

NON-REIMBURSED EMPLOYEE EXPENSES WORKSHEET

Name: _____
Print Name

Tax Year: _____

<p>Business gifts (\$25 per recipient limit) \$ _____</p> <p>Dues and subscriptions \$ _____</p> <p>Education and training (to maintain and improve your skill in current profession) . . . \$ _____</p> <p>Employment related education mileage _____ miles</p> <p>Employment related education parking fees . \$ _____</p> <p>Employment related education supplies \$ _____</p> <p>Employment related education tuition (must maintain or improves skills) \$ _____</p> <p>Legal expenses; job related \$ _____</p> <p>License fees \$ _____</p> <p>Meals and entertainment \$ _____</p> <p>Medical exam required by employer \$ _____</p> <p>Mileage job related (not reimbursed and non-commuting) _____ miles</p> <p>Office supplies for business \$ _____</p>	<p>Passport fee for job (if not reimbursed) \$ _____</p> <p>Printing-copying, job related \$ _____</p> <p>Professional associations \$ _____</p> <p>Professional books and publications \$ _____</p> <p>Professional license fees (not drivers or car licenses) \$ _____</p> <p>Safety glasses \$ _____</p> <p>Safety shoes or boots \$ _____</p> <p>Software (job related) \$ _____</p> <p>Telephone expense for business \$ _____</p> <p>Uniform purchase (employer required) \$ _____</p> <p>Union Assessments and initiation fees \$ _____</p> <p>Union dues (on last pay stub, NOT on W-2). \$ _____</p> <p>_____ \$ _____</p>
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	Annual Cost	% Used for Work	Annual Work Cost
Cell phone or pager	\$ _____	_____ %	\$ _____
Computer	\$ _____	_____ %	\$ _____
Internet service	\$ _____	_____ %	\$ _____

How many times per month do you dry clean or wash the below uniform items?

Uniform Maintenance	Dry Clean Quantity	Dry Clean Unit Cost	Dry Clean Total Cost	Wash Quantity	Wash Unit Cost	Wash Total Cost
Pants	_____	\$ _____	\$ _____	_____	\$ _____	\$ _____
Shirts.	_____	\$ _____	\$ _____	_____	\$ _____	\$ _____
Jackets	_____	\$ _____	\$ _____	Dry clean and wash; TOTALS		\$ _____
Coat	_____	\$ _____	\$ _____			

Signature is required to process this tax deduction

I understand that to deduct these expenses, my employer would agree that these non-reimbursed expenses were needed to perform my job. You should retain all original receipts, checks, bank statement and mileage logs to support these deductions. I declare that the information I have provided to Nancy L Shoemake CPA, P.A. is to the best of my knowledge is true, correct and complete.

Signature

Date