2020 Individual Taxpayer Organizer Sole Proprietorship

(See next page for Organizer)



Shelia Johnson, EA, Author Enrolled to Practice Before the IRS.

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2020 Individual Taxpayer Organizer

Taxpayer						SSN				
First	M.I.	Las	:t	Em	ail	I		IP PIN		
Occupation		Date	of birth			Are you nev	w to oui	firm?	les N	Vo
Address		City				State		Zip		
County		Hon	ne phone			Work or cel	1			
Driver's License No.				Stai	te Issue	Date	Ехр	o. Date		
Spouse						SSN				
First	M.I.	Las	rt .	Em	ail			IP PIN		
Occupation		Date	of birth			Are you nev	w to our	firm?	íes N	lo
Address If different from Taxoaver)						State		Zip		
(If different from Taxpayer) County			ne phone			Work or cel	1			
Driver's License No.		-		Stai	te Issue	Date	Ехр	o. Date		
If you moved during 2020, enter your	previous address	s.				Date of mov	<i>т</i> е			
Were you divorced or separated during Individuals who are in registered don Have you received any notice from the	nestic partnership	os (RD		ions	are not consid	deaths in the far dered married fo Yes No	•	Yes No l tax purp		
Names of dependent children Child's full name	Social Secu	rity#	IP PIN		Date of birt	Months lived h home in 202		ationship to taxpayer	Colleg	_
Did any of the children have unearned Is it anticipated that a different taxpay Other dependents or people who liv	ver will seek to cl		•	les ve as	-	of the children ha		sability? Yes No		No
Name	Social Security	#	IP PIN	1	Date of birth	Months lived in home in 2020	Relati	ionship	Income	e
Bank information: Use for Direct d	eposit of refund	Dire	ect debit of balar	nce d	lue <i>Name of</i>	bank				
	nsit number				Account nu					
Ask your tax preparer for information	about depositing	g a ref	und into an IRA	acco	ount or splitti	ng the deposit in	to more	than one	account	t.

	Yes	No	Did you use any mortgag	id you use any mortgage loan proceeds for purposes other than to buy, build, or substantially improve your home?										
	Yes	No	Did you make any new energy-efficient improvements to your home? If yes, provide details.											
Sta	ate infor	matio	n Full-year resident	Part-year resident	Nonresident	School district								
Sta	States of residence during 2020 and dates Do you rent or own your home? Rent Own													

Did you purchase or sell a main home during the year? If yes, provide closing statement.

Did you refinance a mortgage or take a home equity loan? If yes, provide closing statement.

Do you own a business or an interest in a partnership, corporation, LLC, farming activities, or other venture?

If you sold a home, did you claim the First-Time Homebuyer Credit when it was purchased? If yes, provide details.

Yes

Yes

Yes

Yes

No

No

No

No

Income Worksheet

Provide to your preparer all Forms W-2, 1099-INT, 1099-DIV, 1099-R, 1099-MISC, and other income reporting statements. Do not list dollar amounts for the following forms. Your preparer will report the appropriate amounts.

Indicate "T" for taxpayer, "S" for spous		Provide additional statements if more room is needed						
Forms W-2—Wage and Tax Statement								
T/S Employer name			T/S	Employ	er name			
1)				4)				
2)				5)				
3)				6)				
Forms 1099-INT—Interest Income								
T/S/J Name of issuer			T/S/J	Name o	fissuer			
1)	1)			4)				
2)	2)			5)				
3)	3)			6)				
Forms 1099-DIV — Dividends and Dist	ributions							
T/S/J Name of issuer	Name of issuer			Name o	fissuer			
1)				4)				
2)				5)				
3)				6)				
Forms 1099-R—Distributions From Pe	nsions, Annuities, Ret	iremen	t or Profit	-Sharing	Plans, IRAs, Insurance C	ontracts, Etc.		
T/S Name of issuer			T/S	Name o	fissuer			
1)				4)				
2)				5)				
3)				6)				
If the distribution is before age 59½, giv	e a reason to determin	e if an	exception	to penalty	y applies.			
Tax-Exempt Interest (such as municipa	l bonds—include state	ement)						
Payer	\$		Payer			\$		
Other Income	'					'		
State tax refund		\$			Other	\$		
Unemployment compensation		\$				\$		
Social Security (taxpayer)—provide SS	A-1099 or RRB-1099	\$				\$		
Social Security (spouse)—provide SSA-		\$				\$		
Unreported tips		\$				\$		
Business income (see <i>Sole Proprietorship</i>	Tax Organizer)				Stock sales	See "Sales and Exchanges		
Rental income (see <i>Rental Property Tax C</i>					Sale of other property	Worksheet" below.		
Sales and Exchanges V	Vorksheet							

Provide information about sales of stock, real estate, or other property, along with Forms 1099-B, 1099-S, or other supporting statements.

