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TREASURY/IRS AND OMB USE ONLY DRAFT

Form **2106**

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)

OMB No. 1545-0074

Attachment Sequence No. 129

Social security number

Department of the Treasury Internal Revenue Service

Your name

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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

Step	1 Enter Your Expenses		Column A Other Than Meals	Column Meals
1	Vehicle expense from line 22 or line 29. (Rural mail carriers: See instructions.)	1		
2	Parking fees, tolls, and transportation, including trains, buses, etc., that didn't involve overnight travel or commuting to and from work	2		
3	Travel expense while away from home overnight, including lodging, airfare, car rental, etc. Don't include meals	3		
4	Business expenses not included on lines 1 through 3. Don't include meals	4		
5	Meals expenses (see instructions)	5		
6	Total expenses. In Column A, add lines 1 through 4 and enter the result. In Column B, enter the amount from line 5	6		
	Note: If you weren't reimbursed for any expenses in Step 1, skip line 7 and enter the	e amo	unts from line 6 o	n line 8.
7	Reimbursements Received From Your Employer for Expenses List Reimbursements received from employer. Include reimbursements reported on Form W-2, box 12, code "L." Do not include amounts reported on Form W-2, box 1. (See instructions.)	eted in	n Step 1	
tep	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, 1040-SR, or 1040-NR, line 1a	8		
	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			

For Paperwork Reduction Act Notice, see your tax return instructions.

rules on where to enter the total on your return

Add the amounts on line 9 for both columns and enter the total here. Also, enter the total on Schedule 1 (Form 1040), line 12. Employees with impairment-related work expenses, see the instructions for

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Form **2106** (2025) Created 3/27/25

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Part	Vehicle Expenses											
Section A—General Information (You must complete the claiming vehicle expenses.)			tion if you are	(a) Vehicle 1		(b) Vehicle 2						
11	Enter the date the vehicle was placed in service .			11	/ /		/	/				
12	Total miles the vehicle was driven during 2025 .			12	mile	s		miles				
13	Business miles included on line 12			13	mile	s		miles				
14	Percent of business use. Divide line 13 by line 12.			14	9	6		%				
15	Average daily roundtrip commuting distance			15	mile	s		miles				
16	Commuting miles included on line 12			16	mile	s		miles				
17	Other miles. Add lines 13 and 16 and subtract the			17	mile	s		miles				
18	Was your vehicle available for personal use during	off-d	uty hours?			· .	☐ Yes	☐ No				
19	Do you (or your spouse) have another vehicle available for personal use?											
20	Do you have evidence to support your deduction?											
21	If "Yes," is the evidence written?											
Section B-Standard Mileage Rate (See the instructions for Part II to find out whether to complete this section or Section C.)												
22	Multiply line 13 by 70¢ (0.70). Enter the result here	and	on line 1			22						
Secti	on C—Actual Expenses											
			(a) Vehic		(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										
Secti	on D—Depreciation of Vehicles (Use this see the vehicle.)	ction	only if you owned t	the ve	ehicle and are com			n C for				
			(a) Vehicle 1			(b) Vehicle 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											
O_	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										