



TAX + BUSINESS SERVICES

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Client Name:	Phone Number:	Email:
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Self Employed Business Income and Expenses – Schedule C

(Can also be used for Corp and S-Corp)

***Are you doing business in the City of Los Angeles?** If so, *you must register* with the City of L.A. and file a *Business Tax Registration Renewal* by 02/28 each year. Otherwise, you may be subject to penalties!
 (This includes LLC's, S-Corps, C-Corps, Sole Proprietorships, fictitious business names (DBAs), Partnerships, etc...)

Income	Amount	Notes
Gross Receipts or Sales (Including Form 1099-NEC)	\$	
Returns and Allowances	\$	
Other	\$	
Other	\$	

Expenses	Amount	Notes
Costs of Good Sold (COGS)- Inventory and Merchandise Expenses (If applicable; Typically for Retail Sales)		
Cost of Inventory at Beginning of Year	\$	
Cost of Merchandise Purchased	\$	
Cost of Inventory at End of Year	\$	

Expenses	Amount	Notes	
Business expenses must be based on receipts and records which should document: the business purpose, date, time, place and amount.			
Advertising	\$		
Bad Debt	\$		
Bank Charges	\$		
Books and Publications	\$		
Business Equipment Purchased During This Year			
Date Purchased	Description	Amount	Notes
<i>e.g. 9/5/2022</i>	<i>e.g. Video Equipment</i>	<i>\$3,000</i>	<i>Depreciate/179</i>
Business Gifts**	\$		
**Gifts are limited to \$25 per person per year. You may not deduct these expenses unless they are documented.			
Business Meals and Entertainment*	\$		
*For business meals and entertainment, you must also document that (1) you discussed business during the meal, (2) you had a substantial and bonafide business discussion or activity before or after the meal/entertainment, or (3) you are alone while out of county (enter out of county expenses in the Travel section below). You must record the name and business relationship of each person entertained.			
Commissions (Provide 1099-NEC Forms Issued, if any)	\$		
Contract Labor (Provide 1099-NEC Forms Issued, if any)	\$		
Education and Seminars	\$		
Health Insurance Premiums (Provide State Exchange forms: 1095-A, 1095-B, or 1095-C)	\$		
Health Savings Account (HSA)	\$		
Insurance (Not Life) e.g. Business or liability insurance	\$		
Interest:			
Mortgage Paid to Banks	\$		
Other Business Interest	\$		
Internet (and/or Cable)	\$		
Merchant Fees	\$		
Legal and Professional Services	\$		
Payroll: (Provide all Payroll Reports)			
Wages Paid	\$		
Other Payroll Expenses	\$		
P.O. Box	\$		
Postage and Delivery	\$		
Professional Dues and Memberships	\$		

Professional Licenses	\$	
Promotional/Publicity	\$	
Rent or Lease:		
Machinery/Equipment	\$	
Office Space, Storage, Etc.	\$	
Repairs	\$	
Research	\$	
Retirement Account Contributions:		
Deductible	\$	
Non-Deductible	\$	
Software	\$	
Supplies:		
Office Supplies	\$	
Other Supplies	\$	
Taxes:		
City Business Tax	\$	
Sales Tax	\$	
Property Tax	\$	
Other Tax	\$	
Telephone:		
Home	\$	
Cell	\$	
Other	\$	
Union Dues	\$	
Utilities: (Enter Home Office Utilities in Home Office Section)		
Gas	\$	
Water and Power	\$	
Web Services	\$	
Website	\$	

Travel Expenses	Amount	Notes
Airfare, Bus, Ridesharing/Taxi, Train	\$	
Auto Rental	\$	
Laundry	\$	
Lodging	\$	
Meals and Tips	\$	
Passport/Visa Fees	\$	
Other	\$	

Industry Specific Expenses	Amount	Notes
	\$	
	\$	
	\$	
	\$	
	\$	

Home Office Expenses	Amount	Notes
To qualify, a home office must be used exclusively and on a regular basis (a) as your principal place of business, or (b) by patients, clients, or customers in meetings or dealing with you in the normal course of business.		
Total Square Feet of Home		
Square Feet of Office		
Square Feet of Storage		
Insurance (Homeowner's, Renter's, etc.)	\$	
Management and/or Condo Fees	\$	
Maintenance and Repairs	\$	
Mortgage Interest	\$	
Property Tax	\$	
Rent	\$	
Utilities		
Gas	\$	
Water and Power	\$	
Other	\$	
Other	\$	

Business Automobile Expenses*	Amount	Notes
*Commuting expenses are not deductible		
Vehicle Make, Model and Year: <input type="checkbox"/> Own vehicle (even if financed) <input type="checkbox"/> Lease ____ Cost of Vehicle ____ Date Purchased		
Automobile Mileage: Total Mileage (Include personal and commuting mileage) _____ Business Mileage _____		
Actual Expenses:	Amount	Notes
Auto License (other than personal property taxes)	\$	
Gasoline and Oil	\$	
Insurance (auto)	\$	
Interest (car loan)	\$	
Parking fees and tolls	\$	
Repairs	\$	
Tires	\$	
Value of employer-provided vehicle on Form W-2	\$	
Vehicle rent or lease payments	\$	
Other	\$	

Estimated Payments Made	Date	Federal Amount	State Amount
Payment #1	04/18/2022	\$	\$
Payment #2	06/15/2022	\$	\$
Payment #3	09/15/2022	\$	\$
Payment #4	01/17/2023	\$	\$

Notes: