

Client Name: _____

2016 Business Income (Schedule C)

BUSINESS INFORMATION			
Principle business or profession			
Principle business code			
Employer ID number			
Business name, if different from Form 1040			
Business address, if different from Form 1040:			
City			
State			
Zip			
GENERAL INFORMATION			
Single Member LLC	Yes	No	Printing
First Schedule C filed for this business	Yes	No	Rent or lease:
			Vehicles, machinery, equipment
			Other
INCOME			
Gross receipts or sales			Repairs
Returns and allowances			Security
Other income:			Federal start-up costs (\$5,000 maximum)
Other income:			State start-up costs
Other income:			Supplies
EXPENSES			
Accounting			Taxes and Licenses:
Advertising			Real estate taxes
Answering service			Payroll taxes
Bad debts from sales or service			Sales tax included in gross receipts
Bank charges			Licenses/permits
Car and truck expenses			Others (A)
Commissions			Telephone
Contract labor			Tools
Delivery and freight			Travel, Meals, and Entertainment:
Dues and subscriptions			Travel
Employee benefit programs			Meals and entertainment in full (50%)
Insurance (other than health)			DOT meals in full (80%)
Interest:			Uniforms
Mortgage - Banks, etc. (1098)			Utilities
Other			Wages:
Janitorial			Total wages
Laundry and cleaning			Employment credits
Legal and professional			Other expenses:
Miscellaneous			Description-
Office expenses			Description-
Outside services			Description-
Parking and tolls			Description-
Pension & Profit Sharing Plans:			Description-
Contributions			
Administration and Education Costs			
Pension credit			
Postage			