

Marta Sullivan, CPA

TAX PREPARATION

323-697-7387

www.msullivancpa.com

EMAIL: marta@msullivancpa.com

Welcome to the 2023 tax season! I hope you had a great year! Please use the process below and let me know if you have questions.

- gather all the applicable tax documents listed on page 4,
- complete the applicable sections of this tax packet,
- set an appointment using the scheduling app on the website,
- decide whether you want to drop off your materials at the start of your appointment, or upload them in the portal for a remote appointment.

Please see the fee structure attached to the engagement letter. In order to avoid overtime, I ask for a few time-saving things:

- please schedule AFTER you have all of your papers and the packet completed,
- if we are processing remotely, please scan all pages into as few pdfs as possible,
- please make sure you have compared your final check stubs with your W-2s and 1099s, this way you will know if you are missing tax forms, which can result in penalties and interest,
- please indicate whether your work deductions are applicable to either your W-2 work or your 1099 work on page 8. if they are mixed, please split to the best of your ability. This saves so much time and money,
- if your personal, dependent and bank information are the same, you do not need to fill those sections in-this saves you time,
- please provide your IP PIN if you received a notice from the IRS,
- please provide copies of your children's birth certificates, or another document including your name and their name. To get the child tax credit, I need these every year,
- health insurance proof requires no documents unless you are covered by the Affordable Care Act. If not covered by the ACA, just mark whether or not you are covered.

ENGAGEMENT OF SERVICES AGREEMENT

Marta Sullivan, CPA

marta@msullivancpa.com

323-697-7387 <> www.msullivancpa.com <> 13401 Riverside Dr., Sherman Oaks, CA 91423

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 as set forth herein:

I will prepare your Federal income tax return, and income tax returns for the **STATES OF** _____, with supporting schedules, 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 any and all other services related to your income tax returns which 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 **\$315 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 **\$300-\$900** (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 to file any returns I prepare for you with the appropriate taxing authorities.

I will furnish you with my Tax Packet 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 and for devising an internal control system that will help assure the proper preparation of financial statements.

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.

ENGAGEMENT OF SERVICES AGREEMENT continued

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.

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 Seven 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 of 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 of the parties.

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 SIGNATURE: _____ **DATE:** _____

SPOUSE SIGNATURE: _____ **DATE:** _____

RATE SCHEDULE

Based on a 90-minute tax return

February \$300	Corporate \$900
March 1 – 15 \$360	Single Member LLC Add \$300
March 16 – 31 \$420	Additional States \$50 per state
April – November (and prior years) \$480	Additional Time \$80 per 15 min. Married Filing Jointly \$75/ return

A \$50 rescheduling fee will be charged for cancellations made within 24 hours.

PRE-APPOINTMENT CHECK LIST

PLEASE BRING, OR PRESENT ME WITH **ALL** OF THE DOCUMENTS BELOW THAT APPLY TO YOU **AT ONE TIME**

	yes / no:
Completely filled in tax packet, where applicable to your individual situation	
Last year's tax return - only if I didn't do it	
Compare your final check stubs to your W-2s and 1099s, to be sure you have ALL of your W-2s and 1099s	
Children's birth certificate, or dr. or school record with parent's & children's name	
IP-PIN notice from the IRS in the event you experienced ID theft known by the IRS	
ALL CASH INCOME that you are self-reporting; Venmo, PayPal, personal check, Zelle, credit card, etc. - write in at the top of page 8	
Bank interest and dividends - 1099-INT, 1099-DIV	
Sale of stocks, bonds, mutual funds, etc. - 1099-B	
Unemployment income - 1099-G	
<i>(if I didn't do last year's return)</i> State Refunds from prior year - 1099-G	
Social Security - SSA-1099	
IRA Distributions - 1099-R	
Pension Distributions - 1099-R	
Summary from credit card transactions - 1099-K	
<i>we advise you wait until your tax return is done due to contribution restrictions:</i> IRA Contributions	
HSA Contribution - 8889	
If covered by the ACA Health Insurance - 1095-A	
Home Mortgage Interest , PMI, and Property Tax	
Student Loan Interest - 1098-E	
Tuition Expense - 1098-T	
Closing statements if you BOUGHT or SOLD PROPERTY	
Rideshare driving income tax packet	
Residential property rental income tax packet	
From any of your partnerships, trusts or S-Corporations - K-1	

