SCHEDULE C (Form 1040)

Profit or Loss From Business

(Sole Proprietorship)

➤ Partnerships, joint ventures, etc., generally must file Form 1065 or 1065-B.

➤ Attach to Form 1040, 1040NR, or 1041. ➤ See Instructions for Schedule C (Form 1040).

OMB No. 1545-0074 Attachment Sequence No. 09

Department of the Treasury Internal Revenue Service (99)

Name of proprietor					Social security number (SSN)					
A	Principal business or profession, including product or service (see instructions)						r code fro	om pag	jes C-9,	10, & 11
С	Business name. If no separate business name, leave blank.					D Emp	loyer ID	numbe	er (EIN)	, if any
E	Business address (including suite or room no.) ▶									
	City, town or post office, state, and ZIP code									
F	Accounting method: (1) ☐ Cash (2) ☐ Accrual (3) ☐ Other (specify) ▶									
G	Did you "materially participate" in the operation of this business during 2010? If "No," see instructions for limit on losses									
H	If you started or acquired this business during 2010, check here									
			-1-4		t.					
1	Gross receipts or sales. CautiThis income was reported to									
	on that form was checked, or				} ▶ □					ļ
	You are a member of a q		-		• • • • • • • • • • • • • • • • • • •	1				-
•	income not subject to self-em	• •	ictions	s tor iin	nit on losses.					ŀ
2 3	Returns and allowances									
4	Subtract line 2 from line 1									
5	Gross profit. Subtract line 4 from line 3									
6	-				refund (see instructions)	6				
7						7				
Part		penses for business us								
8	Advertising	8		18	Office expense	18				
9	Car and truck expenses (see			19	Pension and profit-sharing plans .	19				
	instructions)	9		20	Rent or lease (see instructions):					
10	Commissions and fees .	10		а	Vehicles, machinery, and equipment					
11	Contract labor (see instructions)	11		b	Other business property					
12	Depletion	12		21	Repairs and maintenance					
13	Depreciation and section 179			22	Supplies (not included in Part III) .					-
	expense deduction (not			23	Taxes and licenses	23				-
	included in Part III) (see instructions)	13		24 a	Travel, meals, and entertainment: Travel	24a				
14	Employee benefit programs			b	Deductible meals and					
	(other than on line 19)	14			entertainment (see instructions) .					
15	Insurance (other than health)	15		25	Utilities	25				-
16	Interest:	40-		26	Wages (less employment credits) .					
a b	Mortgage (paid to banks, etc.) Other	16a 16b		27	Other expenses (from line 48 on page 2)					
17	Legal and professional	100			page 2)					
.,	services	17								
28		ises for business use of hom	e. Add	lines	8 through 27 ▶	28				
29	Tentative profit or (loss). Subtr	ract line 28 from line 7				29				
30	Expenses for business use of	your home. Attach Form 882	29 .			30				
31	Net profit or (loss). Subtract	line 30 from line 29.								
	• If a profit, enter on both For (if you checked the box on line	· · ·				31				
	• If a loss, you must go to lin			,	·				-	<u> </u>
32	If you have a loss, check the b		tment	in this	activity (see instructions).					
	 If you checked 32a, enter the loss on both Form 1040, line 12, and Schedule SE, line 2, or on Form 1040NR, line 13 (if you checked the box on line 1, see the line 31 instructions). Estates and trusts, enter on Form 1041, line 3. If you checked 32b, you must attach Form 6198. Your loss may be limited. 									

Schedule C (Form 1040) 2010 Page 2 Part III Cost of Goods Sold (see instructions) 33 Method(s) used to a Cost **b** Lower of cost or market c Other (attach explanation) value closing inventory: 34 Was there any change in determining quantities, costs, or valuations between opening and closing inventory? ☐ Yes ☐ No If "Yes," attach explanation . . 35 35 Inventory at beginning of year. If different from last year's closing inventory, attach explanation . . . 36 Purchases less cost of items withdrawn for personal use . . . 36 37 Cost of labor. Do not include any amounts paid to yourself . 37 38 Materials and supplies 38 39 39 Add lines 35 through 39 40 40 41 Inventory at end of year 41 42 Cost of goods sold. Subtract line 41 from line 40. Enter the result here and on page 1, line 4 Part IV Information on Your Vehicle. Complete this part only if you are claiming car or truck expenses on line 9 and are not required to file Form 4562 for this business. See the instructions for line 13 to find out if you must file Form 4562. 43 When did you place your vehicle in service for business purposes? (month, day, year) / / Of the total number of miles you drove your vehicle during 2010, enter the number of miles you used your vehicle for: 44 **b** Commuting (see instructions) 45 Was your vehicle available for personal use during off-duty hours? . ☐ No No 46 ☐ No If "Yes," is the evidence written? ☐ No Other Expenses. List below business expenses not included on lines 8-26 or line 30. Part V

Total other expenses. Enter here and on page 1, line 27

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