

Cleaning & Janitorial Income Worksheet

BUSINESS CODE (561720)

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

If so, what is the amount of income shown on the 1099NEC? _____

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 bill/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 many homes/places did you clean? _____

How do you charge? Circle One and enter amount: Day: _____ Hour: _____ Job: _____

Location	Charge per visit	# of visits	Total Charge

Total Income for the year housekeeping? \$ _____

Do you have expenses? Circle One: YES NO

If **YES**, continue to page 2.

If **NO**, please explain:

Cleaning & Janitorial Expense Worksheet

ENTER AMOUNT
OR N/A

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

_____ total business miles x 57.5¢ per mile = _____

Cleaning Supplies Purchased [such as cleaning solutions, cloths etc.]

Small Cleaning Tools & Equipment

Uniforms [Must be REQUIRED and not suitable for every day wear]

Licensing Fees and Bonding

Other Expenses: (Please List Type & Amount)

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