

SCHEDULE C WORKSHEET
FOR SELF EMPLOYED BUSINESSES & INDEPENDENT CONTRACTORS

IRS REQUIRES WE HAVE ON FILE *YOUR OWN INFORMATION* TO SUPPORT SCHEDULE C

CLIENT/BUSINESS NAME:	
ADDRESS:	
FEDERAL EIN#:	TAX YEAR:

Is this your first year in business? ☐ Yes ☐ No

Did you make payments requiring a Form 1099? ☐ Yes ☐ No

If 'Yes' did you file the required Form 1099? ☐ Yes ☐ No

TOTAL GROSS BUSINESS INCOME (including payments where no 1099 was received)	\$
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Retail Business ONLY:

Beginning Inventory	\$
Merchandise Purchased for Resale	\$
Cost of labor (Do not include \$ paid to yourself)	\$
Materials and Supplies	\$
Other Direct Sales Costs	\$
Ending Inventory	\$

ALL BUSINESSES:

Advertising	\$	Repairs and Maintenance	\$
Commissions and Fees	\$	Supplies (not included above)	\$
Contract Labor (1099s issued, if applicable)	\$	Real Estate Taxes (if paid for business)	\$
Insurance (other than health)	\$	Other Taxes (Payroll)	\$
Health Insurance (for you)	\$	Travel (do not include meals)	\$
Health Insurance (for your employees)	\$	Meals	\$
Mortgage Interest (if paid for business)	\$	Utilities	\$
Other Interest Paid	\$	Wages (W2s issued)	\$
Professional Fees	\$	Bank and Credit Card Charges	\$
Office Expenses	\$	Tools	\$
Rent on Business Property	\$	Uniforms	\$
Equipment Rentals	\$	Licenses / Dues	\$
Telephone ____ % used for business	\$	Other	\$

BUSINESS VEHICLE:

Business Mileage	Personal Mileage
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Do you have evidence to support your mileage? ☐ Yes ☐ No

If yes, is the evidence written? ☐ Yes ☐ No

EVIDENCE INCLUDES MILEAGE LOGS, APPOINTMENT RECORDS, CALENDARS, ETC. PLUS IRS COULD ASK FOR ODOMETER READINGS FROM OIL CHANGES, REPAIR INVOICES, PURCHASE AND SALE DOCUMENTS.

Did you purchase any major pieces of equipment? ☐ Yes ☐ No

If YES list:

Equipment	Date	Amount
Equipment	Date	Amount

Do you have an Office in your Home? ☐ Yes ☐ No

If YES Complete questions below

Sq. Ft. of Office	Sq. Ft. of Home	Real Estate Taxes
Mortgage Interest or Rent Paid	HO Insurance	Utilities (Gas and Electric)

I certify that I have listed all income, all expenses, and I have documentation to back up the figures entered on this worksheet.

PRINT NAME _____ SIGNATURE _____ DATE _____

Hellman & Associates, LLC