SCHEDULE C (Form 1040)

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Department of the Treasury

Profit or Loss From Business

(Sole Proprietorship)

▶ Go to www.irs.gov/ScheduleC for instructions and the latest information. Internal Revenue Service (99) ► Attach to Form 1040, 1040-SR, 1040-NR, or 1041; partnerships must generally file Form 1065.

OMB No. 1545-0074 2021 Attachment Sequence No. 09

Name of proprietor Social security number (SSN) Α Principal business or profession, including product or service (see instructions) С Business name. If no separate business name, leave blank. D Employer ID number (EIN) (see instr.) Ε 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 2021? If "No," see instructions for limit on losses н Did you make any payments in 2021 that would require you to file Form(s) 1099? See instructions . Yes No If "Yes," did you or will you file required Form(s) 1099? Yes No Part I Income Gross receipts or sales. See instructions for line 1 and check the box if this income was reported to you on 2 Subtract line 2 from line 1 . Cost of goods sold (from line 42) . . . 4 5 Other income, including federal and state gasoline or fuel tax credit or refund (see instructions) . Gross income, Add lines 5 and 6 Part II Expenses. Enter expenses for business use of your home only on line 30. Advertising Office expense (see instructions). 19 Car and truck expenses (see Pension and profit-sharing plans . instructions) 20 Rent or lease (see instructions): 9 10 Commissions and fees . 10 Vehicles, machinery, and equipment 11 Contract labor (see instructions) 11 **b** Other business property . . . 20b Depletion . 21 12 Repairs and maintenance . . . Depreciation and section 179 Supplies (not included in Part III) . deduction (not Taxes and licenses 23 23 included in Part III) (see 13 24 Travel and meals: instructions) Employee benefit programs Travel 24a Deductible meals (see (other than on line 19) 14 b Insurance (other than health) instructions) 16 Interest (see instructions): 25 Utilities 26 a Mortgage (paid to banks, etc.) 16a Wages (less employment credits) 26 Other 27a Other expenses (from line 48) . . 17 Legal and professional services 17 b Reserved for future use . Total expenses before expenses for business use of home. Add lines 8 through 27a 28

• If you checked 32b, you must attach Form 6198. Your loss may be limited. For Paperwork Reduction Act Notice, see the separate instructions.

unless using the simplified method. See instructions.

and (b) the part of your home used for business:

Net profit or (loss). Subtract line 30 from line 29.

• If a loss, you must go to line 32.

Form 1041, line 3.

Simplified method filers only: Enter the total square footage of (a) your home:

Cat. No. 11334P

. Use the Simplified

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32a All investment is at risk.

32b Some investment is not

at risk.



Expenses for business use of your home. Do not report these expenses elsewhere. Attach Form 8829

Method Worksheet in the instructions to figure the amount to enter on line 30

• 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.

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 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

Schedule C (Form 1040) 2021 Page 2 Part III Cost of Goods Sold (see instructions) 33 value closing inventory: a Cost **b** Lower of cost or market c Other (attach explanation) 34 Was there any change in determining quantities, costs, or valuations between opening and closing inventory? ☐ No 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 37 Cost of labor. Do not include any amounts paid to yourself 37 38 38 39 39 40 Add lines 35 through 39 40 Inventory at end of year Cost of goods sold. Subtract line 41 from line 40. Enter the result here and on line 4 . 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. 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 2021, enter the number of miles you used your vehicle for: Business b Commuting (see instructions) c Other ☐ No ☐ No No **b** If "Yes," is the evidence written? Part V Other Expenses. List below business expenses not included on lines 8–26 or line 30.

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

