

**SCHEDULE C
(Form 1040)**

Department of the Treasury
Internal Revenue Service (99)

**Profit or Loss From Business
(Sole Proprietorship)**

► **Information about Schedule C and its separate instructions is at www.irs.gov/schedulec.**
► **Attach to Form 1040, 1040NR, or 1041; partnerships generally must file Form 1065.**

OMB No. 1545-0074

2015
Attachment
Sequence No. **09**

Name of proprietor Sally Hucklespine (EXAMPLE ONLY)	Social security number (SSN) 100-22-6006
A Principal business or profession, including product or service (see instructions) SELF PUBLISHED WRITER	B Enter code from instructions ► 7 1 1 5 1 0
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.) ► 22 S. Douglas Rd. City, town or post office, state, and ZIP code Moonstate, Michigan 48122	
F Accounting method: (1) <input checked="" type="checkbox"/> Cash (2) <input type="checkbox"/> Accrual (3) <input type="checkbox"/> Other (specify) ►	
G Did you "materially participate" in the operation of this business during 2015? If "No," see instructions for limit on losses . . . <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
H If you started or acquired this business during 2015, check here . . . <input checked="" type="checkbox"/>	
I Did you make any payments in 2015 that would require you to file Form(s) 1099? (see instructions) . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
J If "Yes," did you or will you file required Forms 1099? . . . <input type="checkbox"/> Yes <input type="checkbox"/> 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 . . . <input type="checkbox"/>	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		132	00
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		
10 Commissions and fees . . .	10				20 Rent or lease (see instructions):			
11 Contract labor (see instructions)	11				a Vehicles, machinery, and equipment	20a		
12 Depletion . . .	12				b Other business property . . .	20b		
13 Depreciation and section 179 expense deduction (not included in Part III) (see instructions) . . .	13				21 Repairs and maintenance . . .	21		
14 Employee benefit programs (other than on line 19) . . .	14				22 Supplies (not included in Part III) . . .	22	86	25
15 Insurance (other than health)	15				23 Taxes and licenses . . .	23		
16 Interest:					24 Travel, meals, and entertainment:			
a Mortgage (paid to banks, etc.)	16a				a Travel . . .	24a		
b Other . . .	16b				b Deductible meals and entertainment (see instructions) . . .	24b		
17 Legal and professional services	17				25 Utilities . . .	25		
18 Total expenses before expenses for business use of home. Add lines 8 through 27a . . .	18				26 Wages (less employment credits) . . .	26		
19 Tentative profit or (loss). Subtract line 28 from line 7 . . .	19				27a Other expenses (from line 48) . . .	27a	1,561	00
20 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 . . .	20				27b Reserved for future use . . .	27b		
21 Net profit or (loss). Subtract line 30 from line 29.	21				28 Total expenses before expenses for business use of home. Add lines 8 through 27a . . .	28	126	25
• If a profit, enter on both Form 1040, line 12 (or Form 1040NR, line 13) 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 .					29 Tentative profit or (loss). Subtract line 28 from line 7 . . .	29		
• If a loss, you must go to line 32.					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		
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 Form 1040, line 12 , (or Form 1040NR, line 13) 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.	32				31 Net profit or (loss). Subtract line 30 from line 29.	31		

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

