SCHEDULE C (Form 1040)

Profit or Loss From Business

(Sole Proprietorship)

▶ Partnerships, joint ventures, etc., must file Form 1065 or 1065-B.

► Attach to Form 1040 or 1041. ► See Instructions for Schedule C (Form 1040).

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

Department of the Treasury Internal Revenue Service (99)

Name of proprietor							Social security number (SSN)						
A	Principal business or profession, including product or service (see page C-2 of the instructions)						r code f	rom pag	jes C-8	, 9, & 10 			
С	Business name. If no separate business name, leave blank.							numbe	r (EIN),	if any			
E	Business address (including sui City, town or post office, state,												
F		Cash	(2) Accrua	al (3)	Other (specify)								
G	Did you "materially participate"	in the opera	tion of this busi	iness duri	ng 2005? If "No," see page C-3 fo	r limit on	losses		Yes	☐ No			
Н	If you started or acquired this b	usiness duri	ng 2005, check	here .	<u> </u>			<u> </u>	. •	· 🗌			
Pai	rt I Income												
1	Gross receipts or sales. Caution employee" box on that form wa] 1							
2						. 2							
3						9							
4	Cost of goods sold (from line 42	2 on page 2)				. 4							
5					or refund (see page C-3)								
6	Other income, including rederal	and state g	asoline or ruer i	tax Credit	or return (see page C-3)	. –				_			
7	Gross income. Add lines 5 and	16				7							
Pai	rt II Expenses. Enter ex				r home only on line 30.								
8	Advertising	8		1	8 Office expense	18							
9	Car and truck expenses (see				19 Pension and profit-sharing plans	19							
	page C-3)	9		1 1	Rent or lease (see page C-5):								
10	Commissions and fees	10			a Vehicles, machinery, and equipment	. 20a							
11	Contract labor (see page C-4)	11			b Other business property	. 20b	<u> </u>						
12	Depletion	12		2	21 Repairs and maintenance .	. 21							
13	Depreciation and section 179			2	22 Supplies (not included in Part III)		<u> </u>						
	expense deduction (not			2	23 Taxes and licenses	. 23				+			
	included in Part III) (see			2	24 Travel, meals, and entertainment		4						
	page C-4)	13			a Travel	. 24a							
14	Employee benefit programs	44			b Deductible meals and	041-							
	(other than on line 19)	14		+	entertainment (see page C-5)	24b 25							
15	Insurance (other than health) .	13			25 Utilities								
16	Interest: Mortgage (paid to banks, etc.)	16a		1 1	Wages (less employment credits)								
a h	Other	16b			Other expenses (from line 48 o page 2)	27							
17	Legal and professional				page 2)								
	services	17											
28	Total expenses before expense	s for busine	ess use of home	e. Add line	es 8 through 27 in columns	28							
00	Tentative qualit (least) Code (see 1)	lina 00 f	line 7			29							
29	Tentative profit (loss). Subtract I Expenses for business use of year					30							
30 31	Net profit or (loss). Subtract lir			29		. 33							
31	. ,			nedule SE	line 2 (statutory employees								
	• If a profit, enter on Form 1040, line 12, and also on Schedule SE, line 2 (statutory employees, see page C-6). Estates and trusts, enter on Form 1041, line 3.												
	• If a loss, you must go to line		- · · , ····		J	31							
32	If you have a loss, check the bo • If you checked 32a, enter th (statutory employees, see page	ss, check the box that describes your investment in this activity (see page C-6). 2d 32a, enter the loss on Form 1040, line 12, and also on Schedule SE, line 2 2syees, see page C-6). Estates and trusts, enter on Form 1041, line 3. 2d 32b, you must attach Form 6198. Your loss may be limited.											

Page 2 Schedule C (Form 1040) 2005

Pai	t III Cost of Goods Sold (see page C-6)									
33	Method(s) used to value closing inventory: a \square Cost b \square Lower of cost or market c	□ o	ther (atta	ıch expla	nation)					
34	Was there any change in determining quantities, costs, or valuations between opening and closing in "Yes," attach explanation		_	Yes		No				
35	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	36								
37	Cost of labor. Do not include any amounts paid to yourself	37								
38	Materials and supplies	38								
39	Other costs	39								
40	Add lines 35 through 39	40								
41	Inventory at end of year	41								
Pa	Cost of goods sold. Subtract line 41 from line 40. Enter the result here and on page 1, line 4 Information on Your Vehicle. Complete this part only if you are claiming line 9 and are not required to file Form 4562 for this business. See the instant C-4 to find out if you must file Form 4562.									
43	When did you place your vehicle in service for business purposes? (month, day, year) ▶/	/	.							
44	Of the total number of miles you drove your vehicle during 2005, enter the number of miles you used your vehicle for:									
а	Business b Commuting (see instructions) c Oth	er								
45	Do you (or your spouse) have another vehicle available for personal use?		🗆	Yes		No				
46	Was your vehicle available for personal use during off-duty hours?		🗆	Yes		No				
47a	Do you have evidence to support your deduction?		🗆	Yes		No				
	If "Yes," is the evidence written?	or lir	—	Yes		No				
48	Total other expenses. Enter here and on page 1, line 27	48								