Hair Dresser/Barber Income Worksheet

BUSINESS CODES: Hair Dresser (812112) Barber (812111)

Did you receive a 1099Misc? Circle One: YES NO

If so, what is the amount of income shown on the 1099M? _________________________

Do you have a business address, other than your home? Circle One: YES NO
If YES, what is the address, including city and zip code? _________________________

How many weeks/months in business during the year? _______ weeks ________ months

Did you use bills/invoices? Circle One: YES NO
Do you deposit the money from the business into a bank account? Circle One: YES NO
If yes, do you have bank statements or the deposit tickets? Circle One: YES NO

How much do you charge? _________________________________________________________

How many customers per week/month? __________________________________________________

Total Hair Dressing or Barber Income for the year? $ _________________________

Do you have expenses? Circle One: YES NO
If YES, continue to page 2.
If NO, please explain: ________________________________________________________________
__________________________________________________________________________________
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Hair Dresser & Barber Expense Worksheet

**Vehicle Expense:** (Standard Mileage Rate)
Business Miles Only [From Mileage Log Worksheet]

_________ total business miles x 53.5¢ per mile = __________

**Travel Expenses:** (Business Travel Only – Actual Costs)

_________ Lodging (hotel or motel costs)
_________ Car Rental

**Rent:** (Booth or Chair Rental at a Salon or Barbershop)

_________ cost per month X _____ months = ________

__ Supplies (Required for Work)
__ Cell Phone (exclusively used for business purposes)
__ Uniforms (If Required for Work)
__ Repairs, Maintenance of Business Equipment (blade sharpening, etc.)
__ Subscriptions to Trade Publications
__ State and Local Government License Fees
__ Advertising Expenses
__ Liability/Business Insurance Premiums
__ Other Expenses: Please List specifics on the back of this page

For Use ONLY if Standard Mileage Rate, (above) HAS NOT been used.

<table>
<thead>
<tr>
<th>Actual Expenses</th>
<th>Vehicle Depreciation Information</th>
</tr>
</thead>
<tbody>
<tr>
<td>__________ Fuel costs</td>
<td>Type of Vehicle ________________</td>
</tr>
<tr>
<td>__________ Parking Fees and Tolls</td>
<td></td>
</tr>
<tr>
<td>__________ Insurance</td>
<td>Purchase Date ________________</td>
</tr>
<tr>
<td>__________ Oil and tires</td>
<td></td>
</tr>
<tr>
<td>__________ Vehicle Repairs</td>
<td>Purchase Price ________________</td>
</tr>
<tr>
<td>__________ License and Registration</td>
<td></td>
</tr>
</tbody>
</table>

TAXPAYER SIGNATURE __________ DATE __________ SPouse SIGNATURE __________ DATE __________

Taxpayer must keep all receipts and documentation for this tax return for 5 years