

2009 Schedule C Self Employed Business Income and Expense Worksheet

Complete this form if you were self employed in 2009

A separate worksheet is required to report home office and vehicle expenses in connection with this activity.

Business Name _____ **Taxpayer/Spouse/Joint Business** _____

Business Address _____
(if not home address) (Street) (City) (State) (Zip)

Employer Identification Number (If not SS#) _____

Principal Business/Profession _____

Did you begin/acquire this business in 2009? _____ Yes _____ No

How many hours did you work throughout the year? _____ Full Time or _____ # Hours

Were you still in business at the end of 2009? _____ Yes _____ No

Business Income

Gross receipts or sales \$ _____ Other Income _____ \$ _____
Sales Tax Collected \$ _____ \$ _____
(if not incl. in gross receipts) _____ \$ _____

Returns and Allowances \$ _____ **1099 Misc.** – *Bring in ALL 1099s received. Include non-employee amounts in gross sales figures.*

Cost of Goods Sold

Beginning Inventory	\$ _____	Other costs	
Purchases		Inventory at year end	
Personal use (cost of items purchased used by you or your family)		How did you arrive at inventory value?	Actual Cost _____ Other _____
Cost of Labor			
Purchase of Material For Jobs			

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2009 Schedule C Worksheet (Continued)

Equipment					
Item Purchased	Date Purchased	Cost (including sales tax)	Item Traded	Additional Cash Paid	Other Information

Business Expenses			
Advertising (ads, business cards, tee shirts, signs)		Education	
Commission & Fees Paid (contract labor)*		Dues and Publications	
Employee Benefits: Health Insurance, Christmas party, mileage (etc.)		Taxes and Licenses:	
Wages:**		Personal property	
Wages to spouse		Licenses (not auto/truck)	
Wages to children under 18		Real estate (business building/land)***	
Other wages		Payroll (your share of Soc. Sec./Medicare)	
		Federal Unemployment	
		State Unemployment	
Insurance: Worker's Comp, Business Liability (do not include auto/truck/health)		Travel Expenses (away from home overnight - include lodging, air and train fares, convention fees, etc. but <u>NOT</u> meals) # of days away from home: _____	
Interest: Mortgage (paid to banks)***		Meals and Entertainment (enter 100% subject to 50% limit)	
Other			
Legal and Professional Services		Utilities: Electricity (business)***	
Office Expense		Heating/Fuel (business)***	
Pension and Profit Sharing		Garbage/Water/Sewer (business)	
Rent or Lease: Vehicles/Machinery		Telephone (business line, second line, other options).	
Other Business Property			
Office Space		Business Long Distance (from home phone)	
Repairs and Maintenance (do not include auto or truck)		Other Expenses (please list):	
Supplies			
Printing and Copying			

* 1099s: Amounts of \$600 or more paid to individuals (not corporations) for rent, interest, or services rendered to you in your business, require information returns to be filed by payer. Due date of the return is January 31.

** Wage amounts paid to individuals (including your spouse and children) must be reported on form W-2 by January 31. Attach copies of W-2's and employment tax returns for 2009.

*** Use 'Home Office Worksheet' to report home expenses.