You must first save this form to your computer and close it.

Then open it with Adobe Acrobat Reader.

If both of these steps are not followed the form will not calculate.

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SCHEDULE C (Form 1040)

Profit or Loss From Business (Sole Proprietorship)

Attachment

OMB No. 1545-0074

Department of the Treasury Name of proprietor

► Go to www.irs.gov/ScheduleC for instructions and the latest information. Internal Revenue Service (99) ► Attach to Form 1040, 1040-SR, 1040-NR, or 1041; partnerships must generally file Form 1065. Sequence No. 09

Name of proprietor						Social security number (SSN)					
A	Principal business or profession, including product or service (see instructions)							r code	from	instruct	ions
С	Business name. If no separate business name, leave blank.								num	per (EIN)	(see instr.)
E	Business address (including si										
	City, town or post office, state										
F	Accounting method: (1)					<u></u>	<u></u>				
G		021? If "No," see instructions for lin					Yes	☐ No			
Н	•					_	_				
I	, , ,			,	s) 1099? See instructions						∐ No
J		e required Form(s) 1099?		<u> </u>	_			٠ ـ ـ	Yes	□ No
Par						_					
1	Form W-2 and the "Statutory e	employee" box o	n that form was checke	ed	his income was reported to you on ▶ □		1				
2						F	2				
3						F	3				
4	,	,				-	4				
5	-					-	5				
6 7	_				fund (see instructions)	H	7				
Part		nses for husir	ness use of vour hor	me							
8	Advertising	8	18		Office expense (see instructions) .	Т	18				
9	Car and truck expenses (see		19		Pension and profit-sharing plans .	H	19				
9	instructions)	9	20		Rent or lease (see instructions):		10				
10	Commissions and fees .	10	a		Vehicles, machinery, and equipment		20a				
11	Contract labor (see instructions)	11	b		Other business property	\vdash	20b				
12	Depletion	12	21		Repairs and maintenance	\vdash	21				
13	Depreciation and section 179		22		Supplies (not included in Part III) .		22				
	expense deduction (not included in Part III) (see		23		Taxes and licenses		23				
	instructions)	13	24		Travel and meals:						
14	Employee benefit programs		а	1	Travel		24a				
	(other than on line 19) .	14	b)	Deductible meals (see						
15	Insurance (other than health)	15			instructions)	L	24b				
16	Interest (see instructions):		25		Utilities	L	25				
а	Mortgage (paid to banks, etc.)	16a	26		Wages (less employment credits)	L	26				
b	Other	16b	27a		Other expenses (from line 48)		27a				
17	Legal and professional services	17	b		Reserved for future use	+	27b				
28	•				through 27a ▶	-	28				
29	Tentative profit or (loss). Subtr					H	29				
30	unless using the simplified me Simplified method filers only	thod. See instructions: Enter the total s	ctions. square footage of (a) yo								
		and (b) the part of your home used for business: Use the Simplified Method Worksheet in the instructions to figure the amount to enter on line 30									
04				ııın	ne 30	H	30				
31	Net profit or (loss). Subtract I										
	• If a profit, enter on both Schedule 1 (Form 1040), line 3, and on Schedule SE, line 2. (If you checked the box on line 1, see instructions). Estates and trusts, enter on Form 1041, line 3.										
	• If a loss, you must go to line				J						
32	If you have a loss, check the b	ox that describe	s your investment in thi	is a	activity. See instructions.						
	• If you checked 32a, enter the loss on both Schedule 1 (Form 1040), line 3, and on Schedule SE, line 2. (If you checked the box on line 1, see the line 31 instructions.) Estates and trusts, enter on Form 1041, line 3. • If you checked 32b, you must attach Form 6198. Your loss may be limited.										s at risk. nt is not

