Self-Employed Tax Organizer

The Self-Employed Tax Organizer should be completed by all sole proprietors or single member LLC owners. It has been designed to help collect and organize the information that we will need to prepare the business portion of your income tax returns in the most efficient and timely manner possible. Because this is the information we will be using to prepare your tax returns and sending to the IRS, please verify it is

In addition to completing the organizer, there are additional documents we'll need to complete your taxes. Below is a list of items we will need before we can prepare your taxes:

Completed Organizer (see below)

Prior Years Tax Returns - If you are a first-time tax client, please provide a copy of tax returns for the past 2 years (Federal and State).

Bookkeeping Records - If you use a bookkeeping system other than Xero, you can provide us with a year-end income statement, balance sheet and statement of cash flows rather than completing the income and expense information in the organizer.

Employee Information - If you have employees, please include a copy of the following docs:

Form W-3 (This form is filed with W-2s to report total annual payroll)

Federal Form 940 (FUTA) – For the tax year

Federal Form 941 (FICA) quarterly reports for periods ending 3/31, 6/30, 9/30 and 12/31 of tax year State quarterly reports for periods ending 3/31, 6/30, 9/30 and 12/31 of the tax year

1099-MISC Forms- If you issued forms 1099-MISC we will need copies of these forms

Additional Items - Although the organizer is fairly comprehensive, it is certainly possible that there are items pertinent to your taxes that are not addressed. Please include these documents with your organizer.

If there are questions or sections you are not sure about, please note them and we will discuss them before finalizing and filing your returns. When your organizer is complete and you have compiled the above information, please return via one of three methods included in the instruction email.

Business Information					
Name of Business					
Business Address					
City		State	Zip		
County (not country)		Phone			
Email Address					
Federal EIN	Stat	te Tax ID Number (if applica	ble)		
State of Organization	Date of Organizat	tion			
Check any that apply:	Initial Return	Amended Return		Final Return	
	Name Change	Address Change		(Is the business closing?)	

Ownership Information				
Business Owner	•			
Name		Social Security	#	
Address				
City		State	Zip	

Yes

No

If necessary, can we discuss your tax return with the IRS?

Acco	Accounting & Product/Service Information						
Method of Accounting (check one)*	Cash	n Accrual					
*Most small businesses follow the cash method of accounting. If you are unsure, please select cash.							
Type of Business		Product / Service					
Inventory Method (if applicable):	Cost	Lower of Cost of Market	Other				
Did you materially participate in the ope	Did you materially participate in the operation of this business during the year?						
Did you start or acquire this business du	Did you start or acquire this business during tax year?						
Did you make any payments during the	Did you make any payments during the year that would require you to file form(s) 1099?						
If yes, did or will you file all required form(s) 1099?				No			
Was the business involved in real estate investment activity during the year?				No			
Do we currently maintain your bookkeeping using Xero?				No			
	If you answered yes, you can skip the income and expense sections. Also, if you self prepare your bookkeeping using Xero and yould like to grant us access, please invite us as a user and you can skip the income and expense sections.						

		Business Income		
What were	the busin	ess gross receipts or sales for the year?	\$	
		ipts were reported on Form 1099-K?	\$	
What portic	on of gross	s sales listed above was refunded or returned?	\$	
Did you hav	e any oth	er income from this business activity not included in gross re	eceipts above?	
Yes	No	If yes, please describe:		

Cost of Goods Sold (COGS)		
Businesses such as restaurants, retail sales and manufacturing generally must account for COGS.		
COGS includes all costs associated with manufacturing a product or purchasing a product for resale.		
Do you manufacture or produce a product for sale to customers?	Yes	No
Do you operate a wholesale or retail business where you maintain an inventory of goods?	Yes	No
Did you change your method of counting your inventory during the year?	Yes	No
What was your opening cost of inventory on the first day of the year?		
What were your purchases of product (less cost of items withdrawn for personal use)?		
Cost of labor related to sale or production of goods held for sale		
Materials and supplies used in manufacture or sales production		
Others costs of goods not listed above (list these on separate detail worksheet)		
Closing inventory at end of year		

Business Expenses	\$ Business Expenses	\$
Advertising	Professional education & training	
Auto (Complete auto worksheet)	Rent (office, leasehold, storage)	
Banks fees and charges	(1099-MISC to unincorporated payees required)	
Cell phone (100% of cost) \$	Rent or Lease	
(X Business use %) =	(Vehicles, machinery, equipment)	
Commissions and fees	Repairs and Maintenance	
Computers, equipment, furnitures	Software (Enter on Depreciation	
(Complete the Asset Depreciation	Worksheet, page 3)	
Worksheet shown on page 3)	Supplies and small tools	
Contract Labor	(Do not include equipment purchases - see	
(You must issue a 1099 Misc to any	Depreciation Worksheet on page 3)	
unincorporated entity to whom you paid	Taxes - Local & business licenses	
\$600 or more for the year)	Taxes - Payroll	
Dues and Subscriptions	Taxes - Other (business - not personal)	
Employee benefit programs	Annual corporation fees	
Health insurance (employee)	Telephone expense (Do not include	
Health insurance (self/family)	cost of main home phone line)	
Insurance (other than health)	Travel (Complete Travel Expense	
Internet service	Worksheet on page 4)	
Interest - Mortgage (business - not home)	Utilities (Do not include home office)	
Interest - Business credit cards	Wages (W-2 issued to employees)	
Interest - Business loans/credit line	Provide copies of W-3, Annual 940 &	
Laundry/cleaning/janitorial	Quarterly 941 reports filed).	
Legal and professional services	Other Expenses	
Local (in-town) meals		
(Enter travel meal expense on page 4)		
Entertainment		
Merchant credit card fees		
Office expense		
(Do not include equipment purchases - see		
Depreciation Worksheet on page 3)		
Parking & tolls		
Postage & shipping		

