

**SUMMARY OF BUSINESS INCOME & EXPENSES
FOR CALENDAR YEAR _____**

Name of Proprietor _____ SSN _____

Business Name _____ Tax ID _____

Business Address _____ Service _____

City _____ State _____ Zip Code _____

Nature of the Business: _____

Business Type: _____ Sole Proprietor _____ LLC _____ C Corporation _____ S Corporation

Business Income

_____ Gross income

Summary of Expenses

_____ Accounting Services

_____ Administrative Expenses

_____ Advertising

_____ Answering Service

Auto Expenses (Actual Expenses or Mileage Can Be Used)

Mileage Calculation

Percentage of Business Use (_____%)

Value of Vehicle \$ _____

Date Vehicle Placed In Service _____

Business Mileage _____

Personal Mileage _____

Commuting Mileage _____ (Daily Round Trip Commuting Miles _____)

Actual Auto Expenses, Percentage of Business Use (_____%)

- _____ Gasoline Expense
- _____ Auto Repairs & Maintenance
- _____ Auto Insurance
- _____ Tires
- _____ Auto Inspections
- _____ Interest Paid On Auto Loan (Finance Charges)
- _____ Auto Warranty
- _____ Auto Club Fee
- _____ Personal Property Taxes Paid On Auto
- _____ Lease Payments

- _____ Bad Debts (Uncollectible Revenues)
- _____ Bank Charges
- _____ Business Cards
- _____ Business Consultation
- _____ Business Insurance
- _____ Cable TV Expense (Required for Business)
- _____ Cellular Phone Expense
- _____ Charitable Contributions
- _____ Commissions & Fees
- _____ Contract Labor
- _____ Courier Services
- _____ Conventions and Conference Fees & Expenses
- _____ Customer or Client Gifts

**PROPRIETARY AND CONFIDENTIAL—DO NOT DUPLICATE
FOR USE BY QUEST WEALTH ADVISORS LLC ONLY**

- _____ Education & Training
- _____ E-mail Expense
- _____ Employee Benefit Programs
- _____ Entertainment & Meals
- _____ Equipment Rental
- _____ Errors & Omissions (E&O) Insurance
- _____ Health Insurance
- _____ Income Tax Preparation
- _____ Interest Expense
- _____ Internet Services (DSL, Internet Provider, Website Hosting, Etc.)
- _____ Legal & Professional Services
- _____ Letterhead & Other Stationery
- _____ Liability Insurance
- _____ Long Distance Expense
- _____ Other Interest
- Office Expenses**
- _____ Mortgage Interest
- _____ Rent
- _____ Utilities
- _____ Cleaning
- _____ Repairs & Maintenance

_____ Parking Expense (Do not include regular daily parking)
_____ Payroll Taxes
_____ Postage & Shipping Expenses
_____ Printing Expenses
_____ Professional Dues & Memberships
_____ Professional License
_____ Property Insurance
_____ Publications (Books & Magazines)
_____ Rent or Lease of Equipment
_____ Repairs & Maintenance
_____ Retirement Plan Contributions (Plan Type _____)
_____ Salaries & Wages
_____ Special Clothing, Uniforms & Shoes (Purchases & Maintenance)
_____ Supplies
_____ Taxes
_____ Telephone Expense
_____ Workshops & Seminars
_____ Voice Mail
_____ **Travel Expenses**
_____ Lodging
_____ Meals, & Entertainment Expenses
_____ Airline & Train Fare
_____ Auto Rental & Gas
_____ Taxi, Shuttle, Parking & Toll Expense

Cost of Goods Sold or Operations

_____ Beginning Inventory
_____ Purchases Less Cost of Personal Use Items
_____ Labor
_____ Materials and Supplies
_____ Other Costs
_____ Ending Inventory

Business Use of Home

Home Purchase Price _____
Date Home Office Placed In Service _____
Total Square Feet Of Home _____ Ft
Total Square Feet Of Office _____ Ft
Number of Rooms In Home _____
_____ Mortgage Interest or Rent
_____ Real Estate Taxes
_____ Hazard Insurance
_____ Electricity
_____ Gas
_____ Telephone
_____ Repairs, Maintenance & Cleaning