

# Small Business Worksheet

Name of Business		Type of business	
Taxpayer Name		EIN	
Gross income		Returns and Refunds	\$
Cost of inventory at beginning of year	\$	Cost of inventory purchased	\$
Cost of items for personal use	\$	Cost of inventory at the end of the year	\$
<b>EXPENSES</b> *See Business Use of Home Worksheet for businesses run out of the home*			
Advertising	\$	Meals	\$
Business Insurance (not health)	\$	Utilities (outside house)	\$
Interest	\$	Dues and Publications	\$
Legal and professional fees	\$	Postage and Shipping	\$
Rent- Outside the home	\$	Telephone	\$
Repairs	\$	Internet	\$
Supplies	\$	Bank Charges/ Fees	\$
Taxes	\$	Self Employed Health Insurance	\$
Travel	\$		
Entertainment	\$	Other	\$
Date you started business			
<b>VEHICLE EXPENSES</b>		Vehicle 1	
Type and year of vehicle		Date first used for business	
Do you have another car for personal use?	Yes No	Miles driven for Business	mi.
Do you have evidence to support the use?	Yes No	Miles driven for personal use	mi.
Is this evidence written?	Yes No	Miles driven for commuting	mi.
Were you reimbursed for any vehicle use?	Yes No	Total miles driven in year	mi.
<b>VEHICLE EXPENSES</b>		Vehicle 2	
Type and year of vehicle		Date first used for business	
Do you have another car for personal use?	Yes No	Miles driven for Business	mi.
Do you have evidence to support the use?	Yes No	Miles driven for personal use	mi.
Is this evidence written?	Yes No	Miles driven for commuting	mi.
Were you reimbursed for any vehicle use?	Yes No	Total miles driven in year	mi.
List Equipment Purchased	Date Purchased	Date Placed in Service	Cost
			\$
			\$
			\$
			\$
			\$
			\$

**\*Bring last year's taxes showing any equipment purchased in prior years\***

## Estimated Payments

Federal Amount	Date Payment Made	State Amount	Date Payment Made
\$		\$	
\$		\$	
\$		\$	
\$		\$	