2024 Individual Taxpayer Organizer Sole Proprietorship

(See next page for Organizer)



Phone: (208) 290-6145 Fax: (888) 693-7256 E-mail: info@bce-cpa.com Web : www.bce-cpa.com

| Taxpayer | | | | | | Tax ID # * | | | | |
|--|---------------------|-----------|------------------|-------|------------------|--|------------|------------------|----------|------------------|
| First Name | M.I. | Last | Name | Em | nail | I | | IP PIN | | |
| Occupation | | Date o | of birth | | | Are you nev | v to our | firm? | Yes | No |
| Address | | City | | | | State | | Zip | | |
| County | | Prima | ry phone | | | Secondary p | hone | | | |
| Driver's License No. | | | | Sta | te Issue | Date | Exp | . Date | | |
| Spouse | | | | | | Tax ID # * | | | | |
| First Name | M.I. | Last | Name | Em | nail | | | IP PIN | | |
| Occupation | | Date o | of birth | | | Are you nev | v to our | firm? | Yes | No |
| Address (If different from Taxpayer) | | City | | | | State | | Zip | | |
| County | | Prima | ry phone | | | Secondary p | hone | | | |
| Driver's License No. | | 1 | | Sta | te Issue | Date | Exp | . Date | | |
| If you moved during 2024, enter your | previous address | 3. | | | | Date of mov | ve | | | |
| Marital status on 12/31/24: Single Were you divorced or separated durin <i>Note:</i> Individuals in registered domes | ng the year? Ye | |) | W | Vere there any | gistered Domesti deaths in the fan ed married for fe | nily? | Yes N | 0 | |
| Names of dependent children <i>Child's full name</i> | Tax ID # | ÷ * | IP PIN | | Date of birth | Months lived home in 2024 | | lationship | | ollege ıdent? |
| | | | | | | | | | | |
| Did any of the children have unearned Is it anticipated that a different taxpay | | | | | 2 | the children hav ent for tax year 2 | | bility? Yes N | Yes o | No |
| Other dependents or people who liv | ed with you | | | | 1 | | | | | |
| Name | <i>Tax ID</i> # * | | IP PIN | 1 | Date of birth | Months lived in home in 2024 | Relati | onship | Inc | ome |
| | | | | | | | | | | |
| Bank information: Use for Direct d | eposit of refund | Direc | t debit of balar | nce c | due Name of l | bank | | 1 | | |
| Checking Savings Routing tra | nsit number | | | | Account nu | mber | | | | |
| Ask your tax preparer for information | about depositing | g a refu | nd into an IRA | acco | ount or splitti | ng the deposit in | to more | than one | acco | unt. |
| *A Tax ID # is a Social Security Number (SS | N), adoption taxpay | /er ident | ification number | r (AT | TN), or an indiv | idual taxpayer ider | ntificatio | n number | (ITIN |). |

Questions—All Taxpayers

(Provide related statements or other documentation.)

"You" refers to both taxpayer and spouse—ask your preparer if you are unsure about a question.

