

SCHEDULE C (Form 1040)

Department of the Treasury

Internal Revenue Service (99)

Profit or Loss From Business

(Sole Proprietorship)

▶ Partnerships, joint ventures, etc., generally must file Form 1065 or 1065-B.
 ▶ Attach to Form 1040, 1040NR, or 1041.
 ▶ See Instructions for Schedule C (Form 1040).

OMB No. 1545-0074

2010
Attachment
Sequence No. 09

Social security number (SSN) Name of proprietor B Enter code from pages C-9, 10, & 11 Principal business or profession, including product or service (see instructions) D Employer ID number (EIN), if any Business name. If no separate business name, leave blank. C Ē Business address (including suite or room no.) City, town or post office, state, and ZIP code (2) Accrual (3) ☐ Other (specify) ► Accounting method: (1) Cash Did you "materially participate" in the operation of this business during 2010? If "No," see instructions for limit on losses G Н Part I Income Gross receipts or sales. Caution. See instructions and check the box if: • This income was reported to you on Form W-2 and the "Statutory employee" box on that form was checked, or · You are a member of a qualified joint venture reporting only rental real estate 1 income not subject to self-employment tax. Also see instructions for limit on losses. 2 3 3 4 Cost of goods sold (from line 42 on page 2) 4 5 5 6 Other income, including federal and state gasoline or fuel tax credit or refund (see instructions) . . . 6 7 7 Part II Expenses. Enter expenses for business use of your home only on line 30. 18 Office expense 8 8 Advertising . 19 Pension and profit-sharing plans . 19 9 Car and truck expenses (see Rent or lease (see instructions): 20 instructions). 20a а Vehicles, machinery, and equipment 10 Commissions and fees . 10 Other business property . . . 20b b 11 11 Contract labor (see instructions) Repairs and maintenance 21 12 21 12 Depletion Supplies (not included in Part III) . 22 22 Depreciation and section 179 13 23 23 Taxes and licenses expense deduction (not Travel, meals, and entertainment: 24 included in Part III) (see 24a 13 instructions). Deductible meals and Employee benefit programs 14 entertainment (see instructions) . (other than on line 19). 14 25 25 Insurance (other than health) 15 15 26 Wages (less employment credits). 26 16 27 Other expenses (from line 48 on Mortgage (paid to banks, etc.) 16a 27 page 2) 16b **b** Other Legal and professional 17 17 services. 28 Total expenses before expenses for business use of home. Add lines 8 through 27 . 28 Tentative profit or (loss). Subtract line 28 from line 7 29 29 30 30 Expenses for business use of your home. Attach Form 8829 Net profit or (loss). Subtract line 30 from line 29. 31 If a profit, enter on both Form 1040, line 12, and Schedule SE, line 2, or on Form 1040NR, line 13 31 (if you checked the box on line 1, see instructions). Estates and trusts, enter on Form 1041, line 3. · If a loss, you must go to line 32. If you have a loss, check the box that describes your investment in this activity (see instructions). If you checked 32a, enter the loss on both Form 1040, line 12, and Schedule SE, line 2, or on 32a All investment is at risk. Form 1040NR, line 13 (if you checked the box on line 1, see the line 31 instructions). Estates and 32b Some investment is not trusts, enter on Form 1041, line 3. at risk.

If you checked 32b, you must attach Form 6198. Your loss may be limited.

art	e C (Form 1040) 2010 Cost of Goods Sold (see instructions)			
	The Cost of Good Cost (Coo Maddelone)			
33	Method(s) used to value closing inventory: a] Otha	r (attach explana	ation)
34	value closing inventory: a Cost b Lower of cost or market c Lower of c Lowe	•	(attacii explana	ations
.,	If "Yes," attach explanation		☐ Yes	☐ No
35	Inventory at beginning of year. If different from last year's closing inventory, attach explanation	35		
6	Purchases less cost of items withdrawn for personal use	36		
7	Cost of labor. Do not include any amounts paid to yourself	37		
8	Materials and supplies	38		
39	Other costs	39		
10	Add lines 35 through 39	40		
!1	Inventory at end of year	41		
12	Cost of goods sold. Subtract line 41 from line 40. Enter the result here and on page 1, line 4	42		
art	Information on Your Vehicle. Complete this part only if you are claiming car or and are not required to file Form 4562 for this business. See the instructions for file Form 4562.	line 1	t expenses of to find out i	f you mi
13	When did you place your vehicle in service for business purposes? (month, day, year)	/		
13 14	When did you place your vehicle in service for business purposes? (month, day, year) / Of the total number of miles you drove your vehicle during 2010, enter the number of miles you used your			
	Of the total number of miles you drove your vehicle during 2010, enter the number of miles you used your	vehicle		
14	Of the total number of miles you drove your vehicle during 2010, enter the number of miles you used your	vehicle Other	for:	N
14 a 15	Of the total number of miles you drove your vehicle during 2010, enter the number of miles you used your Business b Commuting (see instructions) c	vehicle Other	for: Yes	
14 a 15	Of the total number of miles you drove your vehicle during 2010, enter the number of miles you used your Business b Commuting (see instructions) c G Was your vehicle available for personal use during off-duty hours?	vehicle Other	for:	_ N
14 a 15 16 17a b	Of the total number of miles you drove your vehicle during 2010, enter the number of miles you used your Business b Commuting (see instructions) c Good Was your vehicle available for personal use during off-duty hours?	vehicle Other	for: Yes Yes Yes Yes	N
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144 a 145 446 47a b	Of the total number of miles you drove your vehicle during 2010, enter the number of miles you used your Business b Commuting (see instructions) c Good Was your vehicle available for personal use during off-duty hours?	vehicle Other	for: Yes Yes Yes Yes	□ N
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Total other expenses. Enter here and on page 1, line 27 .

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