

**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

2016
Attachment
Sequence No. **09**

Name of proprietor
MICHAEL A. KANTER

Social security number (SSN)
-**-*

A Principal business or profession, including product or service (see instructions)
NET BUTTER MANUFACTURING

B Enter code from instructions
▶ **311400**

C Business name. If no separate business name, leave blank.
ELIOT'S ADULT NUT BUTTERS LLC

D Employer ID number (EIN), (see instr.)
46-4010075

E Business address (including suite or room no.) ▶ **39 NE THOMPSON ST APT A**
City, town or post office, state, and ZIP code **PORTLAND, OR 97212-3741**

F Accounting method: (1) Cash (2) Accrual (3) Other (specify) ▶ _____

G Did you "materially participate" in the operation of this business during 2016? If "No," see instructions for limit on losses Yes No

H If you started or acquired this business during 2016, check here

I Did you make any payments in 2016 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 <input type="checkbox"/>	1	145,727.
2	Returns and allowances	2	3,352.
3	Subtract line 2 from line 1	3	142,375.
4	Cost of goods sold (from line 42)	4	75,008.
5	Gross profit. Subtract line 4 from line 3	5	67,367.
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	67,367.

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

8	Advertising	8	4,878.	18	Office expense	18	2,475.
9	Car and truck expenses (see instructions) STMT 9	9	6,244.	19	Pension and profit-sharing plans	19	
10	Commissions and fees	10		20	Rent or lease (see instructions):		
11	Contract labor (see instructions)	11		20a	Vehicles, machinery, and equipment	20a	
12	Depreciation	12		20b	Other business property	20b	15,167.
13	Depreciation and section 179 expense deduction (not included in Part III) (see instructions)	13	430.	21	Repairs and maintenance	21	296.
14	Employee benefit programs (other than on line 19)	14		22	Supplies (not included in Part III)	22	
15	Insurance (other than health)	15	2,630.	23	Taxes and licenses	23	9,159.
16	Interest:			24	Travel, meals, and entertainment:		
16a	Mortgage (paid to banks, etc.)	16a		24a	Travel	24a	9,268.
16b	Other	16b	2,981.	24b	Deductible meals and entertainment (see instructions)	24b	1,384.
17	Legal and professional services	17	4,637.	25	Utilities	25	723.
18				26	Wages (less employment credits)	26	39,411.
19				27a	Other expenses (from line 48)	27a	4,715.
20				27b	Reserved for future use	27b	

28	Total expenses before expenses for business use of home. Add lines 8 through 27a	28	104,398.
29	Tentative profit or (loss). Subtract line 28 from line 7	29	-37,031.
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 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. • If a loss, you must go to line 32.	31	-37,031.
32a	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.	32a	<input checked="" type="checkbox"/> All investment is at risk.
32b		32b	<input type="checkbox"/> Some investment is not at risk.

For Paperwork Reduction Act Notice, see the separate instructions.

Schedule C (Form 1040) 2016

11-07-16

Part III Cost of Goods Sold (see instructions)

23 Method(s) used to value closing inventory: a Cost b Lower of cost or market c Other (attach explanation)

24 Was there any change in determining quantities, costs, or valuations between opening and closing inventory? If "Yes," attach explanation Yes No

25 Inventory at beginning of year. If different from last year's closing inventory, attach explanation	35	17,770.
26 Purchases less cost of items withdrawn for personal use	36	51,961.
27 Cost of labor. Do not include any amounts paid to yourself	37	
28 Materials and supplies	38	4,093.
29 Other costs SEE STATEMENT 10	39	17,921.
40 Add lines 35 through 39	40	91,745.
41 Inventory at end of year	41	16,737.
42 Cost of goods sold. Subtract line 41 from line 40. Enter the result here and on line 4	42	75,008.

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 2016, enter the number of miles you used your vehicle for:
 a Business _____ b Commuting _____ 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.

BANK CHARGES	647.
FEES AND SUBSCRIPTIONS	4,012.
MISCELLANEOUS EXPENSE	56.
48 Total other expenses. Enter here and on line 27a	4,715.