

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

### Expenses

	2022	2021		2022	2021
Car & truck expenses . . . . .	_____	_____	Repairs & maintenance . . . . .	_____	_____
Chemicals . . . . .	_____	_____	Seeds & plants purchased . . . . .	_____	_____
Conservation expenses . . . . .	_____	_____	Storage & warehousing . . . . .	_____	_____
Custom hire (machine work) . . . . .	_____	_____	Supplies purchased . . . . .	_____	_____
Employee benefit programs . . . . .	_____	_____	Taxes . . . . .	_____	_____
Feed purchased . . . . .	_____	_____	Utilities . . . . .	_____	_____
Fertilizers & lime . . . . .	_____	_____	Veterinary, breeding, & medicine . . . . .	_____	_____
Freight & trucking . . . . .	_____	_____	Family health coverage payments for taxpayer, spouse or dependents	_____	_____
Gasoline, fuel, & oil . . . . .	_____	_____	Other expenses (list) . . . . .	_____	_____
Insurance (other than health) . . . . .	_____	_____			
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	_____	_____			
Rent - other (land, animals, etc.) . . . . .	_____	_____			



### 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?  
  Was another vehicle is available for personal use?

Yes No  
  Do you have evidence to support your deduction?  
  If "Yes," is the evidence written?

<b>Number of miles the vehicle was driven during 2022</b>	<b>2022</b>	<b>2021</b>	<b>Total number of miles the vehicle was driven in prior years</b>	<b>2022</b>	<b>2021</b>
Business:	Before July 1	_____	Business	_____	_____
	After June 30	_____	Total	_____	_____
Commuting	_____	_____			
Other	_____	_____			

<b>Expenses</b>	<b>2022</b>	<b>2021</b>		<b>2022</b>	<b>2021</b>
Garage rent	_____	_____	Repairs	_____	_____
Gas	_____	_____	Tires	_____	_____
Insurance	_____	_____	Tolls	_____	_____
Licenses	_____	_____	Lease addback	_____	_____
Oil	_____	_____	Other expenses	_____	_____
Parking fees	_____	_____		_____	_____
Rental fees	_____	_____		_____	_____
Interest	_____	_____		_____	_____
Property tax	_____	_____		_____	_____

**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

<b>Expenses</b>	<b>Office expenses</b>	<b>Home expenses</b>		<b>2022</b>	<b>2021</b>
	<b>2022</b>	<b>2021</b>			
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.









