

For the year Jan 1 - Dec 31, 2012, or other tax year beginning , 2012, ending , 20

Your first name and initial: Ima Last name: Starr Your social security number: 111-22-3333

If a joint return, spouse's first name and initial: _____ Last name: _____ Spouse's social security number: _____

Home address (number and street). If you have a P.O. box, see instructions. Apartment no. 5th Ave

City, town or post office, state, and ZIP code. If you have a foreign address, also complete spaces below (see instructions). New York NY 10019

Foreign country name: _____ Foreign province/state/county: _____ Foreign postal code: _____

Presidential Election Campaign
 Check here if you, or your spouse if filing jointly, want \$3 to go to this fund? Checking a box below will not change your tax or refund. You Spouse

Filing Status

1 Single

2 Married filing jointly (even if only one had income)

3 Married filing separately. Enter spouse's SSN above & full name here . . . ▶

4 Head of household (with qualifying person). (See instructions.) If the qualifying person is a child but not your dependent, enter this child's name here ▶

5 Qualifying widow(er) with dependent child

Check only one box.

Exemptions

6 a Yourself. If someone can claim you as a dependent, do not check box 6a.

b Spouse

c Dependents:

| (1) First name | Last name | (2) Dependent's social security number | (3) Dependent's relationship to you | (4) <input checked="" type="checkbox"/> if child under age 17 qualifying for child tax cr (see instrs) |
|----------------|-----------|--|-------------------------------------|--|
| | | | | |
| | | | | |
| | | | | |
| | | | | |

If more than four dependents, see instructions and check here . . .

d Total number of exemptions claimed 1

Boxes checked on 6a and 6b 1
 No. of children on 6c who:
 • lived with you
 • did not live with you due to divorce or separation (see instrs)
 Dependents on 6c not entered above
 Add numbers on lines above 1

Income

| | | | |
|------|---|------|---------|
| 7 | Wages, salaries, tips, etc. Attach Form(s) W-2 | 7 | 49,905. |
| 8 a | Taxable interest. Attach Schedule B if required | 8 a | 19. |
| b | Tax-exempt interest. Do not include on line 8a | 8 b | |
| 9 a | Ordinary dividends. Attach Schedule B if required | 9 a | |
| b | Qualified dividends. | 9 b | |
| 10 | Taxable refunds, credits, or offsets of state and local income taxes | 10 | |
| 11 | Alimony received. | 11 | |
| 12 | Business income or (loss). Attach Schedule C or C-EZ | 12 | 6,861. |
| 13 | Capital gain or (loss). Att Sch D if reqd. If not reqd, ck here | 13 | |
| 14 | Other gains or (losses). Attach Form 4797 | 14 | |
| 15 a | IRA distributions | 15 a | |
| b | Taxable amount | 15 b | |
| 16 a | Pensions and annuities | 16 a | |
| b | Taxable amount | 16 b | |
| 17 | Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E | 17 | |
| 18 | Farm income or (loss). Attach Schedule F | 18 | |
| 19 | Unemployment compensation | 19 | |
| 20 a | Social security benefits | 20 a | |
| b | Taxable amount | 20 b | |
| 21 | Other income <u>Gambling Winnings</u> | 21 | 1,000. |
| 22 | Combine the amounts in the far right column for lines 7 through 21. This is your total income | 22 | 57,785. |

Attach Form(s) W-2 here. Also attach Forms W-2G and 1099-R if tax was withheld.
 If you did not get a W-2, see instructions.

Enclose, but do not attach, any payment. Also, please use Form 1040-V.

Adjusted Gross Income

| | | | |
|------|--|------|---------|
| 23 | Educator expenses | 23 | |
| 24 | Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106 or 2106-EZ | 24 | |
| 25 | Health savings account deduction. Attach Form 8889 | 25 | |
| 26 | Moving expenses. Attach Form 3903 | 26 | |
| 27 | Deductible part of self-employment tax. Attach Schedule SE | 27 | 485. |
| 28 | Self-employed SEP, SIMPLE, and qualified plans | 28 | |
| 29 | Self-employed health insurance deduction | 29 | |
| 30 | Penalty on early withdrawal of savings | 30 | |
| 31 a | Alimony paid b Recipient's SSN | 31 a | |
| 32 | IRA deduction | 32 | |
| 33 | Student loan interest deduction | 33 | |
| 34 | Tuition and fees. Attach Form 8917 | 34 | |
| 35 | Domestic production activities deduction. Attach Form 8903 | 35 | |
| 36 | Add lines 23 through 35 | 36 | 485. |
| 37 | Subtract line 36 from line 22. This is your adjusted gross income | 37 | 57,300. |

| | | | | |
|---|---|--|--------|---------|
| Tax and Credits | 38 | Amount from line 37 (adjusted gross income) | 38 | 57,300. |
| | 39 a | Check <input type="checkbox"/> You were born before January 2, 1948, if: <input type="checkbox"/> Spouse was born before January 2, 1948, <input type="checkbox"/> Blind. Total boxes checked ▶ 39 a <input type="checkbox"/> | | |
| | b | If your spouse itemizes on a separate return or you were a dual-status alien, check here ▶ 39 b <input type="checkbox"/> | | |
| Standard Deduction for – • People who check any box on line 39a or 39b or who can be claimed as a dependent, see instructions. • All others: Single or Married filing separately, \$5,950 Married filing jointly or Qualifying widow(er), \$11,900 Head of household, \$8,700 | 40 | Itemized deductions (from Schedule A) or your standard deduction (see left margin) | 40 | 11,707. |
| | 41 | Subtract line 40 from line 38 | 41 | 45,593. |
| | 42 | Exemptions. Multiply \$3,800 by the number on line 6d | 42 | 3,800. |
| | 43 | Taxable income. Subtract line 42 from line 41. If line 42 is more than line 41, enter -0- | 43 | 41,793. |
| | 44 | Tax (see instrs). Check if any from: a <input type="checkbox"/> Form(s) 8814 c <input type="checkbox"/> 962 election b <input type="checkbox"/> Form 4972 | 44 | 6,474. |
| | 45 | Alternative minimum tax (see instructions). Attach Form 6251 | 45 | |
| | 46 | Add lines 44 and 45 | 46 | 6,474. |
| | 47 | Foreign tax credit. Attach Form 1116 if required | 47 | |
| | 48 | Credit for child and dependent care expenses. Attach Form 2441 | 48 | |
| | 49 | Education credits from Form 8863, line 19 | 49 | |
| 50 | Retirement savings contributions credit. Attach Form 8880 | 50 | | |
| 51 | Child tax credit. Attach Schedule 8812, if required | 51 | | |
| 52 | Residential energy credits. Attach Form 5695 | 52 | | |
| 53 | Other crs from Form: a <input type="checkbox"/> 3800 b <input type="checkbox"/> 8801 c <input type="checkbox"/> | 53 | | |
| 54 | Add lines 47 through 53. These are your total credits | 54 | | |
| 55 | Subtract line 54 from line 46. If line 54 is more than line 46, enter -0- | 55 | 6,474. | |
| Other Taxes | 56 | Self-employment tax. Attach Schedule SE | 56 | 843. |
| | 57 | Unreported social security and Medicare tax from Form: a <input type="checkbox"/> 4137 b <input type="checkbox"/> 8919 | 57 | |
| | 58 | Additional tax on IRAs, other qualified retirement plans, etc. Attach Form 5329 if required | 58 | |
| | 59 a | Household employment taxes from Schedule H | 59 a | |
| | b | First-time homebuyer credit repayment. Attach Form 5405 if required | 59 b | |
| | 60 | Other taxes. Enter code(s) from instructions | 60 | |
| 61 | Add lines 55-60. This is your total tax | 61 | 7,317. | |
| Payments If you have a qualifying child, attach Schedule EIC. | 62 | Federal income tax withheld from Forms W-2 and 1099 | 62 | 7,530. |
| | 63 | 2012 estimated tax payments and amount applied from 2011 return | 63 | |
| | 64 a | Earned income credit (EIC) | 64 a | |
| | b | Nontaxable combat pay election ▶ 64 b <input type="checkbox"/> | | |
| | 65 | Additional child tax credit. Attach Schedule 8812 | 65 | |
| | 66 | American opportunity credit from Form 8863, line 8 | 66 | |
| | 67 | Reserved | 67 | |
| | 68 | Amount paid with request for extension to file | 68 | |
| | 69 | Excess social security and tier 1 RRTA tax withheld | 69 | |
| | 70 | Credit for federal tax on fuels. Attach Form 4136 | 70 | |
| | 71 | Credits from Form: a <input type="checkbox"/> 2439 b <input type="checkbox"/> Reserved c <input type="checkbox"/> 8801 d <input type="checkbox"/> 8885 | 71 | |
| 72 | Add lns 62, 63, 64a, & 65-71. These are your total pmts | 72 | 7,530. | |
| Refund | 73 | If line 72 is more than line 61, subtract line 61 from line 72. This is the amount you overpaid | 73 | 213. |
| | 74 a | Amount of line 73 you want refunded to you. If Form 8888 is attached, check here ▶ <input type="checkbox"/> | 74 a | 213. |
| | b | Routing number XXXXXXXXXXXX ▶ c Type: <input type="checkbox"/> Checking <input type="checkbox"/> Savings | | |
| Direct deposit? See instructions. | d | Account number XXXXXXXXXXXXXXXXXXXXX | | |
| 75 | Amount of line 73 you want applied to your 2013 estimated tax ▶ 75 | 75 | | |
| Amount You Owe | 76 | Amount you owe. Subtract line 72 from line 61. For details on how to pay see instructions ▶ 76 | 76 | |
| | 77 | Estimated tax penalty (see instructions) | 77 | |

Third Party Designee Do you want to allow another person to discuss this return with the IRS (see instructions)? Yes. Complete below. No

Sign Here Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

| | | | |
|--|------|---------------------|--|
| Your signature | Date | Your occupation | Daytime phone number |
| | | Performer/Writer | |
| Spouse's signature. If a joint return, both must sign. | Date | Spouse's occupation | If the IRS sent you an Identity Protection PIN, enter it here (see instrs) |

Paid Preparer Use Only

| | | | | |
|--|--------------------------|------|---|-----------|
| Print/Type preparer's name | Preparer's signature | Date | Check <input type="checkbox"/> if self-employed | PTIN |
| Peter Jason Riley CPA | Peter Jason Riley CPA | | | P00413102 |
| Firm's name ▶ RILEY & ASSOCIATES, P.C. | Firm's EIN ▶ 04-3577120 | | | |
| Firm's address ▶ 5 PERRY WAY - P O BOX 157 NEWBURYPORT MA 01950 | Phone no. (978) 463-9350 | | | |

**SCHEDULE A
(Form 1040)**

Itemized Deductions

OMB No. 1545-0074

2012

Department of the Treasury
Internal Revenue Service (99)

► Information about Schedule A and its separate instructions is at www.irs.gov/form1040.
► Attach to Form 1040.

Attachment
Sequence No. **07**

Name(s) shown on Form 1040

Your social security number

Ima Starr

111-22-3333

| | | | | | |
|---|---|---|---|--------------------------|--|
| Medical and Dental Expenses | Caution. Do not include expenses reimbursed or paid by others. | | | | |
| | 1 | Medical and dental expenses (see instructions) | 1 | | |
| | 2 | Enter amount from Form 1040, line 38 | 2 | | |
| | 3 | Multiply line 2 by 7.5% (.075) | 3 | | |
| | 4 | Subtract line 3 from line 1. If line 3 is more than line 1, enter -0- | | 4 | |
| Taxes You Paid | 5 State and local (check only one box): | | | | |
| | a | <input checked="" type="checkbox"/> Income taxes, or | 5 | 2,854. | |
| | b | <input type="checkbox"/> General sales taxes | | | |
| | 6 | Real estate taxes (see instructions) | 6 | | |
| | 7 | Personal property taxes | 7 | 204. | |
| | 8 | Other taxes. List type and amount ► | 8 | | |
| | 9 | Add lines 5 through 8 | 9 | 3,058. | |
| | Interest You Paid | 10 | Home mtg interest and points reported to you on Form 1098 | 10 | |
| | | 11 | Home mortgage interest not reported to you on Form 1098. If paid to the person from whom you bought the home, see instructions and show that person's name, identifying number, and address ► | 11 | |
| Note. Your mortgage interest deduction may be limited (see instructions). | | | | | |
| 12 | | Points not reported to you on Form 1098. See instrs for spl rules | 12 | | |
| 13 | | Mortgage insurance premiums (see instructions) | 13 | | |
| 14 | | Investment interest. Attach Form 4952 if required. (See instrs.) | 14 | | |
| 15 | | Add lines 10 through 14 | 15 | | |
| Gifts to Charity | 16 | Gifts by cash or check. If you made any gift of \$250 or more, see instrs | 16 | 325. | |
| | 17 | Other than by cash or check. If any gift of \$250 or more, see instructions. You must attach Form 8283 if over \$500 | 17 | | |
| | 18 | Carryover from prior year | 18 | | |
| | 19 | Add lines 16 through 18 | 19 | 325. | |
| Casualty and Theft Losses | 20 | Casualty or theft loss(es). Attach Form 4684. (See instructions.) | 20 | | |
| Job Expenses and Certain Miscellaneous Deductions | 21 | Unreimbursed employee expenses — job travel, union dues, job education, etc. Attach Form 2106 or 2106-EZ if required. (See instructions.) ► | | | |
| | | Deductible expenses from Form 2106 | 21 | 9,470. | |
| | 22 | Tax preparation fees | 22 | | |
| | 23 | Other expenses — investment, safe deposit box, etc. List type and amount ► | 23 | | |
| | 24 | Add lines 21 through 23 | 24 | 9,470. | |
| | 25 | Enter amount from Form 1040, line 38 | 25 | 57,300. | |
| | 26 | Multiply line 25 by 2% (.02) | 26 | 1,146. | |
| 27 | Subtract line 26 from line 24. If line 26 is more than line 24, enter -0- | 27 | 8,324. | | |
| Other Miscellaneous Deductions | 28 | Other — from list in instructions. List type and amount ► | 28 | | |
| Total Itemized Deductions | 29 | Add the amounts in the far right column for lines 4 through 28. Also, enter this amount on Form 1040, line 40 | 29 | 11,707. | |
| | 30 | If you elect to itemize deductions even though they are less than your standard deduction, check here | | <input type="checkbox"/> | |

SCHEDULE C
(Form 1040)

Profit or Loss From Business
(Sole Proprietorship)

OMB No. 1545-0074

2012

Attachment
Sequence No. **09**

Department of the Treasury
Internal Revenue Service (99)

