

Sole Proprietorship Tax Organizer*

*This organizer is only for businesses that are reported on your personal income tax return (sole proprietorships and single member LLCs). Here are a few tips for making sure you maximize your deductions:

- Every number should only be used once. That means if you have entered it on another organizer or another line on this organizer, it should not appear anywhere else.
- Round each number to the nearest dollar, but no more than that. Do not estimate.
- All numbers should be totalled. We do not need to see receipts.
- Not sure where to include an expense? Write down what it was for, how much it cost, who you paid for, and the date it was paid. Do not include it in any other total.
- If you list any additional expenses, avoid categories like "other" or miscellaneous". Also, do not use vendors as categories; we need to see "Electric Bill", not "SRP".

Business Name: _____

EIN (if applicable): _____ - _____

Business Address (if different from home address): _____

Who owns the business?: _____

Description of business activity: _____

List the states the business produces income in: _____, _____, _____, _____

Income

Gross receipts/sales: \$ _____ Returns and allowances: \$ _____ Other income: \$ _____

Employees and Contractors

Did you pay any unincorporated entity (contractor, attorney, LLC, etc.) more than \$600? (Choose One): Yes No

If yes, was a Form 1099-MISC issued to each entity or individual*? (Choose One): Yes No

*The IRS requires that you send 1099s by January 31st.

If you had any **employees**, provide all quarterly payroll reports (Form 941 and state reports), and annual payroll reports (Form W-3, W-2s, Form 940, and annual state reports).

Cost of Goods Sold

If your business has inventory, please complete this section.

Beginning inventory: \$ _____ Purchases less personal: \$ _____ Cost of labor: \$ _____

Materials and supplies: \$ _____ Other costs: \$ _____ Ending inventory: \$ _____

Big Ticket Purchases

List equipment (trucks, computers, tools, furniture, etc.) purchased in 2019 for over \$2,500 and not for resale. Don't include these in other totals. Include tax, delivery, and installation of the item in the cost.

Description	Cost	Date placed in service*	Business %
	\$ _____	____/____/____	____%
	\$ _____	____/____/____	____%
	\$ _____	____/____/____	____%
	\$ _____	____/____/____	____%
	\$ _____	____/____/____	____%

*"Date placed in service" is the day the purchase was able to be used. If you started replacing a roof in 2019 but finished it in 2020, the expenses should be included in cost on the 2020 return.

Expenses

Advertising:	\$ _____	Home office:	(See next page)
Car and truck expenses:	(See next page)	Office expenses:	\$ _____
Commissions and fees:	\$ _____	Rent - equipment	\$ _____
Contract labor:	\$ _____	Rent - other	\$ _____
Employee benefits:	\$ _____	Repairs/maintenance:	\$ _____
Family health coverage:	\$ _____	Retirement:	(See next page)
Insurance:	\$ _____	Supplies:	\$ _____
Interest:	(See next page)	Taxes and licenses:	\$ _____
Legal and professional services:	\$ _____	Telephone & Comm.	(See Below)
Health Insurance*:	\$ _____	Travel and meals	(See Below)
Other:	(Use blank spots)	_____:	\$ _____
_____:	\$ _____	_____:	\$ _____
_____:	\$ _____	_____:	\$ _____

Telephone & Communications

Do not prorate total amounts, just provide us with the business %.

	2019 \$ Total	Business %
Land/fax lines (except 1st basic line):	\$ _____	_____ %
Cell phone service (not equipment):	\$ _____	_____ %
Answering/fax/1-800 service:	\$ _____	_____ %
Internet service (not equipment):	\$ _____	_____ %
Cable service (if used for business):	\$ _____	_____ %
_____:	\$ _____	_____ %

TIP: You can calculate the % used for business using any reasonable method;
 (time on calls for business) ÷ (total time on phone)
 might be one,
 (# of calls for business) ÷ (total # of calls)
 would be another.

Travel, Meals, & Entertainment

You cannot deduct the cost of your own groceries or your local lunches, even when "on the job".

