



# Small Business Year End Tax Worksheet

Company: \_\_\_\_\_ Tax Year: \_\_\_\_\_

**S-Corp and Partnership returns due March 15th; Corporate and Individual Returns due April 15th**

## Revenue

**Total Sales & Revenues** \$ \_\_\_\_\_

## \*Cost of Goods Sold

|          |                               |   |                                 |
|----------|-------------------------------|---|---------------------------------|
| \$ _____ | <b>Ending Inventory 12/31</b> | \$ _____  | <b>Subcontractor Labor</b>      |
| _____    | <b>Purchases</b>              | _____   | <b>Delivery/Freight Charges</b> |
| \$ _____ | Materials                     | \$ _____  | <b>Other Cost of Goods</b>      |
| \$ _____ | Products for Resale           | <b>* Required for Sales &amp; Construction Businesses</b> |                                 |

## Expenses

|          |   |          |  |
|----------|---|----------|--|
| \$ _____ | <b>Accounting</b>   | \$ _____ | <b>Office Expenses</b>                             |
| \$ _____ | <b>Advertising</b>  | \$ _____ | <b>Office Supplies</b>                             |
| \$ _____ | <b>Bank Charges</b>   | \$ _____ | <b>Outside Services</b>                            |
| \$ _____ | <b>Credit Card Service Fees</b>   | \$ _____ | <b>Parking &amp; Tolls</b>                         |
| _____    | <b>Car &amp; Truck</b>  | \$ _____ | <b>Postage</b>                                     |
| \$ _____ | Actual Out-of-Pocket Expenses<br>(Insurance, Gas, Oil, Repairs, Wipers, Tires,<br>Depreciation/Cost of Vehicle, License/Tags) | \$ _____ | <b>Printing</b>                                    |
| _____    | <b>Vehicle Info</b>   | \$ _____ | <b>Rent</b>  |
| _____    | Type: <input type="checkbox"/> Car <input type="checkbox"/> Truck   | \$ _____ | Real Estate  |
| _____    | Make/Model _____  | \$ _____ | Vehicle Lease                                      |
| _____    | Total Mileage _____   | \$ _____ | Equipment  |
| _____    | Business Miles _____  | \$ _____ | <b>Repairs &amp; Maintenance</b>                   |
| \$ _____ | <b>Total Mileage Expense =</b>  | \$ _____ | <b>Salaries &amp; Wages</b>                        |
| _____    | Business Miles X Rate _____¢ per mile   | \$ _____ | <b>Security</b>                                    |
| \$ _____ | <b>Commissions</b>  | \$ _____ | <b>Supplies &amp; Materials</b>                    |
| \$ _____ | <b>Continuing Education</b>   | \$ _____ | <b>Taxes</b>                                       |
| \$ _____ | <b>Contract Labor/Temp Staff</b>  | \$ _____ | Real Estate  |
| \$ _____ | <b>Depreciation</b>   | \$ _____ | KY State License (\$175 LLET)                      |
| \$ _____ | <b>Dues &amp; Subscriptions</b>   | \$ _____ | Tangible   |
| \$ _____ | <b>Employee Benefits</b>  | \$ _____ | Local Net Profits                                  |
| \$ _____ | <b>Gifts</b>  | \$ _____ | Property   |
| _____    | <b>Insurance</b>  | \$ _____ | Payroll  |
| \$ _____ | Commercial Liability  | \$ _____ | Other  |
| \$ _____ | Workers' Comp   | \$ _____ | License & Permits                                  |
| \$ _____ | Surety Bond   | \$ _____ | <b>Telephone</b>                                   |
| \$ _____ | Health & Dental   | \$ _____ | Office   |
| \$ _____ | Malpractice   | \$ _____ | Cell Phone   |
| \$ _____ | Disability  | \$ _____ | _____ % Business Use                               |
| \$ _____ | <b>Interest-Mortgage</b>  | \$ _____ | <b>Small Tools &amp; Equipment(&lt;\$200/item)</b> |
| \$ _____ | <b>Interest-Other</b>   | \$ _____ | <b>Travel</b>                                      |
| \$ _____ | <b>Internet Service</b>   | \$ _____ | <b>Uniforms</b>                                    |
| \$ _____ | <b>Janitorial</b>   | \$ _____ | <b>Utilities</b>                                   |
| \$ _____ | <b>Laundry/Dry Cleaning</b>   | \$ _____ | Electric   |
| \$ _____ | <b>Legal &amp; Professional Services</b>  | \$ _____ | Gas  |
| \$ _____ | <b>Meals &amp; Entertainment</b>  | \$ _____ | Water/Trash  |
| _____    |   | \$ _____ | Cable  |
|          |   | \$ _____ | Website  |
|          |   | \$ _____ | <b>Total Expenses</b>                              |

**Standard Mileage Rates: 2015 - 57.5¢ per mile 2016 - 54.0¢ per mile 2017 - 53.5¢ per mile 2018 - 54.5¢ per mile**

## Balance Sheet Statement

**Assets**

Reconciled Cash Balance on 12/31

\$ \_\_\_\_\_ **Total New Fixed Assets** (Computers, Equipment, Furniture, etc.)

| AMOUNT   | DESCRIPTION | PURCHASE DATE  |
|----------|-------------|----------------|
| \$ _____ | _____       | ____/____/____ |
| \$ _____ | _____       | ____/____/____ |
| \$ _____ | _____       | ____/____/____ |
| \$ _____ | _____       | ____/____/____ |
| \$ _____ | _____       | ____/____/____ |
| \$ _____ | _____       | ____/____/____ |
| \$ _____ | _____       | ____/____/____ |
| \$ _____ | _____       | ____/____/____ |
| \$ _____ | _____       | ____/____/____ |
| \$ _____ | _____       | ____/____/____ |

**Liabilities & Equity**

\$ \_\_\_\_\_ Notes Payable  
 \$ \_\_\_\_\_ Loans from Shareholders/Owners

Notes:

### Home Office Expense for Form 1040, Sch. C

|          |  |          |                  |
|----------|--|----------|------------------|
| \$ _____ | <b>Furniture (Desks, Chairs, etc.)</b> | \$ _____ | <b>Utilities</b> |
|          | <b>Housing Costs</b>                   | \$ _____ | Electric         |
| \$ _____ | Rent Expense                           | \$ _____ | Gas              |
| \$ _____ | Mortgage Interest                      | \$ _____ | Trash            |
| \$ _____ | Property Tax                           | \$ _____ | Water/Sewer      |
| \$ _____ | Homeowner's Insurance                  |          | <b>Other</b>     |
| \$ _____ | Home Repairs/Maintenance               | \$ _____ | _____            |

**Square Footage**

Entire Home \_\_\_\_\_ sq. ft. Home Office \_\_\_\_\_ sq. ft.

The above information is furnished to Legacy Consulting Group, LLC. for the purpose of preparing all applicable tax returns related to the business listed above. This information is accurate and complete to the best of my knowledge and accurately represents all income and expenses associated with this business activity for the applicable tax year. I have gathered this information from records and documents maintained by the business. While Legacy Consulting Group, LLC will not audit or verify these records, I understand my need to keep these records on file within the business for a minimum of three years. I also understand that at any future point, I may be asked by Legacy Consulting Group, LLC. or a governmental taxing authority to clarify or produce these records in order to verify the information listed above. I accept full responsibility for the accuracy of this data and for the maintenance of the underlying documentation.

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Title

\_\_\_\_\_  
Signature

\_\_\_\_/\_\_\_\_/\_\_\_\_  
Date