

Client Name: _____ Type of Business: _____

Business Name: _____ Year of Expenses: _____

Business Address: _____

Business Worksheet

1099 Forms:

Did you pay \$600 or more to a service provider, contractor, or for rent?

Yes No

Did you send them a Form 1099-NEC or 1099-MISC? **If yes**, provide copies.....

If not, do you need us to send the Form(s) 1099-NEC or 1099-MISC?

Sales & Income:

Total sales or income collected (Include all Forms 1099-NEC, 1099-MISC & 1099-K)

\$ _____

Cash Refunds & Discounts Paid to Customers.....

\$ _____

Cost of Goods Sold:

Beginning Inventory (at your cost).....

\$ _____

Purchases.....

\$ _____

Ending Inventory (at your cost).....

\$ _____

Expenses:

Advertising.....

\$ _____

Commissions paid to other people (send them a Form 1099-NEC if \$600 or more)

\$ _____

Subcontractors (send them a Form 1099-NEC or 1099-MISC if \$600 or more)

\$ _____

Insurance (Business, Liability, E & O, etc... not personal health or accident insurance).....

\$ _____

Interest paid on Business Loans (must be 100% for business or business credit cards).....

\$ _____

Legal/Professional fees (include accounting and tax prep)

\$ _____

Office Supplies.....

\$ _____

Rent for Separate Office or Storage space (send them a Form 1099-MISC if \$600 or more).....

\$ _____

Repairs and Maintenance for Equipment.....

\$ _____

Supplies.....

\$ _____

Payroll Taxes (employer portion of FICA, FUTA, & SUI)

\$ _____

Workers' Compensation (BWC)

\$ _____

Licenses and Permits.....

\$ _____

Travel & Lodging (excluding meals).....

\$ _____

Meals (**Do Not include Entertainment**)

\$ _____

Utilities for separate Offices or Storage (must be a separate structure from your home).....

\$ _____

Wages (include the employees' withholding taxes)

\$ _____

Bank Charges (for business only checking account).....

\$ _____

Cell Phone.....Total Expense \$ _____ x Business Use % _____ =

\$ _____

Second phone at Home or Office for Business and/or Fax

\$ _____

Postage & Delivery.....

\$ _____

Dues & Subscriptions.....

\$ _____

Gifts and Promotional Items

\$ _____

Internet Service, excluding phone and cable...Total Expense \$ _____ x Business Use % _____ =

\$ _____

- (Not already claimed on the Home Office Worksheet)

Merchant Fees/Credit card processing fees.....

\$ _____

Pension & Profit-Sharing Plan, Contributions for EE.....

\$ _____

Parking & Tolls.....

\$ _____

Outside Services

\$ _____

Uniforms (do not include street clothes)

\$ _____

Continuing Education.....

\$ _____

Amounts paid for **Health** Insurance set up under your business (not Business or Liability)

\$ _____

Auto expenses? If yes, fill out an Auto Worksheet for each vehicle used:

Auto Expense Worksheet - [View](#)

Home office expenses? If yes, fill out a Home Office Worksheet for each office:

Home Office Worksheet - [View](#)

Items not listed above (*Description, date purchased and cost*):

Equipment and Computers > \$2500 (*Provide a fully detailed description, purchase date and purchase amount for each asset*)

I certify that the above information is true and correct, **and** I have the documentation supporting my responses.

Signature _____

Date _____