REAL ESTATE SALES DEDUCTIONS

NAME	BUSINESS INCOME	XAT	TAX YEAR	
By completing this form, the client cert	ifies that all financial information can be substantiated	by documentation	1.	
* MANDATORY RESPONSE REQUIRED (S	on instructions on part page)	YES	NO	
	that would require you to file Form(s) 1099-NEC?	123	140	
If "Yes", did you or will you file the require	a Form(s) 1099-NEC?			
Accounting/Bookkeeping Fees*	Postage	$\overline{}$		
Advertising/Marketing	Photocopying/Printing		-	
Advertising	Rent (equipment/building)		-	
Client Gifts (\$25/pp Limit)	Repairs		-	
Flowers/Cards	Supplies		1	
Online Marketing Services	General Office Supplies		1	
Open Houses/Brokers Opens	Business Cards	+	1	
Web Page/Domain	Keys/Lock Boxes/Sentrilock	_	1	
Other:	Signs/Flags/Banners		1	
Bank Charges (Business Only)	Other:		1	
Business Meals (with clients)	Taxes/Licenses		1	
Business Meals (with employees)	Licenses		1	
Commissions (paid to others)*	LLC Fees/Taxes		1	
Delivery/Shipping/Courier	Other:		1	
Dues/Subscriptions	Telephone and Comm. Services	Total Cost	Business Cos	
Bright/MLS	Cell Phone/Data Service			
GCAAR/HCAAR/PGCAR/etc.	Internet (do not include phone/cable)			
Professional Memberships	Fax Services			
Professional Publications	Tools/Equipments (include dates)	Cost	Date	
Software Subscriptions	Camera			
Other:	Cell Phone			
Employee Benefit Plans	Computer			
Employee Benefits	Digital Tablet			
Benefit Plan Admin Fees	Office Furniture			
Insurance	Printer/Scanner			
E&O Insurance	Software (non-subscription only)			
Other:	Other:			
Interest (Business Loan/CC)	Employee wages paid (provide payroll forms	,)		
Legal and Professional Fees	Client Accomodations			
Legal Fees	Appraisal Fees/Home Warranties		_	
Tax Preparation Fees	Condo Documents/HOA Fees			
Office Expense	Client Moving/Storage Fees		_	
Payroll Fees	Client Repairs/Maintentance/Cleaning		4	
Outside Services*	Other:		4	
Photography	Continuing Education/Coaching		4	
Virtual/Clerical Assistants	Desk/Office Fees		_	
Staging	Seminars/Conferences		_	
Subcontract Labor	Other:			

Requirement to Issue 1099-NECs to Service Providers

If you operate a business you may be required to issue 1099-NECs (formerly 1099-MISC) to individuals from whom you purchase services in connection with your business.

If you purchased services for your business and paid any one individual \$600 or more, **by cash or check**, you are required to issue the service provider a Form 1099-NEC and report this to the IRS. The exception is a provider who is operating as a Corporation. (An LLC, per se, is not a Corporation unless the entity has elected to operate as a Corporation).

Payments made with a credit card or debit card, and certain other types of payments, including third-party network transactions (PayPal Business) are not subject to the requirement for reporting on Form 1099-NEC.

In order to determine whether or not you must issue a 1099-NEC and/or to obtain the provider's tax ID number, you should request that the service provider complete Form W-9 (easily accessible on irs.gov). The provider completes the form by suppling their Name, Address, TAX ID number and the type of entity under which they are operating. You should do this before you engage them to provide services. If you are not sure how to interpret the W-9, after receipt, consult your tax advisor.

Please note that if a provider refuses to give you a completed W-9, but you still wish to purchase services from that provider, you are required, by law, to withhold 28% federal tax and remit that to the IRS.

Examples of "service providers" include Stagers, Bookkeepers, Clerical Support, Photographers, Sales Assistants, Sign Installers, etc. (Services you purchase through your Broker to whom you pay a fee in lieu of directly paying the service provider do not required you to issue 1099-NECs).

This requirement may also apply to rental property owners who are Qualified Real Estate Professionals. Please consult your tax advisor for further information.

Based on the explanations above, please address the Mandatory Response Questions at the bottom of the preceding worksheet.

