Self Employment Worksheet

BUSINESS OR PROFESSION	ESS OR PROFESSIONBUSINESS NAME					
BUSINESS ADDRESS, CITY	Y, STATE, ZIP (ifany)					
		E	MPLOYER ID NUMBI	ER (ifany)		
Are you the owner of the business? Yes No If yes, use Schedule C. s the business a D.B.A.? Yes No If yes, use Schedule C. s the business a Partnership? Yes No If yes, use Form 1065 K-1 s the business an LLC? Yes No If yes, the default filing for a single member LLC is filing Schedule C with the individual return. The default for a multi-member LLC is filing Form 1065 as a partnership unless the entity has applied to taxed as a different type of entity. S the business a Corporation? Yes No If yes, a corporation will file either Form 1120 or 1120S, depending on the type of corporation.						
Did you use a log book to dete If you did NOT use a log book Did you use a log book to dete If you did NOT use a log book How were you paid (check all Did you receive a Form 1099-) Did you receive any other inco	s, can you reasonably recommine your expenses? s, can you reasonably recommendation that apply)? Cash MISC, box 7 income?	construct your Gross Rece Yes No construct your expenses? Check Other Yes No	□Yes □ No	0		
Did you receive a Form 1099- Did you pay anyone to work for Did you issue them a Form 109	or you? 🗆 Yes 🗆 N	lo If yes, how much? \$				
(Complete th	RMATION ABOUT als section only if you around work is considered co	e claiming vehicle ex	penses		
What are you using the vehicle	e for in your business?					
When did you place your vehi						
What was the cost to purchase					The state of the s	
Which method are you using the	his year? Standard M	Mileage Rate	l Expenses			
Which method did you use in t	the first year you used y	our vehicle for business?	☐ Standard Mileage R	ate	enses	
Of the total number of miles ye	ou drove the vehicle dur	ring 2016, how many mile	s was the vehicle used f	or:		
a) Business	b)	Commuting	c)	Other		
Was the vehicle available for p	personal use during off-co	duty hours?	No			
Was another vehicle available						
Do you have written evidence	to support your deduction	on? 🗆 Yes 🗆 No				
(If you did		SUMMARY OF GRO stermine your gross receip		int you received each mo	nth)	
January	February	March	April	May	June	
July	August	September	October	November	December	
	0	- F		1 to tollious	December	

SUMMARY OF EXPENSES

Advertising					
(newspaper, signs business cards, etc)	\$	Rent or Lease:			
Commissions and Fees	\$	a) Vehicles, Machinery, Equipment	\$		
Contract Labor	\$		\$		
Prior Depreciation (provide copy of last year's depreciation worksheet)	\$	Repairs and Maintenance	\$		
Purchased Items to Use in the Business with a Useful Life of Over a Year (List)	\$	Supplies Used in the Business	\$		
	\$	Taxes and Licenses	\$		
	\$		\$		
	\$	Deductible Meals if a DaycareFacility	\$		
Employee Benefits Programs	\$		\$		
Interest on Business Loans:		Utilities (telephones only if a second line in home)	\$		
a) Mortgage (paid to bank)	\$	Other Expenses (identify)	\$		
b) Other	\$		\$		
Legal and Professional Services	\$		\$		
Cost of Last Year's Business Tax Return	\$		\$		
Office Expenses	\$		\$		
If you do NOT have any business expenses	, please provide an explar	nation			
I, acknowledge that I have receipts and rece Tax for the preparation of my 2016 individ	ords regarding my person ual tax return but did/did	al business in my possession. I have provide not provide them with all of the receipts an	led the above summary to Happy		
Signature Date					
		Date_			