

PROFIT OR (LOSS) FROM BUSINESS OR PROFESSION

PROPRIETOR _____ FIN _____

PRINCIPAL BUSINESS _____ PRIN. BUS. CODE _____

BUSINESS NAME _____

BUSINESS ADDRESS _____

CASH ACCRUAL COST LCM OTHER SECTION 162

MATERIAL PARTICIPATION 1ST 1040 C STAT. EMP.

WERE PAYMENTS MADE IN EXCESS OF \$600 IN 2017 THAT WOULD REQUIRE 1099 FORMS? YES NO

IF "YES", DID YOU OR WILL YOU FILE REQUIRED FORMS 1099? YES NO

INCOME (PART 1)

1 MERCH CARDS & 3RD PARTY PYMT (1099-K) \$ _____
 2 GROSS RECEIPTS: FORM 1099-MISC _____
 3 GROSS RECEIPTS NOT ON LINE 1 OR 2 _____
 4 GROSS RECEIPTS / SALES (LINE 1+2+3) \$ _____

COST OF GOODS SOLD

INVENTORY BEGINNING OF YR \$ _____
 PURCHASES _____
 COST OF LABOR _____
 MATERIALS & SUPPLIES _____
 OTHER COSTS _____
 SUBTOTAL \$ _____
 LESS: INVENTORY END OF YR (_____
 COST OF GOODS SOLD \$ _____

GROSS PROFIT

\$ _____

DEDUCTIONS (PART 2)

| | | | |
|--------------------------|---------------------|---------------------------|---------|
| ADVERTISING | | REPAIRS / MNTC. | |
| | | SUPPLIES | |
| CAR / TRUCK EXP: MILEAGE | | TAXES | |
| CAR / TRUCK EXP: ACTUAL | | TRAVEL | |
| | | MEALS/ENTERTAINMENT | |
| COMMISSIONS | | AMOUNT | X .50 |
| DEPREC / SEC 179 | | | |
| EMPLOYEE BENE PROG | | UTILITIES | |
| HEALTH INSURANCE | | WAGES | |
| | | | |
| INSURANCE | | BK SRV CHARGES | |
| INT : MORTGAGE | | DUES / PUBS | |
| : OTHER | | FREIGHT | |
| LEGAL/PROF. FEES | | TELEPHONE | |
| OFFICE EXP. | | COMPUTER EXPENSE | |
| PENSION / PROFIT SHARE | | | |
| | | | |
| RENT : MACH / EQUIP | | | |
| : BUS. PROPERTY | | | |
| | | | |
| | | TOTAL EXP. | |
| | | | |
| | | TENTATIVE PROFIT / (LOSS) | |
| | | OFFICE / HOME (8829) | |
| | | NET INCOME / (LOSS) | |
| CAR / TRUCK EXP. DATA | 53.5 CENTS PER MILE | | |
| | | | x .9235 |
| TOTAL BUS. MILEAGE | | SE BASE | |
| TOTAL COMM. MILEAGE | | | x .153 |
| TOTAL OTHER MILEAGE | | | |
| TOTAL ALL MILEAGE | | SE TAX | |
| PLACED IN SERVICE | | | 0.50 |
| ANOTHER VEHICLE | Y | | |
| EVIDENCE | Y | | |
| | | DCTBLE. SE TAX | |
| | | | |