VEHICLE AND TRAVEL EXPENSES

NAME	TAX YEAR		
VEHICLE EXPENSES	VEHICLE EXPENSES (Cont'd)		
Description of Auto	Interest (Auto Loan)		
Date Purchased (mm/dd/yy)	Warranty		
Purchase Price (Incl. Tax)	Inspection		
Date placed in Bus. Use (mm/dd/yy)	Parking/Tolls (Business only)		
Odometer End of Year	Car Washes		
Odometer Beginning of Year	Auto Club		
Total Miles this year	Other		
Business Miles	Other		
Personal Miles	Other		
	BUSINESS TRAVEL EXPENSES		
Is Car Leased? (Y/N)	Airfare/ Trainfare		
	Car rentals/Gas/Insurance		
EV Charges	Taxis, Bus, Shuttles		
Fuel	Lodging		
Repairs and Maintenance	Meals (while on over-night travel)		
Tires	Tips		
Towing	Telephone/Faxes		
Insurance	Dry Cleaning (out-of-town)		
Auto Tags Fees	Travel Agent Fees		
Personal Property Tax	Days (out of town on business)		
Lease Payments	Other		
Other	Other		
Other	Other		
	Other Information		
Please be advised that completion of thi	s form by the Taxpayer constitutes		
certification that the Taxpayer has a mile	eage log or other form of written evidence		
to substantiate the stated mileage inforn	nation presented herein.		

VEHICLE AND TRAVEL EXPENSES

NAME	TAX YEAR		
VEHICLE EXPENSES	VEHICLE EXPENSES (Cont'd)		
Description of Auto	Interest (Auto Loan)		
Date Purchased (mm/dd/yy)	Warranty		
Purchase Price (Incl. Tax)	Inspection		
Date placed in Bus. Use (mm/dd/yy)	Parking/Tolls (Business only)		
Odometer End of Year	Car Washes		
Odometer Beginning of Year	Auto Club		
Total Miles this year	Other		
Business Miles	Other		
Personal Miles	Other		
	BUSINESS TRAVEL EXPENSES		
Is Car Leased? (Y/N)	Airfare/ Trainfare		
	Car rentals/Gas/Insurance		
EV Charges	Taxis, Bus, Shuttles		
Fuel	Lodging		
Repairs and Maintenance	Meals (while on over-night travel)		
Tires	Tips		
Towing	Telephone/Faxes		
Insurance	Dry Cleaning (out-of-town)		
Auto Tags Fees	Travel Agent Fees		
Personal Property Tax	Days (out of town on business)		
Lease Payments	Other		
Other	Other		
Other	Other		
	Other Information		
Please be advised that completion of thi	s form by the Taxpayer constitutes		
certification that the Taxpayer has a mile	eage log or other form of written evidence		
to substantiate the stated mileage inforn	nation presented herein.		

Business Use of Home Office Expenses						
NAME		TAX YEAR				
If office not used regularly and exclusively, you cannot claim this deduction						
	Amount		emarks			
Office Used Exclusively for Business? (Y/N)		If "NO", please write N/A and				
Total Living Area in Home (square feet)		return this worksheet.				
Area Used for Business (square feet)						
1st Mortgage Interest						
2nd Mortgage Interest						
Equity Line Interest		See Note 1 Below				
Real Estate Taxes						
Home Owners or Renter's Insurance						
General Repairs (plumber, electrician, etc.)		See Note 2 Below				
Repairs to office area		See Note 2 Below				
Cleaning No Lawn/Snow Removal Serv.		See Note 3 Below				
Condo Fees/HOA Dues						
Rent Paid (If Renting)						
Utilities (Gas, Oil, Electric, Water)						
Trash Collection Fees						
Security System Monitoring Fees						
Pest Control						
Other Expenses (specify)						
Purchase Price of Home*						
Value of Land at Time of Purchase						
Date of Purchase (mm/dd/yy)						
Improvements (Additions, Renovation)		See Note 4 bel	OW			
Date Placed in Service (mm/dd/yy)		OCC NOTE 4 DEIOW				
* Please provide copy of Settlement Statements or Closing	Disclosures for p	urchase and a	ny refinancing.			
NOTES:	·		<u> </u>			
NOTES: 1. Enter interest paid in tax year. Provide principal amount of original loan and the loan amount used for						
home improvement.						
2. Provide description, amount, date of repairs. We cannot 3. Payment must be made to Cleaning Service or Househo		w/o the details				
Payment must be made to Cleaning Service or Household Employee. Provide description, amount, date of improvements. We cannot use this expense w/o the details.						
By completing this form, the client certifies that the entries can be substantiated by documentation						
Details (use extra sheet if necessary):	Date	Cost	Remarks			