## 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 **u** or From To FULL TIME **or** # of hours \_ How many hours during the year did you and/or your spouse devote to this business? Is any portion of your investment in this business not subject to payback by you? YES 🗆 NO 🛄 **▼ 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 **▼** Date Acquired Date Sold Gross Sales Price Kind of Property Expenses of Sale Original Cost **▼ BUSINESS EXPENSES** (cost of goods sold) **▼** Shipping cost to receive product or materials, if not included in purchases Total cost of purchases of product for resale FREIGHT-IN Samples or demonstrators purchases that (Value of above product and INVENTORY AT END OF YEAR are available for resale 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 **▼ OFFICE in HOME ▼ ▼ CAR and TRUCK EXPENSES ▼** (for calling on customers, making deliveries, picking up goods, meetings) VEHICLE 1 **VEHICLE 2** Date Acquired Home **Total Cost** Year and Make of Vehicle Cost of Land Date Purchased (month, date and year)> Cost of Improvements Ending Odometer Reading (December 31) Sq. Footage of Home Beginning Odometer Reading (January 1) Sq. Footage of Office Area Total Miles Driven (End Odo - Begin Odo) Rent Paid (if you rent) Total Business Miles (do you have another vehicle?) **Total Commuting Miles** Interest Taxes **Parking Fees and Tolls** Utilities/Garbage **License Plates** Insurance Interest Continue only if you take actual expense (must use actual expense if you lease) Repairs/Maintenance Hours Used per Week Gas, oil, lube, repairs, tires, batteries, insurance, supplies, wash, wax, etc. Hours Worked per Week Lease Costs

**MULTI-LEVEL SALES:** 

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

(must be ordinary and necessary)

ADVERTISING/PROMOTION: Ads, business cards,					EXPENSES (AWAY FROM HOME OVERNIGHT):			
greeting cards, sales aids, catalogs, etc.					Lodging			
*COMMISSIONS & FEES PAID: Pmts. to down line.					Meals & tips (keep total separate from other costs)			
EMPLOYEE BENEFITS: Health Insurance, company					Convention fees			
party, mileage reimbursements, etc.					Cruise ship convention/seminar			
INSURANCE: Worker's comp, business liability (do					Airp	lane or train fares		
not include auto/truck/health)					Auto rental, taxis or bus fares			
INTEREST: Mortgage (on business bldg.):					Oth	er (incidentals, laundr	y, etc.)	
Paid to financial institution						<b>ENTERTAINMENT:</b>		
				es lunches				
OTHER INTERES			Gifts (limited to \$25 per individual or couple)					
-(do			Tickets					
(do not include auto or truck)  List life insurance loans separately			,		Tickets to qualified charitable events			
Business only credit card			<u>'</u>		UTILITIES & TELEPHONE:			
			Electricity (business)					
*LEGAL & PROF	,		Natural gas/heating fuel (business)					
business, accor	<i>)</i> .		Garbage, water, sewer (business)					
PENSION/PROF			Telephone (bus. line, second line, other options)					
*RENT/LEASE:			Business long distance (from home telephone)					
			(bring your copy of W 20/0410 if they have					
*REPAIRS & MA	ent,		wages: been filed)					
etc. (do not inclu			Wages to spouse (subject to Soc.Sec. and Medicare tax)					
SUPPLIES: Order forms, bags					Children under 18 (not subject to Soc.Sec.			
Small tools					and Medicare tax)			
TAXES: Personal property					Other			
Licenses (not auto/truck)					OTHER EXPENSES (not listed elsewhere):			
Real estate of business building & land					Demonstrators or Samples NOT for			
Sales tax (if included in gross sales)					Sale and with life of less than one year			
· · · · · · · · · · · · · · · · · · ·					Dues & publications			
Payroll (your share Soc.Sec./Medicare)					Education/seminars/motivational tapes			
Federal unemployment					Laundry & Cleaning			
State unemployment					Meeting Fees			
TRAVEL (number of nights away):					Printing & Copying			
City City					Service Charges paid to the company			
City City City					Show Fees			
LAUNDRY & CLEANING:								
					Shipping (product to customer)			
PRINTING & CO	PYING:							
(C	Computers, office e	quipment, fu	EQUIPMI urnishings, sample Cost (including			_	ives of more than or	ne year) Other
Purchased	Purchased	Use %	sales tax)	Trad	ed	Cash Paid	Related	Information
i uiciiaseu	i dichased		sales lax)	ITau	eu	Casii i alu	Property	imormation
				-				
corporations) for	nts of \$600.00 or or rent, interest, or re information retur	services rer	ndered to you in y		recipient.	If recipient does no		alty can be \$150 per s/her Social Security payment(s).
Name A		Address			Social Security # Amount Pur			Purpose of Payment