



Tax Organizer

Self Employed

Use this organizer to get ready for the upcoming tax season. Reading each line may jog your memory on an expense you may have forgotten to include.



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MAIN INFORMATION	
Type of business or profession	
Business name	
Business address	
Business telephone	
Business start date	

PART I: Income	
Form 1099(s) including 1099K	
Cash or checks	
Sales tax collected	
Prizes, awards, gifts received for direct sales of products such as Tupperware or Avon.	
TOTAL GROSS INCOME	\$

Did you pay health insurance premiums in 2011? If yes, how much? _____

Did you pay estimated tax payments to the IRS or State of Minnesota last year?

If yes, how much? IRS _____ State of Minnesota _____ (yearly totals)

PART II: Business expenses			
Advertising	\$	Overnight travel	\$
Commissions and fees	\$	Utilities (other than household)	\$
Business liability insurance	\$	Professional education	\$
Interest on business loans or business credit cards	\$	Bank charges	\$
Legal and professional fees	\$	Safety equipment and specialized clothing	\$
Office supplies	\$	Freight and postage	\$
Rent or lease of equipment & property	\$	Dues and publications	\$
Repairs and maintenance of equipment	\$	Telephone and long distance (only 2 nd line in home is allowed)	\$
Other supplies	\$	Cell phone – annual charges	\$
Business licenses	\$	Cell phone – % business use	%
Sales tax paid to state	\$	Other – list item	\$
Business meals	\$	Other – list item	\$

EXPENSES: Office in Home	
Area used for business or storage	Sq. ft.
Total area of home or apartment	Sq. ft.
Rent	\$
Mortgage interest	\$
Real estate taxes	\$
Renter or homeowner insurance	\$
Repairs and maintenance	\$
Gas and electric	\$
Water, sewer, and garbage	\$
If homeowner, date the home was (a) purchased and (b) placed into business use, (c) purchase price of home	(a) ___/___/___ (b) ___/___/___ (c) \$ _____

EXPENSES: Major purchases \$500 and over plus any prior year depreciation		
New item purchased in current tax year	Date of Purchase	Cost
	/ /	\$
	/ /	\$

PART III: Products sold by direct seller	
Inventory at the beginning of the year	\$
Product purchased during the year	\$
Cost of products taken for personal use	\$
Supplies added to product for resale	\$
Other costs	\$
Inventory at the end of the year	\$

PART IV: Vehicle information	
Month/day/year your vehicle was placed in service: ___/___/___	
Business miles – Jan. 1 to June 30, 2011 :	July 1 to Dec. 31, 2011: Total business miles:
Total commuting miles:	Total personal miles:
Parking and tolls: \$	Interest on car loan: \$
Was your vehicle available for personal use during off-duty hours?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you (or your spouse) have another vehicle available for personal use?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you have evidence to support your deduction?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, is the evidence written?	<input type="checkbox"/> Yes <input type="checkbox"/> No