2024 Individual Taxpayer Organizer

SHARP TAX SERVICE 5462 Center St. Suite B Hilliard, OH 43026 (in Makoy Center) greg@sharptaxservice.com www.sharptaxservice.com 614-529-6930

Taxpayer						Tax ID # *				
First Name	M.I.	Lasi	t Name	Em	ail	I		IP PIN		
Occupation		Date	of birth			Are you nev	w to our	firm?	Yes	No
Address		City				State		Zip		
County		Prim	ary phone			Secondary p	ohone			
Driver's License No.				Stat	te Issue	Date	Exp	. Date		
Spouse						Tax ID # *				
First Name	M.I.	Lasi	t Name	Em	ail			IP PIN		
Occupation		Date	of birth			Are you nev	w to our	firm?	Yes	No
Address (If different from Taxpayer)		City				State		Zip		
County		Prim	ary phone			Secondary p	ohone	1		
Driver's License No.		1		Stat	te Issue	Date	Exp	. Date		
If you moved during 2024, enter your	previous address	6.				Date of mov	7e			
Marital status on 12/31/24: Single Were you divorced or separated duri <i>Note:</i> Individuals in registered dome	ng the year? Ye		lo	W	Vere there any	gistered Domest deaths in the far ed married for fe	nily?	Yes N	0	
Names of dependent children <i>Child's full name</i>	Tax ID #	*	IP PIN		Date of birth	Months lived home in 202		lationship		ollege ıdent?
Did any of the children have unearne Is it anticipated that a different taxpa	yer will seek to cla				5	the children hav ent for tax year 2		bility? Yes N	es o	Го
Other dependents or people who liv	ed with you					Months lived in				
Name	<i>Tax ID</i> # *		IP PIN	I	Date of birth	home in 2024	Relati	onship	Inc	оте
Bank information: Use for Direct d	eposit of refund	Dire	ect debit of balar	nce d	lue Name of	bank				
Checking Savings Routing tra	nsit number				Account nu	mber				
Ask your tax preparer for information	n about depositing	g a refi	und into an IRA	acco	ount or splitti	ng the deposit in	to more	than one	e acco	unt.
*A Tax ID # is a Social Security Number (SS	N), adoption taxpay	ver ider	ntification number	r (AT	IN), or an indiv	idual taxpayer ide	ntificatio	n numbei	(ITIN).

Questions—All Taxpayers

(Provide related statements or other documentation.)

"You" refers to both taxpayer and spouse—ask your preparer if you are unsure about a question.