► **For information on Schedule C and its instructions, go to www.irs.gov/schedulec.**
► **Attach to Form 1040, 1040NR, or 1041; partnerships generally must file Form 1065.**

| | | |
|--|--|---|
| Name of proprietor <u>Ima Starr</u> | | Social security number (SSN) <u>111-22-3333</u> |
| A Principal business or profession, including product or service (see instructions) <u>Blue Jazzbos</u> | B Enter code from instructions ► <u>711510</u> | |
| C Business name. If no separate business name, leave blank. <u>The Blue Jazzbos</u> | D Employer ID number (EIN), (see instrs) | |
| E Business address (including suite or room no.) ► <u>5th Ave</u> City, town or post office, state, and ZIP code <u>New York, NY 10019</u> | | |
| F Accounting method: (1) <input checked="" type="checkbox"/> Cash (2) <input type="checkbox"/> Accrual (3) <input type="checkbox"/> Other (specify) ► _____ | | |
| G Did you 'materially participate' in the operation of this business during 2012? If 'No,' see instructions for limit on losses | | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |
| H If you started or acquired this business during 2012, check here | | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| I Did you make any payments in 2012 that would require you to file Form(s) 1099? (see instructions). | | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |
| J If 'Yes,' did you or will you file all required Forms 1099? | | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |

Part I Income

| | | |
|--|---|---------|
| 1 Gross receipts or sales. See instructions for line 1 and check the box if this income was reported to you on Form W-2 and the 'Statutory employee' box on that form was checked. | 1 | |
| 2 Returns and allowances (see instructions) | 2 | |
| 3 Subtract line 2 from line 1. | 3 | 12,620. |
| 4 Cost of goods sold (from line 42) | 4 | 6,179. |
| 5 Gross profit. Subtract line 4 from line 3 | 5 | 6,441. |
| 6 Other income, including federal and state gasoline or fuel tax credit or refund (see instructions) | 6 | 2,445. |
| 7 Gross income. Add lines 5 and 6 | 7 | 8,886. |

Part II Expenses. Enter expenses for business use of your home only on line 30.

| | | | | |
|--|------|------|------|---|
| 8 Advertising | 8 | | 18 | Office expense (see instructions) |
| 9 Car and truck expenses (see instructions) | 9 | | 19 | Pension and profit-sharing plans |
| 10 Commissions and fees | 10 | | 20 | Rent or lease (see instructions): |
| 11 Contract labor (see instructions) | 11 | | 20 a | a Vehicles, machinery, and equipment |
| 12 Depletion | 12 | | 20 b | b Other business property |
| 13 Depreciation and section 179 expense deduction (not included in Part III) (see instructions) | 13 | 825. | 21 | 21 Repairs and maintenance |
| 14 Employee benefit programs (other than on line 19) | 14 | | 22 | 22 Supplies (not included in Part III) |
| 15 Insurance (other than health) | 15 | | 23 | 23 Taxes and licenses |
| 16 Interest: | | | 24 | 24 Travel, meals, and entertainment: |
| a Mortgage (paid to banks, etc) | 16 a | | 24 a | a Travel |
| b Other | 16 b | | 24 b | b Deductible meals and entertainment (see instructions) |
| 17 Legal & professional services | 17 | 100. | 25 | 25 Utilities |
| 18 Total expenses before expenses for business use of home. Add lines 8 through 27a | 18 | | 26 | 26 Wages (less employment credits) |
| 19 Tentative profit or (loss). Subtract line 18 from line 7 | 19 | | 27 a | 27 a Other expenses (from line 48) |
| 20 Expenses for business use of your home. Attach Form 8829 . Do not report such expenses elsewhere | 20 | | 27 b | b Reserved for future use |
| 21 Net profit or (loss). Subtract line 20 from line 19. | | | | |
| • If a profit, enter on both Form 1040, line 12 (or Form 1040NR, line 13) and on Schedule SE, line 2 . If you checked the box on line 1, see instructions). Estates and trusts, enter on Form 1041, line 3 . | | | 31 | |
| • If a loss, you must go to line 32. | | | | 3,191. |
| 22 If you have a loss, check the box that describes your investment in this activity (see instructions). | | | | |
| • If you checked 32a, enter the loss on both Form 1040, line 12 , (or Form 1040NR, line 13) and on Schedule SE, line 2 . (If you checked the box on line 1, see the instructions for line 31). Estates and trusts, enter on Form 1041, line 3 . | | | 32 a | <input type="checkbox"/> All investment is at risk. |
| • If you checked 32b, you must attach Form 6198 . Your loss may be limited. | | | 32 b | <input type="checkbox"/> Some investment is not at risk. |

BAA For Paperwork Reduction Act Notice, see your tax return instructions.

Schedule C (Form 1040) 2012

Part III Cost of Goods Sold (see instructions)

| | | | |
|----|---|----|--|
| 33 | Method(s) used to value closing inventory: a <input type="checkbox"/> Cost b <input type="checkbox"/> Lower of cost or market c <input type="checkbox"/> Other (attach explanation) | | |
| 34 | Was there any change in determining quantities, costs, or valuations between opening and closing inventory? If "Yes," attach explanation | | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 35 | Inventory at beginning of year. If different from last year's closing inventory, attach explanation | 35 | |
| 36 | Purchases less cost of items withdrawn for personal use | 36 | |
| 37 | Cost of labor. Do not include any amounts paid to yourself | 37 | 5,980. |
| 38 | Materials and supplies | 38 | 199. |
| 39 | Other costs | 39 | |
| 40 | Add lines 35 through 39 | 40 | 6,179. |
| 41 | Inventory at end of year | 41 | |
| 42 | Cost of goods sold. Subtract line 41 from line 40. Enter the result here and on line 4 | 42 | 6,179. |

Part IV Information on Your Vehicle. Complete this part **only** if you are claiming car or truck expenses on line 9 and are not required to file Form 4562 for this business. See the instructions for line 13 to find out if you must file Form 4562.

| | | |
|------|---|---|
| 43 | When did you place your vehicle in service for business purposes? (month, day, year) | ▶ 01/01/2010 |
| 44 | Of the total number of miles you drove your vehicle during 2012, enter the number of miles you used your vehicle for: | |
| | a Business | 2,946 |
| | b Commuting (see instructions) | 2,000 |
| | c Other | 6,575 |
| 45 | Was your vehicle available for personal use during off-duty hours? | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |
| 46 | Do you (or your spouse) have another vehicle available for personal use? | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
| 47 a | Do you have evidence to support your deduction? | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |
| | b If "Yes," is the evidence written? | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |

Part V Other Expenses. List below business expenses not included on lines 8-26 or line 30.

| | |
|--|------------------|
| AMORTIZATION | 358. |
| Formal Wear (stage clothes) | 304. |
| Cell Phone | 239. |
| Music Research - Downloads and CD's | 341. |
| Promo Photos | 305. |
| Trade Publications (Billboard) | 299. |
| Coaching/Education | 350. |
| Skype Charges | 64. |
| 48 Total other expenses. Enter here and on line 27a | 48 2,260. |

SCHEDULE C
(Form 1040)

Profit or Loss From Business
(Sole Proprietorship)

OMB No. 1545-0074

2012

Department of the Treasury
Internal Revenue Service (99)

► **For information on Schedule C and its instructions, go to www.irs.gov/schedulec.**
► **Attach to Form 1040, 1040NR, or 1041; partnerships generally must file Form 1065.**

Attachment
Sequence No. **09**

| | | |
|--|--|---|
| Name of proprietor <u>Ima Starr</u> | | Social security number (SSN) <u>111-22-3333</u> |
| A Principal business or profession, including product or service (see instructions) <u>Writer</u> | B Enter code from instructions ► <u>711510</u> | |
| C Business name. If no separate business name, leave blank. <u>Ima Starr</u> | D Employer ID number (EIN), (see instrs) | |
| E Business address (including suite or room no.) ► <u>5th Ave</u> City, town or post office, state, and ZIP code <u>New York, NY 10019</u> | | |
| F Accounting method: (1) <input checked="" type="checkbox"/> Cash (2) <input type="checkbox"/> Accrual (3) <input type="checkbox"/> Other (specify) ► _____ | | |
| G Did you 'materially participate' in the operation of this business during 2012? If 'No,' see instructions for limit on losses | | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |
| H If you started or acquired this business during 2012, check here | | <input checked="" type="checkbox"/> |
| I Did you make any payments in 2012 that would require you to file Form(s) 1099? (see instructions) | | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
| J If 'Yes,' did you or will you file all required Forms 1099? | | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |

Part I Income

| | | |
|---|---|---------|
| 1 Gross receipts or sales. See instructions for line 1 and check the box if this income was reported to you on Form W-2 and the 'Statutory employee' box on that form was checked. | 1 | 13,000. |
| 2 Returns and allowances (see instructions) | 2 | |
| 3 Subtract line 2 from line 1. | 3 | 13,000. |
| 4 Cost of goods sold (from line 42) | 4 | |
| 5 Gross profit. Subtract line 4 from line 3 | 5 | 13,000. |
| 6 Other income, including federal and state gasoline or fuel tax credit or refund (see instructions) | 6 | |
| 7 Gross income. Add lines 5 and 6 | 7 | 13,000. |

Part II Expenses. Enter expenses for business use of your home only on line 30.

| | | | | | |
|--|-------------|------|--|-------------|--|
| 8 Advertising | 8 | | 18 Office expense (see instructions) | 18 | 89. |
| 9 Car and truck expenses (see instructions) | 9 | 522. | 19 Pension and profit-sharing plans | 19 | |
| 10 Commissions and fees | 10 | | 20 Rent or lease (see instructions): | | |
| 11 Contract labor (see instructions) | 11 | | a Vehicles, machinery, and equipment | 20 a | |
| 12 Depletion | 12 | | b Other business property | 20 b | |
| 13 Depreciation and section 179 expense deduction (not included in Part III) (see instructions) | 13 | 531. | 21 Repairs and maintenance | 21 | |
| 14 Employee benefit programs (other than on line 19) | 14 | | 22 Supplies (not included in Part III) | 22 | |
| 15 Insurance (other than health) | 15 | | 23 Taxes and licenses | 23 | |
| 16 Interest: | | | 24 Travel, meals, and entertainment: | | |
| a Mortgage (paid to banks, etc) | 16 a | | a Travel | 24 a | 489. |
| b Other | 16 b | | b Deductible meals and entertainment (see instructions) | 24 b | 32. |
| 17 Legal & professional services | 17 | 100. | 25 Utilities | 25 | |
| 28 Total expenses before expenses for business use of home. Add lines 8 through 27a | 28 | | 26 Wages (less employment credits) | 26 | |
| 29 Tentative profit or (loss). Subtract line 28 from line 7 | 29 | | 27 a Other expenses (from line 48) | 27 a | 4,914. |
| 30 Expenses for business use of your home. Attach Form 8829 . Do not report such expenses elsewhere | 30 | | b Reserved for future use | 27 b | |
| 31 Net profit or (loss). Subtract line 30 from line 29. • If a profit, enter on both Form 1040, line 12 (or Form 1040NR, line 13) and on Schedule SE, line 2 . If you checked the box on line 1, see instructions). Estates and trusts, enter on Form 1041, line 3 . • If a loss, you must go to line 32. | | | | 31 | 3,670. |
| 32 If you have a loss, check the box that describes your investment in this activity (see instructions). • If you checked 32a, enter the loss on both Form 1040, line 12 , (or Form 1040NR, line 13) and on Schedule SE, line 2 . (If you checked the box on line 1, see the instructions for line 31). Estates and trusts, enter on Form 1041, line 3 . • If you checked 32b, you must attach Form 6198 . Your loss may be limited. | | | | 32 a | <input type="checkbox"/> All investment is at risk. |
| | | | | 32 b | <input type="checkbox"/> Some investment is not at risk. |

BAA For Paperwork Reduction Act Notice, see your tax return instructions.

Schedule C (Form 1040) 2012

Part III Cost of Goods Sold (see instructions)

| | | |
|----|---|--|
| 33 | Method(s) used to value closing inventory: a <input type="checkbox"/> Cost b <input type="checkbox"/> Lower of cost or market c <input type="checkbox"/> Other (attach explanation) | |
| 34 | Was there any change in determining quantities, costs, or valuations between opening and closing inventory? If 'Yes,' attach explanation | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 35 | Inventory at beginning of year. If different from last year's closing inventory, attach explanation | 35 |
| 36 | Purchases less cost of items withdrawn for personal use | 36 |
| 37 | Cost of labor. Do not include any amounts paid to yourself | 37 |
| 38 | Materials and supplies | 38 |
| 39 | Other costs | 39 |
| 40 | Add lines 35 through 39 | 40 |
| 41 | Inventory at end of year | 41 |
| 42 | Cost of goods sold. Subtract line 41 from line 40. Enter the result here and on line 4 | 42 |

Part IV Information on Your Vehicle. Complete this part **only** if you are claiming car or truck expenses on line 9 and are not required to file Form 4562 for this business. See the instructions for line 13 to find out if you must file Form 4562.

| | | |
|------|---|---|
| 43 | When did you place your vehicle in service for business purposes? (month, day, year) | ▶ 01/01/2010 |
| 44 | Of the total number of miles you drove your vehicle during 2012, enter the number of miles you used your vehicle for: | |
| | a Business <u>941</u> b Commuting (see instructions) <u>2,000</u> c Other <u>8,580</u> | |
| 45 | Was your vehicle available for personal use during off-duty hours? | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |
| 46 | Do you (or your spouse) have another vehicle available for personal use? | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
| 47 a | Do you have evidence to support your deduction? | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |
| | b If 'Yes,' is the evidence written? | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |

Part V Other Expenses. List below business expenses not included on lines 8-26 or line 30.

| | |
|--|------------------|
| Education (Columbia) | 2,124. |
| Research (E-Books) | 299. |
| Internet Service | 189. |
| Cell Phone | 204. |
| Agent Commissions | 2,000. |
| Skype Charges | 98. |
| | |
| | |
| 48 Total other expenses. Enter here and on line 27a | 48 4,914. |

SCHEDULE SE
(Form 1040)

Department of the Treasury
Internal Revenue Service (99)

Self-Employment Tax

► **Information about Schedule SE and its separate instructions is at www.irs.gov/form1040**
► **Attach to Form 1040 or Form 1040NR.**

OMB No. 1545-0074

2012

Attachment
Sequence No. **17**

Name of person with **self-employment** income (as shown on Form 1040)

