Name:_____

Phone:_____

[redacted]

VALLES VENDIOLA LLP
Certified Public Accountants

Personal Packet (and Single Member LLC)

www.vallesvendiola.com
718.275.1422
partner@vallesvendiola.com

Thanks for choosing Valles Vendiola LLP for your tax needs. We look forward to serving you!

A few things to note:

- First and foremost, a fully completed tax packet is necessary **BEFORE** making an appointment and before sending any information.
- Married Couples please fill out **ONE** packet. However, for the Artist's Expense Worksheet and the Other Business worksheet please fill out one per person per business. Additional worksheets can be found on the company website (or you can print those pages from the tax packet):
- If you own a rental property be sure to fill out the Rental Property Worksheet

We will be offering both in person and correspondence services this year. You can send us your documents in 4 ways:

1. **Shared Folders** (IE. Google Drive)

2. The **Sharefile Online Portal**. Email us to request a secure link to upload documents and correspond with us electronically.

3. **Mail**. *Send copies only to*:

4. **Drop Off*.** *Place Docs in an envelope and address to*:
   **Weekdays 9am – 5pm (inform us first)*

Valles Vendiola LLP
125 Maiden Lane Ste 508
New York, NY 10038

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Information Worksheet

Taxpayer Info		Spouse Info (even if Married Filing Separately)	
Name:		Name:	
Social Sec #:		Social Sec #:	
Occupation:		Occupation:	
Birthdate:		Birthdate:	
Cell Phone:		Cell Phone:	
Home Phone:		Home Phone:	
Email:		Email:	

Address:				Unit #:	
City:		State:		Zip Code:	

Marital Status

☐ Single ☐ Married Filing Jointly ☐ Legally Separated

☐ Married Filing Separately (Does Spouse Itemize? Y/N) ☐ Widow/er (Date of Passing_____)

Dependent Information

Name (as it appears on Social Security Card)	Social Security Number	Relationship	Birthdate	# of months lived in home

Child Care Expenses

Care Provider:		Care Provider:		Care Provider:	
Phone:		Phone:		Phone:	
Address:		Address:		Address:	
Fed ID#:		Fed ID#:		Fed ID#:	
Amount:		Amount:		Amount:	

Bank Info

(Direct Deposit of Refund or Electronic Withdrawal of Amount Due)

Bank Name_____

Routing # _____

Account # _____

☐ Checking ☐ Savings

☐ Taxpayer ☐ Spouse ☐ Joint

**Please bring your check book with you so that we can confirm the numbers*

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Pre-Appointment Checklist

The following is a list of applicable tax forms that you may have received. Not all will apply of course. Do **NOT** set your appointment until you have gathered all the forms that do apply.

☐	Completed Tax Packet
☐	Previous Year's Tax Return (if not done by us)
☐	W2(s)
☐	1095-A – Health Insurance Marketplace Statement
☐	3895 – California Health Insurance Marketplace Statement
☐	1099-NEC – Contractor/Non-Employee Compensation
☐	1099-MISC – Rents, Royalties and Other Income
☐	1099-INT – Bank Interest
☐	1099-DIV – Dividends and Distributions
☐	1099-B – Sale of Stocks and Bonds
☐	1099-G – Unemployment Compensation and State Tax Refund
☐	1099-R – Retirement Distributions (Pensions, Annuities, IRAs, 401Ks, etc.)
☐	1099-K – Payments from Credit Card Transactions
☐	1099-S – Proceeds from Real Estate Transactions
☐	1099-SA – Distributions from an HSA or MSA
☐	1099-C – Cancellation of Debt
☐	SSA-1099 – Social Security Income
☐	W-2G – Gambling Winnings
☐	1098 – Mortgage Interest Statement
☐	1098-E – Student Loan Interest
☐	1098-T – Tuition Statement
☐	K-1 – Partner or Shareholders Share or Income
☐	Rental Worksheet – If you own a rental property then a Rental Worksheet MUST be completed.

Key Questions

Please Answer All of the following Questions:

☐ Yes	☐ No	Did you have health insurance for all 12-months for all people listed on your tax return? ***If yes, Check the applicable box below:*** ☐ Covered – You must bring your 1095-A (NOTE: These are typically not mailed to you. Rather, you have to sign into your account to retrieve them.) ☐ Employer sponsored or privately held insurance – You must bring your 1095-B or 1095-C (NOTE: Employers are often late with these. In that event, another type of proof is acceptable.)
☐ Yes	☐ No	Did you receive the Advanced Child Tax Credit this year? (Note: If you are uncertain, check your bank statements as, unless you opted out, it was likely direct deposited into your account.) If yes, Amount: _____

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Key Questions (cont.)

