

YEAR____

NAME					Federal ID #		
NAME OF BUSINESS							
ADDRESS OF BUSINESS							
How many months was this busi How many hours during the year portion of your investment in thi	ness in operation during r did you and/or your sports business not subject to	the year? ouse devote payback by	to this busines	12 Months [OR From FULL TIME OR YES NO		
LINEHAUL TRUCKING			1099 –	MISC. Bring in ALL 1099	Os received.		
FUEL SURCHARGE				Do your records agree with YES 🗖			
PICKUP AND DELIVERY					the amount reported?		
TRUCK RENTAL FEES				indivi	you receive \$10,000.00 in actual cash from any vidual at any one time—or in accumulated		
OTHER INCOME				amoun	amounts—during this tax year?		
▼ Sales of Equipment, Machiner Kind of Property Date Acquired		Date S		Gross Sales Price	Expenses of Sale	Original Cost	
CAR and TRUCK EXP	ENSES (personal veh	nicle) ▼	VEHICLE 1	VEHICLE 2	✓ BUSINESS MI Job seekin		
Date Purchased (month, date and year)					Out-of-tow	2	
Ending Odometer Reading (December					Bank trips		
Beginning Odometer Reading (January 1)			_	_	Business m	eetings	
Total Miles Driven (End Odo – Begin Odo)					Other temp	p. locations	
Total Business Miles (do you have a	nother vehicle?)				Other		
Total Commuting Miles							
Parking Fees and Tolls					COMMUTING MILES truck or	business location	
License Plates Interest						DUSTRESS TOCATION	
	l expense (must use actual expens	e if vou lease)			Mfg. gross vehicle wei	ght (check one):	
Gas, oil, lube, repairs, tires, batteries, ins					6000 lbs. or les	• ,	
Lease Costs					Over 6000 lbs.		
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TRUCKER'S EXPENSES (continued)

advertising/promotion: Ads, business cards, greeting cards, etc.					Lodging				
♦ COMMISSIONS & FEES PAID: Lumper/Helper				Meals & tips (keep total separate from other costs)					
				Other (incidentals, laundry, etc.)					
EMPLOYEE BENEFITS: Health Insurance, company party, mileage reimbursements, etc.				Convention fees					
FUEL: Tractor fuel				Airplane or train fares					
Reefer fuel			Auto rental, taxis or bus fares						
INSURANCE: Worker's comp, business liability, truck Insurance, etc.				MEALS & ENTERTAINMENT: Business meals					
	INTEREST: Mortgage (business bldg.):				Gifts (limited to \$25 per individual or couple)				
_	Paid to financial institu	ition		Tickets					
	Paid to individual			Tickets to qualified charitable events					
OTHER INTEREST:				UTILITIES & TELEPHONE:					
Truck le				Electricity (business)					
	ent loans			Natural gas/heating fuel (business)					
	ss only credit card SSIONAL: Attorney fee	for		Garbage, water, sewer (business)					
	g fees, bonds, permits, e			Telephone (bus. line, second line, other options)					
_	postage, stationery, of			il ——	•				
supplies, bank charg	1 0,			Business long distance (from home telephone)					
	SHARING: Employees	only		Fax transmissions, paging svcs, cellular svcs					
♦ RENT/LEASE: Truck lease			WAGES:		of W-2s/941s if they				
_	Machinery and equipm					use (subject to Soc.Sec. ar	nd		
	Other bus. property, lo				Medicare tax)	r 18 (not subject to			
etc.	TENANCE: Truck, equ	iipment,			Soc.Sec. and M				
SUPPLIES: Maps, safety supplies				Other					
Small tools				OTHER EXPENSES (not listed elsewhere):					
	nd scale fees			Bank charges					
	es and permits			Dues & Publications (assn/union dues)					
Fuel taxes				Education					
Highway use taxes				Job Related Testing					
Real estate of business building & land				Loading/unloading					
Payroll				Road services					
TRAVEL (number of nights away):				Tires and tubes					
City Nights out City Nights out				Uniforms and cleaning					
	out City			Washing and cleaning					
City Nights out City Nights out			Other						
]					
	-	Radio, pager, cel	lular phone	PURCH e, answering	machine, other.				
Item Purchased	Date Purchased	Cost (including	Item Traded		Additional Cash Paid	Traded with Related Property	Other Information		
Purchased	Purchased	sales tax)	Traded		Cash Paid	Related Property	Information		
<u> </u>									
corporations) for rer	of \$600.00 or more at, interest, or services formation returns to be	rendered to you in you		recipient.	If recipient doe		enalty can be \$150 per his/her Social Security yment(s).		
Name		Address		Social Security #		Amount	Purpose of Payment		