Form **2106**

Department of the Treasury

Your name

Internal Revenue Service (99)

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)

► Attach to Form 1040, 1040-SR, or 1040-NR.

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

Occupation in which you incurred expenses

OMB No. 1545-0074

2021

Attachment Sequence No. **129**

Social security number

Pa	rt I Employee Business Expenses and Reimbursements			
Ste	p 1 Enter Your Expenses		Column A other Than Meals	Column B Meals
1	Vehicle expense from line 22 or line 29. (Rural mail carriers: See instructions.)			
2	Parking fees, tolls, and transportation, including train, bus, etc., that didn't involve overnight travel or commuting to and from work			
3	Travel expense while away from home overnight, including lodging, airplane, car rental, etc. Don't include meals			
4	Business expenses not included on lines 1 through 3. Don't include meals			
5	Meals expenses (see instructions)			
6	Total expenses. In Column A, add lines 1 through 4 and enter the result. In Column B, enter the amount from line 5			
	Note: If you weren't reimbursed for any expenses in Step 1, skip line 7 and enter the amou	nt from	line 6 on line	8.
	p 2 Enter Reimbursements Received From Your Employer for Expenses Listed Enter reimbursements received from your employer that weren't reported to you in	d in St	ep 1	
•	box 1 of Form W-2. Include any reimbursements reported under code "L" in box 12 of your Form W-2 (see instructions)	,		
Ste	p 3 Figure Expenses To Deduct			
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 or 1040-SR, line 1 (or on Form 1040-NR, line 1a)			
	Note: If both columns of line 8 are zero, you can't 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, see the instructions for the amount to enter			
10	Add the amounts on line 9 of both columns and enter the total here. Also, enter the total of (Form 1040), line 12. Employees with impairment-related work expenses, see the instruction where to enter the total on your return	ons for		

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Part II Vehicle Expenses

Section	on A—General Information (You must complete th	is sec	tion if you are		(-))	/-l-!-ld		71-1 1/-1	-:		
	ng vehicle expenses.)		,		(a) \	/ehicle 1	((d) vei	nicle 2		
11	Enter the date the vehicle was placed in service			11	/	/		/	/		
12	Total miles the vehicle was driven during 2021			12		miles			miles		
13	Business miles included on line 12			13		miles			miles		
14	Percent of business use. Divide line 13 by line 12			14		%			%		
15	Average daily roundtrip commuting distance .			15		miles			miles		
16	Commuting 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 personal use during	off-c	uty hours?				. [Yes	□ No		
19	Do you (or your spouse) have another vehicle avai	lable	for personal use? .				. [Yes	□ No		
20	Do you have evidence to support your deduction?						. [Yes	□ No		
21	If "Yes," is the evidence written?						.	Yes			
Secti	on B-Standard Mileage Rate (See the instruct	tions	for Part II to find ou	it whe	ther to co	mplete this	secti	on or S	Section C.)		
22	Multiply line 13 by 56¢ (0.56). Enter the result here	and	on line 1				22				
Secti	on C-Actual Expenses										
		(a) Veh				cle 1			b) Vehicle 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 D—Depreciation of Vehicles (Use this section					nd are co				ne vehicle.)		
			(a) Vehi	cle 1		(l) Ve	hicle 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 smaller 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	38									