TRUCKER’S INCOME & EXPENSE WORKSHEET

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**

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

**Sales of Equipment, Machinery, Land, Buildings Held for Business Use**

<table>
<thead>
<tr>
<th>Kind of Property</th>
<th>Date Acquired</th>
<th>Date Sold</th>
<th>Gross Sales Price</th>
<th>Expenses of Sale</th>
<th>Original Cost</th>
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</tbody>
</table>

**CAR and TRUCK EXPENSES** (personal vehicle)

<table>
<thead>
<tr>
<th>Year and Make of Vehicle</th>
<th>VEHICLE 1</th>
<th>VEHICLE 2</th>
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<tr>
<td>Date Purchased (month, date and year)</td>
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<td>Ending Odometer Reading (December 31)</td>
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<tr>
<td>Beginning Odometer Reading (January 1)</td>
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<tr>
<td>Total Miles Driven (End Odo – Begin Odo)</td>
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<td>Total Business Miles (do you have another vehicle?)</td>
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<td>Total Commuting Miles</td>
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<td>Parking Fees and Tolls</td>
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<td>License Plates</td>
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<tr>
<td>Interest</td>
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<tr>
<td>Continue only if you take actual expense (must use actual expense if you lease)</td>
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</tbody>
</table>

Gas, oil, lube, repairs, tires, batteries, insurance, supplies, wash, wax, etc.

Lease Costs

**BUSINESS MILES** (examples)

Job seeking miles
Out-of-town business
Bank trips
Business meetings
Other temp. locations
Other

**COMMUTING MILES**

To truck or business location

Mfg. gross vehicle weight (check one):
6000 lbs. or less
Over 6000 lbs.

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# Truck Driver's Expense Form

**Equipment Purchased**

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

<table>
<thead>
<tr>
<th>Item Purchased</th>
<th>Date Purchased</th>
<th>Cost (including sales tax)</th>
<th>Item Traded</th>
<th>Additional Cash Paid</th>
<th>Traded with Related Property</th>
<th>Other Information</th>
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**Expense Categories**

- **Advertising/Promotion:** Ads, business cards, greeting cards, etc.
- **Commissions & Fees Paid:** Lumper/Helper
- **Employee Benefits:** Health insurance, company parties, mileage reimbursements, etc.
- **Fuel:** Tractor fuel, Reefer fuel
- **Insurance:** Worker's comp, business liability, truck insurance, etc.
- **Interest:** Mortgage (business bldg.), additional cash paid, traded with related property, other information
- **Other Interest:** Truck loans, equipment loans, business only credit card
- **Legal & Professional:** Attorney fees for business, accounting fees, bonds, permits, etc.
- **Office Expense:** Postage, stationery, office supplies, bank charges, pens, faxes, etc.
- **Pension/Profit Sharing:** Employees only
- **Rent/Lease:** Truck lease, machinery and equipment, other business property, locker fees
- **Repairs & Maintenance:** Truck, equipment, etc.
- **Supplies:** Maps, safety supplies, small tools
- **Taxes:** Tolls and scale fees, licenses and permits, fuel taxes, highway use taxes, real estate of business building & land, payroll
- **Travel:** (number of nights away) city nights out city nights out city nights out city nights out city nights out
- **Utilities & Telephone:** Electricity (business), natural gas/heat fuel (business), garbage, water, sewer (business), telephone (bus. line, second line, other options), business long distance (from home telephone), fax transmissions, paging services, cellular services
- **Wages:** (bring your copy of W-2’s/941’s 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
- **Other Expenses:** Bank charges, dues & publications (assn/union dues), education, job related testing, loading/unloading, road services, tires and tubes, uniforms and cleaning, washing and cleaning, other

**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:** January 31. Non-filing 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).

<table>
<thead>
<tr>
<th>Name</th>
<th>Address</th>
<th>Social Security #</th>
<th>Amount</th>
<th>Purpose of Payment</th>
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Sign here ____________________________  

W-9s (Request for Payee’s Social Security #) are available.  

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