DAYCARE INCOME an	d EXPENSE WORKSHEET
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TAX YEAR \_\_\_\_\_

					_	SSN:			
NAME OF DAYCARE BU	SINESS				-				
ADDRESS (if different th	nan vour r	esidence)							
FEDERAL IDENTIFICATIO	•	•							
		DA	Y CARE INCO	OME					
GROSS INCOME FRON D	DAY CARE	\$		_	FEDERAL	FOOD REIMB	USEMENT	\$	
SALE			RTIALLY OR	ΤΟΤΔΙΙΥΓ				ΔST	
Kind of Property		Sold		ales Price		xpense	Date Aco		Cost
	Date	3010				лрепзе		lanea	COST
OFF	ICE IN HO	ME		_					
Date of Home Acquired				**If yo	our work hou	rs are irregul	ar, you may	claim the l	nours that
Total Cost				you adv	vertise as bus	iness hours a	s long as you	actually	care for the
Cost of Land				you advertise as business hours as long as you actually care for the children all of those hours at least some days during the year					
Cost of Improvements								/*** 0	<b>/</b>
Square Footage of Home				-	Koon a dail	v log with "T	IME IN!" and		<b>T</b> "
				Keep a daily log with "TIME IN" and "TIME OUT"					
Square Footage Used for D No. of Days During Year Ch				In addition	to the hours	coopt op day	care vou ma	claim the	time coast on
Were In Your Care	muren			In addition to the hours spent on daycare you may claim the time spent on daycare related jobs such as:					
				4	Ľ			15.	
No. Hours per Day*				-					
If Hours Vary, Total Hours	for Year*						cleaning up		ren
Real Estate Taxes			food preparation						
Mortgage Interest							record keep	ing	
Casualty Loss							planning and	d preparat	ion
Electricity				1			other (speci	fy)	
Heat				1					
Insurance- General Policy				1			DAY CARE h	ours per da	av
Day Care Rider				1				ouro per u	~ )
				4					
Repairs/Maintenance- Ger				-					
Because of Daycare		TOTAL HOURS PER DAY							
Water/Sewer/Garbage									
Rent paid- if you are a rent	ent paid- if you are a renter			***IN CASE OF AN AUDIT THESE RECORDS					
Other (Specify)	Other (Specify)			WILL BE REQUIRED***					
AUTO EXPENSE- Keep reco	ords of mile	age for Dayo	are meetings	, shopping fo	or supplies, gr	oceries, takir	g children		
home, to doctor, or to eve	-					-			
If you take expense on	mileage basi	is complete li	nes 1-10	Au	ito 1	Aut	:0 2		Auto 3
1. Year & Make of Auto									
2. Date of Purchase	ng lan 1								
<ol> <li>Beginning Odometer Reading- Jan 1</li> <li>Ending Odometer Reading- Dec 31</li> </ol>									
5. Total Miles Driven- Line 4 less Line 3									
6. Total Day Care Miles in Line 5									
7. Daily Round Trip Miles- if day care NOT in your home									
8. Parking and Tolls									
9. Licenses and Taxes (Not Sales Tax)									
10. Interest				1	Laura constituto				
Continue below if you take actual expense. (M 11. Gasoline, Oil, Lube, Repairs, Tires, Batteries, Insurance, Supplies,				/iust use actua	ii expense if AC	.KS depreciatio	n nas been tal	(en.)	
Wash, Wax, Anti-freeze, etc.	is, illes, Batt	eries, insurar	ice, supplies,						
12. Other									
				I					

## **Business Expenses Continued**

Advertising- newspapet ads, business cards, Day care t-	ć	*Dent i an activitie de la company				
shirts/sweatshirts	<u>ې</u>	* <b>Rent</b> - building (if day care not in home) \$				
Bank Charges /Overdrafts - Business account only- cost of pronted checks, service charges	\$	Toy rental \$				
<b>Clothes-</b> for day care children- caps, mittens, diapers, etc.	\$	DVD/Movies- for day care children \$				
Dues & Publications- Day Care license, association fees,		* <b>Repairs-</b> Other than your home- related to damage by				
day care magazines for you or day care children	\$	daycare children- Document with photo and how it \$ Supplies- cleaning supplies, paper products, etc. \$				
Education - workshop registration, books, supplies	\$					
Food - Your total grocery bill	\$	<b>Taxes</b> - Real Estate (if daycare not in home) \$				
In an audit, it is important to prove a reasonable amount was spent for persona	al	Payroll: Your share of FICA \$				
Amount spent on Day Care	\$	Federal Unemployment \$				
In some cases IRS has been using the federal food program all	owance	State Unemployment \$				
to determine cost of food provided the children. List below th	e number					
of all meals servied during the year, not just those reimbursed	I					
Breakfasts		<b>Telephone</b> : business line cost if you have one \$				
Lunches		base phone charge- personal phone \$				
Dinners		extra extension cost for day care \$				
Morning Snacks		long distance costs for day care \$				
Afternoon Snacks		Travel & Entertainment- party costs for children and/or parents,k tickets to events, etc. \$				
these numbers should be DOCUMENTE	<b>D</b> daily	DOCUMENT WHO, WHEN, WHY, etc.				
<b>Gifts</b> - for daycare children and true employees- Christmas, Easter, Birthdays, etc.	\$	<b>Uniforms</b> - furnished to employees and for yourself \$				
*Interest- on items used for daycare only	\$	Wages Bring your copy of W-2's/941's if they have been filed				
Laundry & Cleaning- professional cleaning of	\$	Wages to spouse \$				
furniture, carpeting, drapes- Only a percentage will be allowed	d unless	Wages to children under 18 \$				
you can show that daycare was 100% responsible for cleaning		Other Wages \$				
*Legal & Professional- Day Care only- attorney or accounting fees	\$	Other Expenses not listed elsewhere \$				
<b>Office Supplies-</b> postage, stationery, pens, pencils, small office equipment, x-mas or birthday cards, daycare record	\$					
books, calendars, etc.	•	How many his did you and/or shouse devote to this hus during the year?				
How many months was this business in operation during the y		How many hrs did you and/or spouse devote to this bus during the year?				
From to						
	R PURCHA	SES AND IMPROVEMENTS				
Item purchased						

## CHECK LAST YEARS DEPRECIATION FROM TO SEE IF ALL ITEMS ARE CURRENT

\*1099's- Amounts of \$600 or more paid to individuals (not corporations) for rent, interest, or services rendered to you in the course of your business require that income statements be filed by payor. Non filing penalty is \$50 each recipient

You are required to whithold 20% of the payment if recipient does not furnish you with his/her Social Security Number. -Due Date of form is January 31

W-9's (request for payee's Social Security Number) are available.