

Marta Sullivan, CPA

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Welcome to the 2025 tax year! A few things to note:

- A fully completed tax packet including all official tax forms is required. Please submit all information at ONE time, in one to three PDFs, rather than piecemeal. Those expecting K-1s that do not arrive until later in the year can still complete all of the return during the normal tax season, and then we'll add the K-1 upon receipt and e-file.
- Do not send receipts, excel worksheets and check stubs-only the packet and applicable tax forms.
- Should you have questions as you complete the tax packet, please email me so we can resolve any issues that may arise beforehand.
-

ENGAGEMENT OF SERVICES AGREEMENT

Marta Sullivan, CPA

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PRINT YOUR NAME(s) _____

DATE _____

This letter is to confirm our understanding of the terms and objectives of our engagement and the nature and limitations of the services I will provide. Our engagement is limited in scope and will be confined to the procedures and practices set forth herein:

I will prepare your federal income tax return, and income tax returns for the **STATE(s) OF** _____ with supporting schedules (if possible, E-File) and perform related research as considered necessary (herein after known collectively as the "returns"). This engagement pertains only to the **TAX YEAR** _____.

My engagement will be complete upon the delivery of the completed returns to you, unless you notify me that you require further tax services including, but not limited to, amendments, audit representation, extensions, past year returns, and all other services related to your income tax returns you request.

The fees for my primary services are per, and as specified in, the accompanying schedule, and services not specifically identified therein will also be based on an hourly rate of **\$330 per hour** or the scheduled rate I publish for that time frame of the current tax year. Your actual client fees incurred will be based on the complexity of your returns, and the time necessary to complete such services.

Based on what can be anticipated for your present expressed needs, I **estimate** that the fees you will pay to Marta Sullivan, CPA, will range from **\$325-\$1,500** (see attached fee schedule on next page) for preparing your Federal and any State income tax returns. This figure may change if more time and/or services other than written above prove to be needed, including services at a later date, such as preparing amendments and providing audit representation. If we anticipate our fees exceeding the aforementioned range, you will be presented the new fees in writing, so as to obtain your approval before continuing with the engagement.

Should my services for a given tax year extend for more than a one-year period, another Engagement of Services Agreement needs to be completed for each year of continuing work.

Please take special note that unless the processing of electronic filing is appropriate for your returns, you will be solely responsible for filing any returns I prepare for you with the appropriate taxing authorities.

I will furnish you with worksheets to guide you in gathering and understanding the necessary information required for your tax preparation. Your thorough completion and use of these worksheets provide for the most accurate return and assist me in keeping my fees to a minimum.

It is your responsibility to provide all the information required for the preparation of complete and accurate returns. I will not audit or otherwise verify the data you submit. Accordingly, my engagement cannot be relied upon to disclose errors, fraud or other illegal acts that may exist in the information you have provided. You are responsible for adopting sound accounting policies, for maintaining an adequate and efficient accounting system for safeguarding assets, for authorizing transactions and retaining supporting documentation for those transactions.

Understand that should you choose to file a return in arrears of the current tax year, or when an amended return is appropriate, a refund is only available to you for 3 years prior to the current tax year.

In addition to the information you have placed in the Tax Packet, or other papers you may provide, you further acknowledge that to the best of your knowledge and belief during the interview/preparation process you have provided accurate, complete and full disclosure in your answers to any and all questions regarding income, expenses, deductions and exemptions in an effort to ensure that your return is prepared accurately.

continued on next page...

ENGAGEMENT OF SERVICES AGREEMENT continued

To the extent I render any accounting and/or bookkeeping assistance, it will be limited to those tasks I deem necessary for the preparation of the returns and may lead to additional costs. Therefore, your commitment is essential to my ability to complete this engagement. Specifically, I must receive comprehensive information from which to prepare your returns within a reasonable period of time.

If, during our work, I discover information that affects your prior-year tax returns, I will make you aware of the facts. However, I cannot be responsible for identifying all items that may affect your prior-year returns. If you become aware of such information during the year, please contact me to discuss the best resolution of the issue.

