## Tax Year \_\_\_\_\_\_ INCOME & EXPENSE FROM SELF-EMPLOYED SERVICES

| Gross Income/Sales \$ Cost of goods sold - COGS \$  EXPENSES:  Advertising \$ Maintenance/Cleaning Service \$ Insurance for Business \$ Supplies (not included in COGS) \$ Interest paid on loans \$ Licenses for business \$ Interest paid on loans \$ Licenses for business \$ Legal or Professional Services \$ Travel \$ Office expenses \$ Meals with Clients \$ Rent/Lease (Bldg.equip) \$ Meals with Clients \$  OTHER EXPENSES (list type & amount) Enter home office expense or page F8829  DESCRIPTION AMOUNT DESCRIPTION AMOUNT S \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$  | Name of Business:              |              |                        | Date Started Business          | Date Started Business |  |
|--|--------------------------------|--------------|------------------------|--------------------------------|-----------------------|--|
| Advertising \$ Maintenance/Cleaning Service \$ Insurance for Business \$ Supplies/Inct included in COG\$) \$ Interest paid on loans \$ Licenses for business \$ Legal or Professional Services \$ Travel \$ Office expenses \$ Meals with Clients \$ \$ Personal # Person                                     |                                |              |                        | COST OF SALES                  |                       |  |
| Advertising \$ Maintenance/Cleaning Service \$ Insurance for Business \$ Supplies (not included in COGS) \$ Interest paid on loans \$ Licenses for business \$ Supplies (not included in COGS) \$ Interest paid on loans \$ Licenses for business \$ Supplies (not included in COGS) \$ Interest paid on loans \$ Licenses for business \$ Supplies (not included in COGS) \$ Interest paid on loans \$ Supplies (not included in COGS) \$ Supplies (not included included in COGS) \$ Supplies (not included included in COGS) \$ Supplies (not included i           | Gross Income/Sales \$          |              |                        | Cost of goods sold - COGS \$   |                       |  |
| Insurance for Business \$ Supplies(not included in COGS) \$ Interest paid on loans \$ Licenses for business \$ Legal or Professional Services \$ Travel \$ Office expenses \$ Meals with Clients \$ Rent/Lease (Bildg.equip) \$ *  OTHER EXPENSES (list type & amount) Enter home office expense or page F8829  DESCRIPTION AMOUNT DESCRIPTION AMOUNT  \$ \$ \$ \$  \$ \$ \$  \$ \$  \$ \$  \$ \$  \$ \$   | EXPENSES:                      |              |                        |                                |                       |  |
| Interest paid on loans Legal or Professional Services  Office expenses Rent/Lease (Bldg.equip)  DESCRIPTION AMOUNT DESCRIPTION AMOUNT S S S S S S S S S S S S S S S S S S S  | Advertising                    |              | \$                     | Maintenance/Cleaning Service   | \$                    |  |
| Legal or Professional Services \$ Travel \$  Office expenses \$ Meals with Clients \$  Rent/Lease (Bldg,equip) \$ \$ \$  OTHER EXPENSES (list type & amount) Enter home office expense or page F8829  DESCRIPTION AMOUNT DESCRIPTION AMOUNT  \$ \$ \$ \$  \$ \$ \$  \$ \$  PERMITURE AND EQUIPMENT purchased for the business (list & include DATE of purchase)  FURNITURE AND EQUIPMENT purchased for the business (list & include DATE of purchase)  Date:   Item:   \$ \$  TIL miles driven entire year   Personal #   ACTUAL COSTS (complete only if NOT using the standard mileage deductions)  Gas \$ Repairs \$ Tabs \$ Other \$    THE IRS REQUIRES THAT YOU KEEP A WRITTEN RECORD OF YOUR MILEAGE  Date you started using for business   Is the vehicle leased?   Is the vehicle available for personal use during off-duty hours?   Is the vehicle ended in writing?   Is another vehicle available for personal use?   Do you have evidence of mileage in writing?   Is another vehicle available for personal use?   Do you have evidence of mileage in writing?   Item:   Item: | Insurance for Busines          | S            | \$                     | Supplies(not included in COGS) | \$                    |  |