Asset Depreciation Worksheet

- You must report the purchases and disposition of all assets you used in your business during the year
- For each asset bought or sold, provide the following information:

Assets Purchased During the Year			Assets Sold or Disposed of During the Year			
					Disposition	
Description	Date Bought	Cost	Used/New?	Description	Date	Sales Price
-						
					-	
	+					
	+					
	+				1	
	+					
	+					
	+				<u> </u>	

Travel Expense Worksheet

Meals Per Diem (Important Facts)

- For each day you traveled away from home for business outside the metro area, you may claim the actual cost of your lodging and meals. For meals only, you may claim a daily per diem amount instead of the actual costs
- If you paid travel expenses for your employees outside the metro area, you may choose between claiming the actual cost of employee meals and lodging; or you can reimburse the employee a daily per diem amount for meals and lodging.
- The daily per diem amount varies depending on the city and country you and/or your employee traveled to. To calculate the per diem amount you can claim, provide details of each city that you or your employee traveled to for business during the tax year and the number of days in each city.
- You can alternate between actual expenses and the per diem method for each business trip; however you may not use both per diem and actual for the same business trip.
- You may reimburse a partial per diem if you traveled outside the metro area for less than a full day

City visited (for per diem)	# of days in city	City visited (for per diem)	# of days in city
Travel Expenses	\$	Travel Expenses	\$
Airfare		Lodging	
Bus, train, taxi		Parking & tolls	
Entertainment		Other travel (describe below)	\$
Meals - actual receipts			

Business Use of Automobile

Lease Payments

Documentation must be kept to prove business use of vehicles

If you used your automobile for active conduct of your business, you can claim expenses for business use of your vehicle. You must have proof of business use in the form of a mileage log or a written calendar unless you can show your vehicle was 100% business use

you can show your vehicle was 100%		offit of a filleage log of a written cale	iluai uilless
You may be eligible to claim a standa either case, you must maintain writte			vehicle. In
Vehicle 1			
Purchase Price of vehicle			
Description (Model and Year)		Date vehicle was first used in your b	ousiness
For this tax year only, enter the number	oer of miles your vehicle	e was used for:	
	Business N	Niles (not including commuting)	
	Commutin	g Miles	
	All other p	ersonal-use miles	
Interest paid on auto loan used to pu	rchase this vehicle		
Was the vehicle available for persona	ll use? Yes No Is	another personal-use auto available	? Yes No
Do you have evidence to support this	deduction? Yes No	If "Yes", is the evidence written?	Yes No
Vehicle 1 Expenses (Provide these e	xpenses if you are NOT	claiming the standard mileage rate)	
Garage Rent		Repairs	
Gas		Tires	
Insurance		Tolls	
Licenses		Registration Fees	
Oil		Other Expenses (list):	
Parking Fees			

Vehicle 2				
Purchase Price of vehicle				
Description (Model and Year)		Г	Date vehicle was first used in your b	usiness
For this tax year only, enter the number	or of miles your vs			,usiness
For this tax year only, enter the number			es (not including commuting)	
		nuting N		
			sonal-use miles	
Interest paid on auto loan used to pu		-	Solial-use lillies	
Was the vehicle available for persona			nother personal-use auto available?	Yes No
Do you have evidence to support this		No No	If "Yes", is the evidence written?	
Vehicle 2 Expenses (Provide these e	kpenses if you are			
Garage Rent			Repairs	
Gas			ires	
Insurance			Tolls	
Licenses			Registration Fees	
Oil			Other Expenses (list):	
Parking Fees				
Lease Payments				
Business Use of Home				
Did you use a portion of your home for	or regular and exclu	usive bu	ısiness use? Yes No	
If yes, please provide the following in	-			
Total purchase price of home				
Cost of major improvements to home	since you purchas	sed it.		
Value of the land your home is built of				
Area of home used regularly and excl	Square Feet			
Total area of home	·			Square Feet
Did you claim office-in-home expense	es last year? Yes	No		
Deductible mortgage interest paid (fo	r entire home)			
Real estate taxes paid (for entire hom	ie)			
Insurance paid (for entire home)				
Rent paid (for entire home)				
Repairs and maintenance (for entire l	nome)			
Repairs and maintenance allocable di	rectly to business-u	use area	of home only	
Utilities				
Other expense: Describe				
Date you first used your home for bu			Month Year	
If you use your home for operating a	child daycare busin	ness, en	ter the total hours during the year t	that
children were using your home.			Hours for the year	
Did you live in the home all year? Yes				
If no, enter the date you lived in the h	nome		to	

This is not an all inclusive organizer. If there are additional items that you believe to be pertinent to your specific tax situation or if you have additional comments about any figures in the organizer, please make note below.	Notes/Comments	
tax situation or if you have additional comments about any figures in the organizer, please make note below.		
	ax situation or if you have additional comments about any figures in the organizer, please make note below.	