

Client Name: _____ Type of Business: _____

Business Name: _____ Year of Expenses: _____

Business Address: _____

Business Worksheet

	Yes	No
1099 Forms:		
Did you pay \$600 or more to a service provider, contractor, or for rent?	<input type="checkbox"/>	<input type="checkbox"/>
Did you send them a Form 1099-NEC or 1099-MISC? If yes , provide copies.....	<input type="checkbox"/>	<input type="checkbox"/>
If not , do you need us to send the Form(s) 1099-NEC or 1099-MISC?	<input type="checkbox"/>	<input type="checkbox"/>

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:	<i>Auto Expense Worksheet - View</i>
Home office expenses? If yes, fill out a Home Office Worksheet for each office:	<i>Home Office Worksheet - View</i>

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 _____