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VOID CORRECTED

PAYER'S name, street address, city, state, ZIP code, and telephone no.		1 Rents	OMB No. 1545-0115	2011	Miscellaneous Income	
		\$	2 Royalties			Form 1099-MISC
		\$	3 Other income			4 Federal income tax withheld
PAYER'S federal identification number	RECIPIENT'S identification number	5 Fishing boat proceeds	6 Medical and health care payments	Copy A For Internal Revenue Service Center File with Form 1096. For Privacy Act and Paperwork Reduction Act Notice, see the 2011 General Instructions for Certain Information Returns.		
RECIPIENT'S name		7 Nonemployee compensation	8 Substitute payments in lieu of dividends or interest			
Street address (including apt. no.)		9 Payer made direct sales of \$5,000 or more of consumer products to a buyer (recipient) for resale <input type="checkbox"/>	10 Crop insurance proceeds			
City, state, and ZIP code		11	12	Form 1099-MISC		
Account number (see instructions)	2nd TIN not <input type="checkbox"/>	13 Excess golden parachute payments	14 Gross proceeds paid to an attorney			
15a Section 409A deferrals	15b Section 409A income	16 State tax withheld	17 State/Payer's state no.			18 State income
\$	\$	\$	\$	\$	\$	

Form 1099-MISC

Cat. No. 14425J

Department of the Treasury - Internal Revenue Service

Do Not Cut or Separate Forms on This Page — Do Not Cut or Separate Forms on This Page

Name, Address, and SSN

See separate instructions.

Form fields for Name, Address, and SSN including first/last name, joint return info, home address, and city/ZIP code.

Form fields for social security numbers and a note to ensure SSN accuracy.

Presidential Election Campaign

Check here if you, or your spouse if filing jointly, want \$3 to go to this fund. Includes checkboxes for You and Spouse.

Filing Status

Check only one box.

Filing status options: 1 Single, 2 Married filing jointly, 3 Married filing separately, 4 Head of household, 5 Qualifying widow(er).

Exemptions

If more than four dependents, see instructions and check here.

Table for dependents with columns for first name, last name, social security number, relationship, and age 17 credit.

Summary boxes for exemptions: Boxes checked on 6a and 6b, No. of children on 6c who lived with you, Dependents on 6c not entered above, and Add numbers on lines above.

Income

Attach Form(s) W-2 here. Also attach Forms W-2G and 1099-R if tax was withheld.

If you did not get a W-2, see page 20.

Enclose, but do not attach, any payment. Also, please use Form 1040-V.

Main income table with rows 7 through 22 for various income sources like wages, interest, dividends, and total income.

Adjusted Gross Income

Table for Adjusted Gross Income with rows 23 through 37 for deductions like educator expenses, moving expenses, and self-employment tax.

SCHEDULE C
(Form 1040)

Profit or Loss From Business

(Sole Proprietorship)

OMB No. 1545-0074

2010
Attachment
Sequence No. **09**

Department of the Treasury
Internal Revenue Service (99)

▶ **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).**

Name of proprietor	Social security number (SSN)
A Principal business or profession, including product or service (see instructions)	B Enter code from pages C-9, 10, & 11
C Business name. If no separate business name, leave blank.	D Employer ID number (EIN), if any
E Business address (including suite or room no.) ▶ City, town or post office, state, and ZIP code	
F Accounting method: (1) <input 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 2010? If "No," see instructions for limit on losses <input type="checkbox"/> Yes <input type="checkbox"/> No	
H If you started or acquired this business during 2010, check here <input type="checkbox"/>	

Part I Income

1 Gross receipts or sales. Caution. See instructions and check the box if: <ul style="list-style-type: none"> • 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 instructions for limit on losses. 	1			
2 Returns and allowances	2			
3 Subtract line 2 from line 1	3			
4 Cost of goods sold (from line 42 on page 2)	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	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		
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		
28 Total expenses before expenses for business use of home. Add lines 8 through 27	28		26 Wages (less employment credits)	26		
29 Tentative profit or (loss). Subtract line 28 from line 7	29		27 Other expenses (from line 48 on page 2)	27		
30 Expenses for business use of your home. Attach Form 8829	30					
31 Net profit or (loss). Subtract line 30 from line 29.	31					
• 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 instructions). 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 instructions).						
• 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). Estates and trusts, enter on Form 1041, line 3 .						
• If you checked 32b, you must attach Form 6198 . Your loss may be limited.						
			32a <input type="checkbox"/> All investment is at risk.			
			32b <input type="checkbox"/> Some investment is not at risk.			

