



### SELF-EMPLOYMENT INCOME

|                                  |  |
|----------------------------------|--|
| Owner's name                     |  |
| Federal ID number                |  |
| Business name                    |  |
| Principal business or profession |  |
| Business address                 |  |

|  |                    |                          |               |
|--|--------------------|--------------------------|---------------|
| <b>INCOME</b>  |                    |                          |               |
| Gross Receipts or Sales  |                    |                          |               |
| Returns or allowances  |                    |                          |               |
| <b>COST OF GOODS SOLD</b>  |                    |                          |               |
| Beginning inventory (valued at cost)                                     |                    |                          |               |
| Purchases  |                    |                          |               |
| Ending inventory (valued at cost)  |                    |                          |               |
| <b>EXPENSES</b>  |                    |                          |               |
| Advertising  |                    |                          |               |
| Commissions paid   |                    |                          |               |
| Contract labor or temporary help   |                    |                          |               |
| Insurance  |                    |                          |               |
| Interest   |                    |                          |               |
| Legal and professional fees  |                    |                          |               |
| Office expenses and postage  |                    |                          |               |
| Retirement plan contributions (employer contributions)                   |                    |                          |               |
| Rent - machinery   |                    |                          |               |
| Rent - buildings and other   |                    |                          |               |
| Repairs and maintenance  |                    |                          |               |
| Supplies   |                    |                          |               |
| Taxes and licenses   |                    |                          |               |
| Travel*  |                    |                          |               |
| Meals and entertainment*   |                    |                          |               |
| Utilities (for separate office only)                                     |                    |                          |               |
| Wages paid to employees  |                    |                          |               |
| Other expenses:  |                    |                          |               |
| Bank service charges   |                    |                          |               |
| Website fees   |                    |                          |               |
| Gifts (no more than \$25 per person)                                     |                    |                          |               |
| Dues and subscriptions   |                    |                          |               |
| Continuing education and professional development                        |                    |                          |               |
| <i>Assets purchased over \$1000 (computers, machinery, laptops, etc)</i> |                    |                          |               |
| <b>Date of purchase</b>  | <b>Description</b> | <b>% of business use</b> | <b>Amount</b> |
|  |                    |                          |               |
|  |                    |                          |               |
|  |                    |                          |               |

Do you have a qualifying home office?     Yes     No    If yes, complete the worksheet for home office.

\*Do you have proper documentation to substantiate your travel, meals, and entertainment expenses per the IRS regulations?  
 Yes     No

I declare that I have examined and/or completed this worksheet and any accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct and complete.

Prepared and submitted by: \_\_\_\_\_ Date: \_\_\_\_\_

Printed name: \_\_\_\_\_