



**Business or Professional Expenses
Profit & Loss Worksheet**

Name of Business: _____	Gross Income (provide any 1099's)	\$
Address: _____	Principal Business Activity: _____	
City _____ State _____ Zip _____	Product or Service: _____	

Costs of Goods Sold

Beginning Inventory	\$	Materials & Supplies	\$
Purchases	\$	Other Costs	\$
Labor	\$	Ending Inventory	\$

Expenses

Accounting	\$	Office Supplies	\$
Advertising	\$	Parking & Tolls	\$
Bank Charges	\$	Postage	\$
Collection Expenses	\$	Rent – Business Property	\$
Commissions		Rent – Vehicle/Mach./Equipment	\$
Dues & Publications	\$	Repairs	\$
Education Expense	\$	Security & Safety	\$
Equipment Rental	\$	Storage	\$
Insurance Liability	\$	Supplies	\$
Interest Expenses	\$	Tax – Sales	\$
Internet/DSL	\$	Telephone	\$
Janitorial Services	\$	Tools	\$
Laundry/Cleaning	\$	Uniforms	\$
Legal/Professional Fees	\$	Utilities	\$
Licenses & Permits	\$	Website	\$
Meals & Entertainment	\$	Other:	\$
	\$		\$
	\$		\$
	\$		\$
	\$		\$
	\$		\$

Depreciable Items: Such as Equipment, Furniture, Computer, etc. Provide list with cost and date purchased.
*If it cost more then \$2,500

Item: _____	Date: _____	Item: _____	Date: _____
Item: _____	Date: _____	Item: _____	Date: _____
Item: _____	Date: _____	Item: _____	Date: _____

Business Use of Home

Total Area of Home	Sq/Ft	Rent Paid for Year	\$
Area Used Exclusively for Business	Sq/Ft	Repairs & Maintenance	\$
Improvement to Home Office	\$	Utilities	\$
Insurance – Homeowners/Renters	\$	Other Specify: _____	\$
Mortgage Interest	\$	Other Specify: _____	\$
Real Estate Taxes	\$	Other Specify: _____	\$

Vehicle Expenses

Year, Make, & Model of Vehicle:	Total Mileage	
Date First Used for Business:	Business Mileage	
Type of Vehicle: Car, Van, Truck:	Commuting Mileage	
	Personal Mileage	