| | | | 1 2 1 | | | 1 | | | |
|----------------------|--|---|---|---|---|--|--|-----------------------|----|
| | Yes | No | Are either you or you | ur spouse legally blind? | | | | | |
| ĺ | Yes | No | Have you received a | ny notice from the IRS or stat | e revenue o | department within the pa | ast year? If yes, provid | le a copy. | |
| | Yes | No | Did you pay or recei Paid Received | | Recipient | 's SSN | Date of divorce or sep | aration | |
| | Yes | No | Did you purchase he | alth insurance through a pub | lic exchang | ge/marketplace? (Provid | e Form 1095-A.) | | |
| XES | Yes | No | Will there be any sig | nificant changes in income or | deduction | s next year, such as retire | ement? | | |
| LIFESTYLE & TAXES | Yes | No | Did you pay anyone | for domestic services (e.g., na | nny, house | ekeeper, cook, caretaker) | in your home? | | |
| STYLE | Yes | No | Did you purchase an | energy-efficient, hybrid, or e | lectric vehi | icle? | | | |
| LIFE | Yes | No | Are you involved in | bankruptcy, foreclosure, repo | ssession, o | r had any debt (including | g credit cards) cancell | ed? | |
| ĺ | Yes | No | Are you a member o | f the military? | | State of residency | | | |
| | Yes | No | Were you a citizen of | or did you live in a foreign c | ountry? | Foreign country | | | |
| | Yes | No | Do you own or have | financial interest in a foreign | bank or fir | nancial account? Maximi | ım value in 2024 \$ | | |
| | Yes | No | Would you like to all Designee's name | ow your tax preparer or anot Pho | her person <i>ne number</i> | to discuss your return w | vith the IRS? PIN (any five digits, |) | |
| | Yes | No | Were any children bo | orn or adopted in 2024? (Provi | de statemen | t for other expenses.) | | | |
| | Yes | No | Were any children at | tending college? (Provide Form | n 1098-T an | d Form 1098-E.) | | | |
| | | | Year in college | Paid by you: Tuition \$ | | Books \$ | Student loan interest | \$ | |
| CHILDREN & EDUCATION | | | | Paid by student: Tuition \$ | | Books \$ | Student loan interest | \$ | |
| UCA | Yes | No | Did you pay any tuit | ion for a private school for a | dependent | or take classes yourself? | | | |
| & EL | | | Student | | | | Amount paid \$ | | |
| DREN | | | Name and address of s | chool | | | | | |
| CHILL | Yes | No | Did you pay for child | d or dependent care so you co | ould work o | or go to school? (Provide s | statement if applicable) | | |
| | | | Name of provider | | | | EIN or SSN | | |
| | | | Address | | | | Amount paid \$ | | |
| | Yes | No | Did you make any co | ontributions to a 529 plan in 2 | 024? If yes, | , provide details. | | | |
| | Yes | No | Did you, or will you, | contribute any money to an | IRA for 202 | 24? | Traditional IRA | Roth IF | A |
| | Yes | No | Did you roll over any | y amounts from a retirement a | account in | 2024? | | | |
| si | Yes | No | Did you sell or trans | fer any stock or sell rental or i | investment | property? | | | |
| INVESTMENTS | Yes | No | Did you receive any | income from an installment s | ale? | | | | |
| IVES | Yes | No | Did you have any in | vestments become worthless | or were yo | u a victim of investment | theft in 2024? | | |
| 5 | Yes | No | Were you granted, or | did you exercise, any emplo | yee stock o | ptions during 2024? | | | |
| | Yes | No | | as a reward, award, or payme a financial interest in a digital | | | | | OS |
| | Yes | No | Did you or do you r | 1 | | | | | |
| s | | 140 | | plan to, contribute money by A | April 15, 20 | 25 to an HSA for 2024? I | f yes, provide details. | | |
| STIONS | Yes | No | | Plan to, contribute money by A erest on a loan for a boat or R | · | | | | |
| DEDUCTIONS | Yes Yes | | Did you pay any inte | | V that has l | iving quarters? If yes, pr | ovide details. | | |
| DEDUCTIONS | | No | Did you pay any inte Did you pay sales ta: | erest on a loan for a boat or R | √ that has l 24, such as | iving quarters? If yes, pr a vehicle, boat, or home | ovide details. | | |
| | Yes | No No | Did you pay any inte Did you pay sales ta Did you make any cl | erest on a loan for a boat or R kes on a major purchase in 20 | V that has l 24, such as 1? If yes, pr | iving quarters? If yes, pr a vehicle, boat, or home rovide details. | ovide details. | | |
| | Yes Yes | No No No | Did you pay any inte Did you pay sales ta: Did you make any cl Did you work from a | erest on a loan for a boat or R kes on a major purchase in 20 naritable contributions in 2024 | V that has l 24, such as 4? If yes, pi for your bu | iving quarters? If yes, pr a vehicle, boat, or home rovide details. Isiness? | ovide details. | | |
| | Yes Yes Yes | No No No | Did you pay any inte Did you pay sales ta: Did you make any cl Did you work from a Did you receive inco | erest on a loan for a boat or R kes on a major purchase in 20 naritable contributions in 2024 home office or use your car | V that has l 24, such as 4? If yes, pr for your bu my activity | iving quarters? If yes, pr a vehicle, boat, or home rovide details. Isiness? y (e.g. Airbnb, Uber, etc.) | ovide details. ? ? | re? | |
| | Yes Yes Yes Yes | No No No No | Did you pay any inte Did you pay sales ta: Did you make any cl Did you work from a Did you receive inco Do you own a busine | erest on a loan for a boat or R kes on a major purchase in 20 naritable contributions in 2024 home office or use your car f me from a sharing/gig econo | V that has l 24, such as 4? If yes, pr for your bu my activity hip, corpo | iving quarters? If yes, pr a vehicle, boat, or home rovide details. siness? y (e.g. Airbnb, Uber, etc.) ration, LLC, farming acti | vities, or other ventur | re? | |
