

Please enter all pertinent 2021 amounts. Last year's amounts are provided for your reference.

**GENERAL INFORMATION**

Principal business/profession .....	
Principal business code .....	
Business name, if different from Form 1040 .....	
Business address, if different from Form 1040 .....	
City, if different from Form 1040 .....	
State, if different from Form 1040 .....	
ZIP code, if different from Form 1040 .....	
Foreign region .....	
Foreign postal code .....	
Foreign country .....	
Employer identification number .....	
Other accounting method .....	

Accounting method: 1=cash, 2=accrual .....

Inventory method: 1=cost, 2=lower cost/market, 3=other .....

1=change of inventory method .....

1=spouse, 2=joint .....

1=first Schedule C filed for this business .....

If required to file Form(s) 1099, did you or will you file all required Form(s) 1099: 1=yes, 2=no ..

1=not subject to self-employment tax .....

1=did not "materially participate" .....

1=personal services is not a material income producing factor .....

1=investment .....

1=minister's Schedule C .....

1=single member limited liability company .....

1=trader in financial instruments or commodities .....


**INCOME**

Gross receipts or sales (Form 1099-MISC, box 7) .....

Returns and allowances .....

Other income:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

2021 Amount	2020 Amount

**COST OF GOODS SOLD**

Inventory at beginning of the year .....

Purchases .....

Cost of items for personal use .....

Cost of labor .....

Materials and supplies .....

Other costs:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Inventory at end of the year .....


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**EXPENSES**

	2021 Amount	2020 Amount
Accounting.....		
Advertising.....		
Answering service.....		
Bad debts from sales or service.....		
Bank charges.....		
Car and truck expenses (not entered elsewhere).....		
Commissions.....		
Contract labor.....		
Delivery and freight.....		
Dues and subscriptions.....		
Employee benefit programs.....		
Insurance (other than health).....		
Mortgage interest (paid to banks, etc.).....		
Other interest (not entered elsewhere).....		
Janitorial.....		
Laundry and cleaning.....		
Legal and professional.....		
Miscellaneous.....		
Office expense.....		
Outside services.....		
Parking and tolls.....		
Pension and profit sharing plans - contributions.....		
Pension and profit sharing plans - admin. and education costs.....		
Postage.....		
Printing.....		
Rent - vehicles, machinery, & equipment (not entered elsewhere).....		
Rent - other.....		
Repairs.....		
Security.....		
Supplies.....		
Taxes - real estate.....		
Taxes - payroll.....		
Taxes - sales tax included in gross receipts.....		
Taxes - other (not entered elsewhere).....		
Telephone.....		
Tools.....		
Travel.....		
Total meals in full (50%).....		
Department of Transportation meals in full (80%).....		
Uniforms.....		
Utilities.....		
Wages.....		

Other expenses:

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NOTE: If you purchased or disposed of any business assets, please complete Sheet 22.

<b>2021</b>	<b>1040</b>	<b>US</b>	<b>Asset Disposition List</b>	<b>22</b>
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**If you disposed of any business assets in 2021, please enter date sold, sales price, and expenses of sale.  
For real estate transactions, be sure to attach all 1099-S forms and closing statements.**

No.	Description of Property (Box 3)	Date Placed in Service	Date Sold (Box 1)	Sales Price (Box 2)	Cost or Basis	Expenses of Sale

**If you purchased any business assets (furniture, equipment, vehicles, real estate, etc.) or converted any personal assets to business use in 2021, please enter all pertinent information below.**

No.	Description of Property	Related Business or Activity	Preparer Use Only			Date Placed in Service	Cost or Basis	Preparer Use Only	
			Form	No. of Form	Category			Current Section 179	Method

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**TRADITIONAL IRA CONTRIBUTIONS**

	2021 Amount		2020 Amount	
	Taxpayer	Spouse	Taxpayer	Spouse
IRA contributions you made or expect to make (1=maximum) (\$6,000/\$7,000 if 50 or older) . . . . .				
Contributions made to date . . . . .				
1=covered by plan, 2=not covered . . . . .				
2021 payments from 1/1/22 to 4/15/22 . . . . .				

**ROTH IRA CONTRIBUTIONS**

Roth IRA contributions you made or expect to make (1=maximum) (\$6,000/\$7,000 if 50 or older) . . . . .				
Contributions made to date . . . . .				

**SEP, SIMPLE AND QUALIFIED PLANS (KEOGH)**

Profit-sharing (25%/1.25) contributions you made or expect to make (1=maximum) . . . . .				
Money purchase (25%/1.25) contributions you made or expect to make (1=maximum) . . . . .				
Defined benefit contributions you expect to make . . . . .				
Self-employed SEP (25%/1.25) contributions you made or expect to make (1=maximum) . . . . .				
Plan contribution rate if not .25 (.xxxx) . . . . .				
Individual 401k: SE elective deferrals (except Roth) (1=max.) . . . . .				
Individual 401k: SE designated Roth contributions (1=max.) . . . . .				
SIMPLE contributions:				
Self-employed SIMPLE contributions you made or expect to make (1=maximum) . . . . .				
Employer matching rate if not .03 (.xxxx) . . . . .				
1=nonelective contributions (2%) . . . . .				
Contributions made to date . . . . .				

**ADJUSTMENTS TO INCOME**

Self-employed health insurance:				
Total premiums (excluding long-term care) . . . . .				
Long-term care premiums . . . . .				
Student loan interest paid (1098-E, box 1) . . . . .				
Educator expenses (kindergarten thru grade 12) . . . . .				
Jury duty pay given to employer . . . . .				
Expenses from rental of personal property . . . . .				
Other adjustments to income:				
_____				
_____				
_____				

Alimony paid:	Taxpayer	Spouse
Date of divorce or sep. agreement		
Recipient's first name . . . . .		
Recipient's last name . . . . .		
Recipient's SSN . . . . .		
Amount paid . . . . .	2020 amt:	2020 amt:

**Please enter 2021 indirect expenses in full. Nonbusiness portion will carry to Schedule A.  
Business percentage will be applied to indirect expenses only.**

**BUSINESS USE OF HOME**

	2021 Amount	2020 Amount
Form.....		
Number of form (e.g., enter 2 for Schedule C number 2).....		
Business use area (square footage).....		
Total area of home (square footage).....		
Total hours facility used (for daycare facilities only).....		
Total hours available (if not 8,760).....		
Area of home included above used exclusively for daycare business, if any (sq ft).....		
% (.xx) or amount of gross income from home if not 100% (-1 if none).....		
% (.xx) or amount of expenses from home if not 100% (-1 if none).....		

**INDIRECT EXPENSES**

NOTE: Indirect expenses are for keeping up and running your entire home. They benefit both the business and personal parts of your home.

Mortgage interest.....		
Real estate taxes.....		
Casualty losses.....		
Insurance.....		
Miscellaneous.....		
Rent.....		
Repairs and maintenance.....		
Utilities.....		
Excess mortgage interest.....		
Excess real estate taxes.....		
Other indirect expenses:		
_____		
_____		
_____		
_____		

**DIRECT EXPENSES**

NOTE: Direct expenses benefit only the business part of your home. They include painting or repairs made to specific areas or rooms used for business.

Mortgage interest.....		
Real estate taxes.....		
Casualty losses.....		
Insurance.....		
Miscellaneous.....		
Rent.....		
Repairs and maintenance.....		
Utilities.....		
Excess mortgage interest.....		
Excess real estate taxes.....		
Excess casualty losses.....		
Allowable casualty losses.....		
Other direct expenses:		
_____		
_____		
_____		
_____		

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**VEHICLE INFORMATION**

- 1=vehicle used primarily by more than 5% owner .....
- 1=vehicle is available for off-duty personal use .....
- 1=no other vehicle is available for personal use .....
- 1=no evidence to support your deduction .....
- 1=no written evidence to support your deduction .....

2021 Amount	2020 Amount

**VEHICLE 1**

- Description of vehicle .....
- Date placed in service (m/d/y) .....
- Total mileage (for the tax year) .....
- Business mileage.....
- Commuting mileage (for the tax year) .....
- Average daily round-trip commute .....
- Number of months of business use if changed from 100% personal use .....
- Parking fees and tolls (business portion only) .....
- Actual expenses:

  - Gasoline, lube, oil.....
  - Repairs.....
  - Tires.....
  - Insurance.....
  - Miscellaneous.....
  - Auto license (other than personal property taxes) .....
  - Personal property taxes (based on car's value) .....
  - Interest (car loan) (for Schedule C, E & F) .....
  - Vehicle rent or lease payments .....
  - Inclusion amount (enter as positive) .....
  - Value of employer-provided vehicle on Form W-2 (2106) .....


**VEHICLE 2**

- Description of vehicle .....
- Date placed in service (m/d/y) .....
- Total mileage (for the tax year) .....
- Business mileage.....
- Commuting mileage (for the tax year) .....
- Average daily round-trip commute .....
- Number of months of business use if changed from 100% personal use .....
- Parking fees and tolls (business portion only) .....
- Actual expenses:

  - Gasoline, lube, oil.....
  - Repairs.....
  - Tires.....
  - Insurance.....
  - Miscellaneous.....
  - Auto license (other than personal property taxes) .....
  - Personal property taxes (based on car's value) .....
  - Interest (car loan) (for Schedule C, E and F) .....
  - Vehicle rent or lease payments .....
  - Inclusion amount (enter as positive) .....
  - Value of employer-provided vehicle on Form W-2 (2106) .....


