



BUSINESS ORGANIZER

Business Name _____ EIN _____

Business Address _____

Cash Accounting _____ Did the business start or end this year? _____

Gross Receipts _____ Does this include sales tax? _____

Returns and Allowances _____ Other Income : Description _____ Amt _____

Cost of Goods Sold:

Beginning Inventory _____ Purchases less personal _____

Costs: Labor _____, Material & Supplies _____, Other costs _____

Ending Inventory _____

Expenses:

Advertising _____ Commissions & Fees _____ Contract Labor _____ Employee Benefits _____

Insurance _____ Mortgage Interest _____ Other Interest _____ Office Expense _____

Legal and Professional Services _____ Rent _____

Repairs/maintenance _____ (amounts under \$500 will be expensed)

Supplies _____ Utilities _____ Wages _____

Taxes and Licenses _____

Travel _____ Meals and entertainment _____ Auto Expenses _____

(For travel, meals and auto expenses, need to have a written log with date, expense, purpose, etc.)

Other expenses _____

Depreciable Property:

Date Placed in Service	Description	Cost	% Used for business
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____



RENTAL ORGANIZER

Description of Property _____

Property Address _____

Type of Property: Single Family Multi-Family Vacation/Short Term Rental
 Commercial Land Self –Rental Other

Fair Rental Days _____ Personal Use Days _____

If Multi-occupancy, what % is used by the taxpayer or spouse _____

Is the property a main or second home? _____ Is some investment not at risk? _____

Was the Property 100% disposed of in 2013? _____ Is this a qualified joint venture? _____

Rent Income _____

Expenses:

Advertising _____ Auto/travel _____ Cleaning/Maintenance _____

Commissions _____ Insurance _____ Legal & Professional Fees _____

Management Fees _____ Mortgage Interest _____ Other Interest _____

Repairs _____ (Amounts under \$500 will be expensed)

Supplies _____ Taxes _____ Utilities _____

(For travel, meals and auto expenses, need to have a written log with date, expense, purpose, etc.)

Other Expenses: _____

Depreciable Property:

Date Placed in Service	Description	Cost	% Used for business
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____