| BUSINESS | Yes Yes Yes Yes | No No No No No | Did you pay any inte Did you pay sales ta: Did you make any cl Did you work from a Did you receive inco Do you own a busine Did you purchase or | erest on a loan for a boat or R kes on a major purchase in 20 naritable contributions in 2024 home office or use your car me from a sharing/gig econo ess or an interest in a partners | V that has l 24, such as 4? If yes, pr for your bu my activity ship, corpor- year? If yes | iving quarters? If yes, pr a vehicle, boat, or home rovide details. usiness? y (e.g. Airbnb, Uber, etc.) ration, LLC, farming acti , provide closing stateme | vities, or other ventur nt. | | |
| BUSINESS | Yes Yes Yes Yes Yes | No No No No No | Did you pay any inte Did you pay sales ta: Did you make any cl Did you work from a Did you receive inco Do you own a busine Did you purchase or If you sold a home, d | erest on a loan for a boat or RV kes on a major purchase in 20 haritable contributions in 2024 home office or use your car f me from a sharing/gig econo less or an interest in a partners sell a main home during the y | V that has l 24, such as 4? If yes, pr for your bu my activity ship, corpo year? If yes comebuyer | iving quarters? If yes, pr a vehicle, boat, or home rovide details. tsiness? y (e.g. Airbnb, Uber, etc.) ration, LLC, farming acti , provide closing stateme Credit when it was purcl | vities, or other ventur nt. hased? If yes, provide | | |
| BUSINESS | Yes Yes Yes Yes Yes Yes | No No No No No No | Did you pay any inte Did you pay sales ta: Did you make any cl Did you work from a Did you vork from a Did you receive inco Do you own a busine Did you purchase or If you sold a home, d Did you refinance a | erest on a loan for a boat or R kes on a major purchase in 20 naritable contributions in 2024 home office or use your car me from a sharing/gig econo ess or an interest in a partners sell a main home during the y id you claim the First-Time H | V that has l 24, such as 4? If yes, pr for your bu my activity hip, corpor- year? If yes comebuyer ity loan? If | iving quarters? If yes, pr a vehicle, boat, or home covide details. siness? y (e.g. Airbnb, Uber, etc.) ration, LLC, farming acti , provide closing stateme Credit when it was purch yes, provide closing stat | vities, or other ventur nt. hased? If yes, provide ement. | details. | |
| BUSINESS | Yes Yes Yes Yes Yes Yes Yes | No No No No No No No | Did you pay any inte Did you pay sales ta: Did you make any cl Did you work from a Did you receive inco Do you own a busine Did you purchase or If you sold a home, d Did you refinance a Did you use any more | erest on a loan for a boat or RV kes on a major purchase in 20 haritable contributions in 2024 home office or use your car f me from a sharing/gig econo less or an interest in a partners sell a main home during the y id you claim the First-Time H mortgage or take a home equi | V that has l 24, such as 4? If yes, pi for your bu my activity ship, corpo- year? If yes fomebuyer ty loan? If oses other | iving quarters? If yes, pr a vehicle, boat, or home rovide details. tsiness? y (e.g. Airbnb, Uber, etc.) ration, LLC, farming acti , provide closing stateme Credit when it was purcl yes, provide closing stat than to buy, build, or sul | ovide details. ? ? vities, or other ventur nt. hased? If yes, provide ement. ostantially improve ye | details. | |
| HOME BUSINESS | Yes Yes Yes Yes Yes Yes Yes Yes | No No No No No No No No | Did you pay any inte Did you pay sales ta: Did you make any cl Did you work from a Did you vork from a Did you receive inco Do you own a busine Did you purchase or If you sold a home, d Did you refinance a Did you use any mon Did you make any mon | erest on a loan for a boat or RV kes on a major purchase in 20 haritable contributions in 2024 home office or use your car f me from a sharing/gig econo less or an interest in a partners sell a main home during the y id you claim the First-Time H mortgage or take a home equi stgage loan proceeds for purp ew energy-efficient improven | V that has l 24, such as 4? If yes, pi for your bu my activity ship, corpo- year? If yes fomebuyer ty loan? If oses other | iving quarters? If yes, pr a vehicle, boat, or home rovide details. siness? y (e.g. Airbnb, Uber, etc.) ration, LLC, farming acti , provide closing stateme Credit when it was purch yes, provide closing stat than to buy, build, or sul ur home? If yes, provide | ovide details. ? ? vities, or other ventur nt. hased? If yes, provide ement. ostantially improve ye | details. | |
| | Yes Yes Yes Yes Yes Yes Yes Yes Yes Yes | No No No No No No No No matio | Did you pay any inte Did you pay sales ta: Did you make any cl Did you work from a Did you vork from a Did you receive inco Do you own a busine Did you purchase or If you sold a home, d Did you refinance a Did you use any mon Did you make any mon | erest on a loan for a boat or R kes on a major purchase in 20 haritable contributions in 2024 home office or use your car f me from a sharing/gig econo ess or an interest in a partners sell a main home during the y id you claim the First-Time H mortgage or take a home equi etgage loan proceeds for purp ew energy-efficient improven nt Part-year resident | V that has l 24, such as 4? If yes, pr for your bu my activity ship, corpo- year? If yes comebuyer ity loan? If oses other hents to you | iving quarters? If yes, pr a vehicle, boat, or home rovide details. siness? y (e.g. Airbnb, Uber, etc.) ration, LLC, farming acti , provide closing stateme Credit when it was purch yes, provide closing stat than to buy, build, or sul ur home? If yes, provide | ovide details. ? ? vities, or other ventur nt. hased? If yes, provide ement. ostantially improve yo details. | details. our home? | |

