

**Preparer use only**

	2025 Information	Prior Year Information
Taxpayer/Spouse/Joint (T, S, J) _____	[2]	
Employer identification number _____	[3]	
Business name _____	[5]	
Principal business/profession _____	[6]	
Business code _____	[12]	
Business address, if different from home address on Organizer Form ID: 1040		
Address _____	[15]	
City/State/Zip _____ [16] _____ [17] _____	[18]	
Accounting method (1 = Cash, 2 = Accrual, 3 = Other) _____	[19]	—
If other: _____	[21]	
Inventory method (1 = Cost, 2 = LCM, 3 = Other) _____	[22]	—
If other enter explanation: _____	[24]	
_____		
_____		
Enter an explanation if there was a change in determining your inventory: _____	[25]	
_____		
_____		
Did you "materially participate" in this business? (Y, N) _____	[26]	—
If not, number of hours you did significantly participate _____	[28]	
Mark if you began or acquired this business in 2025 _____	[30]	
Did you make any payments in 2025 that require you to file Form(s) 1099? (Y, N) _____	[31]	—
If "Yes", did you or will you file all required Forms 1099? (Y, N) _____	[33]	—
Mark if this business is considered related to qualified services as a minister or religious worker _____	[35]	—
Did you receive wages as a statutory employee or as a minister? (1 = Statutory employee, 2 = Minister) _____	[37]	—
Medical insurance premiums paid by this activity + _____	[41]	
Long-term care premiums paid by this activity + _____	[45]	
Amount of wages received as a statutory employee + _____	[48]	

**Business Income**

	2025 Information	Prior Year Information
Gross receipts and sales		
_____	+ _____ [53]	
_____	+ _____	
_____	+ _____	
_____	+ _____	
Returns and allowances	+ _____ [56]	
Other income:		
_____	+ _____ [58]	
_____	+ _____	
_____	+ _____	
_____	+ _____	

**Cost of Goods Sold**

	2025 Information	Prior Year Information
Beginning inventory	+ _____ [60]	
Purchases	+ _____ [62]	
Labor:		
_____	+ _____ [64]	
_____	+ _____	
Materials	+ _____ [66]	
Other costs:		
_____	+ _____ [68]	
_____	+ _____	
_____	+ _____	
_____	+ _____	
Ending inventory	+ _____ [70]	

**Control Totals +**



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Principal business or profession \_\_\_\_\_

<b>Preparer use only Carryovers</b>	<b>Non-QBI &amp; Tax</b>	<b>For QBI &amp; Tax</b>	<b>AMT</b>
Operating	+ [19]	+ [20]	+ [21]
Short-term capital		+ [22]	+ [23]
Long-term capital		+ [24]	+ [25]
28% rate capital		+ [26]	+ [27]
Section 1231 loss		+ [28]	+ [29]
Ordinary business gain/loss	+ [31]	+ [32]	+ [33]
Section 179	+ [34]	+ [35]	+ [36]

**NOTES/QUESTIONS:**