

Self-Employed Tax Organizer

The Self-Employed Tax Organizer should be completed by all sole proprietors or single member LLC owners. It has been designed to help collect and organize the information that we will need to prepare the business portion of your income tax returns in the most efficient and timely manner possible.

In addition to completing the organizer, there are additional documents we'll need to complete your taxes. Below is a list of items we will need before we can prepare your taxes:

Completed Organizer (see below)

Prior Years Tax Returns - If you are a first-time tax client, please provide a copy of tax returns for the past 2 years (Federal and State).

Bookkeeping Records - If you use a bookkeeping system other than Quickbooks Online, you can provide us with a year-end income statement, balance sheet and statement of cash flows rather than completing the income and expense information in the organizer.

Employee Information - If you have employees, please include a copy of the following docs: Form W-3 (This form is filed with W-2s to report total annual payroll)
Federal Form 940 (FUTA) – For the tax year
Federal Form 941 (FICA) quarterly reports for periods ending 3/31, 6/30, 9/30 and 12/31 of tax year
State quarterly reports for periods ending 3/31, 6/30, 9/30 and 12/31 of the tax year

1099-MISC or 1099-NEC Forms- If you issued forms 1099-MISC or 1099-NEC we will need copies of these forms

Additional Items - Although the organizer is fairly comprehensive, it is certainly possible that there are items pertinent to your taxes that are not addressed. Please include these documents with your organizer.

If there are questions or sections you are not sure about, please note them and we will discuss them before finalizing and filing your returns. When your organizer is complete and you have compiled the above information, please return via the QuickBooks request link in your email.

Business Information

Name

Address

City, State, ZIP

County (*not country*)

Phone

Email Address

Federal EIN State Tax ID Number (*if applicable*)

State of Organization

Date of Organization

Check any that apply: Initial Return Amended Return Address Change Final Return
Name Change Yes (Is the business closing?)

If necessary, can we discuss your tax return with the IRS? Yes No

Ownership Information

Business Owner

Name

Social Security #

Address

City State Zip

Accounting & Product/Service Information

Method of Accounting (check one)* Cash Accrual

*Most small businesses follow the cash method of accounting. If you are unsure, please select cash.

Type of Business Product / Service

Business Income

What were the business gross receipts or sales for the year? \$

What portion of receipts were reported on Form 1099-K? \$

What portion of gross sales listed above was refunded or returned? \$

Did you have any other income from this business activity not included in gross receipts above?

Yes No *If yes, please describe:*

Cost of Goods Sold (COGS)	
Businesses such as restaurants, retail sales and manufacturing generally must account for COGS. COGS includes all costs associated with manufacturing a product or purchasing a product for resale.	
Do you manufacture or produce a product for sale to customers? Yes No	
Do you operate a wholesale or retail business where you maintain an inventory of goods? Yes No	
Did you change your method of counting your inventory during the year? Yes No	
What was your opening cost of inventory on the first day of the year?	
What were your purchases of product (less cost of items withdrawn for personal use)?	
Cost of labor related to sale or production of goods held for sale	
Materials and supplies used in manufacture or sales production	
Others costs of goods not listed above (list these on separate detail worksheet)	
Closing inventory at end of year	

Business Expenses	\$	Business Expenses	\$
Advertising		Professional education & training	
Auto <i>(Complete auto worksheet)</i>		Rent (office, leasehold, storage) <i>(1099-MISC to unincorporated payees required)</i>	
Banks fees and charges		Rent or Lease <i>(Vehicles, machinery, equipment)</i>	
Cell phone <i>(Business use only. Must keep logs if using personal phone for business)</i>		Repairs and Maintenance	
Commissions and fees		Software	
Computers, equipment, furniture under \$2500 <i>(Complete the Asset Depreciation Worksheet shown on page 3 for items over \$2500)</i>		Supplies and small tools <i>(Do not include equipment purchases - see Depreciation Worksheet on page 3)</i>	
Contract Labor <i>(You must issue a 1099 NEC to any unincorporated entity to whom you paid \$600 or more for the year)</i>		Taxes - Local & business licenses	
		Taxes - Payroll	
Dues and Subscriptions		Taxes - Other <i>(business - not personal)</i>	
Employee benefit programs		Annual corporation fees	

Health insurance (PREMIUMS)		Telephone expense (Do not include cost of main home phone line)	
Health insurance (OUT OF POCKET COSTS) (This is not a SCH C deduction)			
Insurance (other than health)		Travel (Complete Travel Expense Worksheet on page 4)	
Internet service			
Interest - Mortgage (business - not home)		Utilities (Do not include home office)	
Interest - Business credit cards		Wages (W-2 issued to employees) Provide copies of W-3, Annual 940 & Quarterly 941 reports filed).	
Interest - Business loans/credit line			
Laundry/cleaning/janitorial			
Legal and professional services		Other Expenses	
Local (in-town) meals (Enter travel meal expense on page 4)			
Entertainment			
Merchant credit card fees			
Office expense (Do not include equipment purchases - see Depreciation Worksheet on page 3)			
Parking & tolls			
Postage & shipping			

Asset Depreciation Worksheet						
<ul style="list-style-type: none"> You must report the purchases and disposition of all assets you used in your business during the year For each asset bought or sold, provide the following information: 						
Assets Purchased During the Year				Assets Sold or Disposed of During the Year		
Description	Date Bought	Cost	Used/New?	Description	Disposit ion Date	Sales Price

Travel Expense Worksheet

Meals Per Diem (Important Facts)

- For each day you traveled away from home for business outside the metro area, you may claim the actual cost of your lodging and meals. For meals only, you may claim a daily per diem amount instead of the actual costs
- If you paid travel expenses for your employees outside the metro area, you may choose between claiming the actual cost of employee meals and lodging; or you can reimburse the employee a daily per diem amount for meals and lodging.
- The daily per diem amount varies depending on the city and country you and/or your employee traveled to. To calculate the per diem amount you can claim, provide details of each city that you or your employee traveled to for business during the tax year and the number of days in each city.
- You can alternate between actual expenses and the per diem method for each business trip; however you may not use both per diem and actual for the same business trip.
- You may reimburse a partial per diem if you traveled outside the metro area for less than a full day

City visited (for per diem)	# of days in city	City visited (for per diem)	# of days in city
Travel Expenses	\$	Travel Expenses	\$
Airfare		Lodging	
Bus, train, taxi		Parking & tolls	
Entertainment		Other travel (describe below)	\$
Meals - actual receipts			

Business Use of Automobile**Documentation must be kept to prove business use of vehicles**

If you used your automobile for active conduct of your business, you can claim expenses for business use of your vehicle. You must have proof of business use in the form of a mileage log or a written calendar unless you can show your vehicle was 100% business use

You may be eligible to claim a standard mileage rate or claim actual operational expenses for your vehicle. In either case, you must maintain written records to support your deduction.

Vehicle 1

Purchase Price of vehicle

Description (Model and Year) Date vehicle was first used in your business

For this tax year only, enter the number of miles your vehicle was used for:

Business Miles(not including commuting)**Commuting Miles****All other personal-use miles**

Interest paid on auto loan used to purchase this vehicle

Was the vehicle available for personal use? Yes No Is another personal-use auto available? Yes No

Do you have evidence to support this deduction? Yes No If "Yes", is the evidence written? Yes No

Vehicle 1 Expenses (Provide these expenses if you are NOT claiming the standard mileage rate)

Garage Rent

Repairs

Gas

Tires

Insurance

Tolls

Licenses

Registration Fees

Oil

Other Expenses (list):

Parking Fees

Lease Payments

Vehicle 2

Purchase Price of vehicle

Description (Model and Year) Date vehicle was first used in your business

For this tax year only, enter the number of miles your vehicle was used for:	
Business Miles <i>(not including commuting)</i>	
Commuting Miles	
All other personal-use miles	
Interest paid on auto loan used to purchase this vehicle	
Was the vehicle available for personal use? Yes No Is another personal-use auto available? Yes No	
Do you have evidence to support this deduction? Yes No If "Yes", is the evidence written? Yes No	

Vehicle 2 Expenses (Provide these expenses if you are NOT claiming the standard mileage rate)			
Garage Rent		Repairs	
Gas		Tires	
Insurance		Tolls	
Licenses		Registration Fees	
Oil		Other Expenses (list):	
Parking Fees			
Lease Payments			

Business Use of Home	
Did you use a portion of your home for regular and exclusive business use? Yes No	
If yes, please provide the following information:	
Total purchase price of home Cost of major improvements to home since you purchased it. Value of the land your home is built on	
Area of home used regularly and exclusively for business Square Feet Total area of home Square Feet	
Did you claim office-in-home expenses last year? Yes No	
Deductible mortgage interest paid (for entire home)	
Real estate taxes paid (for entire home)	

Insurance paid (for entire home)	
Rent paid (for entire home)	
Repairs and maintenance (for entire home)	
Repairs and maintenance allocable directly to business-use area of home only	
Utilities	
Other expense: Describe	

Date you first used your home for business *Month Year*

If you use your home for operating a child daycare business, enter the total hours during the year that children were using your home. *Hours for the year*

Did you live in the home all year? Yes No
If no, enter the date you lived in the home to

Notes/Comments

This is not an all inclusive organizer. If there are additional items that you believe to be pertinent to your specific tax situation or if you have additional comments about any figures in the organizer, please make note below.