# 2019 Individual Taxpayer Organizer Sole Proprietorship

(See next page for Organizer)

David M. Green Bookkeeping and Tax Service

# **2019 Individual Taxpayer Organizer**

Taxpayer						SSN			
First	M.I.	Las	5t	Em	ail		II		
Occupation		Date	e of birth			Are you nev	v to our fir	n? Y	es No
Address		City				State	Zi	p	
County		Hon	ne phone			Work or cell			
Driver's License No.				Stai	te	Issue Date	Ехр	Date	
Spouse						SSN			
First	M.I.	Las	st	Em	ail	l	II PII		
Occupation		Date	e of birth			Are you nev			es No
Address (If different from Taxpayer)		City				State	Zi	p	
County		Hon	ne phone			Work or cell			
Driver's License No.				Stai	te	Issue Date	Ехр	Date	
If you moved during 2019, enter your	previous address	s.				Date of mov	ve .		
Were you divorced or separated during Individuals who are in registered don Have you received any notice from the	nestic partnership	os (RD		ions	are not consid	deaths in the far dered married for Yes No	-		
Names of dependent children Child's full name	Social Secu	rity#	IP PIN		Date of birt	Months lived h home in 201	I		College student?
Did any of the children have income at Is it anticipated that a different taxpay  Other dependents or people who live	er will seek to cl	-			•	the children haven to the children haven 2		•	Yes No
Name	Social Security	#	IP PIN		Date of birth	Months lived in home in 2019	Relations	iin l	Іпсоте
Nume	Social Security	π	IF FIIN		Jule 0] 011111	nome in 2019	Retutions	μ	Писоте
Bank information: Use for Direct do	eposit of refund	Dire	ect debit of balaı	nce d	lue <i>Name of</i>	bank			
Checking Savings Routing tran					Account nu	ımber			
Ask your tax preparer for information	about depositing	g a ref	fund into an IRA	acco	ount or splitti	ng the deposit in	to more tha	n one a	account.

Q	uesti	ons	—All Taxpa	ayers			(Provide relate	ed statements or o	ther documentation.			
"Yo	ı" refers	to bo	th taxpayer and spor	use—enter "	?" if unsure about	a question.						
	Yes	No	Are either you or y	our spouse le	egally blind?							
	Yes	No	Did you pay or rece Paid Receive		in 2019?	Recipient's SSN		Date of divorce	or separation			
	Yes	No	Did you have healt	h insurance f	or you, your spou	se, and all depende	ents for the entire	e year?				
	Yes	No	Did you purchase l	Did you purchase health insurance through a public exchange?								
လ္	Yes	No	Will there be any significant changes in income or deductions next year, such as retirement?									
LIFESTYLE & TAXES	Yes	No	Have you paid alte	rnative minii	num tax (AMT) ir	n previous years?						
1E &	Yes	No	Did you pay anyon	e for domest	ic services in your	home?						
EST	Yes	No	Did you purchase a	new energy	-efficient car, trucl	c, or van?						
11	Yes	No	Are you involved in	n bankruptcy	, foreclosure, repo	ssession, or had an	ıy debt (includinş	g credit cards) ca	incelled?			
	Yes	No	Are you a member	of the militar	ry?		<u> </u>	<del>-</del>				
	Yes	No	Were you a citizen	of or lived in	a foreign country	?	-					
	Yes	No	Do you own or hav	e financial in	iterest in a foreign	bank or financial a	iccount?					
	Yes	No	Would you like to a					vith the IRS?				
			Designee's name		Pho	ne number		PIN (any five o	digits)			
	Yes	No	Were any children l	oorn or adop			er expenses.)					
	Yes	No	Were any children	Year in	Paid by you: Tui	tion \$	Student loan int	terest \$	Books \$			
			attending college?	college	Paid by student:	Tuition \$	Student loan int	terest \$	Books \$			
TION	Yes	No	Did you pay any tu	iition for a pr	rivate school for a	dependent or take	classes yourself?					
DUCA			Student					Amount paid \$				
1 & E			Name and address of	school								
CHILDREN & EDUCATION	Yes	No	Did you pay for chi	ild or depend	lent care so you co	ould work or go to	school? (add state	ment if needed)				
СНІГ			Name of provider					EIN or SSN				
			Address					Amount paid \$				
	Yes	No	Do you have any cl	nildren who	earned more than	\$2,200 of investmen	nt income?					
	Yes	No	Did you make any	contributions	s to a 529 plan in 2	019?						
	Yes	No	Did you, or will yo	u, contribute	any money to an	IRA for 2019?		Traditional I	RA Roth IRA			
	Yes	No	Did you roll over a	ny amounts f	rom a retirement	account in 2019?						
NTS	Yes	No	Did you sell or tran	sfer any stoc	k or sell rental or	investment propert	ty?					
STIME	Yes	No	Did you receive an	y income froi	n an installment s	ale?						
INVESTM	Yes	No	Did you have any i	nvestments b	pecome worthless	or were you a victi	m of investment	theft in 2019?				
	Yes	No	Were you granted,	or did you ex	kercise, any emplo	yee stock options o	luring 2019?					
	Yes	No	Did you receive, se	ll, send, exch	ange, or otherwise	e acquire any finan	cial interest in an	y virtual curren	cy?			
SNC	Yes	No	Did you pay any in	terest on a lo	an for a boat or R	V that has living qu	arters? If yes, pro	ovide details.				
DEDUCTIONS	Yes	No	Did you pay sales t	axes on a ma	jor purchase in 20	19, such as a vehicl	le, boat, or home	?				
DED	Yes	No	Did you make any	charitable co	ntributions in 2019	9?						
SS	Yes	No	Did you work from	a home offic	e or use your car	for business?						
BUSINESS	Yes	No	Did you receive inc	ome from a s	sharing/gig econo	omy activity (e.g. Ai	irbnb, Uber, etc.)					
BU	Yes	No	Do you own a busi	ness or an int	terest in a partners	ship, corporation, L	LC, farming acti	vities, or other v	enture?			
	Yes	No	Did you purchase o									
	Yes	No	If you sold a home,	did you clair	n the First-Time H	Iomebuyer Credit v	vhen it was purch	nased? If yes, pro	ovide details.			
номе	Yes	No	Did you refinance a									
H	Yes	No	Did you use any m					-,	ove your home?			
	Yes	No	Did you make any						J			
Sta	te infor					Nonresident	, -5, F-0.13te					
			ce during 2019 and d		, car resident							
	ool dist						Do you rent o	r own your hom	e? Rent Own			
								J J Car nom				

