

Self-Employment Worksheet

Name _____

Business Name _____ EIN _____

Address (if different than home address) _____

Total Business Mileage _____

Total miles driven _____

Gross Income \$ _____

Business Expenses

Advertising _____

Supplies _____

Commissions & Fees _____

Taxes & Licenses _____

Contract Labor _____

Meals & Entertainment _____

Insurance _____

Utilities _____

Interest _____

Travel Expenses _____

Legal & Professional Services _____

Other Expenses _____

Office Expenses _____

Rent _____

Repairs/Maintenance _____

Did you purchase any single item in 2014 that cost over \$100.00 if so, please list below

Item Description	Date of Purchase	Cost	Depreciate Y/N

Did you use any part of your home exclusively for business?

Yes No

Did you make any payments that require you to file a 1099 Form?

Yes No

Client Signature _____

Date _____