



## Business Worksheet – Tax Year 2023

Name of Business / DBA / LLC / CORP: \_\_\_\_\_

Business Address: Street: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Employer Identification Number (EIN): \_\_\_\_\_

Principal Business Type or Profession: \_\_\_\_\_

Business Operated by: ☐ Taxpayer ☐ Spouse ☐ Both

Tax Entity Type: ☐ C Corp ☐ S Corp ☐ LLC Single ☐ LLP

Any payments over \$600 to Subcontractors  
which require you to file Form 1099? ☐ YES ☐ NO

If YES, did you or will you file all required  
forms 1099/1096? ☐ YES ☐ NO

**BUSINESS INCOME** (without sales tax): \$ \_\_\_\_\_

**OTHER INCOME** (fuel refunds, etc.): \$ \_\_\_\_\_

**COST of GOODS SOLD** (items resold or cost  
of materials used in your service/product): \$ \_\_\_\_\_

Profit and Loss/Financials will be provided by:

- ☐ **Business Worksheet**  
(Complete this worksheet)
- ☐ **QuickBooks / Accounting Reports**  
(Fully Reconciled – only page 1 of this worksheet is required.)
- ☐ **QuickBooks Online Access**  
(Fully Reconciled – only page 1 of this worksheet is required.)

### Submission of Income and Expenses

I agree that the amounts provided in my Business Worksheet or other accepted submissions are the final financial records that will be used to prepare my tax return.

Submission of self-made spread sheets will NOT be used and TAI will not compare numbers on personal forms.

The financials provided are not estimates and are a FINAL reflection of my Profit and Loss records.

**I have read and agree to the terms above.**

☐ I AGREE

| <b>EXPENSES:</b>                                                                  | <b>\$ AMOUNT (Yearly)</b> |
|-----------------------------------------------------------------------------------|---------------------------|
| Advertising (websites, ads, promotional items)                                    |                           |
| Commissions                                                                       |                           |
| Subcontract / Independent Labor                                                   |                           |
| Employee Benefits (Pension match, life insurance)                                 |                           |
| Employee Health Insurance                                                         |                           |
| Self Employed Health Insurance (for OWNER only)                                   |                           |
| Business Insurance                                                                |                           |
| Liability Insurance                                                               |                           |
| Workers Compensation Insurance                                                    |                           |
| Mortgage Interest (Business only – NOT your home)                                 |                           |
| Business Loans and Credit Card Interest                                           |                           |
| Legal and Professional Fees                                                       |                           |
| Office Supplies (paper, software, pens, stamps)                                   |                           |
| General Supplies (equipment, misc. items)                                         |                           |
| Machine and Equipment Rental                                                      |                           |
| Property / Office Rental                                                          |                           |
| Repair and Maintenance on Building, Land                                          |                           |
| Repair and Maintenance on Equipment                                               |                           |
| Business Property Tax                                                             |                           |
| Excise or Highway Tax                                                             |                           |
| Licenses, Permits, and Fees (DBA fees, permits)                                   |                           |
| Travel (hotel, airfare, rental car)                                               |                           |
| Client Business Meals (NOT personal entertainment)                                |                           |
| Employee Meals / Staff Parties                                                    |                           |
| Utilities (propane, electric, heat/oil, village water)                            |                           |
| GROSS Wages – Employee (please submit W-3 and Year End payroll summary for taxes) |                           |
| Bank/Credit Card Fees and Service Charges                                         |                           |
| Business Gifts (items purchased for customers - \$25 limit / per gift)            |                           |
| Dues and Subscriptions (magazines, memberships, online, QuickBooks)               |                           |
| Internet                                                                          |                           |
| Computer Services                                                                 |                           |
| Parking and Tolls                                                                 |                           |
| Shipping and Freight Charges                                                      |                           |
| Continuing Education                                                              |                           |
| Telephone / Cell Phone Service                                                    |                           |
| Security                                                                          |                           |
| Small Tools                                                                       |                           |
| Uniforms / Laundry Service                                                        |                           |
| Waste Removal                                                                     |                           |

**OTHER EXPENSES ... (Please list any additional specific items below)**

**\$ AMOUNT (Yearly)**

|  |  |
|--|--|
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |

**FIXED ASSETS:**

List any purchases of furniture or equipment over \$3,000. (***Submit sale invoices for large purchases over \$3,000 only.***)

[illegible]

List any assets that you sold, traded, or disposed of this tax year:

[illegible]