### **Income Worksheet**

Provide to your preparer all Forms W-2, 1099-INT, 1099-DIV, 1099-R, 1099-MISC, and other income reporting statements. Do not list dollar amounts for the following forms. Your preparer will report the appropriate amounts.

Indicate	e "T" for taxpayer, "S" for spouse, "J" for joi	int			Pro	vide additional statemen	ts if more room is needed	
Forms	W-2 — Wage and Tax Statement							
T/S	Employer name			T/S	Employ	er name		
	1)				4)			
	2)				5)			
	3)				6)			
Forms	1099-INT — Interest Income							
T/S/J	Name of issuer			T/S/J	Name o	f issuer		
	1)				4)			
	2)				5)			
	3)				6)			
Forms	1099-DIV—Dividends and Distributions							
T/S/J	Name of issuer			T/S/J	Name o	f issuer		
	1)				4)			
	2)				5)			
	3)				6)			
Forms	1099-R—Distributions From Pensions, Ann	uities, Ret	irement	or Profit	-Sharing	Plans, IRAs, Insurance C	ontracts, Etc.	
T/S	Name of issuer			T/S	Name o	of issuer		
	1)				4)	)		
	2)				5)			
	3)				6)			
If the d	istribution is before age 59½, give a reason to	o determin	e if an	exception	to penalty	y applies.		
Tax-Exe	empt Interest (such as municipal bonds—in	nclude state	ement)					
Payer		\$		Payer			\$	
Other I	ncome							
State ta	x refund		\$			Other	\$	
Unemp	loyment compensation		\$				\$	
Social S	Social Security (taxpayer)—provide SSA-1099 or RRB-1099		\$				\$	
Social S	Security (spouse)—provide SSA-1099 or RRE	B-1099	\$				\$	
Unrepo	orted tips		\$				\$	
Busines	ss income (see Sole Proprietorship Tax Organiz	er)				Stock sales	See "Sales and Exchanges	
Rental	income (see Rental Property Tax Organizer)					Sale of other property	Worksheet" below.	

# Sales and Exchanges Worksheet

Provide information about sales of stock, real estate, or other property, along with Forms 1099-B, 1099-S, or other supporting statements.

