



Ovals must be filled in completely. Example: If any line shows a loss, mark an X in box at left of the line.

Schedule C Massachusetts Profit or Loss from Business

2017

FIRST NAME	M.I.	LAST NAME	SOCIAL SECURITY NUMBER OF PROPRIETOR
BUSINESS NAME			EMPLOYER IDENTIFICATION NUMBER (if any)
MAIN BUSINESS OR PROFESSION, INCLUDING PRODUCT OR SERVICE			PRINCIPAL BUSINESS CODE (from U.S. Schedule C)
ADDRESS			NUMBER OF EMPLOYEES
CITY/TOWN/POST OFFICE		STATE	ZIP + 4
Accounting Method: ☐ Cash ☐ Accrual			
☐ Other (specify) _____			

Did you materially participate in the operation of this business during 2017? (If "no," see line 33 instructions) ☐ Yes ☐ No

Did you claim the small business exemption from the sales tax on purchases of taxable energy or heating fuel during 2017? ☐ Yes ☐ No

Exclude interest (other than from Massachusetts banks) and dividends from lines 1 and 4 and enter such amount in line 32 and in Schedule B, line 3.

Caution: If this income was reported to you on Form W-2 and the "Statutory employee" box on that form was checked, fill in here: ☐

1	a. Gross receipts or sales		00		▼ If showing a loss, mark an X in box at left
	b. Returns and allowances		00	a - b = 1	☒
2	Cost of goods sold and/or operations (Schedule C-1, line 8)	2			00
3	Gross profit. Subtract line 2 from line 1	3	☒		00
4	Other income. Do not include interest income (other than from Mass. banks) and dividends	4			00
5	Total income. Add line 3 and line 4	5	☒		00
6	Advertising	6			00
7	Bad debts from sales or services	7			00
8	Car and truck expenses	8			00
9	Commissions and fees	9			00
10	Depletion	10			00
11	Depreciation and Section 179 deduction	11			00
12	Employee benefit programs (other than in line 17)	12			00
13	Insurance (other than health)	13			00
14	Interest:				
	a. mortgage interest paid to financial institutions		00		
	b. other interest		00	a + b = 14	00
15	Legal and professional services	15			00
16	Office expense	16			00
17	Pension and profit-sharing plans	17			00

18	Rent or lease:									00	
	a. vehicles, machinery and equipment									00	
	b. other business property									00	a + b = 18
19	Repairs and maintenance									00	19
20	Supplies (not included on Schedule C-1)									00	20
21	Taxes and licenses									00	21
22	Travel									00	22
23	a. Total meals and entertainment									00	
	b. Enter 50% of 23a subject to limitations									00	a - b = 23
24	Utilities									00	24
25	Wages (before U.S. jobs credit)									00	25
26	Other expenses									00	26
27	Total expenses. Add lines 6 through 26									00	27
28	Tentative profit or loss. Subtract line 27 from line 5									00	28
29	Expenses for business use of your home									00	29
30	Abandoned Building Renovation Deduction									00	30
31	Net profit or loss. Subtract total of line 29 and line 30 from line 28. If a profit, enter here and on Form 1, line 6a or Form 1-NR/PY, line 8a. If a loss, complete line 33.									00	31
32	Is interest (other than from Massachusetts banks) or dividend income reported on U.S. Schedule C, lines 1 and/or 6 or Schedule C-EZ, line 1? ☐ Yes ☐ No. If Yes, see instructions									00	32
33	If you have a loss, fill in the oval that describes your investment in this activity. If you filled in 33a, enter the loss on Form 1, line 6a or Form 1-NR/PY, line 8a. If you filled in 33b, see instructions.										☐ 33a. All investment at risk. ☐ 33b. Some investment is not at risk.

Schedule C-1 Cost of Goods Sold and/or Operations

[illegible]