

## **Sole Proprietorship/ Self-employed Worksheet**

**If you have a Profit and Loss statement, please supply us with a copy.  
A backup copy of Quickbooks is also appreciated.**

**This worksheet is for all types of businesses so some things may not apply.**

Name \_\_\_\_\_

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

SSN \_\_\_\_\_

Phone # \_\_\_\_\_

Address \_\_\_\_\_

Business Name \_\_\_\_\_

EIN # \_\_\_\_\_

Business Address if different than home \_\_\_\_\_

Did you start or end this business in this year?    yes    no

**Total Income** \_\_\_\_\_

### **Expenses (provide the total for each expense category)**

- Cost of Goods Sold (for direct sales business)
- Commissions Paid
- Advertising
- Auto expenses
- Bank Charges
- Bookkeeping fees
- Commissions and fees
- Contract Labor (Did you issue 1099's? Yes No)
- Employee benefit programs
- Insurances by type
- Interest expenses by type
- Legal and Professional Services
- Other Professional
- Office expenses (supplies)

- Pension and profit sharing plans
- Rent or lease of office
- Rent or lease of vehicles, machinery, equipment
- Repairs or maintenance
- Supplies
- Taxes and licenses
- Tax Prep fees
- Travel (transportation, accommodation) (see follow up section below)
- Travel related meals and entertainment
- Local business meals and entertainment
- Utilities on business property
- Wages
- Telephone expense (business portion, never a first line into your home)
- Dues and memberships/subscriptions

**Other Expenses:**

What it is	Cost	What it is	Cost
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

**For wages paid to employees please attach a copy of your W-3 filed at the end of the year with the IRS.**

Employee benefit programs \_\_\_\_\_

Insurance (Other than Health) \_\_\_\_\_ Type \_\_\_\_\_

Self Employed Health Insurance \_\_\_\_\_

Interest on business loans \_\_\_\_\_

**Rent or Lease: (vehicles, machinery, equipment)**

What you rented/cost

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**Rent or Lease: (office, land, building)**

What you rented/cost

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**Travel:**

Airfare \_\_\_\_\_ Hotel \_\_\_\_\_ Car Rental \_\_\_\_\_

Parking \_\_\_\_\_ Taxi/Train/Bus \_\_\_\_\_ Tolls \_\_\_\_\_

Other Travel Expenses \_\_\_\_\_

**Meals and Entertainment:**

Business meals \_\_\_\_\_ Entertainment \_\_\_\_\_

**Business Utilities:** (For a building other than your home)

Electric/gas \_\_\_\_\_ Water/sewer \_\_\_\_\_ Telephone \_\_\_\_\_

Other \_\_\_\_\_

**Total employee wages Gross:** \_\_\_\_\_

**Payroll taxes paid: (list type and amount, including payroll taxes paid to the state)**

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**Equipment/Assets Purchased:** (computers, furniture, fleet vehicles, etc.)

Item	Cost	Date
_____	_____	_____
_____	_____	_____
_____	_____	_____

# **Automobile Deductions worksheet for self-employment or unreimbursed employee business expenses (Standard Mileage Deduction)**

## **Car and Truck Expenses:**

**Vehicle 1:** Year/make/model of vehicle \_\_\_\_\_

Total miles for the year \_\_\_\_\_ Business miles for the year \_\_\_\_\_

**Vehicle 2:** Year/make/model of vehicle \_\_\_\_\_

Total miles for the year \_\_\_\_\_ Business miles for the year \_\_\_\_\_

### **If using actual expenses for your car and truck expense then we need the following:**

**Vehicle 1—Provide Depreciation schedule from prior year tax return or date of purchase/ date placed in service and cost of vehicle when purchased:**

Year/make/model of vehicle \_\_\_\_\_

Fuel expense \_\_\_\_\_

Repairs/maintenance expense \_\_\_\_\_

Registration expense \_\_\_\_\_

Insurance expense \_\_\_\_\_

Other expense \_\_\_\_\_

**Vehicle 2-- Provide Depreciation schedule from prior year tax return or date of purchase/ date placed in service and cost of vehicle when purchased:**

Year/make/model of vehicle \_\_\_\_\_

Fuel expense \_\_\_\_\_

Repairs/maintenance expense \_\_\_\_\_

Registration expense \_\_\_\_\_

Insurance expense \_\_\_\_\_

Other expense \_\_\_\_\_

### **For leased vehicles:**

Year/make/model \_\_\_\_\_ Date lease began \_\_\_\_\_

Total lease payments this year \_\_\_\_\_

## Business Use of Home expense worksheet

**Business Use of Home: Did you use part of your home solely and regularly for your business? Yes No**

**If yes, do you have any other office you use for your business? Yes No**

If you answered yes to the first question and no to the second then fill out the following for your business use of home deduction:

Total square feet of home \_\_\_\_\_

Square feet used for business \_\_\_\_\_

Total of home utilities (gas, electric, water) \_\_\_\_\_

Total of home repairs/maintenance \_\_\_\_\_

Mortgage interest \_\_\_\_\_

Property taxes \_\_\_\_\_

Homers Insurance \_\_\_\_\_

Repairs/Improvements solely for the area used for business \_\_\_\_\_

Purchase price of home \_\_\_\_\_ Land value included in cost \_\_\_\_\_

Date began using part of your home for your business \_\_\_\_\_