

OFFICE IN HOME

Publication 587

Video

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|---|------------|-----------|
| 1. The office is used exclusively for business | YES | NO |
| 2. The office is used regularly | YES | NO |
| 3. The office is your principal place of business | YES | NO |
| - Do you have another fixed office location | YES | NO |

******* CHOOSE One Method**

OFFICE IN HOME - Simplified Method

Standard deduction of \$5 per square foot (max of 300 square feet)
if a change in home occurred during the year allocate by house

	#1 House	#2 House
Total Square Feet of your Office	_____	_____

OFFICE IN HOME - Itemized Method

the home must be depreciated and then recaptured if the home is sold
if a change in home occurred during the year allocate by house

*primary use administrative and no other office available

*storage of inventory

	#1 House	#2 House
Date placed home in service:	_____	_____
Original Cost of Home	_____	_____
Total Square Feet of Home:	_____	_____
Total Square Feet of your Office	_____	_____

Office in Home Expenses

Rent	_____	_____
Total Gas, Oil, Propane, Electric Bills for year:	_____	_____
Homeowner's Insurance:	_____	_____
Repairs and Maintenance of Office:	_____	_____
Homeowners Association:	_____	_____
Security System:	_____	_____
Trash Pickup:	_____	_____

Daycare

Total Hours House was used in the daycare	_____	_____
Total Hours Available (Max = 365days x 24 hours in a day)	_____	_____
Water / Sewer	_____	_____
Cable TV	_____	_____
Internet	_____	_____