IF YOU ARE MARRIED – PLEASE SHARE ONE PACKET

TAXPAYER 1 NAME _____

TAXPAYER 2 NAME _____

fill in info below, ONLY if you are NEW or info has changed:

fill in info below, ONLY if you are NEW or info has changed:

Occupation _____

Occupation _____

Soc. Sec. # _____

Soc. Sec. # _____

Date of Birth _____
Month / Day / Year

Date of Birth _____
Month / Day / Year

Cell Phone _____

Cell Phone _____

Home Phone _____

Home Phone _____

Email _____

Email _____

Address _____ Unit # _____ Zip Code _____ City _____

Driver's License # _____ **State** _____

Driver's License # _____ **State** _____

Issue date _____ **Exp. date** _____ **NY'sers Docu #** _____

Issue date _____ **Exp. date** _____ **NY'sers Docu #** _____

FILING STATUS

SINGLE

SEPARATED

WIDOW(ER)

HEAD of HOUSEHOLD

MARRIED / JOINT

Incl. Spouse Name,
SSN & DOB above

Date _____

**Must be Single with
one or more dependents**

DEPENDENT INFORMATION (use addl. sheet if necessary)

Enter the dependent Code in the first column:

L = Child who lived with you

N = Child who did not live with you due to divorce or separation

O = Other Dependent

CODE	FULL NAME	SOCIAL SECURITY NUMBER	RELATIONSHIP	DATE OF BIRTH	# MONTHS LIVED W/ YOU LAST YEAR

CHILD CARE EXPENSES (use addl. Sheet if necessary)

(1) Care Giver _____ Federal ID # _____ \$ _____

Address _____ Phone _____

(2) Care Giver _____ Federal ID # _____ \$ _____

Address _____ Phone _____

BANK INFO ~ FOR ELECTRONIC REFUND OR AMOUNT DUE

CHECK BOX IF BANK INFO IS THE SAME AS LAST YEAR

fill in ONLY if you are NEW or your bank info has CHANGED:

Bank Name _____ Routing # _____ Account # _____

Account Type: Checking Savings Name on account _____

HEALTH CARE check one box:

I had Covered CA or other Government Marketplace Insurance.

You **MUST** give me your form **1095-A**

I had employer offered health insurance (for example SAG-AFTRA). How many months were you covered? _____

I had privately purchased health insurance. How many months were you covered? _____

CHILD TAX CREDIT / DEPENDENT 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, Health Insurance Form, Social Security Card and I need a new copy EVERY year that you claim the child.

EXTENSIONS

Did you file any EXTENSIONS for your 2023 tax return? Yes No Did you make any payments? \$ _____

DIGITAL ASSETS (cryptocurrency)

Did you mine, buy, sell or exchange any digital assets, use digital assets to pay for goods and services, or receive digital assets as a payment for goods and services? Yes No

ESTIMATED TAX PAYMENTS TOWARD YOUR 2023 TAX BILL

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

	FEDERAL	STATE	LOCAL
Quarter 1 = by 4-18-2023	\$	\$	\$
Quarter 2 = by 6-15-2023	\$	\$	\$
Quarter 3 = by 9-15-2023	\$	\$	\$
Quarter 4 = by 1-15-2024	\$	\$	\$

EVERYONE SHOULD FILL OUT THIS PAGE IF MARRIED FILING JOINT COMBINE YOUR NUMBERS

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 <small>AKA</small> PROPERTY TAX	\$																				
HOME MORTGAGE INTEREST	\$																				
PRIVATE MORTGAGE INSURANCE	\$																				
INVESTMENT & LEGAL EXPENSES FOR <u>BUSINESS</u> (not a will, or marriage, or divorce or anything personal) <i>write-in details:</i>	\$																				
EDUCATOR EXPENSES K-12 Full-Time teachers only, to the max of \$250	\$																				
RETIREMENT PLAN CONTRIBUTIONS Please wait to make any contribution until I do your Tax Return, you have until Tax Day to contribute for last year. (Do Not include 401-K money from W-2)	<table border="0"> <tr> <td></td> <td align="center">TRADITIONAL =</td> <td align="right">\$</td> <td align="center">PRIMARY</td> <td align="right">\$</td> </tr> <tr> <td></td> <td></td> <td align="right">\$</td> <td align="center">SPOUSE</td> <td align="right">\$</td> </tr> <tr> <td></td> <td></td> <td align="right">\$</td> <td></td> <td align="right">\$</td> </tr> <tr> <td></td> <td></td> <td align="right">\$</td> <td></td> <td align="right">\$</td> </tr> </table>		TRADITIONAL =	\$	PRIMARY	\$			\$	SPOUSE	\$			\$		\$			\$		\$
	TRADITIONAL =	\$	PRIMARY	\$																	
		\$	SPOUSE	\$																	
		\$		\$																	
		\$		\$																	

