

Business Questionnaire

INCOME AND EXPENSES

ANSWER ALL THAT APPLY:

NAME OF BUSINESS: Include SS-4

TAX IDENTIFICATION NUMBER:

DESCRIPTION OF BUSINESS:

INCOME: (1099-NEC)

COMMISSION/FEES/WAGES PAID:

START UP EXPENDITURES:

COST OF GOODS SOLD:

ADVERTISING:

VEHICLE EXPENSES:

TYPE OF VEHICLE:

AMOUNT OF PURCHASE:

DATE OF PURCHASE:

LEASED/FINANCED:

FOR HOW MUCH:

TOTAL ANNUAL MILEAGE PUT ON VEHICLE:

PORTION OF BUSINESS MILES FROM TOTAL:

VEHICLE INSURANCE:

GASOLINE:

OIL AND REPAIRS:

PARKING FEES:

TOLLS:

REGISTRATION:

STORAGE FEES:

MORTGAGE OR RENT PAID FOR BUSINESS:

OTHER BUSINESS PROPERTY:

LEGAL AND PROFESSIONAL FEES:

BUSINESS OR OTHER INSURANCE:

EQUIPMENT PURCHASED:

AMOUNT & DATE:

OFFICE SUPPLIES:

TAXES PAID:

LICENSES BOUGHT:

TRAVEL:

MEALS:

LODGING/RENTAL CARS:

CONVENTIONS:

BANK/MERCHANT FEES:

UTILITIES PAID FOR BUSINESS:

INTERNET USAGE FOR BUSINESS:

TELEPHONE USAGE FOR BUSINESS:

LIST ANY OTHER EXPENSES:

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