

# BUSINESS INCOME & EXPENSE WORKSHEET

<b>Company / Individual Name:</b> _____	<b>EIN/SSN:</b> _____	<b>Tax Year:</b> _____
<b>Address:</b> _____	<b>Phone:</b> _____	<b>Email:</b> _____

INCOME	
Gross Sales (or Cash Receipts)	\$
Other Income	\$
Returns and Allowances (Enter as negative number)	\$ -
<b>Cost of Goods Sold</b> = Beginning Inventory + Purchases + Materials & Supplies + Other Cost – Ending Inventory	\$ -
<b>Gross Income</b>	<b>\$</b>

BUSINESS EXPENSE			
Accounting Fees	\$	Office Supplies – Pens, Ink, Paper, etc.	\$
Advertising & Marketing	\$	Payroll Taxes	\$
Alarm Service	\$	Postage	\$
Association Dues	\$	Printing Costs	\$
Bank Fees (Business Account)	\$	Professional Services	\$
Bookkeeping	\$	Referral Fees	\$
Briefcase	\$	Repairs	\$
Business Cards	\$	Seminars/Networking Events	\$
Cleaning	\$	Software	\$
Commission and Fees	\$	Supplies	\$
Contract Labor	\$	Taxes	\$
Educational Training & Supplies	\$	Telephone /Answering Service	\$
Entertainment	\$	Telephone – Business Use of Cell	\$
Equipment Repairs	\$	Tools	\$
Gifts (\$25 Max per person)	\$	Transportation	\$
Insurance	\$	Travel (Away from home for business)	\$
Lease or Rent Equipment	\$	Uniforms – Include Dry Cleaning	\$
Lease or Rent Facility/Office	\$	Union Dues	\$
Legal Fees	\$	Utilities (Non-Personal)	\$
License	\$	Wages	\$
Maintenance	\$	Website	\$
Meals	\$	Taxes and Licenses	\$
Mortgage Interests	\$	Tax Preparation Fees	\$
Notary Fees	\$	Other:	\$

Car & Truck Expenses				
When did you place your vehicle in service for this business or service? _____	Did you have another vehicle available for personal use? <input type="checkbox"/> Yes <input type="checkbox"/> No	Do you have evidence to support your vehicle expenses? <input type="checkbox"/> Yes <input type="checkbox"/> No	Business %	
<b>Odometer Reading</b>	<b>Business Miles</b> (Not Commuting Miles)	<b>Other Miles</b>	<b>How did you keep track of these expenses?</b>	
<b>Beginning</b>	<b>Ending</b>			
<b>Vehicle Expense:</b>	<b>Amount:</b>	<b>Vehicle Expenses:</b>	<b>Amount:</b>	
Cleaning	\$	Oil & Lubrication	\$	
Gas	\$	Parking & Tolls	\$	
Garage Rent	\$	Personal Property Tax	\$	
Insurance	\$	Repairs	\$	
Interests	\$	Tires & Batteries	\$	
Licenses & Leases	\$	Washing and Polishing	\$	

Business Use of Home: (Area used Regularly & Exclusively for business purposes: ___ / Total Area of Home: ___)					
<b>Home Expense</b>	<b>Amount:</b>	<b>Home Expense</b>	<b>Amount:</b>	<b>Home Expense</b>	<b>Amount:</b>
Mortgage Interests	\$	Insurance	\$	Repairs & Maintenance	\$
Real Estate Taxes	\$	Rent	\$	Utilities	\$

Depreciation	Description: _____ Purchase Date: _____ Purchase Price: \$ _____ Business Use % _____
	Description: _____ Purchase Date: _____ Purchase Price: \$ _____ Business Use % _____

**I declare under penalties of perjury that the information on this form is true and correct to the best of my knowledge. I could provide receipts and proof if necessary. Signature: \_\_\_\_\_ Date: \_\_\_\_\_**