

**Gross Sales**

\$ _____

Cost of Goods Sold:

Purchases \$ _____

Other \$ _____

Beginning Inventory

\$ _____

Ending Inventory

\$ _____



By signing above, I acknowledge the amounts shown on this worksheet were provided by myself and are a true and accurate representation of my deductions / expenses this year.

INCOME**EXPENSES****Advertising**

Graphic Design \$ _____

Media Advertising \$ _____

PR & Marketing \$ _____

Print Materials \$ _____

Website \$ _____

Commission & Fees \$ _____**Contract Labor** \$ _____

(1099-Misc)

Depreciation

Computer Equipment \$ _____

Computer Software \$ _____

Equipment \$ _____

Furniture \$ _____

Office Equipment \$ _____

Phone Equipment \$ _____

Tools/Machinery \$ _____

Employee Benefits \$ _____**Insurance**

General Liability \$ _____

Workers Comp \$ _____

Health Insurance \$ _____**Interest**

Bus. Loan Interest \$ _____

Vehicle Loan Interest \$ _____

Legal & Professional

Accounting \$ _____

Attorney \$ _____

Consulting \$ _____

Office Expenses

Answering Service \$ _____

Bottled Water Service \$ _____

Cleaning Service \$ _____

Pest Control \$ _____

Misc Services \$ _____

Rent Expenses

Equipment Rental \$ _____

Office Rent \$ _____

Storage Rental \$ _____

Repairs & Maintenance

\$ _____

Supplies

General Supplies \$ _____

Office Supplies \$ _____

Taxes & Licenses

Business License \$ _____

Payroll Taxes \$ _____

Permits \$ _____

Property Taxes \$ _____

Sales Tax \$ _____

Travel Expenses

Airfare

Car Rental \$ _____

Hotel \$ _____

Taxis, Shuttles \$ _____

Parking & Tolls \$ _____

Client Meals \$ _____**Utilities (commercial)**

Electricity \$ _____

Gas \$ _____

Sewer \$ _____

Trash \$ _____

Water \$ _____

Employee Gross Wages \$ _____**Other Expenses**

Alarm & Security \$ _____

Bank / Merchant Fees \$ _____

Cable & Internet \$ _____

Cell Phone \$ _____

Continuing Education \$ _____

Conventions & Seminars \$ _____

Fax & E-Fax \$ _____

Gifts (limit \$25/client) \$ _____

Memberships \$ _____

Postage & Shipping \$ _____

Professional Society Dues \$ _____

Research Materials \$ _____

Subscriptions \$ _____

Telephone \$ _____

Uniform & Dry Cleaning \$ _____

Union Dues \$ _____

Web App Subscriptions \$ _____

Misc \$ _____*Misc* \$ _____*Misc* \$ _____**VEHICLE EXPENSES****Keep a mileage log!**

Date, place, description, miles.

Note beginning and year-end mileage

**Vehicle #1****Vehicle #2**

Date placed in service _____

Year, Make & Model _____

Purchase Price \$ _____ \$ _____

Total Lease Payments \$ _____ \$ _____

Total Personal Miles _____

Total Business Miles _____

Fuel \$ _____ \$ _____

Maintenance \$ _____ \$ _____

Insurance \$ _____ \$ _____

Registration \$ _____ \$ _____

**HOME OFFICE** Home office deductions are only allowed when you show a profit on your business

Entire Home sqft _____ Repairs \$ _____

Office sqft _____ Total Utilities \$ _____

Mortgage Interest or Rent \$ _____ Pest Control \$ _____

Real Estate Taxes \$ _____ Security \$ _____

Purchase Price \$ _____ HOA \$ _____

Insurance \$ _____ Misc. \$ _____