

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 _____

- Checkboxes for business start/acquire, disposal, and 1099 filings.

Income

Table with 5 columns: Description, 2015, 2014, 2015, 2014. Rows include Gross receipts or sales, Income from Form 1099-MISC, and Returns & allowances.

Expenses

Table with 5 columns: Description, 2015, 2014, 2015, 2014. Rows include Advertising, Car & truck expenses, Commissions & fees, Contract labor, Depletion, Employee benefit programs, Insurance, Mortgage interest, Other interest, Legal & professional services, Office expenses, Pension & profit sharing plans, Rent or lease, Rent (other business property), Repairs & maintenance, Supplies, Taxes & licenses.

Cost of Goods Sold

Table with 5 columns: Description, 2015, 2014, 2015, 2014. Rows include Inventory at beginning of year, Purchases, Cost of personal use items, Cost of labor, Materials & supplies, Other costs, Inventory at end of year.

** Indicates an associated detail worksheet