HOME OFFICE WORKSHEET

MONTH/YEAR HOME OFFICE WAS FIRST USED: _____

SQUARE FOOTAGE OF OFFICE: _____ TOTAL SQUARE FOOTGE OF HOME:_____

DID YOU LIVE IN YOUR HOME ALL YEAR? YES ☐ NO ☐

IF NO, ENTER DATES YOU LIVED IN THE HOME: _____

IF YOU USE YOUR HOME FOR DAYCARE:

SQUARE FOOTAGE EXCLUSIVE TO DAYCARE: _____ SHARED SQUARE FOOTAGE: _____

SQUARE FOOTAGE EXCLUSIVELY PERSONAL: _____ HOURS USED AS DAYCARE: _____

IF YOU RENT YOUR HOME:

PLEASE PROVIDE TOTALS FOR THE YEAR (IF APPLICABLE)	AMOUNT
RENT	$
ELECTRIC	$
TRASH	$
WATER	$
GAS	$
RENTERS INSURANCE	$
REPAIRS AND MAINTENANCE	$
OTHER EXPENSES	$

IF YOU OWN YOUR HOME:

PURCHASE PRICE OF HOME: $_____

COST OF ANY ADDITIONAL IMPROVEMENTS: $_____

PLEASE PROVIDE TOTALS FOR THE YEAR (IF APPLICABLE)	
MORTGAGE INTEREST	$
PROPERTY TAX	$
ELECTRIC	$
WATER	$
GAS	$
TRASH	$
HOME SECURITY	$
INSURANCE	$
REPAIRS AND MAINTENANCE	$
OTHER EXPENSES	$

PLEASE LIST ANY EXPENSES RELATED DIRECTLY TO THE HOME OFFICE BELOW:

Preparer use only: Land Basis $ Building Basis $