2024 Income and Expense Organizer

(Self-Employed and Single Member LLCs only)

Business Name:			Tax ID / EIN#	
Owner's Name:				
Business Address:				
Type of Business:			Date Business Established:	
ANNUAL INCOME			T	
INCOME ON 1099-MISC(s)				
INCOME ON 1099-K (from credit card processors)				
OTHER INCOME (not on 1099s)				
TOTAL GROSS INCOME:				
Did you make payments over \$600 to any person or single member LLC?			Yes □ No □	
Did you issue 1099-Misc Forms to such? Forms are due 01/31/2025.			Yes □ No □	
Do you need us to prepare Forms 1099-Misc? (Additional fees will apply. Yes No				
Provide name, SSN, address and amount for	or each person)			
ANNUAL EXPENSES (fill in only what	annlies to vour husiness —	calculate ner	vear)	
Advertising	applies to your business	Shipping/Postage		
Bank Service Fees (bus. account)		Supplies		
Commissions & Fees Paid to Others		Sales Tax Paid		
		(provide sales tax returns)		
Contract Labor		Property taxes (for bus. property)		
Dues and Subscriptions		Licenses		
Health Insurance		Telephone/Internet Expenses		
Business Insurance		Travel		
Legal and Professional Fees		Meals (with employees or bus. clients)		
Office Expenses		Utilities (bus. space)		
Pension and profit sharing plans (SEP) /		Other:		
Provide contribution statement Rent (if you rent separate bus. space)		Other:		
Repairs/Maintenance (bus. space)		Other:		
ANNUAL BUSINESS VEHICLE EXPENSES				
Date Acquired	Vehicle Year, Make and	Model		
Was vehicle?	Purchase Price	Annual Leas	se Payments	Lease Downpayment
Purchased/Financed Leased Leased	\$	\$		\$
Annual Miles Driven for Business Purpose		Annual Miles Driven for All Purposes		
Gas	Repairs	Insurance		Parking/Tolls
\$	\$	\$		\$
ANNUAL HOME OFFICE EXPENSES				
Space Dedicated to Business (Sq Ft)		Total Home Space (Sq Ft)		
Rent or Mortgage Interest	Utilities	Insurance		Repairs
\$	\$	\$ \$		
Other:	<u> </u>	Other:		