PROFIT AND LOSS FROM BUSINESS - SCHEDULE C

(If you have financial statements or QuickBooks please provide these records (backup copy of data) along with copies of year-end payroll records, fixed asset purchases, and miles if applicable. Only complete details below if you do **not** have financial statements or bookkeeping records)

Name of Business:

Name of Contact:	
Principal Product/Service	
Tax ID#	
Business Income	Amount
Gross Receipts or Sales	
Other (Describe):	
Cost of Goods Sold (List Below):	Amount
Cost of Labor	
Purchases and Materials	
Other (Describe):	
Business Expenses (List Below):	Amount
Returns and Allowances	
Advertising	
Auto Expenses (Business mileage):	
Commissions and Fees	
Contract Labor	
Employee Benefit Programs	
Insurance (Other than Health)	
Interest Expense	
Legal and Professional Services	

Office Expenses	
Pension and Profit-Sharing Plan	
Rent or Lease of Machinery and Equipment	
Rent or Lease of Real Estate	
Repairs and Maintenance	
Supplies	
Taxes and Licenses	
Travel (Hotel, Airfare, Parking, etc.)	
Meals	
Utilities	
Wages (Please include all W2's)	
Dues and Subscriptions	
Other (Describe):	

<u>LIST OF SIGNIFICANT PURCHASES FOR BUSINESS USE</u> (Greater than \$500 and NOT included in any expenses above)

Description of Property	Date Purchased	Cost

1099 Filing	Yes	No
Did you pay an independent contractor(s) over \$600 for the year?		
If you checked yes, did you issue the required 1099 for each contractor paid?		

DO YOU USE A HOME OFFICE STRICTLY FOR YOUR BUSINESS?

(If so, please provide the following)

HOME OFFICE EXPENSES:

Square Footage on your entire home:

Square Footage of your home office:	
Total rooms in your home:	
Mortgage Interest Paid:	
Rent Paid:	
Real Estate Taxes Paid:	
Homeowner's or Renter's Insurance:	
Utilities Paid: (for entire year)	
Additional Notes	