Description of property	Purchase date	Cost/basis	Sale date	Sale price
		\$		\$
		\$		\$
		\$		\$

Notes:

- When stock is sold, you will usually receive Form 1099-B, Proceeds From Broker and Barter Exchange Transactions, reporting the proceeds from the sale. However, your statement will not always provide the cost/basis information necessary to compute gain or loss. If the statement does not contain the cost/basis information, you must provide it. You may need to contact your broker for questions about cost/basis and purchase dates of your stock accounts.
- Often, "transfers" of stock or mutual funds within a brokerage account are actually sales of one type of stock and purchase of another. Even if you did not receive any cash from the transaction, you may have taxable gain or loss.
- If your stock dividends are automatically reinvested, the dividends will be taxable even though you did not receive any cash. The transaction is treated as if you had received cash and purchased additional stock. When the stock is sold, the amount reinvested over the years is taken into account. You may need to contact your broker for questions about the amount of reinvested dividends.
- If you sold property other than stock, your taxable gain or loss will be determined by your cost/basis. The cost/basis is usually the original purchase price plus improvements (the cost of repairs and maintenance are not taken into account for cost/basis).

Itemized Deductions Worksheet

Deductions must exceed \$12,400 Single, \$24,800 MFJ, \$18,650 HOH, or \$12,400 MFS to be a tax benefit.

	r dependents—do	d 7.5% of income to be not include any expe				vide details of co	\$500 in noncash cha ntributions. Rules rec all contributions.			
Dentists	\$	Hospitals	\$		Cash			\$		
Doctors	\$	Insurance	\$			Noncash contributions (FMV). Clothing or household				
Equipment	\$	Prescriptions	\$		items must be in good used condition or better. Did you transfer funds from an IRA directly to a charity? Yes No			\$		
Eyeglasses	\$	Other	\$					d.		
Medical miles: @ 17¢				charity? Yes Charitable mileage		\$				
	Taxes Paid. Do not include taxes paid for full or partial business or rental-use property, including business use of the home.			ss or	Casualty and The					
State withholding				d on W-2			ected damage or loss			
	State estimated taxes—paid in 2020				a theft in a federall preparer. Yes	ly-declared disas [.] No	ter area, provide deta	ils to your tax		
	Real estate tax—residence				1 1					
Real estate tax	Real estate tax—other				Miscellaneous Itemized Deductions. Miscellaneous itemized deductions subject to the 2% AGI limitation are no longer deductible					
Personal prope	Personal property taxes				on the federal return. However, these expenses may still be deductible					
Property tax re	efund—received ir	a 2020	\$ \$()		on your state return. For use of home, auto mileage, or other job-relate expenses, provide information on a separate sheet. Were any expenses reimbursed by your employer? Yes No					
Foreign tax pa	id		\$							
Other			\$		Dues	\$	Subscriptions	\$		
Other			\$		Investment	\$	Supplies	\$		
Other			\$		expenses					
Balance paid is	n 2020 from prior y	ear state returns			Job education	\$	Tax prep fees	\$		
(do not include	e interest or penalt	ies)	\$		Job seeking	\$	Tools	\$		
		x paid during 2020?		No	Legal fees	\$	Uniforms	\$		
Did you purch Sales tax paid \$		eat, or home in 2020? e vaid \$ Date	Yes	No	Licenses	\$	Union dues	\$		
		,			Safety equipment	\$	Other	\$		
or rental-use p	roperty, include int roperty, including lender informatior	erest paid for full or p business use of the ho a and ID numbers.	ome. Prov	vide all	income limit.		deductions are not s	<u>, </u>		
Main home	\$	Equity loan	\$		Gambling losses	\$	Federal estate tax on IRD	\$		
Second home	\$	Equity loan	\$		Impairment-	\$	Loss from box 2,	\$		
Points	\$	Investment interest	\$		related expenses	Ψ	K-1, Form 1065B	Φ		
Did you pay a	mortgage insurance	ce premium when you	ı purchas	sed your h	ome? Amount \$	Date		1		
, , ,										

Other Deductions or Questions

Notes: • Gambling losses are deductible only up to the amount of gambling winnings reported. A log must be kept to verify losses.

