

Pamela Price EA Inc.

Pamela Price EA & Associates
 Enrolled to practice before the Internal Revenue Service

2023 GENERAL BUSINESS

INCOME

- **GROSS RECEIPTS** _____
- **AMOUNT OF RETURNS AND ALLOWANCES** _____

COST OF GOODS SOLD

- **BEGINNING INVENTORY** _____
- **MERCHANDISE PURCHASED** _____
- **ENDING INVENTORY** _____

DEDUCTIONS

- **UNION DUES** _____
- **TAX PREPARATION** _____

AUTO EXPENSE: Please sure to give us your odometer reading. Please upload purchase or lease papers on newly acquired vehicles.

| | Year, Make, Model | Date Acqrd | Odometer Reading | Date Taken |
|--------------------|-------------------|------------|------------------|------------|
| Vehicle #1: | _____ | _____ | _____ | _____ |
| Vehicle #2: | _____ | _____ | _____ | _____ |

| | <u>Vehicle #1</u> | <u>Vehicle #2</u> |
|------------------------------------|-------------------|-------------------|
| Total miles driven | _____ | _____ |
| Total miles for business | _____ | _____ |
| Gas, oil, and lubrication | _____ | _____ |
| Repairs | _____ | _____ |
| Tires/Batteries/Supplies | _____ | _____ |
| Insurance | _____ | _____ |
| Lease cost | _____ | _____ |
| Wash and wax | _____ | _____ |
| Auto club | _____ | _____ |
| Loan interest (Schedule "C") | _____ | _____ |
| License (DMV Renewal) | _____ | _____ |
| Sales tax (if you purchased a car) | _____ | _____ |
| Parking | _____ | _____ |

***NOTE:** Two vehicles are listed when a replacement is purchased in the course of the year or when two cars are used concurrently for this business activity.

TRAVEL: List city AND number of days per city: _____

| | | | |
|----------------------|-------|-----------------|-------|
| Air Fares | _____ | Cost of Lodging | _____ |
| Meals | _____ | Tips & Baggage | _____ |
| Laundry & cleaning | _____ | Telephone | _____ |
| Local Transportation | _____ | Other | _____ |

(Taxis, subways, car rental, cost to and from airports)

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- ACCOUNTING _____
- ADVERTISING _____
- BANK CHARGES (Only if you have a business account) _____
- BUSINESS GIFTS (Limited to \$25 per gift, per person) _____
- COMMISSIONS _____
- DUES & PUBLICATIONS _____
- ENTERTAINMENT (Business meetings ONLY) _____
- EQUIPMENT RENTAL _____
- FREIGHT/DELIVERY _____
- INSURANCE _____
- INTERNET _____
- JANITORIAL SERVICES _____
- LEGAL & PROFESSIONAL FEES _____
- LICENSES & PERMITS _____
- MAINTENANCE _____
- OFFICE SUPPLIES _____
- OFFICE IN HOME (Total amount of rent) _____
- ONLINE SERVICES (No streaming services) _____
- OUTSIDE SERVICES (Fees you paid to others) _____
- PENSION & PROFIT SHARING PLANS (Not IRAs) _____
- POSTAGE _____
- PRINTING _____
- RENT ON BUSINESS PROPERTY _____
- REPAIRS TO EQUIPMENT OTHER THAN CAR _____
- SALARIES & WAGES _____
- STORAGE _____
- SUPPLIES _____
- TAXES (This could be business, property, payroll, or sales. List type & amount) _____
- TELEPHONE _____
- UNIFORMS _____
- UTILITIES (for outside space rentals) _____

• BUSINESS EQUIPMENT:

| TYPE OF EQUIPMENT | PURCHASE DATE | COST |
|-------------------|----------------|-------|
| _____ | ____/____/____ | _____ |
| _____ | ____/____/____ | _____ |
| _____ | ____/____/____ | _____ |

Others you don't see a place for, questions, and notes:
