Schedule C - Profit or Loss from Business

Name: Client Name	SSN: ***_***
General Business Information	
TS Professional product or service	Employer ID number
Business name	
Business address, city, state, ZIP	
Accounting Method: Cash Cash Other (specify)	
This business started or was acquired during 2024.	This business was disposed of during 2024.
Select if this business is for: Professional gambler Exempt Notary income	☐ Newspaper delivery and you are under 18 years of age☐ A clergy
Yes No Payments of \$600 or more were paid to an individual, who is not your employee, for services provided for this business. If "Yes," did you file Forms 1099 for the individuals?	
 Did you receive a Paycheck Protection Program (PPP) loan for this business prior to June 1, 2021? If 'Yes," was any portion of the loan forgiven in 2024? 	
Income	
2024 Gross receipts or sales	
Returns & allowances	
Expenses	
2024	2024
Advertising	Repairs & maintenance
Car & truck expenses	Supplies
Commissions & fees	Taxes & licenses
Contract labor	Travel
Depletion	Total meals
Employee benefit programs	Utilities
Insurance (other than health)	Wages
Interest - mortgage	Family health coverage payments for taxpayer, spouse or dependents
Interest - other	Other every man (list)
Legal & professional services	
Office expenses	
Pension & profit-sharing plans	
Rent (other business property)	
Cost of Goods Sold	
2024	
Inventory at beginning of year	
Purchases	
Cost of personal use items	
Cost of labor	There was a change in inventory method.