2023 Individual Taxpayer Organizer Sole Proprietorship

(See next page for Organizer)

110 North Grand Ave, STE 212Sun Prairie, WI 53590(608) 345-5320



2023 Individual Taxpayer Organizer

Coccupation Date of birth Coccupation Date of birth Are you new to our firm? Yes No	Taxpayer							Tax ID#*				
County Primary phone Scoondary phone First Name M.L. Last Name Email Suse Date Secondary phone First Name M.L. Last Name Email Suse Date State Date State Suse Date State Date Date of move Date of	First Name	M.I.	Las	t Name	Ema	ail						
County Primary phone Secondary phone Secondary phone Secondary phone Secondary phone Secondary phone Secondary phone State Issue Date Secondary phone Secondary phone Secondary phone State Issue Date Secondary phone State State State State State State Secondary phone Secon	Occupation		Date	of birth				Are you new	to our	firm?	Yes	No
State Issue Date Exp. Date	Address		City					State		Zip		
First Name M.I. Last Name Date of birth Date of birth Are you new to our firm? Yes No	County		Prim	ary phone				Secondary phone				
Pink	Driver's License No.		State Issue Date						Exp. Date			
Occupation Date of birth Are you new to our firm? Yes No Address (City State Zip Primary phone Secondary phone) Driver's License No. State Issue Date Exp. Date If you moved during 2023, enter your previous address. Marital status on 12/31/23: Single Married Separated Surviving Spouse Registered Domestic Partnership (RDP) Were you divorced or separated during the year? Yes No Were there any deaths in the family? Yes No Note: Individuals in registered domestic partnerships (RDPs) and civil unions are not considered married for federal tax purposes. Notices: Have you received any notice from the IRS or state revenue department within the past year? Yes No Notices: Have you received any notice from the IRS or state revenue department within the past year? Yes No Notices: Have you received any notice from the IRS or state revenue department within the past year? Yes No Other dependent children Tax ID #* IP PIN Date of birth home in 2023 Relationship to taxpayer to State the properties of the year? Yes No Do any of the children have a disability? Yes No Other dependents or people who lived with you Name Tax ID #* IP PIN Date of birth home in 2023 Relationship Income Tax ID #* IP PIN Date of birth home in 2023 Relationship Income Tax ID #* IP PIN Date of birth home in 2023 Relationship Income Tax ID #* IP PIN Date of birth home in 2023 Relationship Income Tax ID #* IP PIN Date of birth home in 2023 Relationship Income Tax ID #* IP PIN Date of birth home in 2023 Relationship Income Tax ID #* IP PIN Date of birth home in 2023 Relationship Income Tax ID #* IP PIN Date of birth home in 2023 Relationship Income Tax ID #* IP PIN Date of birth home in 2023 Relationship Income Tax ID #* IP PIN Date of birth home in 2023 Relationship Income	Spouse							Tax ID#*				
Address this different ton Engages City State Zip Primary phone State Issue Date Exp. Date By our moved during 2023, enter your previous address. Date of move Marital status on 12/31/23: Single Married Separated Surviving Spouse Registered Domestic Partnership (RDP) Were you divorced or separated during the year? Yes No Were there any deaths in the family? Yes No Note: Individuals in registered domestic partnerships (RDPs) and civil unions are not considered married for federal tax purposes. Notices: Have you received any notice from the IRS or state revenue department within the past year? Yes No Name of dependent children Tax ID # * IP PIN Date of birth Months lived in Relationship to College student? Did any of the children have unearned income above \$1,250 for the year? Yes No Do any of the children have a disability? Yes No Other dependents or people who lived with you IP PIN Date of birth Months lived in home in 2023 Relationship Income Tax ID # * IP PIN Date of birth Months lived in home in 2023 Relationship Income Income Tax ID # * IP PIN Date of birth Months lived in home in 2023 Relationship Income Other dependents or people who lived with you IP PIN Date of birth Months lived in home in 2023 Relationship Income Other dependents or people who lived with you IP PIN Date of birth Months lived in home in 2023 Relationship Income Other dependents or people who lived with you IP PIN Date of birth Months lived in home in 2023 Relationship Income Other dependents or people who lived with you IP PIN Date of birth Months lived in home in 2023 Relationship Income IP PIN IP PIN Date of birth Months lived in home in 2023 Relationship Income IP PIN I	First Name	M.I.	Las	t Name	Ema	ail						
County Primary phone Secondary	Occupation		Date	of birth	•			Are you new	to our	firm?	Yes	No
Driver's License No.			City					State		Zip		
Marital status on 12/31/23: Single Married Separated Surviving Spouse Registered Domestic Partnership (RDP) Were you divorced or separated during the year? Yes No Were there any deaths in the family? Yes No Note: Individuals in registered domestic partnerships (RDPs) and civil unions are not considered married for federal tax purposes. Notices: Have you received any notice from the IRS or state revenue department within the past year? Yes No Names of dependent children Tax ID #* IP PIN Date of birth Months lived in Months lived in Months lived in Individuals is taxpayer will seek to claim a child listed above as their dependent for tax year 2023? Yes No Other dependents or people who lived with you Name Tax ID #* IP PIN Date of birth Months lived in Mon	County		Prim	ary phone				Secondary ph	ione			