- Work clothing is not deductible if adaptable for every day wear. Exception for safety equipment, such as steel-toe boots.
- Expenses to enable individuals, who are physically or mentally impaired, to work are generally deductible.

Adjustments Worksheet Educator expenses. Classroom expenses of teachers, counselors, and principals. Maximum \$250 each. \$ Health savings account deduction (HSA). Some contributions for 2020 may be made in 2021. Self-employed SEP, SIMPLE, and qualified plans. Some contributions for 2020 may be made in 2021. Self-employed health insurance deduction. Sole proprietors, partners, and 2% S corporation shareholders if not eligible for \$ employer coverage. Penalty on early withdrawal of savings. \$ \$ IRA deduction. For traditional IRAs. Roth IRAs are not deductible. Some contributions for 2020 may be made in 2021. Student loan interest deduction. Paid for taxpayers and dependents. Income limits apply. Tuition and fees deduction. Qualified tuition and fees if not claiming education credits. Income limits apply. \$ Moving expenses. Available only to members of the Armed Forces (or their spouses or dependents) on active duty that Ask preparer move pursuant to a military order and incident to a permanent change of station. Business expenses of reservists, performing artists, and fee-based government officials. Ask preparer Charitable contributions. For taxpayers who take the standard deduction. Up to \$300 per return.

Estimated Tax Payments — Tax Year 2020								
Installment	Date paid	Federal	Date paid	State				
First		\$		\$				
Second		\$		\$				
Third		\$		\$				
Fourth		\$		\$				
Amount applied from 2019 overpayment?		\$		\$				
Total		\$		\$				

Tax Preparation Checklist

Please provide the following documentation:

All Forms W-2 (wages), 1099-INT (interest), 1099-DIV (dividends), 1099-B (proceeds from broker or barter transactions), 1099-R (pensions and IRA distributions), Schedules K-1 from partnerships, S corporations, estates and trusts, and other income reporting statements, including all copies provided from the payer.

Form 1095-A (for health insurance purchased through a public exchange), Form 1095-B (for health insurance purchased outside of a public exchange), or Form 1095-C (for employer-provided health insurance coverage).

If you are a new client, provide copies of last year's tax returns.

The completed Individual Income Tax Organizer. *Note:* If you choose not to fill out the organizer, you must at least answer the "Yes" or "No" questions under "Questions—All Taxpayers."

Copy of the closing statement if you bought or sold real estate.

Mileage figures for any automobile expenses claimed, including total mileage, commuting mileage, and business mileage. Detail of estimated tax payments made, if any.

Income and deductions categorized on a separate sheet for business or rental activities.

List of itemized deductions categorized on a separate sheet for medical, taxes, interest, charitable, and miscellaneous deductions. Copy of all acknowledgement letters received from charitable organizations for contributions made in 2020.

Tax Return Preparation

We will prepare your tax return based on information you provide. In the event your return is audited, you will be responsible for verifying the items reported. It is important that you review the return carefully before signing to make sure the information is correct. Unless otherwise stated, the services for preparation of your return do not include auditing, review, or any other verification or assurance.

Taxpayer Responsibilities

- You agree to provide us all income and deductible expense information. If you receive additional information after we begin working on your return, you will contact us immediately to ensure your completed tax returns contain all relevant information.
- You affirm that all expenses or other deduction amounts are accurate and that you have all required supporting written records. In some cases, we will ask to review your documentation.
- You must be able to provide written records of all items included on your return if audited by either the IRS or state tax authority. We can provide guidance concerning what evidence is acceptable.
- You must review the return carefully before signing to make sure the information is correct.
- Fees must be paid before your tax return is delivered to you or filed for you. If you terminate this engagement before completion, you agree to pay a fee for work completed. A retainer is required for preparation of late returns.
- You should keep a copy of your tax return and any related tax documents. You may be assessed a fee if you request a copy in the
 future.

Signatures. By signing below, you acknowledge that you have read, understand, and accept your obligations and responsibilities. For a joint return, both taxpayers must sign.

