

# The Actors Fund: *VITA Program*

(Please list your expense TOTALS.)

You may need to do separate expense list for each business or a separate sheet for non acting related business expenses.

## Deductible Expenses

<u>Business Expenses</u>	<u>Total</u>	<u>Business Expenses (cont.)</u>	<u>Total</u>
Advertising: Business Cards, Postcards	_____	Research: Films Videos Theatre	_____
Advertising: Business Gifts (\$25 per person)	_____	Rent: Business PO Box	_____
Advertising: Casting Services & Websites	_____	Rent: Equipment	_____
Advertising: Demo Reel Cost & Fees	_____	Rent: Rehearsal Studio/Theatre	_____
Advertising: Headshot Photoshoot Resumes	_____	Rent: Storage For Business	_____
Advertising: Publicist	_____	Supplies: Books Scripts Music	_____
Advertising: Website Hosting Domain	_____	Supplies: Props Set Pieces	_____
Bank Fees: For Business Only	_____	Supplies: Software	_____
Bookkeeper Fees	_____	Trade Publications	_____
Business Meals & Meetings (in-town)	_____	Travel: Airfare	_____
Business Meals (out-of-town/travel)	_____	Travel: Lodging	_____
Business Transport (Uber,Bus,Subway)	_____	Travel: Car Rental Taxi Subway Bus	_____
Cable TV: ____% Used for Research	_____	Union Dues: SAG-AFTRA AEA DGA IATSE	_____
Cable Internet: ____% For Business	_____	Union Dues: Professional Organizations	_____
Commissions: Agent Fees	_____	Other Expenses (List item & amount below)	_____
Commissions: Manager Fees	_____	_____	_____
Contract Labor: Personal Assistant	_____	_____	_____
Contract Labor: Stage Manager Tips	_____	_____	_____
Contract Labor: Wardrobe/Dresser Tips	_____	_____	_____
Equipment: Update Repair Accessories	_____	_____	_____
Equipment: Type _____ Date _____	_____		
Equipment: Type _____ Date _____	_____		
<i>(Use another page if necessary for Equipment Purchases)</i>			
Film Festival Fees	_____	<b><u>Other Deductible Expenses</u></b>	<b><u>Total</u></b>
Film Production Costs	_____	Charitable Donations (Cash or Check)	_____
<i>(Use another page if necessary to list film cost)</i>		Charitable Donations (Clothing or Goods)	_____
Legal Fees (business related only)	_____	<i>(Please provide receipt of donations)</i>	_____
License: Business or Professional	_____	Childcare Expenses	_____
License: City of LA	_____	<i>(Need Provider Name, Tax Id, Address, Phone)</i>	_____
Make-up For Business Use Only	_____	College Tuition & Fees (Form 1098-T)	_____
Office Expense: Batteries Copies Fax	_____	College Books & Supplies	_____
Office Expense: Postage Freight Courier	_____	DMV Registration Fee (VLF Amount)	_____
Office Expense: Printer Toner Ink	_____	Health Insurance (Form 1095 - A,B,C)	_____
Office Expense: Supplies	_____	Medical: Co-Pays Dental Vision Prescriptions	_____
Parking & Tolls	_____	Investment Fees (Retirement Acct Fee)	_____
Performance Costumes or Uniforms	_____	Mortgage Interest (Form 1098)	_____
<i>(Not Clothes that can be worn on the street)</i>		Real Estate Taxes	_____
Passport Fees	_____	Student Loan Interest (Form 1098-E)	_____
Phone: Cell ____% For Business	_____	Sales Tax For A Vehicle Purchase	_____
Phone: Cost & Accessories	_____	<i>(Please supply copy of Sale Contract)</i>	_____
Publicity Appearance: Fees & Services	_____	State Taxes Paid	_____
Professional Development	_____	<i>(Did you owe money to the state last year?)</i>	_____
<i>(Classes Workshops Seminars)</i>		Tax Preparation Fees	_____

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(Please list your expense TOTALS.)

<u>Auto Expenses</u>	<u>Total</u>	<u>Special Information</u>	<u>Total</u>
<b>(First Vehicle)</b>		Other Schedule C Income: Taxpayer	_____
Year of the Vehicle	_____	Other Schedule C Income: Spouse	_____
Make & Model	_____	<i>(Not listed on 1099-Misc for Schedule C Income)</i>	
Date of Purchase	_____	Retirement Plan Contributions: Taxpayer	_____
Odometer Reading First of Year	_____	Retirement Plan Contributions: Spouse	_____
Odometer Reading End of Year	_____	IRA or Roth?	
Total Miles Driven	_____		
Business Miles Driven	_____	<b><u>Estimated Tax Payments</u></b>	
Charitable Miles Driven	_____	Date Paid	Federal State
Medical Miles Driven	_____	1st Quarter	_____
<i>Must have mileage log to claim expenses below.</i>		2nd Quarter	_____
Auto Club Membership Fee	_____	3rd Quarter	_____
Car Insurance	_____	4th Quarter	_____
Gas	_____		
Oil Changes	_____	<b><u>Business Use of Home Office</u></b>	
Repairs	_____	<b><u>Total</u></b>	
<b>(Second Vehicle)</b>		<i>To qualify for the home office deduction the IRS regulations state the business office must be a separate room or a sectioned off area used routinely and exclusively for business. <u>NO</u> Personal Use.</i>	
Year of the Vehicle	_____	Total Square Feet of Business Office	_____
Make & Model	_____	Total Square Feet of Apartment/Residence	_____
Date of Purchase	_____		
Odometer Reading First of Year	_____	<b><u>Airbnb / Rental Income &amp; Expenses</u></b>	
Odometer Reading End of Year	_____	<b><u>Total</u></b>	
Total Miles Driven	_____	Total Rental Income Received	_____
Business Miles Driven	_____	Number of Days Rented	_____
Charitable Miles Driven	_____	Renter's Insurance	_____
Medical Miles Driven	_____	Total Rent Paid for the Year	_____
<i>Must have mileage log to claim expenses below.</i>		Repairs	_____
Auto Club Membership Fee	_____	Utilities	_____
Car Insurance	_____	Supplies (Bed Sheets, Toiletries, etc)	_____
Gas	_____	Other:	_____
Oil Changes	_____		
Repairs	_____		

Any other questions or possible deductions:

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THANK YOU for taking the time to complete the above information. Although only the totals are needed, you are responsible to keep documentary evidence, such as receipts, cancelled checks or bills to support your expenses. (It is suggested that records be kept for five years or more from the date your tax return is filed.)