Marital status on 12/31/23: Single Married Separated Surviving Spouse Registered Domestic Partnership (RDP) Were you divorced or separated during the year? Yes No Were there any deaths in the family? Yes No Note: Individuals in registered domestic partnerships (RDPs) and civil unions are not considered married for federal tax purposes. Notices: Have you received any notice from the IRS or state revenue department within the past year? Yes No Names of dependent children Child's full name Tax ID #* IP PIN Date of birth Months lived in home in 2023 Tex No Other dependents or people who lived with you Name Tax ID #* IP PIN Date of birth Months lived in home in 2023 Relationship Income Notes the children have a disability? Yes No Date of birth Months lived in home in 2023 Relationship Income Name Tax ID #* IP PIN Date of birth Months lived in home in 2023 Relationship Income Account number	Driver's License No.				Stat	e Issue	2 Date	е	Ехр	. Date		
Were you divorced or separated during the year? Yes No Were there any deaths in the family? Yes No Note: Individuals in registered domestic partnerships (RDPs) and civil unions are not considered married for federal tax purposes. Notices: Have you received any notice from the IRS or state revenue department within the past year? Yes No Notices: Have you received any notice from the IRS or state revenue department within the past year? Yes No Notices: Have you received any notice from the IRS or state revenue department within the past year? Yes No No Individuals in registered domestic partnerships (RDPs) and civil unions are not considered married for federal tax purposes. Notices: Have you received any notice from the IRS or state revenue department within the past year? Yes No Individuals in registered domestic partnerships (RDPs) and civil unions are not considered married for federal tax purposes. Notices: Have you received any notice from the IRS or state revenue department within the past year? Yes No Individuals in the family? Yes No Individuals in registered domestic partnerships (RDPs) and civil unions are not considered married for federal tax purposes. Notice is not individuals in the family? Yes No Individuals in the family in the family? Yes No Individuals in the family in the fam	If you moved during 2023, enter your	previous address	s.					Date of move				
Child's full name Tax ID #* IP PIN Date of birth home in 2023 taxpayer student? Did any of the children have unearned income above \$1,250 for the year? Yes No Do any of the children have a disability? Yes No Is it anticipated that a different taxpayer will seek to claim a child listed above as their dependent for tax year 2023? Yes No Other dependents or people who lived with you Name Tax ID #* IP PIN Date of birth home in 2023 Relationship Income Bank information: Use for Direct deposit of refund Direct debit of balance due Name of bank Checking Savings Routing transit number Account number	Note: Individuals in registered domes	stic partnerships ((RDPs)	and civil union	ns are	not consider	red n	narried for fed	leral ta			
Is it anticipated that a different taxpayer will seek to claim a child listed above as their dependent for tax year 2023? Yes No Other dependents or people who lived with you Name Tax ID #* IP PIN Date of birth home in 2023 Relationship Income Bank information: Use for Direct deposit of refund Checking Savings Routing transit number	Names of dependent children							Months lived in				_
Is it anticipated that a different taxpayer will seek to claim a child listed above as their dependent for tax year 2023? Yes No Other dependents or people who lived with you Name Tax ID #* IP PIN Date of birth home in 2023 Relationship Income Bank information: Use for Direct deposit of refund Checking Savings Routing transit number												
Name Tax ID #* IP PIN Date of birth Months lived in home in 2023 Relationship Income Bank information: Use for Direct deposit of refund Checking Savings Routing transit number Account number	•			•		•				•		s No
Name Tax ID #* IP PIN Date of birth home in 2023 Relationship Income Bank information: Use for Direct deposit of refund Direct debit of balance due Name of bank Checking Savings Routing transit number Account number	Other dependents or people who liv	ed with you					l					
Checking Savings Routing transit number Account number	Name	<i>Tax ID # *</i>		IP PIN	L	Date of birth			Relati	onship	In	соте
Checking Savings Routing transit number Account number												
	Bank information: Use for Direct d	eposit of refund	Dire	ect debit of bala	nce d	ue <i>Name of</i>	bank					
Ask your tax preparer for information about depositing a refund into an IRA account or splitting the deposit into more than one account.	Checking Savings Routing tra	nsit number				Account ni	umbe	r				
t & Tay ID # is either a Social Security Number (SSN) adoption taypayer identification number (ATIN) or an individual taypayer identification number (ITIN)												

