This form is referenced in an endnote at the Bradford Tax Institute. CLICK HERE to go to the home page.

Employee Business Expenses

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service (99)

► See separate instructions. ► Attach to Form 1040 or Form 1040NR.

Attachment Sequence No. 129

Your name	Occupation in which you incurred expenses	Social security number		

Pa	rt I Employee Business Expenses and Reimbursements					
Step 1 Enter Your Expenses			Column A Other Than Meals and Entertainment	Column B Meals and Entertainment		
1	Vehicle expense from line 22 or line 29. (Rural mail carriers: See instructions.)	1				
2	Parking fees, tolls, and transportation, including train, bus, etc., that did not involve overnight travel or commuting to and from work	2				
3	Travel expense while away from home overnight, including lodging, airplane, car rental, etc. Do not include meals and entertainment .	3				
4	Business expenses not included on lines 1 through 3. Do not include meals and entertainment	4				
	Meals and entertainment expenses (see instructions)	5				
	result. In Column B, enter the amount from line 5	6 7 and	enter the amount from	line 6	on line 8.	
Ste	2 Enter Reimbursements Received From Your Employer for	Exp	enses Listed in Ste	p 1		
7	Enter reimbursements received from your employer that were not reported to you in box 1 of Form W-2. Include any reimbursements reported under code "L" in box 12 of your Form W-2 (see instructions)	7				
Ste	o 3 Figure Expenses To Deduct on Schedule A (Form 1040 or	For	n 1040NR)			
8	Subtract line 7 from line 6. If zero or less, enter -0 However, if line 7 is greater than line 6 in Column A, report the excess as income on Form 1040, line 7 (or on Form 1040NR, line 8)	8				
	Note: If both columns of line 8 are zero, you cannot deduct employee business expenses. Stop here and attach Form 2106 to your return.					
9	In Column A, enter the amount from line 8. In Column B, multiply line 8 by 50% (.50). (Employees subject to Department of Transportation (DOT) hours of service limits: Multiply meal expenses incurred while away from home on business by 80% (.80) instead of 50%. For details, see instructions.)	9				
10	Add the amounts on line 9 of both columns and enter the total here Schedule A (Form 1040), line 21 (or on Schedule A (Form 1040N reservists, qualified performing artists, fee-basis state or local governm with disabilities: See the instructions for special rules on where to enter the second secon	. Als R), li	ne 9). (Armed Forces fficials, and individuals	10		

Part	-								
	on A—General Information (You mu	st cor	mplete this section if y	ou		(a) Vehicle 1		(b) Vehicle	2
	aiming vehicle expenses.)								
11	Enter the date the vehicle was place				11	/ /		/	
12	Total miles the vehicle was driven d Business miles included on line 12				12	mile	-		miles
13 14	Percent of business use. Divide line			-	13 14	mile	98 %		miles %
15	Average daily roundtrip commuting	_		_	15	mile			miles
16	Commuting miles included on line 1				16	mile	_		miles
17	Other miles. Add lines 13 and 16 an				17	mile			miles
18	Was your vehicle available for person							☐ Yes	No
19	Do you (or your spouse) have anoth		•					☐ Yes ☐	No
20	Do you have evidence to support yo							☐ Yes ☐	No
21	If "Yes," is the evidence written? .							☐ Yes ☐	No
Section	on B-Standard Mileage Rate (Se	e the	instructions for Part I	I to find out wh	ethe	to complete this	sec	tion or Section	n C.)
22	Multiply line 13 by 50¢ (.50). Enter the	ne res	ult here and on line 1				22		
Secti	on C—Actual Expenses		(a) Vel	hicle 1		(b)	Vel	nicle 2	
23	Gasoline, oil, repairs, vehicle								
	insurance, etc	23							
24a	Vehicle rentals	24a					Ш		
b	Inclusion amount (see instructions) .	24b					Ш		
С	Subtract line 24b from line 24a .	24c				_			-
25	Value of employer-provided vehicle								
	(applies only if 100% of annual								
	lease value was included on Form W-2—see instructions)	0.5							
06		25				_	-		_
26 27	Add lines 23, 24c, and 25 Multiply line 26 by the percentage	26				-	-		_
21	on line 14	27							
28	Depreciation (see instructions) .	28				-	-		
29	Add lines 27 and 28. Enter total	20					-		_
	here and on line 1	29							
Section	on D-Depreciation of Vehicles (Us		s section only if you ow	vned the vehicle	and	are completing Se	ectio	n C for the veh	nicle.)
	,		(a) Vehic					nicle 2	
30	Enter cost or other basis (see								
	instructions)	30							
31	Enter section 179 deduction and								
	special allowance (see instructions)	31							
32	Multiply line 30 by line 14 (see								
	instructions if you claimed the								
	section 179 deduction or special								
	allowance)	32					Щ		
33	Enter depreciation method and percentage (see instructions) .								
	, ,	33							
34	Multiply line 32 by the percentage on line 33 (see instructions)								
05	· ·	34				-			
35 36	Add lines 31 and 34 Enter the applicable limit explained	35							
36	in the line 36 instructions	36							
37	Multiply line 36 by the percentage	30			T				
31	on line 14	37							
20	Enter the smaller of line 35 or line	-							+
38	37. If you skipped lines 36 and 37,								
	enter the amount from line 35.								
	Also enter this amount on line 28								
	above	38							