



Self-Employed Worksheet

Business Owner Name _____

Tax Year _____

Company Name		Employer ID Number	
Principle Business		Business Code	
Business Address			

Date Business Opened _____ Date Business Closed _____

Business Use of Home: Area used for business _____ f² Total Area _____ f²
 Number of **hours** for Day Care per day _____ Number of **days** per year for Day Care _____
 Home Mortgage Interest _____ Real Estate Tax _____ Home owners insurance _____
 Rent _____ Home repairs and Maintenance _____
 Utilities _____
 Other _____

Income

Gross Receipts/Sales		1099 Income	
Returns and Allowances		Other Income	

Cost of Goods Sold

Beginning Inventory		Cost of Labor	
Ending Inventory		Materials/Supplies	
Purchases		Other	

Auto and Travel

Business Miles		Commuting Miles		Personal Miles	
Date Auto Placed in Service		Tolls		Parking	
Airfare		Hotel		Dining	

Expenses

Advertising		Office Expense		Taxes and Licenses	
Insurance		Rent		Utilities	
Mortgage Interest		Repairs			
Legal Services		Supplies			
Cell Phone		Internet			

Owner Signature _____

Date _____