Ima Starr

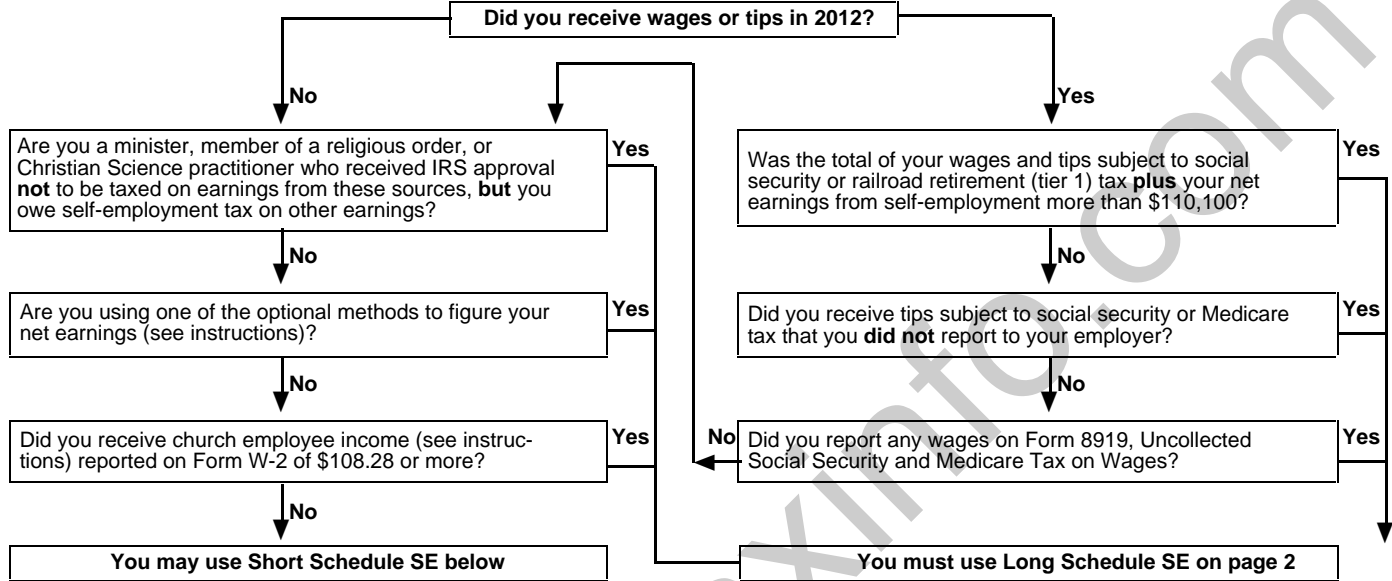
Social security number of person
with **self-employment** income ►

111-22-3333

Before you begin: To determine if you must file Schedule SE, see the instructions.

May I Use Short Schedule SE or Must I Use Long Schedule SE?

Note. Use this flowchart **only** if you must file Schedule SE. If unsure, see *Who Must File Schedule SE*, in the instructions.



Section A – Short Schedule SE. Caution. Read above to see if you can use Short Schedule SE.

| | | |
|--|------------|--------|
| 1 a Net farm profit or (loss) from Schedule F, line 34, and farm partnerships, Schedule K-1 (Form 1065), box 14, code A | 1 a | |
| b If you received social security retirement or disability benefits, enter the amount of Conservation Reserve Program payments included on Schedule F, line 4b, or listed on Schedule K-1 (Form 1065), box 20, code Y | 1 b | |
| 2 Net profit or (loss) from Schedule C, line 31; Schedule C-EZ, line 3; Schedule K-1 (Form 1065), box 14, code A (other than farming); and Schedule K-1 (Form 1065-B), box 9, code J1. Ministers and members of religious orders, see instructions for types of income to report on this line. See instructions for other income to report | 2 | 6,861. |
| 3 Combine lines 1a, 1b, and 2 | 3 | 6,861. |
| 4 Multiply line 3 by 92.35% (.9235). If less than \$400, you do not owe self-employment tax; do not file this schedule unless you have an amount on line 1b | 4 | 6,336. |
| Note. If line 4 is less than \$400 due to Conservation Reserve Program payments on line 1b, see instructions. | | |
| 5 Self-employment tax. If the amount on line 4 is: • \$110,100 or less, multiply line 4 by 13.3% (.133). Enter the result here and on Form 1040, line 56, or Form 1040NR, line 54. • More than \$110,100, multiply line 4 by 2.9% (.029). Then, add \$11,450.40 to the result. Enter the total here and on Form 1040, line 56, or Form 1040NR, line 54 | 5 | 843. |
| 6 Deduction for employer-equivalent portion of self-employment tax. If the amount on line 5 is: • \$14,643.30 or less, multiply line 5 by 57.51% (.5751) • More than \$14,643.30, multiply line 5 by 50% (.50) and add \$1,100 to the result. Enter the result here and on Form 1040, line 27 or Form 1040NR, line 27 | 6 | 485. |

BAA For Paperwork Reduction Act Notice, see your tax return instructions.

Schedule **SE** (Form 1040) 2012

Unreimbursed Employee Business Expenses

Department of the Treasury
Internal Revenue Service (99)

▶ Attach to Form 1040 or Form 1040NR.

▶ Information about Form 2106 and its separate instructions is available at www.irs.gov/form2106.

2012

Attachment
Sequence No. **129A**

| | | |
|-------------------------------|---|--|
| Your name <u>Ima Starr</u> | Occupation in which you incurred expenses <u>Actress</u> | Social security number <u>111-22-3333</u> |
|-------------------------------|---|--|

You Can Use This Form Only if All of the Following Apply.

- You are an employee deducting ordinary and necessary expenses attributable to your job. An ordinary expense is one that is common and accepted in your field of trade, business, or profession. A necessary expense is one that is helpful and appropriate for your business. An expense does not have to be required to be considered necessary.
- You **do not** get reimbursed by your employer for any expenses (amounts your employer included in box 1 of your Form W-2 are not considered reimbursements for this purpose).
- If you are claiming vehicle expense, you are using the standard mileage rate for 2012.

Caution: You can use the standard mileage rate for 2012 **only if:** (a) you owned the vehicle and used the standard mileage rate for the first year you placed the vehicle in service, or (b) you leased the vehicle and used the standard mileage rate for the portion of the lease period after 1997

Part I Figure Your Expenses

| | | | |
|---|--|---|--------|
| 1 | Complete Part II. Multiply line 8a by 55.5% (.555). Enter the result here | 1 | 1,077. |
| 2 | Parking fees, tolls, and transportation, including train, bus, etc, that did not involve overnight travel or commuting to and from work | 2 | 306. |
| 3 | Travel expense while away from home overnight, including lodging, airplane, car rental, etc. Do not include meals and entertainment | 3 | 3,866. |
| 4 | Business expenses not included on lines 1 through 3. Do not include meals and entertainment | 4 | 2,611. |
| 5 | Meals and entertainment expenses: \$ <u>3,220.</u> x 50% (.50) (Employees subject to Department of Transportation (DOT) hours of service limits: Multiply meal expenses incurred while away from home on business by 80% (.80) instead of 50%. For details, see instructions.) | 5 | 1,610. |
| 6 | Total expenses. Add lines 1 through 5. Enter here and on Schedule A (Form 1040), line 21 (or on Schedule A (Form 1040NR), line 7) (Armed Forces reservists, fee-basis state or local government officials, qualified performing artists, and individuals with disabilities: See the instructions for special rules on where to enter this amount.) | 6 | 9,470. |

Part II Information on Your Vehicle. Complete this part **only** if you are claiming vehicle expense on line 1.

7 When did you place your vehicle in service for business use? (month, day, year) ▶ 01/01/2011

8 Of the total number of miles you drove your vehicle during 2012, enter the number of miles you used your vehicle for:

a Business 1,941 b Commuting (see instr) 2,000 c Other 7,580

9 Was your vehicle available for personal use during off-duty hours? Yes No

10 Do you (or your spouse) have another vehicle available for personal use? Yes No

11 a Do you have evidence to support your deduction? Yes No

b If 'Yes,' is the evidence written? Yes No

BAA For Paperwork Reduction Act Notice, see your tax return instructions.

