

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	2014
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	2014
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22 Items withdrawn for personal use	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]