

### Schedule F - Profit or Loss from Farming

Name: \_\_\_\_\_

SSN: \_\_\_\_\_

#### General Information

TS \_\_\_\_\_ Principal product \_\_\_\_\_ Employer ID number \_\_\_\_\_

Accounting method, if not cash:  Accrual

This farm was disposed of during 2022.

Yes No

Payments of \$600 or more were paid to an individual, who is not your employee, for services provided for this farm.

If "Yes," did you file Forms 1099 for the individuals?

You received a Paycheck Protection Program (PPP) loan for this business.

If "Yes," was any portion of the loan forgiven?

#### Income

	2022	2022
Sale of livestock / other items . . . . .	_____	Custom hire income . . . . . _____
Cost of items bought for resale . . . . .	_____	Beginning inventory for accrual . . . . . _____
Sale of products you raised . . . . .	_____	Ending inventory for accrual . . . . . _____
Total cooperative distributions (Provide 1099-PATR) . . . . .	_____	<input type="checkbox"/> You used unit-livestock-price or farm-price inventory method.
Total agricultural payments . . . . .	_____	Other income . . . . . _____
Commodity Credit Corporation (CCC) loans:		
CCC loans reported . . . . .	_____	_____
CCC loans forfeited . . . . .	_____	_____
Crop insurance proceeds:		
Amount received in 2022 . . . . .	_____	_____
<input type="checkbox"/> You elect to defer to 2023		
Amount deferred from 2021 . . . . .	_____	_____

#### Expenses

	2022	2022
Car & truck expenses . . . . .	_____	Rent - other (land, animals, etc.) . . . . . _____
Chemicals . . . . .	_____	Repairs & maintenance . . . . . _____
Conservation expenses . . . . .	_____	Seeds & plants purchased . . . . . _____
Custom hire (machine work) . . . . .	_____	Storage & warehousing . . . . . _____
Employee benefit programs . . . . .	_____	Supplies purchased . . . . . _____
Feed purchased . . . . .	_____	Taxes . . . . . _____
Fertilizers & lime . . . . .	_____	Utilities . . . . . _____
Freight & trucking . . . . .	_____	Veterinary, breeding, & medicine . . . . . _____
Gasoline, fuel, & oil . . . . .	_____	Family health coverage payments for taxpayer, spouse or dependents . . . . . _____
Insurance (other than health) . . . . .	_____	Other expenses . . . . . _____
Interest - mortgage (paid to banks, etc.) . . . . .	_____	_____
Interest - other . . . . .	_____	_____
Non-W-2 labor hired . . . . .	_____	_____
W-2 wages paid . . . . .	_____	_____
Pension & profit-sharing plans . . . . .	_____	_____
Rent - vehicles, machinery, & equipment . . . . .	_____	_____

Expenses Related to Business

Name:

SSN:

Auto Expense

Name of business vehicle is used for \_\_\_\_\_

Description of vehicle \_\_\_\_\_ Date vehicle was placed in service \_\_\_\_\_

- Yes No Was this vehicle available for use during off-duty hours?
Yes No Do you have evidence to support your deduction?
Was another vehicle is available for personal use?
If "Yes," is the evidence written?

Mileage

Number of miles the vehicle was driven during 2022

Business: Before July 1, 2022 . . . . .
After June 30, 2022 . . . . .
Commuting . . . . .
Other . . . . .

Expenses

Garage rent . . . . .
Gas . . . . .
Insurance . . . . .
Licenses . . . . .
Oil . . . . .
Parking fees . . . . .
Rental fees . . . . .
Interest . . . . .
Property tax . . . . .
Repairs . . . . .
Tires . . . . .
Tolls . . . . .
Lease addback . . . . .
Other expenses \_\_\_\_\_

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

Mortgage interest . . . . .
Real estate taxes . . . . .
Excess mortgage interest . . . . .
Excess real estate taxes . . . . .
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.