

# 2021 BUSINESS WORKSHEET



Federal ID # \_\_\_\_\_ - \_\_\_\_\_

Business Name: \_\_\_\_\_

Business Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Cash or Accrual: \_\_\_\_\_

New Business: Y N

Family/Single Spouse

Did you make any payments that would require a 1099? Yes No

Health Insurance Premiums paid during year \_\_\_\_\_

Medicare Part B Premiums (from 1099-SSA) \_\_\_\_\_

Long Term Care Premiums paid during year \_\_\_\_\_

If yes, did you or will you file all required form 1099's? Yes No

**Total Medical Insurance Premiums:** \_\_\_\_\_

**BUSINESS INCOME**

Gross Receipts \_\_\_\_\_

Returns & Allowances ( \_\_\_\_\_ )

Other Income: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Gross Income:** \_\_\_\_\_

**COST OF GOODS SOLD**

Beginning Inventory \_\_\_\_\_

Purchases \_\_\_\_\_

Labor \_\_\_\_\_

Materials \_\_\_\_\_

Other Costs \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Ending Inventory ( \_\_\_\_\_ )

**Cost of Goods Sold:** \_\_\_\_\_

**Gross Profit:** \_\_\_\_\_

**EXPENSES**

Advertising \_\_\_\_\_

Auto Expense (Next Page) \_\_\_\_\_

Commissions & Fees \_\_\_\_\_

Contract Labor \_\_\_\_\_

Employee Benefits \_\_\_\_\_

Insurance (Non-Health) \_\_\_\_\_

Mortgage Interest \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

*Total Mortgage Interest:* \_\_\_\_\_

Other Interest \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

*Total Other Interest:* \_\_\_\_\_

Legal & Professional \_\_\_\_\_

Office Expenses \_\_\_\_\_

\_\_\_\_\_

**EXPENSES (CONTINUED)**

Pension & Profit Sharing \_\_\_\_\_

Rent - Equipment \_\_\_\_\_

Rent - Other \_\_\_\_\_

Repairs \_\_\_\_\_

Supplies \_\_\_\_\_

Taxes \_\_\_\_\_

Real Estate \_\_\_\_\_

Payroll Tax \_\_\_\_\_

Sales Tax \_\_\_\_\_

Other Tax \_\_\_\_\_

*Total Taxes:* \_\_\_\_\_

Travel & Lodging \_\_\_\_\_

Meals - \$55 & (\$66 DOT) \_\_\_\_\_

100% of Meals \_\_\_\_\_

(x 50% or DOT 80%) x \_\_\_\_\_ %

*Total Meals:* \_\_\_\_\_

Utilities \_\_\_\_\_

Telephone, Internet, Cell \_\_\_\_\_

Propane, Natural Gas \_\_\_\_\_

Garbage, Water, Sewer \_\_\_\_\_

Electricity \_\_\_\_\_

(less) Personal Use ( \_\_\_\_\_ )

*Total Utilities:* \_\_\_\_\_

Wages \_\_\_\_\_

Other Expenses \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

*Total Other Expenses:* \_\_\_\_\_

**Total Business Expenses:** \_\_\_\_\_

Business Use of Home worksheet: \_\_\_\_\_

**Business Gain/(Loss):** \_\_\_\_\_