Income Worksheet

Provide to your preparer all Forms W-2, 1099-INT, 1099-DIV, 1099-R, 1099-MISC, 1099-NEC, 1099-K, and other income reporting statements. Do not list dollar amounts for the following forms. Your preparer will report the appropriate amounts.

| | e "T" for taxpayer, "S" for spouse, "J" for jo | oint | | | Pro | vide additional statemen | ts if mo | ore room is needed |
|----------|--|---------------|-----------|-----------|-------------|--------------------------|----------|--------------------|
| | W-2—Wage and Tax Statement | | | | 1 | | | |
| T/S | Employer name | | | T/S | Employ | er name | | |
| | 1) | | | | 4) | | | |
| | 2) | | | | 5) | | | |
| | 3) | | | | 6) | | | |
| Forms | 1099-INT—Interest Income | | | | | | | |
| T/S/J | Name of issuer | | | T/S/J | Name of | f issuer | | |
| | 1) | | | | 4) | | | |
| | 2) | | | | 5) | | | |
| | 3) | | | | 6) | | | |
| Forms | 1099-DIV—Dividends and Distributions | | | | | | | |
| T/S/J | Name of issuer | | | T/S/J | Name of | f issuer | | |
| | 1) | | | | 4) | | | |
| | 2) | | | | 5) | | | |
| | 3) | | | | 6) | | | |
| Forms | 1099-R—Distributions From Pensions, An | nuities, Ret | irement | or Profit | -Sharing l | Plans, IRAs, Insurance C | ontract | s, Etc. |
| T/S | Name of issuer | | | T/S | Name of | f issuer | | |
| | 1) | | | | 4) | | | |
| | 2) | | | | 5) | | | |
| | 3) | | | | 6) | | | |
| If the d | istribution is before age 59½, give a reason | to determin | e if an e | exception | to penalty | y applies. | | |
| Tax-Exe | empt Interest (such as municipal bonds— | include state | ement) | | | | | |
| Payer | | \$ | | Payer | | | | \$ |
| Other I | ncome | | | | | | | 1 |
| State ta | x refund | | \$ | | | Unreported tips | \$ | |
| Unemp | loyment compensation | | \$ | | | Other | \$ | |
| Social S | Security (taxpayer)—provide SSA-1099 or | RRB-1099 | \$ | | | | \$ | |
| Social S | Security (spouse)—provide SSA-1099 or RI | RB-1099 | \$ | | | | \$ | |
| Gambli | ng income—provide Form W-2G | | \$ | | | | \$ | |
| Busines | ss income (see Sole Proprietorship Tax Organ | izer) | | | | Stock sales | See " | Sales and Exchange |
| | income (see <i>Rental Property Tax Organizer</i>) | | | | | Sale of other property | | sheet" below. |
| | s and Exchanges Works | heet | | | | | | |
| | e information about sales of stock, real esta | | | | sith Downey | - 1000 P 1000 C | | |

Provide information about sales of stock, real estate, or other property, along with Forms 1099-B, 1099-S, or other supporting statements.

| Description of property | Purchase date | Cost/basis | Sale date | Sale price |
|-------------------------|---------------|------------|-----------|------------|
| | | \$ | | \$ |
| | | \$ | | \$ |
| | | \$ | | \$ |

Notes:

• When stock is sold, you will usually receive Form 1099-B, *Proceeds From Broker and Barter Exchange Transactions*, reporting the proceeds from the sale. However, your statement will not always provide the cost/basis information necessary to compute gain or loss. If the statement does not contain the cost/basis information, you must provide it. You may need to contact your broker for questions about cost/basis and purchase dates of your stock accounts.

• Often, "transfers" of stock or mutual funds within a brokerage account are actually sales of one type of stock and purchase of another. Even if you did not receive any cash from the transaction, you may have taxable gain or loss.

