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**YOUR INFORMATION**

Name (First, Mi, Last)     
First M.I. Last

Social Security No. (or ITIN)  Email

**BUSINESS INFORMATION**

First year doing business?  Yes  No If yes, date business started:

Final year doing business?  Yes  No If yes, date business ended:

Legal Business Name

Principal business or profession:

Federal Employer ID No.  State(s) tax filing required:

Office Address

City  State  Zip Code

**Outside U.S. Only** Foreign Province/State

Foreign Country  Postal Code

**BUSINESS INCOME**

How many customers did you serve?  Less than 5  5 or more

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Select all forms of payment offered or used by customers:

Cash  Paypal  Venmo  Foreign Bank Transfer  
Non-U.S.

Checks  Zelle  Bitcoin or Cryptocurrency

Payment Merchant  Stripe  Other

Annual Account Statement (Jan 1 - Dec 31):

Paypal  Zelle  Stripe  Venmo  Foreign Bank Non-U.S.

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Tax documents and statements to provide:  1099-NEC  1099-K  1099-MISC

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<b>Gross receipts or sales</b> (100% of all payment methods)	(+)	\$
Other Income (Provide details) :	(+)	\$
Other Income (Provide details) :	(+)	\$
<b>TOTAL BUSINESS INCOME</b>		\$

<b>Customer cash refunds</b>	(-)	\$
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**RECORDKEEPING**

Are the businesses finances kept separate from your personal finances?  Yes  No

List all bank and credit card accounts used in business:

Financial Institution	Type of Account	Account Number

Bookkeeping used in the business:  Handwritten Ledger  Excel  QuickBooks  Paid Bookkeeper  QuickBooks Online  Other Software: \_\_\_\_\_

**ASSETS**

DESCRIPTION OF PURCHASE	DATE	New	Used	TOTAL COST
		<input type="checkbox"/>	<input type="checkbox"/>	\$
		<input type="checkbox"/>	<input type="checkbox"/>	\$
		<input type="checkbox"/>	<input type="checkbox"/>	\$
		<input type="checkbox"/>	<input type="checkbox"/>	\$

**MERCHANDISE INVENTORY**

Beginning Inventory (as of January 1) (last year's closing inventory)	\$
Purchases (Not including cost of items for personal use)	\$
Ending Inventory (as of December 31)	\$

EXPENSES			
Accounting/Bookkeeping	\$	Payroll processing fees	\$
Advertising	\$	Permits and fees	\$
Bank charges	\$	Postage and shipping	\$
Cell phone and data plan	\$	Printing/Copies	\$
Commission paid	\$	Recruitment costs	\$
Computer/Technology	\$	Repairs and maintenance	\$
Consulting	\$	Salaries/Employee Wages	\$
Dues and subscriptions	\$	Selling expenses	\$
Education and training	\$	Software – Cloud Subscriptions	\$
Equipment rentals	\$	Software – Computer Download	\$
Gifts to vendors	\$	Supplies: Back-Office	\$
Gifts to customers	\$	Taxes/Licenses	\$
Contractors (U.S. services)	\$	Tools and trade supplies	\$
Contractors (outside U.S.)	\$	Travel: Hotels/Lodging	\$
Insurance: General	\$	Travel: Airfare	\$
Insurance: Liability/E&O	\$	Travel: Meals	\$
Insurance – Workers’ Comp.	\$	Travel: Taxi/Rideshare/Car Rental	\$
Interest expense	\$	Website/Online Store	\$
Internet/Wi-Fi	\$	<b>OTHER ITEMIZED EXPENSES:</b>	
Legal and professional	\$		\$
Marketing/Promotion	\$		\$
Meals @ 50% limit	\$		\$
Meetings	\$	I confirm the income/expense amounts included in this worksheet are in the currency they were received or paid.	<input type="radio"/> Yes <input type="radio"/> No
Office/Coworking space	\$		
Payment processing fees	\$		



## BUSINESS INCOME & LOSS WORKSHEET

Self-Employment, Single Member LLC, Side-Gigs, & Contract Labor

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Date arrived in United States	Date departed the United States	No. of days in U.S. for business	Income earned in U.S. on business
			\$
			\$
			\$
			\$
			\$

COMMERCIAL OFFICE				
Office rent paid	\$	Office insurance	\$	Other office expenses
Office utilities	\$	Repairs & Maintenance	\$	Details:
Janitorial	\$	Décor/Supplies	\$	\$

HOME OFFICE				
Sq. ft. of total living space		My home changed during the year?		
Sq. ft. of office in home (business)		<input type="checkbox"/> Yes <input type="checkbox"/> No Date Moved?		
Rent or lease payments	\$	Utilities	\$	
Mortgage interest paid	\$	Insurance	\$	
Real estate taxes paid	\$	Internet	\$	

ABOVE-THE-LINE ADJUSTMENTS			
Health insurance premiums	\$	Traditional IRA	\$
Dental insurance premiums	\$	SEP/Simple IRA	\$
2021 HSA Contributions	\$	Roth IRA	\$

NOTES