Expenses Related to Business Name: SSN: **Auto Expense** Name of business vehicle is used for Description of vehicle Date vehicle was placed in service Yes No Yes No Was this vehicle available for use during off-duty hours? Do you have evidence to support your deduction? Was another vehicle is available for personal use? If "Yes." is the evidence written? Mileage Number of miles the vehicle was driven during the year Commuting **Expenses** Other expenses Rental fees **Business Use of Home** Name of business home is used for What is the total square footage of your home that was used regularly and exclusively for business? What is the total square footage of your home? For daycare facilities not used exclusively for business, complete the following questions How many days during the year was the area used? How many hours per day was the area used? The daycare facility was in operation for the entire year **Expenses** Office expenses Home expenses Mortgage interest In the "Office expenses" column, enter those expenses that pertain exclusively to your office; Excess mortgage interest in the "Home expenses" column, enter those expenses that pertain to the entire dwelling. Insurance