	Эроизе	Date
Taxnauer	Svouse	Data

Privacy Policy

The nature of our work requires us to collect certain nonpublic information. We collect financial and personal information from applications, worksheets, reporting statements, and other forms, as well as interviews and conversations with our clients and affiliates. We may also review banking and credit card information about our clients in the performance of receipt of payment. Under our policy, all information we obtain about you will be provided by you or obtained with your permission.

Our firm has procedures and policies in place to protect your confidential information. We restrict access to your confidential information to those within our firm who need to know in order to provide you with services. We will not disclose your personal information to a third party without your permission, except where required by law. We maintain physical, electronic, and procedural safeguards in compliance with federal regulations that protect your personal information from unauthorized access.

Sole Proprietorship Tax Organizer

Name	roprie	etor General Information	n						
	of sole	proprietor							
Busine	ss nan	ne (if different)						EIN (if applicable)	
Busine	ss add	ress (if different from home	address)						
Princip	al bus	iness activity				Date business started		Date business closed	
		duct or service						ı	
Yes		Was the primary purpo	se of the bus	iness activi	ty to	realize a profit?			
Yes		Did you materially par							
Yes		Has the business report							
		nethod: Cash Acci		er (specify)					
Yes		Does the business file u		1 70	f no. l	ist the fiscal year.)			
		etor Specific Questions	aracr a carer	cuar y cuar (1	, ,,,,,,	ser ine freem genn,			
Yes	No								
						contractors attornove accor	ıntanta d	imaatama ata 2	
Yes	No	, , , ,				contractors, attorneys, accou			<u> </u>
Yes	No		rin 1099-NEC	_: List nume	e unu s	social security number (SSN)	for euch per	SSN	or more.
		Name Name						SSN	
1/	N.T.	- 100000	1 .	1	. 1	· · · · · · · · · · · · · · · · · · ·			
Yes	No		ou plan to ma	ike, any coi	ntribu	tions to a self-employed ref	irement p		
	3.7	Type of plan	1 1.1 / 1	. 1.		TC24 11 1 6		Amount contributed \$	
Yes	No	1 1 1		ental insura	ance?	If Yes, provide amount of pren	nıums paia	during the year.	5
Yes	No	Did you have any empl							
Yes	No	Did you have any barte	ering transact	tions in 202	0?				
ole P	roprie	etor Business Income							
Gross r	eceipt	s or sales (if you received l	Forms 1099-N	EC, list nan	ne of p	ayer and amount separately fr	om gross r	eceipts or sales)	3
Form	n 1099-	-NEC	\$		Fo	rm 1099-K		\$	
otal o	f all Fo	orms 1099-NEC and 1099	-K received					4	3
Return	s and	allowances						9	3 (
Other i	ncome	e (not included in gross rec	eipts above)					9	3
NEC, y	ou are		le Schedule (C, Profit or 1		m W-2) if you are not class from Business, claim any exp			
				COVID-19	9 Rela	ated			
		irers, wholesalers, and bus v, or sell goods)	Sole Proprietor Cost of Goods Sold (for manufacturers, wholesalers, and businesses			No Did you receive an Economic Injury Disaster Loan or Emergency A			
					NO		nic Injury	Disaster Loan or Emerge	ncy Advar
	nventory at the beginning of the year \$				No	through the SBA?			ncy Advar
nvento		he beginning of the year	\$	Yes Yes		through the SBA? Did you delay payment of	employe	payroll taxes?	
nvento ourcha	ses	he beginning of the year		Yes	No	through the SBA? Did you delay payment of Were you eligible to receiv Were you eligible to receiv	employer	payroll taxes?	COVID-19?
nvento Purcha Cost of	ses labor		\$ \$	Yes Yes Yes	No No	through the SBA? Did you delay payment of Were you eligible to receiv Were you eligible to receiv COVID-19?	employer re a tax cre re a tax cre	payroll taxes? dit for sick leave due to C	COVID-19? due to
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Purcha Cost of Materia nvento Sole P Advert	ses Tabor als and ory at roprie ising bts	d supplies the end of the year etor Business Expenses	\$ \$ \$ \$ \$	Yes Yes Yes Yes Interest –	No No No no other	through the SBA? Did you delay payment of Were you eligible to receiv Were you eligible to receiv COVID-19? Did you receive a payroll t	e a tax cree a tax credit f	r payroll taxes? Edit for sick leave due to Condit for paid family leave or a business suspension. Repairs and maintenance. Supplies (not included in inventory cost)	COVID-19? due to or slowdov
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Advertage and committee and co	ses Flabor als and ory at troprie dising bts harges ss licer dissions ct labor	d supplies the end of the year etor Business Expenses asses and fees or 1 nefit programs	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	Yes Yes Yes Yes Interest – Interest – Internet so Legal and Managem Meals – b Office sur	No No No No other ervices profesent feetusines	through the SBA? Did you delay payment of Were you eligible to receiv COVID-19? Did you receive a payroll t	se a tax cree a tax credit f	r payroll taxes? Indit for sick leave due to Condit for paid family leave or a business suspension. Repairs and maintenance Supplies (not included in inventory cost) Taxes – payroll 1 Taxes – property Taxes – sales Taxes – state Telephone	COVID-19? due to or slowdov \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$
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Advertage Commic Contract Employ Entertage	ses Flabor als ancory at roprie rising bts harges ss licer issions ct labor	d supplies the end of the year etor Business Expenses anses and fees or 1 nefit programs alth care plans	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	Yes Yes Yes Yes Yes Interest – Interest – Internet so Legal and Managem Meals – b Office sup Start-up c Pension a	No No No No other ervice profesent fee polies osts () nd pr	through the SBA? Did you delay payment of Were you eligible to receiv Were you eligible to receiv COVID-19? Did you receive a payroll t gage essional services ess first year of business) ofit sharing plans	s s s s s s s s s s s s s s s s s s s	Repairs and maintenance Supplies (not included in inventory cost) Taxes – payroll¹ Taxes – property Taxes – sales Taxes – state Telephone Utilities Wages¹	Sovidary States of the states
Advert Bank cl Busines Contract Employ Employ Enterta Gifts	ses flabor als and ory at roprie ising bts harges ss licer issions ct labor	d supplies the end of the year etor Business Expenses anses and fees or 1 nefit programs alth care plans	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	Yes Yes Yes Yes Yes Interest – Interest – Internet se Legal and Managem Meals – b Office sup Start-up c Pension a Rent or le	No No No No other ervices profetent feteusines pplies osts (j nd pr ase –	through the SBA? Did you delay payment of Were you eligible to receiv Were you eligible to receiv COVID-19? Did you receive a payroll t gage essional services ess first year of business)	se a tax credit f	r payroll taxes? Indit for sick leave due to Condit for paid family leave due to Condition and Payroll family leave due to Conditio	Solution State of the state of

