

# TRUCKER'S INCOME & EXPENSE WORKSHEET

YEAR \_\_\_\_\_

NAME \_\_\_\_\_ Federal ID # \_\_\_\_\_

NAME OF BUSINESS \_\_\_\_\_

ADDRESS OF BUSINESS \_\_\_\_\_

How many months was this business in operation during the year? 12 Months  OR From \_\_\_\_\_ Through \_\_\_\_\_

How many hours during the year did you and/or your spouse devote to this business? FULL TIME  OR # of hours \_\_\_\_\_

Is any portion of your investment in this business *not* subject to payback by you? YES  NO

## ▼ BUSINESS INCOME ▼

LINEHAUL TRUCKING		<b>1099 – MISC.</b> Bring in ALL 1099s received.  Do your records agree with the amount reported? YES <input type="checkbox"/> NO <input type="checkbox"/>  Did you receive \$10,000.00 in actual cash from any individual at any one time—or in accumulated amounts—during this tax year?
FUEL SURCHARGE		
PICKUP AND DELIVERY		
TRUCK RENTAL FEES		
OTHER INCOME		

## ▼ Sales of Equipment, Machinery, Land, Buildings Held for Business Use ▼

Kind of Property	Date Acquired	Date Sold	Gross Sales Price	Expenses of Sale	Original Cost

## ▼ CAR and TRUCK EXPENSES (personal vehicle) ▼

	VEHICLE 1	VEHICLE 2	
Year and Make of Vehicle			<input checked="" type="checkbox"/> <b>BUSINESS MILES</b> (examples) <input type="checkbox"/> Job seeking miles <input type="checkbox"/> Out-of-town business <input type="checkbox"/> Bank trips <input type="checkbox"/> Business meetings <input type="checkbox"/> Other temp. locations <input type="checkbox"/> Other  <input checked="" type="checkbox"/> <b>COMMUTING MILES</b> <input type="checkbox"/> To truck or business location  Mfg. gross vehicle weight (check one): <input type="checkbox"/> 6000 lbs. or less <input type="checkbox"/> Over 6000 lbs.
Date Purchased (month, date and year)			
Ending Odometer Reading (December 31)			
Beginning Odometer Reading (January 1)	—	—	
Total Miles Driven (End Odo – Begin Odo)			
Total Business Miles (do you have another vehicle?)			
Total Commuting Miles			
Parking Fees and Tolls			
License Plates			
Interest			
<i>Continue only if you take actual expense (must use actual expense if you lease)</i>			
Gas, oil, lube, repairs, tires, batteries, insurance, supplies, wash, wax, etc.			
Lease Costs			

## TRUCKER'S EXPENSES (continued)

<p><b>ADVERTISING/PROMOTION:</b> Ads, business cards, greeting cards, etc.</p> <p>◇ <b>COMMISSIONS &amp; FEES PAID:</b> Lumper/Helper</p> <p><b>EMPLOYEE BENEFITS:</b> Health Insurance, company party, mileage reimbursements, etc.</p> <p><b>FUEL:</b>           Tractor fuel                       Reefer fuel</p> <p><b>INSURANCE:</b> Worker's comp, business liability, truck Insurance, etc.</p> <p><b>INTEREST:</b>     <b>Mortgage</b> (business bldg.):                       Paid to financial institution                       Paid to individual</p> <p><b>OTHER INTEREST:</b>                       Truck loans                       Equipment loans                       Business only credit card</p> <p>◇ <b>LEGAL &amp; PROFESSIONAL:</b> Attorney fees for business, accounting fees, bonds, permits, etc.</p> <p><b>OFFICE EXPENSE:</b> postage, stationery, office supplies, bank charges, pens, faxes, etc.</p> <p><b>PENSION/PROFIT SHARING:</b> Employees only</p> <p>◇ <b>RENT/LEASE:</b>   Truck lease                           Machinery and equipment                           Other bus. property, locker fees</p> <p>◇ <b>REPAIRS &amp; MAINTENANCE:</b> Truck, equipment, etc.</p> <p><b>SUPPLIES:</b>       Maps, safety supplies                           Small tools</p> <p><b>TAXES:</b>         Tolls and scale fees                       Licenses and permits                       Fuel taxes                       Highway use taxes                       Real estate of business building &amp; land                       Payroll</p> <p><b>TRAVEL</b> (number of nights away): City _____ Nights out _____ City _____ Nights out _____ City _____ Nights out _____ City _____ Nights out _____ City _____ Nights out _____ City _____ Nights out _____</p>	<p><b>EXPENSES (AWAY FROM HOME OVERNIGHT):</b> Lodging Meals &amp; tips (keep total separate from other costs) Other (incidentals, laundry, etc.) Convention fees Airplane or train fares Auto rental, taxis or bus fares</p> <p><b>MEALS &amp; ENTERTAINMENT:</b> Business meals Gifts (limited to \$25 per individual or couple) Tickets Tickets to qualified charitable events</p> <p><b>UTILITIES &amp; TELEPHONE:</b> Electricity (business) Natural gas/heating fuel (business) Garbage, water, sewer (business) Telephone (bus. line, second line, other options) Business long distance (from home telephone) Fax transmissions, paging svcs, cellular svcs</p> <p><b>WAGES:</b>         (bring your copy of W-2s/941s if they have been filed)                       Wages to spouse (subject to Soc.Sec. and Medicare tax)                       Children under 18 (not subject to Soc.Sec. and Medicare tax)                       Other</p> <p><b>OTHER EXPENSES</b> (not listed elsewhere): Bank charges Dues &amp; Publications (assn/union dues) Education Job Related Testing Loading/unloading Road services Tires and tubes Uniforms and cleaning Washing and cleaning Other</p>
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## EQUIPMENT PURCHASED

*Radio, pager, cellular phone, answering machine, other...*

Item Purchased	Date Purchased	Cost (including sales tax)	Item Traded	Additional Cash Paid	Traded with Related Property	Other Information

◇ 1099s: Amounts of \$600.00 or more paid to individuals (not corporations) for rent, interest, or services rendered to you in your business, require information returns to be filed by payer.

Due date of return is January 31. Nonfiling penalty can be \$150 per recipient. If recipient does not furnish you with his/her Social Security Number, you are required to withhold 31% of the payment(s).

Name	Address	Social Security #	Amount	Purpose of Payment

Sign here \_\_\_\_\_  
W-9s (Request for Payee's Social Security #) are available.