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			If anything cha	anged from p	rior year, ch	eck this				
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		State Info	ormation				
If rent paid:	Amount	No Months		W / Heat Y/N			
	\$		_		_		
	\$		_		_		
				17	N		
Health/Long Term Care Ins Amount Paid for health insura				Yes	No	1	
Amount Paid for health insura							
Amount Paid for health insura	ance - employer did not contrib	ute]	
Note: If health insurance p	nomiums are deducted are to	y disposand					
Note: If health insurance pr	-	timated Ta	v Dovmon	ta			
	Federal	illiateu 1a	ix I aymen	115	St	ate	
Prior Year - Jan 16, 2019	Futia		Prior Year - Jan 1	16, 2019	51	atc	
1st Qtr - Apr 17, 2019		_	1st Qtr - Apr 17,	,			
2nd Qtr - Jun 15, 2019		_	2nd Qtr - Jun 15,				
3rd Qtr - Sep 17, 2019		_	3rd Qtr - Sep 17,				
4th Qtr - Jan 15, 2020		_	4th Qtr - Jan 15, 2				
Total		_	Total	2020			
		=					
]	Itemized D	eductions				
Medical Dental Expenses			Charitable	Contribution	s (Receipts R	equired)	
Medical Ins Prem (pd by you)			Church Cash	Contributions			
Long Term Care Insurance			_	You must have	receipts for cash	contributions	
Prescription Drugs			Other Cash C	ontributions			
Glasses, Contacts			Donated Good	ls			
Hearing Aids, Batteries			-		ipts from organiz		
Medical Equipment, Supplies			Organization	donated to			
Hospital			Address				
Doctor, Dentist, Specialist			<u> </u>				
Medical Miles		Miles	Volunteer mil	eage			Miles
Other			-				
Real Estate Taxes Paid	Bring Tax 1	Bills	Miscellaneo	us Expenses			
Real Estate Taxes -Prin Residence	-		Gambling Los				
Other Real Estate Taxes			Other				
Personal Property Tax			Other				
Sales Tax			Other				
Other			_				
Mortgage Interest Expense							
Mort Int Paid - Bring 1098			-				
Equity Line of Credit			-				
Use of Equity Loan			-				
Interest pd to others - no 1098			-				
Paid to: Name							
Address							
C C N- /EIN							
Investment Interest							
* Gambling losses require doc	numented substantiation		_				
Gambing losses require doe	substantiation.	Day Care	Expenses				
Children cared for		Duj cure	Linpenses				
Provider 1			Provider 2				
Address			Address				
Soc Sec No/EIN	Amt Pd		Soc Sec No/E	IN		Amt Pd	

Schedule C Business Income and Expe	INSES The IRS has determined that small business owners are very likely candidates to make	
mistakes applying the tax law. Accordingly, anticipate more a	udits for business owners in the near future. Please review the following information carefully	y to
assure compliance with the law.		
Business Name		
Total Sales \$	Owner Taxpayer Spouse	
Holding deposits until next year is <i>not</i> a tax planning item. IF following the year end, photo copy all checks being deposits to	RS requires all receipt to be reported in the year received. If there are absorbent deposits that o to confirm the payment dates.	occur
Credit Cards - Do you accept credit cards from y	our customers? If you have transactions exceeding \$20,000 and more than	200
transactions, your credit card service is required t	o send a 1099-K to you. Bring all 1099's to your appointment (1099-K's,	
1099-Misc)		
During 2018, did you refinance using your prima	ry resident to secure a business loan? Bring all Paperwork.	
Balance on note prior to re-finance:	Balance on Note at 12-31:	
	Expenses	
Advertising	*Repairs & Maintenance	
Business Mileage #	Supplies	
Commissions	Taxes	
Contract Labor	**Telephone	
Dues & Subscriptions	Tools & Equipment	
Insurance (Other than Health Ins)	Travel Expenses	
Interest - Mortgage	Uniforms	
Interest - Other	Utilities	
Legal & Professional Fees	Vehicle Expense	
Meals & Entertainment	Wages	
Office Expense	Employee Health Ins (see back)	
Rent - Building	Other	
Rent - Equipment	Other	
	ance add value to the property, prolong, useful life, or adapt it to new uses?	? If
so, these amounts can be depreciated. Bring in de	escription of alteration, cost, and in service date.	
**Cell Phones: Does the business blend itself in	such a manner that a cell phone is an ordinary and necessary component of	f the
business? Is the cell phone on your business card	? Is the cell phone number listed on your letterhead and/or yellow page	
advertising?		
	Cost of Goods Sold	
Beginning Inventory		
Purchases		
Less Personal Use	()	
Direct Labor		
Supplies		
Other		
Ending Inventory		
	for business purchases? Payment by credit card is considered to ba a paym	
-	when the credit card company is paid. Please bring a copy of December 31st	t
credit card statement with business purchases.		
Schedule C Home Office Expenses		
Is a home office used for administrative of	or management activities for business?	
Total Square Feet of Home	Purchase Price of Residence	
Total Square Feet of Office	Bring in Real Estate Tax Bill for 2018	
Simplified method available. Square footage of o	ffice space x \$5 for maximum of \$1,500 deduction.	
Expenses: Mortgage Insurance	Property Insurance	
Real Estate Taxes	Utilities	

		Assets Purchased	
Date	Amount	Description	Business Percentage

		Assets Disposed	
Date	Amount	Description	Business Percentage

Form 1099-MISC Required. Paid more than \$600 to one vendor for rent or services.

