**Note:** *The draft you are looking for begins on the next page.*

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Almost every form and publication has a page on IRS.gov with a friendly shortcut. For example, the Form 1040 page is at IRS.gov/Form1040; the Pub. 501 page is at IRS.gov/Pub501; the Form W-4 page is at IRS.gov/W4; and the Schedule A (Form 1040/SR) page is at IRS.gov/ScheduleA. If typing in a link above instead of clicking on it, be sure to type the link into the address bar of your browser, not a Search box.

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| SCHEDULE C (Form 1040) | Profit or Loss From Business (Sole Proprietorship) | OMB No. 1545-0074 |
|---|---|---|
| Department of the Treasury Internal Revenue Service | Go to *www.irs.gov/ScheduleC* for instructions and the latest information. **Attach to Form 1040, 1040-SR, 1040-NR, or 1041; partnerships must generally file Form 1065.** | **2022** Attachment Sequence No. **09** |

# Profit or Loss From Business



Name of proprietor | **Social security number (SSN)**

**A** Principal business or profession, including product or service (see instructions) | **B Enter code from instructions**

**C** Business name. If no separate business name, leave blank. | **D Employer ID number (EIN)** (see instr.)

**E** 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 2022? If "No," see instructions for limit on losses . ☐ **Yes** ☐ **No**

**H** If you started or acquired this business during 2022, check here . . . ☐

**I** Did you make any payments in 2022 that would require you to file Form(s) 1099? See instructions . . . ☐ **Yes** ☐ **No**

**J** If "Yes," did you or will you file required Form(s) 1099? . . . ☐ **Yes** ☐ **No**

## Part I Income

| | | | |
|---|---|---|---|
| 1 | Gross receipts or sales. See instructions for line 1 and check the box if this income was reported to you on Form W-2 and the "Statutory employee" box on that form was checked . . . ☐ | 1 | |
| 2 | Returns and allowances . . . | 2 | |
| 3 | Subtract line 2 from line 1 . . . | 3 | |
| 4 | Cost of goods sold (from line 42) . . . | 4 | |
| 5 | **Gross profit.** Subtract line 4 from line 3 . . . | 5 | |
| 6 | Other income, including federal and state gasoline or fuel tax credit or refund (see instructions) . . . | 6 | |
| 7 | **Gross income.** Add lines 5 and 6 . . . | 7 | |

## Part II Expenses. Enter expenses for business use of your home only on line 30.

| | | | | | | | |
|---|---|---|---|---|---|---|---|
| 8 | Advertising . . . | 8 | | 18 | Office expense (see instructions) . | 18 | |
| 9 | Car and truck expenses (see instructions) . . . | 9 | | 19 | Pension and profit-sharing plans . | 19 | |
| | | | | 20 | Rent or lease (see instructions): | | |
| 10 | Commissions and fees . | 10 | | a | Vehicles, machinery, and equipment | 20a | |
| 11 | Contract labor (see instructions) | 11 | | b | Other business property . . . | 20b | |
| 12 | Depletion . . . | 12 | | 21 | Repairs and maintenance . . . | 21 | |
| 13 | Depreciation and section 179 expense deduction (not included in Part III) (see instructions) . . . | 13 | | 22 | Supplies (not included in Part III) . | 22 | |
| | | | | 23 | Taxes and licenses . . . | 23 | |
| | | | | 24 | Travel and meals: | | |
| 14 | Employee benefit programs (other than on line 19) . | 14 | | a | Travel . . . | 24a | |
| | | | | b | Deductible meals (see instructions) . . . | 24b | |
| 15 | Insurance (other than health) | 15 | | | | | |
| 16 | Interest (see instructions): | | | 25 | Utilities . . . | 25 | |
| a | Mortgage (paid to banks, etc.) | 16a | | 26 | Wages (less employment credits) | 26 | |
| b | Other . . . | 16b | | 27a | Other expenses (from line 48) . . | 27a | |
| 17 | Legal and professional services | 17 | | b | **Reserved for future use** . . . | 27b | |

| | | | |
|---|---|---|---|
| 28 | **Total expenses** before expenses for business use of home. Add lines 8 through 27a . . . | 28 | |
| 29 | Tentative profit or (loss). Subtract line 28 from line 7 . . . | 29 | |
| 30 | Expenses for business use of your home. Do not report these expenses elsewhere. Attach Form 8829 unless using the simplified method. See instructions. **Simplified method filers only:** Enter the total square footage of (a) your home: ______ and (b) the part of your home used for business: ______ . Use the Simplified Method Worksheet in the instructions to figure the amount to enter on line 30 . . . | 30 | |
| 31 | **Net profit or (loss).** Subtract line 30 from line 29. • 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 a loss, you **must** go to line 32. | 31 | |

**32** 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 **Form 1041, line 3.**
- If you checked 32b, you **must** attach **Form 6198.** Your loss may be limited.

**32a** ☐ All investment is at risk.
**32b** ☐ Some investment is not at risk.

## Part III Cost of Goods Sold (see instructions)

**33** Method(s) used to 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? If "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** | |
| **42** | **Cost of goods sold.** Subtract line 41 from line 40. Enter the result here and on line 4 | **42** | |

## Part IV 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.

**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 2022, enter the number of miles you used your vehicle for:

**a** Business ____________ **b** Commuting (see instructions) ____________ **c** Other ____________

**45** Was your vehicle available for personal use during off-duty hours? . . . ☐ **Yes** ☐ **No**

**46** Do you (or your spouse) have another vehicle available for personal use? . . . ☐ **Yes** ☐ **No**

**47a** Do you have evidence to support your deduction? . . . ☐ **Yes** ☐ **No**

**b** If "Yes," is the evidence written? . . . ☐ **Yes** ☐ **No**

## 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 | **48** | |