

Schedule C - Profit or Loss from Business

Name:

SSN:

General Business Information

Business name _____ Employer ID number _____

Professional product or service _____

Business address, city, state, ZIP _____

[] This business started or was acquired during 2019 [] Yes [] No Payments of \$600 or more were paid to an individual who is not your employee for services provided for this business

[] This business was disposed of during 2019 [] Yes [] No You filed Forms 1099 for the individuals

Income

Table with 2 columns for 2019 and 2019. Rows include Gross receipts or sales, Returns & allowances, and Other income.

Expenses

Table with 2 columns for 2019 and 2019. Rows include Advertising, Car & truck expenses, Commissions & fees, Contract labor, Depletion, Employee benefit programs, Insurance (other than health), Interest - mortgage, Interest - other, Legal & professional services, Office expenses, Pension & profit sharing plans, Rent or lease (vehicles, machinery, & equipment), Rent (other business property), Repairs & maintenance, Supplies, Taxes & licenses, Travel, Total meals, Utilities, Wages, and Other expenses (list).

Cost of Goods Sold

Table with 2 columns for 2019 and 2019. Rows include Inventory at beginning of year, Purchases, Cost of personal use items, Cost of labor, Materials & supplies, Other costs, and Inventory at end of year. Includes checkbox for change in inventory method.