

SCHEDULE C
(Form 1040)

Department of the Treasury
Internal Revenue Service (99)

Profit or Loss From Business

(Sole Proprietorship)

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

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

OMB No. 1545-0074

2011

Attachment
Sequence No. **09**

Name of proprietor Tim Slick		Social security number (SSN) 500 55 5555
A Principal business or profession, including product or service (see page C-3 of the instructions) Coffee shop		B Enter code from pages C-9, 10, & 11 7 2 2 2 1 0
C Business name. If no separate business name, leave blank. Tim's Coffee Shoppe		D Employer ID number (EIN), if any 5 5 5 5 5 5 5 5
E Business address (including suite or room no.) ► 100 Main Street City, town or post office, state, and ZIP code Sunnydale, IL 55555		
F Accounting method: (1) ☐ Cash (2) ☐ Accrual (3) ☐ Other (specify) ►		
G Did you "materially participate" in the operation of this business during 2008? If "No," see page C-4 for limit on losses ☒ Yes ☐ No		
H If you started or acquired this business during 2008, check here ☐		

Part I Income

1 Gross receipts or sales. Caution. See page C-4 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, or • You are a member of a qualified joint venture reporting only rental real estate income not subject to self-employment tax. Also see page C-4 for limit on losses. } ☐		1	400,527
2 Returns and allowances		2	
3 Subtract line 2 from line 1		3	400,527
4 Cost of goods sold (from line 42 on page 2)		4	
5 Gross profit. Subtract line 4 from line 3.		5	400,527
6 Other income, including federal and state gasoline or fuel tax credit or refund (see page C-4).		6	
7 Gross income. Add lines 5 and 6		7	400,527

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

<table border="1" style="width:100%; border-collapse: collapse;"> <tr><td>8 Advertising</td><td style="text-align: center;">8</td></tr> <tr><td>9 Car and truck expenses (see page C-5)</td><td style="text-align: center;">9</td></tr> <tr><td>10 Commissions and fees</td><td style="text-align: center;">10</td></tr> <tr><td>11 Contract labor (see page C-5)</td><td style="text-align: center;">11</td></tr> <tr><td>12 Depletion</td><td style="text-align: center;">12</td></tr> <tr><td>13 Depreciation and section 179 expense deduction (not included in Part III) (see page C-5)</td><td style="text-align: center;">13</td></tr> <tr><td>14 Employee benefit programs (other than on line 19)</td><td style="text-align: center;">14</td></tr> <tr><td>15 Insurance (other than health)</td><td style="text-align: center;">15</td></tr> <tr><td>16 Interest:</td><td></td></tr> <tr><td> a Mortgage (paid to banks, etc.)</td><td style="text-align: center;">16a</td></tr> <tr><td> b Other</td><td style="text-align: center;">16b</td></tr> <tr><td>17 Legal and professional services</td><td style="text-align: center;">17</td></tr> </table>	8 Advertising	8	9 Car and truck expenses (see page C-5)	9	10 Commissions and fees	10	11 Contract labor (see page C-5)	11	12 Depletion	12	13 Depreciation and section 179 expense deduction (not included in Part III) (see page C-5)	13	14 Employee benefit programs (other than on line 19)	14	15 Insurance (other than health)	15	16 Interest:		a Mortgage (paid to banks, etc.)	16a	b Other	16b	17 Legal and professional services	17	<table border="1" style="width:100%; border-collapse: collapse;"> <tr><td>18 Office expense</td><td style="text-align: center;">18</td></tr> <tr><td>19 Pension and profit-sharing plans</td><td style="text-align: center;">19</td></tr> <tr><td>20 Rent or lease (see page C-6):</td><td></td></tr> <tr><td> a Vehicles, machinery, and equipment</td><td style="text-align: center;">20a</td></tr> <tr><td> b Other business property</td><td style="text-align: center;">20b</td></tr> <tr><td>21 Repairs and maintenance</td><td style="text-align: center;">21</td></tr> <tr><td>22 Supplies (not included in Part III)</td><td style="text-align: center;">22</td></tr> <tr><td>23 Taxes and licenses</td><td style="text-align: center;">23</td></tr> <tr><td>24 Travel, meals, and entertainment:</td><td></td></tr> <tr><td> a Travel</td><td style="text-align: center;">24a</td></tr> <tr><td> b Deductible meals and entertainment (see page C-7)</td><td style="text-align: center;">24b</td></tr> <tr><td>25 Utilities</td><td style="text-align: center;">25</td></tr> <tr><td>26 Wages (less employment credits)</td><td style="text-align: center;">26</td></tr> <tr><td>27 Other expenses (from line 48 on page 2)</td><td style="text-align: center;">27</td></tr> </table>	18 Office expense	18	19 Pension and profit-sharing plans	19	20 Rent or lease (see page C-6):		a Vehicles, machinery, and equipment	20a	b Other business property	20b	21 Repairs and maintenance	21	22 Supplies (not included in Part III)	22	23 Taxes and licenses	23	24 Travel, meals, and entertainment:		a Travel	24a	b Deductible meals and entertainment (see page C-7)	24b	25 Utilities	25	26 Wages (less employment credits)	26	27 Other expenses (from line 48 on page 2)	27
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28 Total expenses before expenses for business use of home. Add lines 8 through 27	28	326,016																																																			
29 Tentative profit or (loss). Subtract line 28 from line 7	29	74,511																																																			
30 Expenses for business use of your home. Attach Form 8829	30																																																				
31 Net profit or (loss). Subtract line 30 from line 29.	31	74,511																																																			
• If a profit, enter on both Form 1040, line 12, and Schedule SE, line 2, or on Form 1040NR, line 13 (if you checked the box on line 1, see page C-7). Estates and trusts, enter on Form 1041, line 3. • If a loss, you must go to line 32. } 32 If you have a loss, check the box that describes your investment in this activity (see page C-8). • If you checked 32a, enter the loss on both Form 1040, line 12, and Schedule SE, line 2, or on Form 1040NR, line 13 (if you checked the box on line 1, see the line 31 instructions on page C-7). 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 page C-8)

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		
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36	Purchases less cost of items withdrawn for personal use	36		
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37	Cost of labor. Do not include any amounts paid to yourself	37		
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38	Materials and supplies	38		
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39	Other costs	39		
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40	Add lines 35 through 39	40		
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41	Inventory at end of year	41		
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42	Cost of goods sold. Subtract line 41 from line 40. Enter the result here and on page 1, line 4 . . .	42	Not Applicable
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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 on page G-5 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 2008, 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.

[illegible]

48	Total other expenses. Enter here and on page 1, line 27	48	0
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