



### 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:

Fictitious Business Name (dba as)

Principal business or profession:

Street Address (home or office):

City

State

Zip Code

Federal Employer ID No.

State(s) tax filing required:

### CALIFORNIA SMLLC

Y

N

U

Is this business a Single Member LLC (Disregarded Entity)

☐☐☐

Secretary of State File No.

### BUSINESS INCOME

How many customers did you serve?

☐

Less than 5

☐

5 or more

Select all forms of payment offered or used by customers:

☐ Cash

☐ Paypal

☐ Venmo

☐ Other Virtual Currency

☐ Checks

☐ Zelle

☐ Bitcoin or Cryptocurrency

☐ Payment Merchant

☐ Stripe

☐ Other

Tax documents and statements to provide:

☐

1099-NEC

☐

1099-K

☐

1099-MISC

Annual Account Statement (Jan 1 - Dec 31):

☐ Paypal

☐ Zelle

☐ Stripe

☐ Venmo



# YORKTOWN MAIN

INCOME TAX AND ACCOUNTING

## SMALL BUSINESS WORKSHEET

Self-Employment, SMLLC, Contractors, & Side-Gigs

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|   |     |    |
|---|-----|----|
| Gross receipts or sales (100% of all payment methods) | (+) | \$ |
| Other Income (Provide details) :                      | (+) | \$ |
| Other Income (Provide details) :                      | (+) | \$ |
| TOTAL BUSINESS INCOME                                 |     | \$ |

|                       |     |    |
|-----------------------|-----|----|
| Customer cash refunds | (-) | \$ |
|-----------------------|-----|----|

### 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 No. ****1234 |
|-----------------------|-----------------|----------------------|
|                       |                 |                      |
|                       |                 |                      |
|                       |                 |                      |

Bookkeeping used ☐ Handwritten Ledger ☐ Excel ☐ QuickBooks

in the business: ☐ Paid Bookkeeper ☐ QuickBooks Online ☐ Other Software:

### ASSETS

| DESCRIPTION OF PURCHASE | DATE | New | Used | TOTAL COST |
|-------------------------|------|-----|------|------------|
|                         |      |     |      | \$         |
|                         |      |     |      | \$         |
|                         |      |     |      | \$         |
|                         |      |     |      | \$         |

### 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)                                  | \$ |



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| 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              | \$ | OTHER ITEMIZED EXPENSES:          |    |
| Legal and professional      | \$ |                                   | \$ |
| Marketing/Promotion         | \$ |                                   | \$ |
| Meals @ 50% limit           | \$ |                                   | \$ |
| Meetings                    | \$ |                                   | \$ |
| Office/Coworking space      | \$ |                                   | \$ |
| Payment processing fees     | \$ |                                   | \$ |



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### STANDARD VEHICLE MILEAGE

|                    |  |                    |  |  |  |
|--------------------|--|--------------------|--|--|--|
| Year               |  | Business Miles     |  | If asked, could you provide written evidence (travel log) to prove business miles?<br><input type="checkbox"/> Yes <input type="checkbox"/> No |  |
| Make               |  | Other              |  |  |  |
| Model              |  | Total Mileage      |  |  |  |
| Odometer Readings: |  | Beginning mileage: |  | Ending mileage:  |  |

### 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  | \$ |
| 2024 HSA Contributions    | \$ | Roth IRA        | \$ |

### NOTES

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