C 4-1

| TSJ 1 F 2 ST 3 | City | 4 | PAN 5 6 | Suppress Schedule C-EZ | |
|---|---------------|--|----------------------|---|------------------------------------|
| A Business or Professional/Product or Service 7 B Bus. Code 8 | | | | | |
| C Business name | | | | D Er | mployer ID# 10 |
| E Street address 11 | | | | | |
| City 12 | | | | | |
| U.S. Only State, ZIP 13 14 | | | | | |
| Foreign Only Province/State, Country, Postal Code 15 16 17 | | | | | |
| F Accounting method if not cash: 18 Accrual 19 Ot | | | 20 | • | |
| G 21 Did NOT materially par | I Taxpayer ma | yer made payments in 2016 that would require taxpayer $\begin{vmatrix} 23 \end{vmatrix}$ Yes $\begin{vmatrix} 24 \end{vmatrix}$ No Forms 1099? | | | |
| H 22 Taxpayer started or acquired this business during 2016 | | J If "Yes," did or will taxpayer file all required Forms | | | ²⁵ Yes ²⁶ No |
| Part I - Income | 2015 | 2016 | | 20 | 015 2016 |
| 1 Gross receipts/Sales | | 27 | 6 Other income | | 29 |
| 2 Returns and allowances | | 28 | | _ | <u>'</u> |
| Part II - Expenses | | | | | |
| 8 Advertising | | 30 | 19 Pensions/profit | share | 43 |
| 9 Car and truck expenses | | 31 | 20 Rent - vehicle, | machinery | 44 |
| 10 Commissions and fees | | 32 | Rent - other | | 45 |
| 11 Contract labor | | 33 | 21 Repairs/mainte | enance | 46 |
| 12 Depletion | | 34 | 22 Supplies | | 47 |
| 13 Depreciation | | 35 | 23 Taxes and lice | nses | 48 |
| Depreciation adjustment (AMT) | | 36 | 24 Travel | | 49 |
| 14 Employee benefits | | 37 | Meals and ente | ertainment | 50 |
| 15 Insurance | | 38 | 25 Utilities | | 51 |
| 16 Interest - mortgage | | 39 | 26 Wages | | 52 |
| Interest - other | | 40 | 27a Other expense | 7a Other expenses 53 | |
| 17 Legal & professional services | | 41 | 32b 54 Som | Some investment is NOT at risk | |
| 18 Office expense | | 42 | | | |
| Part III - Cost of Goods Sold | | | | Regul | Alternative ar Tax Minimum Tax |
| 33 Inventory valuation method (if not cost) | | | Prior unallowed pas | 66 | 71 |
| 55 Lower of cost or market | 56 Other | | Prior unallowed pas | sive 4797 Pt 1 | 72 |
| 34 Change in method: | 57 Yes | | Prior unallowed pas | sive 4797 Pt 2 | 73 |
| 35 Beginning inventory | | 58 | Prior unallowed at-r | isk losses 69 | 74 |
| 36 Purchases less personal | | 59 | 76 Taxpayer dis | posed of business during 2 | 2016 |
| 37 Cost of labor | | 60 | 77 Carry to 896 | Carry to 8960 line 7 | |
| 38 Materials and supplies | | 61 | 79 Exempt nota | Exempt notary income | |
| 39 Other costs | | 62 | 80 Meals subject | Meals subject to DOT hours of service rules | |
| 41 Ending inventory | | 63 | Paper boy ex | Paper boy excluded from SE | |
| Family health coverage | | 64 | | | |
| Income to be excluded Per | | 65 | 1 | | |