

Use this OR your computerized accounting profit and loss

YEAR _____

SECTION A - BUSINESS

Business Name: _____

Business Address: _____

Fed ID# (if any) _____

Income: _____

Costs of Goods Sold: _____
This is the cost of a product made or resold product cost _____
Or if a carpenter its your materials _____
And you might not have any cost of goods sold _____

See business tips link for more help on how to prepare

Expenses

Advertising Current 2016 rate _____

Business Miles write mileage in and multiply by rate 0.54 _____

Furniture, Equipment, Software List out any MAJOR equipment (over \$3000) _____

Employee Benefits: health insurance _____

Pension plan match for employees _____

Subcontract Labor _____

***If you paid subcontractors, did you issue 1099s? YES or NO

Health Insurance _____

Insurance - not Auto (liability, workers comp) _____

Interest Expense from loans or credit cards for business purchases _____

Legal fees _____

Accounting _____

Office Supplies (paper, software, postage, things you have in an office) _____

Equipment Rental _____

Rental of property _____

Repairs & Maintenance _____

Supplies (not office) like cleaning or other misc things _____

Payroll Taxes _____

Business Real Estate Taxes _____

License _____

Travel (plane, taxi, subway, rental car, hotel) _____

Meals _____

Business Utilities (not Telephone) _____

Salaries and Wages for Employees Attach FORM W-3 FOR PAYROLL _____

Postage put in office supplies if not large amount _____

Professional Development (courses done for education for your profession)	_____
Parking and Tolls	_____
Dues and Subscriptions (magazines, memberships, etc)	_____
Bank Fees	_____
Telephone	_____
Business Gifts (things purchased for customers)	_____
Uniforms and cost to launder	_____
Waste Removal	_____
Internet	_____
Other:	_____

Total Expenses	0
Net Profit	0
Ending Inventory Total (at COST)	_____

Supplemental Business Expense Information - Please fill only if needed

SECTION B - OFFICE IN HOME

ONLY needed if you have previously written off home office expenses

Total footage: _____
Footage used for business: _____

Enter amounts as FULL TOTAL amounts

Mortgage Interest _____

Real Estate Taxes _____

Home Owners/Renters Insurance _____

Repairs & Maintenance _____

Utilities _____

Water & Sewer _____

Rent _____

SECTION C - ACTUAL BUSINESS AUTO

ONLY needed if using ACTUAL Auto and not Mileage

Gas _____
Insurance _____
Repairs _____
Inspection _____
Registration _____
Washes _____
Interest _____

Business _____ %
Total Miles _____
Business Miles _____
