

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: _____

Hair Dresser & Barber Expense Worksheet



ENTER AMOUNT
OR N/A

_____ **Vehicle Expense: (Standard Mileage Rate)**
Business Miles Only [From **Mileage Log Worksheet**]
_____ total business miles x 58¢ 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.

Actual Expenses

_____ Fuel costs
_____ Parking Fees and Tolls
_____ Insurance
_____ Oil and tires
_____ Vehicle Repairs
_____ License and Registration

Vehicle Depreciation Information

Type of Vehicle _____
Purchase Date _____
Purchase Price _____

TAXPAYER SIGNATURE

DATE

SPOUSE SIGNATURE

DATE

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