DAY CARE INCOME a	nd EXPE	NSE WOR	RKSHEET	YEA	R
YOUR NAME			S	SS# or Federal ID #	
NAME OF DAY CARE BUSINESS					
ADDRESS (if different than your res					
How many months was this busine	ess in operation	during the yea	ar? 12 Months	S OR From	To
Were you still in business on Dece	mber 31 st ?			YES 🗌	NO 🗌
	•	DAY CAR	E INCOME `	7	
INCOME DIRECTLY FROM PARENTS			FOOI	D PROGRAM PAYMENTS	
PAYMENTS FROM GOVERNMENT AG	ENCIES			otal received	
CASH GIFTS FROM PARENTS				mount for your children	
SALES OF EQUIPMENT USED FOR DAY	Y CARE				
AND DEDUCTED IN THE PAST OFFICE IN HOME (if licensed, or no	t required to be	e)	()	ther income	
Date Home Acquired	·	,		hours are irregular, you may	
Total Cost			advertise as business hours as long as you actually care all of those hours at least some days during the year.		•
Cost of Land		Keep a daily log with "Time In" and "Time out" entries.			
Cost of Improvements			In addition to the hours spent on Day Car, you may claim the time		you may claim the time
Square Footage of Home			spent on Da	y Care related jobs such as:	
Square Footage Used for Day Care (Regularly)			Cleaning up after c	hildren	
Square Footage Used for Day Care (exclusively)				Food preparation	
	100%			Record keeping	
HOME RELATED EXPENSES	Day Care	Partial		Planning and prepa	aration
Real Estate Taxes					ar action
Mortgage Interest				Other (specify)	
Casualty Loss					
Electricity					
Heat				DAY CARE hours pe	er day
Insurance – General Policy				Number of days du	iring the year when children
Insurance – Day Care Rider				were in your care.	o ,
Repairs/Maintenance				If hours vary, total of hours for year.	
Water/Sewer/Garbage/Cable TV					
Rent Paid – if you are a renter			INICACE OF A	AN ALIDIT THESE DECORDS WI	
Other (specify)			INCASE OF A	AN AUDIT, THESE RECORDS WI	ILL BE REQUIRED.
If you operated your day care business Call for additional worksheet.	out of more tha	n one location,			
AUTO EXPENSE: Keep records of mi supplies, banking, education, taking If you take expense on mileage basis comple 1. Year & Make of Auto (Bring in purcha 2. Date Purchased: Month, Date, Year 3. Ending Odometer Reading: December	children home, t te lines 1-10 se/sales papers)	to doctor or to e 		Amount spent on Day Ca IRS has used the federal food p	pent for personalareprogram allowance to determine
4. Beginning Odometer Reading: January 1 5. Total Miles Driven: Line 3 less Line 4 6. Total Day Care miles in Line 5 (do you have evidence to support?)				all meals served during year in	nildren. List below the number of your home, not just those Ils purchased in a restaurant, etc. Total Count
8. Parking and Tolls				LUNCH's	Total Count
9. Licenses and Taxes (Not Sales Tax)				DINNER's	Total Count
				MORNING SNACKS	Total Count
11. Gasoline, oil, lube, repairs, tires, batteries, insurance, etc. 12. Lease (fair market value at time of lease \$)				AFTERNOON SNACKS	Total Count
13. Other				Cost of Meals Purchased in Re	staurant

DAY CARE BUSINESS EXPENSES (continued)

	G/PROMOTION: Newspaper ads,		
business car	ds, Day Care t-shirts/sweatshirts, etc.		
AUTO EXPEN	ISE (see other side)		
EMPLOYEE B	ENEFITS: Health Insurance purchased for		
employees			
Insurance: B	usiness Liability		
INTEREST:	on items used for day care only		
	Paid to financial institution		
	Day Care only credit card		
LEGAL & PRO accountant f	DFESSIONAL: Day Care only attorney or ees		
small office of	PLIES: Postage, stationery, pens, pencils, equipment, holiday or birthday cards, Day books, calendars		
PENSION PLA	ANS: for employees		
RENT:	Building (if Day Care not in home)		
	Toy Rental		
	Videos/DVDS		
REPAIRS and	MAINTENANCE		
SUPPLIES:	Household cleaning supplies, hand soap,	100% Day	Shared
		Care	
	tissues, paper towels, paper		
	9 1, 1		
	tissues, paper towels, paper		
	tissues, paper towels, paper cups, plates, disposable cutlery, etc.		
TAXES:	tissues, paper towels, paper cups, plates, disposable cutlery, etc. Activity or children's supplies, games,		
TAXES:	tissues, paper towels, paper cups, plates, disposable cutlery, etc. Activity or children's supplies, games, toys, crayons, craft items		
TAXES:	tissues, paper towels, paper cups, plates, disposable cutlery, etc. Activity or children's supplies, games, toys, crayons, craft items Real Estate		
TAXES:	tissues, paper towels, paper cups, plates, disposable cutlery, etc. Activity or children's supplies, games, toys, crayons, craft items Real Estate Payroll (your share Soc. Sec., Medicare)		
	tissues, paper towels, paper cups, plates, disposable cutlery, etc. Activity or children's supplies, games, toys, crayons, craft items Real Estate Payroll (your share Soc. Sec., Medicare) Federal unemployment State unemployment		
TRAVEL & EN	tissues, paper towels, paper cups, plates, disposable cutlery, etc. Activity or children's supplies, games, toys, crayons, craft items Real Estate Payroll (your share Soc. Sec., Medicare) Federal unemployment		

UTILITIES & TELEPHONE:	
Telephone (business line – if you have one)	
Personal phone (base phone cost not deductible)	
Extra extension (phone options for Day Care)	
Long distance costs for Day Care	
WAGES (bring your copy of W-2s/941s if they have been filed)	
Wages to spouse (subject to payroll tax)	
Children under 18 (not subject to Soc. Sec. & Medicare tax)	
Other wages	
BANK CHARGES/OVERDRAFTS: Business account only – cost of printed checks, service charges.	
CLOTHES: For Day Care children – caps, mittens, diapers, etc.	
DUES & PUBLICATIONS: Day Care license, assn. dues, Day Care magazines for you or children.	
EDUCATION: Workshop registration, books, supplies	
FOOD: (See other side)	
GIFTS: For Day Care children and true employees – holiday, birthday, etc.	
LAUNDRY & CLEANING: Professional cleaning of furniture, carpeting, drapes: only percentage will be allowed unless you can show that Day Care was 100% responsible for cleaning. Directly related to Day Care	
Partially related to Day Care	
UNIFORMS: Furnished to employees and for yourself.	
OTHER EXPENSES (not listed elsewhere)	

MAJOR PURCHASES and IMPROVEMENTS

(Computers, office equipment, furnishings)

Item Purchased	Date Purchased	Cost	Item Purchased	Date of Purchase	Cost

CHECK LAST YEAR'S DEPRECIATION FORM TO SEE IF ALL ITEMS ARE CURRENT

I certify	that the amounts shown are true and correct (sign here)	