			1 / 1			1			
	Yes	No	Are either you or you	r spouse legally blind?					
	Yes	No	Have you received an	ny notice from the IRS or state	e revenue (department within the p	ast year? If yes, provid	le a copy.	
	Yes	No	Did you pay or receiv Paid Received		Recipient	's SSN	Date of divorce or sep	aration	
	Yes	No	Did you purchase he	alth insurance through a pub	lic exchan	ge/marketplace? (Provid	le Form 1095-A.)		
IXES	Yes	No	Will there be any sign	nificant changes in income or	deduction	s next year, such as retir	ement?		
LIFESTYLE & TAXES	Yes	No	Did you pay anyone	for domestic services (e.g., na	nny, hous	ekeeper, cook, caretaker)) in your home?		
STYLI	Yes	No	Did you purchase an	chase an energy-efficient, hybrid, or electric vehicle?					
LIFE	Yes	No	Are you involved in	bankruptcy, foreclosure, repo	ssession, o	r had any debt (includin	ıg credit cards) cancell	ed?	
	Yes	No	Are you a member of	the military?		State of residency			
	Yes	No	Were you a citizen of	or did you live in a foreign co	ountry?	Foreign country			
	Yes	No	Do you own or have	financial interest in a foreign	bank or fi	nancial account? Maxim	um value in 2024 \$		
	Yes	No	Would you like to all Designee's name	ow your tax preparer or anot Phot	her person <i>ne number</i>	to discuss your return v	with the IRS? PIN (any five digits,)	
	Yes	No	Were any children bo	rn or adopted in 2024? (Provi	de statemer	it for other expenses.)			
	Yes	No	Were any children at	tending college? (Provide Form	n 1098-T ar	ıd Form 1098-E.)			
			Year in college	Paid by you: Tuition \$		Books \$	Student loan interest	\$	
TION				Paid by student: <i>Tuition</i> \$		Books \$	Student loan interest	\$	
CHILDREN & EDUCATION	Yes	No	Did you pay any tuit	ion for a private school for a c	dependent	or take classes yourself	?		
V & E			Student				Amount paid \$		
DREI			Name and address of sc	hool					
CHIL	Yes	No	Did you pay for child	l or dependent care so you co	uld work	or go to school? (Provide	statement if applicable)		
			Name of provider				EIN or SSN		
			Address				Amount paid \$		
	Yes	No	Did you make any co	ontributions to a 529 plan in 2	024? If yes	, provide details.			
	Yes	No	Did you, or will you,	contribute any money to an l	IRA for 202	24?	Traditional IRA	Roth II	RA
	Yes	No		amounts from a retirement a					
NTS.	Yes	No		er any stock or sell rental or i		property?			
INVESTMENTS	Yes	No		income from an installment sa					
INVE	Yes	No		vestments become worthless of			t theft in 2024?		
	Yes	No		did you exercise, any employ					
	Yes	No	Did you (a) receive (a of a digital asset (or a	ns a reward, award, or payme a financial interest in a digital	nt for prop asset)? (D	erty or services); or (b) sigital assets include crypto	sell, exchange, or othe currencies, NFTs, and si	rwise disp tablecoins)	pose
NS	Yes	No		lan to, contribute money by A	-				
DEDUCTIONS	Yes	No		rest on a loan for a boat or RV		· · · ·			
DEDL	Yes	No		kes on a major purchase in 202			2?		
	Yes	No		aritable contributions in 2024	<i>,</i> 1				
ESS	Yes	No		home office or use your car f	, ,				
BUSINESS	Yes	No	-	me from a sharing/gig econor		-			
9	Yes	No		ess or an interest in a partners	<u> </u>	<u> </u>		:e?	
	Yes	No		sell a main home during the y		× ~ ~			
JΕ	Yes	No	-	id you claim the First-Time H	-	^		details.	
номе	Yes	No		nortgage or take a home equi					
	Yes	No		tgage loan proceeds for purp				our home	?
	Yes	No	Did you make any ne	ew energy-efficient improvem	nents to yo	ur home? If yes, provide	e details.		
CL.	te infor	matio	n Full-year resider	nt Part-year resident I	Nonreside	nt School district			
			5	2	voincoide	in School district			
			e during 2024 and dat	2	i vorneside.	Do you rent or ow Total rent paid \$	vn your home? Rent Includes heat		ı N

Income Worksheet

Provide to your preparer all Forms W-2, 1099-INT, 1099-DIV, 1099-R, 1099-MISC, 1099-NEC, 1099-K, 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	oint			Pro	vide additional statemen	ts if mo	ore room is needed
	W-2—Wage and Tax Statement				1			
T/S	Employer name			T/S	Employ	er name		
	1)				4)			
	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, An	nuities, Ret	irement	or Profit	-Sharing l	Plans, IRAs, Insurance C	ontract	s, 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	to determin	e if an e	exception	to penalty	y applies.		
Tax-Exe	empt Interest (such as municipal bonds—	include state	ement)					
Payer		\$		Payer				\$
Other I	ncome							1
State ta	x refund		\$			Unreported tips	\$	
Unemp	loyment compensation		\$			Other	\$	
Social S	Security (taxpayer)—provide SSA-1099 or	RRB-1099	\$				\$	
Social S	Security (spouse)—provide SSA-1099 or RI	RB-1099	\$				\$	
Gambli	ng income—provide Form W-2G		\$				\$	
Busines	ss income (see Sole Proprietorship Tax Organ	izer)				Stock sales	See "	Sales and Exchange
	income (see <i>Rental Property Tax Organizer</i>)					Sale of other property		sheet" below.
	s and Exchanges Works	heet						
	e information about sales of stock, real esta				sith Downey	- 1000 P 1000 C		

