

Business Income and Expenses

ORG19

GENERAL INFORMATION	
1	Check ownership <input type="checkbox"/> Taxpayer <input type="checkbox"/> Spouse <input type="checkbox"/> Joint
2	Business name
3 a	Business street address.....
b 1	City, State and Zip Code, or
2	Foreign country.....
4	Principal business/profession
5	Employer ID number.....
6	Business code (Preparer Use Only)
7	Was this business fully disposed of in a fully taxable transaction during 2014 ? Yes No

INCOME	
17	Gross receipts or sales.....
18	Returns and allowances plus other adjustments.....
19	Other income (include federal/state gas tax credit/refund)

COST OF GOODS SOLD – IF APPLICABLE	
20	Inventory at beginning of year
21	Purchases
22	Items withdrawn for personal use
23	Cost of labor (do not include your salary)
24	Materials and supplies
25	Other costs
26	Inventory at end of year.....

[illegible]