Please combine if multiple donations to the same recipient

CHARITABLE CONTRIBUTIONS OF FUNDS		
Name of charity:	Date	Amount
		\$
		\$
		\$
		\$
		\$
<i>use additional sheet if needed</i>	TOTAL	\$
CHARITABLE CONTRIBUTIONS OF GOODS		
Name of charity:	Date	Amount
		\$
		\$
		\$
		\$
		\$
<i>use additional sheet if needed</i>	TOTAL	\$

ALIMONY / SPOUSAL SUPPORT - If you finalized your divorce after January 1, 2019, the *former administration* eliminated the Federal deduction benefit, and reporting requirements of **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 \$ _____

> CA still allows this deduction and requires you to report the income.

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 <http://Bsaefiling.fincen.treas.gov/main.html>

You are responsible for this filing.

SELF REPORTED INCOME, & ALL BUSINESS DEDUCTIONS for W-2 & cash/1099 earnings. Also use this page for single member LLC. print additional pages as needed

		<input type="checkbox"/> Primary <input type="checkbox"/> Spouse Business 1	<input type="checkbox"/> Primary <input type="checkbox"/> Spouse Business 2	
	BUSINESS NAME/PROFESSION:			
	<u>INCOME</u> you are <u>SELF-REPORTING</u> <i>(NOT from any 1099 or W-2)</i>	\$	\$	
17	LAST YEAR'S TAX PREPARATION COSTS			This expense helped earn which type of income? (if both, split \$ accordingly)
8	BUSINESS GIFTS Amounts are still limited to \$25 per person, per year			W-2 1099 Both <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
8	ADVERTISING & PUBLICITY website, business cards, post cards, reels, headshots...			W-2 1099 Both <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
10	COMMISSIONS & FEES call your rep to get real numbers, don't just take X% of your income			W-2 1099 Both <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
10	ON-LINE JOB SEARCH REGISTRIES i.e. IMDB, Actors Access, Casting Networks, theatre co. dues			W-2 1099 Both <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
11	CONTRACT LABOR YOU PAID OUT Did you pay a crew or anyone to help you earn income			W-2 1099 Both <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
15	INSURANCE TO DO THIS JOB not health ins.			W-2 1099 Both <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
18	OFFICE SUPPLIES ink, printer paper, postage, cloud storage, software, etc.			W-2 1099 Both <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
18	POST OFFICE BOX			W-2 1099 Both <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
20 A	EQUIPMENT LEASE OR RENT <i>WRITE- IN DETAILS:</i>			W-2 1099 Both <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
20 B	OFFICE / THEATRE / STUDIO RENTAL i.e. rehearsal space, NOT where you live			W-2 1099 Both <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
21	EQUIPMENT REPAIR / MAINTENANCE <i>WRITE- IN DETAILS:</i>			W-2 1099 Both <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
21	COSTUME REPAIR / MAINTENANCE <i>WRITE- IN DETAILS:</i>			W-2 1099 Both <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
21	SUPPLIES FOR RESEARCH / JOB SEARCH <i>WRITE- IN DETAILS:</i>			W-2 1099 Both <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
21	COST OF MERCHANDISE for Sale or Promo <i>WRITE- IN DETAILS:</i>			W-2 1099 Both <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

LIST OF BUSINESS DEDUCTIONS CONTINUES ON NEXT PAGE

BUSINESS DEDUCTIONS CONTINUED

		<input type="checkbox"/> Primary <input type="checkbox"/> Spouse Business 1	<input type="checkbox"/> Primary <input type="checkbox"/> Spouse Business 2	This expense helped earn which type of income? (if both, split \$ accordingly)
22	PURCHASE of PROFESSIONAL COSTUMES & UNIFORMS NOT general street wear; doctor, clown. MUST be tied to an audition or gig			W-2 1099 Both <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
22	PROF MAKE-UP, HAIR, NAILS/ SUPPLIES MUST be tied to an audition or gig			W-2 1099 Both <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
23	TAXES, LICENSE, CERTIFICATION FEES WRITE- IN DETAILS:			W-2 1099 Both <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
27	SELF-TAPES, PROFESSIONAL COACHING, WRITE- IN DETAILS:			W-2 1099 Both <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
27	CONTINUING EDUCATION Not already reported on a form 1098-T			W-2 1099 Both <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
27	2 nd PHONE LINE, FAX LINE WRITE- IN DETAILS:			W-2 1099 Both <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
27	CELL PHONE total for YOUR phone the whole year What percentage is for business: %			W-2 1099 Both <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
27	INTERNET total for the whole year What percentage is for business: %			W-2 1099 Both <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
27	RESEARCH VIEWING cable, streaming, concerts, live theatre, movies, etc. total for the whole year What percentage is for business: %			W-2 1099 Both <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
2106 / 27	UNION DUES & INITIATION FEES - INCLUDE 2% AEA DUES			W-2 1099 Both <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
	OTHER WRITE- IN DETAILS:			W-2 1099 Both <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
	OTHER WRITE- IN DETAILS:			W-2 1099 Both <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
	OTHER WRITE- IN DETAILS:			W-2 1099 Both <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
	OTHER WRITE- IN DETAILS:			W-2 1099 Both <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

- ❖ 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.
- ❖ The ONLY rounding up or down is at the fifty-cent point. \$2.49 becomes \$2. and \$2.50 becomes \$3.

EQUIPMENT EXPENSE

Items costing over \$500

Any less expensive items should be added to "office supplies" or "supplies for research/job search" on page 8

Use additional sheet if necessary.

	ITEM DESCRIPTION	PURCHASE DATE	COST - TIMES % OF BIZ USE	NET WRITE-OFF
<input type="checkbox"/> Primary <input type="checkbox"/> Spouse	Brother all in one Printer / Scanner	April 13 th	\$ 500 x 55 % =	\$ 275
<input type="checkbox"/> Primary <input type="checkbox"/> Spouse			\$ X % =	\$
<input type="checkbox"/> Primary <input type="checkbox"/> Spouse			\$ X % =	\$
<input type="checkbox"/> Primary <input type="checkbox"/> Spouse			\$ X % =	\$
<input type="checkbox"/> Primary <input type="checkbox"/> Spouse			\$ X % =	\$
<input type="checkbox"/> Primary <input type="checkbox"/> Spouse			\$ X % =	\$
<input type="checkbox"/> Primary <input type="checkbox"/> Spouse			\$ X % =	\$

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

	DESCRIPTION	DATE	COST
<input type="checkbox"/> Primary <input type="checkbox"/> Spouse			\$
<input type="checkbox"/> Primary <input type="checkbox"/> Spouse			\$
<input type="checkbox"/> Primary <input type="checkbox"/> Spouse			\$
<input type="checkbox"/> Primary <input type="checkbox"/> Spouse			\$
<input type="checkbox"/> Primary <input type="checkbox"/> Spouse			\$

OFFICE IN THE HOME

This space must be used exclusively for business;

administration, billing, seeing clients, storing business materials, self-tapes, v.o. booth...

	Primary	Spouse
(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		
other home office expenses - detail:		

TRANSPORTATION EXPENSES

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

	CAR 1	CAR 2
year - make – model:		
date placed in service	month / day / year / /	month / day / year / /
<input type="checkbox"/> Primary <input type="checkbox"/> Spouse (Car 1) odometer readings Jan. 1 st 2023: _____ Dec. 31 st 2023: _____		
<input type="checkbox"/> Primary <input type="checkbox"/> Spouse (Car 2) odometer readings Jan. 1 st 2023: _____ Dec. 31 st 2023: _____		
TOTAL MILES driven in 2023		
driving in PURSUIT OF, or to expand, your business, skills, knowledge, network, are BUSINESS MILES		
total miles to DO 1099 work TOTAL 1099 MILES		
* driving to and from your regular job or side job are COMMUTING MILES		
one typical ROUND TRIP to your regular job or side-hustle gig		
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 have to 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	\$	\$

- Anyone who has ever been AUDITED is a big believer in DOCUMENTING their BUSINESS MILEAGE. You can use a phone app, a mileage log or a calendar. Be consistent. Auditions, meetings, business meals, and classes/training are all *examples* of BUSINESS MILES.