Description of property	Purchase date	Cost/basis	Sale date	Sale price
		\$		\$
		\$		\$
		\$		\$

#### Notes:

- When stock is sold, you will usually receive Form 1099-B, *Proceeds From Broker and Barter Exchange Transactions*, reporting the proceeds from the sale. However, your statement will not always provide the cost/basis information necessary to compute gain or loss. If the statement does not contain the cost/basis information, you must provide it. You may need to contact your broker for questions about cost/basis and purchase dates of your stock accounts.
- Often, "transfers" of stock or mutual funds within a brokerage account are actually sales of one type of stock and purchase of another. Even if you did not receive any cash from the transaction, you may have taxable gain or loss.
- If your stock dividends are automatically reinvested, the dividends will be taxable even though you did not receive any cash. The transaction is treated as if you had received cash and purchased additional stock. When the stock is sold, the amount reinvested over the years is taken into account. You may need to contact your broker for questions about the amount of reinvested dividends.
- If you sold property other than stock, your taxable gain or loss will be determined by your cost/basis. The cost/basis is usually the original purchase price plus improvements (the cost of repairs and maintenance are not taken into account for cost/basis).

## **Itemized Deductions Worksheet**

Deductions must exceed \$12,200 Single, \$24,400 MFJ, \$18,350 HOH, or \$12,200 MFS to be a tax benefit.

	or dependents—do	d 10% of income to be not include any expe		Charitable Contributions. If over \$500 in noncash charitable contributions, provide details of contributions. Rules require that the taxpayer retain documentation for all contributions.			
Dentists	\$	Hospitals	\$	Cash			\$
Doctors	\$	Insurance	\$	Noncash contributions (FMV). Clothing or household items must be in good used condition or better.			
Equipment	\$	Prescriptions	\$				\$
Eyeglasses	\$	Other	\$		Did you transfer funds from an IRA directly to a		
Medical miles	:	@ 20¢		charity? Yes Charitable mileage	No		\$
	Taxes Paid. Do not include taxes paid for full or partial business or rental-use property, including business use of the home.			Casualty and The	eft Losses		
State withhold	ling		Reported on W-2			cted damage or loss	
State estimate	d taxes—paid in 20	)19	\$	preparer. Yes	y-deciared disast No	er area, provide deta	ills to your tax
Real estate tax	residence		\$	1 1		ons. Miscellaneous	itemized
Real estate tax	-other		\$			mitation are no longe	
Personal prop	erty taxes		\$	on the federal return. However, these expenses may still be deductib on your state return. For use of home, auto mileage, or other job-rela			
Property tax re	efund—received ir	n 2019	\$( )	expenses, provide information on a separate sheet. Were reimbursed by your employer? Yes No			any expenses
Foreign tax pa	id		\$				
Other			\$	Dues	\$	Subscriptions	\$
Other			\$	Investment	\$	Supplies	\$
Other			\$	expenses			
	n 2019 from prior y			Job education	\$	Tax prep fees	\$
(do not includ	e interest or penalt	ies)	\$	Job seeking	\$	Tools	\$
		x paid during 2019?	Yes No	Legal fees	\$	Uniforms	\$
Did you purch Sales tax paid		oat, or home in 2019? e vaid \$ Date	Yes No	Licenses	\$	Union dues	\$
		•		Safety equipment	\$	Other	\$
or rental-use p		terest paid for full or p business use of the ho and ID numbers.		Other Deductions income limit.	s. The following	deductions are not s	ubject to a 2% of
Main home	\$	Equity loan	\$	Gambling losses	\$	Federal estate tax on IRD	\$
Second home	\$	Equity loan	\$	Impairment-	\$	Loss from box 2,	\$
Points	\$	Investment interest	\$	related expenses	Ψ	K-1, Form 1065B	4
Did you pay a	mortgage insuran	ce premium when you	ı purchased your l		Date	1	1
	1 4		· ,	<u> </u>			

## Other Deductions or Questions

Notes:

- Gambling losses are deductible only up to the amount of gambling winnings reported. A log must be kept to verify losses.
- Work clothing is not deductible if adaptable for every day wear. Exception for safety equipment, such as steel-toe boots.
- Expenses to enable individuals, who are physically or mentally impaired, to work are generally deductible.