It is always possible your returns may be selected for review (audit) by one or more taxing authority. Any proposed adjustments by the examining agent are subject to certain rights of appeal. In the event of such tax examination(s), I will be available upon your written request to represent you during the examination and/or during any appeal for an additional hourly fee.

You should retain all the documents, receipts, records, canceled checks and other data that form the basis of income and deductions for at least four years. These may be necessary to prove the accuracy and completeness of the returns to a taxing authority. You have the final responsibility for the income tax returns and, therefore, you should review them carefully before you sign the returns and/or the e-file Signature Authorization Forms.

This engagement letter is contractual in nature and includes all the relevant terms that will govern the engagement for which it has been prepared. The terms of this letter supersede any prior oral or written representations or commitments by or between the parties. Any material changes or additions to the terms set forth in this letter will only become effective if evidenced by a written amendment to this letter, signed by all the parties.

Marta Sullivan, CPA

In acknowledgment and acceptance of these terms and considerations, and as client(s) of Marta Sullivan, CPA (I) (we) hereby enter (my) (our) signature(s).

TAXPAYER 1 SIGNATURE: _____ **DATE:** _____

TAXPAYER 2 SIGNATURE: _____ **DATE:** _____

RATE SCHEDULE

Based on a 90-minute tax return

<u>TAX PREPARATION</u>	<u>ADDITIONAL SERVICES</u>
February \$325	Married filing jointly – add \$100
March 1 – 15 \$385	Single member LLC – add \$325
March 16 – 31 \$445	More than 1 state – add \$60 per state
April – December 15 \$495	Overtime - \$165 per ½ hour Late cancellation fee - \$50
	Additional copy of return if lost - \$50

PRE-APPOINTMENT CHECK LIST

COMMON TAX DOCUMENTS THAT MAY OR MAY NOT BE APPLICABLE TO YOU:	
Last year's tax return if you are a new client	
1099-MISC other miscellaneous income	
1099-NEC independent contract income (NOTE: IF YOU HAVE THIS, OR CASH INCOME AND LIVE WITHIN THE CITY LIMITS OF LA (LA City Limits) YOU MUST FILE FOR A BUSINESS TAX REGISTRATION CERTIFICATE. <u>New Business Registration</u> THIS IS NOT A FEDERAL OR STATE INCOME TAX, SO THIS INFO IS PROVIDED AS A COURTESY.)	
1099-INT interest income	
1099-DIV dividend income	
1099-B stock sales	
1099-G prior year state refund, unemployment income	
SSA-1099 Social Security benefits	
1099-R retirement plan distributions	
1099-K payment cards, online marketplaces	
1095-A health insurance purchased through marketplace (ACA)	
1098-E student loan interest	
1098-T tuition statement	
W-2 (NOTE: compare your check stubs with W-2s received to make sure you report ALL W-2s or you will receive a PENALTY AND INTEREST NOTICE later in the year.)	
Annual IRS IP-PIN identity theft identification number notice	
Child's birth certificate, Social Security Card or Health Insurance Form to prove relationship	
Closing statements if you BOUGHT or SOLD PROPERTY	
Rideshare driving-COMplete rideshare income tax packet	
Residential property rental-COMplete rental property income tax packet	
K-1s from partnerships, trusts or S-Corporations	
Single Member LLC State and Federal formation documents	
Lender-provided statement for purchase of new car in 2025 for interest deduction	

HEALTH CARE check one box:

- We were covered by a plan on the Health Insurance Marketplace. You **MUST** give me your Form **1095-A**
- We were covered by an employer offered health insurance (includes SAG-AFTRA). Which months covered? _____
- We directly purchased health insurance. Which months covered? _____
- We were not covered by health insurance.

CHILD TAX CREDIT

If you are claiming a child on your tax return you **MUST** give me a document for EACH child that includes (A) their name and (B) Your name, and/or (C) at least the last 4 digits of their SSN, for example, their Birth Certificate or Health Insurance Form, and I need a new copy EVERY year that you claim the child

EXTENSIONS

Did you file an EXTENSION for your 2025 tax return? Yes No Did you make any payments? \$ _____

DIGITAL ASSETS (cryptocurrency)

Did you buy, sell or exchange any digital assets, use digital assets to pay for goods and services, or receive digital assets as payment for goods and services? Yes No Provide form 1099-DA or fill out 8949 for gains/losses

IDENTITY PROTECTION PIN

IF THE IRS SENT AN IP-PIN TO TAXPAYER 1, ENTER IT HERE _____
IF THE IRS SENT AN IP-PIN TO TAXPAYER 2, ENTER IT HERE _____

ESTIMATED TAX PAYMENTS TOWARD YOUR 2025 TAX BILL

(IF YOU DON'T KNOW WHAT THIS IS, YOU DIDN'T MAKE ANY)

DATE	FEDERAL	STATE
Quarter 1 =	\$	\$
Quarter 2 =	\$	\$
Quarter 3 =	\$	\$
Quarter 4 =	\$	\$
TOTAL	\$	\$

SELF PAID HEALTH INSURANCE including long term care, Medicare <u>supplemental</u> , but not life insurance (Not from your W-2 or Soc. Sec.)	\$		
MEDICAL EXPENSES not reimbursed by insurance. i.e. co-pays, dental, vision, glasses, therapy, prescriptions, PPE, ambulance, parking at medical facilities...	\$		
REAL ESTATE TAXES AKA PROPERTY TAX	\$		
HOME MORTGAGE INTEREST	\$		
PRIVATE MORTGAGE INSURANCE	\$		
EDUCATOR EXPENSES K-12 Full-Time teachers only, to the max of \$300	\$		
INDIVIDUAL RETIREMENT PLAN CONTRIBUTIONS (Do Not include 401k amounts or other employer-sponsored plans)	TAXPAYER 1	TAXPAYER 2	
	TRADITIONAL IRA	\$	\$
	ROTH IRA	\$	\$
	OTHER _____	\$	\$
	OTHER _____	\$	\$

Please combine if multiple donations to the same recipient. **If info below is not provided, I cannot include.**

Name of charity	CHARITABLE CONTRIBUTIONS OF FUNDS Address	501(c)(3) FED ID	Date	Amount
				\$
				\$
				\$
				\$
				\$
<i>use additional sheet if needed</i>			TOTAL	\$
Name of charity	CHARITABLE CONTRIBUTIONS OF GOODS Address	501(c)(3) FED ID	Date	Amount
				\$
				\$
				\$
				\$
				\$
<i>use additional sheet if needed</i>			TOTAL	\$

ALIMONY / SPOUSAL SUPPORT

If your divorce was **finalized in 2018 or earlier**, > What did you **pay** in spousal support last year \$ _____

What is your ex's SSN _____ > What did you **receive** in spousal support last year \$ _____

WARNING: Are you a SIGNATORY on ANY accounts outside the U.S.?

At any time during the last year, did you have a foreign account that had a value, *for even one day*, of \$10,000 U.S. Dollars or more? Then you **MUST** fill in the FBAR form available at

<https://www.fincen.gov/report-foreign-bank-and-financial-accounts> You are responsible for this filing.

>>> NEW FOR 2025 <<<

Qualified TIP INCOME

W-2: Did you report any tips to your employer?

Taxpayer 1 Yes or No

Taxpayer 2 Yes or No

1099/Independent Contractor: Did you include any tips in your income totals?

Taxpayer 1 Yes or No

Taxpayer 2 Yes or No

If you answered YES above, please list total tips reported/included in 2025.

Note: do not include mandatory service fees, (ex. when large parties incur service charge).

	TOTAL TIPS	WHO PAID YOU	TYPE OF WORK
Taxpayer 1 total W-2 tips	\$		
Taxpayer 2 total W-2 tips	\$		
Taxpayer 1 total 1099 / Ind. contractor tips	\$		
Taxpayer 2 total 1099 / Ind. Contractor tips	\$		

Qualified OVERTIME

W-2: Did you get paid overtime for working more than 40 hours in a week?

Taxpayer 1 Yes or No

Taxpayer 2 Yes or No

1099/Independent Contractor: does not qualify

If you answered YES above, please enter:

	REG. HOURLY RATE	TIME & A HALF	DOUBLE TIME	PAYER
Taxpayer 1's W-2	\$	\$	\$	
Taxpayer 2's W-2	\$	\$	\$	

Car Loan INTEREST (lender should provide this information)

Did you purchase a **BRAND NEW** (not pre-owned) car between 1/1/25 and 12/31/25?

Taxpayer 1 Yes or No

Taxpayer 2 Yes or No

Did you get a loan for it?

Taxpayer 1 Yes or No

Taxpayer 2 Yes or No

If you answered YES to BOTH above, please enter:

VIN number _____ Amount of interest paid in 2025 _____

TAXPAYER 1 WORK DEDUCTIONS

NOTE: W-2 RELATED EXPENSES ARE ONLY DEDUCTIBLE AT THE STATE LEVEL & ONLY IF ABOVE \$6,000. SO DO NOT WASTE TIME ENTERING UNLESS OVER \$6K PER TAXPAYER.

		EMPLOYEE (W-2 EXPENSES DEDUCTIBLE IN STATE, ONLY IF > \$6K)	SELF EMPLOYED (CASH & 1099-NEC EXPENSES)	SINGLE MEMBER LLC
	<i>BUSINESS NAME OR PROFESSION</i>	N/A		
	<i>EIN(SMLLC)</i>	N/A	N/A	#
	<i>STATE ID (SMLLC)</i>	N/A	N/A	#
	<i>CASH INCOME you are SELF-REPORTING (NOT from any 1099 or W-2)</i>	N/A	\$	\$
8	BUSINESS GIFTS Amounts are still limited to \$25 per person, per year			
8	ADVERTISING & PUBLICITY website, business cards, post cards, reels, headshots, networking costs			
10	COMMISSIONS & FEES call your rep to get actual numbers, don't just take X% of your income			
10	ON-LINE JOB SEARCH REGISTRIES i.e. IMDB, Actors Access, Casting Networks, theatre co. dues			
11	CONTRACT LABOR YOU PAID OUT 1099-NEC MUST BE SENT BY YOU FOR AMOUNTS OVER \$600, OR \$ IS NOT DEDUCTIBLE 1099 ISSUED? YES [] NO []			
15	BUSINESS INSURANCE TO DO THIS JOB not health ins.			
18	OFFICE SUPPLIES ink, printer paper, postage, cloud storage, software, etc.			
18	POST OFFICE BOX			
20 A	EQUIPMENT LEASE OR RENT WRITE- IN DETAILS:			
20 B	OFFICE / THEATRE / STUDIO RENTAL i.e. rehearsal space, NOT where you live			
21	EQUIPMENT REPAIR / MAINTENANCE WRITE- IN DETAILS:			
21	COSTUME REPAIR / MAINTENANCE WRITE- IN DETAILS:			
21	SUPPLIES FOR RESEARCH / JOB SEARCH WRITE- IN DETAILS:			

21	COST OF MERCHANDISE for Sale or Promo WRITE- IN DETAILS:			
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TAXPAYER 1 WORK DEDUCTIONS
CONTINUED

		EMPLOYEE (W-2 EXPENSES DEDUCTIBLE IN STATE, ONLY IF > \$6K)	SELF EMPLOYED (CASH & 1099-NEC EXPENSES)	SINGLE MEMBER LLC
22	PURCHASE of PROFESSIONAL COSTUMES & UNIFORMS NOT general street wear; doctor, clown. MUST be tied to an audition or gig			
22	PROF MAKE-UP, HAIR, NAILS/ SUPPLIES MUST be tied to an audition or gig			
23	TAXES, LICENSE, CERTIFICATION FEES <i>WRITE- IN DETAILS:</i>			
27	SELF-TAPES, PROFESSIONAL COACHING, <i>WRITE- IN DETAILS:</i>			
27	CONTINUING EDUCATION Not already reported on a form 1098-T			
27	2 nd PHONE LINE, FAX LINE <i>WRITE- IN DETAILS:</i>			
27	CELL PHONE BUSINESS PORTION \$ AMT. Total X Business Usage %			
27	INTERNET BUSINESS PORTION \$ AMT. Total X Business Usage %			
27	RESEARCH VIEWING BUSINESS PORTION \$ AMT. cable, streaming, concerts, live theatre, movies, etc			
2106 / 27	UNION DUES & INITIATION FEES - INCLUDE 2% AEA DUES			
	LEGAL & ACCOUNTING tax prep, bookkeeping, work-related contract review, etc.			
	OTHER <i>WRITE- IN DETAILS:</i>			
	OTHER <i>WRITE- IN DETAILS:</i>			
	OTHER <i>WRITE- IN DETAILS:</i>			

In the unlikely event of an audit, YOU MUST be able to prove EVERY number with receipts. Numbers should not all end in double zeros i.e., \$600, \$2,700, \$3,500 as it implies estimated, not exact. The ONLY rounding up or down is at the fifty-cent point. \$2.49 becomes \$2 & \$2.50 becomes \$3

TAXPAYER 2 WORK DEDUCTIONS

NOTE: W-2 RELATED EXPENSES ARE ONLY DEDUCTIBLE AT THE STATE LEVEL & ONLY IF ABOVE \$6,000. SO DO NOT WASTE TIME ENTERING UNLESS OVER \$6K PER TAXPAYER.

		EMPLOYEE (W-2 EXPENSES DEDUCTIBLE IN STATE, ONLY IF > \$6K)	SELF EMPLOYED (CASH & 1099-NEC EXPENSES)	SINGLE MEMBER LLC
	BUSINESS NAME/PROFESSION:			
	<u>CASH INCOME</u> you are <u>SELF-REPORTING</u> <i>(NOT from any 1099 or W-2)</i>	N/A	\$	\$
8	BUSINESS GIFTS Amounts are still limited to \$25 per person, per year			
8	ADVERTISING & PUBLICITY website, business cards, post cards, reels, headshots, networking costs			
10	COMMISSIONS & FEES call your rep to get actual numbers, don't just take X% of your income			
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15	BUSINESS INSURANCE TO DO THIS JOB not health ins.			
18	OFFICE SUPPLIES ink, printer paper, postage, cloud storage, software, etc.			
18	POST OFFICE BOX			
20 A	EQUIPMENT LEASE OR RENT <i>WRITE- IN DETAILS:</i>			
20 B	OFFICE / THEATRE / STUDIO RENTAL i.e. rehearsal space, NOT where you live			
21	EQUIPMENT REPAIR / MAINTENANCE <i>WRITE- IN DETAILS:</i>			
21	COSTUME REPAIR / MAINTENANCE <i>WRITE- IN DETAILS:</i>			
21	SUPPLIES FOR RESEARCH / JOB SEARCH <i>WRITE- IN DETAILS:</i>			
21	COST OF MERCHANDISE for Sale or Promo <i>WRITE- IN DETAILS:</i>			

TAXPAYER 2 WORK DEDUCTIONS
CONTINUED

		EMPLOYEE (W-2 EXPENSES DEDUCTIBLE IN STATE, ONLY IF > \$6K)	SELF EMPLOYED (CASH & 1099-NEC EXPENSES)	SINGLE MEMBER LLC
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27	RESEARCH VIEWING BUSINESS PORTION \$ AMT. cable, streaming, concerts, live theatre, movies, etc			
2106 / 27	UNION DUES & INITIATION FEES - INCLUDE 2% AEA DUES			
	ACCOUNTING AND LEGAL tax prep, bookkeeping, work-related contract review, etc.			
	OTHER <i>WRITE- IN DETAILS:</i>			
	OTHER <i>WRITE- IN DETAILS:</i>			
	OTHER <i>WRITE- IN DETAILS:</i>			

In the unlikely event of an audit, YOU MUST be able to prove EVERY number with receipts. Numbers should not all end in double zeros i.e., \$600, \$2,700, \$3,500 as it implies estimated, not exact. The ONLY rounding up or down is at the fifty-cent point. \$2.49 becomes \$2 & \$2.50 becomes \$3

EQUIPMENT EXPENSE

Items costing \$500 or over and at least 50% business use

Any less expensive items should be added to "office supplies" or "supplies for research/job search"

		DESCRIPTION	PURCHASE DATE	COST			NET WRITE-OFF
<input type="checkbox"/> Taxpayer 1 <input type="checkbox"/> Taxpayer 2	<input type="checkbox"/> W-2 <input type="checkbox"/> 1099 <input type="checkbox"/> LLC	Example: Multifunction Printer	April 13	\$ 500	X 55	% =	\$ 275
<input type="checkbox"/> Taxpayer 1 <input type="checkbox"/> Taxpayer 2	<input type="checkbox"/> W-2 <input type="checkbox"/> 1099 <input type="checkbox"/> LLC			\$	X	% =	\$
<input type="checkbox"/> Taxpayer 1 <input type="checkbox"/> Taxpayer 2	<input type="checkbox"/> W-2 <input type="checkbox"/> 1099 <input type="checkbox"/> LLC			\$	X	% =	\$
<input type="checkbox"/> Taxpayer 1 <input type="checkbox"/> Taxpayer 2	<input type="checkbox"/> W-2 <input type="checkbox"/> 1099 <input type="checkbox"/> LLC			\$	X	% =	\$
<input type="checkbox"/> Taxpayer 1 <input type="checkbox"/> Taxpayer 2	<input type="checkbox"/> W-2 <input type="checkbox"/> 1099 <input type="checkbox"/> LLC			\$	X	% =	\$

this is the "I DON'T KNOW WHERE IT GOES" section

DESCRIPTION	DATE	COST
		\$
		\$
		\$
		\$

OFFICE IN THE HOME

This space must be used **exclusively** for business. I will directly allocate to the appropriate work type (1099 or W-2)
Work, administration, billing, seeing clients, storing business materials, self-tapes, voiceover booth

	Taxpayer 1	Taxpayer 2
(i.e. 10'x10' = 100 sq. ft.) total square footage of your workspace		
total square footage of your residence		
renters or homeowners insurance		
total RENT (not mortgage payments) for the year		
total of all utilities for the year (exclude internet – recorded previously)		
HOA dues		
other indirect home office expenses pest control, general repairs, etc.		
home expenses directly purchased for H/O, please list		

TRANSPORTATION EXPENSES

If you only have commuting miles, this page doesn't apply to you

		kind of work	Employer and purpose	dates from / to	# of days of work	city / state, or city / country
1	<input type="checkbox"/> Taxpayer 1 <input type="checkbox"/> Taxpayer 2	<input type="checkbox"/> W-2 <input type="checkbox"/> 1099 <input type="checkbox"/> LLC				
2	<input type="checkbox"/> Taxpayer 1 <input type="checkbox"/> Taxpayer 2	<input type="checkbox"/> W-2 <input type="checkbox"/> 1099 <input type="checkbox"/> LLC				
3	<input type="checkbox"/> Taxpayer 1 <input type="checkbox"/> Taxpayer 2	<input type="checkbox"/> W-2 <input type="checkbox"/> 1099 <input type="checkbox"/> LLC				
4	<input type="checkbox"/> Taxpayer 1 <input type="checkbox"/> Taxpayer 2	<input type="checkbox"/> W-2 <input type="checkbox"/> 1099 <input type="checkbox"/> LLC				
5	<input type="checkbox"/> Taxpayer 1 <input type="checkbox"/> Taxpayer 2	<input type="checkbox"/> W-2 <input type="checkbox"/> 1099 <input type="checkbox"/> LLC				

TRAVEL COSTS	trip 1	trip 2	trip 3	trip 4	trip 5
air fare, train, bus, luggage fees...	\$	\$	\$	\$	\$
hotel, motel, hostel, AirBnB...	\$	\$	\$	\$	\$
local transportation - cabs, lyft/uber, rental car, parking...	\$	\$	\$	\$	\$
passport fees, real-id fees...	\$	\$	\$	\$	\$
other write-in details:					
TOTALS	\$	\$	\$	\$	\$

TRAVEL MEALS	trip 1	trip 2	trip 3	trip 4	trip 5
actual meal and incidental expenses including tips	\$	\$	\$	\$	\$
<i>minus</i> per diem received	\$	\$	\$	\$	\$
<i>Equals:</i>	\$	\$	\$	\$	\$

Taxpayer 1	TOTAL 1099 Travel \$		Total W-2 Travel \$		Total 1099 Travel Meals \$		Total W-2 Travel Meals \$
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Taxpayer 2	TOTAL 1099 Travel \$		Total W-2 Travel \$		Total 1099 Travel Meals \$		Total W-2 Travel Meals \$
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	CAR 1	CAR 2
year - make – model:		
date placed in service	month / day / year / /	month / day / year / /
<input type="checkbox"/> Taxpayer 1 <input type="checkbox"/> Taxpayer 2 (Car 1) odometer readings Jan. 1 st 2025: _____ Dec. 31 st 2025: _____		
<input type="checkbox"/> Taxpayer 1 <input type="checkbox"/> Taxpayer 2 (Car 2) odometer readings Jan. 1 st 2025: _____ Dec. 31 st 2025: _____		
TOTAL MILES driven in 2025		
driving in PURSUIT OF, or to expand, your business, skills, knowledge, network, (i.e, auditions, business meals, acting classes/training, agent/producer meetings,) are BUSINESS MILES		
total miles to DO 1099 work TOTAL 1099 MILES		
driving to and from a regular job is COMMUTING		
typical ROUND TRIP distance		
driving to and from the doctor, treatments, pharmacy are all miles for MEDICAL		
miles to volunteer at a charity or a fundraiser, or donate goods, (but not going to worship) are CHARITY		
You must have miles that are just PERSONAL		
parking when in PURSUIT OF BUSINESS (NOT at your regular job) PARKING FEES	\$	\$
Uber, Lyft, cab, train, bus fare to pursue, or get to work, (NOT PERSONAL) TRANSPORTATION EXPENSE	\$	\$

ACTUAL VEHICLE EXPENSES	CAR 1	CAR 2
gas, oil, repairs, insurance, etc.	\$	\$
rental vehicles	\$	\$
price or fair market value of your car	\$	\$
date of PURCHASE / LEASE (circle one)	month / day / year / /	month / day / year / /
LEASE payments (NOT purchase payments)	\$	\$
if last year , down payment on a LEASE	\$	\$

TRAVEL OUT OF TOWN for INTERVIEWS & WORK - print additional page for second taxpayer

BUSINESS MEALS

(EXCLUDE TRAVEL MEALS FROM PREVIOUS PAGE)

A business meal must be WITH another person who can expand your knowledge, skill set, or network

You must be able to back up the business meals with entries in your calendar, mileage log, and with actual receipts that include name – date – purpose – location – amount. (I will take the totals, so you are not required to fill this out, it is just to help you conceptually. You can just insert the totals but use this if it helps you.)

Taxpayer 1

NAME (person entertained)		PURPOSE	LOCATION	AMOUNT
	<input type="checkbox"/> W-2 <input type="checkbox"/> 1099 <input type="checkbox"/> LLC			\$
	<input type="checkbox"/> W-2 <input type="checkbox"/> 1099 <input type="checkbox"/> LLC			\$
	<input type="checkbox"/> W-2 <input type="checkbox"/> 1099 <input type="checkbox"/> LLC			\$
	<input type="checkbox"/> W-2 <input type="checkbox"/> 1099 <input type="checkbox"/> LLC			\$
	<input type="checkbox"/> W-2 <input type="checkbox"/> 1099 <input type="checkbox"/> LLC			\$
			W-2 TOTAL	\$
			1099 TOTAL	\$
			LLC TOTAL	\$

Taxpayer 2

NAME (person entertained)		PURPOSE	LOCATION	AMOUNT
	<input type="checkbox"/> W-2 <input type="checkbox"/> 1099 <input type="checkbox"/> LLC			\$
	<input type="checkbox"/> W-2 <input type="checkbox"/> 1099 <input type="checkbox"/> LLC			\$
	<input type="checkbox"/> W-2 <input type="checkbox"/> 1099 <input type="checkbox"/> LLC			\$
	<input type="checkbox"/> W-2 <input type="checkbox"/> 1099 <input type="checkbox"/> LLC			\$
	<input type="checkbox"/> W-2 <input type="checkbox"/> 1099 <input type="checkbox"/> LLC			\$

	W-2 TOTAL	\$
	1099 TOTAL	\$
	LLC TOTAL	\$