

YEAR-END BUSINESS EXPENSE SUMMARY

Completing this Summary will result in Lower Tax Preparation Fees AND More Tax Deductions

		VEHICLE #1 Year-Make-Model	
Commissions (Paid By your business to agents)			
Employee Expenses			
Education Expenses (reimbursed to employees under Benefit Plan)		Purchase Date Amount	
Employee Business Expense (Reimbursements)		Property (sales) Tax	
Wages (Paid by your business)		Own or Lease?	
		Parking/Tolls	
Accounting fees		Total miles driven	mi.
Advertising costs		Commuting	mi.
Bank Charges		Business Use	mi.
Cleaning & Janitorial		Medical miles	mi.
Debt Collection		Charitable miles	mi.
Dues & Subscriptions		Written log?	Y / N
EQUIPMENT		License/Registration	
Gifts (max. \$25 per person per year)		Interest paid on auto loan	
Insurance (except health, home, auto, life)		Insurance	
Interest (except home or auto)		Gas	
Laundry & Cleaning (for travel)		Oil	
Legal/Professional fees (Memb. \$ x12)+\$		Repairs/Maintenance	
Medical Expenses (reimbursed to employees under Benefit Plan)		Total Vehicle Expenses	
Meeting Registration Fees			
Office rent (except home-office)			
		VEHICLE #2 Year-Make-Model	
Office/Business Supplies (paper, ink, etc.)			
Outside Services		Purchase Date Amount	
Pension plans for employees		Property (sales) Tax	
Permits & Fees		Own or Lease?	
Postage & Delivery (long dist. packages, UPS, etc.)		Parking/Tolls	
Printing (fliers, bus. cards, copies, etc.)		Total miles driven	mi.
Rent (not lease) of Vehicles or Equipment		Commuting	mi.
Rent of property (except home)		Business Use	mi.
Repairs & Maintenance (except home or auto)		Medical miles	mi.
START-UP Registration		Charitable miles	mi.
Taxes & Licenses (except home or auto)		Written log?	Y / N
TOOLS and MATERIALS		License/Registration	
Training (Mtg. Fees, Seminars, Conventions, Books, etc.)		Interest paid on auto loan	
Travel Expense – Transportation (Flights, Taxis, Rental Cars)		Insurance	
Lodging (Tips, Phone charges for business calls, use of in-room Safe, laundry/dry cleaning, personal grooming)		Gas	
Meals & Entertainment		Oil	
MEALS (your own- 50%)		Repairs/Maintenance	
Utilities (other than home)		Total Vehicle Expenses	
Business Phone/fax line		License/Registration	
Cell Phone		Parking/Tolls	
Internet Access fees		Interest paid on auto loan	
Main Phone (LD only/excluding base charges)		Total Vehicle Expenses	
Voicemail / Text Service			
Web Hosting			

HOME OFFICE

1. Did you use a portion of your home as an office?	YES ___ NO ___
Hours per week you work in your home office	hrs/wk
Days per week you work in your home office	days/wk
Business hours per week you worked outside of office	hrs/wk
2. Is the "Management Function" of the business performed in the home office?	YES ___ NO ___
3. Do you meet customers there?	YES ___ NO ___
4. Is home office where "money changes hands" in your business?	YES ___ NO ___
5. Are the tasks performed in the home office "Primary Business Functions"?	YES ___ NO ___
6. Was this area used Regularly and Exclusively for business?	YES ___ NO ___
7. Did you store INVENTORY, TOOLS or Product Samples in your house or apartment?	YES ___ NO ___

▲ If you answered YES to #6 OR #7 above ▲ complete the following:

HOME OFFICE BUSINESS-USE-PERCENTAGE (BUP) CALCULATOR	
1. Total square footage of your home (Include unfinished basement and garage only if they are used for business.)	sq. ft.
2. Square footage of the room or area that you use Regularly and Exclusively as an office	sq. ft.
3. Enter the square footage of any rooms other than your office, including basement or garage IF you store inventory or product samples AND DO NOT use this space more than occasionally for personal purposes. (Examples: basement used for nothing else, not even laundry; formal dining room used only at Thanksgiving)	sq. ft.
4. Enter the square footage of the footprint of the space ACTUALLY OCCUPIED by any inventory or product samples that are kept in any rooms or areas other than those covered by questions #2 or 3	sq. ft.
HOME OFFICE BUP	%

Was your home used for a Daycare Business?	YES ___ NO ___	If you RENT your home or apartment, answer the following:	
If YES: # Hours per Day		Annual Rent	
# Days per Week		Renter's Insurance	
# Weeks during tax year		Annual cost of utilities paid by you	
If you OWN your home, answer the following:		Repairs and Maintenance expenses paid by you	
Cost of home (purchase price, including land, plus improvements)			
Land value on day of purchase			
Mortgage interest you paid			
Real estate tax			
Homeowner's insurance			
Repairs and Maintenance			
Annual cost of utilities: (Electricity, Gas, Water, NO TELEPHONE OR TV)			
Mortgage insurance			
Other expenses (security, HOA dues, etc.)			
OTHER Costs of Doing Business (if NOT Covered above):			
	\$		\$
	\$		\$
	\$		\$
	\$		\$

This Worksheet and other Free Resources are available at
www.HomeBusinessTaxSavings.com

Provided to you courtesy of **Ronald R. Mueller**, author of
 "It's How Much You KEEP, That Counts! Not how much you
 Make" *"The ONLY Step-by-Step Guide to Home Business Tax
 Breaks Authorized by Congress"*

Helpful Recording: www.HomeBizTaxHelp.info

Other Resources: www.TaxReductionInstitute.com

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