Provide information about sales of stock, real estate, or other property, along with Forms 1099-B, 1099-S, or other 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 \$14,600 Single, \$29,200 MFJ/QSS, \$21,900 HOH, or \$14,600 MFS to be a tax benefit.

include cost fo	or dependents—do	l 7.5% of income to be not include any expe with funds from an F	enses that were	Charitable Contributions. If over \$500 in noncash charitable contributions, provide details of contributions. Rules require that the taxpayer retain documentation for all contributions.				
Dentists	\$	Hospitals	\$	Monetary (cash, c	heck, credit card)		\$	
Doctors	\$	Insurance	\$	Noncash contributions (FMV). Clothing or household				
Equipment	\$	Prescriptions	\$	items must be in good used condition or better. \$				
Eyeglasses	\$	Other	\$	Did you transfer f		A directly to a	¢	
Medical miles	:	@ 21¢			No	@ 14¢	\$	
		paid for full or partia		Charitable mileag		@ 14¢		
State withhold		siness use of the hom	e. Reported on W-2			ected damage or loss	of property, or	
	d taxes—paid in 20	024	\$	a theft in a federa	lly-declared disas	ter area, provide deta		
	_)24	ъ \$	preparer. Yes	No			
Real estate tax			\$			ions. Miscellaneous		
			\$	deductions subject to the 2% AGI limitation are not deductible on the federal return. However, these expenses may be deductible on your sta				
Personal prop	,	2024		return. For use of	home, auto milea	ge, or other job-relate	ed expenses,	
1 2	efund—received ir	1 2024	\$()	by your employer		sheet. Were any expe	nses reimbursed	
Foreign tax pa Other	lia		\$ ¢	Dues	\$	Subscriptions	\$	
			\$	Investment	\$	Supplies	\$	
Other			\$	expenses	Ψ	Supplies	Ψ	
Other	2024 (\$	Job education	\$	Tax prep fees	\$	
	n 2024 from prior y le interest or penalt		\$	Job seeking	\$	Tools	\$	
	-	x paid during 2024?	Yes No	Legal fees	\$	Uniforms	\$	
Did you purch	nase a car, plane, bo	oat, or home in 2024?	Yes No	Licenses	\$	Union dues	\$	
Sales tax paid		1		Safety equipment	\$	Other	\$	
Interest Paid. Do not include interest paid for full or partial business- use or rental-use property, including business use of the home. Provide all Forms 1098 or lender information and ID numbers.			Other Deductions. The following deductions are not subject to the 29 AGI limitation.					
Main home	\$	Equity loan	\$	Gambling losses	\$	Federal estate tax on IRD	\$	
Second home	\$	Equity loan	\$	Impairment-	\$	Other	\$	
				related expenses	Ψ	Culti	Ψ	

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 Educator expenses. Classroom expenses of teachers, counselors, and principals. Maximum \$300 each. \$ *Health savings account (HSA).* Contributions for 2024 may be made through April 15, 2025. \$ (Only include contributions you made out-of-pocket). \$ Self-employed SEP, SIMPLE, and qualified plans. Contributions for 2024 may be made through April 15, 2025. Self-employed health insurance. Sole proprietors, partners, and 2% S corporation shareholders if not eligible for employer \$ coverage. \$ Penalty on early withdrawal of savings. IRA deduction. For traditional IRAs. Roth IRAs are not deductible. Contributions for 2024 may be made through April 15, 2025. \$ \$ Student loan interest. Paid for taxpayers and dependents. Moving expenses. Available only to members of the Armed Forces (or their spouses or dependents) on active duty that move pursuant to a military order and incident to a permanent change of station. Ask preparer Business expenses of reservists, performing artists, and fee-based government officials. Ask preparer \$ Other adjustments. Include description.

Estimated Tax Payments — Tax Year 2024

Installment	Date paid	Federal	Date paid	State
First		\$		\$
Second		\$		\$
Third		\$		\$
Fourth		\$		\$
Amount applied from 2023 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/marketplace), Form 1095-B (for health insurance purchased outside of a public exchange), or Form 1095-C (for employer-provided health insurance coverage).
- $\hfill\square$ 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, sold, or refinanced real estate.
- □ Mileage amounts for any automobile expenses claimed, including total mileage, commuting mileage, and business mileage.
- $\hfill\square$ 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 2024.

