

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? _____

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*Commissions	Above Withdrawn for Personal Use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
Royalties	Materials/Supplies
Bank Interest	Other:
*Do Not Duplicate if included in Gross Receipts	

EXPENSES

Advertising	Wages (Not Reported Above)
Bad Debts (If reported as income)	Payroll Taxes
Bank Charges	Social Security and Medicare
Car/Truck Expense (Detail)	Unemployment (Fed & State)
Commissions & Fees Paid	Other Taxes
Dues & Publications	Real Estate
Employee Benefit Programs	Personal Property
Freight (Not Included Above)	Other:
Insurance (Business)	Automobile Mileage (Adequate records required)
Interest (Business)	Total Miles Driven
Laundry & Cleaning	Business Miles
Legal & Professional	Percent Used for Business
Office Supplies & Postage	Parking Expense
Pensions/Profit Sharing	Travel (Out of Town)
Utilities (Internet)	Transportation (Air Fare)
Rent (Business)	Lodging
Repairs & Maintenance	Cabs, Bus, Rentals
Supplies (Computer)	Other:
Telephone (Business)	Meals & Entertainment (at 100%)
Health Ins. (Personal 100%)	Meals & Tips
Other:	Entertainment
Business License	Tickets & Events
	Gifts
Mortgage Interest (Paid to Financial Institution)	
Depreciation - If Predetermined (Attach Schedule)	
Other (Explain):	