Please Answer All of the following Questions:

☐ Yes	☐ No	Did you buy or sell any virtual currency (IE. Bitcoin, Ethereum, etc.) during the year? *(NOTE: If you sold any virtual currency, please bring all related info…Buy Date, Sale Date, Cost, Proceeds)*
☐ Yes	☐ No	Did you own rental property? If yes, then a Rental Worksheet MUST be completed. Y
☐ Yes	☐ No	Did you receive income from or pay taxes to a foreign country? If yes: Income Received_____ Taxes Paid_____
☐ Yes	☐ No	Did you have any bank accounts outside the U.S.? Be aware that if these accounts combine to exceed $10000, even for a day, then you must file an FBAR Report.
☐ Yes	☐ No	Did you receive any type of loan or grant that is related to Covid-19 relief for business (IE. PPP, EIDL, Local Grant, etc.)? If yes: which one/amount? _____ Did you get taxability guidance? _____
☐ Yes	☐ No	Did you receive and Identity Protection PIN from the IRS? If yes, PIN #:_____

Deductions, Adjustments, Estimated Taxes

Itemized Deductions	
Health Ins. Premiums: (Self-Paid, not through employer)	
Medical Expenses - Out of Pocket: (IE. Co pays, Dental, Therapy, etc.)	
Sales Tax on Major Purchases: (IE. Car, Large Equipment over $2000, etc.)	
Real Estate Taxes: (Personal Property, not rental)	
DMV Registration: (Please bring DMV Renewal notice)	
Mortgage Interest: (Personal Property, not rental)	
Private Mortgage Ins.: (Personal Property, not rental)	
Charitable Contributions: (Cash, Check or Credit Card)	
Charitable Contributions: (Goods Donated – Use Breakdown below)	
Investment Expenses (NOT for retirement accounts)	
Legal Fees (ONLY for Business purposes)	
Misc. Deductions (IE. Gambling losses to extent of winnings)	

Estimated Taxes - Federal	
Quarter 1 (by April 15)	
Quarter 2 (by June 15)	
Quarter 3 (by Sept 15)	
Quarter 4 (by Jan 15)	
Other	
Total	

Estimated Taxes - State	
Quarter 1 (by April 15)	
Quarter 2 (by June 15)	
Quarter 3 (by Sept 15)	
Quarter 4 (by Jan 15)	
Other	
Total	

Adjustments to Income	
Educator Expenses: (Full time K-12 teachers)	
IRA Contributions (Trad): (Due by filing deadline)	
IRA Contributions (Roth): (Due by filing deadline)	
IRA Contributions (SEP): (Due by filing deadline, including extension)	
Student Loan Interest: (Bring 1098-E)	
Tuition and Fees: (Please Bring 1098-T)	
Alimony Paid; (Exes Social Sec # _____) Divorce Date: _____)	
Alimony Rec'd; (Exes Social Sec # _____) Divorce Date: _____)	

Charity Name:	Date:	Amount

Notables
When claiming a child, please provide a copy of one of the following *every year*: Birth Cert., 1095, Social Security Card
Roth & Traditional IRA contributions can be made up until the deadline. So it is often best to wait until filing to figure the best position.
Figuring the max SEP IRA contribution is most accurate when filing. Contributions can be made up until the extension deadline (if you file an extension).

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Artist Worksheet (Actors, Writers, Directors, etc.)

*One worksheet per person (page 1 of 2)

***Taxpayer or Spouse**
(Circle One)

General Expenses	
	Advertising (Website, Reels, Headshots, etc.)
	Business Gifts (Limited to $25 per person per year)
	Commissions and Fees (Agents, Managers, Lawyers)
	Office Supplies (Paper, Pens, Ink, etc.)
	Office or Studio Rental (Venue Rental, Studio Time, etc.)
	Equipment Rental (Not Car Lease: Look at Vehicle Section)
	Repairs & Maintenance (Equipment, Professional Costumes)
	Supplies (Professional Costumes, **NOT** General Wear)
	Franchise Taxes and Biz Licenses (Franchise Tax, City of LA, etc.)
	Biz Meals/In-Town - See next pg. for help (Record Out-of-Town meals in Travel Section)
	Home Phone add-ons for Business (Call Waiting, Caller ID, etc.: NOT primary bill)
	Fax Service (Fax line or eFax service)
	Cell Phone for Business (Record entire expense)
	Internet for Business (Record entire expense)
	Cable (Netflix, HBO, etc.)
	Viewing Research (Theater, Movies, Streaming Services, etc.)
	Coaching Lessons and Classes (Acting, Dancing, Casting Workshops, etc.)
	Casting Registries (Actors Access, IMDB, Casting Networks, etc.)
	Trade Publications (Variety, Hollywood Reporter, Backstage, etc.)
	Audition/Meeting Expense (Audition Tapings, Accompanist, Sides, etc.)
	Union Dues (SAG-AFTRA, Equity, etc.)
	Software Subscriptions for Business (Zoom, Adobe, etc.)
	Local Biz Transportation – In-Town (Uber, Lyft, Metro – Only Business)
	Make-up, Hair, Nails for Business (NOT maintenance/ONLY tied to specific jobs)
	Tax Preparation Fees (Fees for tax prep last year)
	Other -
	Other -

Automobile Expenses

Please fill in all applicable boxes

	Car 1	Car 2
Year/Make/Model		
Odometer – January 1		
Odometer – December 31		
Total Miles Driven in the year		
Total Business Miles Driven in the year		
Total Commuting Miles in the year		
Miles Drive for Medical Purposes		
Miles Driven for Charitable Purposes		

Rule of Thumb: With few exceptions, Business Miles are those you don't get paid for (Meetings, auditions, classes, etc.) Commuting miles are ones that you do. Mileage must be documented.

