

## Business Income, Cost of Goods Sold and Expenses

Business Name \_\_\_\_\_  
 Principal Business or Profession \_\_\_\_\_  
 Ownership Code \_\_\_\_\_  
 Employer ID Number \_\_\_\_\_  
 Street Address \_\_\_\_\_  
 City, State, ZIP Code \_\_\_\_\_  
 Accounting method: Cash, Accrual \_\_\_\_\_  
 Indicate **X** if business is fully disposed of in current year \_\_\_\_\_  
 Method of inventory: Cost, Lower cost/market, Other \_\_\_\_\_

Health Insurance premiums paid for yourself and your dependent .....	<b>2019 Amount</b>	<b>2018 Amount</b>

### Income

<b>Gross Receipts or Sales</b>	<b>2019 Amount</b>	<b>2018 Amount</b>

Less Returns and allowances .....		

### Other Income


### Cost of Goods Sold

Beginning inventory .....	<b>2019 Amount</b>	<b>2018 Amount</b>
Purchases less cost of items withdrawn for personal use .....		
Cost of labor .....		
Materials and supplies .....		

### Other Cost of Goods Sold


Ending Inventory .....		

### Expenses

Advertising .....	<b>2019 Amount</b>	<b>2018 Amount</b>
Car and truck expenses .....		
Commissions .....		
Contract labor .....		
Employee benefit programs and health insurance .....		
Insurance (other than health) .....		
Interest - mortgage (paid to Banks etc.) .....		
Interest - other .....		
Legal and professional services .....		
Meals and entertainment subject to 50% limit .....		
Office expense .....		
Pension and profit-sharing plans .....		
Rent or lease - other business property .....		
Rent or lease - vehicles, machinery and equipment .....		
Repairs and maintenance .....		
Supplies .....		
Taxes and licenses .....		
Travel .....		
Utilities .....		
Wages .....		

### Other Expenses


