



# PROFIT & LOSS RECONSTRUCTION WORKSHEET

BUSINESS NAME & DESCRIPTION : \_\_\_\_\_  
 SALES/SERVICE INCOME: \_\_\_\_\_  
 DATE BUSINESS STARTED & TAX ID# (EIN) : \_\_\_\_\_  
 BUSINESS ADDRESS : \_\_\_\_\_

SCHEDULE C LINE #	EXPENSE	AMOUNT
8	ADVERTISING COSTS	\$
9	<b>CAR &amp; TRUCK EXPENSES 56 cents/mile ( x .56)</b> VEHICLE MAKE & MODEL _____ JAN 1 ODOMETER _____ DEC 31 ODOMETER _____ BUSINESS MILES _____ COMMUTE MILES _____ PERSONAL _____ AVAILABLE ON OFF DUTY _____ ANOTHER VEHICLE AVAILABLE _____	\$
10	COMMISSIONS AND PROFESSIONAL FEES	\$
11	CONTRACT LABOR	\$
14	EMPLOYEE BENEFIT PROGRAMS (LIFE INSURANCE)	\$
15	BUSINESS RELATED INSURANCE	\$
16	BUSINESS MORTGAGE INTEREST (OTHER INTEREST)	\$
17	LEGAL AND PROFESSIONAL SERVICES	\$
18	OFFICE EXPENSE	\$
20	RENT OR LEASE OF VEHICLE, STORAGE AND EQUIPMENT	\$
21	REPAIRS AND MAINTENANCE	\$
22	JOB SUPPLIES & PROCESS MATERIALS	\$
23	TAXES AND LICENSES	\$
24	A. LOCAL BUSINESS MEALS _____ B. TRAVEL EXPENSES & MEALS & HOTELS _____	\$
25	UTILITIES (PAID FOR BIZ ONLY)	\$
26	WAGES PAID	\$
48	OTHER EXPENSES	\$
30	BUSINESS USE OF THE HOME ( UTILITIES & ALARM)	\$

**TOTAL EXPENSES \$** \_\_\_\_\_

**NET PROFIT OR (LOSS) \$** \_\_\_\_\_

## AFFADIVT

I, \_\_\_\_\_ (BUSINESS OWNER PRINT NAME), AGREE THAT TO THE BEST OF MY KNOWLEDGE, THIS INFORMATION ACCURATELY SUMMARIZES MY BUSINESS INCOME & EXPENSE & THAT MY GBC AGENT HAS PREPARED THIS INFORMATION FOR ME AT MY REQUEST BASED ON INFORMATION THAT I PROVIDED. I HAVE BEEN PROVIDED AN OPPORTUNITY TO REVIEW THIS WORKSHEET & ALL OF MY TAX DOCUMENTATION BEFORE THE RETURN IS FILED.

**BUSINESS OWNER SIGNATURE** \_\_\_\_\_

**DATE** \_\_\_\_\_