

### 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                       |   |
| <input type="checkbox"/> | <input type="checkbox"/> | Was this vehicle available for use during off-duty hours? | <input type="checkbox"/> | <input type="checkbox"/> | Do you have evidence to support your deduction? |
| <input type="checkbox"/> | <input type="checkbox"/> | Was another vehicle is available for personal use?        | <input type="checkbox"/> | <input type="checkbox"/> | If "Yes," is the evidence written?              |

#### Mileage

Number of miles the vehicle was driven during 2021

- Business . . . . . \_\_\_\_\_
- Commuting . . . . . \_\_\_\_\_
- Other . . . . . \_\_\_\_\_

#### Expenses

- |                              |                               |
|------------------------------|-------------------------------|
| Garage rent . . . . . _____  | Repairs . . . . . _____       |
| Gas . . . . . _____          | Tires . . . . . _____         |
| Insurance . . . . . _____    | Tolls . . . . . _____         |
| Licenses . . . . . _____     | Lease addback . . . . . _____ |
| Oil . . . . . _____          | Other expenses _____          |
| Parking fees . . . . . _____ | _____                         |
| Rental fees . . . . . _____  | _____                         |
| Interest . . . . . _____     | _____                         |
| Property tax . . . . . _____ | _____                         |

#### 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 . . . . . _____        | _____ | _____ |
| Real estate taxes . . . . . _____        | _____ | _____ |
| Excess mortgage interest . . . . . _____ | _____ | _____ |
| Excess real estate taxes . . . . . _____ | _____ | _____ |
| Insurance . . . . . _____                | _____ | _____ |
| Rent . . . . . _____                     | _____ | _____ |
| Repairs & maintenance . . . . . _____    | _____ | _____ |
| Utilities . . . . . _____                | _____ | _____ |
| Other expenses . . . . . _____           | _____ | _____ |

In the "Office expenses" column, enter those expenses that pertain exclusively to your office; in the "Home expenses" column, enter those expenses that pertain to the entire dwelling.

**CLIENT REPRESENTATION: VEHICLE INFORMATION  
FOR TAX YEAR 2021**

**NAME OF TAXPAYER:** \_\_\_\_\_

In accordance with Treasury Department Regulations governing preparers of tax returns, I am requesting each client to carefully complete and sign the following if you are claiming any vehicle travel expense items.

	<b>Vehicle 1</b>	<b>Vehicle 2</b>	<b>Vehicle 3</b>
Year of Vehicle			
Make and Model			
Name of Driver			
<b><u>Disclosure Requirements:</u></b>			
1. Date Vehicle placed in service for business use			
2. End of Year Odometer Reading			
3. Beginning of Year Odometer Reading			
4. Total Miles driven during entire year for all purposes			
5. Total Business miles driven in 2021			
6. Total Commuting miles driven in 2021			
7. Total other personal (not commuting) miles driven during the year			
8. Total miles driven during the year - Please add lines 5, 6 & 7 (This should equal line 4)			
9. Average daily round trip commute (home to work and back)			
<b><u>Substantiation Requirements:</u></b>	<b><u>Yes/No</u></b>	<b><u>Yes/No</u></b>	<b><u>Yes/No</u></b>
1. Was the vehicle available for personal use during off duty hours?			
2. Is another vehicle available for personal use?			
3. Was the vehicle used primarily by an owner/partner/shareholder?			
4. Do adequate records of sufficient evidence exist to justify the business miles being claimed?			
5. Is the evidence of these miles written?			
6. Is this vehicle leased?			
7. Have you deducted expenses in the past for this vehicle?			
8. Did you buy, sell or trade this vehicle in 2021? If yes, provide documentation and details			

**If you want to claim actual expenses for these vehicles, I will need the amount of gas purchased, repairs, insurance, lease payments, supplies, etc. separately for each vehicle.**

I declare that I have examined this information, and to the best of my knowledge and belief, it is true, correct and complete.

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**CLIENT REPRESENTATION WITH REGARD TO TRAVEL,  
ENTERTAINMENT AND GIFTS  
FOR THE TAX YEAR 2021**

**NAME OF TAXPAYER/BUSINESS:** \_\_\_\_\_

In accordance with Treasury Department Regulations governing preparers of tax returns, I am requesting each client to sign the following in any case where a deduction for auto, travel, meals, and/or gifts is being claimed on a tax return I am preparing:

I state that I have maintained adequate records and/or sufficient evidence corroborating my deduction for travel, meals, and/or gifts. Specifically, my records substantiate (a) the amount of such expense or other item; (b) the time and place of travel, or the date and description of the gift; (c) the business purpose of the expense or other item; and (d) the business relationship to me of persons fed or receiving the gift.

I understand fully that you are not in any way undertaking to audit and/or verify the facts as I submitted them to you. Upon request of the taxing authorities, I will furnish any necessary substantiation to support the numbers I have provided to you for this tax return.

I am aware that entertainment expenses are no longer a deduction and have segregated them from other deductible items.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Title: \_\_\_\_\_