#### Adjustments Worksheet Educator expenses. Classroom expenses of teachers, counselors, and principals. Maximum \$250 each. \$ Health savings account deduction (HSA). Self-employed SEP, SIMPLE, and qualified plans. Some contributions for 2019 may be made in 2020. Self-employed health insurance deduction. Sole proprietors, partners, and 2% S corporation shareholders if not eligible for \$ employer coverage. \$ Penalty on early withdrawal of savings. IRA deduction. For traditional IRAs. Roth IRAs are not deductible. Some contributions for 2019 may be made in 2020. Student loan interest deduction. Paid for taxpayers and dependents. Income limits apply. \$ Tuition and fees deduction. Qualified tuition and fees if not claiming education credits. Income limits apply. Moving expenses. Available only to members of the Armed Forces (or their spouses or dependents) on active duty that move pursuant to a military order and incident to a permanent change of station. Ask preparer Business expenses of reservists, performing artists, and fee-based government officials. Ask preparer

Estimated Tax Payments — Tax Year 2019							
Installment	Date paid	Federal	Date paid	State			
First		\$		\$			
Second		\$		\$			
Third		\$		\$			
Fourth		\$		\$			
Amount applied from 2018 overpayment?		\$		\$			
Total		\$		\$			

# **Tax Preparation Checklist**

Please provide the following documentation:

All Forms W-2 (wages), 1099-INT (interest), 1099-DIV (dividends), 1099-B (proceeds from broker or barter transactions), 1099-R (pensions and IRA distributions), Schedules K-1 from partnerships, S corporations, estates and trusts, and other income reporting statements, including all copies provided from the payer.

Form 1095-A (for health insurance purchased through a public exchange), Form 1095-B (for health insurance purchased outside of a public exchange), or Form 1095-C (for employer-provided health insurance coverage).

If you are a new client, provide copies of last year's tax returns.

The completed Individual Income Tax Organizer. *Note:* If you choose not to fill out the organizer, you must at least answer the "Yes" or "No" questions under "Questions—All Taxpayers."

Copy of the closing statement if you bought or sold real estate.

Mileage figures for any automobile expenses claimed, including total mileage, commuting mileage, and business mileage. Detail of estimated tax payments made, if any.

Income and deductions categorized on a separate sheet for business or rental activities.

List of itemized deductions categorized on a separate sheet for medical, taxes, interest, charitable, and miscellaneous deductions. Copy of all acknowledgement letters received from charitable organizations for contributions made in 2019.

# Tax Return Preparation

We will prepare your tax return based on information you provide. In the event your return is audited, you will be responsible for verifying the items reported. It is important that you review the return carefully before signing to make sure the information is correct. Unless otherwise stated, the services for preparation of your return do not include auditing, review, or any other verification or assurance.

# **Taxpayer Responsibilities**

- You agree to provide us all income and deductible expense information. If you receive additional information after we begin working on your return, you will contact us immediately to ensure your completed tax returns contain all relevant information.
- You affirm that all expenses or other deduction amounts are accurate and that you have all required supporting written records. In some cases, we will ask to review your documentation.
- You must be able to provide written records of all items included on your return if audited by either the IRS or state tax authority. We can provide guidance concerning what evidence is acceptable.
- You must review the return carefully before signing to make sure the information is correct.
- Fees must be paid before your tax return is delivered to you or filed for you. If you terminate this engagement before completion, you agree to pay a fee for work completed. A retainer is required for preparation of late returns.
- You should keep a copy of your tax return and any related tax documents. You may be assessed a fee if you request a copy in the
  future.

**Signatures.** By signing below, you acknowledge that you have read, understand, and accept your obligations and responsibilities. For a joint return, both taxpayers must sign.

Taxpayer Spouse Date		
	Spouse	

# **Privacy Policy**

The nature of our work requires us to collect certain nonpublic information. We collect financial and personal information from applications, worksheets, reporting statements, and other forms, as well as interviews and conversations with our clients and affiliates. We may also review banking and credit card information about our clients in the performance of receipt of payment. Under our policy, all information we obtain about you will be provided by you or obtained with your permission.

Our firm has procedures and policies in place to protect your confidential information. We restrict access to your confidential information to those within our firm who need to know in order to provide you with services. We will not disclose your personal information to a third party without your permission, except where required by law. We maintain physical, electronic, and procedural safeguards in compliance with federal regulations that protect your personal information from unauthorized access.

