



PLATFORM TAX & CONSULTING

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Mary Kay Cosmetics

Client Name _____ Business name (if different) _____

Income

Total Retail Sales (taken from weekly summary sheets)	+	_____
Total Director and Recruiting Commissions.....	+	_____
Prizes won (taken from Mary Kay 1099).....	+	_____
Dovetail Fees Paid by Another Consultant.....	+	_____
Gross Income.....	=	_____

Cost of Goods Sold

Total Wholesale amount of inventory on your shelf as of January 1	+	_____
(taken from last year's end of year inventory. Don't count section 2 or 3)		
Total Wholesale purchases this year (taken off last print out sheet).....	+	_____
Your personal cosmetic use (Wholesale, don't include gifts or giveaways).....	-	_____
Ending amount of Wholesale product on your shelf at December 31 st	-	_____
Total COGS.....	=	_____

EXPENSES

Accounting	\$	_____
Advertising	\$	_____
Bank Charges	\$	_____
Commissions	\$	_____
Dues and Subscriptions	\$	_____
Insurance (other than health & life)	\$	_____
Interest (MK credit card, etc.)	\$	_____
Legal and professional	\$	_____
Office Supplies	\$	_____
Pension and Profit-Sharing Plans	\$	_____
Postage/shipping	\$	_____
Printing	\$	_____
Rent or Lease	\$	_____
Repairs and Maintenance	\$	_____
Supplies (Class supplies)	\$	_____
Sales Tax (If included in Gross Inc.)	\$	_____
Payroll Taxes	\$	_____
Cell Phone (Business use portion)	\$	_____
Travel	\$	_____
Meals and Entertainment	\$	_____
Uniforms	\$	_____
Wages	\$	_____
Internet (Business use portion)	\$	_____
Sales Aids (Section 2 and 3 items)	\$	_____
Gifts/Prizes (Only non-Mary Kay items)	\$	_____
Giveaways (Section 2 and 3 only)	\$	_____
Other: _____	\$	_____
Other: _____	\$	_____
Other: _____	\$	_____
Other: _____	\$	_____

VEHICLE EXPENSES

* You must retain mileage log in case of audit.

Business miles	+	_____
Personal miles	+	_____
Total Vehicle miles	=	_____

ACTUAL EXPENSES PAID:

Gasoline, lube, oil	\$	_____
Repairs	\$	_____
Tires	\$	_____
Insurance	\$	_____
Registration	\$	_____
Interest paid on car loan	\$	_____
Lease payment (if applicable)	\$	_____
Tolls	\$	_____
Other	\$	_____
% of time vehicle used for business if less than 100%	%	_____

HOME OFFICE

Total square ft. of home	_____	
Sq. ft. office (exclusively used for Mary Kay)	_____	
Utilities	\$	_____
Rent	\$	_____
Home repairs/maintenance	\$	_____
Home Insurance	\$	_____
Security System	\$	_____

EQUIPMENT PURCHASED THIS YEAR

Description	New/used	
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____

Did you make any payments that require you to file 1099s? Yes _____ No _____ If yes, are you filing them? _____

Health insurance premiums if your spouse is not offered insurance through work \$ _____