

**BUSINESS INCOME AND EXPENSES**

Indicate the owner of this business:     Taxpayer     Spouse     Joint

Business Name: \_\_\_\_\_

Business Address: \_\_\_\_\_

City, State, and Zip Code: \_\_\_\_\_

Business product or service: \_\_\_\_\_

Did you start or acquire this business during 2007?     Yes     No

Accounting Method:     Cash     Accrual     Other (describe)

Method used to value inventory:     Cost     Lower of cost or market     Other (describe)

<b>Income and Cost of Goods Sold</b>	<b>2007 Amount</b>	<b>2006 Amount</b>
Gross receipts or sales . . . . .		
Returns and allowances . . . . .		
Other income (enclose description) . . . . .		
Inventory at beginning of year . . . . .		
Purchases less cost of items withdrawn for personal use . . . . .		
Cost of labor . . . . .		
Materials and supplies . . . . .		
Other costs . . . . .		
Inventory at end of year . . . . .		

<b>Expenses</b>	<b>2007 Amount</b>	<b>2006 Amount</b>		<b>2007 Amount</b>	<b>2006 Amount</b>
Advertising . . . . .			Rent - Vehicle, machinery . . . . .		
Commissions and fees . . . . .			Rent - Other . . . . .		
Contract labor . . . . .			Repairs and maintenance . . . . .		
Depletion . . . . .			Supplies . . . . .		
Employee benefits . . . . .			Taxes and licenses . . . . .		
Insurance (other than health)			Travel . . . . .		
Mortgage interest . . . . .			Meals and entertainment . . . . .		
Other interest . . . . .			Utilities . . . . .		
Legal and professional fees . . . . .			Wages . . . . .		
Office expenses . . . . .			Other (enclose listing) . . . . .		
Pension and profit sharing . . . . .					

**Vehicle Information**

Vehicle description \_\_\_\_\_ Date placed in service \_\_\_\_\_ Cost or basis \_\_\_\_\_

Business miles \_\_\_\_\_ Commuting miles \_\_\_\_\_ Other miles \_\_\_\_\_

Actual expenses such as gas, oil, repairs, etc \_\_\_\_\_ Parking fees and tolls \_\_\_\_\_

**Sales, Purchases, and Disposition of Assets in 2007**  
(New clients, enclose detailed listing of all depreciable assets.)

Asset description	Date acquired	Purchase price	Date sold	Sales Price

**Business Use of Home**

Area used exclusively for business \_\_\_\_\_ Total area of home \_\_\_\_\_

Was the home used as a day care facility?     Yes     No    Date home placed in service \_\_\_\_\_

Casualty losses \_\_\_\_\_ Insurance \_\_\_\_\_ FMV of home \_\_\_\_\_

Mortgage interest \_\_\_\_\_ Repairs and maintenance \_\_\_\_\_ Value of land \_\_\_\_\_

Real estate taxes paid \_\_\_\_\_ Utilities and other expenses \_\_\_\_\_













**ITEMIZED DEDUCTIONS**

	2007 Amount	2006 Amount																											
<b>Medical and Dental (less reimbursements)</b>																													
Medical/dental care insurance premiums (other than self-employed) . . . . .																													
Medicare B and D premiums from SSA-1099 and RRB-1099-R . . . . .																													
Qualified long-term care premiums . . . . .																													
Doctor, dentist, and hospital fees . . . . .																													
Prescription medicines and drugs . . . . .																													
Medical aids such as eyeglasses, contact lenses, and hearing aids . . . . .																													
Total transportation expenses . . . . .																													
Other medical and dental expenses . . . . .																													
<b>Taxes Paid</b>																													
State and local income taxes paid (other than withholdings and estimates) . . . . .																													
Actual state and local general sales taxes paid . . . . .																													
Real estate taxes . . . . .																													
Personal property taxes (such as auto registration) . . . . .																													
<b>Interest Paid</b>																													
Home mortgage interest paid to financial institution (enclose Form 1098 or statement) . . . . .																													
Home mortgage interest paid to individual																													
Individual's name _____																													
Individual's address _____																													
Individual's ID number _____																													
Qualified mortgage insurance premiums (VA, FHA, RHS, or private) . . . . .																													
Investment interest expense . . . . .																													
<b>Gifts to Charity</b> (If additional lines are needed, attach similar statement)																													
Contributions of cash or check																													
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:45%;">Name of charity</th> <th style="width:15%;">Date</th> <th style="width:40%;">2007 Amount</th> </tr> </thead> <tbody> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> </tbody> </table>	Name of charity	Date	2007 Amount																										
Name of charity	Date	2007 Amount																											
Noncash contributions (attach Form 1098-C if vehicle donation)																													
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:45%;">Name and address of organization</th> <th style="width:20%;">Date contributed</th> <th style="width:35%;">Fair Market Value</th> </tr> </thead> <tbody> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> </tbody> </table>	Name and address of organization	Date contributed	Fair Market Value																										
Name and address of organization	Date contributed	Fair Market Value																											
<b>Casualty and Theft Losses</b>																													
Casualty and theft losses (enclose supporting documentation with description of the casualty, description of the property, date acquired, cost of property, insurance reimbursements, and the fair market value before and after the casualty) . . . . .																													
<b>Miscellaneous Deductions</b>																													
Unreimbursed employee business expenses (such as union dues, small tools, travel, etc) . . . . .																													
Tax preparation fees . . . . .																													
Other miscellaneous expenses (such items include safe deposit box rental, certain appraisal fees, expenses related to investment income, etc...enclose supporting documentation) . . . . .																													
<b>Other Miscellaneous Deductions</b>																													
Other miscellaneous deductions (such items include gambling losses, estate tax deduction, amortization of bond premium, etc... enclose supporting documentation) . . . . .																													







