## 2020 Individual Taxpayer Organizer



# BRANDT & ASSOCIATES, P.C.

**CERTIFIED PUBLIC ACCOUNTANT** 

401 Liberty Street, Morris, IL 60450

Hours: Mon-Fri 9a-5p Extended Tax Time Hours (P) 815.513.9184 (F) 815.585.4715 email: office@brandtcpa.com web: brandtcpa.com

Taxpayer						SSN			
First	M.I.	Last		Emai	il	I	IP PIN		
Occupation		Date o	of birth			Are you nev	v to our firm?	Yes	No
Address		City				State	Zip		
County		Home	e phone			Work or cell			
Driver's License No.				State	Issue D	Date	Exp. Date		
Spouse						SSN			
First	M.I.	Last		Emai	il	I	IP PIN		
Occupation		Date o	of birth			Are you nev	v to our firm?	Yes	No
Address (If different from Taxpayer)		City				State	Zip		
County		Home	e phone			Work or cell	· ·		
Driver's License No.		-		State	Issue D	Date	Exp. Date		
If you moved during 2020, enter your	previous address	3.				Date of mov	re		
Marital status at 12/31/20: Single Were you divorced or separated durin Individuals who are in registered don Have you received any notice from th	ng the year? Ye nestic partnership	s (RDP	o Ps) and civil uni	We ions a	re there any d re not conside	Domestic Partne leaths in the fan ered married for Yes No	nily? Yes	Uns No rposes	
Names of dependent children					past year.	Months lived	in Relationship	to C	College
Child's full name	Social Secur	rity #	IP PIN		Date of birth	home in 2020	) taxpayer	st	udent?
Did any of the children have unearned Is it anticipated that a different taxpay			•			the children ha		Yes No	s No
Other dependents or people who live				e as u	len depender	it for tax year 20	020: 165	NU	
						Months lived in			
Name	Social Security	#	IP PIN	Di	ate of birth	home in 2020	Relationship	Inc	come
Bank information: Use for Direct d	eposit of refund	Direc	t debit of balar	nce du	e Name of ba	ınk			
Checking Savings Routing tra	-				Account num				
Ask your tax preparer for information	about depositing	g a refu	nd into an IRA	accou	int or splitting	g the deposit int	to more than or	ne acco	unt.

#### Questions — All Taxpayers (Provide related statements or other documentation.) "You" refers to both taxpayer and spouse—enter "?" if unsure about a question. Are either you or your spouse legally blind? Yes No No Did you pay or receive alimony in 2020? Recipient's SSN Date of divorce or separation Yes Paid Received \$ Did you purchase health insurance through a public exchange? Yes No Will there be any significant changes in income or deductions next year, such as retirement? Yes No Yes No Have you paid alternative minimum tax (AMT) in previous years? LIFESTYLE & TAXES Yes Did you pay anyone for domestic services in your home? No Yes No Did you purchase a new energy-efficient car, truck, or van? Yes No Are you involved in bankruptcy, foreclosure, repossession, or had any debt (including credit cards) cancelled? Are you a member of the military? State of residency Yes No Yes Foreign country No Were you a citizen of or lived in a foreign country? Do you own or have financial interest in a foreign bank or financial account? Balance exceeds \$50,000 Yes No Yes No Yes Did you receive an economic impact payment? If so, provide the amount. No Would you like to allow your tax preparer or another person to discuss your return with the IRS? Yes No PIN (any five digits) Designee's name Phone number Were any children born or adopted in 2020? (Provide statement for other expenses.) Yes No Were any children Paid by you: Tuition \$ Student loan interest \$ Books \$ Yes No Year in attending college? college Paid by student: Tuition \$ Student loan interest \$ Books \$ CHILDREN & EDUCATION Yes Did you pay any tuition for a private school for a dependent or take classes yourself? No Student Amount paid \$ Name and address of school Did you pay for child or dependent care so you could work or go to school? (add statement if needed) Yes No Name of provider EIN or SSN Address Amount paid \$ Do you have any children who have unearned income of \$1,100 or more? Yes No Yes No Did you make any contributions to a 529 plan in 2020? Yes No Did you, or will you, contribute any money to an IRA for 2020? Traditional IRA Roth IRA Yes No Did you roll over any amounts from a retirement account in 2020? INVESTMENTS Yes No Did you sell or transfer any stock or sell rental or investment property? Yes No Did you receive any income from an installment sale? Yes Did you have any investments become worthless or were you a victim of investment theft in 2020? No Were you granted, or did you exercise, any employee stock options during 2020? Yes No Did you receive, sell, send, exchange, or otherwise acquire any financial interest in any virtual currency? Yes No Yes No Did you, or do you plan to, contribute money before April 15, 2021 to a HSA for 2020? If yes, provide details. DEDUCTIONS Did you pay any interest on a loan for a boat or RV that has living quarters? If yes, provide details. Yes No Did you pay sales taxes on a major purchase in 2020, such as a vehicle, boat, or home? Yes No Yes Did you make any charitable contributions in 2020? If yes, provide details. No Did you work from a home office or use your car for business? No Yes BUSINESS Yes No Did you receive income from a sharing/gig economy activity (e.g. Airbnb, Uber, etc.) Do you own a business or an interest in a partnership, corporation, LLC, farming activities, or other venture? Yes No Yes No Did you purchase or sell a main home during the year? If yes, provide closing statement. Yes No If you sold a home, did you claim the First-Time Homebuyer Credit when it was purchased? If yes, provide details. HOME Yes No Did you refinance a mortgage or take a home equity loan? If yes, provide closing statement. Did you use any mortgage loan proceeds for purposes other than to buy, build, or substantially improve your home? Yes No Did you make any new energy-efficient improvements to your home? If yes, provide details, Yes No Part-year resident School district State information Full-year resident Nonresident States of residence during 2020 and dates Do you rent or own your home? Rent Own

#### **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.

-	e "T" for taxpayer, "S" for spouse, "J" for jo			1		vide additional statemen	nts if more room is needed		
Forms	W-2—Wage and Tax Statement								
T/S	Employer name			T/S	Employ	er name			
	1)				4)	<u>4</u> )			
	2)				5)				
	3)				6)	,			
Forms	1099-INT—Interest Income								
T/S/J	Name of issuer			T/S/J	Name of	f issuer			
	1)				4)				
	2)				5)				
	3)				6)				
Forms	1099-DIV—Dividends and Distributions								
T/S/J	Name of issuer			T/S/J	Name of	f issuer			
	1)				4)				
	2)				5)				
	3)				6)				
Forms	1099-R—Distributions From Pensions, Ann	nuities, Ret	irement	t or Profit	-Sharing I	Plans, IRAs, Insurance C	ontracts, Etc.		
T/S	Name of issuer			T/S	Name of	f issuer			
	1)				4)				
	2)				5)				
	3)				6)				
If the d	istribution is before age 59½, give a reason t	to determin	e if an e	exception	to penalty	/ applies.			
Tax-Ex	empt Interest (such as municipal bonds—in	nclude state	ement)						
Payer		\$		Payer			\$		
Other 1	income								
State ta	x refund		\$			Other	\$		
Unemp	loyment compensation		\$				\$		
^	Security (taxpayer)—provide SSA-1099 or F	RRB-1099	\$				\$		
Social S	Security (spouse)—provide SSA-1099 or RR	B-1099	\$				\$		
Unrepo	orted tips		\$				\$		
Busine	ss income (see Sole Proprietorship Tax Organiz	zer)	1			Stock sales	See "Sales and Exchanges		
Rental	income (see Rental Property Tax Organizer)					Sale of other property	Worksheet" below.		
Sale	es and Exchanges Worksh	ieet							
	e information about sales of stock, real estat		propert	v along w	vith Forms	1099-B 1099-S or other	supporting statements		
110/10	- mornation about sales of stock, real estat	c, or orier ]	Propert	<i>J,</i> along w		, 10, 7 D, 10, 7-0, 01 011101	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 \$12,400 Single, \$24,800 MFJ, \$18,650 HOH, or \$12,400 MFS to be a tax benefit.

