

# KATHY PAVLOVSKY, CPA

## Schedule C Business Worksheet

Business Name: \_\_\_\_\_

Business Address: \_\_\_\_\_

### INCOME

	<u>Amount</u>
Gross Receipts/Sales	\$ _____
Other Income	\$ _____
	\$ _____
	\$ _____
	\$ _____
<b>TOTAL</b>	<b>\$ 0.00</b>

### INVENTORY-COST OF GOODS SOLD

	<u>Amount</u>
Beginning Inventory	\$ _____
Purchases	\$ _____
Labor	\$ _____
Materials	\$ _____
Other Costs	\$ _____
Ending Inventory	\$ _____

### HOME OFFICE EXPENSES

	<u>Amount</u>
Rent	\$ _____
Mortgage Interest	\$ _____
Property Taxes	\$ _____
Utilities	\$ _____
Insurance	\$ _____
Other Expenses	\$ _____
	\$ _____
Square footage of office	_____
Total square footage of home	_____

### ALL EXPENSES (except vehicle)

	<u>Amount</u>
Advertising	\$ _____
Commissions & Fees	\$ _____
Employee Benefits	\$ _____
Insurance other than health	\$ _____
Mortgage Interest	\$ _____
Interest - Other	\$ _____
Legal/Professional fees	\$ _____
Office expenses	\$ _____
Pension/profit sharing	\$ _____
Rent - machinery	\$ _____
Rent - other	\$ _____
Repairs/maintenance	\$ _____
Supplies	\$ _____
Taxes/licenses	\$ _____
Travel	\$ _____
Meals - subject to 50%	\$ _____

### OTHER EXPENSES:

_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
<b>Total Expenses:</b>	<b>\$ 0.00</b>

1099s are required if you paid for services \$600 or more.  
Did you send 1099s?

Yes      No

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## NEW ASSETS/VEHICLES PURCHASED THIS YEAR OVER \$2500

DESCRIPTION	NEW or USED	PURCHASE DATE	COST
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____
			<b>TOTAL \$ 0.00</b>

## ASSETS/VEHICLES SOLD IN THIS YEAR

DESCRIPTION	NEW or USED	SOLD DATE	SALE PRICE
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____
			<b>TOTAL \$ 0.00</b>

## VEHICLE EXPENSES (not included on page one)

Vehicle Actual Expenses Auto	Vehicle #1	Vehicle #2
Repairs	\$ _____	\$ _____
Maintenance/Parts	\$ _____	\$ _____
Auto Fuel	\$ _____	\$ _____
Registration/License	\$ _____	\$ _____
Auto Insurance	\$ _____	\$ _____
Other	\$ _____	\$ _____
Interest on Vehicle Loan	\$ _____	\$ _____
Mileage:		
Business Miles	_____	_____
Personal Miles	_____	_____
Total Miles	0.00	0.00

\*The IRS requires a mileage log

Total Income: \$ \_\_\_\_\_

Total Expenses: \$ \_\_\_\_\_