SCHEDULE SE
(Form 1040)

Self-Employment Tax

OMB No. 1545-0074

2010
Attachment
Sequence No. **17**

Department of the Treasury
Internal Revenue Service (99)

▶ **Attach to Form 1040 or Form 1040NR.** ▶ **See Instructions for Schedule SE (Form 1040).**

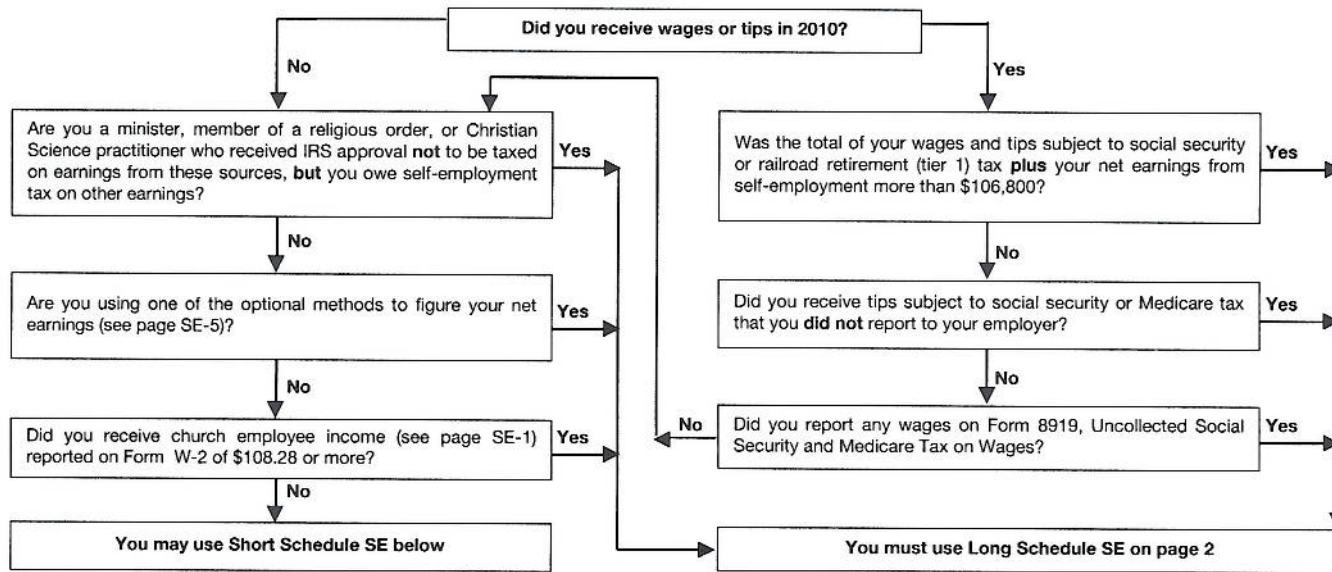
Name of person with self-employment income (as shown on Form 1040)

Social security number of person
with self-employment income ▶

Before you begin: To determine if you must file Schedule SE, see the instructions on page SE-1.

May I Use Short Schedule SE or Must I Use Long Schedule SE?

Note. Use this flowchart **only** if you must file Schedule SE. If unsure, see *Who Must File Schedule SE* on page SE-1.



Section A—Short Schedule SE. Caution. Read above to see if you can use Short Schedule SE.

- 1a** Net farm profit or (loss) from Schedule F, line 36, and farm partnerships, Schedule K-1 (Form 1065), box 14, code A
- b** If you received social security retirement or disability benefits, enter the amount of Conservation Reserve Program payments included on Schedule F, line 6b, or listed on Schedule K-1 (Form 1065), box 20, code Y
- 2** Net profit or (loss) from Schedule C, line 31; Schedule C-EZ, line 3; Schedule K-1 (Form 1065), box 14, code A (other than farming); and Schedule K-1 (Form 1065-B), box 9, code J1. Ministers and members of religious orders, see page SE-1 for types of income to report on this line. See page SE-3 for other income to report
- 3** Combine lines 1a, 1b, and 2. Subtract from that total the amount on Form 1040, line 29, or Form 1040NR, line 29, and enter the result (see page SE-3)
- 4** Multiply line 3 by 92.35% (.9235). If less than \$400, you do not owe self-employment tax; **do not** file this schedule unless you have an amount on line 1b ▶
Note. If line 4 is less than \$400 due to Conservation Reserve Program payments on line 1b, see page SE-3.
- 5 Self-employment tax.** If the amount on line 4 is:
• \$106,800 or less, multiply line 4 by 15.3% (.153). Enter the result here and on **Form 1040, line 56,** or **Form 1040NR, line 54**
• More than \$106,800, multiply line 4 by 2.9% (.029). Then, add \$13,243.20 to the result. Enter the total here and on **Form 1040, line 56,** or **Form 1040NR, line 54**
- 6 Deduction for one-half of self-employment tax.** Multiply line 5 by 50% (.50). Enter the result here and on **Form 1040, line 27,** or **Form 1040NR, line 27**

1a			
1b	()	
2			
3			
4			
5			
6			