

**SCHEDULE C  
(Form 1040)**

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

OMB No. 1545-0074

**1992**  
Attachment  
Sequence No. **09**

Department of the Treasury  
Internal Revenue Service (T)

▶ Partnerships, joint ventures, etc., must file Form 1065.  
▶ Attach to Form 1040 or Form 1041. ▶ See instructions for Schedule C (Form 1040).

Name of proprietor  
**REED E. SLATKIN**

Social security number (SSN)  
**367-54-7981**

**A** Principal business or profession, including product or service (see page C-1)  
**CONSULTANT/STOCK TRADER**

**B** Enter principal business code (from page 2) ▶ **6130**

**C** Business name  
**REED E. SLATKIN**

**D** Employer ID number (Not SSN)

**E** Business address (including suite or room no.) ▶ **11684 VENTURA BLVD. SUITE 922**  
City, town or post office, state, and ZIP code **STUDIO CITY, CA 91604**

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

**G** Method(s) used to value closing inventory: (1)  Cost (2)  Lower of cost or market (3)  Other (attach explanation) (4)  Does not apply (if checked, skip line H)

	Yes	No
<b>H</b> Was there any change in determining quantities, costs, or valuations between opening and closing inventory? If "Yes," attach explanation . . .		
<b>I</b> Did you "materially participate" in the operation of this business during 1992? If "No," see page C-2 for limitations on losses. . . . .	X	
<b>J</b> Was this business in operation at the end of 1992? . . . . .	X	
<b>K</b> How many months was this business in operation during 1992? . . . . .		12
<b>L</b> If this is the first Schedule C filed for this business, check here . . . . .		<input type="checkbox"/>

**Part I Income**

<b>1</b> Gross receipts or sales. <b>Caution:</b> If this income was reported to you on Form W-2 and the "Statutory employee" box on that form was checked, see page C-2 and check here . . . . .	<input type="checkbox"/>	<b>1</b>	1104318
<b>2</b> Returns and allowances . . . . .		<b>2</b>	
<b>3</b> Subtract line 2 from line 1 . . . . .		<b>3</b>	1104318
<b>4</b> Cost of goods sold (from line 40 on page 2). . . . .		<b>4</b>	
<b>5</b> <b>Gross profit.</b> Subtract line 4 from line 3. . . . .		<b>5</b>	1104318
<b>6</b> Other income, including Federal and state gasoline or fuel tax credit or refund (see page C-2). . . . .		<b>6</b>	
<b>7</b> <b>Gross income.</b> Add lines 5 and 6 . . . . .		<b>7</b>	1104318

**Part II Expenses (Caution: Do not enter expenses for business use of your home on lines 8 - 27. Instead, see line 30.)**

<b>8</b> Advertising . . . . .	<b>8</b>		<b>21</b> Repairs and maintenance . . . . .	<b>21</b>	
<b>9</b> Bad debts from sales or services (see page C-3) . . . . .	<b>9</b>		<b>22</b> Supplies (not included in Part III) . . . . .	<b>22</b>	582
<b>10</b> Car and truck expenses (see page C-3 - also att. Form 4562). . . . .	<b>10</b>	3220	<b>23</b> Taxes and licenses . . . . .	<b>23</b>	6575
<b>11</b> Commissions and fees . . . . .	<b>11</b>		<b>24</b> Travel, meals, and entertainment:		
<b>12</b> Depletion . . . . .	<b>12</b>		<b>a</b> Travel . . . . .	<b>24a</b>	13896
<b>13</b> Depreciation and section 179 expense deduction (not included in Part III) (see page C-3) . . . . .	<b>13</b>	15636	<b>b</b> Meals and entertainment . . . . .		888
<b>14</b> Employee benefit programs (other than on line 19) . . . . .	<b>14</b>		<b>c</b> Enter 20% of line 24b subject to limitations (see page C-4) . . . . .		178
<b>15</b> Insurance (other than health) . . . . .	<b>15</b>	1063	<b>d</b> Subtract line 24c from line 24b . . . . .	<b>24d</b>	710
<b>16</b> Interest:			<b>25</b> Utilities . . . . .	<b>25</b>	
<b>a</b> Mortgage (paid to banks, etc.) . . . . .	<b>16a</b>		<b>26</b> Wages (less jobs credit) . . . . .	<b>26</b>	
<b>b</b> Other . . . . .	<b>16b</b>		<b>27a</b> Other expenses (list type and amount):		
<b>17</b> Legal and professional services . . . . .	<b>17</b>	78646	<b>SEE STATEMENT 4</b>		
<b>18</b> Office expense . . . . .	<b>18</b>		-----		
<b>19</b> Pension and profit-sharing plans . . . . .	<b>19</b>		-----		
<b>20</b> Rent or lease (see page C-4):			-----		
<b>a</b> Vehicles, machinery & equipment . . . . .	<b>20a</b>		-----		
<b>b</b> Other business property . . . . .	<b>20b</b>		-----		
<b>21</b> Total other expenses . . . . .	<b>27b</b>				1163-1437
<b>28</b> Total expenses before expenses for business use of home. Add lines 8 through 27b in columns . . . . .	<b>28</b>				670838
<b>29</b> Tentative profit (loss). Subtract line 28 from line 7. . . . .	<b>29</b>				791166
<b>30</b> Expenses for business use of your home. Attach Form 8829 . . . . .	<b>30</b>				313152
<b>31</b> Net profit or (loss). Subtract line 30 from line 29. If a profit, enter here and on Form 1040, line 12. Also, enter the net profit on Schedule SE, line 2 (statutory employees, see page C-5). If a loss, you MUST go on to line 32 (fiduciaries, see page C-5). . . . .	<b>31</b>				313152
<b>32</b> If you have loss, you MUST check the box that describes your investment in this activity (see page C-5)					
If you checked 32a, enter the loss on Form 1040, line 12, and Schedule SE, line 2 (statutory employees, see page C-5). If you checked 32b, you MUST attach Form 6198.					
			<b>32a</b> <input type="checkbox"/> All investment is at risk.		
			<b>32b</b> <input type="checkbox"/> Some investment is not at risk.		

For Paperwork Reduction Act Notice, see Form 1040 instructions.

Schedule C (Form 1040) 1992