\*\*\* NOTE: If this is the first year we are preparing your returns please provide your prior year's depreciation schedule (or if the property was purchased last year provide the purchase document) \*\*\*

1040USFarm Income (Schedule F/Form 4835)	No.	] 1
Please enter all pertinent amounts.		
GENERAL INFORMATION		
Principal product		
Employer ID number		
Agricultural activity code		
Accounting method: 1=cash, 2=accrual		
1=spouse, 2=joint		
1=farm rental (Form 4835)		
Type of rental property (farm rental only): 1=land, 2=self-rental, 3=other		
1=crop insurance proceeds election If required to file Form(s) 1099, did you or will you file all required Form(s) 1099: 1=yes, 2=no		
1=did not "materially participate" (Schedule F only)		
1=did not actively participate (Farm rental only)		
1=real estate professional (farm rental only)		
1=single member limited liability company		
% of ownership if not 100% (.xxxx) (Farm rental only)		
Cash method:		
Sales of livestock and other resale items	- Î	
Cost or basis of livestock or other resale items		
Sales of products raised	5	
Accrual method:		
Sales of livestock, produce, etc	1	
Beginning inventory of livestock, etc	-	
Cost of livestock, etc. purchased		
Ending inventory of livestock, etc		
Other farm income:	<u>.</u>	
Total cooperative distributions		
Taxable cooperative distributions		
Total agricultural program payments (other than CRP)		
Taxable agricultural program payments (other than CRP)		
Total conservation reserve program payments		
Taxable conservation reserve program payments		
Commodity credit loans reported under election		
Total commodity credit loans forfeited or repaid		
Taxable commodity credit loans forfeited or repaid		
Total crop insurance proceeds received in tax year		
Taxable crop insurance proceeds received in tax year		
Taxable crop insurance proceeds deferred from prior year		
Custom hire (machine work) income not included above		

ORGANIZER Farm Income (Sch. F/Form 4835) (cont.) US 19 p2 1040 No. Please enter all pertinent amounts. FARM INCOME (continued) Other income: FARM EXPENSES Car and truck expenses (not entered elsewhere) ..... Chemicals..... Conservation expenses..... Custom hire (machine work)..... Employee benefit programs..... Feed purchased..... Fertilizers and lime Freight and trucking..... Gasoline, fuel, and oil..... Insurance (other than health) ..... Mortgage interest (paid to banks, etc.) ..... Other interest (not entered elsewhere) ..... Labor hired..... Pension and profit sharing - contributions ..... Pension and profit sharing plans - admin. and education costs ..... Rent - vehicles, machinery, and equipment (not entered elsewhere) ..... Rent - other (land, animals, etc.) Repairs and maintenance..... Seeds and plants purchased..... Storage and warehousing..... Supplies purchased..... Taxes (not entered elsewhere)..... Utilities..... Veterinary, breeding, and medicine ..... Capitalized preproductive period expenses (also enter below) ..... Other expenses: NOTE: If you purchased or disposed of any business assets, please complete Sheet 22. Business Miles Drive Last Year Total Miles Driven Last year miles mil **19** <sub>p2</sub>

Farm Income (Sch. F/Form 4835) (cont.)

DRGANIZER	US	Asset Aco	quisition Lis	st					2	<b>2</b> <sub>p2</sub>
lf you any	If you purchased any business assets (furniture, equipment, vehicles, real estate, etc.) or converted any personal assets to business use in the tax year, please enter all pertinent information below.									
					parer Use		<u>,                                    </u>	Cost	Preparer L	Jse Only
No.	Description of	of Property	Related Business or Activity	Form	No. of Form		Date Placed in Service	or Basis	Current Section 179	
				+						
				<u> </u>	<b></b>	<u> </u>				
				<u> </u>		-				
									<u> </u>	
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			<u>l</u>		<u> </u>		I		2	2 p2

## 1040 US Business Use of Home (Form 8829) No.

29

Please enter last year's indirect expenses in full. Nonbusiness portion will carry to Schedule A.

Business percentage will be applied to indirect expenses only.

## **BUSINESS USE OF HOME**

	Last Year's Amount	
Form		
Business use area (square footage) Total area of home (square footage)		
Total hours available (if not 8,760)   Area of home included above used exclusively for daycare business, if any (sq ft)   % (.xx) or amount of gross income from home if not 100% (-1 if none)   % (.xx) or amount of expenses from home if not 100% (-1 if none)		

## **INDIRECT EXPENSES**

NOTE: Indirect expenses are for keeping up and running your entire home. They benefit both the business and personal parts of your home.

Mortgage interest		
Real estate taxes		
Casualty losses		
Insurance	*	
Miscellaneous.*	*	
Rent		
Repairs and maintenance*	*	
Utilities. g(enerally is PG&E & amts. pd to city for trash, sewer, water, etc *	*	
Excess mortgage interest		
Excess real estate taxes		
Other indirect expenses:		

## **DIRECT EXPENSES**

NOTE: Direct expenses benefit only the business part of your home. They include painting or repairs made to specific areas or rooms used for business.

Mortgage interest		
Real estate taxes		
Casualty losses		
Insurance		
Miscellaneous		
Rent		
Repairs and maintenance		
Utilities		
Excess mortgage interest		
Excess real estate taxes		
Excess casualty losses		
Allowable casualty losses		
Other direct expenses:	6	-
12		
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të		
	h	1
		1

\* Estimates on these expenses are generally fine as only a small percentage is deducted.

1040	US	Adjustments t	to Income	24
Pleas	se enter a	III pertinent informatio	n.	
		ID QUALIFIED PLA	NS (KEOGH)	
Money purcha made or expe	se (25%/1.2 ct to make (	(1=maximum) 25) contributions you (1=maximum)		
Self-employed made or exped Plan contribut Individual 401k: S	I SEP (25%, ct to make ( ion rate if n E elective defe E designated R	(1.25) contributions you (1=maximum)		
Employer 1=nonelec	matching ra tive contrib	E contributions you ake (1=maximum) ate if not .03 (.xxxx) utions (2%) te		
ADJUST	MENTS	TO INCOME		
	niums (exclu	ırance: uding long-term care) ums	└────┤ │	
				2

US	Additional Information			
Please furnish any additional information or supporting details not provided elsewhere in this tax organizer.				