



ITEMIZED DEDUCTIONS

Medical Insurance Premiums	\$
Medical /Dental/Vision Expenses	\$
Miles driven for medical purposes	_____ Miles
Real Estate / Property Taxes paid	\$
Personal Property Taxes (DMV registration)	\$
Sales Tax on Major Purchases (car, boat, etc)	\$
Mortgage Interest (Form 1098)	\$
Tax Prep Fees	\$
	\$

VEHICLE EXPENSES

You need adequate detailed mileage records to take the expense.
 1st Half = Jan 1, 2011 to June 30, 2011
 2nd Half = July 1, 2011 to Dec 31, 2011

Year, Make & Model		Purchase Date		Leased	Yes No
Year BEGIN Odometer		TOTAL MILES			
Year END Odometer		Business Miles Driven		1 st Half	2 nd Half
Year, Make & Model		Purchase Date		Leased	Yes No
Year BEGIN Odometer		TOTAL MILES			
Year END Odometer		Business Miles Driven		1 st Half	2 nd Half

EDUCATION EXPENSES

Taxpayer		Tuition and Fees	\$
Spouse		Books and Supplies	\$

MOVING EXPENSES *(Must move more than 50 miles)*

Lodging	\$	Moving Truck Expense or Rental	\$
Truck Fuel	\$	Storage Costs	\$
Miles Driven to new location		Miles from old residence to new job	

CHILDCARE EXPENSES

Child's Name		SS#	
Paid To: (Address & Phone)		Tax Id#	

HOME OFFICE EXPENSES

To qualify, an "office in the home" must be used **exclusively** and on a regular basis (a) as your principal place of business, or (b) by patients, clients, or customers in meeting and dealing with you in a normal course of business.

Total Square Feet of residence			
Total Square Feet Used for Office			
Total Square Feet Used for Storage			
Rent		Utilities	
Insurance		Condo Dues	
Repairs		Other	

SPECIAL INFORMATION

Do you have an Employer paid Pension Plan? If so, check box.	<input type="checkbox"/> You	<input type="checkbox"/> Spouse
Did you (or your Spouse) make any contributions to a Traditional, Conventional, or Roth IRA, Keogh plan or a SEP? YES NO		
Plan type: _____	\$	\$
Contributions		
Withdrawals (1099-R)	\$	\$
Rollovers	\$	\$
Alimony Received	\$ YOU	\$ SPOUSE
Alimony PAID	\$ YOU	\$ SPOUSE
Tips Received (NOT reported to your Employer)	\$ YOU	\$ SPOUSE
Student Loan Interest Paid (Form	\$ YOU	\$ SPOUSE
Unemployment Received (1099-G)	YOU	SPOUSE
Cash income received NOT reported on a 1099?	\$ YOU	\$ SPOUSE
For which Occupation / Profession?		
State Tax Refund received in 2008	YES	NO
Social Security or RR/Pension	YES	NO
Adoption Expenses	YES	NO

ESTIMATED TAXES PAID

	Date Due	Date Paid	Federal	State
Applied From Prior Year's Refund			\$	\$
First Quarter	APRIL		\$	\$
Second Quarter	JUNE		\$	\$
Third Quarter	SEPT		\$	\$
Fourth Quarter	THIS JAN		\$	\$

BUSINESS / OCCUPATION / PROFESSION RELATED EXPENSES

NOTE: All expenses are subject to qualifications by the tax authorities

ADVERTISING AND PUBLICITY	TOTAL	A	C	OFFICE EXPENSE	TOTAL	A	C
Business cards, Stationery, Postcards, etc	\$			Batteries	\$		
Business Gifts	\$			Copy Service	\$		
Demo (tape, CD, DVD, audio, video)	\$			Fax Service	\$		
Photo Shoot, Reproduction, Lithos, etc.	\$			Office Supplies	\$		
Resume Service and reproduction	\$			Postage, Freight, Courier	\$		
Web Site, Domain Web Hosting, etc.	\$			Printer Supplies (ink, paper, toner, etc)	\$		
Misc/other	\$			Misc/other	\$		
COMMISSIONS & FEES	TOTAL	A	C	CONTRACT LABOR	TOTAL	A	C
Agent	\$			Accompanist	\$		
Manager	\$			Dresser	\$		
Other	\$			Misc/other	\$		
SUPPLIES	TOTAL	A	C	REPAIRS/MAINTENANCE	TOTAL	A	C
Books, scripts, music	\$			Costume repair/cleaning/maintenance	\$		
Props	\$			Equipment	\$		
Software	\$			Instrument tuning (i.e. piano)	\$		
Uniforms – Professional Costumes	\$			Professional tools	\$		
Misc/other	\$			Misc/other	\$		
EQUIPMENT PURCHASE	TOTAL	A	C	LICENSES	TOTAL	A	C
Type: Date Purchased:	\$			Licenses (i.e. city business license, professional)	\$		
Type: Date Purchased:	\$			Misc/other	\$		
UTILITIES	TOTAL	A	C	RENT/LEASE	TOTAL	A	C
Cable/Satellite %	\$			Equipment	\$		
Communications %	\$			PO Box/ Safe Deposit	\$		
telephone, cell phone, fax line, voicemail	\$			Storage for business	\$		
phone card, pay phone, etc _____	\$			Theatre space/rehearsal hall	\$		
Internet Service % _____	\$			Misc/other	\$		
BUSINESS FINANCE	TOTAL	A	C	BUSINESS MEALS/ENTERTAINMENT	TOTAL	A	C
Business bank fees paid _____	\$			In town business meals	\$		
Business interest paid	\$			In town entertainment	\$		
Misc/other	\$			Out of town business meals	\$		
PROFESSIONAL FEES	TOTAL	A	C	OUT OF TOWN TRAVEL	TOTAL	A	C
Attorney, Legal Fees	\$			Fare	\$		
Bookkeeper/Accountant	\$			Lodging	\$		
Professional registries (casting)	\$			Car rental, taxi, subway, bus, parking & tolls	\$		
Royalties paid	\$			Where: _____ # of days: _____			
Sides	\$			Where: _____ # of days: _____			
Misc/other	\$			Where: _____ # of days: _____			
OTHER	TOTAL	A	C	OTHER	TOTAL	A	C
Dues – professional societies	\$			Research – tickets, movies, etc.	\$		
Dues – Union	\$			Trade publications/subscriptions/periodicals	\$		
Passport	\$			Parking & Tolls	\$		
Professional Development – coaching, lessons, workshops, seminars	\$			Misc/other	\$		
	\$				\$		
CHARITY	TOTAL	A	C		\$		
Cash Donations (Receipts Needed)	\$				\$		
Non-Cash Donations (Receipts Needed)	\$				\$		
	\$				\$		