## RECONSTRUCTION OF INCOME AND EXPENSES BUSINESS 20

Name of Business:	
Name of Owner/Rep.:	
Type of Business:	
Physical Address of Business:	

INCOME RECEIVED	CASH, CHECKS	CREDIT CARDS/1099'S	TOTAL
ALL INCOME MUST BE REPORTED	\$	\$	\$
	<b>BUSINESS REL</b>	ATED EXPENSES	
Advertising/Marketing	\$	Utilities (Gas, Electric, Etc)	\$
Accounting	\$	Repairs and Maintenance	\$
Bank Charges	\$	Payroll Wages	\$
Business Insurance	\$	Payroll Taxes	\$
Commissions and Fees Paid	\$	Employee Benefits Programs	\$
Computer Services and Supplies	\$	Health Insurance Premiums	\$
Dues and Subscriptions	\$	State Taxes (CA Taxes Paid)	\$
Equipment Rent	\$	Licenses, Permits and Fees	\$
GIFTS (Non Marketing)	\$	Business Meals	\$
Charitable Contributions	\$	Entertainment (Nondeductible)	\$
Independent Contractors	\$	Business Use of Home	
Janitorial Services	\$	Rent Paid	\$
Uniforms/Specialty Clothing	\$	Utilities (water, electric, internet)	\$
Laundry and Cleaning	\$	Property Taxes	\$
Legal and Professional	\$	Homeowners Insurance	\$
Office Expense	\$	AUTO MAKE AND MODEL:	
Parking Fees and Tolls	\$	Auto Cost of Purchase	\$
Shipping, Delivery and Postage	\$	Lease Payments	\$
Security	\$	Auto Gasoline	\$ ^
Supplies	\$ // A	Auto Maintenance	\$ -
Tools	\$ 0 11/	Auto Insurance	\$
Training and Education A	S Q IIVI	Auto Registration	\$
Travel	\$	Auto Repairs	\$
Rent/Lease of Space	\$	Total Miles Driven (Personal and Business)	mi
Telephone	\$	Total Business Miles Driven	mi
ESTIMATED PAYMENTS SENT:	Amount Paid to IRS:	Amount Paid California FTB:	Amount Sent for LLC, Others:
1 <sup>st</sup> Payment Due April 15	\$	\$	\$
2 <sup>nd</sup> Payment Due June 15	\$	\$	\$
3 <sup>rd</sup> Payment Due Sept. 15	\$	\$	\$
4 <sup>th</sup> Payment Due Jan. 15	\$	\$	\$

<u>I certify Under Penalty of Perjury that all information above is a reconstruction of what my expenses were for the tax period labeled above and that it is true and correct to the best of my knowledge</u>

Signature:	Title:	Date:
31811ata1 c	116161	Date