

Schedule F - Profit or Loss from Farming

Name:

SSN:

General Information

Principal product _____ Employer ID number _____

This farm was disposed of during 2018

Yes No Payments of \$600 or more were paid to an individual who is not your employee for services provided for this farm

Yes No You filed Form(s) 1099 for the individual(s)

Income

Table with 5 columns: Description, 2018, 2017, 2018, 2017. Rows include: Sale of livestock / other items, Cost of items bought for resale, Sale of products you raised, Total cooperative distributions, Total agricultural payments, Commodity Credit Corporation (CCC) loans, Crop insurance proceeds, and Other income.

Expenses

Table with 5 columns: Description, 2018, 2017, 2018, 2017. Rows include: Car & truck expenses, Chemicals, Conservation expenses, Custom hire (machine work), Employee benefit programs, Feed purchased, Fertilizers & lime, Freight & trucking, Gasoline, fuel, & oil, Insurance (other than health), Interest - mortgage, Interest - other, Labor hired, Pension & profit-sharing plans, Rent - vehicles, machinery, & equip, Rent - other, Repairs & maintenance, Seeds & plants purchased, Storage & warehousing, Supplies purchased, Taxes, Utilities, Veterinary, breeding, & medicine, and Other expenses.

Expenses Related to Business

Name: _____

SSN: _____

Auto Expense

Name of business vehicle is used for _____

Description of vehicle _____ Date vehicle was placed in service _____

- Another vehicle is available for personal use
- This vehicle is available for use during off-duty hours
- There is evidence to support your deduction
- The evidence is written

Number of miles the vehicle was driven during 2018
 Business _____ Commuting _____ Total _____

Number of miles driven in prior years
 Business _____ Total _____

| | 2018 | 2017 | | 2018 | 2017 |
|--------------------------|-------|-------|------------------------|-------|-------|
| Garage rent | _____ | _____ | Property tax | _____ | _____ |
| Gas | _____ | _____ | Repairs | _____ | _____ |
| Insurance | _____ | _____ | Tires | _____ | _____ |
| Licenses | _____ | _____ | Tolls | _____ | _____ |
| Oil | _____ | _____ | Other expenses | _____ | _____ |
| Parking fees | _____ | _____ | | _____ | _____ |
| Lease payments | _____ | _____ | | _____ | _____ |
| Interest | _____ | _____ | | _____ | _____ |

Business Use of Home

Name of business home is used for _____

What is the total square footage of your home that was used regularly and exclusively for business _____

What is the total square footage of your home _____

For daycare facilities not used exclusively for business, complete the following questions

How many days during the year was the area used _____

How many hours per day was the area used _____

- The daycare facility was in operation for the entire year

| Expenses | Office expenses | | Home expenses | |
|------------------------------------|-----------------|-------|---------------|-------|
| | 2018 | 2017 | 2018 | 2017 |
| Mortgage interest | _____ | _____ | _____ | _____ |
| Real estate taxes | _____ | _____ | _____ | _____ |
| Excess mortgage interest | _____ | _____ | _____ | _____ |
| Insurance | _____ | _____ | _____ | _____ |
| Rent | _____ | _____ | _____ | _____ |
| Repairs & maintenance | _____ | _____ | _____ | _____ |
| Utilities | _____ | _____ | _____ | _____ |
| Other expenses | _____ | _____ | _____ | _____ |

In the "Office expenses" column, enter those expenses that pertain exclusively to your office; in the "Home expenses" column, enter those expenses that pertain to the entire dwelling.

