

BUSINESS WORKSHEET FOR YEAR _____

Name _____

INCOME

Gross Receipts or Sales	\$	Cost of Goods Sold	\$
Federal Gas Tax Refund	\$	Returns & Allowances	\$
Federal or State Grants	\$	"Other" Income	\$

EXPENSES

Advertising	\$	Rent or Lease--Other Property	\$
Bad Debts from sales or services	\$	Repairs & Maintenance	\$
Car & Truck Expenses	\$	Supplies	\$
Commissions and Fees	\$	Taxes & License	\$
Depletion	\$	Travel Expenses	\$
Depreciation & Section 179	\$	# of Days Away Overnight	
Employee Benefit Programs	\$	Meal Expense	\$
Insurance	\$	Utilities	\$
*Interest--Mortgage	\$	Wages	\$
*Interest--Other	\$	Business Telephone	\$
Legal & Professional Services	\$	Internet	\$
Office Expense	\$	Other--	\$
Pension & Profit-Sharing	\$	Other--	\$
Rent or Lease--Vehicles, Equip.	\$	Other--	\$

COST OF GOODS SOLD

Method used to value inventory (check one) <input type="checkbox"/> Cost <input type="checkbox"/> Lower of Cost or Market <input type="checkbox"/> Other	
Inventory at Beginning of Year	\$
Cost of Items Less Personal Use	\$
Cost of Labor. (Not including amounts paid to yourself)	\$
Material and Supplies	\$
Other Costs	\$
Inventory at End of Year	\$

INFORMATION ON YOUR VEHICLE

Date Placed in Service for Business?	Total # of Miles Driven:
Do you have another vehicle for personal use?	Business miles:
Was your vehicle available for personal use?	Commuting miles:
Do you have evidence to support your deduction?	Other miles:

***BRING IN 1099s/1098s FOR INTEREST PAID
SEE OTHER SIDE**

SEE OTHER SIDE

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ASSETS PURCHASED

(bring purchase or trade papers)

	DATE	DESCRIPTION	NEW/ USED	COST
1				\$
2				\$
3				\$
4				\$
5				\$
6				\$
7				\$
8				\$
9				\$
10				\$

ASSETS SOLD OR TRADED

(bring purchase or trade papers)

	DATE	DESCRIPTION	NEW/ USED	COST
1				\$
2				\$
3				\$
4				\$
5				\$
6				\$
7				\$
8				\$
9				\$
10				\$

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