	\$		\$
23	Taxes and licenses:	\$		\$
24a	Travel (transportation, lodging, baggage cost, travel pass):	\$		\$
24b	Tracked business meals in a restaurant or take out:	\$		\$
24b	Tracked business meals for those under DOT regulations:	\$		\$
25	Utilities [please use the breakdown table] (list home office utilities on p3)		Utility Breakdown Table	
26	Wages for employees (must be hired as an employee and receive a W-2):	\$	Cell Phone	\$
48	Miscellaneous Expense (list it):	\$	Internet	\$
48	Miscellaneous Expense (list it):	\$	Office Utilities	\$

BUSINESS VEHICLE DEPRECIATION EXPENSE

(section C)

Disclaimer: This is the vehicle depreciation section. By adding a vehicle used in business, you agree to keep records of the mileage and maintenance. If the vehicle is removed from business, you will report that action the following tax year. Tax code permits we use either mileage or maintenance depreciation. The details of this option can be discussed.

VEHICLE used for BUSINESS

	Vehicle 1		Vehicle 2		Vehicle 3	
*Year Make						
*Model						
Purchase Price	\$ _____	on file	\$ _____	on file	\$ _____	on file
Purchase Date	____/____/____	on file	____/____/____	on file	____/____/____	on file
Start date used for business	____/____/____	on file	____/____/____	on file	____/____/____	on file
Check if vehicle is leased	<input type="checkbox"/> Leased Vehicle		<input type="checkbox"/> Leased Vehicle		<input type="checkbox"/> Leased Vehicle	
If any of these vehicles were removed from business in the tax year, then you must answer all three following questions.						
Business end date <i>mm/dd/yyyy</i>	____/____/____		____/____/____		____/____/____	
Reason for ending <i>(select one)</i>	Sold	Traded	Sold	Traded	Sold	Traded
	Dissolved	Loss	Dissolved	Loss	Dissolved	Loss
Amount received	\$ _____		\$ _____		\$ _____	

VEHICLE MILEAGE DEPRECIATION

st total and business miles for the tax year. For any vehicle legally registered to the business, the total miles and business miles will be the same.

*Total miles			
*Business miles			
Current odometer			

VEHICLE MAINTENANCE DEPRECIATION

[1] Fuel Cost			
[1] Oil Change			
[2] Repairs			
[2] Maintenance			
[2] Tires			
[3] Parking Fees			
[4] Insurance			
[5] Total lease payment			
[6] Vehicle loan interest			
[6] Property Tax			
[7] misc:			
[7] misc:			

BUSINESS HOME OFFICE EXPENSES FOR HOMEOWNERS and RENTERS

(section D)

(Office 1)		Address of home office:				
1		Select rent or own for this property:			Rent	Own
2	R/O	Start date of office usage:		End date of office usage:		
3	R/O	List the square footage of the home/rental space:	On file <input type="checkbox"/>		# sq ft	
4	R/O	List the square footage of the office space:	On file <input type="checkbox"/>		# sq ft	
5	R	List your monthly OR yearly rental cost:	Same as last year <input type="checkbox"/>	mnth - \$	yr - \$	
6	O	List the value of the home when business started (we will pull the FMV):	On file <input type="checkbox"/>		\$	
7	O	What is the land value (we will value it at 20% of the home value unless otherwise noted):	\$			
8	O	How much did you pay in real estate / property tax [1098-Mortgage Interest]:	\$			
9	O	How much did you pay in mortgage interest [1098-Mortgage Interest]:	\$			
10	R/O	How much did you pay in homeowners' insurance OR renters' insurance:	\$			
11	R/O	List monthly OR yearly amount paid for utilities:	Monthly		Yearly	
			•Electric	\$	\$	
			•Gas	\$	\$	
			•Other	\$	\$	
12	R/O	List the type and the amount paid for maintenance and repairs of the home:				
	a)					
	b)					
13	R/O	List expense for the home office directly:				
	a)					
	b)					

(Office 2)		Address of home office:				
1		Select rent or own for this property:			Rent	Own
2	R/O	Start date of office usage:		End date of office usage:		
3	R/O	List the square footage of the home/rental space:	On file <input type="checkbox"/>		# sq ft	
4	R/O	List the square footage of the office space:	On file <input type="checkbox"/>		# sq ft	
5	R	List your monthly OR yearly rental cost:	Same as last year <input type="checkbox"/>	mnth - \$	yr - \$	
6	O	List the value of the home when business started (we will pull the FMV):	On file <input type="checkbox"/>		\$	
7	O	What is the land value (we will value it at 20% of the home value unless otherwise noted):	\$			
8	O	How much did you pay in real estate / property tax [1098-Mortgage Interest]:	\$			
9	O	How much did you pay in mortgage interest [1098-Mortgage Interest]:	\$			
10	R/O	How much did you pay in homeowners' insurance OR renters' insurance:	\$			
11	R/O	List monthly OR yearly amount paid for utilities:	Monthly		Yearly	
			•Electric	\$	\$	
			•Gas	\$	\$	
			•Other	\$	\$	
12	R/O	List the type and the amount paid for maintenance and repairs of the home:				
	a)					
	b)					
13	R/O	List expense for the home office directly:				
	a)					
	b)					