

In-Home Office Organizer	Tax Year:
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This checklist is to be used as a guide and starting point for organizing expenses pertaining to your In-home office and may not include all possible expenses. If you have additional expenses not included on the organizer that you feel could be used when preparing your income tax return, please document those in the NOTES section and discuss these with your tax preparer.

Per IRS guidelines, there are two basic requirements for your In-home office to qualify as a deduction:

- 1) You must regularly use part of your home exclusively for conducting business,
- 2) You must show that you use your home as your principal place of business.

Expenses should be "ordinary and necessary" and should take into account any reimbursement you have or could receive. Please verify the information for accuracy as this information will be included on your tax return that will be submitted to the IRS. Additionally, it is the responsibility of the taxpayer to collect and retain all supporting documentation for your files.

Please bring the completed organizer with you to your appointment. Should you have additional questions, feel free to contact us by email: dollartax@dollarincometax.com or phone: 404-753-8048.

Employee Name:			
Business Name:			
Home Office Address:			
City, State, Zip			
Type of Business:		Date Converted to Business Use:	
Total Heated Square Feet of Home:	sq ft	Sq Ft of Area Used Exclusively For Business:	sq ft

General Home Expenses:		Utilities:	
Rent:	<i>Per year</i>	Gas	<i>Per year</i>
Mortgage Interest:	<i>Per year</i>	Electric/Power:	<i>Per year</i>
Property Taxes:	<i>Per Year</i>	Water/Sewage:	<i>Per Year</i>
Homeowners/Renters Insurance:	<i>Per Year</i>	Trash Service:	<i>Per Year</i>
Homeowners Association Fees:	<i>Per Year</i>	Pest Control:	<i>Per Year</i>
Special County/City Assessments:	<i>Per Year</i>	Cleaning Services:	<i>Per Year</i>
Other:		Security Monitoring:	<i>Per year</i>
		Other:	

Communications:		Maintenance/Upkeep:	
Home Phone:	<i>Per year</i>	Repairs Exterior:	<i>Per year</i>
Fax:	<i>Per year</i>	Repairs Interior:	<i>Per year</i>
Other:	<i>Per Year</i>	Landscaping:	<i>Per Year</i>
		Other:	

Major Improvements:			
New Roof:		Painting:	
New HVAC:		Fencing:	
New Carpet:		Appliances:	
Room Addition:		Other (Specify):	

Notes:

Reviewed by:		Date:	
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