"Yo	ou" refe	rs to b	oth taxpayer and spou	se—ask your preparer if uns	ure about	a question.			
	Yes	No	Are either you or you	ır spouse legally blind?					
	Yes	No	Did you pay or received Paid Received		Recipient	t's SSN	Date of divorce or sepa	ıration	
	Yes	No	Did you purchase he	alth insurance through a pub	lic exchan	ge/marketplace? (Provide	e Form 1095-A.)		
ES	Yes	No	Will there be any sign	nificant changes in income or	deduction	ns next year, such as retire	ment?		
TAX	Yes	No	Did you pay anyone	for domestic services (e.g., na	nny, hous	sekeeper, cook, caretaker)	in your home?		
YLE 8	Yes	No	Did you purchase a r	new or used energy-efficient, l	hybrid, or	electric car, truck, or van	?		
LIFESTYLE & TAXES	Yes	No	Are you involved in	bankruptcy, foreclosure, repo	ssession, o	or had any debt (including	g credit cards) cancelle	ed?	
7	Yes	No	Are you a member of	f the military?		State of residency			
	Yes	No	Were you a citizen of	or lived in a foreign country?	?	Foreign country			
	Yes	No	Do you own or have	financial interest in a foreign	bank or fi	nancial account? Maximu	m value \$		
	Yes	No	Would you like to all Designee's name	ow your tax preparer or anot Pho	her persor ne number	n to discuss your return w	rith the IRS? PIN (any five digits)		
	Yes	No	Were any children bo	orn or adopted in 2023? (Provi	de statemer	nt for other expenses.)			
	Yes	No	Were any children at	tending college? (Provide Form	n 1098-T ai	nd Form 1098-E.)			
			Year in college	Paid by you: Tuition \$		Books \$	Student loan interest S	3	
NG				Paid by student: Tuition \$		Books \$	Student loan interest S	3	
CATI	Yes	No	Did you pay any tuit	ion for a private school for a	dependen	t or take classes yourself?			
EDU			Student				Amount paid \$		
CHILDREN & EDUCATION			Name and address of so	chool					
НІГОІ	Yes	No	Did you pay for child	d or dependent care so you co	uld work	or go to school? (Provide s			
C			Name of provider				EIN or SSN		
			Address				Amount paid \$		
	Yes	No		ldren who have unearned inc		,250 or more?			
	Yes	No		ontributions to a 529 plan in 2					
-	Yes	No	-	contribute any money to an l			Traditional IRA	Roth II	RA
	Yes	No		y amounts from a retirement a					
NTS	Yes	No		fer any stock or sell rental or i		t property?			
INVESTMENTS	Yes	No	-	income from an installment sa					
INVE	Yes	No	-	vestments become worthless			theft in 2023?		
	Yes	No		did you exercise, any employ					
	Yes	No		as a reward, award, or payme a financial interest in a digital					ose
	Yes	No		lan to, contribute money befo		-			
SNOL	Yes	No		erest on a loan for a boat or RV					
DEDUCTIONS	Yes	No	, , , ,	xes on a major purchase in 202					
DE	Yes	No		naritable contributions in 2023					
SS	Yes	No		home office or use your car f	- 1				
BUSINESS	Yes	No		me from a sharing/gig econo			?		
BUS	Yes	No	-	ess or an interest in a partners				e?	
	Yes	No	Did you purchase or	sell a main home during the y	ear? If yes	s, provide closing stateme	nt.		
	Yes	No	If you sold a home, d	id you claim the First-Time H	omebuyer	Credit when it was purch	nased? If yes, provide	details.	
номе	Yes	No	-	nortgage or take a home equi					
Ξ	Yes	No	-	tgage loan proceeds for purp				ur home	?
	Yes	No		ew energy-efficient improvem					
Sta	te infor	matio			Nonreside				
			e during 2023 and dat	•		Do you rent or own	n your home? Rent	Own	
						Total rent paid \$	Includes heat?	Yes	No
						,			

