Small Business – Self Employed - 1099 Income-Schedule C Worksheet

Send last year's Schedule C or tax return if you operated the business previously and we did not prepare the previous tax return for you.

Name of Business:		Type of Business:	
Does this business belong to you or your spouse?		Address of Business:	
Gross Income (provide any 1099's)	$	Materials and Supplies	$
Cost of Inventory at Beginning of Year	$	Other Costs	$
Cost of Inventory Purchased	**$**	Cost of Inventory at End of Year	$
Cost of Labor	**$**	Returns and Refunds	**$**
Advertising	$	Travel	$
Car and Truck	$	Meals and Entertainment	$
Commission and Fees	$	Utilities – Outside of Home	$
Contract Labor	$	Wages and Salaries Paid to Employees	$
Employee Benefit Programs not pensions	$	Other Expenses: Dues & Publications	$
Insurance: List Type_____	$	Other Expenses: Postage & Shipping	$
Self Employed Health Insurance	$	Other Expenses: Telephone	$
Mortgage Interest	$	Other Expenses: Bank Charges	$
Other Interest	$	Other (Specify):_____	$
Legal & Professional Fees	$	Other (Specify):_____	$
Office Expense	$	Other (Specify):_____	$
Pension and Profit Sharing Plans	$	Depreciable Items: Such as Equipment, Furniture, Computer and Land Improvements – Provide list with cost and date purchased.	
Rent or Lease – Outside of Home	$		
Repairs/Maintenance	$	Item:_____ Date:_____	Cost:_____
Supplies	$	Item:_____ Date:_____	Cost:_____
Taxes and Licenses	$	Item:_____ Date:_____	Cost:_____

Vehicle Expense

Mileage rate for 2006 is 44.5 cents per mile.

Year & Make and Model Vehicle		Do you have evidence to support the deduction?	Yes or No
Date First Used for Business:		Is this evidence written?	Yes or No
Type of Vehicle: Car, Van, Truck		Is another vehicle available for personal use?	Yes or No
Total Mileage		Was the vehicle available for personal use during off duty hours?	Yes or No
Business Mileage		Was the vehicle leased?	
Commuting Mileage		Was the vehicle used for hire?	Yes or No
Personal Mileage		Actual Expenses: Gas, Oil, Repairs, Insurance, ect.	$

Home Office

Area Used for Business - Square Footage/Room	Sq/ft	Mortgage Interest	$
Total Area - Square Footage of Home	Sq/ft	Real Estate Taxes	$
Number of Days in Year Office was in Home		Insurance – Homeowners/Renters	$
Date of Using Room as Home Office	$	Repair and Maintenance	$
Fair Market Value of Home with Home Office	$	Utilities Except Water per Month	$
Cost of Home with Home Office	$	Rent Paid for Year	$
Improvement to Home Office	$	Other Specify:_____	$
Land Value on Property Tax Statement	$	Other Specify:_____	$
Building Value on Property Tax Statement	$	Other Specify:_____	$

Small Business Comments and Other Expenses: