

BUSINESS WORKSHEET

OWNERS NAME _____ DATE _____ TAX YR _____

BUSINESS NAME _____

DESCRIBE BUSINESS ACTIVITY _____ STATE _____

Where do business activities take place? Nebraska, Iowa, Other _____

- | | | | | |
|--|--------|------------|---|---|
| 1. Did you or will you file all required Forms 1099? | Y or N | TBC Files? | Y | N |
| 2. Are you required to file sales tax returns? | Y or N | TBC Files? | Y | N |
| 3. Do you file Nebraska Personal Property Tax Returns? | Y or N | TBC Files? | Y | N |

BUSINESS INCOME

COST OF GOODS SOLD & INVENTORIES

Attach Form 1099K	\$ _____	(62) Beginning Inventory 1/1	\$ _____
Gross Receipts/Sales	\$ _____	(63) Items Bought for Resale	\$ _____
Less Returns/Allowances (\$ _____)		(64) Cost of Labor	\$ _____
		(65) Materials/Supplies	\$ _____
Other Income (List Forms 1099)		(67) _____	\$ _____
(75) _____	\$ _____	(69) _____	\$ _____
(77) _____	\$ _____	(73) Ending Inventory 12/31	(_____)
(79) _____	\$ _____	* (41) Health Ins. Premiums	\$ _____
(81) _____	\$ _____	* (42) Nursing Home Premiums	T _____ S _____
(83) _____	\$ _____	*Section 105 Participants use Line 37 Below	

BUSINESS EXPENSES

(30) Advertising	\$ _____	(48) Taxes & Licenses	\$ _____
(31) Auto Exp or Mileage	_____	(49) Travel/Air/Lodging	\$ _____
(Must keep mileage log)		* (50/51/52) Meals/Entertainment	\$ _____
(33) Commissions & Fees	\$ _____	# of Nights Away From Home	_____
(34) Contract Labor	\$ _____	(53) Utilities	\$ _____
(37) Employee Benefits	\$ _____	(54) Wages paid to employees	\$ _____
(38) Insurance/Not Health	\$ _____	(58) Bank Fees	\$ _____
(39) Interest (Mortgage)	\$ _____	(61) Dues/Publications	\$ _____
(40) Interest (Other)	\$ _____	(64) Cell Phone	\$ _____
(41) Legal/Acct/Prof Fees	\$ _____	(67) Freight/Postage	\$ _____
(42) Office Expense	\$ _____	(70) Internet Access	\$ _____
(43) Pension Plans	\$ _____	(73) _____	\$ _____
(44) Rent/Vehicles/Equip	\$ _____	(76) _____	\$ _____
(45) Rent/Bldgs/Other	\$ _____	(79) _____	\$ _____
(46) Repairs/Maintenance	\$ _____	(80) _____	\$ _____
(47) Supplies	\$ _____	Depreciation	\$ _____

ASSETS PURCHASED (Includes vehicles, equipment, land, buildings, etc.)

<i>New or Used</i>	<i>PP Tax</i>	<i>Item (Description)</i>	<i>Date Purchased</i>	<i>Cost</i>	<i>Trade In</i>

ASSETS SOLD (Includes vehicles, equipment, land, buildings, etc.)

<i>Item (Description)</i>	<i>Date Acquired</i>	<i>Date Sold</i>	<i>Selling Price</i>	<i>Original Cost</i>