

Business Name: _____ Your Name: _____ Year of Expenses: _____

Business Worksheet

		Yes	No
1099 Forms:			
Did you pay \$600 or more to a service provider or contractor?			
Did you send them form 1099-MISC?			
Sales & Income:			
Total sales or income collected	\$	_____	
Returns, Adjustments, and Allow	\$	_____	
Cost of Goods Sold:			
Beginning Inventory (at your cost)	\$	_____	
Purchases	\$	_____	
Ending Inventory (at your cost)	\$	_____	
Expenses:			
Advertising	\$	_____	
Commissions paid to other people (send them 1099-Misc if more than \$600)	\$	_____	
Subcontractors (send them 1099-Misc if more than \$600)	\$	_____	
Business or Liability Insurance (not personal health or accident insurance)	\$	_____	
Interest paid on Business Loans (must be 100% for business or business credit cards)	\$	_____	
Legal/Professional fees (include accounting and tax prep)	\$	_____	
Office Supplies	\$	_____	
Rent for Separate Office or Storage space (must be a separate structure from your home)	\$	_____	
Repairs and Maintenance for Equipment	\$	_____	
Supplies	\$	_____	
Payroll Taxes (employer portion of FICA, FUTA & SUI)	\$	_____	
Workers' Compensation	\$	_____	
Licenses and Permits	\$	_____	
Travel & Lodging (excluding meals & entertainment)	\$	_____	
Meals and Entertainment	\$	_____	
Utilities for separate Offices or Storage (must be a separate structure from your home)	\$	_____	
Wages (include the employees' withholding taxes)	\$	_____	
Bank Charges (for business only checking account)	\$	_____	
Cell Phone.....	Total Expense \$	_____	Business Use _____ %
Second phone at Home or Office for Business and/or Fax	\$	_____	
Dues	\$	_____	
Subscriptions	\$	_____	
Gifts and Promotional Items	\$	_____	
Internet Service, excluding phone and cable	Total Expense \$	_____	Business Use _____ %
(not already claimed on the Home Office Worksheet)			
Merchant Fees	\$	_____	
Miscellaneous:			
Outside Services	\$	_____	
Parking & Tolls	\$	_____	
Postage & Delivery	\$	_____	
Uniforms (do not include street clothes)	\$	_____	
Amounts paid for Health Insurance set up under your business (not Business or Liability)	\$	_____	

Items not listed above (*Description and Cost*):

Equipment and Computers (*Provide a fully detailed description, purchase date and purchase amount for each asset*)

I certify that the above information is true and correct and I have the documentation supporting my responses:

Prepared By

Date