

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 (<i>Describe</i>):	
Cost of Goods Sold (List Below):	Amount
Cost of Labor	
Purchases and Materials	
Other (<i>Describe</i>):	
Business Expenses (List Below):	Amount
Returns and Allowances	
Advertising	
Auto Expenses (Business mileage): _____	
Commissions and Fees	
Contract Labor	
Employee Benefit Programs	
Insurance (<i>Other than Health</i>)	
Interest Expense	
Legal and Professional Services	

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: <i>(for entire year)</i>	

Additional Notes

