

NAME: \_\_\_\_\_

## SCHEDULE C-2

TAX YEAR [ \_\_\_\_\_ ]

ADDITIONAL BUSINESS DEDUCTIONS		Remarks
<b>CAR &amp; TRUCK EXPENSES</b>		<b>VERY IMPORTANT:</b>
1	TOTAL MILES, BOTH BUSINESS & PERSONAL	The IRS requires detailed mileage records.
	DRIVEN ON THIS VEHICLE FOR THE YEAR: _____	ALL questions to the left are on your tax return
2	BUSINESS MILES DRIVEN	<b><u>If you leave ANY question unanswered, the</u></b>
3	Is there evidence to support this business use?	<b><u>IRS will NOT allow your deduction.</u></b>
4	If so, is this evidence in written form?	
5	Was this car available for personal use?	<b><i>You MUST keep written documentation</i></b>
6	Is there another car available for personal use?	<b><i>of where you drove, how far, what date, &amp; why.</i></b>
7	Date when you started using vehicle for business: _____	<b><i>(either a mileage log or a detailed calendar)</i></b>
		<b><u>There are SmartPhone apps for this!</u></b>
	Vehicle year, make, & model: _____	
<b>** If you LEASE your vehicle, answer ALL questions below, IN ADDITION to all of the above questions</b>		
	LEASE PAYMENTS _____ INS _____ MAINT _____ GAS _____	
	Make _____ Model _____ Year _____ Current value: _____	
<b>** If you use more than one vehicle for business, provide a separate sheet for each vehicle</b>		
<b>EQUIPMENT PURCHASES over \$500</b>		
	Amount	Date purchased & <u>% of business use !</u>
		continue listing on separate sheet if needed
<b>* Questions asked on your tax return:</b> 1) For any items used LESS than 100% for business, have you evidence to support your business percentage? _____ 2) If so, is the evidence in written form? _____		
<b>MEALS OUT OF TOWN OVERNIGHT ON BUSINESS</b> (Do not claim meals if you received a non-taxable per diem)		
Provide a list or itinerary w/ each <b>CITY</b> , and the number of days slept in that city (for travel days use destination city)		
<b>DATE &amp; amount of each ESTIMATED TAX PAYMENT - Include the JANUARY payment made THIS year</b>		
(Do not list balance due w/ last years tax return or refunds applied forward from last year)		
	IRS	STATE _____ LOCALITY: _____
date: _____ amount: _____		date: _____ amount: _____
date: _____ amount: _____		date: _____ amount: _____
date: _____ amount: _____		date: _____ amount: _____
date: _____ amount: _____		date: _____ amount: _____