

**BUSINESS INCOME AND EXPENSES
 TAX RETURN CHECK-LIST**

Name of Proprietor _____ ID # _____
 Business _____

Business Use of Auto: (written records required)

Total Miles _____
 Business Miles _____
 Commuting Miles _____
 Personal Miles _____

Gross Receipts or Sales _____

Cost of Sales _____

Expenses _____

Advertising _____
 Bank Charges _____
 Car & Truck Expenses _____
 Commission & Fees _____
 Depreciation _____
 Insurance _____
 Interest _____
 Legal & Professional _____
 Office Expense _____
 Professional Dues _____
 Publications _____
 Rent _____
 Repairs _____
 Supplies _____
 Taxes & Licenses _____
 Telephone _____
 Travel _____
 Meals & Entertainment _____
 Utilities _____
 Other _____

PURCHASE OF BUSINESS EQUIPMENT, AUTOS OR COMPUTERS

<u>Date Purchased</u>	<u>Description</u>	<u>% of Business Use</u>	<u>Cost</u>
_____	_____	_____	_____
_____	_____	_____	_____

OFFICE IN HOME

Square foot of office: _____ Total Square foot of home: _____

Interest _____ Taxes _____ Utilities _____

Insurance _____ Maintenance _____