

# PROPS/SET CONSTRUCTION WORKSHEET

| <i>NAME</i>   | <i>S.S.#</i> |
|---|--------------|
| 1) ADVERTISING - Bus. cards, Publicity photos, Resumes          |              |
| 2) PROF. SERVICES - Sub-contract labor, Assistants              |              |
| 3) INTEREST - Paid on business expenses                         |              |
| 4) LEGAL FEES, ACCOUNTING FEES                                  |              |
| 5) POSTAGE, FED-EX, MESSENGERS                                  |              |
| 6) MATERIALS - Metal, Wood, Raw stock, Canvas, Paints, etc.     |              |
| 7) REPAIRS - Instruments and equipments                         |              |
| 8) SUPPLIES - Stationeries, Blank tapes, Batteries, etc.        |              |
| 9) PRODUCT SAMPLES - DVDs, CDs, Videos                          |              |
| 10) TRAVEL - Airfare, Train, Taxicabs, Hotel                    |              |
| 11) FOOD & ENTERTAINMENT - Bus. meals, Food on location         |              |
| 12) TELEPHONE - Used for bus., Answering svc, cell, & voicemail |              |
| 13) TRADE PUBLICATIONS - Industry magazines, Books              |              |
| 14) SEMINARS - Trade shows                                      |              |
| 15) PROMOTIONAL GIFTS   |              |
| 16) FILM/FILM PROCESSING  |              |
| 17) TAPE DUPLICATION - Demo reel                                |              |
| 18) RESEARCH - Films, Concerts, Video rentals                   |              |
| 19) CABLE TELEVISION SUBSCRIPTION                               |              |
| 20) STUDIO IN HOME (% of sq. ft. used as studio)                |              |
| 21) UTILITIES - Electricity, Gas                                |              |
| 22) UNION DUES - Association memberships, Online fees           |              |
| 23) PARKING   |              |
| 24) WEEKS ON LOCATION   |              |
| 25)   |              |
| 26)   |              |
| 27) MEDICAL- Doctors, Dentists, Optometry                       | MED. Ins.    |
| 28) MORTGAGE INTEREST   |              |
| 29) REAL ESTATE TAX   |              |
| 30) CHARITY - Cash or check                                     |              |
| 31) CHARITY - Other   |              |

| CAR AND TRUCK EXPENSES    | VEHICLE 1 | VEHICLE 2 | CURRENT YEAR             | VEHICLE 1 | VEHICLE 2 |
|---------------------------|-----------|-----------|--------------------------|-----------|-----------|
| YEAR VEHICLE WAS ACQUIRED |           |           |                          |           |           |
| TOTAL MILES ON VEHICLE    |           |           | TOTAL MILES              |           |           |
| APPROX. MILES PER GALLON  |           |           |                          |           |           |
| COST OF INSURANCE         |           |           | BUS. MILES               |           |           |
| REPAIRS, TIRES, TUNE-UPS  |           |           |                          |           |           |
| LEASE EXPENSE             |           |           | VEHICLE REGISTRATION/DMV |           |           |

## BUSINESS EQUIPMENT PURCHASES DURING THE YEAR

| DATE PURCHASED | DESCRIPTION | COST |
|----------------|-------------|------|
|                |             |      |
|                |             |      |

| DATE PURCHASED | ADDITIONAL BUS. EQUIP. PURCHASES<br>DESCRIPTION | COST |
|----------------|---|------|
|                |   |      |
|                |   |      |
|                |   |      |
|                |   |      |

## INSTRUCTIONS

- 1) Please make sure all names are exactly as they appear on the social security cards.
- 2) Please subtotal all your receipts and write them in under the appropriate categories.
- 3) Bring all W-2s and 1099s.
- 4) If you sold any stocks, bring in all information, including date and price of purchase and sale.
- 5) Social Security numbers are required for all children (dependents).
- 6) Fill out the following:

### YOUR CURRENT ADDRESS:

\_\_\_\_\_

Street Address

\_\_\_\_\_

City, State, and Zip Code

Home: \_\_\_\_\_ Work: \_\_\_\_\_ Cell: \_\_\_\_\_

Phone Numbers

\_\_\_\_\_

Email Address

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FOR OFFICE USE ONLY:

ESTIMATED FED. REFUNDS \_\_\_\_\_ ESTIMATED STATE REFUNDS \_\_\_\_\_

Privacy Notice: WE DO NOT SHARE INFORMATION WITH ANYONE