Schedule C (Form 1040) 2021 Page 2 Cost of Goods Sold (see instructions) Part III 33 Method(s) used to a Cost **b** Lower of cost or market **c** Other (attach explanation) value closing inventory: Was there any change in determining quantities, costs, or valuations between opening and closing inventory? 34 Yes No If "Yes," attach explanation . . 35 Inventory at beginning of year. If different from last year's closing inventory, attach explanation Purchases less cost of items withdrawn for personal use . . . 36 36 Cost of labor. Do not include any amounts paid to yourself . . . 37 37 38 Materials and supplies 38 Other costs . . . 39 39 40 Add lines 35 through 39 . 40 41 Inventory at end of year 41 42 Cost of goods sold. Subtract line 41 from line 40. Enter the result here and on line 4 . Part IV Information on Your Vehicle. Complete this part only if you are claiming car or truck expenses on line 9 and are not required to file Form 4562 for this business. See the instructions for line 13 to find out if you must file Form 4562. 43 When did you place your vehicle in service for business purposes? (month/day/year) **>** / / Of the total number of miles you drove your vehicle during 2021, enter the number of miles you used your vehicle for: 44 Business _____ b Commuting (see instructions) 45 Was your vehicle available for personal use during off-duty hours? . No 46 Do you have evidence to support your deduction? Part V Other Expenses. List below business expenses not included on lines 8-26 or line 30.

48

Total other expenses. Enter here and on line 27a

48

SCHEDULE SE (Form 1040)

Department of the Treasury Internal Revenue Service (99)

Self-Employment Tax

► Go to www.irs.gov/ScheduleSE for instructions and the latest information.

► Attach to Form 1040, 1040-SR, or 1040-NR.

OMB No. 1545-0074

2021

Attachment Sequence No. 17

Name of person with self-employment income (as shown on Form 1040, 1040-SR, or 1040-NR)

Social security number of person with **self-employment** income ▶

Part	Self-Employment Tax		
	If your only income subject to self-employment tax is church employee income , see instructions for home definition of church employee income.	n to re	eport your income
Α	If you are a minister, member of a religious order, or Christian Science practitioner and you filed Form \$400 or more of other net earnings from self-employment, check here and continue with Part I		
Skip li	nes 1a and 1b if you use the farm optional method in Part II. See instructions.		
1a	Net farm profit or (loss) from Schedule F, line 34, and farm partnerships, Schedule K-1 (Form 1065), box 14, code A	1a	
b	If you received social security retirement or disability benefits, enter the amount of Conservation Reserve Program payments included on Schedule F, line 4b, or listed on Schedule K-1 (Form 1065), box 20, code AH	1b	()
Skip li	ne 2 if you use the nonfarm optional method in Part II. See instructions.		
2	Net profit or (loss) from Schedule C, line 31; and Schedule K-1 (Form 1065), box 14, code A (other than farming). See instructions for other income to report or if you are a minister or member of a religious order	2	
3	Combine lines 1a, 1b, and 2	3	
4a	If line 3 is more than zero, multiply line 3 by 92.35% (0.9235). Otherwise, enter amount from line 3 .	4a	
	Note: If line 4a is less than \$400 due to Conservation Reserve Program payments on line 1b, see instructions.		
b	If you elect one or both of the optional methods, enter the total of lines 15 and 17 here	4b	
С	Combine lines 4a and 4b. If less than \$400, stop ; you don't owe self-employment tax. Exception : If		
	less than \$400 and you had church employee income , enter -0- and continue	4c	
5a	Enter your church employee income from Form W-2. See instructions for definition of church employee income		
b	Multiply line 5a by 92.35% (0.9235). If less than \$100, enter -0	5b	
6	Add lines 4c and 5b	6	
7	Maximum amount of combined wages and self-employment earnings subject to social security tax or the 6.2% portion of the 7.65% railroad retirement (tier 1) tax for 2021	7	142,800
8a	Total social security wages and tips (total of boxes 3 and 7 on Form(s) W-2) and railroad retirement (tier 1) compensation. If \$142,800 or more, skip lines 8b through 10, and go to line 11		
b	Unreported tips subject to social security tax from Form 4137, line 10 8b	1	
С	Wages subject to social security tax from Form 8919, line 10 8c		
d	Add lines 8a, 8b, and 8c	8d	
9	Subtract line 8d from line 7. If zero or less, enter -0- here and on line 10 and go to line 11	9	
10	Multiply the smaller of line 6 or line 9 by 12.4% (0.124)	10	
11	Multiply line 6 by 2.9% (0.029)	11	
12	Self-employment tax. Add lines 10 and 11. Enter here and on Schedule 2 (Form 1040), line 4	12	
13	Deduction for one-half of self-employment tax.		
	Multiply line 12 by 50% (0.50). Enter here and on Schedule 1 (Form 1040),		
	line 15		
Part			
	Optional Method. You may use this method only if (a) your gross farm income¹ wasn't more than		
\$8,820	0, or (b) your net farm profits² were less than \$6,367.		
14	Maximum income for optional methods	14	5,880
15	Enter the smaller of: two-thirds (2/3) of gross farm income ¹ (not less than zero) or \$5,880. Also, include this amount on line 4b above	15	
	rm Optional Method. You may use this method only if (a) your net nonfarm profits³ were less than \$6,367		
	so less than 72.189% of your gross nonfarm income, and (b) you had net earnings from self-employment east \$400 in 2 of the prior 3 years. Caution: You may use this method no more than five times.		
16	Subtract line 15 from line 14	16	
17	Enter the smaller of: two-thirds (2/3) of gross nonfarm income ⁴ (not less than zero) or the amount on line 16. Also, include this amount on line 4b above	17	
	Sch. F, line 9; and Sch. K-1 (Form 1065), box 14, code B.		
² From you w	Sch. F, line 34; and Sch. K-1 (Form 1065), box 14, code A—minus the amount \	5), box	14, code C.

Form **4562**

Department of the Treasury Internal Revenue Service (99)

Depreciation and Amortization

(Including Information on Listed Property)

► Attach to your tax return.

▶ Go to www.irs.gov/Form4562 for instructions and the latest information.

OMB No. 1545-0172

2021

Attachment
Sequence No. 179

Name(s) shown on return Business or activity to which this form relates Identifying number **Election To Expense Certain Property Under Section 179** Part I Note: If you have any listed property, complete Part V before you complete Part I. 1 2 3 Threshold cost of section 179 property before reduction in limitation (see instructions) . 4 Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing 5 (a) Description of property (c) Elected cost 6 (b) Cost (business use only) 8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 8 9 **10** Carryover of disallowed deduction from line 13 of your 2020 Form 4562 10 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5. See instructions 11 12 Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11. 12 13 Carryover of disallowed deduction to 2022. Add lines 9 and 10, less line 12 Note: Don't use Part II or Part III below for listed property. Instead, use Part V. Part II Special Depreciation Allowance and Other Depreciation (Don't include listed property. See instructions.) 14 Special depreciation allowance for qualified property (other than listed property) placed in service 14 15 **16** Other depreciation (including ACRS) 16 Part III MACRS Depreciation (Don't include listed property. See instructions.) **Section A** 17 MACRS deductions for assets placed in service in tax years beginning before 2021 17 18 If you are electing to group any assets placed in service during the tax year into one or more general Section B-Assets Placed in Service During 2021 Tax Year Using the General Depreciation System (b) Month and year (c) Basis for depreciation (d) Recovery (a) Classification of property (business/investment use only—see instructions) (e) Convention (f) Method (g) Depreciation deduction placed in period service **19a** 3-year property **b** 5-year property c 7-year property d 10-year property e 15-year property **f** 20-year property 25 yrs. S/L g 25-year property 27.5 yrs. MM S/L h Residential rental 27.5 yrs. MM S/L property 39 yrs. ММ S/L i Nonresidential real property MM S/L Section C-Assets Placed in Service During 2021 Tax Year Using the Alternative Depreciation System 20a Class life S/L S/L **b** 12-year 12 yrs. **c** 30-year ММ S/L 30 yrs. d 40-vear 40 yrs. MM S/L Part IV Summary (See instructions.) 21 Listed property. Enter amount from line 28 21 22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations—see instructions 22 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs 23

