

BUSINESS DETAILS								
Principal Business/Profession:								
Business Name:								
Business Address:								
Employer ID #:					Social Se	ecurity #:		
Is Business DBA:		Yes No		LL	C, Partnership, or Cor	ooration:		
Did you use log book to determine your receipts		Yes No			If not can you reasonably reconstruct gross receipts:		Yes	No
Did you use log book to determine expenses:	)	Yes No			If not can you reasonably reconstruct your expenses:		Yes	No
How were you paid:		Cash Check	Oth	er				
Did you receive FORM 1099-INCOME:					Yes	No		
Did you receive any other income not reported on form 1099-Nec:					Yes	No		
Did you pay anyone to work for you:					Yes	🗌 No	How Much	\$

## **INFORMATION ABOUT YOUR VEHICLE** Complete this section Only if you are claiming vehicle expenses (Note: Driving to and from work is considered commuting & generally is not deductible) What are you using the vehicle for in your business: When did you place your vehicle in service for business purposes (mm/dd/yy): Make and Model of vehicle: Which method are you using this year: **Standard Mileage Rate Actual expenses** Total miles you drove the vehicle this year: **Business:** Commuting: Was the vehicle available for personal use:

Do you have written evidence to support your deduction:

