

GRAIN IN BIN \$ _____
 DEFERRED
 PAYMENTS \$ _____

DATE _____

PPP Loan Amount _____
PPP Loan Forgiveness _____
Stimulus Pay Rec'd _____

FARMERS WORKSHEET
 (Please submit both copies)

Name: _____
 Spouse: _____
 Address: _____

PLEASE PROVIDE A CURRENT COPY OF YOUR DRIVERS LICENSE

Date of Birth _____ Social Security # _____
 Spouse Date of Birth _____ Social Security # _____
 Name of Child born in current yr. _____ DOB _____ M/F Social Security # _____
Did you make any estimated payments? Y/N (List on page 2)
Did you have Health Insurance all year? Y/N
Have received tax forms from your investments? Y/N/NA (Edward Jones, Raymond James)

Phone # _____ Cell # _____ School Dist. _____

PART I FARM INCOME:

**SALE OF PURCHASED FEEDER LIVESTOCK
 OTHER THAN BREEDING STOCK:**

	Amt Rec'd	Original Cost
Cattle	_____	_____
Other	_____	_____

SALE OF LIVESTOCK & PRODUCT RAISED

Calves-Head #	_____
Grain & Sunflowers	_____
State Gas Refund	_____
Patronage Dividends	_____
Machine Work	_____
ASCS Payments	_____
CCC-Grain Loans	_____
Crop Insurance	_____
Other	_____
_____	_____
_____	_____
_____	_____

PART II FARM DEDUCTIONS:

Chemicals	_____
Custom Machine Hire	_____
Feed Purchased	_____
Fertilizer & Lime	_____
Freight, Trucking	_____
Gasoline/Fuel/Oil- <u>farm only</u>	_____
Insurance	_____
Interest Expense	_____
Labor Hired	_____
Rent of Machinery	_____
Rent of Farm/Pasture	_____
Repairs/Maintenance	_____
Seeds/Plants Purchased	_____
Storage/Warehousing	_____
Supplies Purchased	_____
Taxes (<u>not</u> income tax)	_____
Utilities- <u>farm share only</u>	_____
Vet/Medicine/Breeding	_____
AgPlan/BizPlan Exp	_____
USDA payback	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

DO NOT WRITE IN THIS AREA		
Med. Ins.	\$(_____)	
S/S	(_____)	Tax \$ _____
Farm Inc.	_____	S/S _____
W2	_____	Med _____
Int/Div	_____	Credits _____
_____	_____	State _____
_____	_____	Total \$ _____
_____	_____	
_____	_____	
AGI	_____	
Std. Ded.	_____	
199A Ded.	_____	
Tax. Inc.	\$_____	