Income Worksheet

Provide to your preparer all Forms W-2, 1099-INT, 1099-DIV, 1099-R, 1099-MISC, 1099-NEC, 1099-K, and other income reporting statements. Do not list dollar amounts for the following forms. Your preparer will report the appropriate amounts.

Indicat	e "T" for taxpayer, "S" for spouse, "J" for joint		Provide additional statements if more room is needed
Forms	W-2 — Wage and Tax Statement		
T/S	Employer name	T/S	Employer name
	1)		4)
	2)		5)
	3)		6)
Forms	1099-INT—Interest Income		
T/S/J	Name of issuer	T/S/J	Name of issuer
	1)		4)
	2)		5)
	3)		6)
Forms	1099-DIV—Dividends and Distributions		
T/S/J	Name of issuer	T/S/J	Name of issuer
	1)		4)
	2)		5)
	3)		6)
Forms	1099-R—Distributions From Pensions, Annuities, Ret	tirement or Profit	-Sharing Plans, IRAs, Insurance Contracts, Etc.
T/S	Name of issuer	T/S	Name of issuer
	1)		4)
	2)		5)
	3)		6)
If the d	listribution is before age 59½, give a reason to determin	ne if an exception	to penalty applies.
Tax-Ex	empt Interest (such as municipal bonds—include state	ement)	
		•	

Payer	\$		Payer		\$
Other Income					
State tax refund		\$		Unreported tips	\$
Unemployment compensation		\$		Other	\$
Social Security (taxpayer)—provide SSA-1099 or I	RRB-1099	\$			\$
Social Security (spouse)—provide SSA-1099 or RR	B-1099	\$			\$
Gambling income—provide Form W-2G		\$			\$
Business income (see Sole Proprietorship Tax Organizer)				Stock sales	See "Sales and Exchanges
Rental income (see Rental Property Tax Organizer)				Sale of other property	Worksheet" below.

Sales and Exchanges Worksheet

Provide information about sales of stock, real estate, or other property, along with Forms 1099-B, 1099-S, or other supporting statements.

