## INCOME & EXPENSE WORKSHEET FOR DIRECT SELLERS YEAR YOUR NAME Federal ID # NAME OF COMPANY YOU SELL FOR \_\_\_\_\_ ADDRESS OF YOUR BUSINESS \_\_\_\_\_ PRODUCT SOLD YOUR PERCENTAGE OF DISCOUNT ON PURCHASES % How many months was this business in operation during the year? 12 Months 🔲 or From\_\_\_\_ To How many hours during the year did you and/or your spouse devote to this business? FULL TIME **I** or # of hours Is any portion of your investment in this business not subject to payback by you? YES 🗆 NO D **▼ BUSINESS INCOME ▼** Payments you receive from customers for Income from Sales: products or samples they buy from you. Amounts you receive from the company for Commissions, Bonuses, Percentages: sales and the sales of others under you. Prizes, Awards and Gifts you receive for any reason for selling: ▼ Sales of Equipment, Machinery, Land, Buildings Held for Business Use ▼ Kind of Property Date Acquired Date Sold Gross Sales Price Expenses of Sale ▼ BUSINESS EXPENSES (cost of goods sold) Shipping cost to receive product or Total cost of purchases of product for resale FREIGHT-IN materials, if not included in purchases Samples or demonstrators purchases that (Value of above product and are available for resale INVENTORY AT END OF YEAR samples you still have) Personal use: Actual cost of above items How did you arrive at inventory value? used by you and your family Your Actual Cost ☐ Lower of Cost or Market Value ☐ Returns: Product included above returned to the company ▼ CAR and TRUCK EXPENSES ▼ **▼ OFFICE in HOME ▼** (for calling on customers, making deliveries, picking up goods, meetings) VEHICLE 1 VEHICLE 2 Date Acquired Home Year and Make of Vehicle **Total Cost** Cost of Land Date Purchased (month, date and year) Ending Odometer Reading (December 31) Cost of Improvements Beginning Odometer Reading (January 1) Sq. Footage of Home Total Miles Driven (End Odo - Begin Odo) Sq. Footage of Office Area Rent Paid (if you rent) Total Business Miles (do you have another vehicle?) **Total Commuting Miles** Interest Parking Fees and Tolls Taxes License Plates Utilities/Garbage Interest Insurance Continue only if you take actual expense (must use actual expense if you lease) Repairs/Maintenance Gas, oil, lube, repairs, tires, batteries, insurance, supplies, wash, wax, etc. Hours Used per Week

**MULTI-LEVEL SALES:** 

Lease Costs

Hours Worked per Week

## **MULTI-LEVEL SALES EXPENSES (continued)**

(must be ordinary and necessary)

Name		Address			Social Security # A		Amount	Purpose of Payment
corporations) for	ts of \$600.00 or rent, interest, or se information return	ervices rer	idered to you in yo	not our	recipient. If	recipient does	uary 31. Nonfiling pe not furnish you with to withhold 31% of the	enalty can be \$150 per his/her Social Security he payment(s).
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			- <del></del>					
				- Tuda		Odon i diu	Property	monnauon
Purchased	Purchased	Use %	sales tax)	Item   Trade	ed	Additional Cash Paid	Traded with Related	Other Information
(Co	omputers, office eq Date	uipment, fu Business	ırnishings, sample Cost (including		monstrators		th lives of more than	
			EQUIPME					
PRINTING & COPYING:								
LAUNDRY & CLEANING:					Shipping (product to customer)			
					Show Fees			
City City					Service Charges paid to the company			
City City					Printing & Copying			
TRAVEL (number of nights away):					Meeting Fees			
State unemployment					Laundry & Cleaning			
Fayroli (your snare Soc.Sec./Medicare)  Federal unemployment					Education/seminars/motivational tapes			
Sales tax (if included in gross sales) Payroll (your share Soc.Sec./Medicare)					Dues & publications			
Real estate of business building & land					Demonstrators or Samples NOT for Sale and with life of less than one year			
Licenses (not auto/truck)					OTHER EXPENSES (not listed elsewhere):			
TAXES: Personal property					Other OTHER EXPENSES (not listed allow how)			
Small tools					and Medicare tax)			
SUPPLIES: Order forms, bags					Children under 18 (not subject to Soc.Sec.			
etc. (do not include auto or truck)					Wages to spouse (subject to Soc.Sec. and Medicare tax)			
*REPAIRS & MAINTENANCE: Building, equipment,					been filed)			
Other business property					Business long distance (from home telephone)  WAGES: (bring your copy of W-2s/941s if they have			
*RENT/LEASE: Machinery and equipment					Telephone (bus. line, second line, other options)			
PENSION/PROFIT SHARING: Employees only					Garbage, water, sewer (business)			
business, accounting fees, bonds, permits, etc.					Natural gas/heating fuel (business)			
*LEGAL & PROFESSIONAL: Attorney fees for					Electricity (business)			
Business only credit card					UTILITIES & TELEPHONE:			
List life insurance loans separately					Tickets to qualified charitable events			
(do not include auto or truck)					Tick		or marvidual of couple)	
OTHER INTEREST:					Gifts (limited to \$25 per individual or couple)			
Paid to financial institution  Paid to individual					MEALS & ENTERTAINMENT: Sales lunches			
INTEREST: Mortgage (on business bldg.):  Paid to financial institution					Other (incidentals, laundry, etc.)			
not include auto/truck/health)					Auto rental, taxis or bus fares			
INSURANCE: Worker's comp, business liability (do					Airplane or train fares			
party, mileage reimbursements, etc.					Cruise ship convention/seminar			
EMPLOYEE BENEFITS: Health Insurance, company					Convention fees			
greeting cards, sales aids, catalogs, etc.  *COMMISSIONS & FEES PAID: Pmts. to down line.					Lodging  Meals & tips (keep total separate from other costs)			
	PROMOTION: Ads, I		ards,		EXPENSES (AWAY FROM HOME OVERNIGHT):			