SELF-EMPLOYED TAX RECORDKEEPING FOR TAX YEAR

NAME

(Monthly totals are optional)	TOTAL	JAN	FEB	MAR	APRIL	MAY	JUNE	JULY	AUG	<u>SEPT</u>	OCT	NOV	DEC
INCOME: Form 1099 - Misc. Income or Other Inc.	\$												
EXPENSES:													
Advertising													
Automobile (see reverse side for detail)													
Books & publications													
Computers & other major office purchases, list separately													
Computer software													
Dues & licenses													
Education & training													
Gifts to customers (limited of \$25 per gift)													
Home Office (see reverse side for detail)													
Insurance-health (goes on pg 1 of 1040)													
Insurance other than auto													
Internet access & web cost charges													
Interest-business debt other than auto													
Legal, accounting & other professional fees													
Meals & entertainment (record 100% of amount spent)													
Miscellaneous													
Office supplies													
Postage costs													
Promotional imprinted items													
Printing costs													
Rent (office space outside your home)													1
Repairs & maintenance (for business equipment)													<u> </u>
Subcontract labor (Form 1099 required if pay over \$600)													
Telephone in home (if 1 line, identify business calls)													
Telephone-cellular													l
Gross Payroll (issue W-2's)													1
Wages paid to casual labor (need receipt from person)													l
Payroll taxes													1
MLS Fees													
Shared office costs (desk fee)													
Concessions (repairs, warranties, etc.)													
Other-describe													
TOTAL EXPENSES	\$												
NET INCOME	\$												

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Books written by C. Diane Tedder, CPA, MST

Tax Recordkeeping Made Easy for the Self-Employed

Essential Homeowners Tax Manual

Tax Guide for Residential Rental Property

Achieving Balance and Profit as a Business Owner

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page

* AUTOMOBILE DEDUCTION	ON: ASK	US HO	N TO	COMP	UTE TH	IE MA	XIMUN		UCTIC	N						
(Auto expenses can be totaled by category and	d we will allocate i	it based on a	uto usage)												
AUTOMOBILE #1 EXPENSES				_												
Auto #1 used by you: Mark here if same car a	as last year	Total miles o	driven	Busi	ness miles		Busines	s %								
For new purchase provide this information or doo		Make &	& year of au	uto purchase	ed be		Cost at pur	chase								
For new lease provide this information or docum		Make 8	uto leased		Cost if you	had bought	t it	_								
If this auto was sold provide sales document:	is auto was sold provide sales document: Date au						e auto sold Amount received from auto sale Amount received from trade-in									
	TOTAL	JAN	FEB	MAR	APRIL	MAY	JUNE	JULY	AUG	SEPT	OCT	NOV	DEC			
Auto #1 lease payment each month	\$			1			1									
Auto #1 interest paid each month																
We will compute depreciation																
Gas																
Repair and maintenance																
Auto insurance																
Car washes		-								-						
License plate Subtotal Auto #1 Costs	\$	-								-						
	Ψ															
AUTOMOBILE #2 EXPENSES																
Auto #2 used by you: Mark here if same car a		Total miles o						s %								
For new purchase provide this information or document: Date purchased Make & year of auto purchased Cost at purchase For new lease provide this information or document: Date leased Make & year of auto purchased Cost at purchase																
For new lease provide this information or document If this auto was sold provide sales document:	ent.	Date lease					from auto sa			Amount red			-			
	TOTAL	JAN		MAP	APRIL				AUG			NOV	DEC			
Auto #O lacas noursent each menth		JAN	FLD	IVIAN	AFRIL	IMAI	JUNE	JULI	AUG	JLF I	001	NOV	DLC			
Auto #2 lease payment each month Auto #2 interest paid each month																
We will compute depreciation		-			-											
Gas																
Repair and maintenance																
Auto insurance																
Car washes																
License plate																
Subtotal Auto #2 Costs	\$			1												
TOTAL AUTO EXPENSES	\$															
			0.14					4			4					
HOME OFFICE EXPENSES-Ger	nerally are a	llowed to	or Self-	Employ	ed but t	alk to u	us abou	t your s	specific	c circum	stance	S				
a) Home sq. ft b) Office s	a ft	c) To	tal Durch	ase cost	of home		Land	cost		d) Hor	no improv	vements				
	ч. п	. 0)10		1236 6031				0031		u) 1101						
Current year expenses to be allo	cated based or	n % of hor	ne office	space _												
								- ·								
Real estate taxes Mortgage interest Homeowners Ins Condominium fees																
Gas & electric Repair & mai	intenance	Clea	aning and	l lawn ser	vice											
		0.00	annig and													
					Talk to u	is about	retireme	nt accou	nt optior	ns for the	self-emp	loyed				
Don't forget about retirement tax s	saving plans				which in	clude SI	EP plans.	401K pla	ans, IRA	and Roth	IRA acc	ounts.				
Don't forget about retirement tax saving plans which include SEP plans, 401K plans, IRA and Roth IRA accounts. Type of account If your spouse works for you, there may be an advantage of paying your												NUR.				
Amount of contribution spouse wages in order to deduct health insurance as a business expense.																
Maximum contribution or call me Pay your children for the administrative or cleaning chores they do for											r					
	your business.															