

Business Income and Expenses

ORG19

GENERAL INFORMATION

1 Check ownership Taxpayer Spouse Joint

2 Business name

3 a Business street address.....

 b 1 City, State and Zip Code, or

 2 Foreign country..... (not applicable)

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 2017?..... Yes No

8 Accounting method:
 Cash Accrual Other (specify)

9 Method used to value closing inventory:
 Cost Lower of Other (explain)

 Lower of cost or market

10 Was there a change in determining quantities, costs, or valuations between opening/closing inventory? Yes No
 (If yes, attach explanation)

11 Did you materially participate in the operation of this business during 2017?

12 Did you start or acquire this business during 2017?

13 a Did you make any payments in 2017 that require you to file Forms 1099?

 b If yes, did you or will you file all the required Forms 1099?

14 At-risk determination:

 a Is all of the investment in this activity at risk?

 b Is some of the investment in this activity not at risk?

15 Did you have unallowed passive losses in 2016?

16 a Treat all MACRS assets for this activity as qualified Indian reservation property?

 b Treat all assets acquired after August 27, 2005 as qualified GO Zone property?..... Regular Extension No

 c Treat all assets acquired after May 4, 2007 as qualified Kansas Disaster Zone property?

 d Was this business located in a Qualified Disaster Area?

Complete ORG51 for Asset Acquisitions and ORG50 for Dispositions.

INCOME	2017	2016
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	2017	2016
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22 Items withdrawn for personal use		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.....		

Business Income and Expenses (continued)

ORG19

EXPENSES	2017	2016
Business name _____		
27 Advertising		
28 Car and truck expenses (complete ORG18).....		
29 Commissions and fees.....		
30 Contract labor		
31 Depletion		
32 Depreciation and Section 179 deduction (Preparer Use Only)		
33 Employee benefit programs:		
a Employee health insurance premiums		
b Other employee benefit programs		
34 Insurance (other than health).....		
35 Self-employed health insurance attributable to this business.....		
36 Interest:		
a Mortgage paid to banks not reported to you on Form 1098.....		
b Other		
37 Legal and professional services		
38 Office expenses		
39 Pension and profit-sharing plans.....		
40 Rent or lease:		
a Machinery and equipment (enter vehicle lease on ORG18)		
b Other business property.....		
41 Repairs and maintenance		
42 Supplies (not included in cost of goods sold)		
43 Taxes and licenses not reported to you on Form 1098.....		
44 Travel, meals, and entertainment:		
a Travel.....		
b Meals and entertainment subject to 50% limit		
c Meals subject to 80% limit.....		
d Meals and entertainment not subject to limit.....		
45 Utilities		
46 Gross wages		
47 Other expenses:		

48 Expenses for business use of your home (Preparer Use Only)		
Complete ORG20 for Business Use of Home.		
49 Qualified pension plan start-up costs.....		

Car And Truck Expenses
(Employees use ORG17 – Employee Business Expenses)

ORG18

for: ORG19

GENERAL INFORMATION-	Vehicle 1		Vehicle 2		Vehicle 3	
1 Description of vehicle.....						
2 Date placed in service.....						
3 Enter detail on lines 3a and 3b, or total on line 3c:						
a Ending mileage reading.....						
b Beginning mileage reading.....						
c Total miles for the year (line 3a less line 3b).....						
4 Business miles.....						
5 Total commuting miles.....						
STANDARD MILEAGE RATE	Vehicle 1		Vehicle 2		Vehicle 3	
6 Do you qualify for standard mileage? (Preparer Use).....	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
7 Is this a leased vehicle?.....	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
ACTUAL EXPENSES	Vehicle 1		Vehicle 2		Vehicle 3	
8 Gasoline, oil, repairs, insurance, etc.....						
9 Vehicle registration fee (excluding property tax).....						
10 Vehicle lease or rental fee.....						
11 Inclusion amount (Preparer Use Only).....						
12 Depreciation (Preparer Use Only).....						
13 Parking fees, tolls, and local transportation.....						
14 Portion of vehicle registration fee based on value.....						
15 Interest on vehicle.....						
DEPRECIATION/DISPOSITIONS	Vehicle 1		Vehicle 2		Vehicle 3	
16 Cost or basis.....						
17 Is this an electric vehicle?.....	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
18 Is this qualified Indian reservation property?.....	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
19 Type of vehicle (Preparer Use).....						
20 Section 179 expense (Preparer Use).....						
21 Qualified Property for Economic Stimulus? (Preparer Use).....	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
22 Qualified Property for Qualified Disaster Area? (Preparer Use).....	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
23 Kansas Disaster Zone? (Preparer Use).....	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
24 Qualified GO Zone Property (Preparer Use).....	<input type="checkbox"/> Reg	<input type="checkbox"/> Ext	<input type="checkbox"/> N/A	<input type="checkbox"/> Reg	<input type="checkbox"/> Ext	<input type="checkbox"/> N/A
25 Percentage for SDA? (Preparer Use).....	<input type="checkbox"/> 100%/	<input type="checkbox"/> 50%	<input type="checkbox"/> 30%	<input type="checkbox"/> No	<input type="checkbox"/> 100%/	<input type="checkbox"/> 50%
26 Elect OUT of SDA? (Preparer Use).....	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
27 Elect 30% in place of 50% SDA (Preparer Use).....	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
28 Date sold.....						
29 Date acquired, if different from line 2.....						
30 Sales price.....						
31 Expense of sale.....						
32 Gain/loss basis, if different (Preparer Use).....						
33 AMT gain/loss basis, if different (Preparer Use).....						
VEHICLE QUESTIONS	Vehicle 1		Vehicle 2		Vehicle 3	
34 Is another vehicle available for personal use?.....	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
35 Was vehicle available during off duty hours?.....	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
36 Was vehicle used primarily by a greater than 5% owner or related person?.....	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
37 Do you have evidence to support the business use claimed?.....	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
38 If yes, is the evidence written?.....	<input type="checkbox"/> Yes	<input type="checkbox"/> No				