

# 2022 Business Intake Form - Schedule C

Business Legal Name: *		Trade Name: (if different)				
Business Legal Name FEIN Number: *		Trade Name				
		Business Start Date: *				
					Ħ	
All numbers, no dashes.		Format: 08/20/198	7			
Business Address: *						
Address Line 1						
Address Line 2						
City	State		$\sim$	Zip Code		
Business Structure						
Sole Proprietorship						
Single Member LLC						
Owner						
Name: *						
First	MI	Last				

#### Address: \*

nail Address: *		
ocial Security Number: *	Phone Nu	ımber: *
City	State	✓ Zip Code
Address Line 2		
Address Line 1		

# Questionnaire

## Do you have any grants

🔾 Yes 🛛 No

In 2022, did you file any 1099-NEC's or 1099's for non-employee compensation? (If yes, please provide copies.) \*

◯ Yes ◯ No

Have you filed your Business License? (If yes, please provide copies.) \*

🔾 Yes 🗌 No

Have you completed your annual report? (If yes, please provide copies.) \*

🔾 Yes 🗌 No

In 2022, did you purchase any assets? (If yes, please provide copies that list the date of purchase, description, and cost.) \*

🔾 Yes 🛛 No

In 2022, did you sell any assets? (If yes, please provide copies that list the date of purchase, description, and cost.) \*

◯ Yes ◯ No

#### What were your business miles for the year? \*

Do you have a mileage log to support these miles? (If yes, please provide a copy.) \*

○ Yes ○ No

If none, please enter 0.

## Please provide your business banking information for State and F&E Returns.

Name of Bank:	Account Number:		
Routing Number:	Account Type:		
	Checkings Savings		
Any notes/comments you may have	, please add here.		

#### Please select all boxes to show you have acknowledged each one. \*

Payment must be rendered before the tax return is efiled.

I have had the opportunity to read the Privacy Policy.

- I grant permission for Bookkeeping Plus to communicate with me through any secure method if I am unavailable through my preferred method.
- All of the information I provided is true and accurate to the best of my knowledge. I have proof of my income and deductions.

1.

# Signature \*

				draw	type
×					

draw type

### Date:

Format: 08/20/1987

Submit