

VEHICLE EXPENSE WORKSHEET

COMPLETE A SEPARATE WORKSHEET FOR EACH VEHICLE WITH BUSINESS USE

VEHICLE INFORMATION

Taxpayer name: _____ Tax year: _____

Vehicle make: _____ Vehicle model: _____ Vehicle year: _____

Type of vehicle? Auto Truck/Van/SUV Heavy vehicle Other (describe) _____

Date in service: From ___/___/___ To ___/___/___ Date of disposition (if applicable) ___/___/___

YES **NO**

1. Is the vehicle leased (not owned at the end of the monthly payments)? _____
2. Did you acquire / purchase the vehicle this year? If yes provide sales invoice. _____.

MILEAGE

Number of business miles for the year: _____

Number of total miles for the year: _____

YES **NO**

3. Is there evidence to support the business use claimed? _____
 - A. If yes is the evidence written?* _____

* Please note the IRS requires mileage logs to be maintained to substantiate a business deduction for vehicle expenses.

EXPENSES

Interest _____

Tolls _____

Parking _____

Total lease payments for the year
(If vehicle leased and not owned) _____

ADDITIONAL EXPENSES (Omit if using the mileage method)

Gasoline _____

Repairs, maintenance _____

Tires, supplies _____

Vehicle insurance _____

Vehicle registration _____