

# Hupp Tax Service

32341 Vine Street, Willowick, OH 44095

Phone (440) 944-4343

Fax (440) 944-4341

## WHAT TO BRING – BUSINESS

Tax year **2021**

(or mail, fax, email ([taxhelp@hupptax.com](mailto:taxhelp@hupptax.com)), Upload ([hupptax.com](http://hupptax.com)))

**Statement of Income and Expenses**  
(profit and loss statement)

**Balance Sheet** (be sure to include year-end bank balances and ending inventory if applicable)

**Payroll reports** (W3/W2, (941 etc.)

**1099's** (1099R, 1099MISC, 1099INT, 1099DIV, 1099B, 1099G, 1099C, etc.)

**1098's**

Anything marked  
"Important Tax Document"

Capital contribution and draw amounts by owners/members/shareholders/partners.

**Business Name** \_\_\_\_\_

Officers (list new officers below)

No change

President \_\_\_\_\_

Treasurer \_\_\_\_\_

Secretary \_\_\_\_\_

Business Type (S Corp, Partnership, sole proprietor, LLC, Trust, Estate)

Contact information (we will confirm at check in):

Phone # \_\_\_\_\_

Did the business move? If so, date? \_\_\_\_\_

New address \_\_\_\_\_

If you're new to Hupp Tax Service, bring:

❖ Prior two year tax returns (Federal State & City).

❖ List of officers and board members, names and addresses.

### Section 1 - All clients please complete.

#### Retirement Plan contributions (SIMPLE, SEP, solo 401(k), other)

None / Not applicable

#### Quarterly estimate payments

None / Not applicable

|                     | Date Paid | Federal | State | City  |
|---------------------|-----------|---------|-------|-------|
| 1 <sup>st</sup> qtr | _____     | _____   | _____ | _____ |
| 2 <sup>nd</sup> qtr | _____     | _____   | _____ | _____ |
| 3 <sup>rd</sup> qtr | _____     | _____   | _____ | _____ |
| 4 <sup>th</sup> qtr | _____     | _____   | _____ | _____ |
| Total               | _____     | _____   | _____ | _____ |

#### List of furniture/equipment purchased and sold

| Item  | Cost  | Date purchased | Date Sold |
|-------|-------|----------------|-----------|
| _____ | _____ | _____          | _____     |
| _____ | _____ | _____          | _____     |
| _____ | _____ | _____          | _____     |
| _____ | _____ | _____          | _____     |

None / Not applicable

## Profit & Loss Statement (example)

### Income

Total income \_\_\_\_\_

If you have Inventory:

Ending Inventory \_\_\_\_\_

### Expenses (We don't need to see your receipts, but you need to keep them for all of your deductions.)

Cost of goods sold / Purchases \_\_\_\_\_

Wages / Subcontractors \_\_\_\_\_

*Payments to individuals over \$600/year require Form 1099NEC to be filed.*

*Did / will you file 1099s as required? YES / NO*

Advertising \_\_\_\_\_

Legal & Professional \_\_\_\_\_

Interest (business loans, credit cards) \_\_\_\_\_

Rent \_\_\_\_\_

Office Supplies \_\_\_\_\_

Repairs/Maintenance \_\_\_\_\_

Licenses / Dues \_\_\_\_\_

Meals (IRS require each receipt indicate business purpose)

From a restaurant \_\_\_\_\_ **\*NEW for 2021 and 2022:**

Other food \_\_\_\_\_ **must specify restaurant vs not**

Travel (other than mileage, see below) \_\_\_\_\_

Utilities \_\_\_\_\_

Gifts \_\_\_\_\_

Education/Seminars \_\_\_\_\_

Insurance \_\_\_\_\_

Health Insurance (self-employed) \_\_\_\_\_

Other \_\_\_\_\_

Other \_\_\_\_\_

Other \_\_\_\_\_

Other \_\_\_\_\_

Business MILES: \_\_\_\_\_ (IRS requires a log or record of odometer, date, business purpose for each trip)

TOTAL MILES driven on vehicle for all purposes: \_\_\_\_\_ Make, model, year of vehicle(s) \_\_\_\_\_

If you prefer to use actual expenses instead of the per mile rate, please complete below section and we can calculate the deduction based on the business use percentage. REMINDER: Commuting miles are NOT deductible.

Gas \_\_\_\_\_

Insurance \_\_\_\_\_

Repairs/Maintenance \_\_\_\_\_

Auto Loan interest \_\_\_\_\_

Purchase date and price \_\_\_\_\_

Car Wash, misc \_\_\_\_\_