

PROFIT AND LOSS STATEMENT

Business Income Statement

Company Name: _____

For the Period Ending: _____

Revenue	Amount	Total
Gross Sales / Revenue	
Less: Sales Returns and Allowances	
Net Sales Revenue	
COST OF GOODS SOLD (COGS)		
Beginning Inventory	
Purchases / Materials	
Direct Labor	
Other Direct Costs	
Less: Ending Inventory	
Total Cost of Goods Sold	
Gross Profit	
OPERATING EXPENSES		
Salaries and Wages	
Rent and Lease	
Utilities (Electricity, Water, Internet)	
Insurance	
Marketing and Advertising	
Office Supplies and Expense	
Depreciation and Amortization	
Professional Fees (Legal, Accounting)	
Other General & Administrative	
Total Operating Expenses	
Operating Income (EBIT)	
OTHER INCOME / EXPENSE		
Interest Income	
Less: Interest Expense	
Less: Income Tax Expense	
Net Income / (Loss)	