# Sole Proprietorship Tax Organizer Sole Proprietor General Information

Name o	of sole	proprietor				
Busines	s nam	e (if different)			EIN (if applicable)	
Busines	s add	ress (if different from home address)			,	
Princip	al bus	iness activity			Date business starte	d
Princip	al pro	duct or service			•	
Yes	No	Was the primary purpose of the busines	s activity to reali	ize a profit?		
Yes	No	Did you materially participate in the op	eration of this bu	usiness?		
Yes	No	Has the business reported any losses in	prior years?			
Accoun	iting n	nethod: Cash Accrual Other (sp	pecify)			
Yes	No	Does the business file under a calendar	year? (If no, list ti	he fiscal year.)		
Sole Pi	roprie	tor Specific Questions				
Yes	No	Did you pay any family members for se	rvices?			
Yes	No	Did you make any payments of \$600 or		ractors, attorneys, accountants, di	rectors, etc.?	
Yes	No	If Yes, did you issue Form 1099-MISC? I				600 or more.
		Name			SSN	
		Name			SSN	
Yes	No	Did you make, or do you plan to make,	any contribution	ns to a self-employed retirement p		
		Type of plan			Amount contributed	\$
Yes	No	Did you pay for your own health/denta	ıl insurance? <i>If Yo</i>	es, provide amount of premiums paid	during the year.	\$
Yes	No	Did you have any employees?	, , , , , , , , , , , , , , , , , , ,	71 31	8 5	
Yes	No	Did you have any bartering transactions	s in 2019?			
		tor Business Income				
		s or sales (if you received Forms 1099-MISC	list name of nave	or and amount senarately from oross	receints or sales)	\$
	1099-		Form 1	, , ,	\$	Ψ
		rms 1099-MISC and 1099-K received	TOTHE	1000 10	ΙΨ	\$
		allowances				\$( )
		(not included in gross receipts above)				\$
		<b>ISC.</b> You may receive Form 1099-MISC (:	instead of Form	W-2) if you are not classified as a	n employee If you rece	1 7
		e generally required to file Schedule C, P				
		-employment (SE) tax on the income.	,	, J 1		,
Sole Pi	roprie	tor Cost of Goods Sold (for manufacturers	s, wholesalers, an	nd businesses that make, buy, or sell	goods)	
		he beginning of the year		-	-	\$
Purchas	ses					\$
Cost of	labor					\$
Materia	ıls and	supplies				\$
Invento	ry at t	he end of the year				\$
Sole Pi	roprie	tor Business Expenses				
Advert		•	\$	Meals – business		\$
Bad del			\$	Office supplies		\$
Bank ch	narges		\$	Start-up costs (first year of busine	SS)	\$
Busines		ises	\$	Pension and profit sharing plans		\$
		and fees	\$	Rent or lease – car, machinery, e		\$
Contrac	t labo	$r^1$	\$	Rent or lease – other business pr		\$
		nefit programs	\$	Repairs and maintenance	1 ,	\$
		alth care plans	\$	Supplies (not included in inventor	ry cost)	\$
Enterta			\$	Taxes – payroll <sup>1</sup>		\$
Gifts			\$	Taxes – property		\$
Insuran	ice (otl	ner than health insurance)	\$	Taxes – sales		\$
Interest			\$	Taxes – state		\$
Interest			\$	Telephone		\$
Interne			\$	Utilities		\$
Legal a	nd pro	ofessional services	\$	Wages <sup>1</sup>		\$
Manage			\$	Other		\$
		es of Form W-3, Form 940, Form 941, For	m 1096, Form 10	99-MISC, and any state tax forms	filed.	

<sup>&</sup>lt;sup>2</sup>Entertainment is no longer deductible for taxes.

