



CHILD CARE ASSISTANCE PROGRAM

Division of Public Assistance
Child Care Program Office

Office Use Only

SELF-EMPLOYMENT INCOME/DEDUCTION WORKSHEET

First and Last Name of Parent: _____

Month/Year: _____ SSN (optional): _____

What was your work schedule for the Month/Year listed above: _____

Business Name on your State of Alaska Business License: _____

Type of Business: _____

Year-Round Employment? [] Yes [] No Seasonal Employment? [] Yes [] No If seasonal, which months: _____

The items listed below are allowable for the Child Care Assistance Program. To ensure the appropriate cost or deduction is given, please provide copies of receipts for each of the items used in your self-employment venture. Your receipts must be in good order with the specific item identified.

Gross Monthly Self-Employment Income and Allowable Costs of Doing Business

1. \$ _____ Gross Monthly Income

Monthly costs of doing business (allowable deduction from gross monthly income)

- 2. \$ _____ Labor costs to include payments to or for an employee's gross wages; life and health insurance premiums; mandatory employer contributions to employee benefits plans such as unemployment insurance and social security. This includes payments made to a self-employed helper, such as contracted work or shares paid to a self-employed crew member
3. \$ _____ Stock and inventory, including the actual amount plus tax of a product purchased for resale
4. \$ _____ Interest paid as part of an installment payment for the purchase of income-producing real estate; capital assets; equipment and or machinery, and other durable goods, and the tax paid on the property
5. \$ _____ Insurance premiums, taxes, assessments, and utilities on income producing property. If business is located in your residence, the percentage of the home used for the business and the cost of that percentage of the mortgage interest, insurance, taxes, and utilities is allowed
6. \$ _____ Service, maintenance, and repair of business property and business equipment
7. \$ _____ Rental costs of business property and business equipment. If the business is located in your residence, only the amount of the rent/lease applicable to the percentage of the home used for the business is allowed
8. \$ _____ Business supplies

9. \$ _____ Costs for business advertising
10. \$ _____ Licenses and permit fees
11. \$ _____ Legal and professional fees such as fees to lawyers and accountants
12. \$ _____ Business travel, including costs incurred by the self-employed individual and employees to travel outside their community: to sell goods or services; purchase business equipment; and seek repair for business equipment. Include only the portion of travel costs attributable to the business.
13. \$ _____ Vehicle maintenance and repairs. If vehicle is used over 50% of the time for the business include: gas; oil; registration and licensing fees; and replacement of worn items such as tires. If used less than 50% of the time for the business a flat rate per mile is allowed based on the current IRS Standard Mileage Rate
14. \$ _____ Purchase of non-durable items
15. \$ _____ Other expenses (describe):

Additional costs for Self-Employed Fishermen:

16. \$ _____ Boat engine fuel and oil
17. \$ _____ Boat and motor repairs and maintenance
18. \$ _____ Rain clothing
19. \$ _____ Bait
20. \$ _____ Commercial fishing license
21. \$ _____ Replacement or repairs of all types of fishing nets, not including lead line or float line
22. \$ _____ Year-round boat mortgage fees, including boat stall and grid fees
23. \$ _____ Utility costs to maintain the vessel year-round
24. \$ _____ Labor costs – if not included in 2 above
25. \$ _____ Crew food and transportation, if paid for the crew member and not deducted from the amount paid to a crew member
26. \$ _____ **Total Allowable Deductions (add all deductions from lines 2 – 25 above)**

\$ _____ Adjusted Self-Employment Income (subtract the total allowable deduction on line 26 from the gross monthly income on line 1)

I certify the information on this Self-Employment Income/Deduction Worksheet is correct and complete.

Signature of Self-Employment Parent

Date