

CODE- 4 TAX SERVICES

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SMALL BUSINESS DEDUCTIONS WORKSHEET FOR TAX YEAR: _____

This form is intended to be used in conjunction with the General Information Worksheet. Please complete all information as thoroughly as possible. If sending supporting documentation, send photocopies only. Keep all receipts and documentation used to prepare this form in a safe location for 5-7 years. Please write legibly. Use separate sheet if needed.

NAME OF BUSINESS: _____ ID# _____

PRINCIPAL BUSINESS ACTIVITY: _____

BUSINESS ADDRESS (if different): _____

NEW BUSINESS ACTIVITY? Y N DISCONTINUED BUSINESS THIS YEAR?: Y N

INCOME

Income from sales or services _____

Less returns or allowances _____

Interest income _____

Other income _____

Did you make payments requiring 1099's? Y N

If yes, were required forms filed? Y N

Cost of Goods Sold: (for manufacturing business or those that carry inventory)

Purchases for resale _____

Cost of labor _____

Materials/supplies _____

Freight/transportation _____

Beginning Inventory (as of Jan. 1) _____

Ending Inventory (as of Dec. 31) _____

EXPENSES

Advertising _____

Promotional items/business gifts _____

Bank fees/financial charges _____

Interest paid (business) _____

Commissions/fees paid _____

Contract labor _____

Employee benefits _____

Insurance _____

Legal & professional services _____

DBA fees _____

Dues/memberships/associations _____

Publications/subscriptions _____

Taxes/licenses/permits _____

Office supplies _____

Equipment purchases _____

(list individual items & prices on back)

Computer/laptop/tablet purchase _____

Percentage business use _____%

Computer accessories/equipment _____

Cell phone purchase _____

Percentage business use _____%

Cell phone service _____

Internet service _____

Percentage business use _____%

Web services/subscriptions/software _____

Postage/shipping _____

Repairs/maintenance _____

Rent - equipment/other _____

Rent - business property _____

Travel - hotel/air/taxi/rental car _____

Meals & entertainment for clients _____

Utilities _____

Education/Conferences _____

Open house expenses _____

Signs up/down _____

Self-employed health insurance _____

Wages/salaries paid _____

Payroll expenses _____

Other: _____

AUTO EXPENSES

If new vehicle, make/cost _____

Date purchased/placed in service _____

Total miles driven (business & non) _____

Total business miles driven _____

Gas/oil/repairs/wash/wax/etc. _____

Insurance _____

Home Office Expenses: See Home Office Worksheet

Code-4 Tax Services e-file & payment policy: Returns will be e-filed at no extra charge. E-files will not be submitted until signed acknowledgment & payment are received. Payment can be made by cash, check, Visa, Mastercard, Discover, American Express or Square Cash transfer. Mail-in Clients: a secure pay link will be sent to you if you prefer to pay by credit card.