

Your Company Name

INCOME STATEMENT

Date of Statement _____

SALES

Net Sales	\$	_____
Less Cost of Goods Sold:		
Beginning Inventory	\$	_____
Purchases	\$	_____
Labor	\$	_____
Total	\$	_____
Less: Ending Inventory	\$	_____
Cost of Goods Sold	\$	_____
Gross Profit (sales less cost of goods sold)	\$	_____

EXPENSES

Operating Expenses:

Selling Expenses	\$	_____
General and Administrative	\$	_____
Total Expenses	\$	_____
Operating Income	\$	_____
Interest Expense	\$	_____

PROFIT

Net Profit before taxes	\$	_____
Less: All Income Taxes	\$	_____
Net Profit	\$	_____