

Use this form to help you organize your business-related tax info. **All income and expenses must be reported, including cash and bartering.**

Is this the first year filing a Schedule C for this business? (Circle one.) Yes No

General Business Information:

Business Income:

Business name: _____	Gross receipts	\$
Business Fed. EIN #: ____ - _____	Other income	\$
Business owner name: _____	Inventory at beginning of year	\$
Business phone: (____) ____ - ____	Inventory at end of year	\$
Address: _____	Inventory related expenses	\$
City: _____ ST: ____ Zip: _____	Inventory related wages	\$
Accounting method: (Circle one.) Cash Accrual Other method (specify) _____	Equipment purchased this year? Date: ____ / ____ / ____	
	Type: _____ Cost:	\$

General Expenses:

Vehicle Expenses (*required):

Advertising	\$	Machinery & equipment	\$	*Description of vehicle: _____	
Commissions	\$	Maintenance	\$	*Cost of vehicle	\$
Employee benefits program	\$	Supplies	\$	*Data placed in service: ____ / ____ / ____	
Insurance (except health)	\$	Taxes – real estate	\$	*Have mileage log: Yes No	
Mortgage interest	\$	Taxes – other	\$	*Total miles driven: _____	
Other interest (except vehicle)	\$	Travel	\$	*Business miles: _____	
Legal & professional	\$	Total meals & entertainment	\$	Commuting miles: _____	
Office expenses	\$	Sub-contract labor	\$	Parking fees & tolls	\$
Phone	\$	Wages	\$	Car loan interest	\$
Pension & profit sharing plans	\$	Other expenses	\$	Total expenses	\$
Rent	\$	Materials	\$		

Do you have a home office or storage at home for your business? (Circle one.) Yes No

Is the office area used exclusively for business? (Circle one.) Yes No

Is this area necessary to operate the business, and/or to meet with clients? (Circle one.) Yes No

Based on tax law, you are required to claim all expenses for your self-employment income. If you have no expenses listed, explain why:

Note: Qualified Business Deduction (QBI or 199A) is determined based on the net profit from your business(es).

We prepare your return from the information you furnished us, without verification. Keep all records in accordance with IRS requirements. Upon examination of the returns by taxing authorities, request may be made for underlying data.

I certify that all the information provided is true and accurate to the best of my knowledge.

Signature: _____ Date: _____

Spouse Signature: _____ Date: _____