

2024 FARM ORGANIZER

NAME _____

IMPORTANT NOTE: AMOUNTS ENTERED HERE SHOULD NOT BE LISTED ON ANY OTHER ORGANIZER!

Do not report any income or expense for a partnership. Instead include Sch. K-1. Please furnish copies of all 1099s you received.

FARM INCOME

DID YOU REVIEW LAST YEAR'S DEPRECIATION LIST FOR ACCURACY? YES NO

_____ Cattle, pigs, etc. born and raised on farm (**NOT** culled dairy and breeding animals; report on **Asset Sale** organizer)

_____ Milk _____ Machine hire/custom work (send detail)

_____ Calves _____ Supplies and scrap

_____ Crops (kind _____) _____ Patronage dividend (**enclose 1099 form**)

_____ Pasture rent income _____ Govt. payments (**enclose 1099 form**)

_____ Other (describe _____) _____ Value of personal/family consumption

If you have enclosed any Forms 1099, are the amounts included in any amount above (circle one and indicate where)? YES NO

LIVESTOCK, ETC., PURCHASED TO FATTEN AND THEN SOLD

Cattle, veal, hogs . . Sale price _____ Purchase cost _____ Purchase year _____

_____ Sale price _____ Purchase cost _____ Purchase year _____

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FARM EXPENSES

Did you make any payments for which you are required to file Form 1099? YES NO

SEE REVERSE _____ Car and pickup expenses _____ Rent expense for farm, land, pasture
Does this include your house? Yes No

_____ Chemicals, sprays _____ Rent expense for cows

_____ Custom hire (machine work) _____ Building repairs

_____ Labor (do not include wages on payroll) _____ Machinery repairs (*not car, pickup*)

_____ Health insurance (NOT healthcare sharing ministry) for your family _____ Seeds, plants

_____ Feed _____ Supplies (*include tools up to \$2,500*)

_____ Fertilizer and lime _____ Real estate tax (_____ % if not 100%)

_____ Freight and trucking _____ Payroll tax

_____ Gasoline for machinery (*not car/pickup*) _____ Electric (_____ % if not 100%)
(Gals. off-road _____)

_____ Diesel for machinery (*not car/pickup*) _____ Phone, farm line *Circle one* CELL LANDLINE

_____ Oil _____ Phone, other line *Circle one* CELL LANDLINE

_____ Insurance (*NOT health, house, vehicle*) _____ Veterinary, breeding, medicine

_____ Mortgage interest (**enclose 1098 form**) _____ Straw and bedding

_____ Other interest for farm loans (send detail) _____ Milk/soil/feed testing

_____ Wages reported on payroll _____ Tax return filing

_____ Rent for machinery, equipment _____ Office supplies, stamps, envelopes

_____ Other (describe _____) _____ Ohio Commercial Activity Tax (CAT)

_____ Other (describe _____) _____ Other (describe _____)

_____ Other (describe _____) _____ Other (describe _____)

2024 BUSINESS USE OF CAR/PICKUP/HOME

AMOUNTS ENTERED HERE SHOULD NOT BE LISTED ON ANY OTHER ORGANIZER!

IMPORTANT NOTES:

- **MILEAGE, DATE-OF-PURCHASE, AND INTEREST INFORMATION ARE NEEDED FOR ALL VEHICLES WITH BUSINESS USE.**
- OPERATING EXPENSE AND PURCHASE PRICE ARE NEEDED **ONLY** FOR VEHICLES FOR WHICH YOUR DEDUCTION WILL BE CALCULATED USING THE ACTUAL-EXPENSE METHOD.

VEHICLE #1

Year/make/model _____ GVW _____ POUNDS

Date of purchase/lease _____ (required) IF SOLD, DATE _____ \$ _____

Total purchase/lease price _____ (include sales tax) WAS VEHICLE TRADED IN? YES NO

Business mileage _____ (required)

Personal mileage _____ (required) END ODOMETER _____

2024 **TOTAL MILEAGE** _____ miles BEG ODOMETER _____

Operating expenses, including fuel, oil, repairs, tires, insurance, license \$ _____ If leased, total payments made in 2024 \$ _____

Interest paid on loan \$ _____ (required for all business use vehicles)

VEHICLE #2

Year/make/model _____ GVW _____ POUNDS

Date of purchase/lease _____ (required) IF SOLD, DATE _____ \$ _____

Total purchase/lease price _____ (include sales tax) WAS VEHICLE TRADED IN? YES NO

Business mileage _____ (required)

Personal mileage _____ (required) END ODOMETER _____

2024 **TOTAL MILEAGE** _____ miles BEG ODOMETER _____

Operating expenses, including fuel, oil, repairs, tires, insurance, license \$ _____ If leased, total payments made in 2024 \$ _____

Interest paid on loan \$ _____ (required for all business use vehicles)

HOME OFFICE DEDUCTION (All of the following information must be furnished to compute the deduction.)

Is office area used regularly and exclusively for business? _____ Yes _____ No

Is this the only space available for office duties? _____ Yes _____ No

IF THE ANSWER TO EITHER QUESTION IS "NO," THE HOME OFFICE DEDUCTION IS NOT ALLOWED.

Total \$\$\$ invested in home & lot \$ _____ Cost of land (include in total at left) \$ _____

Square feet of the home office area _____ sq. ft. Date of occupancy _____

Total sq. feet of heated area of home _____ sq. ft. Rent pd for the year \$ _____

Real estate tax \$ _____ Electric \$ _____ Trash \$ _____

Mortgage interest \$ _____ Heat \$ _____ Repairs \$ _____

Insurance \$ _____ Water \$ _____ Cing, mtn \$ _____

Lawn care \$ _____