include cost for dependents—do not include any expenses that were			<b>Charitable Contributions.</b> 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 contribu				
Equipment	\$	Prescriptions	\$		items must be in g	\$			
Eyeglasses	\$	Other	\$		Did you transfer f	<i>.</i>			
Medical miles		@ 17¢	1		charity? Yes	No		\$	
Taxes Paid. D	o not include taxes	s paid for full or partia	al busine	ess or	Charitable mileag				
		siness use of the hom			Casualty and Th				
State withhold	ing		Report	ed on W-2	If you suffered any sudden, unexpected damage or loss of property, or a theft in a federally-declared disaster area, provide details to your tax				
State estimate	d taxes—paid in 2	020	\$		preparer. Yes		ster area, provide deta	ans to your tax	
Real estate tax	—residence		\$		Miscellaneous I	emized Deduc	ions. Miscellaneous	itemized	
Real estate tax	—other		\$		deductions subject to the 2% AGI limitation are no longer deductible on the federal return. However, these expenses may still be deductible on your state return. For use of home, auto mileage, or other job-related expenses, provide information on a separate sheet. Were any expenses				
Personal prop	erty taxes		\$						
Property tax r	efund—received in	n 2020	\$(	)					
Foreign tax pa	id		\$		reimbursed by yo		Yes No		
Other			\$		Dues	\$	Subscriptions	\$	
Other			\$		Investment	\$	Supplies	\$	
Other			\$		expenses				
Balance paid i	n 2020 from prior y	vear state returns			Job education	\$	Tax prep fees	\$	
(do not includ	e interest or penalt	ies)	\$		Job seeking	\$	Tools	\$	
		x paid during 2020?	Yes	No	Legal fees	\$	Uniforms	\$	
Did you purch Sales tax paid		oat, or home in 2020? e paid \$ Date	Yes	No	Licenses	\$	Union dues	\$	
					Safety equipment	\$	Other	\$	
or rental-use p		terest paid for full or j business use of the ho and ID numbers.			Other Deduction income limit.	<b>15.</b> 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	-	K-1, Form 1065B	-	
Did you pay a	mortgage insuran	ce premium when you	ı purcha	ased your h	ome? Amount \$	Dat	2		

### **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**

expenses of teachers, counselors, and principals. Maximum \$250 each. \$
m (HSA). Some contributions for 2020 may be made in 2021. \$
<i>ud qualified plans.</i> Some contributions for 2020 may be made in 2021. \$
<i>deduction.</i> Sole proprietors, partners, and 2% S corporation shareholders if not eligible for \$
savings. \$
IRAs. Roth IRAs are not deductible. Some contributions for 2020 may be made in 2021. \$
Paid for taxpayers and dependents. Income limits apply. \$
lified tuition and fees if not claiming education credits. Income limits apply. \$
ly to members of the Armed Forces (or their spouses or dependents) on active duty that order and incident to a permanent change of station.
performing artists, and fee-based government officials. Ask prepare
xpayers who take the standard deduction. Up to \$300 per return. \$
performing artists, and fee-based government officials. Ask

### Estimated Tax Payments — Tax Year 2020

		1	1	1
Installment	Date paid	Federal	Date paid	State
First		\$		\$
Second		\$		\$
Third		\$		\$
Fourth		\$		\$
Amount applied from 2019 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 2020.

