

Company Name \_\_\_\_\_ Year \_\_\_\_\_



# Schedule C, Self Employed Worksheet

**Income**

12 months of bank deposits	
Total Revenue/Sales	
All 1099s received - need copies	
Other Income (lottery, atm etc.)	

**Cost of goods Sold**

Beginning Inventory	
Purchases of goods sold	
Materials & Supplies	
Ending Inventory	

**Auto expense**

Lease payments	
Auto Insurance	
Interest on auto loan	
Repairs & Maintenance	
Total miles driven	
Business miles driven	
Total gas purchases	
Date car purchased	
Model and make of auto	

**Salaries & wages**

Total gross wages paid	
Company paid FICA	
Federal unemployment paid	
State unemployment paid	
Worker's compensation paid	
Total of 1099s to contractors (need copies of all 1099s paid)	

**Expenses**

Advertising	
Commissions paid	
Liability Insurance	
Interest paid	
Legal & professional fees paid	
Office supplies	
Rent paid	
Dues & subscriptions	
Travel expense	
Meals & entertainment	
Utilities	
Bank Charges	
List of assets (cost & date acquired)	
Health insurance premiums	

**Office in home**

Total square feet of home	
Total square feet of office	
Mortgage interest	
Real estate taxes	
Utilities paid	
Home repairs	
Home insurance	

Client's signature \_\_\_\_\_

Print name \_\_\_\_\_

Date \_\_\_\_\_

By signing above I verify and affirm that all the tax information on this sheet is correct & accurate. I give my permission to Sikka & Associates: Accounting & Tax Consultants to prepare my tax return on the basis of information provided by me. I understand that if any foregoing information provided to the accountant is incorrect, I will be liable for any or all consequences/penalties.