• If your stock dividends are automatically reinvested, the dividends will be taxable even though you did not receive any cash. The transaction is treated as if you had received cash and purchased additional stock. When the stock is sold, the amount reinvested over the years is taken into account. You may need to contact your broker for questions about the amount of reinvested dividends.

• If you sold property other than stock, your taxable gain or loss will be determined by your cost/basis. The cost/basis is usually the original purchase price plus improvements (the cost of repairs and maintenance are not taken into account for cost/basis).

Itemized Deductions Worksheet

Deductions must exceed \$14,600 Single, \$29,200 MFJ/QSS, \$21,900 HOH, or \$14,600 MFS to be a tax benefit.

| include cost f | or dependents—do | 7.5% of income to be not include any expe with funds from an F | enses that were | Charitable Contributions. If over \$500 in noncash charitable contributions, provide details of contributions. Rules require that the taxpayer retain documentation for all contributions. | | | | |
|------------------------------------|---|---|-----------------------|---|--|------------------------------|-----------------|--|
| Dentists | \$ | Hospitals | \$ | Monetary (cash, check, credit card) \$ | | | | |
| Doctors | \$ | Insurance | \$ | Noncash contributions (FMV). Clothing or household | | | | |
| Equipment | \$ | Prescriptions | \$ | items must be in good used condition or better. \$ | | | | |
| Eyeglasses | \$ | Other | \$ | | Did you transfer funds from an IRA directly to a | | | |
| Medical miles | | @ 21¢ | | | No | @ 14¢ | \$ | |
| | | paid for full or partia | | Charitable mileag Casualty and Th | | @ 14¢ | | |
| State withhole | | siness use of the hom | e. Reported on W-2 | | | ected damage or loss | of property, or | |
| | d taxes—paid in 20 |)24 | \$ | a theft in a federa | lly-declared disas | ter area, provide deta | | |
| | _ | 024 | \$ | preparer. Yes | No | | | |
| Real estate tax Real estate tax | | | \$ | | | ions. Miscellaneous | | |
| | | | \$ | deductions subject to the 2% AGI limitation are not deductible on the federal return. However, these expenses may be deductible on your sta | | | | |
| Personal prop | , | 2024 | | return. For use of | home, auto milea | ge, or other job-relate | ed expenses, | |
| 1 , | efund—received ir | 1 2024 | \$() | by your employer | | sheet. Were any expe | nses reimbursed | |
| Foreign tax pa Other | 110 | | \$ | Dues | \$ | Subscriptions | \$ | |
| | | | \$ | Investment | \$ | Supplies | \$ | |
| Other | | | \$ | expenses | Ψ | Supplies | Ψ | |
| Other | 2024 (| | \$ | Job education | \$ | Tax prep fees | \$ | |
| | in 2024 from prior y le interest or penalt | | \$ | Job seeking | \$ | Tools | \$ | |
| | - | x paid during 2024? | Yes No | Legal fees | \$ | Uniforms | \$ | |
| Did you purc | hase a car, plane, bo | at, or home in 2024? | Yes No | Licenses | \$ | Union dues | \$ | |
| Sales tax paid | | 1 | | Safety equipment | \$ | Other | \$ | |
| use or rental- | use property, includ | erest paid for full or j ing business use of th ion and ID numbers. | | Other Deductions. The following deductions are not subject to the 29 AGI limitation. | | | | |
| Main home | \$ | Equity loan | \$ | Gambling losses | \$ | Federal estate tax on IRD | \$ | |
| Second home | \$ | Equity loan | \$ | Impairment- | \$ | | ¢ | |
| | 1 | | | Impairment- \$ Other \$ | | | | |

Notes: • Gambling losses are deductible only up to the amount of gambling winnings reported. A log must be kept to verify losses.

Work clothing is not deductible if adaptable for every day wear. Exception for safety equipment, such as steel-toe boots.

Expenses to enable individuals, who are physically or mentally impaired, to work are generally deductible.

Adjustments Worksheet Educator expenses. Classroom expenses of teachers, counselors, and principals. Maximum \$300 each. \$ *Health savings account (HSA).* Contributions for 2024 may be made through April 15, 2025. \$ (Only include contributions you made out-of-pocket). \$ Self-employed SEP, SIMPLE, and qualified plans. Contributions for 2024 may be made through April 15, 2025. Self-employed health insurance. Sole proprietors, partners, and 2% S corporation shareholders if not eligible for employer \$ coverage. \$ Penalty on early withdrawal of savings. IRA deduction. For traditional IRAs. Roth IRAs are not deductible. Contributions for 2024 may be made through April 15, 2025. \$ \$ Student loan interest. Paid for taxpayers and dependents. Moving expenses. Available only to members of the Armed Forces (or their spouses or dependents) on active duty that move pursuant to a military order and incident to a permanent change of station. Ask preparer Business expenses of reservists, performing artists, and fee-based government officials. Ask preparer \$ Other adjustments. Include description.

Estimated Tax Payments — Tax Year 2024

| Installment | Date paid | Federal | Date paid | State |
|--------------------------------------|-----------|---------|-----------|-------|
| First | | \$ | | \$ |
| Second | | \$ | | \$ |
| Third | | \$ | | \$ |
| Fourth | | \$ | | \$ |
| Amount applied from 2023 overpayment | | \$ | | \$ |
| Total | | \$ | | \$ |
| Tour Duomouration Obsolution | | · | | |

Tax Preparation Checklist

Please provide the following documentation:

All Forms W-2 (wages), 1099-INT (interest), 1099-DIV (dividends), 1099-B (proceeds from broker or barter transactions), 1099-R (pensions and IRA distributions), Schedules K-1 from partnerships, S corporations, estates and trusts, and other income reporting statements, including all copies provided from the payer.

Form 1095-A (for health insurance purchased through a public exchange/marketplace), Form 1095-B (for health insurance purchased outside of a public exchange), or Form 1095-C (for employer-provided health insurance coverage).

If you are a new client, provide copies of last year's tax returns.

The completed Individual Income Tax Organizer. *Note:* If you choose not to fill out the organizer, you must at least answer the "Yes" or "No" questions under "Questions—All Taxpayers."

Copy of the closing statement if you bought, sold, or refinanced real estate.

Mileage amounts for any automobile expenses claimed, including total mileage, commuting mileage, and business mileage. Detail of estimated tax payments made, if any.

Income and deductions categorized on a separate sheet for business or rental activities.

List of itemized deductions categorized on a separate sheet for medical, taxes, interest, charitable, and miscellaneous deductions. Copy of all acknowledgement letters received from charitable organizations for contributions made in 2024.

Taxpayer Responsibilities

- You agree to provide us all income and deductible expense information. If you receive additional information after we begin working on your return, you will contact us immediately to ensure your completed tax returns contain all relevant information.
- You affirm that all expenses or other deduction amounts are accurate and that you have all required supporting written records. In some cases, we will ask to review your documentation.
- You must be able to provide written records of all items included on your return if audited by either the IRS or state tax authority. We can provide guidance concerning what evidence is acceptable.
- You must review the returns carefully before signing to make sure the information is correct.
- Fees must be paid before your tax returns are delivered to you or filed for you. If you terminate this engagement before completion, you agree to pay a fee for work completed. A retainer may be required for preparation of returns.
- You should keep a copy of your tax return and any related tax documents. You may be assessed a fee if you request a duplicate copy in the future.

Signatures. By signing below, you acknowledge that you have read, understand, and accept your obligations and responsibilities. For a joint return, both taxpayers must sign.

| Taxpayer Spouse Date | Duine an Dalian | | |
|----------------------|-----------------|--------|------|
| | Taxpayer | Spouse | Date |

Privacy Policy

The nature of our work requires us to collect certain nonpublic information. We collect financial and personal information from applications, worksheets, reporting statements, and other forms, as well as interviews and conversations with our clients and affiliates. We may also review banking and credit card information about our clients in the performance of receipt of payment. Under our policy, all information we obtain about you will be provided by you or obtained with your permission.

Our firm has procedures and policies in place to protect your confidential information. We restrict access to your confidential information to those within our firm who need to know in order to provide you with services. We will not disclose your personal information to a third party without your express written permission, except where required by law. We maintain physical, electronic, and procedural safeguards in compliance with federal regulations that protect your personal information from unauthorized access.

