SCHEDULE C (Form 1040)

Profit or Loss From Business (Sole Proprietorship)

OMB No. 1545-0074 Attachment Sequence No. 09

Department of the Treasury Internal Revenue Service

Attach to Form 1040, 1040-SR, 1040-SS, 1040-NR, or 1041; partnerships must generally file Form 1065. Go to www.irs.gov/ScheduleC for instructions and the latest information.

Name of proprietor				Social security number (SSN)
A	Principal business or profession, including product or service (see instructions)			B Enter code from instructions
С	Business name. If no separate business name, leave blank.			D Employer ID number (EIN) (see instr.)
E	Business address (including suite or room no.)			
	City, town or post office, state, and ZIP code			
F	Accounting method: (1) Cash (2) Accrual (3) Other (specify)			
G	Did you "materially participate" in the operation of this business during 2023? If "No," see instructions for limit on losses . \square Yes \square No			
Н	If you started or acquired this business during 2023, check here			
I			file Form(s) 1099? See instructions	
J		e required Form(s) 1099?		Yes No
Par				
1	Gross receipts or sales. See instructions for line 1 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			1
2				. 2
3		40)		. 3
4	Cost of goods sold (from line 42)			. 4
5			redit or refund (see instructions)	. 5
6 7			realt or returna (see instructions)	. 7
Pari		penses for business use of y		· <i>1</i>
8	Advertising	8	18 Office expense (see instructions)	. 18
9	Car and truck expenses		19 Pension and profit-sharing plans	
3	(see instructions)	9	20 Rent or lease (see instructions):	
10	Commissions and fees .	10	a Vehicles, machinery, and equipment	t 20a
11	Contract labor (see instructions)	11	b Other business property	
12	Depletion	12	21 Repairs and maintenance	
13	Depreciation and section 179		22 Supplies (not included in Part III)	. 22
	expense deduction (not included in Part III) (see		23 Taxes and licenses	. 23
	instructions)	13	24 Travel and meals:	
14	Employee benefit programs		a Travel	. 24a
	(other than on line 19) .	14	b Deductible meals (see instructions)) 24b
15	Insurance (other than health)	15	25 Utilities	
16	Interest (see instructions):		26 Wages (less employment credits)	26
а	Mortgage (paid to banks, etc.)	16a	27a Other expenses (from line 48) .	
b	Other	16b	b Energy efficient commercial bldgs	
17	Legal and professional services	17	deduction (attach Form 7205) .	
28 29	Total expenses before expenses for business use of home. Add lines 8 through 27b			
30	Expenses for business use of your home. Do not report these expenses elsewhere. Attach Form 8829 unless using the simplified method. See instructions. Simplified method filers only: Enter the total square footage of (a) your home:			
	and (b) the part of your home used for business: Use the Simplified			
	Method Worksheet in the instructions to figure the amount to enter on line 30			. 30
31	Net profit or (loss). Subtract line 30 from line 29.			
	• 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
20	 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. 			
32			1	
	 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. If you checked 32b, you must attach Form 6198. Your loss may be limited. 			32a ☐ All investment is at risk. 32b ☐ Some investment is not at risk.

Schedule C (Form 1040) 2023 Page 2 Part III Cost of Goods Sold (see instructions) 33 Method(s) used to a Cost **b** Lower of cost or market **c** Other (attach explanation) value closing inventory: Was there any change in determining quantities, costs, or valuations between opening and closing inventory? 34 Yes No If "Yes," attach explanation . . 35 35 Inventory at beginning of year. If different from last year's closing inventory, attach explanation . . . 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 39 Add lines 35 through 39 40 41 41 42 Cost of goods sold. Subtract line 41 from line 40. Enter the result here and on line 4. Part IV Information on Your Vehicle. Complete this part only if you are claiming car or truck expenses on line 9 and are not required to file Form 4562 for this business. See the instructions for line 13 to find out if you must file Form 4562. 43 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 2023, enter the number of miles you used your vehicle for: 44 Business _____ **b** Commuting (see instructions) 45 Was your vehicle available for personal use during off-duty hours? . Do you (or your spouse) have another vehicle available for personal use?. . . . No 46 Do you have evidence to support your deduction? If "Yes," is the evidence written? Other Expenses. List below business expenses not included on lines 8-26, line 27b, or line 30. Part V

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Total other expenses. Enter here and on line 27a .

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