

Name: _____
Print Name

Tax Year: _____

Home Dimensions

Total area of home _____ sq ft
 Area of home used exclusively for business _____ sq ft
 # of months used for business purposes . . . _____ months
 Total hours used for daycare business
 (include one hour for prep and clean up) . . _____ hrs

Daycare Business

Are you a licensed daycare? Yes No
 Do you care for more than one family? . . Yes No

Home Expense

Annual Cost

Mortgage interest	\$ _____
Rent Paid (if you rent)	\$ _____
Real estate taxes	\$ _____
Casualty losses	\$ _____
Home owners insurance	\$ _____
Repairs and maintenance.	\$ _____
Utilities:	
▪ Cable/Satellite	\$ _____
▪ Electricity	\$ _____
▪ Natural gas or heating fuel	\$ _____
▪ Trash.	\$ _____
▪ Water.	\$ _____

Additional Information or Questions

Auto Expense (choose only one, either the actual or standard method)

Standard Mileage Rate

Total miles _____ miles
 Total business miles _____ miles

✓ **Business Mile Examples**

- Bank trips
- Childcare trips to park, zoo, etc.
- Continuing education
- Purchasing supplies
- Professional meetings

Actual Expenses

Year and Make of Vehicle _____
 Date purchased ____/____/____
 Total miles driven _____ miles
 Total business miles driven _____ miles
 Fuel \$ _____
 Insurance \$ _____
 Interest on auto loan or lease payments \$ _____
 License plates \$ _____
 Maintenance (oil changes, tires, washings) \$ _____
 Parking fees and tolls \$ _____

Business Income and Food Expense

Income		Food Expenses	
Gross receipts	\$ _____	Total amount paid	\$ _____
Food program	\$ _____	Number of lunches served	_____
Reimbursements	\$ _____	Number of snacks served	_____
Bank account interest	\$ _____	Number of breakfast served	_____
Other	\$ _____		

Other Expenses Paid For Daycare Use

Advertising	\$ _____	Gifts (\$25 max/person or couple)	\$ _____
Books	\$ _____	Movie rentals	\$ _____
Calendar/planner	\$ _____	Napkins	\$ _____
Computer (% of business use _____)	\$ _____	Paper towels	\$ _____
Computer games	\$ _____	Office supplies	\$ _____
Craft items	\$ _____	Parties	\$ _____
Daycare/home insurance	\$ _____	Professional subscriptions (not news paper)	\$ _____
Daycare license	\$ _____	Supplies	\$ _____
Education	\$ _____	Toilet paper	\$ _____
Entertainment	\$ _____	Toys	\$ _____
Equipment purchased for daycare	\$ _____	Water Testing	\$ _____
Furniture purchased for daycare	\$ _____	_____	\$ _____

Assets Used for Daycare That Were Owned Prior to Tax Year (complete only if you are a new client or new daycare business)

Couches	\$ _____	Music	\$ _____
Beds	\$ _____	Outdoor toys	\$ _____
Blankets	\$ _____	Oven	\$ _____
Books	\$ _____	Playpen	\$ _____
Chairs	\$ _____	Refrigerator	\$ _____
Clothes dryer	\$ _____	Stove	\$ _____
Clothes washer	\$ _____	Swing set	\$ _____
Cribs	\$ _____	Tables	\$ _____
Dishwasher	\$ _____	Towels	\$ _____
Dressers	\$ _____	Videos/DVD	\$ _____
Freezer	\$ _____	Walkers	\$ _____
High chairs	\$ _____	Water softener	\$ _____
Indoor swings	\$ _____	_____	\$ _____
Microwave	\$ _____	_____	\$ _____

Signature is required to process this tax deduction

You should retain all original receipts, checks, bank statement and mileage logs 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