Sole Proprietorship Tax Organizer

Sole Proprietor General Information Name of sole proprietor Business name (if different) EIN (if applicable) Business address (if different from home address) Date business closed Principal business activity Date business started Principal product or service No | Was the primary purpose of the business activity to realize a profit? Yes No | Did you materially participate (involved in a regular, continuous, and substantial basis) in the operation of this business? Yes Yes No Has the business reported any losses in prior years? Other (specify) Accounting method: Accrual Cash No Does the business file under a calendar year? (If no, list the fiscal year.) Yes **Sole Proprietor Specific Questions** No | Did you pay any family members for business services? Yes Yes No Did you make any payments of \$600 or more to subcontractors, attorneys, accountants, directors, etc.? If Yes, did you issue Form 1099-NEC? List name and Social Security Number (SSN) for each person to whom you paid \$600 or more. Name SSN SSN Name Yes No Did you make, or do you plan to make, any contributions to a self-employed retirement plan? Type of plan Amount contributed \$ No Did you pay for your own health/dental insurance? If Yes, provide amount of premiums paid during the year. \$ Yes No Did you have any employees? Yes No Did you have any bartering transactions in 2024? Yes No Did you have a Paycheck Protection Program (PPP) loan that was forgiven in 2024? Yes **Sole Proprietor Business Income** Gross receipts or sales (if you received Forms 1099-NEC or 1099-K, list name of payer and amount separately from gross receipts or sales) \$ Form 1099-NEC Form 1099-K \$ \$ Total of all Forms 1099-NEC and 1099-K received \$ Returns (cash or credit refunds) and allowances (discounts or reductions in selling price) \$ (Other income (not included in gross receipts above) \$ Form 1099-NEC. You may receive Form 1099-NEC (instead of Form W-2) if you are not classified as an employee. If you receive Form 1099-NEC, you are generally required to file Schedule C, Profit or Loss From Business, claim any expenses associated with the income received, and must pay self-employment (SE) tax on the net income. Sole Proprietor Cost of Goods Sold (for manufacturers, wholesalers, and businesses that make, buy, or sell goods) Inventory at the beginning of the year \$ \$ Purchases less costs of items withdrawn for personal use \$ Cost of labor Materials and supplies \$ Inventory at the end of the year \$ **Sole Proprietor Business Expenses** Advertising \$ Wages* \$ \$ Management fees Bad debts \$ Meals - business \$ Other \$ \$ Bank charges Office supplies \$ \$ \$ Start-up costs (first year of business) \$ \$ **Business** licenses Commissions and fees \$ Pension and profit-sharing plans \$ \$ Contract labor* \$ \$ \$ Rent or lease - car, machinery, equipment Employee benefit programs \$ Rent or lease - other business property \$ \$ \$ \$ \$ Employee health care plans Repairs and maintenance Entertainment (not deductible) \$ Supplies (not included in inventory cost) \$ \$ \$ Taxes - payroll* \$ \$ Gifts Insurance (other than health insurance) \$ Taxes - property \$ \$ Interest - mortgage \$ Taxes - sales \$ \$ Interest - other \$ Taxes - state \$ \$

* Provide copies of Form W-3, Form 940, Form 941, Form 1096, Form 1099-NEC, Form 1099-MISC, and any state tax forms filed.

Telephone

Utilities

\$

\$

\$

\$

\$

\$

Internet service

Legal and professional services

| | ess Expenses – L | | \$ | | | | | \$ | |
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| | | orm for each vehicle) | | | D i | 1 1 | | | |
| Make/Mode | | | <i>(</i> (1 + 1 - 2 | | Date car | placed in servic | ce | | |
| Yes No | | personal use durin | <u> </u> | | | | | | |
| Yes No | | | ther cars for person | | | trade in your ca | | Yes N | 0 |
| Yes No | , | | | | Cost of t | rade-in | Trade-ir | ı value | |
| Yes No | Is your evidence | | | | \$ | | \$ | | |
| | | Mileage | | | | 1 | Actual Expen | ses | |
| Beginning of | year odometer | | | | Gas/oil | | \$ | | |
| End of year c | odometer | | | | Insuran | e | \$ | | |
| Business mile | eage | | | | Parking | fees/tolls | \$ | | |
| Commuting | mileage | | | | Registra | tion/fees | \$ | | |
| Other mileag | je | | | | Repairs | | \$ | | |
| then choose b Iravel Expe • Meals. You | petween either the nses can deduct the cos | standard mileage r | | in the fir al expense • Trav | es. /el/Lodg | ng. You can de | educt the or | dinary and | necessary e |
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| then choose le Travel Experi- • Meals. You home on bu standard m City visited (for City visited (for Travel expenses) Airfare | between either the nses can deduct the con- usiness. You can use eal allowance per for per diem) ses | standard mileage r st of meals while tra se the actual cost of | ate, it must be used ate method or actual aveling away from your meals or the ry by location. # of days in city | in the fir il expense • Trav pens Inclu <i>City vis</i> | vel/Lodg ses of tra uded exp sited (for p | ng. You can de veling away fro enses are transp <i>er diem)</i> | educt the or om your hor portation, air | dinary and ne for busi fare, taxi, la | l necessary e ness purpose odging, etc. |
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Depreciation. Depreciation is the annual deduction that allows you to recover the cost or other basis of your business property over a certain number of years. Depreciation starts when you first use the property in your business. It ends when you either take the property out of service, deduct all your depreciable cost or basis, or no longer use the property in your business. The IRS has outlined a useful life (a set number of years) for most assets.

| Equipment Sold or Disposed of During Year | | | | |
|---|---------------------|-----------|-------------------|-----------|
| Asset | Date out of service | Date sold | Selling price/FMV | Trade-in? |
| | | | \$ | |
| | | | \$ | |
| | | | \$ | |
| | | | \$ | |

Disposition of Property. A disposition of property occurs when you sell property for cash or other property, you exchange property for other property, you transfer property to satisfy a debt, you abandon property, your bank forecloses or repossesses your property, or your property is damaged, destroyed, or stolen and you receive property or money in payment.

