NAME								Federal ID #			
ADDRESS OF BUSIN	IESS										
low many hours duri	ng the ye	usiness in operation dear did you and/or you ent in this business no	ır spous	e devo	te to t		ness?	Fl	OR From	# # of ho	urs
		▼′	BUSIN	NESS	INC	OME	▼				
GROSS SALES/RECEIR	GROSS SALES/RECEIPTS Include all 1099 inco for services perform				11			99 - MISC. Bring in ALL 1099s received. Include Non-Employee Amount in Gross Sale			
SALES TAX COLLECTE	D	If not included in above							Do your records agree with the amount reported?		
RETURNS / REFUNDS	Amour that w	nt included in Gross Sales as refunded to your client						you receive \$10,000.00 in actual cas vidual at any one time—or in accumulate			
OTHER INCOME	Directly	y related to your business					amo	ounts— during this tax year?			
▼ Sales	of Eq	uipment, Mach	inery,	, Lan	d, B	uildin	gs H	eld f	or Business	use ▼	,
Kind of Propert		Date Acquired		ate Sold			Sales Pric		Expenses of Sale		al Cost
						***-					· -
							. 71		and the second		
(PLANTS, SEE PURCHASE OF PRODU & SUPPLIES FOR RESA	CT LE	▼ BUSINESS E	EXPEN PAVERS	s, sod	, DECC FREIGI	PRATIVE	Shipping	, FURN	d) ▼ ITURE, MULCH, eceive product or cluded in purchases		ГС.)
PERSONAL USE	Actual d	sost of items in purchases sed by you or your family					AT END OF YEAR				
*COST OF LABOR PURCHASE OF					How did you arrive at inver			_			
MATERIAL FOR JOBS ▼ CAR and	·	ck expenses	▼-						▼ OFFICE in	НОМЕ	. ▼
				VEHI	ICLE 1	VEHIC	CLE 2		Acquired Home		···
Year and Make of Vehicle						ļ		Total			
Date Purchased (month, date and year)						1		<u> </u>	Of Land		
Ending Odometer Reading (December 31)				\dashv _				—	Of Improvements		
Beginning Odometer Reading (January 1)				<u> </u>		 		<u> </u>	ootage Of Home ootage Of Office A	 'ea	
Total Miles Driven (End						 	-	-	Paid (If You Rent)		
Total Business Miles (do you have another vehicle?)						1	1	Lucin	. ala (ii i vu neiil)		

Total Commuting Miles Parking Fees and Tolls

Continue below if you take actual expense (must use actual expenses if you lease)

Gas, oil, lube, repairs, tires, batteries, insurance, supplies, wash, wax, etc.

License Plates Interest

Lease Costs

Date Acquired Home	
Total Cost	
Cost Of Land	
Cost Of Improvements	
Sq. Footage Of Home	
Sq. Footage Of Office Area	
Rent Paid (If You Rent)	
Interest	
Taxes	
Utilities/Garbage	
Insurance	
Repairs/Maintenance	
Hours Used Per Week	
Hours Worked Per Week	

LANDSCAPER/GARDENER EXPENSES (continued)

							7112				
corporations) for	rent, interest, or s information return	ervices ren	dered to you in vo	pur	recipient. If	recipient does u are required t	not furnish you with h to withhold tax on the	nis/her Social Security			
*1099s: Amoun	ts of \$600.00 or	more paid	to individuals (n	ot	Due date o	f return is Janu	ary 31. Nonfiling per	nalty can be \$150 per			
		 									
				<u> </u>							
			· · · · · · · · · · · · · · · · · · ·								
Item Purchased	Date Purchased	Business Use %	Cost (including sales tax)	Item Trac		Additional Cash Paid	Traded with Related Property	Other Information			
VVI	TEELBARROW, C	OMPUTER	, SOFTWARE, PR	SOD K	CICKER, LEA R, CAMERA,	F BLOWER, HE FAX, COPIER,	EDGE TRIMMER, HE OFFICE FURNITUR	EAVY EQUIPMENT, RE, ETC.)			
					Shipping & hauling						
City Nights out City Nights out											
	City Nights out City Nights out					Printing & copying Show Fees					
Payroll (your share Soc.Sec./Medicare) TRAVEL (number of nights away):					Laundry & cleaning						
	es tax (if included in				 	-	ipment (not auto/truck)				
Real estate of business building & land					Education & seminars						
	nses (not auto/truck	<i>_</i>			Dues, publications, busrelated books						
TAXES: Per	sonal property]	Disposal of	materials				
	Small tools				Bank charges & credit card fees						
	Stakes, rope, ti				OTHER EX	(PENSES (not lis	ted elsewhere):				
	SUPPLIES: Gloves, goggles, safety equip. Watering cans, buckets, hoses					and Medicare tax) ` Other					
SUPPLIES:		s safety en	uin	-	-[]	Children under	18 (not subject to Soc.S	Sec.			
*REPAIRS & MA etc. (do not inclu	INTENANCE: Build	ing, equipm	ent,			Medicare tax)	se (subject to Soc.Sec.				
	Other business				WAGES:	been filed)	·				
*RENT/LEASE:					WAGES:		y of W-2s/941s if they h	ave			
	IT SHARING: Empl	oyees only				ness long distar	nce (from home telepho	one)			
supplies, etc.	SE. I Ostage, Static	mery, onice					second line, other optic				
OFFICE EXPEN	unting fees, bonds SE: Postage, station	, permits, e	tc.			age, water, sev					
*LEGAL & PRO	FESSIONAL: Attorr	ey fees for				ıral gas/heating					
Bus	siness only credit o	ard	,	_		tricity (business)					
	t life insurance loa		lv		UTILITIES	& TELEPHONE	:				
	not include auto o	r truck)			Tick		charitable events				
OTHER INTERE							er individual or couple)				
	Paid to financi Paid to individu				Busi	ness meals					
INTEREST:	Mortgage (on				_ I	ENTERTAINME					
not include au	to/truck/health)					rental, taxis or er (incidentals, la					
INSURANCE: Worker's comp, business liability (do						Airplane or train fares					
EMPLOYEE BENEFITS: Health insurance, company party, mileage reimbursements, etc.						Cruise ship convention/seminar					
*CONTRACT L						vention fees		,			
*COMMISSIONS & FEES PAID:					Meals & tips (keep total separate from other costs)						
greeting cards	s, fliers, photos etc	, business c	ards,		Lod	ging	HOME OVERNIGHT):				
ADVERTISING	PROMOTION: Ads	business			EVOENO						