SCHEDULE C (Form 1040 or 1040-SR)
Department of the Treasury
Internal Revenue Service (99)

Profit or Loss From Business
(Sole Proprietorship)

▶ Go to *www.irs.gov/ScheduleC* for instructions and the latest information.
▶ Attach to Form 1040, 1040-SR, 1040-NR, or 1041; partnerships generally must file Form 1065.

OMB No. 1545-0074
2019
Attachment Sequence No. **09**

Name of proprietor	Social security number (SSN)
Carolyn Wade	592-09-0026

A	Principal business or profession, including product or service (see instructions) Hair Stylist	B Enter code from instructions ▶ 8 1 2 9 9 0
C	Business name. If no separate business name, leave blank. 1 Step A-Head	D Employer ID number (EIN) (see instr.) 2 7 4 9 8 0 1 2 6
E	Business address (including suite or room no.) ▶ 8447 NW 51st Pl City, town or post office, state, and ZIP code Coral Springs, FL 33067-1974	
F	Accounting method: (1) ☒ Cash (2) ☐ Accrual (3) ☐ Other (specify) ▶	
G	Did you "materially participate" in the operation of this business during 2019? If "No," see instructions for limit on losses	☒ Yes ☐ No
H	If you started or acquired this business during 2019, check here ▶	☐
I	Did you make any payments in 2019 that would require you to file Form(s) 1099? (see instructions)	☐ Yes ☒ No
J	If "Yes," did you or will you file required Forms 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	6,800.
2	Returns and allowances	2	
3	Subtract line 2 from line 1	3	6,800.
4	Cost of goods sold (from line 42)	4	
5	**Gross profit.** Subtract line 4 from line 3	5	6,800.
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	6,800.

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

8	Advertising	8	0.	18	Office expense (see instructions)	18	1,275.
9	Car and truck expenses (see instructions)	9	6,770.	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	3,450.	21	Repairs and maintenance	21	
14	Employee benefit programs (other than on line 19)	14		22	Supplies (not included in Part III)	22	2,900.
15	Insurance (other than health)	15		23	Taxes and licenses	23	120.
16	Interest (see instructions):			24	Travel and meals:		
a	Mortgage (paid to banks, etc.)	16a		a	Travel	24a	0.
b	Other	16b		b	Deductible meals (see instructions)	24b	1,300.
17	Legal and professional services	17		25	Utilities	25	8,900.
				26	Wages (less employment credits)	26	
				27a	Other expenses (from line 48)	27a	700.
				b	Reserved for future use	27b	
28	**Total expenses** before expenses for business use of home. Add lines 8 through 27a ▶					28	25,415.
29	Tentative profit or (loss). Subtract line 28 from line 7					29	-18,615.
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 or** 13) and on **Schedule SE, line 2.** (If you checked the bc trusts, enter on **Form 1041, line 3.** • If a loss, you **must** go to line 32.					31	-18,615.
32	If you have a loss, check the box that describes your inv • If you checked 32a, enter the loss on both **Schedu Form 1040-NR, line 13)** and on **Schedule SE, line 2.** (I 31 instructions). Estates and trusts, enter on **Form 1041,** • If you checked 32b, you **must** attach **Form 6198.** You					32a ☒ All investment is at risk. 32b ☐ Some investment is not at risk.	

DEFENDANT'S EXHIBIT
CASE NO. 23-60173-CR-Williams
EXHIBIT NO. 24

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? ☐ Yes ☐ No
If "Yes," attach explanation

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 2019, 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.

Laundry	300.
laundry detergents	200.
air fresheners	200.

48 **Total other expenses.** Enter here and on line 27a 48 700.