¹ Provide copies of Form W-3, Form 940, Form 941, Form 1096, Form 1099-NEC, Form 1099-MISC, and any state tax forms filed. ² Entertainment is no longer deductible for taxes.

Other Busines	ss Expenses – <i>L</i>	ist out type and expens	se amount						
			\$					\$	
			\$					\$	
			\$					\$	
			\$					\$	
			\$					\$	
			\$					\$	
			\$					\$	
			\$					\$	
			\$					\$	
			\$					\$	
Car Expenses	s (use a separate fo	orm for each vehicle)					'		
Make/Model					Date car	placed in serv	ice		
	Car available for	personal use during	off-duty hours?			•			
		spouse) have any oth		al use?	Did you	trade in your o	ar this year?	Yes N	lo .
	Do you have evi		•		Cost of t		Trade-in	value	
	Is your evidence				\$		\$		
I		Mileage					Actual Expens	ses	
Beginning of y	zear odometer				Gas/oil		\$		
End of year od					Insuran	ce	\$		
Business milea						fees/tolls	\$		
Commuting m						tion/fees	\$		
					Repairs	tion, ices	\$		
Other mileage	Other mileage Repairs \$ Generally, you can use either the standard mileage rate or actual expenses to figure the deductible costs of operating your car for b							vour car fo	r husiness nu
Other mileage Generally, you	can use either th	ie standard mileage r	ate or actual exper					J	
Generally, you								Later vear	s vou can the
Generally, you poses. However	er, to use the star	ndard mileage rate, it	must be used in the	he first y				n later year	s, you can the
Generally, you poses. However choose between	er, to use the star en either the stand		must be used in the	he first y				n later year	s, you can the
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Depreciation. Depreciation is the annual deduction that allows you to recover the cost or other basis of your business property over a certain number of years. Depreciation starts when you first use the property in your business. It ends when you either take the property out of service, deduct all your depreciable cost or basis, or no longer use the property in your business. The IRS has outlined a useful life (a set number of years) for most assets.

