

SOLE PROPRIETOR INCOME TAX RETURN

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Income & Expenses From Business

PROPRIETOR & BUSINESS INFORMATION

NAME OF PROPRIETOR

SOCIAL SECURITY NUMBER (SSN)

BUSINESS NAME

EMPLOYER IDENTIFICATION NUMBER (EIN)

BUSINESS ADDRESS (STREET, CITY, STATE, ZIP)

PRINCIPAL BUSINESS OR PROFESSION

ACCOUNTING METHOD

Cash Accrual Other

METHOD OF VALUATION

PART I: INCOME

No.	Income Category Description	Amount
1	Gross receipts or sales	
2	Returns and allowances	
3	Subtract line 2 from line 1	
4	Cost of goods sold	
5	Gross profit (Subtract line 4 from line 3)	
6	Other income	
7	Gross Income (Add lines 5 and 6)	

PART II: EXPENSES

No.	Expense Category Description	Amount
8	Advertising	
9	Car and truck expenses	
10	Commissions and fees	
11	Depletion	
12	Depreciation and section 179 expense	
13	Employee benefit programs	
14	Insurance (other than health)	
15	Interest (Mortgage & Other)	
16	Legal and professional services	

No.	Expense Category Description	Amount
17	Office expense	
18	Pension and profit-sharing plans	
19	Rent or lease (Vehicles, Machinery, Real Estate)	
20	Repairs and maintenance	
21	Supplies	
22	Taxes and licenses	
23	Travel and meals	
24	Utilities	
25	Wages (less employment credits)	
26	Other expenses	
27	Total Expenses (Add lines 8 through 26)	

PART III: NET PROFIT OR LOSS

28	Net Profit or Loss (Subtract line 27 from line 7)	
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SIGNATURE OF PROPRIETOR

DATE

SIGNATURE OF PREPARER (IF OTHER THAN PROPRIETOR)

DATE