Other Rusing	ess Expenses – <i>L</i>		e amoiint						
Other Dusing	ess Expenses – L	ist out type and expens	\$	Т				\$	
			\$	+				\$	
			\$	+				\$	
			\$	+				\$	
			\$	+				\$	
			\$					\$	
			\$	+				\$	
			\$					\$	
			\$					\$	
			\$					\$	
Car Expense	es (use a senarate fo	orm for each vehicle)	1 4					4	
Make/Model					Date car	placed in servi	ice		
Yes No		personal use during	off-duty hours?		Dute cui	piacea in servi			
Yes No	-	spouse) have any oth		al use?	Did you	trade in your o	ar this year?	Yes No	)
Yes No	Do you have evice		ici cuis ioi personi	ar ase.	Cost of t		Trade-in v		<u></u>
Yes No	Is your evidence				\$		\$		
	1 7	Mileage			,		Actual Expense	?S	
Beginning of	year odometer	8			Gas/oil		\$		
End of year o	•				Insuran	ee	\$		
Business mile					Parking	fees/tolls	\$		
Commuting 1	mileage					tion/fees	\$		
Other mileag					Repairs		\$		
poses. Howev	ver, to use the star een either the stand	e standard mileage ra dard mileage rate, it dard mileage rate me	must be used in the	he first ye enses.	ear the ca	ır is available fo	or business. In	,	-
poses. However choose between travel Experience • Meals. You home on but	ver, to use the star een either the stand ISES can deduct the consiness. You can us	ndard mileage rate, it dard mileage rate me st of meals while trav se the actual cost of y	must be used in the thod or actual expeling away from our meals or the	• Trav	vel/Lodg	ing. You can diveling away fi	leduct the ord	inary and e for busir	necessary ex-
poses. However choose between travel Experience • Meals. You home on but	ver, to use the star een either the stand 1SES can deduct the cos Isiness. You can useal allowance per	ndard mileage rate, it dard mileage rate me st of meals while trav	must be used in the thod or actual expeling away from our meals or the	• Trav	vel/Lodg	ing. You can diveling away freeses are trans	leduct the ord	inary and e for busir are, taxi, lo	necessary ex-
poses. However choose betwee Travel Experion • Meals. You home on but standard me	ver, to use the star een either the stand 1SES can deduct the cos Isiness. You can useal allowance per	ndard mileage rate, it dard mileage rate me st of meals while trav se the actual cost of y	must be used in the thod or actual expeling away from our meals or the by location.	• Trav	vel/Lodg ses of tra	ing. You can diveling away freeses are trans	leduct the ord	inary and e for busir are, taxi, lo	necessary ex- less purposes dging, etc.
poses. However choose betwee Travel Experion • Meals. You home on but standard me	ver, to use the star een either the stand 1SES can deduct the cos Isiness. You can useal allowance per	ndard mileage rate, it dard mileage rate me st of meals while trav se the actual cost of y	must be used in the thod or actual expeling away from our meals or the by location.	• Trav	vel/Lodg ses of tra	ing. You can diveling away freeses are trans	leduct the ord	inary and e for busir are, taxi, lo	necessary ex- less purposes dging, etc.
poses. However choose betwee Travel Experion • Meals. You home on but standard me	ver, to use the star een either the stand 1SES can deduct the cos Isiness. You can useal allowance per	ndard mileage rate, it dard mileage rate me st of meals while trav se the actual cost of y	must be used in the thod or actual expeling away from our meals or the by location.	• Trav	vel/Lodg ses of tra	ing. You can diveling away freeses are trans	leduct the ord	inary and e for busir are, taxi, lo	necessary ex- less purposes dging, etc.
poses. However choose betwee Travel Experion • Meals. You home on but standard me	ver, to use the star een either the stand 1SES can deduct the cos Isiness. You can useal allowance per	ndard mileage rate, it dard mileage rate me st of meals while trav se the actual cost of y	must be used in the thod or actual expeling away from our meals or the by location.	• Trav	vel/Lodg ses of tra	ing. You can diveling away freeses are trans	leduct the ord	inary and e for busir are, taxi, lo	necessary ex- less purposes dging, etc.
poses. However choose betwee Travel Exper  • Meals. You home on but standard meals and are the control of the c	ver, to use the star een either the stand ISES can deduct the consiness. You can use eal allowance per or per diem)	ndard mileage rate, it dard mileage rate me st of meals while trav se the actual cost of y	must be used in the thod or actual expeling away from our meals or the by location.	• Trav	vel/Lodg ses of tra	ing. You can diveling away freeses are trans	leduct the ord	inary and e for busir are, taxi, lo	necessary ex- less purposes dging, etc.
poses. However choose betwee Travel Experience • Meals. You home on but standard me City visited (for the travel experience).	ver, to use the star een either the stand ISES can deduct the consiness. You can use eal allowance per or per diem)	ndard mileage rate, it dard mileage rate me st of meals while trav se the actual cost of y	must be used in the thod or actual expeling away from our meals or the to by location.  # of days in city	• Trav pen Incl	vel/Lodg ses of tra uded exp sited (for p	ing. You can diveling away from the diem.	leduct the ord	inary and e for busir are, taxi, lo	necessary ex- less purposes dging, etc.
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number of years. Depreciation is the annual deduction that allows you to recover the cost or other basis of your business property over a certain number of years. Depreciation starts when you first use the property in your business. It ends when you either take the property out of service, deduct all your depreciable cost or basis, or no longer use the property in your business. The IRS has outlined a useful life (a set number of years) for most assets.

