Silva Tax Group

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BUSINESS ORGANIZER

Use for your business expenses for your individual (Schedule C), corporate (S Corp or LLC) or partnership (regular or LLC) tax returns

Section 1 - Identity: Complete entire section	tion for all businesse	es (See Other Organizer for)	W2 Employee Business Exp)	
Business owner name:		Emp	loyer ID#	
Business name (legal or fictitious name):			Tax year:	
Description of product or service:			Indicate Tax Type (select one)	
Business address (if not home address):			Individual/Proprietorship	
			(Schedule C)	
Check if legally formed as an LLC			S Corporation (1120S)	
Check if you did NOT materially participate	in the business during the	year	Partnership (1065)	
Section 2 - Business Income: Complete a			,	
(attach Form(s) 1099, if any)		Please note: the following exp	ense items are listed on pages 2 & 3	
Gross business sales receipts		Cost of sales items for goods & products sold		
(including portion not on 1099 Forms)	\$	Vehicle expenses (mileage, acquisition, associated expenses)		
Less: returns & allowances	\$	Business equipment, computers, furniture, etc.		
Other income (indicate type):		Home office expenses	,	
Chief mostric (marcate type).	\$	'	or W2 wage earner has a separate organizer	
	* * * * * * * * * * * * * * * * * * *			
Section 3 - General Business Expe	ense Deductions	· Complete applicable I	ines only	
Advertising	\$		\$ S	
Commissions & fees paid (1099-MISC)	\$		\$	
Contract labor paid (1099-MISC)	\$	Credit card merchant fees	\$	
Entertainment (Business/Nondeductible)	\$		\$	
Health insurance	\$		\$	
Insurance - business (non-vehicle)	\$		\$	
Interest - mortgage (1098) on business property onl			\$	
Interest - other (trade, credit card, non-auto loans)	\$	Marketing supplies & expense	\$	
Professional services - legal & other	\$	•	\$	
Professional services - tax & accounting	\$	Printing	\$	
Meals (100%-with business associates or in travel)	\$	Promotion	\$	
Office supplies & expense (list assets below/page 2	\$	Recruiting	\$	
Rent - machinery & equipment	\$	Telephone - cell phone	\$	
Rent - building	\$	Telephone - exclusive business I	line or fax	
Repairs & maintenance (non-vehicle)	\$	Uniforms (not usable outside wor		
Supplies	\$	Other expenses (not above or be	elow/pages 2-3)	
Taxes - payroll	\$		\$	
Taxes - property	\$		\$	
Taxes - sales (if included in income above)	\$		\$	
Taxes - licenses & fees	\$		\$	
Travel - lodging & transportation	\$		\$	
Utilities (list home office on page 2)	\$	-Check if paid any	person, LLC or partnership \$600 or more	
Wages paid (attach W-2 & W-3 forms)	\$	-Check if required	1099 was issued for \$600 or more paid	

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Section 4 - Vehicle Expenses: Comp	lete only if app	olicable		
Check to affirm you have documented evidence	e to support this deduc	ction. Vehicle	± #1	Vehicle #2
Date vehicle was placed in service				
Vehicle year, make & model				
TOTAL mileage driven during the year				
BUSINESS mileage driven during the year (do	1)			
Check if using STANDARD MILEAGE and proc	eed to Section 5			
Check if using ACTUAL EXPENSES & complete	e information below			
Operating expenses including gasoline, oil, rep	airs, maintenance,			
insurance, registration, (not traffic violations),	etc.	\$	\$	
Business parking fees & tolls (exclude persona	l)	\$	\$	
If you OWN the vehicle(s):				
Date purchased				
Vehicle cost		\$	\$	
Vehicle loan interest paid during the year		\$	\$	
If you LEASE the vehicle(s):				
Date lease began				
Length of lease				
Cost of vehicle if you had purchased it		\$	\$	
Down payment on lease		\$	\$	
Lease payments for the year		\$	\$	
Section 5 - Business Assets Acquire	d			
Did you acquire assets used in your business durin) equipment furniture etc.)?	Yes	No
If Yes, provide details below for each; if no, pro				
	ceed to Section 6 (ii fi	•	•	COST
DESCRIPTION		DATE PURC		COST
			\$	
			\$	
		_	*	
		_	\$	
		_	\$	
Section 6 - Cost of Sales: only if selling goo	ds/product	Section 7 - S Corp	o & Partnership It	ems Only
Inventory on January 1	\$	Cash in bank on January 1		\$
Goods purchased	\$	Cash in bank on December 3	31	\$
Less: items removed for personal use	\$	Credit cards, line of credits 8	notes payable on Jan. 1	\$
Less: inventory on December 31	\$	Credit cards, line of credits &	k notes payable on Dec. 31	\$
Other production costs		Personal funds deposited in	business during year	\$
Labor for production & manufacturing	\$	Funds paid out to owner(s) d	luring the vear	\$
Materials & supplies for product	\$	Investments or foreign bank		No
Other product costs (indicate type):	*			
Since product cools (maiotic type).	\$			
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Section 8 - Home Office (for individual proprietorship/Schedule C only)						
Check if you meet the primary & exclusive use test. If you have questions see below (required for both safe harbor & actual expense methods).						
Space (square feet) used exclusively for your business office/storage						
Total space (square feet) of your home						
Check if you intend to us safe harbor method this year rather than actual expense method (if so, amounts below are not required).						
Date home acquired & date home placed in servi	ce					
Original cost of home & cost of subsequent impro	ovements	\$	\$			
Deductible home mortgage int (100% from Form 1098)	\$	HOME OFFICE SAFE HARBOR AI	DVANTAGES & DISADVANTAGES			
Real estate taxes paid (100%)	\$	+ easier (recordkeeping and calculation of deductions skipped)				
Insurance (100%)	\$	+/- no depreciation (lose current deduction but avoid future recapture)				
Rent (100%)	\$	- limited (both square footage (300) and amount (\$5 x 300 = \$1500))				
Repairs & maintenance (whole house)	\$	- no carryover if Schedule C loss (vs. carryover with actual exp.)				
Repairs & maintenance (specific to business space)	\$	- prohibited if any employer reimbursement received				
Utilities (100%)	\$	- if Sch. C income, may result in lower deduction & higher				
Other expenses at 100% (security, HOA, etc.)		income & social security/self-emp	ployment taxes			
	\$	- prohibits use of any prior year actu	ual expense carryover			
	\$	If you desire an analysis for your situ	ation, check here and complete			
	\$	all the data for the actual expense r	method:			
Home Office Rules for Schedule C Business Entities (not allowed for S Corp or Partnership):						
You must meet one of the following three usage requirements:						
(1) Separate structure not attached to the dwelling unit that is used exclusively & regularly for your business activity.						
(2) If within your living structure, a room/space used regularly to physically meet with customers and never used for personal purposes.						
(3) Or, if within your living structure, a room/space used as the only office space for your business (no commercial location) and you either spend the majority of your time working there (not out of the house) or it is the only suitable place for performing administrative or						
management activities required by the business. If you sell retail product, it may also include the storage space for the product.						
2) If you qualify under any one of the three rules above, the home office must be used EXCLUSIVELY for the business.						
3) It must be regularly used for the business; you must use the home office in connection with your work on a continuous, ongoing or recurring						
basis. Generally, at least a few hours every week. Occasional or sporadic business usage will not pass the test.						