Form **2106-EZ** (2012)

Expenses for Business Use of Your Home

► **File only with Schedule C (Form 1040). Use a separate Form 8829 for each home you used for business during the year.**

2012

Department of the Treasury
Internal Revenue Service (99)

► **Information about Form 8829 and its separate instructions is at www.irs.gov/form8829**

Attachment
Sequence No. **176**

Name(s) of proprietor(s)

Your social security number

Ima Starr

111-22-3333

| Part I Part of Your Home Used for Business | | Writer | |
|--|---|---------------|----------|
| 1 | Area used regularly and exclusively for business, regularly for daycare, or for storage of inventory or product samples (see instructions) | 1 | 177 |
| 2 | Total area of home | 2 | 1,241 |
| 3 | Divide line 1 by line 2. Enter the result as a percentage | 3 | 14.26 % |
| For daycare facilities not used exclusively for business go to line 4. All others go to line 7. | | | |
| 4 | Multiply days used for daycare during year by hours used per day | 4 | hr |
| 5 | Total hours available for use during the year (366 days x 24 hours) (see instructions) | 5 | 8,784 hr |
| 6 | Divide line 4 by line 5. Enter the result as a decimal amount | 6 | |
| 7 | Business percentage. For daycare facilities not used exclusively for business, multiply line 6 by line 3 (enter the result as a percentage). All others, enter the amount from line 3 | 7 | 14.26 % |

| Part II Figure Your Allowable Deduction | | | |
|---|---|---------------------|-----------------------|
| 8 | Enter the amount from Schedule C, line 29, plus any gain derived from the business use of your home and shown on Schedule D or Form 4797, minus any loss from the trade or business not derived from the business use of your home and shown on Schedule D or Form 4797. See instructions | 8 | 6,323. |
| See instrs for columns (a) and (b) before completing lines 9-21. | | | |
| | | (a) Direct expenses | (b) Indirect expenses |
| 9 | Casualty losses (see instructions) | 9 | |
| 10 | Deductible mortgage interest (see instructions) | 10 | |
| 11 | Real estate taxes (see instructions) | 11 | |
| 12 | Add lines 9, 10, and 11 | 12 | |
| 13 | Multiply line 12, column (b) by line 7 | 13 | |
| 14 | Add line 12, column (a) and line 13 | 14 | |
| 15 | Subtract line 14 from line 8. If zero or less, enter -0- | 15 | 6,323. |
| 16 | Excess mortgage interest (see instructions) | 16 | |
| 17 | Insurance | 17 | 515. |
| 18 | Rent | 18 | 16,500. |
| 19 | Repairs and maintenance | 19 | 399. |
| 20 | Utilities | 20 | 1,189. |
| 21 | Other expenses (see instrs) | 21 | |
| 22 | Add lines 16 through 21 | 22 | 18,603. |
| 23 | Multiply line 22, column (b) by line 7 | 23 | 2,653. |
| 24 | Carryover of operating expenses from 2011 Form 8829, line 42. | 24 | |
| 25 | Add line 22 column (a), line 23, and line 24 | 25 | 2,653. |
| 26 | Allowable operating expenses. Enter the smaller of line 15 or line 25 | 26 | 2,653. |
| 27 | Limit on excess casualty losses and depreciation. Subtract line 26 from line 15 | 27 | 3,670. |
| 28 | Excess casualty losses (see instructions) | 28 | |
| 29 | Depreciation of your home from line 41 below. | 29 | |
| 30 | Carryover of excess casualty losses and depreciation from 2011 Form 8829, line 43 | 30 | |
| 31 | Add lines 28 through 30 | 31 | |
| 32 | Allowable excess casualty losses and depreciation. Enter the smaller of line 27 or line 31 | 32 | |
| 33 | Add lines 14, 26, and 32 | 33 | 2,653. |
| 34 | Casualty loss portion, if any, from lines 14 and 32. Carry amount to Form 4684 (see instructions) | 34 | |
| 35 | Allowable expenses for business use of your home. Subtract line 34 from line 33. Enter here and on Schedule C, line 30. If your home was used for more than one business, see instructions | 35 | 2,653. |

| Part III Depreciation of Your Home | | | |
|---|---|----|---|
| 36 | Enter the smaller of your home's adjusted basis or its fair market value (see instructions) | 36 | |
| 37 | Value of land included on line 36 | 37 | |
| 38 | Basis of building. Subtract line 37 from line 36 | 38 | |
| 39 | Business basis of building. Multiply line 38 by line 7. | 39 | |
| 40 | Depreciation percentage (see instructions) | 40 | % |
| 41 | Depreciation allowable (see instructions). Multiply line 39 by line 40. Enter here and on line 29 above | 41 | |

| Part IV Carryover of Unallowed Expenses to 2013 | | | |
|--|--|----|----|
| 42 | Operating expenses. Subtract line 26 from line 25. If less than zero, enter -0- | 42 | 0. |
| 43 | Excess casualty losses and depreciation. Subtract line 32 from line 31. If less than zero, enter -0- | 43 | |

Form **4562**

Department of the Treasury
Internal Revenue Service (99)

Depreciation and Amortization (Including Information on Listed Property)

▶ See separate instructions. ▶ Attach to your tax return.

OMB No. 1545-0172

2012

Attachment
Sequence No. **179**

Name(s) shown on return

Ima Starr

Identifying number

111-22-3333

Business or activity to which this form relates

Form 2106 Actress

Part I Election To Expense Certain Property Under Section 179

Note: If you have any listed property, complete Part V before you complete Part I.

| | | | |
|----|--|------------------------------|------------------|
| 1 | Maximum amount (see instructions) | 1 | 500,000. |
| 2 | Total cost of section 179 property placed in service (see instructions) | 2 | |
| 3 | Threshold cost of section 179 property before reduction in limitation (see instructions) | 3 | 2,000,000. |
| 4 | Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0- | 4 | |
| 5 | Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions. | 5 | |
| 6 | (a) Description of property | (b) Cost (business use only) | (c) Elected cost |
| 7 | Listed property. Enter the amount from line 29 | 7 | |
| 8 | Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 | 8 | |
| 9 | Tentative deduction. Enter the smaller of line 5 or line 8 | 9 | |
| 10 | Carryover of disallowed deduction from line 13 of your 2011 Form 4562 | 10 | |
| 11 | Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instrs) | 11 | |
| 12 | Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11. | 12 | |
| 13 | Carryover of disallowed deduction to 2013. Add lines 9 and 10, less line 12. | ▶ 13 | |

Note: Do not use Part II or Part III below for listed property. Instead, use Part V.

Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property.) (See instructions.)

| | | | |
|----|---|----|--|
| 14 | Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions) | 14 | |
| 15 | Property subject to section 168(f)(1) election | 15 | |
| 16 | Other depreciation (including ACRS) | 16 | |

Part III MACRS Depreciation (Do not include listed property.) (See instructions.)

Section A

| | | | |
|----|--|----|--|
| 17 | MACRS deductions for assets placed in service in tax years beginning before 2012. | 17 | |
| 18 | If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here <input type="checkbox"/> | | |

Section B – Assets Placed in Service During 2012 Tax Year Using the General Depreciation System

| (a) Classification of property | (b) Month and year placed in service | (c) Basis for depreciation (business/investment use only — see instructions) | (d) Recovery period | (e) Convention | (f) Method | (g) Depreciation deduction |
|--------------------------------|--------------------------------------|--|---------------------|----------------|------------|----------------------------|
| 19 a 3-year property | | | | | | |
| b 5-year property | | | | | | |
| c 7-year property | | 399. | 7.0 yrs | HY | 200 DB | 57. |
| d 10-year property | | | | | | |
| e 15-year property | | | | | | |
| f 20-year property | | | | | | |
| g 25-year property | | | 25 yrs | | S/L | |
| h Residential rental property | | | 27.5 yrs | MM | S/L | |
| i Nonresidential real property | | | 39 yrs | MM | S/L | |

Section C – Assets Placed in Service During 2012 Tax Year Using the Alternative Depreciation System

| | | | | | | |
|-----------------|--|--|--------|----|-----|--|
| 20 a Class life | | | | | S/L | |
| b 12-year | | | 12 yrs | | S/L | |
| c 40-year | | | 40 yrs | MM | S/L | |

Part IV Summary (See instructions.)

| | | | |
|----|---|----|-----|
| 21 | Listed property. Enter amount from line 28 | 21 | |
| 22 | Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations — see instructions. | 22 | 57. |
| 23 | For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs | 23 | |

Part V Listed Property (Include automobiles, certain other vehicles, certain computers, and property used for entertainment, recreation, or amusement.)

Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

Section A – Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles.)

24 a Do you have evidence to support the business/investment use claimed? **Yes** **No** **24b** If 'Yes,' is the evidence written? . . . **Yes** **No**

| (a) Type of property (list vehicles first) | (b) Date placed in service | (c) Business/ investment use percentage | (d) Cost or other basis | (e) Basis for depreciation (business/investment use only) | (f) Recovery period | (g) Method/ Convention | (h) Depreciation deduction | (i) Elected section 179 cost |
|--|----------------------------------|---|-------------------------------|--|---------------------------|------------------------------|----------------------------------|---------------------------------------|
| 25 Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use (see instructions) | | | | | | | 25 | |
| 26 Property used more than 50% in a qualified business use: | | | | | | | | |
| | | | | | | | | |
| 27 Property used 50% or less in a qualified business use: | | | | | | | | |
| Auto | 01/01/11 | 16.85 | | | | | | |
| | | | | | | | | |
| 28 Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1 | | | | | | | 28 | |
| 29 Add amounts in column (i), line 26. Enter here and on line 7, page 1 | | | | | | | 29 | |

Section B – Information on Use of Vehicles

Complete this section for vehicles used by a sole proprietor, partner, or other 'more than 5% owner,' or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.

| | (a) Vehicle 1 | | (b) Vehicle 2 | | (c) Vehicle 3 | | (d) Vehicle 4 | | (e) Vehicle 5 | | (f) Vehicle 6 | |
|---|------------------|----|------------------|----|------------------|----|------------------|----|------------------|----|------------------|----|
| | Yes | No | Yes | No | Yes | No | Yes | No | Yes | No | Yes | No |
| 30 Total business/investment miles driven during the year (do not include commuting miles) | | | | | | | | | | | | |
| 31 Total commuting miles driven during the year | | | | | | | | | | | | |
| 32 Total other personal (noncommuting) miles driven | | | | | | | | | | | | |
| 33 Total miles driven during the year. Add lines 30 through 32 | | | | | | | | | | | | |
| 34 Was the vehicle available for personal use during off-duty hours? | | | | | | | | | | | | |
| 35 Was the vehicle used primarily by a more than 5% owner or related person? | | | | | | | | | | | | |
| 36 Is another vehicle available for personal use? | | | | | | | | | | | | |

Section C – Questions for Employers Who Provide Vehicles for Use by Their Employees

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons (see instructions).

| | Yes | No |
|--|-----|----|
| 37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees? | | |
| 38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners | | |
| 39 Do you treat all use of vehicles by employees as personal use? | | |
| 40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received? | | |
| 41 Do you meet the requirements concerning qualified automobile demonstration use? (See instructions.) | | |

Note: If your answer to 37, 38, 39, 40, or 41 is 'Yes,' do not complete Section B for the covered vehicles.

Part VI Amortization

| (a) Description of costs | (b) Date amortization begins | (c) Amortizable amount | (d) Code section | (e) Amortization period or percentage | (f) Amortization for this year |
|--|------------------------------------|------------------------------|------------------------|--|--------------------------------------|
| 42 Amortization of costs that begins during your 2012 tax year (see instructions): | | | | | |
| | | | | | |
| 43 Amortization of costs that began before your 2012 tax year | | | | | 43 |
| 44 Total. Add amounts in column (f). See the instructions for where to report | | | | | 44 |

Form **4562**

Department of the Treasury
Internal Revenue Service (99)

Depreciation and Amortization (Including Information on Listed Property)

▶ See separate instructions. ▶ Attach to your tax return.

OMB No. 1545-0172

2012

Attachment
Sequence No. **179**

Name(s) shown on return

Ima Starr

Identifying number

111-22-3333

Business or activity to which this form relates

Sch C Blue Jazzbos

Part I Election To Expense Certain Property Under Section 179

Note: If you have any listed property, complete Part V before you complete Part I.

| | | | |
|----|--|------------------------------|------------------|
| 1 | Maximum amount (see instructions) | 1 | 500,000. |
| 2 | Total cost of section 179 property placed in service (see instructions) | 2 | |
| 3 | Threshold cost of section 179 property before reduction in limitation (see instructions) | 3 | 2,000,000. |
| 4 | Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0- | 4 | |
| 5 | Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions. | 5 | |
| 6 | (a) Description of property | (b) Cost (business use only) | (c) Elected cost |
| 7 | Listed property. Enter the amount from line 29 | 7 | |
| 8 | Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 | 8 | |
| 9 | Tentative deduction. Enter the smaller of line 5 or line 8 | 9 | |
| 10 | Carryover of disallowed deduction from line 13 of your 2011 Form 4562 | 10 | |
| 11 | Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instrs) | 11 | |
| 12 | Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11. | 12 | |
| 13 | Carryover of disallowed deduction to 2013. Add lines 9 and 10, less line 12. | ▶ 13 | |

Note: Do not use Part II or Part III below for listed property. Instead, use Part V.

Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property.) (See instructions.)

| | | | |
|----|---|----|--|
| 14 | Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions) | 14 | |
| 15 | Property subject to section 168(f)(1) election | 15 | |
| 16 | Other depreciation (including ACRS) | 16 | |

Part III MACRS Depreciation (Do not include listed property.) (See instructions.)

Section A

| | | | |
|----|--|----|------|
| 17 | MACRS deductions for assets placed in service in tax years beginning before 2012. | 17 | 109. |
| 18 | If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here <input type="checkbox"/> | | |

Section B – Assets Placed in Service During 2012 Tax Year Using the General Depreciation System

| (a) Classification of property | (b) Month and year placed in service | (c) Basis for depreciation (business/investment use only — see instructions) | (d) Recovery period | (e) Convention | (f) Method | (g) Depreciation deduction |
|--------------------------------|--------------------------------------|--|---------------------|----------------|------------|----------------------------|
| 19 a 3-year property | | | | | | |
| b 5-year property | | 3,419. | 5.0 yrs | HY | 200 DB | 684. |
| c 7-year property | | 225. | 7.0 yrs | HY | 200 DB | 32. |
| d 10-year property | | | | | | |
| e 15-year property | | | | | | |
| f 20-year property | | | | | | |
| g 25-year property | | | 25 yrs | | S/L | |
| h Residential rental property | | | 27.5 yrs | MM | S/L | |
| i Nonresidential real property | | | 27.5 yrs | MM | S/L | |
| | | | 39 yrs | MM | S/L | |
| | | | | MM | S/L | |

Section C – Assets Placed in Service During 2012 Tax Year Using the Alternative Depreciation System

| | | | | | | |
|-----------------|--|--|--------|----|-----|--|
| 20 a Class life | | | | | S/L | |
| b 12-year | | | 12 yrs | | S/L | |
| c 40-year | | | 40 yrs | MM | S/L | |

Part IV Summary (See instructions.)

| | | | |
|----|---|----|------|
| 21 | Listed property. Enter amount from line 28 | 21 | |
| 22 | Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations — see instructions. | 22 | 825. |
| 23 | For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs | 23 | |

BAA For Paperwork Reduction Act Notice, see separate instructions.

