

Operating Income Statement

Company Name: _____
For the Period Ended: _____

REVENUE & COST OF GOODS SOLD

Gross Sales

Less: Sales Returns and Allowances

Net Sales

COST OF GOODS SOLD (COGS)

Beginning Inventory

Add: Purchases

Add: Direct Labor

Add: Other Direct Costs

Less: Ending Inventory

Total Cost of Goods Sold

Gross Profit

OPERATING EXPENSES

Salaries and Wages

Rent and Lease

Utilities

Insurance

Advertising and Marketing

Office Supplies and Expenses

Depreciation and Amortization

Professional Fees (Legal, Accounting)

Travel and Entertainment

Other Operating Expenses

Total Operating Expenses

Operating Income (EBIT)