Description of property	Purchase date	Cost/basis	Sale date	Sale price
		\$		\$
		\$		\$
		\$		\$

Notes:

- When stock is sold, you will usually receive Form 1099-B, *Proceeds From Broker and Barter Exchange Transactions*, reporting the proceeds from the sale. However, your statement will not always provide the cost/basis information necessary to compute gain or loss. If the statement does not contain the cost/basis information, you must provide it. You may need to contact your broker for questions about cost/basis and purchase dates of your stock accounts.
- Often, "transfers" of stock or mutual funds within a brokerage account are actually sales of one type of stock and purchase of another. Even if you did not receive any cash from the transaction, you may have taxable gain or loss.
- If your stock dividends are automatically reinvested, the dividends will be taxable even though you did not receive any cash. The transaction is treated as if you had received cash and purchased additional stock. When the stock is sold, the amount reinvested over the years is taken into account. You may need to contact your broker for questions about the amount of reinvested dividends.
- If you sold property other than stock, your taxable gain or loss will be determined by your cost/basis. The cost/basis is usually the original purchase price plus improvements (the cost of repairs and maintenance are not taken into account for cost/basis).

Itemized Deductions Worksheet

Deductions must exceed \$13,850 Single, \$27,700 MFJ/QSS, \$20,800 HOH, or \$13,850 MFS to be a tax benefit.

include cost fo	or dependents—do	7.5% of income to be not include any expe with funds from an F	enses that were		vide details of co	: \$500 in noncash cha ntributions. Rules rec all contributions.		
Dentists	\$	Hospitals	\$	Monetary (cash, ch	neck, credit card)		\$	
Doctors	\$	Insurance	\$	Noncash contributions (FMV). Clothing or household				
Equipment	\$	Prescriptions	\$	items must be in g	\$			
Eyeglasses	\$	Other	\$	Did you transfer fu	d.			
Medical miles	:	@ 22¢			No	@ 14¢	\$	
Taxes Paid. D	o not include taxes	paid for full or parti- siness use of the hom	al business or	Charitable mileage Casualty and The		@ 14¢		
State withhold			Reported on W-2			ected damage or loss		
	d taxes—paid in 20	23	\$	a theft in a federall preparer. Yes	ly-declared disas [.] No	ter area, provide deta	ils to your tax	
Real estate tax	-		\$	1		ions. Miscellaneous	itamizad	
Real estate tax	—other		\$			mitation are not ded		
Personal prop	erty taxes		\$			enses may be deducti		
	Property tax refund—received in 2023			return. For use of home, auto mileage, or other job-related expenses provide information on a separate sheet. Were any expenses reimbu				
Foreign tax pa	id		\$	by your employer?		, , , , , , , , , , , , , , , , , , , ,		
Other			\$	Dues	\$	Subscriptions	\$	
Other			\$	Investment	\$	Supplies	\$	
Other			\$	expenses				
Balance paid i	n 2023 from prior y	ear state returns		Job education	\$	Tax prep fees	\$	
(do not includ	e interest or penalti	es)	\$	Job seeking	\$	Tools	\$	
		x paid during 2023?	Yes No	Legal fees	\$	Uniforms	\$	
Did you purch Sales tax paid		at, or home in 2023? vaid \$ Dat	Yes No	Licenses	\$	Union dues	\$	
		,		Safety equipment	\$	Other	\$	
use or rental-u	ise property, includ	erest paid for full or j ing business use of th ion and ID numbers.		Other Deduction AGI limit.	s. The following	deductions are not s	ubject to the 2%	
Main home	\$	Equity loan	\$	Gambling losses	\$	Federal estate tax on IRD	\$	
Second home	\$	Equity loan	\$	Impairment-	\$	Other	\$	
Points	\$	Investment interest	\$	related expenses				
	T	Investment interest or Question	1 7	1				

- **Notes:** Gambling losses are deductible only up to the amount of gambling winnings reported. A log must be kept to verify losses.
 - Work clothing is not deductible if adaptable for every day wear. Exception for safety equipment, such as steel-toe boots.
 Expenses to enable individuals, who are physically or mentally impaired, to work are generally deductible.

Adjustments Worksheet

\$
\$
\$
\$
\$
\$
\$
Ask preparer
Ask preparer
\$

Estimated Tax Payments — Tax Year 2023								
Installment	Date paid	Federal	Date paid	State				
First		\$		\$				
Second		\$		\$				
Third		\$		\$				
Fourth		\$		\$				
Amount applied from 2022 overpayment		\$		\$				
Total		\$		\$				

Tax Preparation Checklist

Please provide the following documentation:

All Forms W-2 (wages), 1099-INT (interest), 1099-DIV (dividends), 1099-B (proceeds from broker or barter transactions), 1099-R (pensions and IRA distributions), Schedules K-1 from partnerships, S corporations, estates and trusts, and other income reporting statements, including all copies provided from the payer.

Form 1095-A (for health insurance purchased through a public exchange/marketplace), Form 1095-B (for health insurance purchased outside of a public exchange), or Form 1095-C (for employer-provided health insurance coverage).

If you are a new client, provide copies of last year's tax returns.

The completed Individual Income Tax Organizer. *Note:* If you choose not to fill out the organizer, you must at least answer the "Yes" or "No" questions under "Questions—All Taxpayers."

Copy of the closing statement if you bought, sold, or refinanced real estate.

Mileage amounts for any automobile expenses claimed, including total mileage, commuting mileage, and business mileage.

Detail of estimated tax payments made, if any.

Income and deductions categorized on a separate sheet for business or rental activities.

List of itemized deductions categorized on a separate sheet for medical, taxes, interest, charitable, and miscellaneous deductions. Copy of all acknowledgement letters received from charitable organizations for contributions made in 2023.

Taxpayer Responsibilities

- You agree to provide us all income and deductible expense information. If you receive additional information after we begin working on your return, you will contact us immediately to ensure your completed tax returns contain all relevant information.
- You affirm that all expenses or other deduction amounts are accurate and that you have all required supporting written records. In some cases, we will ask to review your documentation.
- You must be able to provide written records of all items included on your return if audited by either the IRS or state tax authority. We can provide guidance concerning what evidence is acceptable.
- You must review the returns carefully before signing to make sure the information is correct.
- Fees must be paid before your tax returns are delivered to you or filed for you. If you terminate this engagement before completion, you agree to pay a fee for work completed. A retainer may be required for preparation of returns.
- You should keep a copy of your tax return and any related tax documents. You may be assessed a fee if you request a duplicate copy in the future.

Signatures. By signing below, you acknowledge that you have read, understand, and accept your obligations and responsibilities. For a joint return, both taxpayers must sign.

Taxpayer	Spouse	Date

Privacy Policy

The nature of our work requires us to collect certain nonpublic information. We collect financial and personal information from applications, worksheets, reporting statements, and other forms, as well as interviews and conversations with our clients and affiliates. We may also review banking and credit card information about our clients in the performance of receipt of payment. Under our policy, all information we obtain about you will be provided by you or obtained with your permission.

Our firm has procedures and policies in place to protect your confidential information. We restrict access to your confidential information to those within our firm who need to know in order to provide you with services. We will not disclose your personal information to a third party without your express written permission, except where required by law. We maintain physical, electronic, and procedural safeguards in compliance with federal regulations that protect your personal information from unauthorized access.

