

Schedule C

PROFIT OR LOSS FROM BUSINESS

Tax Year: 2020

(Self-Employed, Sole Proprietorship)

(If you have multiple businesses - fill out 1 form for each business)

Clients Name: _____

Principal Business or Profession: _____

Business Name: _____ Date started Business: _____

Business Address: _____

Office In Home - Total sq. ft. of home: _____ Total sq. ft. of office: _____ Sq. ft. for storage: _____

Did you make any payments in 2020 that would require you to file Form(s) 1099? yes no

Gross Business Income Received in 2020: _____ (Attach 1099 Misc)

Expenses:

Advertising: \$ _____
 Bank charges: \$ _____
 Car and truck expenses -
 Car wash: \$ _____
 Maintenance: \$ _____
 Tires: \$ _____
 Towing: \$ _____
 Commissions and fees: \$ _____
 Dues & subscriptions: \$ _____
 Education & training: \$ _____
 Employee benefits: \$ _____
 Insurance (other than health): \$ _____
 Interest: \$ _____
 Mortgage (paid to banks): \$ _____
 Real Estate taxes: \$ _____
 Legal and professional services: \$ _____
 Taxes - Property: \$ _____
 - DMV: \$ _____
 Licenses: \$ _____
 Office expense: \$ _____
 Rent on Business Property: \$ _____
 Equipment Rentals/Leases: \$ _____
 Fuel: \$ _____
 Storage: \$ _____
 Computer: \$ _____
 Computer Software: \$ _____
 Computer Repairs: \$ _____
 Repairs and maintenance: \$ _____
 Travel - Airfare: \$ _____
 - Lodging: \$ _____
 - Baggage: \$ _____

Meals and Entertainment: \$ _____
 Wages/salary paid to others: \$ _____
 Outside labor/helpers: \$ _____
 Tools/Small equipment: \$ _____
 Uniforms: \$ _____
 Safety Items: \$ _____
 Freight and shipping: \$ _____
 Pension: \$ _____
 Postage: \$ _____
 Laundry and Cleaning: \$ _____
 Parking and toll permits: \$ _____
 Utilities: Telephone-land line: \$ _____
 Cell phone: \$ _____
 Fax line: \$ _____
 Internet: \$ _____
 Cable: \$ _____
 Electric: \$ _____
 Gas: \$ _____
 Trash, Water, Sewer: \$ _____
 Home Owner Assoc. Dues: \$ _____
 Pest Control: \$ _____
 Maintenance Fees: \$ _____
 Other expenses: \$ _____
 Cost of Merchandise:
 Materials and supplies: \$ _____
 Other: _____ \$ _____
 Other: _____ \$ _____

Yearly business mileage: _____ (You must attach a detailed Mileage Log.)

Declaration:

I have provided the information on this form to the best of my knowledge and hereby declare it is complete and ready for the preparation of my / our income tax return. Where business deductions are shown, **I acknowledge having spent these amounts and have kept a log or diary** of such activities, (Initial here: _____) pursuant to section 274 (a) and can fully substantiate such deductions.

Clients - Taxpayer's Signature

Date

Spouse's Signature

Date