ORGANIZER Page 1 1040 US **Business Income (Schedule C)** No. Please enter all pertinent amounts. **GENERAL INFORMATION** Business name, if different from Form 1040 Business address, if different from Form 1040 . . . City, state, ZIP code, if different from Form 1040. . Employer identification number..... Other accounting method..... Accounting method: 1=cash, 2=accrual..... Inventory method: 1=cost, 2=lower c/m, 3=other..... 1=first Schedule C filed for this business..... 1=not subject to self-employment tax..... 1=did not "materially participate"..... INCOME **Current Year** Prior Year Gross receipts or sales (Form 1099-MISC, box 7) Returns and allowances..... Other income: **COST OF GOODS SOLD** Inventory at beginning of the year..... Purchases.... Cost of labor..... Other costs: Inventory at end of the year..... 16

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