

DAY CARE OR 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 Safe Harbor Deduction (\$1,500 maximum)

Mortgage Interest _____
 Real Estate Taxes _____
 Home Insurance _____
 Home Repairs _____
 Rent Paid for Home _____

Cost of Your Home _____
 FMV of Your Home _____
 Value of Land/Home _____
 Basis of Home _____

Utilities

Electricity _____
 Propane/Gas _____
 Water/Sewer _____
 Cable TV _____

Part of Home Used for Business

Sq. ft. used for business _____
 Total sq. ft. in home _____ =% _____

Total Utilities _____

DAY CARE INFORMATION ONLY

**A. Total hours used for child care _____
 B. Total hours for the year (2017) 8,760
 % of hours used for business _____
 **Add 1 hour for cleaning

TOTAL EXPENSES _____
 x _____ %

TOTAL HOME EXPENSE _____

DAY CARE INFORMATION ONLY

MEALS FOR DAY CARE

_____ # Breakfast	x	\$1.31	\$	
_____ # A.M. Snacks	x	\$0.73	\$	
_____ # Lunches	x	\$2.46	\$	
_____ # P.M. Snacks	x	\$0.73	\$	
_____ # Suppers	x	\$2.46	\$	

TOTAL MEAL COST: \$ _____