

Business Information

Owner's Name	Business Name/Type of Business	EIN/SSN	Tax Year
Email Address	Phone Number	Business Start Date	Claimed Last Year?
Business Address	City	State	ZIP Code

Receipts

Net Sales + Tax Collected (in-person & online): _____

Net Sales to Associates Including Tax: _____

Returns & Uncollected Sales in "Net Sales": _____

Commissions & Bonuses Received: _____

Other Income (describe): _____

Operating Expenses

Advertising & Marketing: _____

Bank & Credit Card Processing Fees: _____

Wages/Contract Labor Paid Out: _____

Business Insurance: _____

Credit Card/Loan Interest (business only): _____

Tax Preparation Fees: _____

Professional Services: _____

Cost of Goods Sold

Beginning Inventory (Jan 1st) (at wholesale): _____

Purchases of Product for Resale: _____

Personal Use of Sellable Product (at wholesale): _____

Sellable Product Given Away (at wholesale): _____

Cost of Labor to Produce Resale Products: _____

Supplies Bought to Produce Resale Products: _____

Ending Inventory (Dec 31st) (at wholesale): _____

Office Supplies (excluding furniture/equipment): _____

Rent (meeting rooms/booths/storage): _____

Equipment - Rentals: _____ Repairs: _____

Office (out-of-home) Utilities: _____

Travel - Transportation: _____ Lodging: _____

Home Office Data

Home office space must be used exclusively for business

Office/Storage Square Feet	Number of Entire Rooms Used
Entire Home Square Feet (minus garage)	Total Number of Rooms in Home

Date Home Was Rented/Purchased: _____

Purchase Price/Closing/Pre-Bus. Improvements: _____

Estimated Land Value (county tax appraisal): _____

Business Meals for Others: _____

Business Taxes & Licenses: _____

Out of Town Business Meals: _____

Number of Nights out of Town: _____

Business Use of Cell Phone: _____

2nd Business Phone Line + Long Distance: _____

Seminars & Education: _____

Uniform & Cleanings/Alterations: _____

Self-Employed Health Insurance Premiums: _____

Sole Proprietorship Data

Home Office Expenses

Real Estate Taxes (Form 1098): _____

Mortgage Interest (Form 1098): _____

Homeowner's/Renter's Insurance (Form 1098): _____

Rent Paid During Months in Business: _____

Lawn & Repairs (not improvements): _____

Security, Pest, Housekeeper, & HOA Fees: _____

Gas: _____ Water: _____ Electric: _____

Operating Expenses

Packaging Materials: _____

Postage & Freight: _____

Business Gifts (\$25/person max): _____

Internet Expenses: _____

Dues & Publications: _____

Commissions Paid Out: _____

Other (_____): _____

Car Data

Mark data with asterisk() if leased*

	Car 1:	Car 2:
Year, Make, & Model:	_____	_____
Date Purchased/Leased*:	_____	_____
Purchase/Lease Price + Tax:	_____	_____
Business Miles Driven:	_____	_____
Commuting Miles Driven:	_____	_____
Total Miles Driven (calendar yr):	_____	_____

Car Expenses

	Car 1:	Car 2:
Gas:	_____	_____
Repairs & Maintenance:	_____	_____
Insurance, Tags, & Inspection:	_____	_____
Loan Interest/Lease* Payments:	_____	_____
Parking & Tolls:	_____	_____
Is there more than 1 car in your home?	_____	_____



Depreciable Assets

In this section, list all the business assets you purchased/invested in that depreciate over time. This includes home office improvements, equipment upgrades, phones, computers, tablets, cameras, calculators, software, scanners, copiers, fax machines, answering machines, desks, chairs, lamps, file cabinets, bookshelves, tables, other furniture, TVs, CD/DVD/Blu-Ray players, stereos, appliances, power tools/equipment, and other depreciable assets. **Only list new assets/improvements that you haven't listed to us in previous years.**

[illegible]