CPA Tax Advisors Self-Employed Business Income and Expense

If you are self-employed, a contractor, received a 1099-MISC, or operate home based business, even part-time, IRS considers you to be in business for yourself and subjects your earnings to self-employment tax. If your business is incorporated or a partnership, fill out the additional worksheet for corporations and partnerships.

If you have more than one business – make copies of these pages and complete sections 1 through 6 separately for each business.

1. Business Information	n
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	business ow					
		duct or Service				
Business						
Business	Address					
Employe	r ID #			Date Busine	ess Began	/ /
		ousiness work in t peration at the en		east 2 hours pe	er week? YES YES YES	NO NO
Accountir	ng Method	Cash	Accrual			
Additiona	ıl Workshe	et for Corporat	ions & Partne	rships		
statement a	nd balance s during the ta	heet reports from	your corporate	accounting so	rinted copy of your end ftware. We also need an asset report, please	
Federal E	IN	Sta	ate EIN		State Sales Tax #	
S-Corp	C-Corp	Partnership				
Date of In	corporation		Date of S-C	orp election		
If LLC, How	is your LLC r	ecognized for tax	purposes?			
S-Corp	C-Corp	Partnership	D			
How many	shareholders	own any part of	this company? _			
List each sh	areholder an	d the number of s	shares owned alo	ong with addr	ess and SS# below:	
What was t	he balance o	f your company b	ank account on	December 31s	t?	
Quarterly	Estimated	Income Tax Pa	yments			
Quarter	Date	Amount				
1		\$				
2		\$				
3		\$				
4		\$				

Tax Deposited with Extension Form 7004 \$___

2. Business Income

Do not include income reported to you on a W-2 in this section.

Receipts	Amount
Gross Receipts & Sales not reported to you on a 1099	\$
Gross Receipts & Sales reported to you on a 1099	\$
Returns & Allowances (Refunds to customers)	\$

3. Business Inventory

Cost of Goods Sold	Amount
Beginning Inventory	\$
Purchases	\$
Items Removed from Inventory for Personal Use	\$
Amount you paid for Contract Labor (Not Employee Wages)	\$
Materials & Supplies that went into your finished product	\$
Freight & Shipping paid to receive inventory	\$
Ending Inventory (your cost of inventory on hand on 12/31)	\$

4. Business Expenses

Expense	Amount
Advertising	
Commissions that you paid to others	
Contract labor (total from form 1096)	
Medical Expenses reimbursed to	
Other Employee Benefit Programs	
Insurance (business liability)	
Interest (except home or auto)	
Legal/Professional	
Office expense	
Employee Pension Plans	
Rent of Vehicles or Equipment	
Rent of property (except home)	
Repairs/Maintenance (except home, car)	
Supplies	
Business Licenses and Fees	
Real Estate Tax (other than home)	
Sales Tax	
Payroll Tax (Employer's share only)	
Travel Expense	
Meals & Entertainment	
Utilities (other than home)	
Wages	
Workers Comp Insurance	
Management/Business Coaching	
Franchise Fees	
Security	
Storage	
Training and Education	

Accounting Appraisal Fees Bad debts from Sales (Accrual only) Business Cards Bank Charges Cell Phone Credit & Collection Courier Service Computer Service and Supplies Delivery & Freight Dues & Subscriptions Escrow/Loan Fees Gifts (limited to \$25 per individual) Flowers/Cards Internet Access Janitorial and Cleaning Keys/Locksmiths Laundry & Dry Cleaning Meeting Expenses and Fees Outside Services Permits & Fees Periodicals and Publications Photo Processing Postage and Shipping Printing Referral Fees Seminars Books and Publications Telephone (Business Line) Uniforms	unt
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Seminars Books and Publications Telephone (Business Line)	
Books and Publications Telephone (Business Line)	
Telephone (Business Line)	
Uniforms	
Omiomis	
Voicemail/Pager	
Web Hosting	

Phone: (855) 740-1040 **Fax:** (855) 247-3803

5. New Business Assets purchased or placed into service for business use during this tax year.

Description of Asset	Date Purchased	Cost	% Business Use
	/ /	\$	
	/ /	\$	
	/ /	\$	
	/ /	\$	
	/ /	\$	
	/ /	\$	
	/ /	\$	
	/ /	\$	
	/ /	\$	
	/ /	\$	

6. Business use of Your Home

Did you use an area in your home as an office for the business listed in Question 1 above? Was this area used regularly and exclusively for business?	YES YES	NO NO	
If you answered yes to the questions above, or if you stored inventory, tools or product sample complete the following table.	s in your h	iouse	

Refer to the deduction finder at the end of this organizer for an explanation of deductible home office expenses.

Enter the total square foot they are used for business.		ur basement, attic, and garage only	ı if
Enter the square footage of office.	f the room or area that you us	se regularly and exclusively as an	
	f any room other than your of Note: This room can be used o	ffice in which you store inventory, only occasionally for personal	
Enter the square footage of sit in any other rooms not		ntory or product samples physicall	у
Was your home used for a	daycare business? YES	NO	
If yes:			
Number of Hours per day	Number of Days per week	Number of Weeks this tax year	

Business use of Home Expenses for Homeowners	Amount
Cost of home (purchase price, including land, plus improvements)	\$
Value of the lot on day you purchased the house	\$
Mortgage Interest you paid	\$
Real estate tax	\$
Homeowner's insurance	\$
Repairs and Maintenance	\$
Annual cost of utilities: (Electricity, Gas, Water, etc. NOT TELEPHONE)	\$
Mortgage insurance	\$
Other expenses (security, HOA dues, etc.)	\$

Business use of Home Expenses for Renters	Amount
Repairs and Maintenance	\$
Annual cost of utilities: (Electricity, Gas, Water, etc. NOT TELEPHONE)	\$
Annual Rent	\$

7. Auto Expenses

If you used an auto for more than one business activity, enter total business miles for your main business first and then write down how many miles were driven for each business activity in the rows beneath. If you bought, traded in or sold a vehicle used for business this year send copies of the sale and purchase contracts. If leasing, give purchase price.

How many	/ autos	do you own?	
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Auto information	Auto # i	Auto #2	Auto #5	Auto #4	Auto #3
Primary business or job in					
which auto is used					
Do you own the vehicle?	YES□ NO□	YES□ NO□	YES□ NO□	YES□ NO□	YES □ NO□
Do you have a mileage log?	YES□ NO□	YES□ NO□	YES□ NO□	YES□ NO□	YES □ NO□
Make, Model and Year					
Purchase price (Including leased vehicles)					
Date Purchased					
Date first used for business					
If leased, annual lease payment					
Period of lease (in months)					
Date lease began					
Total miles driven during					
the year for each car					
Self-Employed Business miles driven					
Employee miles driven for employer					
Total miles driven between two similar jobs					
Charitable miles driven during the year					
Real Estate rental miles driven					
Medical miles driven during the year					
Miles driven for another business if more than one					
Expenses of operation:					
Gas					
Oil					
Repairs and Maintenance					
Insurance					
Property Tax					
License/Registration					
Parking/Tolls					
Interest paid on auto loan	\$	\$	\$	\$	\$

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