

**Business Income and Expenses**

**Your Name**: Click or tap here to enter text. **Tax Year**: (Year) [If data is on file from previous, check the box]

|  |  |  |  |
| --- | --- | --- | --- |
| Business Names: | Click or tap here to enter text. | \*Type of business:  | Click or tap here to enter text. |
| Business address: | Click or tap here to enter text. | Business Start Date: | (enter date) | On file [ ]  |
| Business registered with the state: | Yes [ ]  No [ ]  | If yes, what state: | Click or tap here to enter text. | On file [ ]  |
| Business registered with the IRS: | Yes [ ]  No [ ]  | If yes, list EIN: | Click or tap here to enter text. | On file [ ]  |
| Business entity: | Sole Proprietor [ ]  Single Member LLC [ ]  Single Member Non-profit [ ]  None of these [ ]  | On file [ ]  |

*(section A)* BUSINESS INCOME (click the X to enter amount)

|  |  |
| --- | --- |
| Total of all 1099-NEC income for this business type: | $x |
| Total of all 1099-Misc income for this business type: | $x |
| Total merchant card sales for this business type [1099-K if applicable]: | $x |
| Total cash receipts or additional gross sales: | $x |

*(section B)* BUSINESS EXPENSES (click the X to enter amount)

|  |  |
| --- | --- |
| Advertising: | $x |
| Commission and fees (paid to employees, for referrals, payment processing, bank ): | $x |
| Contract labor (an amount paid to someone for work done sporadically): | $x |
| Employee health insurance and benefits: | $x |
| Insurance for property or business (not home or vehicle): | $x |
| Interest for loans and credit cards used for business: | $x | Office Expense Breakdown |
| Interest for mortgage (for additional business property not home office): | $x | (item 1) | $x |
| Legal and professional services (attorneys, consultants, business educators): | $x | (item 1) | $x |
| Office expenses (electronics, furniture, subscriptions): | $x | Enter total on expense line |
| Pension / Profit Sharing (paid to employees): | $x |
| Rent or lease vehicle (not personal vehicle): | $x |
| Rent or lease equipment or machinery: | $x |
| Rent or lease property (not home office): | $x |
| Repairs & maintenance of office (not home office): | $x |
| Supplies (materials, clothing for business, cleaning supplies, etc.): | $x |
| Taxes and licenses: | $x | Utility Breakdown |
| Travel (transportation and lodging): | $x | Cell Phone | $x |
| Tracked business meals 50% (in or out of a restaurant): | $x | Internet | $x |
| Tracked business meals 80% (for those under DOT): | $x | Other Utilities | $x |
| Utilities (not home office)[for cell phone, internet, and other, please use the breakdown table] | $x | Enter total on expense line |
| Wages for employees (they must be hired as an employee): | $x |
| Misc. Expense: Click or tap here to enter text. | $x |
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(Page 2) Your Name: Click or tap here to enter text. Business: Click or tap here to enter text. Tax Year: (year)

|  |
| --- |
| **Disclaimer**: By adding a business vehicle, 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.  |

*(**section C)* VEHICLE used for BUSINESS (click the X to enter amount // if vehicle was removed complete highlighted questions

|  |  |  |  |
| --- | --- | --- | --- |
|  | Vehicle 1 | Vehicle 2 | Vehicle 3 |
| Year Make Model | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| Purchase Price | On file [ ]  | $x | On file [ ]  | $x | On file [ ]  | $x |
| Start date used for business | On file [ ]  | mm/dd/yyyy | On file [ ]  | mm/dd/yyyy | On file [ ]  | mm/dd/yyyy |
| Check if a leased vehicle | [ ]  Leased vehicle | [ ]  Leased vehicle | [ ]  Leased vehicle |
| *Business end date* | *Click or tap to enter a date.* | *Click or tap to enter a date.* | *Click or tap to enter a date.* |
| *Reason for ending* | *Choose an item.* | *Choose an item.* | *Choose an item.* |
| *Amount received* | *$x* | *$x* | *$x* |

VEHICLE MILEAGE DEPRECIATION

|  |
| --- |
| Enter the Days per Week **OR** Days in the Year the vehicle was used for business. If registered to business check the box and enter the milage. |
|  | Vehicle 1 | Vehicle 2 | Vehicle 3 |
|  | [ ]   | **X** Days per WK / **X** Days in the Yr | [ ]   | **X** Days per WK / **X** Days in the Yr | [ ]   | **X** Days per WK / **X** Days in the Yr |
| **\*Business miles** | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| ***Total mile in the year*** | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |

VEHICLE MAINTENANCE DEPRECIATION

|  |  |  |  |
| --- | --- | --- | --- |
| [1] Fuel Cost | $x | $x | $x |
| [1] Oil Change | $x | $x | $x |
| [2] Repairs | $x | $x | $x |
| [2] Maintenance | $x | $x | $x |
| [2] Tires | $x | $x | $x |
| [3] Parking Fees | $x | $x | $x |
| [4] Insurance | $x | $x | $x |
| [5] Total lease payments | $x | $x | $x |
| [6] Vehicle loan interest | $x | $x | $x |
| [6] Property Tax | $x | $x | $x |
| [7] Registration | $x | $x | $x |
| [7] (list miscellaneous exp.) | $x | $x | $x |
| [7] (list miscellaneous exp.) | $x | $x | $x |

(Page 3) Your Name: Click or tap here to enter text. Business: Click or tap here to enter text. Tax Year: (year)

*(section D)* HOME OFFICE EXPENSE FOR HOMEOWNERS

|  |  |  |
| --- | --- | --- |
| 1 | Address of home office: | Click or tap here to enter text |
| 2 | Start date for home office usage? | On file [ ]  | Click or tap to enter a date. |
| 3 | List the square footage of your home: | (type here) sq ft | Sq ft of your office space: | (type here) sq ft |
| 4 | What is the value of your home? | $x | What is the value of the land? | $x |
| 5 | Did you get a form 1098 from your lender? | [ ] Yes [ ] No [ ] No mortgage |
| 6 | If no 1098, how much did you pay in real estate / property tax: | $x |
| 7 | If no 1098, how much did you pay in homeowners’ insurance: | $x |
| 8 | How much did you pay for maintenance and repairs? | $x |
| 9 | How much did you pay for utilities? | $x |
| 10 | How many months in the year did you occupy the residence? | Click or tap here to enter text. |
| 11 | List any other expenses for the home office: | Click or tap here to enter text. | $x |

*(section E)* OFFICE EXPENSE FOR RENTERS

|  |  |  |
| --- | --- | --- |
| 1 | Address of rental location: | Click or tap here to enter text |
| 2 | Start date of office usage: | Click or tap to enter a date. |
| 3 | List the square footage of your rental unit: | (type here) sq ft | Sq ft of your office space: | (type here) sq ft |
| 4 | What was your total rent cost for the year: | $x |
| 5 | How much did you pay for utilities: | $x |
| 6 | How much did you pay in renters’ insurance: | $x |
| 7 | How many months in the year did you occupy the rental unit: | Click or tap here to enter text. |
| 8 | List any other expenses for the home office: | Click or tap here to enter text. | $x |