

Business Income & Expenses (Sole Proprietorship)

Principle Business or Profession: _____
 Business Name: _____
 Employer ID Number: _____
 Business Address: _____
 City: _____ State: _____ Zip Code: _____
 Business is Owned by: Taxpayer/Spouse

Income	Amount	Cost of Goods Sold	Amount
1. Gross receipts or sales	_____	1. Beginning of year inventory	_____
2. Returns and allowances	_____	2. Purchases	_____
3. other income	_____	3. Cost of labor	_____
		4. Materials and supplies	_____
		5. Other costs	_____
		6. End of year inventory	_____

Expenses	Amount	Expenses	Amount
1. Advertising	_____	19. Supplies	_____
2. Bad debt (N/A cash benefits)	_____	20. Payroll taxes	_____
3. Commissions and fees	_____	21. Other taxes	_____
4. Employee benefits	_____	22. Licenses	_____
5. Health insurance	_____	23. travel	_____
6. Other insurance	_____	24. Meals and entertainment (in full)	_____
7. Mortgage interest	_____	25. Utilities	_____
8. Other interest	_____	26. Wages	_____
9. Legal and accounting fees	_____	27. Management fees	_____
10. Allocation of tax preparation fees	_____	28. Consulting expenses	_____
11. Other Expenses	_____	29. Payroll service	_____
12. Pension and profit sharing plans	_____	30. Employee vehicle expense	_____
13. Rent, vehicles	_____	31. Employee mileage reimbursement	_____
14. Rent, equipment	_____	32. Client gifts (limited to \$25 each)	_____
15. Rent, building	_____	33. Education and seminars	_____
16. Repairs & maintenance, building	_____	34. Other: (Description)	_____
17. Repairs & maintenance, equipment	_____	35.	_____
18. Repairs & maintenance, vehicles	_____	36.	_____

Assets Purchased: Vehicles, Machinery, Equipment, Building(Provide Invoice)

Description	Date Acquired	Purchase Price
_____	_____	_____
_____	_____	_____
_____	_____	_____