



Nelson Company, P.C. Tax Organizer

Do NOT use estimates and please provide copies of forms
The IRS is more likely to audit if they see a round number (i.e. 0 or 5, seriously)

Name: _____

Business Activity: _____

Home Office Expenses

What date did you start using your home for business? _____

Total square footage of home _____

- if roommate, include only your portion (i.e. half, third)

Square footage of dedicated office space _____

Expenses for the dedicated office space only

Repairs/Painting _____

Landline internet/phone service for office only _____

Rented Home/Space

Rent paid _____

Renter's Insurance _____

Utilities: Water _____

Utilities: Heat _____

Utilities: Power _____

Utilities: Garbage _____

Repairs/Maintenance/Cleaning _____

Home Owner - if new purchase/refinance please provide **final settlement statements (final HUD)**

Hazard Insurance (a.k.a. Homeowner's) _____

Utilities: Water _____

Utilities: Heat _____

Utilities: Power _____

Utilities: Garbage _____

Repairs/Maintenance/Cleaning _____

Security Fees _____

HOA Fees _____

Major Remodel/Improvements? If Yes, provide description, amount spent and date completed

Description	Total Cost	Date in Service
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____



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Name: _____

Business Activity: _____

Business Vehicle Expenses

Total miles driven (business + personal) _____

Date vehicle was placed into service: _____

Is this vehicle also used personally? Y or N _____

Do you have another car? Y or N _____

Odometer reading January 1 _____

Odometer reading December 31 _____

Total number of business miles _____

- remember to include trips to:

*visit your CPA/consultants _____

*stores to purchase supplies _____

*post office/mailling/fedex _____

*bank _____

*clients' offices _____

*research _____

*restaurants for business meals _____

*meetings _____

*travel (if using your own vehicle) _____

*pickup/dropoff product _____

*events _____

Parking & Tolls _____

Lease Fees _____

Repair*/Maintenance Fees * _____

*may not be deductible

If you do not answer "Yes" to the following questions, we cannot deduct business miles.

Please ask us what constitutes written evidence.

Do you:

Have evidence of this information? Y or N _____

Is it written? Y or N _____