

# 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 (2022) 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	\$1.40	\$	_____
_____ # A.M. Snacks	x	\$0.78	\$	_____
_____ # Lunches	x	\$2.63	\$	_____
_____ # P.M. Snacks	x	\$0.78	\$	_____
_____ # Suppers	x	\$2.63	\$	_____

**TOTAL MEAL COST:** \$ \_\_\_\_\_