

Name : _____ Date : _____

SELF-EMPLOYED TAX ORGANIZE

PERSONAL & BUSINESS INFORMATION	
Name:	
Business Name (if any):	
SSN / EIN:	
Business Type (Sole Prop / LLC):	

INCOME	
Gross Income:	
Other Business Income:	
Total Income:	

EXPENSES	
Advertising:	
Supplies:	
Rent / Utilities:	
Car / Travel:	
Professional Fees:	
Other:	
Total Expenses:	

TAXES & PAYMENTS	
Estimated Tax Payments Made:	
Prior Year Refund Applied:	

NOTES