Form	4562 (2021)																raye 🚣
Pa		Proper		lude auto			ertain	other	vehicl	es, c	erta	in a	ircraft	, and	prope	rty us	ed for
		ainment, r				,		عالمدالم			، مار ما	-4::	laasa .				h. 04-
		For any ve olumns (a)											lease (expens	e, com	olete or	iiy 24a,
		-Depreci		-									for pas	senger	autom	obiles.)	
24a	a Do you have e															Yes	☐ No
	(a) e of property (list vehicles first)	(b) Date placed in service	(c) Business/ investment u percentage	se Cost or o	d) ther basis	s (busin	(e) for depreness/investuse only)	stment	(f) Recover period	,	(g) Metho	od/		(h) preciation eduction	ı Ele	(i) ected sect cost	
25	Special dep		llowance	for qualifie		d prope	erty pla	ced in			_	25					
26	Property use				•												
			(%													
				%													
		. ===:/		%													
27	Property use	ed 50% or I	1		ısiness	use:				S/I							
				% %		+				5/I					-		
				%						5/I							
28	Add amount	s in columr	n (h), lines	25 through	h 27. E	nter he	re and	on line	21, pag			28					
	Add amount														29		
					ction B						_						
	plete this sect																vehicles
to yo	our employees,	iirst answe	r trie ques	stions in Sec	1						ПРІЄ					1	
30	Total business/investment miles driven during the year (don't include commuting miles) .		(a) (b) Vehicle 1 Vehicle 2			(c) Vehicle 3			(d) (e) /ehicle 4 Vehicle 5			(f) Vehicle 6					
31	Total commut	ing miles dri	iven during	g the year													
32	Total other miles driven	personal	(nonco	mmuting)													
33	Total miles lines 30 thro		ing the y														
34	Was the veh				Yes	No	Yes	No	Yes	No	, '	Yes	No	Yes	No	Yes	No
35	use during o Was the veh than 5% own	icle used p	rimarily b	y a more													
36	Is another veh	icle availabl	e for perso	onal use?													
	wer these que e than 5% ow	stions to d	etermine		t an exc	ception						-				who ar	en't
37	Do you mair												_	mmutir		Yes	No
38	Do you mair employees?	ntain a writ	ten policy	y statemer	nt that p	orohibit	s perso	nal use									
39	Do you treat	all use of v	ehicles b	y employe	es as p	ersona	l use?										
	Do you provuse of the ve	ehicles, and	d retain th	e informat	ion rece	eived?											
41	Do you meet																
De	Note: If you		37, 38, 3	39, 40, or 4	11 is "Ye	es," do	n't com	plete S	ection	B for	the o	cover	ed veh	icles.			
Pai	(a	a) on of costs		(b) Date amortiza	ation	Amor	(c) tizable ar	mount	((d) Code se			(e) Amortiza	or	Amortiza	(f) ation for th	nis year
42	Amortization	of costs th	nat heging		ur 2021	l tax vo	ar (see	instruc	tions).				percent	aye			
74	, 11101112411011	. J. JJJIJ II	- Lat Dogin	c daring yo	.a. 202	. tan ye	.a. (566		13113).								
43	Amortization	of costs th	nat hegan	before vo	ur 2021	tax ve	ar							43			

 $\textbf{44} \quad \textbf{Total.} \ \, \text{Add amounts in column (f)}. \ \, \text{See the instructions for where to report} \ \, .$