### **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.

Spouse

Date

### **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

\$

			, 0 ,	
Sole Propr	etor General Information			
Name of so	e proprietor			
Business na	me ( <i>if different</i> )		EIN (if applicable)	
Business ad	dress (if different from home address)		1	
Principal bu	siness activity	Date business started	Date business closed	1
Principal pr	oduct or service			
Yes No	Was the primary purpose of the business activity to re-	alize a profit?		
Yes No	Did you materially participate in the operation of this	business?		
Yes No	Has the business reported any losses in prior years?			
Accounting	method: Cash Accrual Other (specify)			
Yes No	Does the business file under a calendar year? (If no, list	t the fiscal year.)		
Sole Propr	etor Specific Questions			
Yes No	Did you pay any family members for services?			
Yes No	Did you make any payments of \$600 or more to subco	ntractors, attorneys, accountants, dire	ectors, etc.?	
Yes No	If Yes, did you issue Form 1099-NEC? List name and soc	cial security number (SSN) for each perso	m to whom you paid \$6	500 or more.
	Name	S	SN	
	Name	S	SN	
Yes No	Did you make, or do you plan to make, any contributi	ons to a self-employed retirement pla	n?	
	Type of plan	A	Amount contributed	\$
Yes No	Did you pay for your own health/dental insurance? If	Yes, provide amount of premiums paid d	uring the year.	\$
Yes No	Did you have any employees?			
Yes No	Did you have any bartering transactions in 2020?			
Sole Propr	etor Business Income			
Gross receip	ots or sales (if you received Forms 1099-NEC, list name of pay	er and amount separately from gross rece	eipts or sales)	\$
Form 109	9-NEC \$ Form	n 1099-K	\$	
Total of all	Forms 1099-NEC and 1099-K received			\$
Returns and	allowances			\$ (

Other income (not included in gross receipts above)

Form 1099-NEC. You may receive Form 1099-NEC (instead of Form W-2) if you are not classified as an employee. If you receive Form 1099-NEC, you are generally required to file Schedule C, Profit or Loss From Business, claim any expenses associated with the income received, and must pay self-employment (SE) tax on the income.

<b>Sole Proprietor Cost of Goods Sold</b>	COVID-	19 Rela	ated						
(for manufacturers, wholesalers, and businesses that make, buy, or sell goods)		Yes	No	Did you receive an Economic Injury Disaster Loan or Emergency Adv through the SBA?					
Inventory at the beginning of the year	\$	Yes No Did you delay payment of			employer payroll taxes?				
Purchases	\$	Yes	No	Were you eligible to receive a tax credit for sick leave due to COVID					
Cost of labor	\$	Yes	No	Were you eligible to receive a tax credit for paid family leave due to COVID-19?					
Materials and supplies	\$	Yes	No	Did you receive a payroll t	ax credit f	or a business suspension o	r slowdown?		
Inventory at the end of the year	\$								
Sole Proprietor Business Expenses	;			•					
Advertising	\$	Interest -	– mortą	gage	\$	Repairs and maintenance	\$		
Bad debts (Accrual Basis Only)	\$	Interest -	- other		\$	Supplies (not included in inventory cost)	\$		
Bank charges	\$	Internet	service	2	\$	Taxes – payroll <sup>1</sup>	\$		
Business licenses	\$	Legal an	d profe	essional services	\$	Taxes – property	\$		
Commissions and fees	\$	Manager	ment fe	ees	\$	Taxes – sales	\$		
Contract labor <sup>1</sup>	\$	Meals -	busine	SS	\$	Taxes – state	\$		
Employee benefit programs	\$	Office su	pplies		\$	Telephone	\$		
Employee health care plans	\$	Start-up	costs (	first year of business)	\$	Utilities	\$		
	\$	Pension	and pr	ofit sharing plans	\$	Wages <sup>1</sup>	\$		
Gifts	\$	Rent or l	ease –	car, machinery, equipment	\$		\$		
Insurance (other than health insurance)	\$	Rent or l	ease –	other business property	\$		\$		

<sup>1</sup> Provide copies of Form W-3, Form 940, Form 941, Form 1096, Form 1099-NEC, Form 1099-MISC, and any state tax forms filed. <sup>2</sup> Entertainment is no longer deductible for taxes.