**OFFICE IN HOME:** *This applies only to fully dedicated office space.*

|                                                                                        |  |
|----------------------------------------------------------------------------------------|--|
| Total square footage of finished living space (not attic or unfinished basement)       |  |
| Square Footage dedicated for business use only                                         |  |
| <b>Expenses: DO NOT</b> include or duplicate amounts from the above business expenses. |  |
| Mortgage Interest only (not entire payment) or Rent payment                            |  |
| Real Estate Taxes (school, county/town/village)                                        |  |
| Homeowners / Renters Insurance                                                         |  |
| Repairs and Maintenance                                                                |  |
| Utilities                                                                              |  |
| Water & Sewer                                                                          |  |

**Other Tax / Additional Business Information:**

| Auto and Truck Expense Worksheet                                                          | VEHICLE 1                                                | VEHICLE 2                                                | VEHICLE 3                                                | VEHICLE 4                                                |
|-------------------------------------------------------------------------------------------|----------------------------------------------------------|----------------------------------------------------------|----------------------------------------------------------|----------------------------------------------------------|
| Make and Model                                                                            |                                                          |                                                          |                                                          |                                                          |
| Year of Vehicle                                                                           |                                                          |                                                          |                                                          |                                                          |
| Date Purchased or Acquired                                                                |                                                          |                                                          |                                                          |                                                          |
| Date placed in business service                                                           |                                                          |                                                          |                                                          |                                                          |
| Type of Vehicle ( <i>Auto or Truck</i> )                                                  |                                                          |                                                          |                                                          |                                                          |
| Total Miles Driven ( <i>Sum equals 3 lines below</i> )                                    |                                                          |                                                          |                                                          |                                                          |
| Business Miles                                                                            |                                                          |                                                          |                                                          |                                                          |
| Commuting Miles                                                                           |                                                          |                                                          |                                                          |                                                          |
| Personal Miles                                                                            |                                                          |                                                          |                                                          |                                                          |
| Did you have another vehicle for personal use?                                            | <input type="checkbox"/> YES <input type="checkbox"/> NO | <input type="checkbox"/> YES <input type="checkbox"/> NO | <input type="checkbox"/> YES <input type="checkbox"/> NO | <input type="checkbox"/> YES <input type="checkbox"/> NO |
| Is the vehicle used primarily by owner or related person?                                 | <input type="checkbox"/> YES <input type="checkbox"/> NO | <input type="checkbox"/> YES <input type="checkbox"/> NO | <input type="checkbox"/> YES <input type="checkbox"/> NO | <input type="checkbox"/> YES <input type="checkbox"/> NO |
| Do you have written evidence of business use claimed ( <i>i.e. mileage log, report</i> )? | <input type="checkbox"/> YES <input type="checkbox"/> NO | <input type="checkbox"/> YES <input type="checkbox"/> NO | <input type="checkbox"/> YES <input type="checkbox"/> NO | <input type="checkbox"/> YES <input type="checkbox"/> NO |
| Is the vehicle leased?                                                                    | <input type="checkbox"/> YES <input type="checkbox"/> NO | <input type="checkbox"/> YES <input type="checkbox"/> NO | <input type="checkbox"/> YES <input type="checkbox"/> NO | <input type="checkbox"/> YES <input type="checkbox"/> NO |
| <b>Actual Expenses (If using this method, typical of heavy or costly vehicles):</b>       |                                                          |                                                          |                                                          |                                                          |
| Cost of Vehicle ( <i>including special installed equipment - i.e. Toolbox, Plow</i> )     |                                                          |                                                          |                                                          |                                                          |
| Gasoline                                                                                  |                                                          |                                                          |                                                          |                                                          |
| Oil, Maintenance and Repairs                                                              |                                                          |                                                          |                                                          |                                                          |
| Insurance                                                                                 |                                                          |                                                          |                                                          |                                                          |
| Registration and License                                                                  |                                                          |                                                          |                                                          |                                                          |
| Lease Payments                                                                            |                                                          |                                                          |                                                          |                                                          |
| Interest <b>ONLY</b> portion of Vehicle loan payments ( <i>NOT full monthly payment</i> ) |                                                          |                                                          |                                                          |                                                          |
| Did you sell or trade in a previously used business vehicle?                              | <input type="checkbox"/> YES <input type="checkbox"/> NO | <input type="checkbox"/> YES <input type="checkbox"/> NO | <input type="checkbox"/> YES <input type="checkbox"/> NO | <input type="checkbox"/> YES <input type="checkbox"/> NO |
| *If YES, please include the dealer invoice or other documentation.                        |                                                          |                                                          |                                                          |                                                          |