

NAME: _____
2011 INDIVIDUAL INCOME TAX DATA SHEET
BUSINESS INCOME AND EXPENSE

Firm Name: _____
 Address: _____
 Fein (If Applicable): _____ Total Hours Worked: _____
 Principle Product/Service: _____ All Employees & Owner: _____ Hrs.
 Owner Only: _____ Hrs.

Gross Sales/Receipts: \$ _____

Cost of Sales:

Form 1099's Received (Included in gross sales)

<u>ISSUER</u>	<u>AMOUNT</u>
_____	\$ _____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Materials: \$ _____
 Shop Supplies _____
 Other: _____

Direct Labor \$ _____
 (Attach Forms 941)
 Sub-Contract/Outside
 Labor (Attach List) \$ _____

Other Direct Costs
 (Detail) _____ \$ _____

12/31/11 Inventory: \$ _____

Valued at Cost Market
 N/A

OTHER EXPENSES:

Advertising \$ _____
 Commissions Paid
 (Attach List) _____
 Employees (Not owners) _____
 Life Insurance _____
 Disability Insurance _____
 Medical Insurance _____
 Business (Not Auto) Ins _____
 Business Loan Interest _____
 Legal & Accounting _____
 Bank Charges _____
 Office Supplies _____
 Postage _____
 Employee Pension/
 Profit Sharing _____
 Parking & Tolls _____

Equipment Rental \$ _____
 Office/Shop Lease _____
 Travel (Exclude Meals) _____
 **Business Meals _____
 **Entertainment _____
 Dues & Subscriptions _____
 Freight _____
 100% Business: _____
 Utilities _____
 Telephone _____
 Other _____

****50% IS DEDUCTIBLE. PLEASE REPORT 100% OF EXPENSE.**

(over)

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AUTO EXPENSE:

	<u>AUTO 1</u>	<u>AUTO 2</u>
Auto Purchase:Model/Year	_____/_____/_____	_____/_____/_____
Date Acquired	_____	_____
Original Cost	_____	_____
Title Charges	_____	_____
Less Trade	_____	_____
Less Downpayment	_____	_____
<u>Total Finance Charges</u>	_____	_____
<u>Total Loan</u>	_____	_____
Monthly Payments	_____ Mo.	_____ Mo.
Term	_____ Months	_____ Months
Payments made in 2011	_____ Pmts	_____ Pmts
Mileage (Show 2011 Mileage Only):		
Total Mileage	_____	_____
Total Business Miles	_____	_____
Average Daily Commuting Mileage	_____	_____

Elect Standard Mileage No Yes (Complete below)

Standard Mileage Rate 2011- 51 Cents Per Mile (1/11/11-6/30/11) Total Miles _____
 55.5 Cents Per Mile (7/1/11-12/31/11) Total Miles _____

Gas & Oil	\$ _____	\$ _____
Repairs	_____	_____
Insurance	_____	_____
Car Washes	_____	_____
Other: _____	_____	_____

Trucks and Vans: GVW: _____ (GVW is gross vehicle weight on drivers door label)

**FURNITURE, EQUIPMENT OR MACHINERY PURCHASED OR SOLD DURING 2011:
PURCHASED:**

<u>DATE</u>	<u>NEW/USED</u>	<u>DESCRIPTION</u>	<u>AMOUNT</u>
_____	N/U	_____	_____
_____	N/U	_____	_____
_____	N/U	_____	_____
_____	N/U	_____	_____

SOLD/SCRAPPED:

<u>DATE OUT OF SERVICE</u>	<u>DESCRIPTION</u>	<u>SALE OR TRADE IN VALUE</u>
_____	_____	_____
_____	_____	_____

Is your home the principal place of business for this venture?

Yes No

Is the majority of your work or inventory storage done at your home?

Yes No

If both answers are yes, complete page 3.

NAME: _____

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BUSINESS NAME: _____

BUSINESS USE OF HOME:

Total House/Apartment Footage _____
Business Use Square Footage _____

Address: _____

Date Purchased: _____
Total Purchase Price Plus Improvements \$ _____

Approximate Land Value \$ _____

Expenses: (Show Annual Totals)

Interest/Rent Paid	\$ _____	Insurance	\$ _____
Real Estate Taxes	_____	General Repairs	_____
Electricity	_____	General Maintenance	_____
Gas	_____	Other: (Explain)	_____
Water	_____	_____	_____
Personal Telephone	_____	_____	_____
Sewer	_____	_____	_____
Scavenger	_____	_____	_____

DAY CARE ONLY:

Hours of operation per week _____ Hours.

Weeks open during 2011 _____ Weeks.

Other Comments: