## **SCHEDULE C** (Form 1040)

Department of the Treasury Internal Revenue Service (99)

**Profit or Loss From Business** 

(Sole Proprietorship)

Go to www.irs.gov/ScheduleC for instructions and the latest information.

Attach to Form 1040, 1040-SR, 1040-NR, or 1041; partnerships generally must file Form 1065.

Attachment Sequence No. **09** 

Name	Name of proprietor Social							ocial security r	al security number (SSN)			
A	Principal business or profession, including product or service (see instructions)  B En								nter code from instructions			
С	Business name. If no separate	Employer ID r	mployer ID number (EIN) (see instr.)									
E	Business address (including sui	te or room r	no.)									
	City, town or post office, state, a											
F	Accounting method: (1)		(2)	Accrual		(3) Other (speci	fv)					
G	Did you "materially participate" in t	·		<del></del>	202 If	· · · —				No		
Н	If you started or acquired this be	-		_					=			
									<del></del> -	No		
	Did you make any payments in 2020 that would require you to file Form(s) 1099? See instructions If "Yes," did you or will you file required Form(s) 1099?								Yes			
J		equired For	m(s) 1099	<u> </u>	• •				Yes	No		
Par					16.1							
1	Gross receipts or sales. See ins							$\neg \mid \square \mid$				
2	on Form W-2 and the "Statutory Returns and allowances						_					
3	Subtract line 2 from line 1											
4	Cost of goods sold (from line 42											
5	Gross profit. Subtract line 4 from	•										
6	Other income, including federal											
7	Gross income. Add lines 5 and	-				,						
Par												
8	Advertising	8			18	Office expense (see in	structions)	. 18				
9	Car and truck expenses (see				19	Pension and profit-s	haring pla	ns <b>19</b>				
	instructions)	9			20	Rent or lease (see in		<i>'</i>				
10	Commissions and fees	10			а	Vehicles, machinery, and						
11	Contract labor (see instructions)	11			b	Other business prop	-					
12 13	Depletion	12			21	Repairs and mainter						
13	expense deduction (not				22	Supplies (not include						
	included in Part III) (see	13			23 24	Taxes and licenses Travel and meals:		. 23				
14	instructions)	13			24 a	Travel		. 24a				
	(other than on line 19)	14			b	Deductible meals (se		. 2-10				
15	Insurance (other than health) .	15			_	instructions)		. 24b				
16	Interest (see instructions):				25	Utilities		25				
а	Mortgage (paid to banks, etc.)	16a			26	Wages (less employmen	t credits) .	. 26				
b	Other	16b			27a	Other expenses (fro	m line 48)	. 27a				
17	Legal and professional services .	17			b	Reserved for future	use	. 27b				
28	Total expenses before expens					•						
29	Tentative profit or (loss). Subtra							. 29				
30	Expenses for business use of your land using the comments of the same of the s			rt these exper	ises e	elsewhere. Attach Fori	n 8829					
	unless using the simplified meth Simplified method filers only			e footage of (	a) voi	ur home:						
	and (b) the part of your home us					. Use the	Simplified	<del>-</del>				
	Method Worksheet in the instru											
31	Net profit or (loss). Subtract I	_										
	• If a profit, enter on both Schedule 1 (Form 1040), line 3, and on Schedule SE, line 2. (If you											
	checked the box on line 1, see instructions). Estates and trusts, enter on Form 1041, line 3.							31				
	• If a loss, you <b>must</b> go to line						Į	ı				
32	If you have a loss, check the bo		-			-			٦			
	<ul> <li>If you checked 32a, enter the loss on both Schedule 1 (Form 1040), line 3, and on Schedule SE, line 2. (If you checked the box on line 1, see the line 31 instructions). Estates and trusts, enter on Form 1041, line 3.</li> <li>If you checked 32b, you must attach Form 6198. Your loss may be limited.</li> </ul>							32a	All investment	is at risk.		
								32b	32b Some investment is			
									not at risk.			

34	Was there any change in determining quantities, costs, or valuations between opening and closing inventory?  If "Yes," attach explanation									
35	Inventory at beginning of year. If different from last year's closing inventory, attach explanation	35								
36	Purchases less cost of items withdrawn for personal use	36								
37	Cost of labor. Do not include any amounts paid to yourself	37								
38	Materials and supplies	38								
39	Other costs	39								
40	Add lines 35 through 39	40								
41	Inventory at end of year	41								
42	Cost of goods sold. Subtract line 41 from line 40. Enter the result here and on line 4	42								
Part			ruck exp	enses	on					
	line 9 and are not required to file Form 4562 for this business. See the instruc									
	out if you must file Form 4562.									
43	When did you place your vehicle in service for business purposes? (month/day/year)									
44	Of the total number of miles you drove your vehicle during 2020, enter the number of miles you used you	our ve	hicle for:							
а	Business b Commuting (see instructions) c	Othe	er							
45	Was your vehicle available for personal use during off-duty hours?			Yes	No No					
46	Do you (or your spouse) have another vehicle available for personal use?			Yes	No					
47a	Do you have evidence to support your deduction?		. 🔲	Yes	No					
b	If "Yes," is the evidence written?		. $\square$	Yes	No					
Part										
	Carlot Englished Englished Carlot Car									
48	Total other expenses. Enter here and on line 27a	48								