| Office expenses         \$         Meals with Clients         \$           Rent/Lease (Bldg,equip)         \$         \$           OTHER EXPENSES (list type & amount) Enter home office expense or page F8829         BESCRIPTION         AMOUNT           DESCRIPTION         AMOUNT         AMOUNT           \$         \$         \$           \$ <td< td=""><td colspan="2">Interest paid on loans</td><td>\$</td><td>Licenses for business</td><td>\$</td></td<>  | Interest paid on loans         |              | \$                     | Licenses for business          | \$                    |  |
| Secription   Secription   Secription   Secription   AMOUNT   DESCRIPTION   AMOUNT   Secription   | Legal or Professional Services |              | \$                     | Travel                         | \$                    |  |
| DESCRIPTION AMOUNT DESCRIPTION AMOUNT  \$  | Office expenses                |              | \$                     | Meals with Clients             | \$                    |  |
| DESCRIPTION AMOUNT DESCRIPTION AMOUNT  \$  | Rent/Lease (Bldg,equip)        |              | \$                     |                                | \$                    |  |
| DESCRIPTION AMOUNT DESCRIPTION AMOUNT  \$  |                                |              |                        |                                |                       |  |
| \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$   | OTHER EXPENSES (list type      | & amount) En | ter home office expe   | ense or page F8829             |                       |  |
| \$   | DESCRIPTION                    |              | AMOUNT                 | DESCRIPTION                    | AMOUNT                |  |
| \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$   |                                |              | \$                     |                                | \$                    |  |
| \$\$\$  FURNITURE AND EQUIPMENT purchased for the business (list & include DATE of purchase)  Date: Item:\$  Date: Item:\$  Date: Item:\$  Date: Item: \$  Date: Item: \$  Date: Item: \$  Date: Item: \$  |                                |              | \$                     |                                | \$                    |  |
| ### SECOND FOR STREET HAT YOU KEEP A WRITTEN RECORD OF YOUR MILEAGE  Date Repairs \$ Is the vehicle available for personal use \$ Is the vehicle available for personal use \$ Is the vehicle available for personal use? Do you have evidence of mileage in writing? Items.   |                                |              | \$                     |                                | \$                    |  |
| FURNITURE AND EQUIPMENT purchased for the business (list & include DATE of purchase)  Date: Item: \$   |                                |              | \$                     |                                | \$                    |  |
| Date:  |                                |              | \$                     |                                | \$                    |  |
| Date:   Item:  | FURNITURE AND EQUIPMENT        | NT purchased | for the business (list | & include DATE of purchase)    |                       |  |
| Date: Item:  | Date:                          | Item:        |                        |                                | \$                    |  |
| Date: Item:  | Date:                          | Item:        |                        |                                | \$                    |  |
| WEHICLE EXPENSES:  MILEAGE YR/Make/Model TTL miles driven entire year  Business (Jan-Jun) # Business (Jul-Dec) # Personal #  ACTUAL COSTS (complete only if NOT using the standard mileage deductions)  Gas \$ Repairs \$ Tabs \$ Other \$  THE IRS REQUIRES THAT YOU KEEP A WRITTEN RECORD OF YOUR MILEAGE  Date you started using for business Is the vehicle leased?  Was vehicle available for personal use during off-duty hours?  Was the vehicle used primarily by a more than 5% owner or related person?  Is another vehicle available for personal use? Do you have evidence of mileage in writing?  |                                |              |                        |                                | \$                    |  |
| MILEAGE YR/Make/Model TTL miles driven entire year  Business (Jan-Jun) # Business (Jul-Dec) # Personal #  ACTUAL COSTS (complete only if NOT using the standard mileage deductions)  Gas \$ Repairs \$ Tabs \$ Other \$  THE IRS REQUIRES THAT YOU KEEP A WRITTEN RECORD OF YOUR MILEAGE  Date you started using for business Is the vehicle leased?  Was vehicle available for personal use during off-duty hours?  Was the vehicle used primarily by a more than 5% owner or related person?  Is another vehicle available for personal use? Do you have evidence of mileage in writing?   | Date:                          | Item:        |                        |                                | \$                    |  |
