

## SCHEDULE C BUSINESS INTAKE WORKSHEET

Please attach all 1099, 1098, K-1 and similar reports

Taxpayer Name: \_\_\_\_\_ Employer TIN: \_\_\_\_\_

Business Name: \_\_\_\_\_ Business Activity: \_\_\_\_\_

Business Address: \_\_\_\_\_ Business Product: \_\_\_\_\_

<b>Income:</b>		<b>Expenses:</b>	
Gross receipts or sales	\$ _____	Advertising	\$ _____
	\$ _____	Auto (actual miles)	_____
	\$ _____	Truck/pickup (actual) miles	_____
	\$ _____	Commissions	\$ _____
		Contract labor	\$ _____
Less: Returns & Allowances	\$ _____	Employee benefit program	\$ _____
	\$ _____	Insurance	\$ _____

<b>Cost of Goods Sold:</b>		Rent or lease:	\$ _____
Inventory beginning of year	_____	Machinery & equipment	\$ _____
Purchases	+ _____	Other business prop	\$ _____
Less Cost of items for personal use	- _____		
Subtotal:	\$ _____	Repairs & Maintenance	\$ _____

<b>Cost of labor</b>		Supplies	\$ _____
(do not include salary paid to yourself) \$	_____		
Materials & Supplies	_____	<b>Wages paid:</b>	\$ _____
Other costs	_____	<b>Taxes:</b>	\$ _____
Subtotal:	_____	FICA (employer's share)	\$ _____
Less Inventory end of year:	- _____	FUTA (Federal unemployment)	\$ _____
<b>COST OF GOODS SOLD AT END OF YEAR</b>	<b>_____</b>	State Unemployment	\$ _____

<b>Home Office deductions</b>		Real estate taxes	\$ _____
total square feet	_____	Sales tax (If not included in gross receipt)	\$ _____
business square feet	_____	Utilities	\$ _____
Utilities	\$ _____	Cell phone	\$ _____
Taxes	\$ _____	Bank services charges	\$ _____
Insurance	\$ _____	Bank Charges	\$ _____
Repairs	\$ _____	Dues & publications	\$ _____

**Additional notes:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Laundry/cleaning/janitorial	\$ _____
Licenses & permits	\$ _____