Sole Proprietorship Tax Organizer

Sole Prop	priet	tor General Informati	on					
Name of s	sole	proprietor						
Business n	nam	e (if different)					EIN (if applicable)	
Business a	addr	ess (if different from hor	ne address)				-1	
Principal b	busi	ness activity			Date business started		Date business closed	l
Principal p	Principal product or service							
Yes N	Yes No Was the primary purpose of the business activity to realize a profit?							
Yes N	_	, , , , , , , , , , , , , , , , , , ,	<u> </u>	<u> </u>	continuous, and substantial	basis) in	the operation of this b	usiness?
		Has the business repo						
Accountin				(specify)				
	_	Does the business file		ar year? (If no, lis	t the fiscal year.)			
		or Specific Question						
	\rightarrow	Did you pay any fam						
Yes N	No	, , , , , , , , , , , , , , , , , , ,			ntractors, attorneys, accour			
	-		Form 1099-NEC	? List name and so	cial security number (SSN) fo			600 or more.
	-	Name					SSN	
	т	Name	1 , 1		16 1 1 1		SSN	
Yes N	No		you plan to mak	ke, any contributi	ons to a self-employed retir			ф
Voc. N) To	Type of plan	overs la caltila / d or	mtal impressed as 2. It	Yes, provide amount of premi		Amount contributed	\$
	_	, , ,		ntai insurance: ij	1es, provide amount of premi	ums paia	auring the year.	\$
	_	Did you have any em Did you have any bar		one in 20222				
	$\overline{}$				an that was forgiven in 202	32		
		tor Business Income	icek i foteetioii i	r rogram (111) io	art triat was forgiver in 202			
			Lerms 1000 NE	C or 1000 V list n	ame of payer and amount sepa	ratalu fron	n arace receipte or cales)	\$
Form 10			\$		<i>ите ој ридег ини итоит ѕери</i> n 1099-K	rutety from	\$	Ψ
		rms 1099-NEC and 109	1 1	10111	11 1077-K		Ψ	\$
		or credit refunds) and		counts or reduction	ons in selling price)			\$()
		(not included in gross re		cours of reducts	one in coming price)			\$
				(instead of Form	W-2) if you are not classif	ied as an	employee. If you rece	,
NEC, you	are	generally required to	file Schedule C,	Profit or Loss Fro	m Business, claim any expe			
		employment (SE) tax						
Sole Prop	priet	or Cost of Goods Sol	d (for manufactu	rers, wholesalers,	and businesses that make, bu	y, or sell g	ioods)	
		ne beginning of the yea						\$
Purchases	less	costs of items withdra	awn for persona	l use				\$
Cost of lab								\$
Materials a		* *						\$
		ne end of the year						\$
		or Business Expense				Ι.		
Advertisin	ıg		\$	Management fee		\$	Wages*	\$
Bad debts			\$	Meals – business	s (50% deduct.)	\$	Other	\$
Bank charg			\$	Office supplies		\$		\$
Business lie			\$		rst year of business)	\$		\$
Commissio			\$	Pension and pro	01	\$		\$
Contract la			\$		ar, machinery, equipment	\$		\$
		efit programs	\$		ther business property	\$		\$
		th care plans (not deductible)	\$	Repairs and main	luded in inventory cost)			\$
	nent	(not deductible)		* *	tuded in inventory cost)	\$		· · · · · · · · · · · · · · · · · · ·
	Gifts \$ Taxes – payroll* \$ \$ Insurance (other than health insurance) \$ Taxes – property \$ \$							
Interest – n			\$	Taxes – property		\$		\$
Interest – o			\$	Taxes – state		\$		\$
Interest = 0			\$	Telephone		\$		\$
			\$	Utilities		\$		\$
	Legal and professional services \$ Utilities \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$							

Other Business	s Expenses – <i>L</i>	ist out type and expens	se amount						
			\$					\$	
			\$					\$	
			\$					\$	
			\$					\$	
			\$					\$	
			\$					\$	
			\$					\$	
			\$					\$	
			\$					\$	
			\$					\$	
	(use a separate fo	orm for each vehicle)			T				
Make/Model					Date car	placed in serv	ice		
		personal use during							
		spouse) have any oth	ner cars for person	al use?		trade in your		Yes N	О
	Do you have evid				Cost of t	trade-in	Trade-in	value	
Yes No Is	s your evidence				\$		\$		
		Mileage					Actual Expens	es	
Beginning of ye					Gas/oil		\$		
End of year odd					Insuran		\$		
Business mileag						fees/tolls	\$		
Commuting mi	ileage					tion/fees	\$		
Other mileage					Repairs		\$		
Generally, you opurposes. Howethen choose bet	vever, to use the tween either the	ne standard mileage standard mileage ra standard mileage ra	te, it must be used	in the f	irst year t				
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Depreciation. Depreciation is the annual deduction that allows you to recover the cost or other basis of your business property over a certain number of years. Depreciation starts when you first use the property in your business. It ends when you either take the property out of service, deduct all your depreciable cost or basis, or no longer use the property in your business. The IRS has outlined a useful life (a set number of years) for most assets.

Equipment Sold or Disposed of During Year				
Asset	Date out of service	Date sold	Selling price/FMV	Trade-in?
			\$	
			\$	
			\$	
			\$	

Disposition of Property. A disposition of property occurs when you sell property for cash or other property, you exchange property for other property, you transfer property to satisfy a debt, you abandon property, your bank forecloses or repossesses your property, or your property is damaged, destroyed, or stolen and you receive property or money in payment.

Business Use of the Home

Area of home must be used regularly and exclusively for business except for storage or daycare.

Note: Managing rental activities or investments does not qualify for business use of the home.

All Taxpayers		For Daycare Only		
A) Business use area (square footage)		1) Hours used for daycare		
B) Total area of home (square footage)		2) Total hours in year	8,760 hrs.	

Enter below only the expenses paid during the period the home was used for business.

Direct expenses benefit only the business use portion of the home. This includes painting or repairs exclusively for the business area.

Indirect expenses are for keeping up and running the entire home, such as mortgage interest and property taxes.

If you bought or sold your home during 2023, copy this worksheet and fill out one for each home.

	Direct	Indirect		Direct	Indirect	
Mortgage interest	\$	\$	Repairs and maintenance	\$	\$	
Property taxes	\$	\$	Utilities	\$	\$	
Insurance	\$	\$	Other	\$	\$	
Rent	\$	\$	Other	\$	\$	
Depreciation of the Home						
Lower of cost or fair market value	of home	\$	Improvements?	Yes No		
Value of land		\$	Casualty losses in 2023?	Yes No		

1) Exclusive Use Test—Business Use of Home

The exclusive use test is met if an area of the home is used only for business. The area can be a room or other separately identifiable space. The space does not need to be marked off by a permanent partition. This test is not met if you use the area both for business and for personal purposes, such as a den used for business during the day and TV viewing during the evening.

The exclusive use test is not required for:

- An area used on a regular basis for storage of inventory or product samples.
- A home used as a daycare facility.

Storage of inventory or product samples—exception to exclusive use test. If you use part of a home for business to store inventory or product samples, you are not required to meet the exclusive use test. However, you must meet all the following tests.

- You are in the business of selling products at wholesale or retail.
- The inventory or product samples are kept in the home for use in the business.
- You home is the only fixed location of the business.
- The storage space is used on a regular basis.
- The storage space is a separately identifiable space suitable for storage.

2) Regular Use Test—Business Use of Home

The regular use test means you must use a specific area of the home for business on a regular basis. Incidental or occasional business use is not regular use. All facts and circumstances are considered in determining whether the business use is regular.

3) Trade or Business Use Test—Business Use of Home

To satisfy the trade or business use test, the portion of the home used for business must be used in connection with a trade or business. If the business use is for a profit-seeking activity that is not a trade or business, the deduction is not allowed.

4) Principal Place of Business Test—Business Use of Home

A trade or business can have more than one location. To qualify for a business use of home deduction, the home must be the principal place of business for that trade or business. To make this determination, the following are considered.

- The relative importance of the activities performed at each place where business is conducted, and
- The amount of time spent at each place where business is conducted.

A home office qualifies under this test if:

- The home office is used exclusively and regularly for administrative or management activities of the trade or business.
- There is no other fixed location where substantial administrative or management activities are conducted.

Self-Employment (SE) Tax

- SE tax is a Social Security and Medicare tax primarily for individuals who are self-employed. It is similar to the Social Security and Medicare tax withheld from the pay of most wage earners. Your payments of SE tax contribute to your coverage under the Social Security system. Social Security coverage provides you with retirement benefits, disability benefits, survivor benefits, and hospital insurance (Medicare) benefits.
- You must pay SE tax if your net earnings from self-employment were \$400
 or more, or you had church employee income of \$108.28 or more. The SE
 tax rules apply no matter how old you are and even if you are already
 receiving Social Security or Medicare benefits.
- The SE tax rate on net earnings is 15.3% (12.4% for Social Security plus 2.9% for Medicare). Only the first \$160,200 (2023) of combined wages, tips, and net earnings is subject to the 12.4% Social Security part of SE tax.