

# 2024 AUTO DEDUCTION CHECKLIST

◆◆◆THE IRS REQUIRES YOU TO HAVE A WRITTEN MILEAGE LOG◆◆◆

**Veh. #1:** Year/Make/Model \_\_\_\_\_ Cost: \_\_\_\_\_  
Date Purchased/Put In Use: \_\_\_\_\_ Is Vehicle Leased?: \_\_\_\_\_  
Total Int. Paid: \_\_\_\_\_ Annual Lease Payment: \_\_\_\_\_

**Annual TOTAL Mileage:** \_\_\_\_\_ **Annual Business Mileage:** \_\_\_\_\_  
*(Used to calculate Business Use of Vehicle)*

Vehicle Expenses: (Gas, Oil, Repairs, Insurance, Registration, Parking Fees, Tolls, Etc.)

Expense: _____	Cost: _____
Expense: _____	Cost: _____
Expense: _____	Cost: _____
Expense: _____	Cost: _____
Expense: _____	Cost: _____

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**Veh. #2:** Year/Make/Model \_\_\_\_\_ Cost: \_\_\_\_\_  
Date Purchased/Put In Use: \_\_\_\_\_ Is Vehicle Leased? \_\_\_\_\_  
Total Int. Paid: \_\_\_\_\_ Annual Lease Payment: \_\_\_\_\_

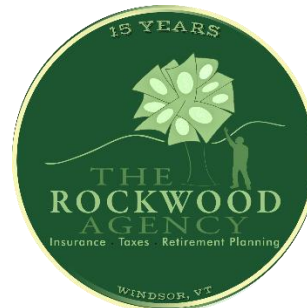
**Annual TOTAL Mileage:** \_\_\_\_\_ **Annual Business Mileage:** \_\_\_\_\_  
*(Used to calculate Business Use of Vehicle)*

Vehicle Expenses: (Gas, Oil, Repairs, Insurance, Registration, Parking Fees, Tolls, Etc.)

Expense: _____	Cost: _____
Expense: _____	Cost: _____
Expense: _____	Cost: _____
Expense: _____	Cost: _____
Expense: _____	Cost: _____

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**PLEASE ATTACH ANY ADDITIONAL INFORMATION RELATED TO THE VEHICLES**



**Veh. #3:** Year/Make/Model \_\_\_\_\_ Cost: \_\_\_\_\_  
Date Purchased/Put In Use: \_\_\_\_\_ Is Vehicle Leased? \_\_\_\_\_  
Total Int. Paid: \_\_\_\_\_ Annual Lease Payment: \_\_\_\_\_  
**Annual TOTAL Mileage:** \_\_\_\_\_ **Annual Business Mileage:** \_\_\_\_\_  
*(Used to calculate Business Use of Vehicle)*

**Vehicle Expenses: (Gas, Oil, Repairs, Insurance, Registration, Parking Fees, Tolls, Etc.)**

Expense: _____	Cost: _____
Expense: _____	Cost: _____
Expense: _____	Cost: _____
Expense: _____	Cost: _____
Expense: _____	Cost: _____

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**Veh. #4:** Year/Make/Model \_\_\_\_\_ Cost: \_\_\_\_\_  
Date Purchased/Put In Use: \_\_\_\_\_ Is Vehicle Leased? \_\_\_\_\_  
Total Int. Paid: \_\_\_\_\_ Annual Lease Payment: \_\_\_\_\_  
**Annual TOTAL Mileage:** \_\_\_\_\_ **Annual Business Mileage:** \_\_\_\_\_  
*(Used to calculate Business Use of Vehicle)*

**Vehicle Expenses: (Gas, Oil, Repairs, Insurance, Registration, Parking Fees, Tolls, Etc.)**

Expense: _____	Cost: _____
Expense: _____	Cost: _____
Expense: _____	Cost: _____
Expense: _____	Cost: _____
Expense: _____	Cost: _____

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**PLEASE ATTACH ANY ADDITIONAL INFORMATION RELATED TO THE VEHICLES**