

# Home Office Worksheet

Your Name - \_\_\_\_\_

Tax Year - \_\_\_\_\_

Is the Home Office Area used exclusively for business? Yes \_\_\_\_\_ No \_\_\_\_\_

If, No, stop, you cannot take a home office deduction.

Is your home office for the convenience of your employer – OR -

Is your home office for your sole proprietorship or partnership?

Yes \_\_\_\_\_ or No \_\_\_\_\_

If, No, stop, you cannot take a home office deduction.

## Cost information

Date of Purchase (if 1st year of home office)	
(provide HUD/closing statement)	
Date you began using your home office	

Please provide the following information:

Total Square feet of your home	
Total Square feet of your office	

Homeowner's or Renter's Insurance	
PMI Insurance	
Repairs & Maintenance to your home	
Repairs & Maintenance exclusively to your office (b)	
Products purchased to maintain your home (c)	
Electricity	
Natural Gas	
Propane	
Water	
Sewer (if not included in Water)	
Trash/Recycling	
Rent	
Snow Removal	
Lawn Care	
Blacktop sealant	
Security System	
Association Dues	
Internet	
Other _____	
Other _____	
Other _____	

\*\* If you own your home, we will allocate a portion of your mortgage interest & property taxes to your home office.

\*\* If you have a home office for your corporation, please ask us about setting up an accountable plan for these expenses.

I certify that the information presented is true and accurate.

\_\_\_\_\_  
Signature and date