Equipment Sold or Disposed of During Year				
Asset	Date out of service	Date sold	Selling price/FMV	Trade-in?
			\$	
			\$	
			\$	
			\$	

Disposition of Property. A disposition of property occurs when you sell property for cash or other property, you exchange property for other property, you transfer property to satisfy a debt, you abandon property, your bank forecloses or repossesses your property, or your property is damaged, destroyed, or stolen and you receive property or money in payment.

Business Use of the Home

Area of home must be exclusively used for business except for storage or day care. *Note:* Managing rental activities or investments does not qualify for business use of the home.

All Taxpayers	For Day Care Only			
A) Business use area (square footage)		1) Hours used for day care		
B) Total area of home (square footage)		2) Total hours in year	8,760 hrs.	

Enter below only the expenses paid during the period the home was used for business.

Direct expenses benefit only the business use portion of the home. This includes painting or repairs exclusively for the business area.

Indirect expenses are for keeping up and running the entire home, such as mortgage interest and property taxes.

If you bought or sold your home during 2019, copy this worksheet and fill out one for each home.

	Direct	Indirect		Direct	Indirect
Mortgage interest	\$	\$	Repairs and maintenance	\$	\$
Property taxes	\$	\$	Utilities	\$	\$
Insurance	\$	\$	Other	\$	\$
Rent	\$	\$	Other	\$	\$
Depreciation of the Home					
Lower of cost or fair market value of home		\$	Improvements?	Yes No	
Value of land		\$	Casualty losses in 2020?	Yes No	

1) Exclusive Use Test—Business Use of Home

The exclusive use test is met if an area of the home is used only for business. The area can be a room or other separately identifiable space. The space does not need to be marked off by a permanent partition. This test is not met if you use the area both for business and for personal purposes, such as a den used for business during the day and TV viewing during the evening.

The exclusive use test is not required for:

- An area used on a regular basis for storage of inventory or product samples.
- A home used as a day care facility.

Storage of inventory or product samples—exception to exclusive use test. If you use part of a home for business to store inventory or product samples you are not required to meet the exclusive use test. However, you must meet all the following tests.

- You are in the business of selling products at wholesale or retail.
- The inventory or product samples are kept in the home for use in the business.
- You home is the only fixed location of the business.
- The storage space is used on a regular basis.
- The storage space is a separately identifiable space suitable for storage.

2) Regular Use Test—Business Use of Home

The regular use test means you must use a specific area of the home for business on a regular basis. Incidental or occasional business use is not regular use. All facts and circumstances are considered in determining whether the business use is regular.

3) Trade or Business Use Test—Business Use of Home

To satisfy the trade or business use test, the portion of the home used for business must be used in connection with a trade or business. If the business use is for a profit-seeking activity that is not a trade or business, the deduction is not allowed.

4) Principal Place of Business Test—Business Use of Home

A trade or business can have more than one location. To qualify for a business use of home deduction, the home must be the principal place of business for that trade or business. To make this determination, the following are considered.

- The relative importance of the activities performed at each place where business is conducted, and
- The amount of time spent at each place where business is conducted.

A home office qualifies under this test if:

- The home office is used exclusively and regularly for administrative or management activities of the trade or business.
- There is no other fixed location where substantial administrative or management activities are conducted.

Self-Employment (SE) Tax

- SE tax is a Social Security and Medicare tax primarily for individuals who are self-employed. It is similar to the Social Security and Medicare tax withheld from the pay of most wage earners. Your payments of SE tax contribute to your coverage under the Social Security system. Social Security coverage provides you with retirement benefits, disability benefits, survivor benefits, and hospital insurance (Medicare) benefits.
- You must pay SE tax if your net earnings from self-employment were \$400
 or more, or you had church employee income of \$108.28 or more. The SE
 tax rules apply no matter how old you are and even if you are already
 receiving Social Security or Medicare benefits.
- The SE tax rate on net earnings is 15.3% (12.4% for Social Security plus 2.9% for Medicare). Only the first \$142,900 (2020) of combined wages, tips, and net earnings is subject to the 12.4% Social Security part of SE tax.