

Profit or Loss from Business

Year Ended _____

Name of Proprietor: _____

SSN or FEIN _____

Business Name: _____

Type of Business _____

Business Address: _____

Gross Receipts and Sales(A): _____

Cost of Sales(B): _____

Gross Profit _____

Expenses:

Advertising _____

Auto & Truck © _____

Bank & Credit Card Fees _____

Contract Labor _____

Dues & Subscriptions _____

Equipment Rentals _____

Employee Benefits _____

Insurance _____

Interest _____

Internet _____

Legal & Professional Fees _____

Meals and Entertainment _____

Office Supplies _____

Pension and Profit Sharing Plan _____

Postage & Shipping _____

Rent _____

Repairs & Maintenance _____

Salaries & Wages _____

Supplies & Small Tools _____

Telephone _____

Travel & Lodging _____

Utilities _____

Website _____

Other (D) _____

Total _____

Net Income(Loss) _____

Sales and Receipts:

Reported on 1099 MISC _____

Reported on 1099 K _____

Not Reported on 1099 _____

Total Sales and Receipts(A) _____

Cost of Sales (B)

Beginning Inventory _____

Purchase Products & Materials _____

Freight In _____

Labor and Subcontractors _____

Less Ending Inventory _____

Total Cost of Sales (B) _____

Auto & Truck Expenses C

Make, Model, & Year of Vehicle

1 _____

2 _____

3 _____

Mileage - Vehicle(s): #1 #2 #3

Total Annual Miles _____

Business Miles _____

Personal Miles _____

Other Expenses(D):

Other Expenses Total(D): _____

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