



Tax Year: \_\_\_\_\_

## Self-Employment Worksheet

Business name: \_\_\_\_\_

EIN: \_\_\_\_\_

Business Profession: \_\_\_\_\_

YTD Income: \_\_\_\_\_

Operating Expenses	Amount	Expenses	Amount
Advertising:		Rent/Lease:	
Commission and fees:		Mortgage interest:	
Contract Labor Depletion:		Travel/Meals:	
Employee benefit program:		Phone:	
Insurance (other than health):		Software:	
Legal & Professional Services:		<b>Vehicle Expenses</b>	
Office Expenses:		Business Miles:	
Pension & Profit-sharing:		Commuting Miles:	
Repairs & Maintenance:		Other Mileage:	
Supplies:		Vehicle Maintenance/ Upkeep:	
Taxes & Licenses:		Misc:	
Utilities:		Misc:	
Wages (Less employee credit):		Misc:	

I agree that all expense information listed on this worksheet is true to the best of my knowledge and based on records kept during the current year. All expenses are directly related expenses to my business profession.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Printed Name: \_\_\_\_\_