

BUSINESS ITEMIZER

PLEASE COMPLETE THE QUESTIONNAIRE THOROUGHLY ANSWERING ALL QUESTIONS THAT APPLY TO YOU. THIS QUESTIONNAIRE IS INTENDED AS A PRE-APPOINTMENT ORGANIZER. FOR ADDITIONAL BLANK FORMS, VISIT www.orourketax.com

TAXPAYER NAME _____ BUSINESS NAME _____
PRINCIPAL BUSINESS, INCL. PRODUCT OR SERVICE _____

SOCIAL SECURITY # _____ EMPLOYER ID #(if applicable) _____

BUSINESS ADDRESS _____ PHONE _____
TYPE OF BUSINESS ENTITY: C-CORPORATION _____ S-CORPORATION _____ PARTNERSHIP _____
SOLE PROPRIETOR _____ LLC _____

GROSS RECEIPTS OR SALES: _____ DOES AMOUNT INCLUDE SALES TAX? YES _____ NO _____
IF YOU RECEIVED FORM 1099K, PLEASE BRING IT ALONG WITH YOUR TAX DOCUMENTS.

COST OF GOODS SOLD:

PRODUCT PURCHASED FOR RESALE _____
MATERIALS PURCHASED TO MAKE PRODUCTS SOLD: _____
MAINTAIN INVENTORY? Yes ___ No ___ PROVIDE: BEG. INVENTORY _____ END INVENTORY _____

EXPENSES: (Provide expense amounts for categories shown. Note separate sections for equipment purchases, vehicle expense, insurance, phone, travel, interest, and office in your home expense.)

ADVERTISING(incl yellow pages) _____	BANK CHARGES _____
OFFICE SUPPLIES _____	GENERAL SUPPLIES _____
LEGAL & CONSULTING FEES _____	OTHER FEES (Describe) _____
MERCHANT FEES(Cr Card) _____	POSTAGE & SHIPPING _____
SHOP OR OFFICE RENT _____	EQUIPMENT RENT _____
REPAIRS & MAINTENANCE _____	SMALL TOOLS _____
DUES & SUBSCRIPTIONS _____	PERMITS _____
PRINTING _____	UNIFORMS(Not work clothes) _____
SHOP OR OFFICE UTILITIES _____	SUBCONTRACTOR EXPENSE _____
SALES TAX _____	PERSONAL PROPERTY TAX _____
SHOP OR OFFICE REAL ESTATE _____	PENSION PLAN CONTRIBUTIONS _____
EMPLOYEE WAGES _____	EMPLOYMENT TAXES _____

IF WE DO NOT DO YOUR PAYROLL, PLEASE BRING YEAREND PAYROLL REPORTS (940, W3,)

OTHER EXPENSES(List description and amount):

INSURANCE EXPENSE:

FIRE & CASUALTY _____	LIABILITY _____
CAR & TRUCK _____	HEALTH _____
LIFE _____	WORKERS COMP _____

OTHER(Describe): _____

PHONE:

SHOP OR OFFICE _____ CELL PHONE _____ % BUSINESS USE _____
HOME PHONE:(If you have only one phone, no deduction except for business long distance charges.) _____
SEPARATE BUSINESS LINE CHARGE _____ BUSINESS LONG DISTANCE _____

CAR AND TRUCK EXPENSE:

DID YOU USE MORE THAN ONE VEHICLE FOR BUSINESS? IF SO, WE WILL NEED INFORMATION BELOW FOR EACH VEHICLE.

DID YOU BUY A NEW CAR, TRUCK, OR MOTORCYCLE, FOR USE IN YOUR BUSINESS IN 2022? IF YES, HOW MUCH (including sales tax)? _____

WHAT IS THE DATE OF PURCHASE? _____ PLEASE BRING PURCHASE PAPERS ALONG.

**2022 BUSINESS MILES: (Jan –Jun) _____ (Jul-Dec) _____
(If you use the standard mileage rate, skip to the next section)**

ACTUAL VEHICLE EXPENSES:

GAS _____ REPAIRS _____ INSURANCE _____ LEASE EXPENSE _____

IF NEW VEHICLE PURCHASE, PLEASE PROVIDE PAPERWORK FROM DEALER.

COST OF NEW VEHICLE _____ TRADE IN OLD VEHICLE? YES _____ NO _____

TRAVEL EXPENSE: (Expenses are only allowed for overnight trips, except for client entertainment.)

HOTEL _____ AIRFARE _____ CAB _____ PARKING _____ TOLLS _____

CLIENT ENTERTAINMENT _____ MEALS(Away from Home) _____

IF YOU TRAVELED TO OTHER CITIES, PROVIDE LOCATION AND DAYS SPENT THERE.

INTEREST:

BANK LOANS _____ REAL ESTATE LOANS _____ BUSINESS VEHICLE _____

CREDIT CARD: (Deductible only for business % of card interest) TOTAL _____ BUS % _____

OFFICE IN HOME: (If you qualify, we will need the following information)

SQUARE FOOTAGE OF OFFICE/SHOP _____ TOTAL SQUARE FOOTAGE OF HOUSE _____

DAYCARE OPERATORS ONLY: # HOURS CHILDREN AT YOUR HOME DURING THE YR _____

SQUARE FOOTAGE OF AREA NEVER USED BY CHILDREN _____

MEALS SERVED: #BREAKFASTS _____ #LUNCHS _____ #DINNERS _____ #SNACKS _____

HOME EXPENSES:(Totals for the entire home)

MORTGAGE INTEREST _____ REAL ESTATE TAX _____ HOUSE INSURANCE _____

GAS & ELECTRIC _____ WATER _____ CABLE TV _____

HOME REPAIRS AND MAINTENANCE _____ APT/HOUSE RENT _____

ORIGINAL COST OF YOUR HOME PLUS IMPROVEMENTS _____ LAND VALUE _____

EQUIPMENT:

PROVIDE INFORMATION ON EACH PIECE OF EQUIPMENT PURCHASED:

DESCRIPTION	AMOUNT	DATE	% BUSINESS USE
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_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

EQUIPMENT SALES? (Provide same information below)

_____	_____	_____	_____
_____	_____	_____	_____