Business Use of the Home

Area of home must be used regularly and exclusively for business except for storage of inventory or daycare.

Note: Managing rental activities or investments does not qualify for business use of the home.

| All Taxpayers | | For Daycare Only | | | |
|--|--|---------------------------|------------|--|--|
| A) Business use area (square footage) | | 1) Hours used for daycare | | | |
| B) Total area of home (square footage) | | 2) Total hours in year | 8,784 hrs. | | |

Enter below only the expenses paid during the period the home was used for business.

Direct expenses benefit only the business use portion of the home. This includes painting or repairs exclusively for the business area.

Indirect expenses are for keeping up and running the entire home, such as mortgage interest and property taxes.

If you bought or sold your home during 2024, copy this worksheet and fill out one for each home.

| | Direct | Testiment | | Dinest | Testinent |
|------------------------------|---------------|-----------|--------------------------|--------|-----------|
| | Direct | Indirect | | Direct | Indirect |
| Mortgage interest | \$ | \$ | Repairs and maintenance | \$ | \$ |
| Property taxes | \$ | \$ | Utilities | \$ | \$ |
| Insurance | \$ | \$ | Other | \$ | \$ |
| Rent | \$ | \$ | Other | \$ | \$ |
| Depreciation of the Home | | | | | · |
| Lower of cost or fair market | value of home | \$ | Improvements? | Yes No | |
| Value of land | | \$ | Casualty losses in 2024? | Yes No | |

1) Exclusive Use Test—Business Use of Home

The exclusive use test is met if an area of the home is used only for business. The area can be a room or other separately identifiable space. The space does not need to be marked off by a permanent partition. This test is not met if you use the area both for business and for personal purposes, such as a den used for business during the day and TV viewing during the evening. Storage of inventory or product samples—exception to exclusive use test. If you use part of a home for business to store inventory or product samples, you are not required to meet the exclusive use test. However, you must meet all the following tests.

- You are in the business of selling products at wholesale or retail.
- The inventory or product samples are kept in the home for use in the business.
- Your home is the only fixed location of the business.
 - The storage space is used on a regular basis.
 - The storage space is a separately identifiable space suitable for storage.

2) Regular Use Test—Business Use of Home

The exclusive use test is not required for:

• A home used as a daycare facility.

product samples.

The regular use test means you must use a specific area of the home for business on a regular basis. Incidental or occasional business use is not regular use. All facts and circumstances are considered in determining whether the business use is regular.

3) Trade or Business Use Test—Business Use of Home

· An area used on a regular basis for storage of inventory or

To satisfy the trade or business use test, the portion of the home used for business must be used in connection with a trade or business. If the business use is for a profit-seeking activity that is not a trade or business, the deduction is not allowed.

4) Principal Place of Business Test—Business Use of Home

A trade or business can have more than one location. To qualify for a business use of home deduction, the home must be the principal place of business for that trade or business. To make this determination, the following are considered. A home office qualifies under this test if:

- The home office is used exclusively and regularly for administrative or management activities of the trade or business.
- There is no other fixed location where substantial administrative or management activities are conducted.
- The relative importance of the activities performed at each place where business is conducted, andThe amount of time spent at each place where business is

Self-Employment (SE) Tax

conducted.

- SE tax is a Social Security and Medicare tax primarily for individuals who are self-employed. It is similar to the Social Security and Medicare tax withheld from the pay of most wage earners. Your payments of SE tax contribute to your coverage under the Social Security system. Social Security coverage provides you with retirement benefits, disability benefits, survivor benefits, and hospital insurance (Medicare) benefits.
- You must pay SE tax if your net earnings from self-employment were \$400 or more, or you had church employee income of \$108.28 or more. The SE tax rules apply no matter how old you are and even if you are already receiving Social Security or Medicare benefits.
- The SE tax rate on net earnings is 15.3% (12.4% for Social Security plus 2.9% for Medicare). Only the first \$168,600 (2024) of combined wages, tips, and net earnings is subject to the 12.4% Social Security part of SE tax.