OHSI
Oregon Homeownership Stabilization Initiative

Year-to-Date Profit and Loss Statement

Business Name	
Street Address	
City, State, ZIP	

Percentage Owned	

Year-to-Date for the Month Ending	

Income		
1	Gross Revenue	$
2	Returns and Allowances	
3	Subtract line 2 from line 1	
4	Cost of Goods Sold	
5	Gross Profit (subtract line 4 from line 3)	
6	Other Income (including federal and state tax credits and interest)	
7	**GROSS INCOME** (add lines 5 and 6)	$
Expenses		
8	Advertising/Marketing	$
9	Amortization/Depreciation	
10	Repairs & Maintenance	
11	Business Mileage Reimbursement (mileage x $0.565)	
12	Commissions and Fees / Contract Labor / Professional Services	
13	Insurance	
14	Deductible Meals/Entertainment (enter only 50% of expenses)	
15	Rent or lease: Vechiles, Machinery and Equipment	
16	Supplies	
17	Taxes and Licenses	
18	Travel (Hotel, Taxi, Airfare, *etc.*)	
19	Utilities	
20	Wages / Salaries - Applicant(s)	
21	Wages / Salaries - Employees	
22	Other expenses	
23	**TOTAL EXPENSES** (add lines 8 through 22)	$
24	Tenative Profit/Loss (subtract line 23 from line 7)	
25	Expenses for Business Use of Residence	
26	**NET PROFIT/LOSS** (subtract line 25 from line 24)	$