

**IMPORTANT!**

When calculating “Miles driven for business”, do not include commuting miles.

The driving between your home and place of work is not business miles.

VEHICLE EXPENSES (Vehicle #1)			
Make &Year:	Own <input type="checkbox"/>	Lease <input type="checkbox"/>	Rent <input type="checkbox"/> Date first used for business:
Date of purchase:	Purchase price: \$	If lease or rent, monthly payment: \$	
Total miles (business + personal + commuting) driven during the tax year:		Miles driven for business:	
Registration fee: \$	Car insurance (for the YEAR): \$	Tolls and parking: \$	<a href="#">{help}</a>
Gasoline: \$	Oil, repair, maintenance:\$		
Do you or your spouse have another car? Yes <input type="checkbox"/> No <input type="checkbox"/>			
Was your car available for personal use during off-duty hours? Yes <input type="checkbox"/> No <input type="checkbox"/>			
Do you have evidence to support your deduction? Yes <input type="checkbox"/> No <input type="checkbox"/> If “yes”, is the evidence written? Yes <input type="checkbox"/> <a href="#">{help}</a> No <input type="checkbox"/>			

VEHICLE EXPENSES (Vehicle #2)			
Make &Year:	Own <input type="checkbox"/>	Lease <input type="checkbox"/>	Rent <input type="checkbox"/> Date first used for business:
Date of purchase:	Purchase price: \$	If lease or rent, monthly payment: \$	
Total miles (business + personal + commuting) driven during the tax year:		Miles driven for business:	
Registration fee: \$	Car insurance (for the YEAR): \$	Tolls and parking: \$	<a href="#">{help}</a>
Gasoline: \$	Oil, repair, maintenance:\$		
Do you or your spouse have another car? Yes <input type="checkbox"/> No <input type="checkbox"/>			
Was your car available for personal use during off-duty hours? Yes <input type="checkbox"/> No <input type="checkbox"/>			
Do you have evidence to support your deduction? Yes <input type="checkbox"/> No <input type="checkbox"/> If “yes”, is the evidence written? Yes <input type="checkbox"/> <a href="#">{help}</a> No <input type="checkbox"/>			

VEHICLE EXPENSES (Vehicle #3)			
Make &Year:	Own <input type="checkbox"/>	Lease <input type="checkbox"/>	Rent <input type="checkbox"/> Date first used for business:
Date of purchase:	Purchase price: \$	If lease or rent, monthly payment: \$	
Total miles (business + personal + commuting) driven during the tax year:		Miles driven for business:	
Registration fee: \$	Car insurance (for the YEAR): \$	Tolls and parking: \$	<a href="#">{help}</a>
Gasoline: \$	Oil, repair, maintenance:\$		
Do you or your spouse have another car? Yes <input type="checkbox"/> No <input type="checkbox"/>			
Was your car available for personal use during off-duty hours? Yes <input type="checkbox"/> No <input type="checkbox"/>			
Do you have evidence to support your deduction? Yes <input type="checkbox"/> No <input type="checkbox"/> If “yes”, is the evidence written? Yes <input type="checkbox"/> <a href="#">{help}</a> No <input type="checkbox"/>			