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

(MORE THAN 50 MILES FROM HOME -- use addl. sheet if needed)

		employer & purpose	kind of work	dates from / to	# of days for work	city / state, or city / country
1	<input type="checkbox"/> Primary <input type="checkbox"/> Spouse		<input type="checkbox"/> 1099 <input type="checkbox"/> W-2			
2	<input type="checkbox"/> Primary <input type="checkbox"/> Spouse		<input type="checkbox"/> 1099 <input type="checkbox"/> W-2			
3	<input type="checkbox"/> Primary <input type="checkbox"/> Spouse		<input type="checkbox"/> 1099 <input type="checkbox"/> W-2			
4	<input type="checkbox"/> Primary <input type="checkbox"/> Spouse		<input type="checkbox"/> 1099 <input type="checkbox"/> W-2			
5	<input type="checkbox"/> Primary <input type="checkbox"/> Spouse		<input type="checkbox"/> 1099 <input type="checkbox"/> W-2			

EXPENSES	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	\$	\$	\$	\$	\$

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>	\$	\$	\$	\$	\$

<input type="checkbox"/> Primary	TOTAL 1099 Travel \$	Total W-2 Travel \$	Total 1099 Meals \$	Total W-2 Meals \$
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<input type="checkbox"/> Spouse	TOTAL 1099 Travel \$	Total W-2 Travel \$	Total 1099 Meals \$	Total W-2 Meals \$
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please transfer TRAVEL MEALS to the next page →

❖ In the unlikely event of an audit, YOU MUST be able to prove EVERY number with receipts.

BUSINESS MEALS & ENTERTAINMENT FOR BUSINESS

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

You must be able to back up the business meals and events, thank-you's and please-hire-me's, 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.)

Primary taxpayer's list:

NAME (person entertained)	W-2 / 1099	PURPOSE	LOCATION	AMOUNT
Example:				\$
				\$
				\$
				\$
				\$
				\$
				\$
				\$
				\$
				W-2 SUB-TOTAL \$
				1099 SUB-TOTAL \$
				From p. 12 W-2 TRAVEL \$
				1099 TRAVEL \$
				PRIMARY W-2 TOTAL \$
				1099 TOTAL \$

Secondary taxpayer's list:

NAME (person entertained)	DATE	PURPOSE	LOCATION	AMOUNT
				\$
				\$
				\$
				\$
				\$
				\$
				\$
				\$
				\$
				W-2 SUB-TOTAL \$
				1099 SUB-TOTAL \$
				From p. 12 W-2 TRAVEL \$
				1099 TRAVEL \$
				SPOUSE W-2 TOTAL \$
				1099 TOTAL \$

[MAKING ESTIMATED QUARTERLY TAX PAYMENTS TOWARD THIS YEAR'S TAX BILL:](#)

Go to [IRS.gov](#) (or call 1-800-829-1040)

Make a Payment

Bank Account (Direct Pay)

>>>do NOT choose debit or credit card – they attach fees!<<<

Make a Payment ...again...

REASON pull down to ESTIMATED TAX

Apply Payment to 1040 (for 1040 1040A, 1040EZ)

follow the instructions from there.

Look at what you earned in the last quarter, and make a payment of 20%.

You MUST do this on or BEFORE

April 15,

June 15th, (yes June – google it)

Oct 15th and

Jan 15 (for the last quarter of the previous tax year.)

Go to [FTB.CA.gov](#) (or call 1-800-852-5700)

Make a Payment

Bank Account

>>>do NOT choose debit or credit card – they attach fees!<<<

Use Web Pay Personal

Enter your personal info,

choose Estimated Tax Payment (Form 540 - ES)

Again, look at what you earned in the last quarter, and make a payment of 5%.

You MUST do this on or BEFORE

April 15,

June 15th, (yes June – google it)

Oct 15th and

Jan 15 (for the last quarter of the previous tax year.)

[PAYING OFF PAST YEARS TAX BILLS:](#)

Go to [IRS.gov](#) (or call 1-800-829-1040)

MAKE A PAYMENT

BANK ACCOUNT (Direct Pay) never choose credit or debit as they attach fees.

MAKE A PAYMENT ...again

Select a Reason, scroll down to TAX RETURN OR NOTICE

Select Type, choose 1040, 1040A, 1040EZ

TAX YEAR 2020

The rest is pretty self-explanatory

Go to [FTB.CA.gov](#) (or call 1-800-852-5700)

MAKE A PAYMENT

BANK ACCOUNT (NOT credit card – again, fees) PAY BY BANK ACCOUNT

USE WEB PAY PERSONAL

Enter the requested info, then choose

TAX RETURN PAYMENT

The rest is pretty self-explanatory