

Profit or Loss From Business Schedule C

Name: _____ **SSN:** _____

| | | | |
|------------------|--|--------------------------------------|----------------------|
| TS | | Principal business or profession | Business code |
| Business name | | | Employer I.D. number |
| 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

| Income | 2013 | 2012 | 2013 | 2012 |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------|------|-------------------------------|------|
| Gross receipts or sales | | | Other income | |
| Returns and allowances | | | | |
| Expenses | 2013 | 2012 | 2013 | 2012 |
| Advertising | | | Taxes and 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 | 2013 | 2012 | 2013 | 2012 |
| Inventory method, if not Cost <input type="checkbox"/> Lower of Cost or Market <input type="checkbox"/> Other <input type="checkbox"/> There was a change of inventory method <input type="checkbox"/> | | | | |
| 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| Purchases (less cost of items withdrawn for personal use) | | | Other costs | |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 | |

Profit or Loss From Business

Schedule C General Information

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

Inventory method, if not cost Lower of Cost or Market Other Change of inventory method Yes No

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

| Other Information | 2013 | 2012 |
|-------------------|------|------|
|-------------------|------|------|

| | | |
|------------------------|--|--|
| Family Health Coverage | | |
|------------------------|--|--|

| Income | 2013 | 2012 |
|--------|------|------|
|--------|------|------|

| | | |
|-------------------------|--|--|
| Gross receipts or sales | | |
|-------------------------|--|--|

| | | |
|------------------------|--|--|
| Returns and allowances | | |
|------------------------|--|--|

| | | |
|--------------|--|--|
| Other income | | |
|--------------|--|--|

| Cost of Goods Sold | 2013 | 2012 |
|--------------------|------|------|
|--------------------|------|------|

| | | |
|------------------------------------|--|--|
| Inventory at beginning of the year | | |
|------------------------------------|--|--|

| | | |
|-----------------------------------------------------------|--|--|
| Purchases (less cost of items withdrawn for personal use) | | |
|-----------------------------------------------------------|--|--|

| | | |
|---------------|--|--|
| Cost of labor | | |
|---------------|--|--|

| | | |
|------------------------|--|--|
| Materials and supplies | | |
|------------------------|--|--|

| | | |
|----------------------------------------|--|--|
| Other costs (list on detail worksheet) | | |
|----------------------------------------|--|--|

| | | |
|--------------------------|--|--|
| Inventory at end of year | | |
|--------------------------|--|--|

Profit or Loss From Business
Schedule C General Information

Name:

SSN:

| TS | Business name | Profession or product | 2013 | 2012 |
|-----------------|----------------------------------------------------|-----------------------|------|------|
| Expenses | | | | |
| | Advertising | | | |
| | Car and truck expenses | | | |
| | Commissions and fees | | | |
| | Contract labor | | | |
| | Depletion | | | |
| | Employee benefit programs | | | |
| | Insurance (other than health) | | | |
| | Mortgage interest (paid to banks, etc.) | | | |
| | Other interest | | | |
| | Legal and professional services | | | |
| | Office expense | | | |
| | Pension and profit sharing plans | | | |
| | Rent or lease (vehicles, machinery, and equipment) | | | |
| | Rent (other business property) | | | |
| | Repairs and maintenance | | | |
| | Supplies | | | |
| | Taxes and licenses (including real estate taxes) | | | |
| | Travel | | | |
| | Total meals and entertainment | | | |
| | Utilities | | | |
| | Wages | | | |
| | Other expenses (list): | | | |
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| | Other (Detail) | | | |
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