

Officer's Name & Title _____ Corporation's Name _____ EIN # _____ Tax Year _____
Bus. Address _____ City, St, Zip _____ Ph. # _____ Email _____

* **Report all cap. contribs. made by, & distribs. to, any s/holders, with names, dates, & amts. for each. Also, cash bal. a/o 12/31 \$ _____.**

Date of: Incorporation _____; S Corporation election _____
RECEIPTS (total \$s collected net of discounts) (@ RETAIL)
Net Sales Including Tax (add up sales receipts) \$ _____
Net Sales to Associates Including Tax \$ _____
Returns & Uncollected Sales Included in Net Sales \$ _____
Commissions/Bonuses **Received** (1099-MISC) \$ _____
Other Income (ex., interest)(describe) \$ _____

* **Personal use, gifts, & inventory valued @ wholesale (cost)**
COST OF GOODS (RE)SOLD (your cost) (@ WHOLESALE)
Beginning Inventory on 1/1/____ (if 1st yr., = "0") \$ _____
Purchases of Product for Resale (invoices + tax) \$ _____
Personal Use of Saleable Product (@ wholesale) \$ _____
Saleable Product Given Away (@ wholesale) \$ _____
Cost of Labor to Produce Products for Resale \$ _____
Materials & Supplies Bought to Produce Products \$ _____
Ending Inventory on 12/31/____ (@ wholesale) \$ _____

* The space for office in home must be used **exclusively** for bus.

OFFICE IN HOME DATA (if 2 homes used, separate by a ";")
Office & Storage: Sq. Ft. | & # of **entire** rooms used _____ | _____
Entire Home: Sq. Ft. (excl. garage) | & # of rooms _____ | _____
Date Apartment/House Rented or Purchased _____
Purch. Price + **Closing + Improve. Prior to Bus.** \$ _____
Est. Value of Land **Only** (county tax appraisal) \$ _____

OFFICE IN HOME DEDUCTIONS (for 2, separate by a ";")
Mortgage Int. (**only**) (Form 1098/coupon book) \$ _____
Real Estate Taxes (Form 1098/coup. book/checks) \$ _____
Homeowner/Hazard/Renter's Insur. (1098/checks) \$ _____
Rent (NOT mortgage) Payments (while in bus.) \$ _____
Repairs (**put improve. on Depr. W/s only**), Lawn \$ _____
Utilities: Gas \$ _____ Water \$ _____ Electric \$ _____
Security, Pest, Housekeeper, & Association Fees \$ _____

* **IRS REQUIRES THAT YOU KEEP A MILEAGE LOG ***

* = Circle "Leased" if car was leased, and... **CAR DATA FOR EACH CAR USED IN BUS. ...draw an arrow to which car was leased. ***

Year, Make and Model _____;
Date **Purchased/Leased*** _____;
Purchase/Lease* Price Incl. Tax \$ _____; \$ _____

OPERATING EXPENSES (some allocated per business usage*)
Advertising & Sales Aids (business cards/flyers) \$ _____
Bank & Credit Card Processing Fees **for Business** \$ _____
Commissions **Paid Out** by You to Others \$ _____
Wages Pd. to Self/Employees (give names & amt.) \$ _____
Compens. Pd. to Ind. Contractors (names & amt.) \$ _____
Health Insurance Premiums Paid \$ _____
Bus. Insurance (property, liability, work. comp.) \$ _____
Loan/Credit Card Int. (**Business Portion Only**) \$ _____
Legal/Tax/Professional Fees (tax preparation) \$ _____
Off. Supp. (**furn./equip. on Depr. W/sheet. only**) \$ _____
Rent: Office & Storage \$ _____; Car/Equip. \$ _____
Repairs & Maintenance to Office Bldg/Equipment \$ _____
Bus. Taxes (sales, payroll, unemp.) & Licenses \$ _____
Travel: **Transportation** \$ _____; **Lodging** \$ _____
Business Meals (meal bought for other person) \$ _____
Out of Town Meals for Bus. \$ _____; # of nights out of town _____
Bus. Gifts (\$25 ea. max.) \$ _____; Entertain. \$ _____
2nd, Separate, Bus. Phone Line + Bus. Long Dist. \$ _____
Cell Ph., Beeper, Call Notes (**business use only**)* \$ _____
Utilities (**on office/storage outside of your home**) \$ _____
Business Publications & Bus. Association Dues \$ _____
Business Postage (stamps) & Freight (invoices) \$ _____
Bus. Seminars + Motivation Books/CDs/DVDs \$ _____
Bus. Uniforms + Cleaning/Alterations of Uniforms \$ _____
Other (ex., tools; please describe) \$ _____

TOTAL (full year) CAR EXPENSES **Car #1** **Car #2**
Gas, Repairs, Parts, Maint., & Car Wash \$ _____; \$ _____
Insurance, Tags, Inspec., OnStar, & AAA \$ _____; \$ _____
Car Loan Int. (only)/Lease* Payments \$ _____; \$ _____
Parking & Tolls \$ _____; Inclusion Amt. (I'll do) \$ _____; \$ _____

** **I ATTEST TO THESE MILEAGE FIGURES (initial) **** _____

Miles Driven for **Business Purposes Only** _____;
Total Miles the Vehicle Was Driven (**full yr.**) _____;
R. T. Job Commute _____; Is there more than 1 car in your home? _____

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Personal Tax Planning

DO NOT add the purchase price of these items in with "Office Supplies" or home office "Repairs".

FOR REPEAT CLIENTS, REPORT JUST THE CHANGES TO WHAT WE HAVE ON FILE FROM LAST YEAR.

DEPRECIATION WORKSHEET FOR (name of bus./min./rental activity) _____

**** Complete the first four columns, even if purchased prior to going into business or ministry. Include home improvements if you have a home office, equipment upgrades, software, desk, chair, lamp, file cabinet, bookshelf, table, computer, Ipad, Ipod, calculator, scanner, copier, fax machine, TV, CD/DVD player, stereo, cassette player, telephones, cell phones, answering machine, camera, PDA, power tools/equipment, appliances, and other capital assets.**

Description of Capital Asset (Property/Furniture/Equipment)	Month and Year Purchased	Your Cost or Basis in the Asset	Business or Invest- ment Use %	Depreciation Taken in Prior Years		
				Section 179	20____ Tax Yr.	20____ Tax Yr.
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