

Name _____

Income _____

Tax Year _____

PROFESSIONAL EXPENSES

Advertising / Marketing	
Business Cards	
Bank Charges	
Commissions Paid to Others	
Desk / Office Fees	
Insurance (Non Health)	
Legal Fees	
Office Expense	
Photocopying / Printing	
Business Meals / Entertainment	
Postage	
Rent	
Repairs	
Subcontracted Labor	
Supplies	
Wages	
Payroll Taxes	
Employee Benefits	
Benefit Plan Set-Up	

EQUIPMENT AND SOFTWARE

ITEMS	Cost	Date
Attache / Brief Case		
PDA / Blackberry /Smartphone		
Camera		
Mobile Phone		
Computer		
Fax machine / Scanner		
File Cabinets		
GPS Unit		
Office Furniture		
Printer / Copier		
Software		
Other _____		

PROFESSIONAL EXPENSES (CONTINUED)

Audio / Visual Aids	
Bookkeeping Fees	
Cards and Holiday Mailings	
Clerical	
Client Accommodations	
Client Gifts (\$25 per client per year)	
Continuing Education / Seminars	
Courier / FedEx	
Dues	
Licenses	
Maps / Books	
Memberships	
Online Marketing	
Publications	
Sales Assistants	
Software Subscriptions	
Tools	
401k / DB / SEP Management Fees	
Keys / Locksmiths / Lockboxes	
Insurance (Self Employed Health Ins.)	
Tax Prep Fees	
Other _____	
Other _____	

COMMUNICATION EXPENSES

Mobile Phone (Business Use		See Note 1
Fax / Second Phone Line		See Note 1
Wireless Data		See Note 1
Webpage / Hosting		
Long Distance Fees		
Internet Service		

Note 1: You must have a separate personal cell/ phone/ wireless device or have the phone billed to your business account to claim 100% of this expense

Note: By completing this form you certify that the entries can be substantiated by documentation. You are advised to retain and possess all receipts and back up for at least 5 years after filing this year's tax return.