Equipment Sold or Disposed of During Year				
Asset	Date out of service	Date sold	Selling price/FMV	Trade-in?
			\$	
			\$	
			\$	
			\$	

**Disposition of Property.** A disposition of property occurs when you sell property for cash or other property, you exchange property for other property, you transfer property to satisfy a debt, you abandon property, your bank forecloses or repossesses your property, or your property is damaged, destroyed, or stolen and you receive property or money in payment.

#### **Business Use of the Home**

Area of home must be exclusively used for business except for storage or day care. *Note:* Managing rental activities or investments does not qualify for business use of the home.

All Taxpayers	For Day Care Only		
A) Business use area (square footage)		1) Hours used for day care	
B) Total area of home (square footage)		2) Total hours in year	8,760 hrs.

Enter below only the expenses paid during the period the home was used for business.

Direct expenses benefit only the business use portion of the home. This includes painting or repairs exclusively for the business area.

Indirect expenses are for keeping up and running the entire home, such as mortgage interest and property taxes.

If you bought or sold your home during 2019, copy this worksheet and fill out one for each home.

	Direct	Indirect		Direct	Indirect
Mortgage interest	\$	\$	Repairs and maintenance	\$	\$
Property taxes	\$	\$	Utilities	\$	\$
Insurance	\$	\$	Other	\$	\$
Rent	\$	\$	Other	\$	\$
Depreciation of the Home					
Lower of cost or fair market value of home		\$	Improvements?	Yes No	
Value of land		\$	Casualty losses in 2019?	Yes No	

#### 1) Exclusive Use Test—Business Use of Home

The exclusive use test is met if an area of the home is used only for business. The area can be a room or other separately identifiable space. The space does not need to be marked off by a permanent partition. This test is not met if you use the area both for business and for personal purposes, such as a den used for business during the day and TV viewing during the evening.

The exclusive use test is not required for:

- An area used on a regular basis for storage of inventory or product samples.
- A home used as a day care facility.

Storage of inventory or product samples—exception to exclusive use test. If you use part of a home for business to store inventory or product samples you are not required to meet the exclusive use test. However, you must meet all the following tests.

- You are in the business of selling products at wholesale or retail.
- The inventory or product samples are kept in the home for use in the business.
- You home is the only fixed location of the business.
- The storage space is used on a regular basis.
- The storage space is a separately identifiable space suitable for storage.

#### 2) Regular Use Test—Business Use of Home

The regular use test means you must use a specific area of the home for business on a regular basis. Incidental or occasional business use is not regular use. All facts and circumstances are considered in determining whether the business use is regular.

#### 3) Trade or Business Use Test—Business Use of Home

To satisfy the trade or business use test, the portion of the home used for business must be used in connection with a trade or business. If the business use is for a profit-seeking activity that is not a trade or business, the deduction is not allowed.

#### 4) Principal Place of Business Test—Business Use of Home

A trade or business can have more than one location. To qualify for a business use of home deduction, the home must be the principal place of business for that trade or business. To make this determination, the following are considered.

- The relative importance of the activities performed at each place where business is conducted, and
- The amount of time spent at each place where business is conducted.

A home office qualifies under this test if:

- The home office is used exclusively and regularly for administrative or management activities of the trade or business.
- There is no other fixed location where substantial administrative or management activities are conducted.

#### **Self-Employment (SE) Tax**

- SE tax is a Social Security and Medicare tax primarily for individuals who are self-employed. It is similar to the Social Security and Medicare tax withheld from the pay of most wage earners. Your payments of SE tax contribute to your coverage under the Social Security system. Social Security coverage provides you with retirement benefits, disability benefits, survivor benefits, and hospital insurance (Medicare) benefits.
- You must pay SE tax if your net earnings from self-employment were \$400
  or more, or you had church employee income of \$108.28 or more. The SE
  tax rules apply no matter how old you are and even if you are already
  receiving Social Security or Medicare benefits.
- The SE tax rate on net earnings is 15.3% (12.4% for Social Security plus 2.9% for Medicare). Only the first \$132,900 (2019) of combined wages, tips, and net earnings is subject to the 12.4% Social Security part of SE tax.