<b>BUSINESS INCOME &amp; EX</b>	<b>PENS</b>	E WO	<b>RKSH</b>	EET	•	YE	AR	
NAME					Federal	ID #		
NAME OF BUSINESS								
ADDRESS OF BUSINESS								
BUSINESS ACTIVITY (Check all that apply):				ing 📮	ser	vice 🔲		
PRODUCT SOLD OR SERVICE PERFORMED _				_				
<ul> <li>How many months was this business in operation</li> </ul>						From	То	
How many hours during the year did you and/or yo	•	-						
Is any portion of your investment in this business	•				YES 📮	NO [		
•	BUSIN	IESS IN	COME <b>T</b>	7				
GROSS SALES/RECEIPTS Include all 1099 income for services performed				1099 –		Bring in ALL 1099s received. Include Non-Employee Amount in Gross Sales.		
SALES TAX COLLECTED If not included in above						Do your records agree with the amount reported?		
Amount included in Gross Sales	e				with	the amount re	eported? NO	
RETURNS / REFUNDS that was refunded to your clien			Did you receive \$10,000.00				•	
OTHER INCOME Directly related to your business	s				dual at any one time—or in accumulated unts— during this tax year?			
V Calca of Equipment Man	hinom.		D	- U-I	d for D	) <u>!</u>	llee ¥	
▼ Sales of Equipment, Mac		•						
Kind of Property Date Acquired	Dat	te Sold	Gross Sale	es Price	Expen	ses of Sale	Original Cos	t
W BUICINIESS	EVBEN	OEC /-	4 -6			-		
<b>▼ BUSINESS</b> PURCHASE OF PRODUCT	EXPEN		Sh	ipping cos	st to receive	product or		
& SUPPLIES FOR RESALE  Actual cost of items in purchases			FREIGHT-IN materials, if not included in purchases  OTHER COSTS					
PERSONAL USE used by you or your family			INVENTORY AT END OF YEAR					
♦ COST OF		How	How did you arrive at inventory value?					
LABOR PURCHASE OF		A	Actual Cost  Other (explain)					
MATERIAL FOR JOBS (construction or installation type)								
	_							
▼ CAR and TRUCK EXPENSES	<b>5 V</b>				▼ OI	FFICE in	HOME ▼	
		VEHICLE 1	VEHICLI	<b>E 2</b> □	Date Acqui	red Home		
Year and Make of Vehicle				<u> </u>	Total Cost			
Date Purchased (month, date and year)					Cost Of Lar			
Ending Odometer Reading (December 31)					•	provements		
Beginning Odometer Reading (January 1)		_	_		Sq. Footage			
Total Miles Driven (End Odo – Begin Odo)  Total Business Miles (do you have another vehicle?)						e Of Office Ar If You Rent)	ea	
Total Commuting Miles					Interest	ii fou heiii)		
Parking Fees and Tolls					Taxes			
License Plates				— I I	Utilities/Ga	rbage		
Interest					Insurance	-		
Continue below if you take actual expense (mus	t use actual	expenses if	you lease)		Repairs/Ma	intenance		
Gas, oil, lube, repairs, tires, batteries, insurance, supplies, was	sh, wax, etc.			_] [	Hours Used	l Per Week		
Lease Costs					Hours Worl	ked Per Week		

## **BUSINESS EXPENSES (continued)**

	PROMOTION: Ads, bu	usiness ca	rds,			(AWAY FROM HO	ME OVERNIGHT):	
greeting cards,	etc. <b>S &amp; FEES PAID:</b> Cont	raat lahar			_ Lodgir Moals		congrate from the const	uto)
						. , .	separate from other cos	SIS)
	NEFITS: Health insur reimbursements, etc		pariy			ention fees	a/aaminar	
	orker's comp, busin		(do			ship convention	1/Semma	
not include aut			(3.5			ne or train fares	io force	
INTEREST:	Mortgage (on bu	usiness bld	g.):			ental, taxis or bu		
	Paid to financial	institution				(incidentals, laund	· · · · ·	
	Paid to individua	.l				NTERTAINMENT lunches	•	
OTHER INTERE	ST:						individual or couple)	
(do	not include auto or	truck)			Ticket		marriadar or ocupio)	
List	life insurance loans	separately	/		Ticket	s to qualified ch	aritable events	
Bus	siness only credit ca	rd			UTILITIES 8	TELEPHONE:		
*LEGAL & PRO	FESSIONAL: Attorne	y fees for			Electri	icity (business)		
	unting fees, bonds,		С.		Natura	al gas/heating fu	el (business)	
	SE: Postage, station	ery, office			_ Garba	ge, water, sewe	r (business)	
	charges, pens, etc.				Telepl	none (bus. line, se	econd line, other options	)
	TIT SHARING: Employ	· · · · · · · · ·			Busine	ess long distanc	e (from home telephone)	)
*RENT/LEASE:		· ·			Faxes	, paging svcs, c		
*5554150 0 144	Other business p		1		WAGES:	(bring your copy of been filed)	of W-2s/941s if they have	9
etc. (do not inclu	AINTENANCE: Buildir	ng, equipm	ent,		_		(subject to Soc.Sec. and	d
SUPPLIES:	Misc. (not include	ed elsewhe	ere)		_	Medicare tax)	•	
0011 LILO.	Small tools	00 010011110	,,,,			and Medicare tax	3 (not subject to Soc.Sec	). 
TAXES: Per	rsonal property				_	Other	,	
	enses (not auto/truck)				OTHER EXP	PENSES (not liste	d elsewhere):	
·	al estate of business		land			Bank charges	3	
	es tax (if included in g		land			Courier servi	ces	
	roll (your share Soc.S		·a)			Dues & publi	cations	
	per of nights away):	ec./iviedicai	<del>c</del> )			Education		
•	Nights out Cit	tv	Nights out			Fuel for equip	oment (not auto/truck)	
	Nights out Cit					Laundry & cle		
						Printing & co		
=	Nights out Cit	-	-			Show Fees	- yg	
City Nights out City Nights out _		Nights out		Shipping				
						Shipping		
Item Purchased	Date Purchased	Business Use %	EQUIPMI  Cost (including sales tax)	Item Trade		ASED  Additional Cash Paid	Traded with Related	Other Information
Fulchaseu	Fulchaseu		Sales lax)	ITau	eu	Casii Faiu	Property	IIIIOIIIIalioii
corporations) for	ints of \$600.00 or or rent, interest, or sire information return	services rei	ndered to you in yo		recipient. If	recipient does r	ary 31. Nonfiling pena not furnish you with his o withhold tax on the p	s/her Social Security
Name		Address			Social Sec	urity #	Amount F	Purpose of Payment