

BUSINESSES & SELF-EMPLOYMENT

Year _____

INCOME: NEW THIS YEAR!!! BRING ALL 1099'S AS WELL AS INCOME ADDED UP

SALES AND RECEIPTS: \$ _____ (what people paid you)(bring your 1099's)

COST OF GOODS:

PURCHASES OR COST OF GOODS: \$ _____ (what you paid for materials and products)

ENDING INVENTORY: \$ _____ (your cost of what's on hand Dec. 31st of retail materials to sell)**EXPENSES:**

ADVERTISING & PROMO: \$ _____

ACTUAL AUTO EXPENSES (if not using mileage):

\$ _____

TOTAL BUSINESS MILES DRIVEN: _____

TOTAL MILES DRIVEN (for all reasons): _____

SUB CONTRACTORS: \$ _____

BUSINESS INSURANCE: \$ _____

BUSINESS INTEREST: \$ _____

BUSINESS INTERNET: \$ _____

LEGAL AND ACCTNG: \$ _____

OFFICE & POSTAGE: \$ _____

BUSINESS RENT: \$ _____

OFFICE UTILITIES: \$ _____

EQUIPMENT RENTAL: \$ _____

SUPPLIES: \$ _____

EQUIPMENT REPAIRS: \$ _____

TRAVEL: \$ _____

MEALS & ENTERTAINMENT: \$ _____

SALES TAX PAID: \$ _____

BANK CHARGES: \$ _____

CREDIT CARD PROCESSING FEES: \$ _____

DUES & SUBSCRIPTIONS: \$ _____

PAYROLL PROCESSING FEES: \$ _____

RESEARCH & EDUCATION: \$ _____

PHONES & COMMUNICATIONS: \$ _____

CELL PHONE: \$ _____

COMPUTER/SOFTWARE: \$ _____

TOOLS AND EQUIPMENT PURCHASED: \$ _____

PARKING: \$ _____

HEALTH INSURANCE PAID: \$ _____

BUSINESS GIFTS (\$25 max/client): \$ _____

WAGES PAID: \$ _____

PAYROLL TAXES: \$ _____

EMPLOYEE BENEFITS: \$ _____

IN HOME OFFICE EXPENSES:**(LLC's and Sole Proprietor's Only – Corps do NOT qualify)**

SQ FT OF HOME: _____ SQ FT OF OFFICE: _____

MORTGAGE INTEREST ON HOME: \$ _____

PROPERTY TAXES: \$ _____

INSURANCE ON HOME: \$ _____

UTILITIES: \$ _____ CABLE TV: \$ _____

REPAIRS & MAINTENANCE: \$ _____

ASSOCIATION DUES: \$ _____

RENT: \$ _____

ADDITIONAL FOR DAYCARE PROVIDERS:**FOOD USED:**

Note: If you provide us totals for Breakfasts, Snacks, and Lunches/Dinners, we can calculate an allowed per diem.

OF BREAKFASTS _____

OF LUNCHESES _____

OF SNACKS _____

LAUNDRY & CLEANING: \$ _____

CRAFTS, PARTIES, HOLIDAYS: \$ _____

RECREATION & OUTINGS: \$ _____

EDUCATION & SCIENCE: \$ _____

TOYS, GAMES, & BOOKS: \$ _____

NEW HOUSEHOLD FURNISHINGS: \$ _____

FIRST AIDE & SAFETY: \$ _____

PAPER PRODUCTS: \$ _____

ALL BUSINESSES:

FED ESTIMATED TAX PAID: \$ _____

STATE ESTIMATED TAX PAID: \$ _____

OTHER (Use Back if needed):

***Assets & New Equipment – LARGE items that don't get used up: List on back with prices and dates purchased.**

*Bring information for selling business assets or information when changing autos.

*Closing Costs from Buys & Sells.

*Dates of Asset Purchases and Sales are very important