

Self-employed tax organizer (Schedule C)

Schedule C, Form 1040

Prepared for the clients of (firm name)

Your name, and your spouse's if filing jointly

Fill in one organizer for each business. Answer every question with yes or no, or write in the figure.

For each yes, send the documents listed under it. If a number comes from your books, attach the report it came from.

Leave a question blank only if you do not know the answer, and say so in the notes.

The business

Based on: Schedule C, lines A to J (Instructions for Schedule C)

Business name and principal business or profession

Business address, if different from your home address

Employer identification number (EIN), if the business has one

Accounting method: cash, accrual or other

Did you start or buy this business during the year?

☐ Yes ☐ No

If yes, send: Start date; Purchase agreement, if you bought it

Did you materially participate in the business, under the IRS tests?

☐ Yes ☐ No

Did you pay anyone in a way that requires you to file Forms 1099?

☐ Yes ☐ No

If yes, send: Copies of the Forms 1099-NEC and 1099-MISC you filed; Form W-9 for each payee

Income

Based on: Schedule C, Part I; Forms 1099-NEC, 1099-MISC and 1099-K

Total gross receipts or sales, from your books

Send: Profit and loss report or sales summary for the year

Did you receive any Forms 1099-NEC?

☐ Yes ☐ No

If yes, send: Every Form 1099-NEC received

Did you receive a Form 1099-K from a payment app, marketplace or card processor?

☐ Yes ☐ No

If yes, send: Every Form 1099-K received

Did you receive a Form 1099-MISC for business income?

☐ Yes ☐ No

If yes, send: Every Form 1099-MISC received

Refunds and price cuts given to customers

Did customers tip you, through a card, an app or in cash?

☐ Yes ☐ No

If yes, send: Tip totals for the year, and the Forms 1099 that include them

Other business income, such as interest on receivables or bad debts recovered

Inventory and cost of goods sold (fill in only if it applies)

Based on: Schedule C, Part III

Do you sell products or keep an inventory?

☐ Yes ☐ No

If yes, send: Inventory count at year end; Purchase invoices for the year

Inventory at the start of the year

Purchases during the year, minus items taken for personal use

Cost of labor and materials

Inventory at the end of the year

How you value inventory: cost, lower of cost or market, or other

Car or truck (fill in only if it applies)

Based on: Schedule C, Part IV; Publication 463

Did you use a car or truck for the business?

☐ Yes ☐ No

If yes, send: Mileage log for the year; Date the vehicle was first used for business

Business miles from January 1 to June 30, 2026

Business miles from July 1 to December 31, 2026

Total miles and commuting miles for the year

Method: standard mileage rate or actual expenses

Business parking fees and tolls

Did you claim actual expenses for this vehicle?

☐ Yes ☐ No

If yes, send: Gas, repair and insurance receipts; Lease or loan statements

Business use of your home (fill in only if it applies)

Based on: Schedule C, line 30; Form 8829; Publication 587

Did you use part of your home regularly and only for the business?

☐ Yes ☐ No

If yes, send: Measurements of the office area and of the whole home

Square feet of the office area and of the whole home

Method: simplified or regular

Are you using the regular method this year?

☐ Yes ☐ No

If yes, send: Rent or mortgage interest statements; Utility and insurance bills for the home

Expenses and equipment

Based on: Schedule C, Part II; Form 4562

Did you buy equipment, furniture, computers or software for the business?

☐ Yes ☐ No

If yes, send: Invoice for each item; Date each item was first used in the business; Prior-year depreciation schedule (Form 4562)

Advertising, insurance, legal and professional fees

Office expenses, supplies, software and phone

Travel and business meals

Did you pay contractors or employees?

☐ Yes ☐ No

If yes, send: Contractor invoices; Payroll reports, if you had employees

Did you pay business expenses from a personal account or card?

☐ Yes ☐ No

If yes, send: Statements with the business charges marked

Estimated tax, health insurance and retirement

Based on: Form 1040-ES; Schedule SE; Schedule 1 (Form 1040)

Did you make estimated tax payments for the year?

☐ Yes ☐ No

If yes, send: Date and amount of each payment; Payment confirmations

Did you apply last year's refund to this year's estimated tax?

☐ Yes ☐ No

If yes, send: Last year's return

Did you pay health insurance premiums for yourself, your spouse or dependents?

☐ Yes ☐ No

If yes, send: Premium statements for the year

Were you or your spouse eligible for an employer-subsidized health plan in any month?

☐ Yes ☐ No

If yes, send: The months of eligibility

Did you put money into a SEP, SIMPLE or other retirement plan for yourself?

☐ Yes ☐ No

If yes, send: Contribution statements from the plan

Anything else your preparer should know