	-	ist out type and expen	\$				\$	
			\$				\$	
			\$				\$	
			\$				\$	
			\$				\$	
			\$				\$	
			\$				\$	
			\$				\$	
			\$				\$	
			\$				\$	
Car Expense	S (use a separate fo	orm for each vehicle)	•					
Make/Mode	-			Date	car placed in serv	vice		
Yes No		personal use during	g off-duty hours?		1			
Yes No		spouse) have any of		al use? Did	you trade in your	car this year?	Yes N	0
Yes No	· · · · ·		1		of trade-in	Trade-ii	n value	
Yes No	Is your evidence	written?		\$		\$		
		Mileage				Actual Expen	ses	
Beginning of	year odometer			Gas	/oil	\$		
End of year c				Insu	rance	\$		
Business mile	eage			Park	ing fees/tolls	\$		
Commuting	mileage			Regi	stration/fees	\$		
Other mileag	je			Repa	airs	\$		
choose betwe <b>Fravel Expe</b> • Meals. You	ver, to use the star een either the stand nses can deduct the cos	idard mileage rate, i dard mileage rate mo st of meals while trav	ethod or actual exp veling away from	he first year th enses. • Travel/Le	e car is available	for business. I deduct the or	n later years	s, you can the necessary e
<ul> <li>choose betwee</li> <li>Travel Expension</li> <li>Meals. You home on bu standard m</li> </ul>	ver, to use the star een either the stand <b>ISES</b> can deduct the consiness. You can us eal allowance per	idard mileage rate, i lard mileage rate me	t must be used in the thod or actual expression welling away from your meals or the y by location.	• Travel/Lo penses o Included	e car is available odging. You can f traveling away : expenses are tran	for business. I deduct the or from your hos	n later years dinary and me for busin fare, taxi, lo	necessary e ness purpose odging, etc.
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<ul> <li>choose betwee</li> <li>Travel Expension</li> <li>Meals. You home on bu standard m</li> </ul>	ver, to use the star een either the stand <b>ISES</b> can deduct the consiness. You can us eal allowance per	Idard mileage rate, i dard mileage rate mo st of meals while tra- se the actual cost of	t must be used in the thod or actual expression welling away from your meals or the y by location.	• Travel/Lo penses o Included	e car is available odging. You can f traveling away : expenses are tran	for business. I deduct the or from your hos	n later years dinary and me for busin fare, taxi, lo	necessary e ness purpose odging, etc.
choose betwee <b>Travel Exper</b> • Meals. You home on bu standard m	ver, to use the star een either the stand <b>ISES</b> can deduct the consiness. You can us eal allowance per	Idard mileage rate, i dard mileage rate mo st of meals while tra- se the actual cost of	t must be used in the thod or actual expression welling away from your meals or the y by location.	• Travel/Lo penses o Included	e car is available odging. You can f traveling away : expenses are tran	for business. I deduct the or from your hos	n later years dinary and me for busin fare, taxi, lo	necessary e ness purpose odging, etc.
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**Depreciation**. 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.

Value of land

product samples.

2111 1uxpuyers	Tor Day care only	Tor Duy Cure 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.		

For Day Care Only

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.

If you bought of sold your home during 2017, copy this worksheet and infour 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			

#### 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. 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.

Yes

No

- 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.

Casualty losses in 2020?

- 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 exclusive use test is not required for:

• A home used as a day care facility.

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

· An area used on a regular basis for storage of inventory or

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.

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.
- The relative importance of the activities performed at each place where business is conducted, andThe amount of time spent at each place where business is
- The amount of time spent at each place where business is 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 \$142,900 (2020) of combined wages, tips, and net earnings is subject to the 12.4% Social Security part of SE tax.