Actual Expenses	**Car 1**	**Car 2**
Gas/Oil/Repairs/ Insurance		
Purchase Price of Car		
Date of Purchase Or Lease		
Only if Leased: Lease Payments		
Only if Leased: Down Payment		

Equipment:

Only list items purchased for $200 or more; otherwise, list under office supplies or general supplies

Item	Date	Price	Biz %

Home Office Expenses

Applies Only to a space **DEDICATED** to business & used for nothing else

Sq. Footage of Exclusively Used Office Space	
Sq. Footage of your home	
Rent Paid for the Tax Year	
Utilities Paid for the Tax Year	
Other Home Expenses Related to the office	
Home-Owners/Renters Insurance	

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Artist Worksheet (Actors, Writers, Directors, etc.)

*One worksheet per person (page 2 of 2)

***Taxpayer or Spouse**
(Circle One)

Business Meals

The following table is a sample of what is required in order to substantiate business meals. Use it if helpful (may need to extend to the back of the page if so). Otherwise, just give us your total. Meals under $75 require all the info below. Meals over $75 must have a receipt in addition to the info below.

Attendees	Date	Purpose	Place	Cost
			Total	

Business Travel

	Destination	# of Days (incl. travel days)	Biz Days	Fares (Planes/ Trains/Autos)	Lodging (Hotels/ AirBNB/etc.)	Local Transportation (Cab/Uber/Park)	Totals
Trip 1							
Trip 2							
Trip 3							
Trip 4							
Trip 5							
Trip 6							
						Grand Total	

Travel Meals

	Trip 1	Trip 2	Trip 3	Trip 4	Trip 5	Trip 6	**Line (3) Total ↓**
(1a) Actual Expenses							
(1b) Standard Meal Allowance*							
(2) Per Diem Received							
(3) Subtract line (2) from the greater of line (1a) or (1b)							

NOTE: For each travel day you can claim ¾ of the allowance.

All Other Questions

Please list any items for which you have doubts about deductibility or where to put them (use back of page if necessary)

Item	Purchase Date	Purchase Amount

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Other Business Worksheet (Incl. LLCs)

***Taxpayer or Spouse** *(Circle One)*
*1 worksheet per person per business

Income Received (not reported on 1099): _____Business Type_____

Business name (If LLC/DBA):_____EIN#_____

General Expenses	
	Advertising
	Commissions and Fees
	Contract Labor
	Insurance (other than health)
	Legal and Professional Services
	Office Expense & Supplies
	Equipment Rental (Not Car Lease: Look at Vehicle Section)
	Office, Studio or Property Rental
	Repairs & Maintenance
	Supplies (other than office supplies)
	Franchise Taxes and Biz Licenses (Franchise Tax, City of LA, etc.)
	Biz Meals/In-Town - See next pg. for help (Record Out-of-Town meals in Travel Section)
	Utilities (Related to office rental, NOT home office)
	Home Phone add-ons for Business (Call Waiting, Caller ID, etc.: NOT primary bill)
	Fax Service (Fax line or eFax service)
	Cell Phone for Business (Record entire expense)
	Internet for Business (Record entire expense)
	Business Gifts (Limited to $25 per person per year)
	Continuing Education (Acting, Dancing, Casting Workshops, etc.)
	Trade Publications
	Software Subscriptions for Business (Zoom, Adobe, etc.)
	Local Biz Transportation – In-Town (Uber, Lyft, Metro – Only Business)
	Other -
	Other -
	Other -
	Other -

Automobile Expenses

Please fill in all applicable boxes

	Car 1	Car 2
Year/Make/Model		
Odometer – January 1		
Odometer – December 31		
Total Miles Driven in the year		
Total Business Miles Driven in the year		
Total Commuting Miles in the year		
Miles Drive for Medical Purposes		
Miles Driven for Charitable Purposes		

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Other Business Worksheet

***Taxpayer or Spouse** *(Circle One)*
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			Total	

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Trip 1							
Trip 2							
Trip 3							
Trip 4							
Trip 5							
Trip 6							
						Grand Total	

Travel Meals

	Trip 1	Trip 2	Trip 3	Trip 4	Trip 5	Trip 6	**Line (3) Total ↓**
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