Form	ID:	C-1

Schedule C - General Information

_	_
າ	7
_	4

Preparer use only		
	Information	Prior Year Information
Taxpayer/Spouse/Joint (T, S, J)	_[2]	
Employer identification number	[3]	
Business name Principal business/profession		
Business code	[10]	
Business address, if different from home address on Organizer Forr		
Address	[13]	
•	[14][15][16]	
Accounting method (1 = Cash, 2 = Accrual, 3 = Other) If other:	[17] [19]	
Inventory method (1 = Cost, 2 = LCM, 3 = Other)	[20]	
If other enter explanation:	<u> </u>	
	[22]	
		
Enter an explanation if there was a change in determining your inver		
	[23]	
Did you "materially participate" in this business? (1 = Yes, 2 = No)		
If not, number of hours you did significantly participate	[26]	
Mark if you began or acquired this business	_[28]	
Mark if this business is considered related to qualified services as a Did you receive wages as a statutory employee or as a minister? (1:		
Medical insurance premiums paid by this activity	= Statutory employee, 2 = Minister)[31]	-
Long-term care premiums paid by this activity	+[35]	
Amount of wages received as a statutory employee	+[38]	
D.,	siness Income	
Du	Information	Prior Year Information
Gross receipts or sales	Information +[43]	Prior Year Information
Gross receipts or sales Returns and allowances	Information	
Gross receipts or sales	Information +[43] +[45]	
Gross receipts or sales Returns and allowances	Information +[43]	
Gross receipts or sales Returns and allowances	Information +[43] +[45]	
Gross receipts or sales Returns and allowances	Information +[43] +[45]	
Gross receipts or sales Returns and allowances	Information	
Gross receipts or sales Returns and allowances	Information	
Gross receipts or sales Returns and allowances Other income:	Information	
Gross receipts or sales Returns and allowances Other income:	Information	
Gross receipts or sales Returns and allowances Other income:	Information	
Gross receipts or sales Returns and allowances Other income:	Information	
Gross receipts or sales Returns and allowances Other income: Cos Beginning inventory	Information +[43] +[45] +[47] + + t of Goods Sold Information +[49]	
Gross receipts or sales Returns and allowances Other income: Cos Beginning inventory Purchases	Information +[43] +[45] +[47] + + t of Goods Sold Information +[49] +[51] +[53]	
Gross receipts or sales Returns and allowances Other income: Cos Beginning inventory Purchases Labor:	Information +[43] +[45] +[47] + t of Goods Sold Information +[49] +[51] +[53] +[53]	
Gross receipts or sales Returns and allowances Other income: Cos Beginning inventory Purchases	Information +[43] +[45] +[47] + + t of Goods Sold Information +[49] +[51] +[53]	
Gross receipts or sales Returns and allowances Other income: Cos Beginning inventory Purchases Labor: Materials	Information +[43] +[45] +[47] + t of Goods Sold Information +[49] +[51] +[53] +[53]	
Gross receipts or sales Returns and allowances Other income: Cos Beginning inventory Purchases Labor: Materials	Information +[43] +[45] +[47] + + t of Goods Sold Information +[49] +[51] +[53] +[55]	
Gross receipts or sales Returns and allowances Other income: Cos Beginning inventory Purchases Labor: Materials	Information +[43] +[45] +[47] + + t of Goods Sold Information +[49] +[51] +[55] +[55] +[57] +[57]	
Gross receipts or sales Returns and allowances Other income: Cos Beginning inventory Purchases Labor: Materials	Information +[43] +[45] +[47] + t of Goods Sold Information +[51] +[53] +[55] +[57] +	
Gross receipts or sales Returns and allowances Other income: Cos Beginning inventory Purchases Labor: Materials	Information +	
Gross receipts or sales Returns and allowances Other income: Cos Beginning inventory Purchases Labor: Materials Other costs:	Information +[43] +[45] +[47] + t of Goods Sold Information +[51] +[53] +[55] +[57] +	

