

**Self-Employment Worksheet**

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

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

Advertising:	_____	Fees Paid:	_____
Labor:	_____	Insurance:	_____
Interest	_____	Legal/Prof:	_____
Office Supplies:	_____	Rent/Bldg:	_____
Rent Equip.	_____	Repairs/Maint:	_____
Supplies:	_____	Sales Tax:	_____
License:	_____	Travel:	_____
Meals:	_____	Phone/Fax:	_____
Utilities:	_____	Cell Phone:	_____
Shipping:	_____	Postage:	_____
Bank Charges:	_____	Safety Equip.:	_____
Equip Fuel:	_____	Tolls:	_____
Gifts:	_____	Cont. Education:	_____
Uniforms:	_____	Materials:	_____

Business Mileage: \_\_\_\_\_

Personal Mileage: \_\_\_\_\_

Total Mileage: \_\_\_\_\_

**Please itemize any additional expenses on the back.**