If you have are required to issue 1099-MISC, call the office immediately. 1099-MISC must be filed with the IRS by January 31st. If not filed timely, severe penalties apply.

Vendor Name	Address	EIN	Amount Paid

Schedule E Rental Income and Expenses The IRS has determined that over 60% of Schedule E's are prepared incorrectly. Schedule E has been revised to assure the laws are applied correctly. Please review the following information carefully to comply with the tax law.

Type of Property: Choose From:	Single Family Mutli Family	Vacation/Short Term Rental Commercial	Land Royalties	Self-Rental Other
Rental Property	Property 1	Property 2	Property 3	Property 4
Address				
City, State, Zip Type of Property (from				
above)				
Fair Market Rental Value				
Fair Rental Days /Personal				
* Pers	onal use days include any days	s in which charging less than fa	air market rental value to relat	ted party.
location when determini	ing the fair market rental value	t to received from an unrelated a. If renting to related party, fair ined?		
Rent Received	\$	\$	\$	\$
Expenses				
Advertising				
Cleaning & Maint				
Commissions Paid				
Insurance				
Insurance Interest - Mortgage				
Interest - Mortgage				
Interest - Mortgage Interest - Other				
Interest - Mortgage Interest - Other Legal & Prof Fees				
Interest - Mortgage Interest - Other Legal & Prof Fees Management Fees				
Interest - Mortgage Interest - Other Legal & Prof Fees Management Fees Repairs				
Interest - Mortgage Interest - Other Legal & Prof Fees Management Fees Repairs Supplies				
Interest - Mortgage Interest - Other Legal & Prof Fees Management Fees Repairs Supplies Taxes	Miles	s Miles	Miles	Mile
Interest - Mortgage Interest - Other Legal & Prof Fees Management Fees Repairs Supplies Taxes Utilities		s Miles	Miles	Mile
Interest - Mortgage Interest - Other Legal & Prof Fees Management Fees Repairs Supplies Taxes Utilities Vehicle Mileage	Miles	s Miles	Miles	Mile

Form 1099-MISC Required. Paid more than \$600 to one vendor for rent or services.

If you have are required to issue 1099-MISC, call the office immediately. 1099-MISC must be filed with the IRS by January 31st. If not filed timely, severe penalties apply.

Vendor Name	Address	EIN	Amount Paid

FARM INCOME & EXPENSE WORKSHEET

Name_____

Employer ID #_____

A: Principal Product

B: Activity Code

1 Sale of livestock purchased for resale Part II Expenses:

(purchased feeder stock)

Item	Amt Recv'd	Cost

2 Sale of livestock, produce, grains, and other raised products

Item		Amount
Raised feeder cattle		
(not cull cows see #4)	
Calves		
Sheep		
Swine		
Poultry		
Dairy Products		
Eggs		
Wool		
Tobacco		
Vegetables		
Soybeans		
Corn		
Other Grains		
Hay		
Straw		
Fruit & Nuts		
Total to Schedule	F, Line 4	
3a Patronage divide		
4a Total agriculture		
5a Commodity CR		
5b CCC Loan Forfe	ited or	
Repaid w/ Certif	icates	
6 Crop Insurance		
7a Custom & Mach	ine Hire	
8a Other Income:		
Federal Gas Tax		
State Gas Tax C		
Total to Schedule	F, Line 9	

1	Item	Amount
10	Vehicle miles	miles
	Chemicals	mines
	Conservation Expenses	
	Custom Hire (Machine Work)	
	Depreciation & Section 179	_
	Employee Benefit Plans	
	Feed Purchase	_
	Fertilizers & Lime Freight & Trucking	
	Gasoline, Fuel, & Oil	
	Insurance (f/s)	
	Mortgage Interest paid	
	Other Interest	
	Labor Hired	
	Pension & Profit Sharing	
	Rent - Machinery & Equipment	
	Rent - Other (land, animals, etc)	
	Repair & Maintenance of Bldg/ Mach	
26	Seed & Plants	
27	Storage & Warehouse	
28	Supplies	
29	Taxes (f/s)	
30	Utilities (f/s)	
31	Vet Fees/Breeding/Medicine	
	Other Expenses: (specify)	
Var	ious Expenses:	
	s & Subscriptions	
	lls for Labor	
	bloyee Health Insurance	
	her's Health Insurance	+
Owi		+
<u> </u>		
		_
Tot	al Various Expenses	

4.	. Sale of livestock used for dairy or breeding purposes				
		(Both RAISE	D AND PURCHA	SED cull cows)	
	Item	Date Sold	Sale Price	Date Acquired	Cost

Item	Date Sold	Sales Price	Date Acquired	Cost

6. Machinery, Equipment & Livestock Bought

Item	New / Used	Date	Cost	Item Traded	Cash Pd "Boot'