Form	ID:	C-2

Schedule C - Expenses

22
7.3

Preparer use	only			
Principal business or profe	ssion			
			Information	Prior Year Information
Advertising		+	[6]	
Car and truck expenses		+	[8]	
Commissions and fees		+	[10]	
Contract labor		+	[12]	
Depletion		+	[14]	
Depreciation		+	[16]	
Employee benefit programs	s:			
		+	[18]	
		+		
Insurance (Other than heal	lth):			
		+	[20]	
		+		
Interest:				
Mortgage (Paid to banks	, etc.)	+	[22]	
Other:				
		+	[24]	
		+		
Legal and professional ser	vices	+	[26]	
Office expense		+	[28]	
Pension and profit sharing:				
		+	[30]	
		+		
Rent or lease:				
Vehicles, machinery, a	nd equipment	+	[32]	
Other business proper	ty	+	[34]	
Repairs and maintenance		+	[36]	
Supplies		+	[38]	
Taxes and licenses:				
		+	[40]	
		+		
		+		
William Control of the Control of th		+		
		+		
Travel, meals, and entertai	nment:			
Travel		+	[42]	
Meals and entertainme	ent	+	[44]	
Meals (Enter 100% sul	bject to DOT 80% limit)	+	[46]	
Utilities		+	[50]	
Wages (Less employment	credit):			
			[52]	
		+		
Other expenses:				
		+	[54]	
		+		
		+		
		+	-	
		+		
	Preparer use only	1		
	Carryovers	Regular	AMT	
	Operating	+ [64]		65]
	Schedule D - Short-term	+ [66]		67]
	Schedule D - Long-term	+ [68]		69]
	Schedule D - 28% rate	+ [70]		71]
	Form 4797 - Part I	+ [72]	+ [73]

[75]

Form 4797 - Part II

Form ID: Auto			Auto Work	sheet		57
	lf ·	you used your automobile	for business purposes,	please complete the followi	ng information.	
		Preparer use only				
Description of	of business or p	•				[3]
			Vehicles '	l - 2		
Vehicle 1 -	Date placed	in service				[5]
	Description					[6]
	Comments .					
Vehicle 2 -	Date placed	in service				[40]
	Description					[41]
	Comments					
			Vehicle 1	Prior Year Information	Vehicle 2	Prior Year Information
Total miles for	or the year		[1	0]	[45]	
Commuting			[1		[47]	
Business mil			[1	4]	[49]	
Vehicle use	•	vailable for personal use? (1	- Vos 2 - No) [1	61	[54]	
		ble for off-duty personal use	· · · · · · · · · · · · · · · · · · ·		[51] [53]	-
		to support your deduction? (000000000000000000000000000000000000000	[55]	
		? (1 = Yes, 2 = No)	_[2		[57]	-
Parking, fees	s and tolls		+[2	000000000000000000000000000000000000000	[59]	
Gasoline, oil	, repairs, insura	ance, etc.	+[2	6] + .	[61]	
Interest			+[2	8] + _	[63]	
Registration			+[3	***************************************	[65]	
Property taxe Vehicle renta			+[3		[67]	
	ais iount (Prepare i	r use only)	+[3	'1 .	[69] [71]	
Depreciation		a uso omy	+ [3		[73]	
			*			
			Vehicles 3	3 - 4		
Vehicle 3 -	Date placed	in service				[75]
verilicie 5 -	Description	iii seivice				[76]
	Comments					
Vehicle 4 -	Date placed	in service				[110
	Description					[111
	Comments				-	
			Vehicle 3	Prior Year Information	Vehicle 4	Prior Year Information
Total miles fo	or the year		[8	0]	[115	
Commuting r	miles		[8	2]	[117]	
Business mil			[8-	4]	[119]	
Vehicle use	•					
		vailable for personal use? (1			[121]	
		ble for off-duty personal use? to support your deduction? (*			[123]	
		? (1 = Yes, 2 = No)	[9:	000000000000000000000000000000000000000	[125] [127]	50.000.000.000.000.000.000.000.000.000.
Parking, fees		. (+[9-		[129]	*******************************
Gasoline, oil,	, repairs, insura	ance, etc.	+[9	6] +	[131]	
Interest			+[9	8]	[133]	
Registration			+[1]		[135]	
Property taxe			+[1]	***************************************	[137]	Milesson and a contract of the
Vehicle renta	als ount (Preparer	ruse only)	+[1		[139]	
Depreciation	oun (Fiepaiei	use omy/	+ [10		[141] [143]	
Soproduction			•	•		•
			Control To	otals +	1	Form ID: Auto

Form ID: 8829 Home (Office General Info	ormation	59
Preparer use only Principal business or profession Taxpayer/Spouse/Joint (T, S, J) State postal code			[3] [4] [5]
В	usiness Use of Ho	me	
		Information	Prior Year Information
Total area of home		[10]	
Area used exclusively for business		[12]	
Information for day-care facilities only:			
Total hours used for day-care during this year		[14]	<u></u>
Total hours used this year, if less than 8,784		[16]	
Special computation for certain day-care facilities: Area used regularly and exclusively for day-care business	、	[4.0]	
Area used partly for day-care business	•	[18]	
, wou dood partly for day out o buomicoo			
List as direct expenses any expenses			
List as indirect expenses any expenses which	are attributable to the ove	rail upkeep and running of yo	ur nome.
	Info	rmation	Prior Year Information
	Direct Expenses	Indirect Expenses	
		+[23]	
		+[26]	
	[28]		
	[31] [34]		
-		+[35] +[38]	
		+[41]	
		+[44]	
		+[47]	
Other expenses, such as: Supplies & Security system			
+	[49]	+[50]	
+_		+	
<u> </u>		+	
		+	
+		+	
+		+	
+		+	
+_		+	
+		+	
Excess casualty losses Carryovers:		+[52]	
Operating expenses		+[53]	
Casualty losses		+[54]	
Depreciation		+[56]	
Business expenses not from business use of home, such as:			
Travel, Supplies, Business telephone expenses		+[57]	
Depreciation		+[61]	
NOTES/QUESTIONS:			

Control Totals +

Form ID: 8829

Form	ID.	\cap ra	D۵
Form	IU.	Oig	υμ

Depreciation - Asset Acquisitions

Activity name

Preparer use only

Use the comments section to provide additional information about the asset. Enter information such as vehicle mileage (total, commuting and business), the total and business square footage of home, home expenses (total and business portion). See the EXAMPLE asset below.

Description of Asset Acquired Co							Cost or				
EXAMPLE		E	2008	Model T	- (EXAMPI	E ASSET)		03/09		25,	750
L/\/	VIVII L	Comments:		22,500	job-relat	ed miles,	25,000	total	miles		
1											
		Comments:					_				
2											
		Comments:									
3											
		Comments:									
4											_
		Comments:									
5											
		Comments:					T				
6		Comments:					I		<u> </u>		
		Comments.					I				
7		Comments:									
		Comments.									
8		Comments:					<u></u>				
9		Comments:									
10											
10		Comments:							· · · · · · · · · · · · · · · · · · ·		
11											=
		Comments:									
12							l				
		Comments:									
13		Comments:									
		Comments.									
14		Comments:			-						
4-											
15		Comments:	_								
16											
10		Comments:									
17									L		
		Comments:							T		
18			_						L		
		Comments:					Ι		I		
19		Comments:									
		Comments.									
20		Comments:							1		
21		Comments:									
22											
		Comments:					т				
23											
		Comments:									
24		Commonto									
		Comments:					T				
25		Comments:		·····	_				1		
										Form ID:	OraDp2