DAY CARE <u>OR</u> OFFICE IN THE HOME EXPENSES

Please list the expenses for the following items so we can determine what your office in the home deduction will be.

Elect to use S	afe Harbor	Deduction (\$1,	500 maximum)		
Mortgage Interest	Со	st of Your Home	e		
Real Estate Taxes	FM	IV of Your Hom	e	-	
	Va	lue of Land/Ho	me	=	
Home Insurance		sis of Home		=	
Home Repairs				=	
Rent Paid for Home		rt of Home Use	d for Business		
<u>Utilities</u>	# S	# Sq. ft. used for business			
Electricity		tal sq. ft. in hon		=%	
Propane/Gas		•		_	
Water/Sewer					
Cable TV	DAY CARE INFORMATION ONLY				
Total Utilities	**	A. Total hours	used for child care		
		B. Total hours	for the year (2019)		8,760
		% of hours use	d for business		
	**	Add 1 hour for	cleaning		
TOTAL EXPENSES x TOTAL HOME EXPENSE	<u></u> %				
<u>DAY</u>	CARE INF	ORMATION O	<u>NLY</u>		
	MEALS FO	OR DAY CARE			
# Breakfast	X	\$1.33	\$		
# A.M. Snacks	X	\$0.74	\$	_	
# Lunches	X	\$2.49	\$	-	
# P.M. Snacks	X	\$0.74	\$	_	
# Suppers	X	\$2.49	\$	-	

TOTAL MEAL COST: