

TRAVEL EXPENSE WORKSHEET

NAME \_\_\_\_\_ DATE \_\_\_\_\_ TAX YEAR \_\_\_\_\_

**Temporary Address.** We will mail your completed tax returns to your permanent address unless you enter a temporary address here:

\_\_\_\_\_  
 \_\_\_\_\_

Note: Per Diem is not taxable if you are "temporarily" employed away from your permanent place of abode or "Tax Home", and you are reimbursed under an accountable or "deemed accountable" plan. Complete this page if your actual travel expenses exceed your per diem, **or** if your employer includes the per diem in taxable wages on your W-2 or 1099-Misc.

1. January 1, \_\_\_\_\_ thru \_\_\_\_\_ Per Diem Received \$ \_\_\_\_\_

Employers Name \_\_\_\_\_

Location of Employment \_\_\_\_\_  
 (City) (State) (County)

Number of Days at this Location \_\_\_\_\_

Type of Employment (circle one) Wage (W-2) or Contractor (Form 1099)

Lodging: Rent	_____	Vehicle Exp (actual)	_____
Motels	_____	Vehicle Exp (mileage)*	_____
Utilities	_____	Lease Pymts	_____
Telephone	_____	Laundry/Cleaning	_____
Storage	_____	_____	_____
Meals**	_____	_____	_____

2. \_\_\_\_\_ thru \_\_\_\_\_ Per Diem Received \$ \_\_\_\_\_

Employers Name \_\_\_\_\_

Location of Employment \_\_\_\_\_  
 (City) (State) (County)

Number of Days at this Location \_\_\_\_\_

Type of Employment (circle one) Wage (W-2) or Contractor (Form 1099)

Lodging: Rent	_____	Vehicle Exp (actual)	_____
Motels	_____	Vehicle Exp (mileage)*	_____
Utilities	_____	Lease Pymts	_____
Telephone	_____	Laundry/Cleaning	_____
Storage	_____	_____	_____
Meals**	_____	_____	_____

3. \_\_\_\_\_ thru \_\_\_\_\_ Per Diem Received \$ \_\_\_\_\_

Employers Name \_\_\_\_\_

Location of Employment \_\_\_\_\_

(City) (State) (County)

Number of Days at this Location \_\_\_\_\_

Type of Employment (circle one) Wage (W-2) or Contractor (Form 1099)

Lodging: Rent \_\_\_\_\_ Vehicle Exp (actual) \_\_\_\_\_

Motels \_\_\_\_\_ Vehicle Exp (mileage)\* \_\_\_\_\_

Utilities \_\_\_\_\_ Lease Payments \_\_\_\_\_

Telephone \_\_\_\_\_ Laundry/Cleaning \_\_\_\_\_

Storage \_\_\_\_\_ \_\_\_\_\_

Meals\*\* \_\_\_\_\_ \_\_\_\_\_

4. \_\_\_\_\_ thru \_\_\_\_\_ Per Diem Received \$ \_\_\_\_\_

Employers Name \_\_\_\_\_

Location of Employment \_\_\_\_\_

(City) (State) (County)

Number of Days at this Location \_\_\_\_\_

Type of Employment (circle one) Wage (W-2) or Contractor (Form 1099)

Lodging: Rent \_\_\_\_\_ Vehicle Exp (actual) \_\_\_\_\_

Motels \_\_\_\_\_ Vehicle Exp (mileage)\* \_\_\_\_\_

Utilities \_\_\_\_\_ Lease Pymts \_\_\_\_\_

Telephone \_\_\_\_\_ Laundry/Cleaning \_\_\_\_\_

Storage \_\_\_\_\_ \_\_\_\_\_

Meals\*\* \_\_\_\_\_ \_\_\_\_\_

**\* VEHICLE EXPENSE: A mileage log must be maintained. Enter business miles at each location on lines provided above. Record total number of miles vehicle driven this year here (personal and business)**

\_\_\_\_\_.

**\*\* MEALS AWAY FROM HOME:** There is a simplified meal allowance available. The simplified allowance is used in lieu of keeping a daily log for the cost of meals. Both methods are subject to a 50% limitation (80% allowance in the transportation industry.)