

Contact us for a login to our secure client portal Tel: 973-934-2500 Fax: 973-447-3555

Mail: PO Box 151, Haskell, NJ 07420 Email: info@dedicated-taxes.com

A Dusiness I	Federal EIN							
T Business i	Name (list any DBA's in No	otes area on back)				re	derai E	:TIN
Business A	Address 🗆 this i	s a new address	Ci	ty		Sta	te	Zip Code
Contact Pers	son, Position / Title	Phone Number		E-mail				
Date of Formation	State of Formation	Year End Date if other than 12/31	Professional Licenses Held			s Held		
☐ Sole Pro	prietor 🗆 LLC 🗆 P	artnership Corporation	□ S-Corporation (provide copy of Form 2553)				of Form 2553)	
		Business Entity Type					. ,	,
) A -		Dasinsss Entity Type						
Who is your Regi	stered Agent:							
		BUSINESS OWNER	•					
Name and Addres	ss (List any add'l owners on back)	Personal Phone	Social Security Number				Percentage of	
Ivallie and Addres	SS (List any add rowners on back)	r ersonal r none	Social Security Number			Ownership		
_								
TAX PREPAR	ATION PAYMENT OPTIONS	: payment is due prior to electr	onic fi	ling of y	our ap	proved	tax retur	ns. You will
receive an invoice with a payment link for secure Credit or Debit Card payments. We also accept Zelle, Venmo, cash or check.								
RETURN HAN	NDLING OPTIONS – if your b	usiness return is NOT part of	vour	individ	ual tax	return		
	o Secure Client Portal	•	•					
□ Upload to Secure Client Portal □ Mail paper copy to above address □ In-person pickup, sign & pay (fee for tracking)								pay
			I					
		would require you to file Fom(s) 10	99?		Yes		No	
If yes, did or will you file Form(s) 10		.099?			Yes		No	
								7
	Gross Receipts (Total Revenue NOT including sales tax)							
	Inventory at begin of year							
	Purchases							
	Cost of labor Materials & Supplies							
	1							
	Other Costs		1					
	Inventory at end of year							

Home Office Deduction				
Total house square footage		If the total dedicated business square footage is 300 sq. ft. or less, the safe harbor method can be applied. You will not need to provide expenses below.		
Total dedicated business squ	uare ft			
If the total busine	ess square footage is 300 sq. ft. or	more, provide the following annual cos	sts for the home:	
	Mortgage Interest			
	Real Estate Taxes			
	Home Owner's Insurance			
	Utilities (electric gas water inte	arnet)		

Expenses (list other expenses below or submit a Profit & Loss Statement)

Other Expenses

business office)

Repairs & maintenance

Costs only for business (ex. Painting of

Expenses (not other expenses below or submit a Front & Loss Statement)								
Advertising	Licenses & fees		Subscriptions					
Auto & truck expenses	Office expense		Sales Tax					
Total annual mileage	Postage / Freight		Travel					
Business miles	Purchased equipment	List date of purchase and cost below	Meals					
Commission & fees	Leased equipment		Utilities					
Continuing Education	Safety Equipment		Cell Phone					
Contract labor	Tools (purch or repair)		Internet					
Insurance (not health)	IT Services / Internet		W-2s to others					
Health Insurance	Rent		W-2s to owner					
Legal & prof services	Repairs & Maintenance		Work Clothes / Uniform cleaning					

Please tell us the nature of your business (what services do you provide or what products do you sell?

COMMENTS / QUESTIONS / NOTES