

2023

Schedule C - Profit or Loss from Business

Name: _____

SSN: _____

General Business Information

TS _____ Professional product or service _____ Employer ID number _____

Business name _____

Business address, city, state, ZIP _____

Accounting Method: Cash Accrual Other (specify) _____

This business started or was acquired during 2023.

This business was disposed of during 2023.

Select if this business is for:

Professional gambler

Newspaper delivery and you are under 18 years of age

Exempt Notary income

A clergy

Yes No

Payments of \$600 or more were paid to an individual, who is not your employee, for services provided for this business.

If "Yes," did you file Forms 1099 for the individuals?

You received a Employer Retention Credit payment in 2023?

If "Yes," how much for 2020 \$ _____ for 2021 \$ _____

Income

	2023		2023
Gross receipts or sales	_____	Other income	_____

Returns & allowances	_____		_____
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Expenses

	2023		2023
Advertising	_____	Repairs & maintenance	_____

Car & truck expenses	_____	Supplies	_____
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Commissions & fees	_____	Taxes & licenses	_____
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Contract labor	_____	Travel	_____
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Depletion	_____	Total meals	_____
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Employee benefit programs	_____	Utilities	_____
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Insurance (other than health)	_____	Wages	_____
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Interest - mortgage	_____	Family health coverage payments for taxpayer, spouse or dependents	_____
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Interest - other	_____	Other expenses (list)	_____
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Legal & professional services	_____		_____
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Office expenses	_____		_____
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Pension & profit sharing plans	_____		_____
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Rent or lease (vehicles, machinery, & equipment)	_____		_____
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Rent (other business property)	_____		_____
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Cost of Goods Sold

	2023		2023
Inventory at beginning of year	_____	Materials & supplies	_____

Purchases	_____	Other costs	_____
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Cost of personal use items	_____	Inventory at end of year	_____
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Cost of labor	_____	<input type="checkbox"/> There was a change in inventory method.	
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Expenses Related to Business

Name:

SSN:

Auto Expense

Name of business vehicle is used for _____

Description of vehicle _____ Date vehicle was placed in service _____

- Yes No Was this vehicle available for use during off-duty hours?
- Was another vehicle is available for personal use?

- Yes No Do you have evidence to support your deduction?
- If "Yes," is the evidence written?

Mileage

Number of miles the vehicle was driven during 2023

Business: _____ Commuting _____
 Other _____

Expenses

Garage rent _____	Repairs _____
Gas _____	Tires _____
Insurance _____	Tolls _____
Licenses _____	Lease addback _____
Oil _____	Other expenses _____
Parking fees _____	_____
Rental fees _____	_____
Interest _____	_____
Property tax _____	_____

Business Use of Home

Name of business home is used for _____

What is the total square footage of your home that was used regularly and exclusively for business? _____

What is the total square footage of your home? _____

For daycare facilities not used exclusively for business, complete the following questions

How many days during the year was the area used? _____

How many hours per day was the area used? _____

The daycare facility was in operation for the entire year

Expenses	Office expenses	Home expenses
Mortgage interest _____	_____	_____
Real estate taxes _____	_____	_____
Excess mortgage interest _____	_____	_____
Excess real estate taxes _____	_____	_____
Insurance _____	_____	_____
Rent _____	_____	_____
Repairs & maintenance _____	_____	_____
Utilities _____	_____	_____
Other expenses _____	_____	_____

In the "Office expenses" column, enter those expenses that pertain exclusively to your office; in the "Home expenses" column, enter those expenses that pertain to the entire dwelling.