

Name: _____
Print Name

Tax Year: _____

Home Dimensions

Total area of home _____ sq ft
 Area of home used exclusively for business _____ sq ft
 Number of months used for business purposes. _____ months
 How many hours did you or your spouse devote to the business Full time (or) # of hrs _____

Indirect Business Expenses (home)	Annual Cost
Mortgage interest	\$ _____
Rent Paid (if you rent)	\$ _____
Real estate taxes	\$ _____
Casualty losses	\$ _____
Home owners insurance	\$ _____
Repairs and maintenance.	\$ _____
Utilities:	
▪ Electricity	\$ _____
▪ Natural gas or heating fuel	\$ _____
▪ Trash.	\$ _____
▪ Water.	\$ _____

Additional Information or Questions

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Direct Business Expenses

Repairs and maintenance (new carpet, carpet cleaning, paint etc.) \$ _____

Total Business Expense: \$ _____

Signature is required to process this tax deduction

I understand that to deduct these expenses my employer (if not self-employed) would agree that your home is your office for your job. You should retain all original receipts, checks, bank statement to support these deductions. I declare that the information I have provided to Nancy L Shoemake CPA, P.A. is to the best of my knowledge is true, correct and complete.

Signature

Date