[Your Company Name] Income Statement For the Year Ended [Mmmm Dd, 200X]

Revenue:	
Gross Sales	
Less: Sales Returns and Allowances	
Net Sales	
Cost of Goods Sold:	
Beginning Inventory	
Add: Purchases	
Freight-in	
Direct Labor	
Indirect Expenses	
Less: Ending Inventory	
Cost of Goods Sold	
Gross Profit (Loss)	
F	
Expenses:	
Advertising	
Amortization	
Bad Debts	
Bank Charges	
Charitable Contributions	
Commissions	
Contract Labor	
Credit Card Fees	
Delivery Expenses	
Depreciation	
Dues and Subscriptions	
Insurance	
Interest	
Maintenance	
Office Expenses	
Operating Supplies	
Payroll Taxes	
Permits and Licenses	
Postage	
Professional Fees	
Property Taxes	
Rent	
Repairs	
Telephone	
Utilities	
Vehicle Expenses	
Wages	
Total Expenses	

Net Operating Income

[Your Company Name] Income Statement For the Year Ended [Mmmm Dd, 200X]

Other Income:

Gain (Loss) on Sale of Assets Interest Income Total Other Income

Net Income (Loss)