FDIZ0812 08/19/12

Form **4562** (2012)

Part V Listed Property (Include automobiles, certain other vehicles, certain computers, and property used for entertainment, recreation, or amusement.)

Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

Section A – Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles.)

24 a Do you have evidence to support the business/investment use claimed? Yes No **24b** If 'Yes,' is the evidence written? . . . Yes No

| (a) Type of property (list vehicles first) | (b) Date placed in service | (c) Business/ investment use percentage | (d) Cost or other basis | (e) Basis for depreciation (business/investment use only) | (f) Recovery period | (g) Method/ Convention | (h) Depreciation deduction | (i) Elected section 179 cost |
|--|----------------------------------|---|-------------------------------|--|---------------------------|------------------------------|----------------------------------|---------------------------------------|
| 25 Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use (see instructions) | | | | | | | 25 | |
| 26 Property used more than 50% in a qualified business use: | | | | | | | | |
| | | | | | | | | |
| 27 Property used 50% or less in a qualified business use: | | | | | | | | |
| | | | | | | | | |
| 28 Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1 | | | | | | | 28 | |
| 29 Add amounts in column (i), line 26. Enter here and on line 7, page 1 | | | | | | | 29 | |

Section B – Information on Use of Vehicles

Complete this section for vehicles used by a sole proprietor, partner, or other 'more than 5% owner,' or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.

| | (a) Vehicle 1 | | (b) Vehicle 2 | | (c) Vehicle 3 | | (d) Vehicle 4 | | (e) Vehicle 5 | | (f) Vehicle 6 | |
|---|------------------|----|------------------|----|------------------|----|------------------|----|------------------|----|------------------|----|
| | Yes | No | Yes | No | Yes | No | Yes | No | Yes | No | Yes | No |
| 30 Total business/investment miles driven during the year (do not include commuting miles) | | | | | | | | | | | | |
| 31 Total commuting miles driven during the year | | | | | | | | | | | | |
| 32 Total other personal (noncommuting) miles driven | | | | | | | | | | | | |
| 33 Total miles driven during the year. Add lines 30 through 32 | | | | | | | | | | | | |
| 34 Was the vehicle available for personal use during off-duty hours? | | | | | | | | | | | | |
| 35 Was the vehicle used primarily by a more than 5% owner or related person? | | | | | | | | | | | | |
| 36 Is another vehicle available for personal use? | | | | | | | | | | | | |

Section C – Questions for Employers Who Provide Vehicles for Use by Their Employees

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons (see instructions).

| | Yes | No |
|--|-----|----|
| 37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees? | | |
| 38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners | | |
| 39 Do you treat all use of vehicles by employees as personal use? | | |
| 40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received? | | |
| 41 Do you meet the requirements concerning qualified automobile demonstration use? (See instructions.) | | |

Note: If your answer to 37, 38, 39, 40, or 41 is 'Yes,' do not complete Section B for the covered vehicles.

Part VI Amortization

| (a) Description of costs | (b) Date amortization begins | (c) Amortizable amount | (d) Code section | (e) Amortization period or percentage | (f) Amortization for this year |
|--|------------------------------------|------------------------------|------------------------|--|--------------------------------------|
| 42 Amortization of costs that begins during your 2012 tax year (see instructions): | | | | | |
| Website | 07/01/12 | 2,150. | 197 | 3.00 yrs | 358. |
| 43 Amortization of costs that began before your 2012 tax year | | | | | 43 |
| 44 Total. Add amounts in column (f). See the instructions for where to report | | | | | 44 358. |

Form 4562

Depreciation and Amortization Report

2012

Ima Starr
Sch C - Blue Jazzbos

Tax Year 2012
► Keep for your records

111-22-3333

| Asset Description | Code | Date in Service | Cost (net of land) | Land | Business Use % | Section 179 | Special Depreciation Allowance | Depreciable Basis | Life | Method/Convention | Prior Depreciation | Current Depreciation |
|-----------------------|------|-----------------|--------------------|----------|----------------|-------------|--------------------------------|-------------------|------|-------------------|--------------------|----------------------|
| DEPRECIATION | | | | | | | | | | | | |
| Yamaha STAGEPAS | | 07/01/12 | 1,249 | | 100.00 | | | 1,249 | 5.0 | 200DB/HY | | 250 |
| Video Equipment | | 07/01/12 | 1,621 | | 100.00 | | | 1,621 | 5.0 | 200DB/HY | | 324 |
| Sennheiser e945 | | 07/01/12 | 225 | | 100.00 | | | 225 | 7.0 | 200DB/HY | | 32 |
| iPad | | 07/01/12 | 549 | | 100.00 | | | 549 | 5.0 | 200DB/HY | | 110 |
| SUBTOTAL CURRENT YEAR | | | 3,644 | 0 | | 0 | 0 | 3,644 | | | 0 | 716 |
| iPod | | 07/01/11 | 129 | | 100.00 | | | 129 | 5.0 | 200DB/HY | | 41 |
| iPhone 4S | | 07/01/11 | 299 | | 100.00 | | | 299 | 7.0 | 200DB/HY | 60 | 68 |
| SUBTOTAL PRIOR YEAR | | | 428 | 0 | | 0 | 0 | 428 | | | 60 | 109 |
| TOTALS | | | 4,072 | 0 | | 0 | 0 | 4,072 | | | 60 | 825 |
| AMORTIZATION | | | | | | | | | | | | |
| Website | | 07/01/12 | 2,150 | | 100.00 | | | 2,150 | 3.0 | | | 358 |
| SUBTOTAL CURRENT YEAR | | | 2,150 | | | 0 | 0 | 2,150 | | | 0 | 358 |
| TOTALS | | | 2,150 | | | 0 | 0 | 2,150 | | | 0 | 358 |

Code: S = Sold, A = Auto, L = Listed, H = Home Office

Ima Starr - 111-22-3333Schedule C - Other Income (Blue Jazzbos)

| | |
|---------------------|----------------|
| Product Endorsement | \$550 |
| Modeling Income | \$1,895 |
| | <u>\$2,445</u> |

Schedule C - Other Costs of Goods Sold Blue Jazzbos

| | |
|-------------------------|----------------|
| Sidemen (1099's Issued) | \$5,980 |
| | <u>\$5,980</u> |

Form 2106 - Acting

| | |
|--|----------------|
| <u>Meals - Form 2106 Line 5</u> | |
| Philly 14 days @ \$71 | \$944 |
| LA 6 days @ \$71 | \$426 |
| Cape Cod 14 days @ \$71 | \$944 |
| London \$941 x 30% | \$282 |
| Chicago 3 days @ \$71 | \$213 |
| Other Professional Meals | \$411 |
| | <u>\$3,220</u> |
| <u>Travel - Form 2106 Line 3</u> | |
| Hotel Philly | \$1,346 |
| Airline - LA | \$501 |
| Taxi/Car Rental - LA | \$324 |
| Ferry - Cape Cod | \$52 |
| London \$1,949 x 30% | \$588 |
| Chicago Audition Airfare | \$389 |
| Chicago Hotel | \$578 |
| Chicago Taxi | \$88 |
| | <u>\$3,866</u> |
| <u>Other Business Expenses - Form 2106</u> | |
| Script Costs | \$108 |
| Wardrobe Cleaning | \$89 |
| Telephone, Cell & Skype | \$568 |
| Research - Streaming Video/DVD | \$151 |
| Internet Service | \$234 |
| Performance Audit | \$385 |
| Union Dues | \$689 |
| Trade Publications | \$330 |
| Depreciation (Form 4562) | \$57 |
| | <u>\$2,611</u> |