

Business Name _____	
Tax Year _____	
<u>SCH. C PROFIT OR LOSS FROM BUSINESS</u>	
<u>Description</u>	<u>Amount</u>
<u>Income</u>	
Gross Receipts	
Other Income	
<u>Total Income</u>	\$ -
<u>Expenses</u>	
Auto Expenses (Mileage)	
Commissions & Fees	
Contract Labor	
Employee Benefits	
Insurance (Business & Worker's Comp)	
Mortgage Interest	
Other Interest	
Legal & Professional Services	
Office Expenses	
Pension & Profit-Sharing Plans	
Rent/Lease (Equipment)	
Rent/Lease (Other Business Property)	
Repairs & Maintenance	
Supplies	
Licenses (Corp/LLC Renewal)	
Property Taxes	
Travel	
Meals	
Utilities	
Salaries & Wages	
Other Expenses	
<u>Total Expenses</u>	\$ -