

# 2023 Business Expense Checklist

## Roslyn's Tax Solutions

### GENERAL INFORMATION:

- Business Name:  
\_\_\_\_\_
- Business Address:  
\_\_\_\_\_
- Business Phone Number:  
\_\_\_\_\_
- Business Main Product/Service:  
\_\_\_\_\_
- EIN (if applicable):  
\_\_\_\_\_
- Gross Income:  
\_\_\_\_\_
- Have you Ever Depreciated any tools, equipment etc:  
\_\_\_\_\_

### BUSINESS EXPENSES:

In order to Maximize your deductions, please complete fully to the best of your ability.

- |   |   |
|---|---|
| <input type="checkbox"/> Accounting/Bookkeeping:                | <input type="checkbox"/> Cost of Goods Sold:                            |
| <input type="checkbox"/> Advertising, Marketing and Promotions: | <input type="checkbox"/> Credit Card Acceptance Service Fees:           |
| <input type="checkbox"/> Alarm Service/Security Services:       | <input type="checkbox"/> Delivery Fees of Supplies:                     |
| <input type="checkbox"/> Association Dues:                      | <input type="checkbox"/> Dues - Professional Societies:                 |
| <input type="checkbox"/> Bad Debts:                             | <input type="checkbox"/> Education - Books:                             |
| <input type="checkbox"/> Bank Charges (From Business Account):  | <input type="checkbox"/> Education - Classes, Seminars and Conventions: |
| <input type="checkbox"/> Business Credit Card Annual Fee:       | <input type="checkbox"/> Education - Continuing Education Courses:      |
| <input type="checkbox"/> Business Travel:                       | <input type="checkbox"/> Education Mileage:                             |
| <input type="checkbox"/> Business Meals - With Clients:         | <input type="checkbox"/> Entertainment:                                 |
| <input type="checkbox"/> Business Meals:                        | <input type="checkbox"/> Equipment Rental:                              |
| <input type="checkbox"/> Carpet Cleaning/Cleaning Services:     | <input type="checkbox"/> Equipment Repairs:                             |
| <input type="checkbox"/> Commissions:                           |   |

- |   |   |
|---|---|
| <input type="checkbox"/> Gifts (\$25 Per Person):                             | <input type="checkbox"/> Professional Services (including Tax Prep Fees): |
| <input type="checkbox"/> Insurance:   | <input type="checkbox"/> Publications - Trade Books or Journals:          |
| <input type="checkbox"/> Interest on Business Debt:                           | <input type="checkbox"/> Referral Fees:                                   |
| <input type="checkbox"/> Interest on Business Mortgage:                       | <input type="checkbox"/> Rent:  |
| <input type="checkbox"/> Legal Fees:  | <input type="checkbox"/> Start Up Fees (if applicable):                   |
| <input type="checkbox"/> License:   | <input type="checkbox"/> Telephone - Answering Service:                   |
| <input type="checkbox"/> Maintenance and Maintenance Contracts:               | <input type="checkbox"/> Telephone - Cellular Phone Charges:              |
| <input type="checkbox"/> Medical - Employee Related:                          | <input type="checkbox"/> Telephone - Long Distance, other charges:        |
| <input type="checkbox"/> Medical - Owner Related:                             | <input type="checkbox"/> Tools:   |
| <input type="checkbox"/> Notary Fees:   | <input type="checkbox"/> Transportation Expenses:                         |
| <input type="checkbox"/> Office Supplies Stationary - Pens, Paper, Water etc: | <input type="checkbox"/> Travel away from home overnight:                 |
| <input type="checkbox"/> Other Supplies:                                      | <input type="checkbox"/> Travel - Other expenses:                         |
| <input type="checkbox"/> Payroll Paid to others (w2s):                        | <input type="checkbox"/> Travel # of Miles:                               |
| <input type="checkbox"/> Payroll Taxes:                                       | <input type="checkbox"/> Uniforms - Clothing, Shirts, Shoes, Repairs etc: |
| <input type="checkbox"/> Pest Control:  | <input type="checkbox"/> Union Dues:                                      |
| <input type="checkbox"/> Postage:   |   |
| <input type="checkbox"/> Printing:  |   |

**VEHICLE EXPENSES:**

- |  |  |
|--|--|
| <input type="checkbox"/> Total Miles Driven During Entire Year - Personal and Business Combined: | <input type="checkbox"/> Date Placed in Service:               |
| <input type="checkbox"/> Total Miles Driven for Business ONLY:                                   | <input type="checkbox"/> Total Cost of Gas:                    |
| <input type="checkbox"/> Total Miles For Personal Use:   | <input type="checkbox"/> Insurance:                            |
| <input type="checkbox"/> DMV Fees:   | <input type="checkbox"/> Any Repairs:                          |
| <input type="checkbox"/> Interest Paid on Loan for Vehicle:                                      | <input type="checkbox"/> Maintenance - Oil Changes, Tires etc: |
| <input type="checkbox"/> Type of Vehicle - Make, Model, and Year:                                | <input type="checkbox"/> Other Expenses:                       |

**HOME OFFICE EXPENSES:**

- Date Home Office was placed in Service:
- Size of Home Office in SQ FT:
- Size of Entire Home in SQ FT:
- For NON-OWNERS please enter in the entire amount of Rent for 2023:
- Home Insurance Paid:
- Annual Utilities Paid:
- HOA Dues Paid:

**CHILD CARE PROVIDERS ONLY:**

- Days in Business During the Year: \_\_\_\_\_ /365 Days
- Hours Open for Business Including Prep & Clean-Up \_\_\_\_\_
- Toys, Supplies and Equipment Purchased: \_\_\_\_\_
- Extra Homeowners/Auto Insurance: \_\_\_\_\_
- Food - Using the Actual Expense Method and Not the Per Diem Method: \_\_\_\_\_

**FOOD USING THE IRS TIER 1 PER DIEM:**  
(Must keep a Log of Meals Served)

MEAL	Number of Meals Served During the Year	Per Diem Rate	Total
Breakfast		\$1.66	
Snack 1		\$0.97	
Lunch		\$3.04	
Snack 2		\$0.97	
Dinner		\$3.04	
Snack 3		\$0.97	
<b>TOTAL:</b>			