| Business (Jan-Jun) # Business (Jul-Dec) # Personal #  ACTUAL COSTS (complete only if NOT using the standard mileage deductions)  Gas \$ Repairs \$ Tabs \$ Other \$  THE IRS REQUIRES THAT YOU KEEP A WRITTEN RECORD OF YOUR MILEAGE  Date you started using for business Is the vehicle leased?  Was vehicle available for personal use during off-duty hours?  Was the vehicle used primarily by a more than 5% owner or related person?  Is another vehicle available for personal use? Do you have evidence of mileage in writing?   | VEHICLE EXPENSES:              |              |                        |                                |                       |  |
| ACTUAL COSTS (complete only if NOT using the standard mileage deductions)  Gas \$ Repairs \$ Tabs \$ Other \$  THE IRS REQUIRES THAT YOU KEEP A WRITTEN RECORD OF YOUR MILEAGE  Date you started using for business Is the vehicle leased?  Was vehicle available for personal use during off-duty hours?  Was the vehicle used primarily by a more than 5% owner or related person?  Is another vehicle available for personal use? Do you have evidence of mileage in writing?   | MILEAGE YR/Make/Model          |              |                        | TTL miles driven               | entire year           |  |
| Gas \$ Repairs \$ Tabs \$ Other \$  THE IRS REQUIRES THAT YOU KEEP A WRITTEN RECORD OF YOUR MILEAGE  Date you started using for business Is the vehicle leased?  Was vehicle available for personal use during off-duty hours?  Was the vehicle used primarily by a more than 5% owner or related person?  Is another vehicle available for personal use? Do you have evidence of mileage in writing?  | Business (Jan-Jun) #           |              | _ Business (Jul-D      | ec) # Personal #               |                       |  |
| THE IRS REQUIRES THAT YOU KEEP A WRITTEN RECORD OF YOUR MILEAGE  Date you started using for business Is the vehicle leased?  Was vehicle available for personal use during off-duty hours?  Was the vehicle used primarily by a more than 5% owner or related person?  Is another vehicle available for personal use? Do you have evidence of mileage in writing?  | ACTUAL COSTS (CC               | mplete only  | if NOT using the s     | tandard mileage deductions)    |                       |  |
| Date you started using for business Is the vehicle leased?  Was vehicle available for personal use during off-duty hours?  Was the vehicle used primarily by a more than 5% owner or related person?  Is another vehicle available for personal use? Do you have evidence of mileage in writing?   | Gas \$ Re                      | epairs \$    | Tabs \$                | Other \$                       |                       |  |
| Was vehicle available for personal use during off-duty hours?  Was the vehicle used primarily by a more than 5% owner or related person?  Is another vehicle available for personal use? Do you have evidence of mileage in writing?   | THE IRS REQUIRES THAT Y        | OU KEEP A V  | VRITTEN RECORD C       | OF YOUR MILEAGE                |                       |  |
| Was the vehicle used primarily by a more than 5% owner or related person?  Is another vehicle available for personal use? Do you have evidence of mileage in writing?  |                                |              |                        |                                |                       |  |
| Is another vehicle available for personal use? Do you have evidence of mileage in writing?   |                                |              | = -                    |                                |                       |  |
|  |                                |              |                        |                                | o writing?            |  |
| What type eyidetice to you have to support your mileade claims.  |                                |              |                        |                                |                       |  |

\*\*\*PLEASE ATTACH A SEPARATE SHEET FOR OTHER ITEMS OR QUESTIONS\*\*\*