



Date \_\_\_\_\_

**SCHEDULE C-Self Employment Income**

NAME OF BUSINESS \_\_\_\_\_ Start Date \_\_\_\_\_  
 TYPE OF BUSINESS \_\_\_\_\_ EIN \_\_\_\_\_  
 GROSS INCOME \_\_\_\_\_ #1099/1099K's \_\_\_\_\_  
 OTHER INCOME (Interest, etc.) \_\_\_\_\_ \*Losses in past 5 years \_\_\_\_\_  
 \*Taxpayer acknowledges a loss may be disallowed if taken in 3 out of 5 years

**INVENTORY:**

Beginning Inventory \_\_\_\_\_  
 Purchase of Goods Sold \_\_\_\_\_  
 Materials and Supplies \_\_\_\_\_  
 Ending Inventory \_\_\_\_\_

**EXPENSES:**

Advertising \_\_\_\_\_  
 Liability Insurance \_\_\_\_\_  
 Interest-Loan \_\_\_\_\_  
 Legal/Professional fees \_\_\_\_\_  
 Office Supplies \_\_\_\_\_  
 Postage \_\_\_\_\_

**OFFICE IN HOME:**

Address \_\_\_\_\_  
 Total Sq Ft of Home \_\_\_\_\_  
 Total Sq Ft of Office \_\_\_\_\_  
 Utilities Paid \_\_\_\_\_  
 Insurance \_\_\_\_\_

Rent/Lease  
     Building \_\_\_\_\_  
     Equipment \_\_\_\_\_  
 Travel Expenses \_\_\_\_\_  
 Meals \_\_\_\_\_

**SALARIES & WAGES**

Commissions Paid \_\_\_\_\_  
 Total Gross Wages Paid \_\_\_\_\_  
 Company Paid FICA \_\_\_\_\_  
 Federal Unemployment Paid \_\_\_\_\_  
 State Unemployment Paid \_\_\_\_\_  
 Work Comp Paid \_\_\_\_\_

Licenses \_\_\_\_\_  
 Dues & Subscriptions \_\_\_\_\_  
 Utilities \_\_\_\_\_  
 Telephone/Fax/Internet \_\_\_\_\_  
 Cell Phone \_\_\_\_\_  
 Bank Charges \_\_\_\_\_  
 Health Insurance Premiums \_\_\_\_\_

List Auto/Equipment Purchases on backside 

**List of Assets**

**AUTO EXPENSES:**

**#1**

\*Year, Make and Model\_\_\_\_\_

\*Date Car Purchased\_\_\_\_\_

\*Price Purchased\_\_\_\_\_

Lease payments\_\_\_\_\_

Interest Auto Loan\_\_\_\_\_

Auto Insurance\_\_\_\_\_

Total Gas Purchased\_\_\_\_\_

Repairs & Maintenance \_\_\_\_\_

\*Total Miles Driven\_\_\_\_\_

\*Business Miles Driven\_\_\_\_\_

**#2**

\*Year, Make and Model\_\_\_\_\_

\*Date Car Purchased\_\_\_\_\_

\*Price Purchased\_\_\_\_\_

Lease payments\_\_\_\_\_

Interest Auto Loan\_\_\_\_\_

Auto Insurance\_\_\_\_\_

Total Gas Purchased\_\_\_\_\_

Repairs & Maintenance \_\_\_\_\_

\*Total Miles Driven\_\_\_\_\_

\*Business Miles Driven\_\_\_\_\_

**(\*)Must have for simplified mileage deductions**

**EQUIPMENT PURCHASES:**

Item\_\_\_\_\_

Purchase Date\_\_\_\_\_

Purchase Price\_\_\_\_\_

Item\_\_\_\_\_

Purchase Date\_\_\_\_\_

Purchase Price\_\_\_\_\_

Item\_\_\_\_\_

Purchase Date\_\_\_\_\_

Purchase Price\_\_\_\_\_

**EQUIPMENT SALES:**

Item\_\_\_\_\_

Date Sold\_\_\_\_\_

Sales Price\_\_\_\_\_

**NOTES:**

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