

SELF EMPLOYED INCOME/EXPENSE

NAME OF PROPRIETOR	BUSINESS ACTIVITY
BUSINESS NAME	PRODUCT OR SERVICE
BUSINESS ADDRESS	FEDERAL I.D. NUMBER

1. Business is conducted on the Cash Basis Accrual Other _____
2. Inventory (if applicable) is based on Cost Other _____
3. Do you use any part of your home for business? Yes No
4. Did you hire any new employees that may qualify for job credits? Yes No
5. How many months in business during year? # _____ How many employees? # _____
6. Did you buy or sell any assets? Yes No (See back for details)
7. Did you use the Health Insurance Marketplace to purchase health insurance? Yes No
8. Did you have credit/debit card transactions for any vendor/customer in excess of 200 transactions & \$20,000? Yes No

INCOME		COST OF GOODS SOLD (If Applicable)	
Gross Receipts/Sales		Beginning of the Year Inventory	
Returns & Allowances	()	End of the Year Inventory	
*Income Reported on 1099's		Purchases	
*Commissions		Above Withdrawn for Personal Use	
Other:		Cost of Labor	
		Materials/Supplies	
* Do Not Duplicate if included in Gross Receipts			

EXPENSES			
Advertising		Wages (Owner/Family)	
Bad Debts (If reported as income)		(Other Employees)	
Bank Charges		Payroll Taxes	
Car/Truck Expense (Detail)		Social Security and Medicare	
Commissions & Fees Paid		Unemployment (Fed & State)	
Dues & Publications		Other Taxes	
Employee Benefit Programs		Real Estate	
Freight (Not Included Above)		Personal Property	
Insurance (Business)		Other:	
Interest (Business)		Automobile Exp. (Adequate records required)	
Laundry & Cleaning		Total Miles Driven	No.
Legal & Professional		Business Miles	Jan. – June No.
Office Supplies & Postage			July – Dec. No.
Pensions/Profit Sharing		Personal Miles	No.
Utilities		Parking Expense	
Rent (Business)		Travel (Out of Town)	
Repairs & Maintenance		Transportation (Air Fare)	
Supplies (Other)		Lodging	
Telephone (Business)		Cabs, Bus, Rentals	
Health Insurance		Other:	
Other:		Meals (at 100%)	
		Meals & Tips	
		Other:	
Mortgage Interest (Paid to Financial Institution)			
Depreciation - If Predetermined (Attach Schedule)			
Other (Explain):			

List on back, purchases of equipment, furniture, vehicles or leasehold improvements.

