

SELF EMPLOYMENT INFORMATION

**BUSINESS NAME:** \_\_\_\_\_

**TOTAL SALES:**

TAXPAYER

SPOUSE

**EXPENSES**

Advertising		Repairs Expense	
Commissions/Fees		Supplies Expense	
Dues & Publications		Taxes	
Interest Expense		Travel Expense	
Insurance		Meals	
Legal & Professional Fees		Telephone	
Office Expense		Utilities	
Rent (office)		Wages (gross W-2)	
Equipment Rental		Postage	
Auto Expense		Bank Charges	
Auto Mileage		Tools & Equipment	
		Uniforms	

**ASSETS PURCHASED**

DATE	Amount	Asset / Notes

**COST OF GOODS SOLD**

Inventory at beginning of year	Materials & Supplies
Purchases	Other:
Cost of items for personal use	Other:
Cost of Labor	Inventory at end of year

**RENTAL INCOME**

Property # 1

Property # 2

Property # 3

ADDRESS			
City / State			

**RENTS RECEIVED**

**EXPENSES**

Advertising			
Auto & Travel			
Auto Miles			
Cleaning & Maintenance			
Commissions Paid			
Grounds & Gardening			
Insurance			
Interest Expense			
Legal & Professional			
Management fees			
Repairs & Maintenance			
Supplies			
Taxes			
Utilities			
Association Dues			
Pest Control			
Other			