

PROFIT AND LOSS FROM BUSINESS – SCHEDULE C

Please complete one for each business entity

NAME OF BUSINESS	
NAME OF CONTACT	
PRINCIPAL BUSINESS/PROFESSION	
EIN # <i>(if applicable)</i>	

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?		

Miscellaneous:	Yes	No
Did you have Payroll ? If so, please include form W3 and quarterly payroll reports if we don't already have access to them.		
Did you set up a Retirement Account in 2025?		

DO YOU USE A HOME OFFICE STRICTLY FOR YOUR BUSINESS?

(If so, please provide the following)

HOME OFFICE EXPENSES:	
How many months out of the year did you use the home office?	
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>	

BUSINESS MILES DRIVEN: (please enter below the amount of miles driven solely for the purpose of the rental property. Do not use a dollar amount)	
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SELF EMPLOYED HEALTH INSURANCE:	YES	NO
Did you have self-employed health insurance?		
If you answered yes, was it through marketplace health insurance? <i>(If so, so we need your 1095-A form)</i>		

 Only complete the following if you have not already provided us with a summary or Quickbooks file.

BUSINESS INCOME	Amount
Gross Receipts or Sales	
Other (Describe):	

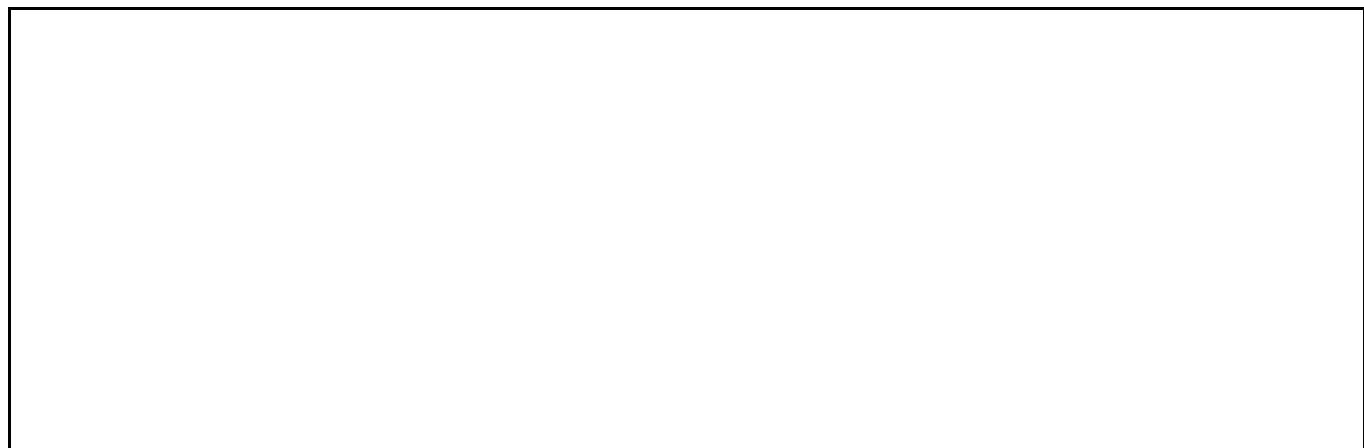
COST OF GOODS SOLD (List Below):	Amount
Cost of Labor	
Purchases and Materials	
Other (Describe):	

BUSINESS EXPENSES:	Amount
Returns and Allowances	
Advertising	
Commissions and Fees	
Contract Labor	
Employee Benefit Programs	
Insurance (Other than health or auto)	
Interest Expense	
Legal and Professional Services	
Office Expenses	

Pension and Profit-Sharing Plan	
Rent or Lease of Machinery or Equipment	
Rent or Lease of Real Estate	
Repairs and Maintenance	
Supplies	
Taxes and Licenses	
Travel (Hotel, Airfare, Parking, etc.)	
Meals	
Utilities	
Wages <i>(Please include all W2's as well as quarterly payroll reports)</i>	
Dues and Subscriptions	
Other <i>(Describe):</i>	

LIST OF SIGNIFICANT PURCHASES FOR BUSINESS USE (*Greater than \$600 and NOT included in any expenses above*)

ADDITIONAL NOTES:

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