

## Profit or Loss From Business Schedule C

Name:

SSN:

TS  Principal business or profession

Business code  
Employer I.D.  
number

Business name

Business address

City

U.S. Only State, ZIP

Foreign Only Province/State, Country, Postal Code

Accounting method, if not cash  Accrual  Other

Activity type  Some investment is NOT at risk

You started or acquired this business during 2013  You disposed of this property during 2013

Did you make any payments in 2013 that would require you to file Form(s) 1099?  Yes  No

If, Yes, did you or will you file all required Forms 1099?  Yes  No

Gross receipts or sales

Other income

Returns and allowances

Expenses

Advertising

TAXES & Licenses

Car and truck expenses

Travel

Commissions and fees

Total meals and entertainment

Contract labor

Utilities

Depletion

Wages

Employee benefit programs

Other expenses (list):

Insurance (other than health)

Mortgage interest (paid to banks, etc.)

Other interest

Legal & professional services

Office expenses

Pension and profit sharing plans

Rent or lease (vehicles, machinery, and equipment)

Rent (other business property)

Repairs and maintenance

Other (Detail)

Supplies

Family Health Coverage

Cost of goods sold  
Inventory at beginning of the year

Materials and supplies

Purchases (less cost of items withdrawn for personal use)

Other costs

Cost of labor

Inventory at end of year