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 returns carefully before signing to make sure the information is correct.
- Fees must be paid before your tax returns are 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 may be required for preparation of 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 duplicate 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.

TaxpayerSpouseDate	Duine and Dalian		
	Taxpayer	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 express written 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

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Sole Proprietor General Information Name of sole proprietor Business name (if different) EIN (if applicable) Business address (if different from home address) Date business closed Principal business activity Date business started Principal product or service No Was the primary purpose of the business activity to realize a profit? Yes No | Did you materially participate (involved in a regular, continuous, and substantial basis) in the operation of this business? Yes Yes No Has the business reported any losses in prior years? Other (specify) Accounting method: Accrual Cash No Does the business file under a calendar year? (If no, list the fiscal year.) Yes **Sole Proprietor Specific Questions** No | Did you pay any family members for business services? Yes Yes No Did you make any payments of \$600 or more to subcontractors, attorneys, accountants, directors, etc.? If Yes, did you issue Form 1099-NEC? List name and Social Security Number (SSN) for each person to whom you paid \$600 or more. Name SSN SSN Name Yes No Did you make, or do you plan to make, any contributions to a self-employed retirement plan? Type of plan Amount contributed No Did you pay for your own health/dental insurance? If Yes, provide amount of premiums paid during the year. Yes No Did you have any employees? Yes No Did you have any bartering transactions in 2024? Yes No Did you have a Paycheck Protection Program (PPP) loan that was forgiven in 2024? Yes **Sole Proprietor Business Income** Gross receipts or sales (if you received Forms 1099-NEC or 1099-K, list name of payer and amount separately from gross receipts or sales) Form 1099-NEC Form 1099-K \$ \$ Total of all Forms 1099-NEC and 1099-K received Returns (cash or credit refunds) and allowances (discounts or reductions in selling price) 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 net income. Sole Proprietor Cost of Goods Sold (for manufacturers, wholesalers, and businesses that make, buy, or sell goods) Inventory at the beginning of the year Purchases less costs of items withdrawn for personal use Cost of labor Materials and supplies Inventory at the end of the year **Sole Proprietor Business Expenses** Advertising \$ Wages* \$ Management fees Bad debts \$ Meals - business \$ Other \$ Bank charges Office supplies \$ \$ Start-up costs (first year of business) \$ **Business** licenses Commissions and fees \$ Pension and profit-sharing plans \$ Contract labor* \$ \$ Rent or lease - car, machinery, equipment Employee benefit programs \$ Rent or lease - other business property \$ \$ \$ Employee health care plans Repairs and maintenance Entertainment (not deductible) \$ Supplies (not included in inventory cost) \$ \$ Taxes - payroll* \$ Gifts \$ Taxes - property \$ Insurance (other than health insurance) Interest - mortgage \$ Taxes - sales \$

* Provide copies of Form W-3, Form 940, Form 941, Form 1096, Form 1099-NEC, Form 1099-MISC, and any state tax forms filed.

Taxes - state

Telephone

Utilities

\$

\$

\$

Interest - other

Internet service

Legal and professional services

	ess Expenses – L		\$					\$	
			\$					\$	
			\$					\$	
			\$ \$					\$	
			\$					\$	
			\$					\$	
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<u>о г</u>	, .		\$					\$	
	-	orm for each vehicle)			D.	1 1			
Make/Mode	1		<i>(</i> (1) 1) 0		Date car	placed in servic	e		
Yes No		personal use during							
Yes No		spouse) have any ot	her cars for persona	al use?		trade in your ca		Yes N	lo
Yes No					Cost of	rade-in	Trade-in	value	
Yes No	Is your evidence				\$		\$		
		Mileage				1	Actual Expension	ses	
Beginning of	year odometer				Gas/oil		\$		
End of year c	odometer				Insuran	ce	\$		
Business mile	eage				Parking	fees/tolls	\$		
Commuting	mileage				Registra	tion/fees	\$		
Other mileag	je				Repairs		\$		
then choose b Iravel Expe • Meals. You	owever, to use the between either the nses can deduct the cos	standard mileage ra standard mileage ra st of meals while trav	te method or actua	in the fi il expens • Tra	irst year t ses. vel/Lodg	ne car is availab ng. You can de	le for busine	ess. In later dinary and	years, you c
then choose b Travel Expe • Meals. You home on bu	owever, to use the between either the nses can deduct the cos usiness. You can us	standard mileage ra standard mileage ra	ite, it must be used ite method or actua veling away from your meals or the	in the fi il expens • Tra pen	irst year t ses. vel/Lodg ases of tra	ne car is availab	le for busine educt the or om your hor	ess. In later dinary and ne for busi	years, you ca l necessary e ness purpose
then choose b Travel Expe • Meals. You home on bu	owever, to use the between either the nses can deduct the con usiness. You can us eal allowance per	standard mileage ra standard mileage ra st of meals while tra- se the actual cost of	ite, it must be used ite method or actua veling away from your meals or the	in the fi il expens • Tra pen Incl	irst year t ses. vel/Lodg ases of tra	ne car is availab ng. You can de veling away fro enses are transp	le for busine educt the or om your hor	dinary and ne for busi fare, taxi, lo	years, you ca l necessary e ness purpose
then choose b Travel Expe • Meals. You home on bu standard m	owever, to use the between either the nses can deduct the con usiness. You can us eal allowance per	standard mileage ra standard mileage ra st of meals while tra- se the actual cost of	tte, it must be used tte method or actua veling away from your meals or the y by location.	in the fi il expens • Tra pen Incl	irst year t ses. vel/Lodg ases of tra luded exp	ne car is availab ng. You can de veling away fro enses are transp	le for busine educt the or om your hor	dinary and ne for busi fare, taxi, lo	years, you construction of the second
then choose b Travel Expe • Meals. You home on bu standard m	owever, to use the between either the nses can deduct the con usiness. You can us eal allowance per	standard mileage ra standard mileage ra st of meals while tra- se the actual cost of	tte, it must be used tte method or actua veling away from your meals or the y by location.	in the fi il expens • Tra pen Incl	irst year t ses. vel/Lodg ases of tra luded exp	ne car is availab ng. You can de veling away fro enses are transp	le for busine educt the or om your hor	dinary and ne for busi fare, taxi, lo	years, you ca l necessary e ness purpose odging, etc.
then choose h Travel Experi- • Meals. You home on bu standard m City visited (for	owever, to use the between either the nses can deduct the consiness. You can us eal allowance per or per diem)	standard mileage ra standard mileage ra st of meals while tra- se the actual cost of	tte, it must be used tte method or actua veling away from your meals or the y by location.	in the fi il expens • Tra pen Incl	irst year t ses. vel/Lodg ases of tra luded exp	ne car is availab ng. You can de veling away fro enses are transp	le for busine educt the or om your hor	dinary and ne for busi fare, taxi, lo	years, you construction of the second
then choose I Travel Experi- • Meals. You home on bu standard m City visited (for Travel expenses)	owever, to use the between either the nses can deduct the consiness. You can us eal allowance per or per diem)	standard mileage ra standard mileage ra st of meals while tra- se the actual cost of	veling away from your meals or the y by location. # of days in city	in the final expense • Tra pen Incl City vi	irst year t ses. vel/Lodg nses of tra luded exp isited (for p	ne car is availab ng. You can de veling away fro enses are transp er diem)	le for busine educt the or om your hor portation, air	dinary and ne for busi fare, taxi, lo	years, you ca l 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 used regularly and exclusively for business except for storage of inventory or daycare.

Note: Managing rental activities or investments does not qualify for business use of the home.

All Taxpayers		For Daycare Only			
A) Business use area (square footage)		1) Hours used for daycare			
B) Total area of home (square footage)		2) Total hours in year	8,784 hrs.		

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 2024, copy this worksheet and fill out one for each home.

	Direct	Testiment		Dinest	Testinent
	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	
Value of land		\$	Casualty losses in 2024?	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.

- 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.
- Your home is the only fixed location of the business.
 - 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 daycare facility.

product samples.

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

Self-Employment (SE) Tax

conducted.

- 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 \$168,600 (2024) of combined wages, tips, and net earnings is subject to the 12.4% Social Security part of SE tax.