

MY OTHER BUSINESS Self-employment Income

(Music lessons, carpentry, sales, etc.)

Business Information:

Name: _____ Address of business: _____

Income Information:

Inventory at beginning of year (*if applicable*): Cost of inventory purchased (*if applicable*):
Inventory at end of year (*if applicable*): Type of business: _____

Total Business Income:

Expense Information:

Advertising	\$ _____
Business Miles, total miles	
Yr. & Make	
Commissions & fees	\$ _____
Insurance	\$ _____
Interest paid	\$ _____
Legal services	\$ _____
Professional services	\$ _____
Office expense	\$ _____
Rent of equipment	\$ _____
Rent of property	\$ _____
Other:	\$ _____
	\$ _____
	\$ _____
	\$ _____
	\$ _____
	\$ _____
	\$ _____
	\$ _____
	\$ _____

Phone: _____ Fax: _____ Web Page: _____

\$ _____ \$ _____ \$ _____ \$ _____

Repairs Maintenance Supplies, materials Taxes Licenses Travel expense Meals & entertainment Phone Utilities paid Wages/labor hired

Major Purchases: \$ _____ \$ _____ \$ _____ \$ _____ \$ _____ \$ _____

\$ _____ \$ _____ \$ _____ \$ _____

(Office Equipment, Furnishings, Tools & various Equipment)

\$ _____ \$ _____ \$ _____ \$ _____ \$ _____

Note: Attach **Prior year depreciation** schedules, if any.