- Travel (tickets, hotels, tips, taxi, car rent; not food; not driving): \$ _____
- Meals & entertainment local (with customers or partners): \$ _____
- Meals for employees (feeding your employees and contractors, not yourself): \$ _____
- Meals, out of town* (provide where you travelled below): \$ _____
- Business gifts (clear business purpose; limit \$25 per recipient): \$ _____
- _____ : \$ _____
- _____ : \$ _____

*If you travelled out of town in 2020 on business, provide the following information for each destination:

- City you travelled to: _____
- State you travelled to: _____
- Number of days you were there: _____

Home Office

If you have a separate room or area used exclusively for this business then you may be eligible to claim the home office deduction. Please provide the following information:

Total sq. ft. of home: _____ Total sq. ft. of separate room or area used exclusively for business: _____

Under the new IRS rules, we can use the standard \$5/sq. ft. allowance for home office expenses.

If your home office is larger than 300 sq.ft., has very high expenses, or you have an office outside of your home; only then complete the optional section below:

Rent (actual rent paid if your home is rented, as opposed to owned): \$ _____

Utilities (electricity, water, gas, garbage. Do not include telephone & internet): \$ _____

Insurance (hazard, flood, home warranty; do not include auto/health/life/etc.): \$ _____

Maintenance & repairs to the entire house (not specific to the office area): \$ _____

HOA dues, condominium fees, security monitoring fees and other expenses: \$ _____

_____ : \$ _____

_____ : \$ _____

If you had maintenance or repairs specific to your office area, list them below.

_____ : \$ _____

_____ : \$ _____

Car and Truck Expenses

You can deduct any ordinary and necessary auto expenses related to your business. Examples include driving:

- to sales appointments
- to the bank to take care of business accounts
- to the store to purchase materials and supplies
- to temporary work locations

If you have vehicle expenses, please provide us with the following information, **separately for each vehicle driven:**

Year, make, and model of the vehicle: _____

Ownership status (Choose one): Own Lease The vehicle isn't mine (explain: _____)

Date you acquired the vehicle: ___/___/_____ First date you drove this vehicle for business: ___/___/_____

If this is the first year you've driven this car for business, attach sales contract.

You have the option between deducting actual vehicle expenses **or** the standard mileage rate. You may be able to save more money by providing extra expense data, but mileage data is still required!

Do you keep a written mileage log? (Choose one): Yes No

Miles driven for all purposes (this includes all personal, business, rental and commuting miles): _____

Miles driven for this business: _____

Additional business related vehicle expenses (these are deductible expenses you can take with either method):

Tolls and parking for this business only: \$ _____

Vehicle License Tax: \$ _____

Local transportation: \$ _____

Interest paid on auto loan: \$ _____

Do not pro-rate your numbers for business use, just enter total gas and total expenses for everything.

Gas - total for 2020, business + personal: \$ _____

Repairs, oil, maintenance, tires, washes: \$ _____

Market value when 1st used for business: \$ _____

Inspection & registration: \$ _____

Auto insurance: \$ _____

_____ : \$ _____

If leased - monthly payment: \$ _____

_____ : \$ _____

Small Business Retirement

Small business owners have access to the most favorable retirement plans in the tax code. Among the benefits are:

- Higher contribution limits
- Tax deductions for employer and employee contributions
- Tax credits to the business for starting a plan
- Saver's tax credit for employees
- Flexible investment options
- Tax deferred growth

Do you have a small business retirement plan? (Choose one): Yes No

If you do have a small business retirement plan, was it set up this year? (choose one): Yes No

If you do have a small business retirement plan, what type is it? (choose one):
 401(k) SEP IRA SIMPLE IRA Defined Benefits Plan Other (describe: _____)

Total contributions made on behalf of the owner: \$ _____

Total contributions made on behalf of the employees (do not include deferrals withheld from paychecks): \$ _____

Would you like us to calculate your maximum owner contribution? (choose one): Yes No

Would you like us to calculate your maximum employee contributions? (choose one): Yes No

Did you set up any non-qualified deferred compensation plan/agreement this year? (choose one): Yes No

Plan administrator's contact info:

Name: _____

Phone number: (____) _____ - _____

Email: _____

Business Banking, Business Loans, and Business Credit Cards

You can only deduct the business portion of credit card interest and other mixed business/personal interest.

	2020 Total	Business %
Bank fees (monthly fees, transfer fees, overdraft fees, etc.): \$ _____		_____ %
Interest paid on a business loan or a business credit card: \$ _____		_____ %
_____ : \$ _____		_____ %
_____ : \$ _____		_____ %

Notes
