## Form **2106**

Department of the Treasury

Your name

Internal Revenue Service (99)

your return.

## **Employee Business Expenses**

(for use only by Armed Forces reservists, qualified performing artists, fee-basis state or local government officials, and employees with impairment-related work expenses)

Occupation in which you incurred expenses

► Attach to Form 1040 or Form 1040NR.

► Go to www.irs.gov/Form2106 for instructions and the latest information.

OMB No. 1545-0074

2018

Attachment Sequence No. **129** 

Social security number

Part I Employee Business Expenses and Reimbursemen	nts			
Step 1 Enter Your Expenses		umn A nan Meals	Column B Meals	
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 didn't involve overnight travel or commuting to and from work				
<b>3</b> Travel expense while away from home overnight, including lodging, airplane, car rental, etc. <b>Don't</b> include meals				
4 Business expenses not included on lines 1 through 3. <b>Don't</b> include meals	e <b>4</b>			
<ul> <li>Meals expenses (see instructions)</li> <li>Total expenses. In Column A, add lines 1 through 4 and enter the result. In Column B, enter the amount from line 5</li> </ul>	6			
Note: If you weren't reimbursed for any expenses in Step 1, skip lin  Step 2 Enter Reimbursements Received From Your Employer				
7 Enter reimbursements received from your employer that weren't 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).				
Step 3 Figure Expenses To Deduct			'	
8 Subtract line 7 from line 6. If zero or less, enter -0 However, if line is greater than line 6 in Column A, report the excess as income on Form 1040, line 1 (or on Form 1040NR, line 8)				
Note: If both columns of line 8 are zero, you can't deduct employee business expenses. Stop here and attach Form 2106 to				

Add the amounts on line 9 of both columns and enter the total here. Also, enter the total on Schedule 1 (Form 1040), line 24 (or Form 1040NR, line 34). Employees with impairment-related work expenses, see the instructions for rules on where to enter the total on your return . . . .

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Part	•							
	on A—General Information (You mu	st cor	mplete this section	if you		(a) Vehicle 1	(b) Vehicle 2	
are cla	aiming vehicle expenses.)					(,	(4, 10, 10, 10, 10, 10, 10, 10, 10, 10, 10	
11	Enter the date the vehicle was place				11	/ /	/ /	
12	Total miles the vehicle was driven during 2018			12	miles		miles	
13	Business miles included on line 12				13	miles		miles
14		rcent of business use. Divide line 13 by line 12			14	%		%
15	Average daily roundtrip commuting distance			15	miles		miles	
16	•	uting miles included on line 12			16	miles		miles
17	Other miles. Add lines 13 and 16 and subtract the total from line 12			17	miles		miles	
18	Was your vehicle available for person							No
19	Do you (or your spouse) have anoth							No
20	Do you have evidence to support yo							No
21	If "Yes," is the evidence written? .							No.
	on B-Standard Mileage Rate (Se							C.)
22	Multiply line 13 by 54.5¢ (0.545). En	ter the						
	on C—Actual Expenses	1	(a)	Vehicle 1		(b) \	/ehicle 2	
23	Gasoline, oil, repairs, vehicle							
	insurance, etc	23						
24a	Vehicle rentals	24a						
b	Inclusion amount (see instructions) .	24b						
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)							
	•	25						
26	Add lines 23, 24c, and 25	26						
27	Multiply line 26 by the percentage							
	on line 14	27						
28	Depreciation (see instructions) .	28						
29	Add lines 27 and 28. Enter total							
	here and on line 1	29						
Section	on D-Depreciation of Vehicles (Us	se this			cle and			le.)
		1	(a)	Vehicle 1		(d) \	/ehicle 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						
33	Enter depreciation method and							
	percentage (see instructions) .	33						
34	Multiply line 32 by the percentage							
	on line 33 (see instructions)	34						
35	Add lines 31 and 34	35						
36	Enter the applicable limit explained							
	in the line 36 instructions	36						
37	Multiply line 36 by the percentage							
	on line 14	37						
38	Enter the <b>smaller</b> of line 35 or line							
	37. If you skipped lines 36 and 37,							
	enter the amount from line 35.							
	Also enter this amount on line 28 above							
	upovo	30						