

CONSTRUCTION WORKERS DEDUCTIONS

Tax ID Number: _____

Business Name: _____

Tax Year: _____

The purpose of this worksheet is to help you organize your tax deductible business expenses. In order for an expense to be deductible, it must be considered an "ordinary and necessary" expense. You may include other applicable expenses. Do not include expenses for which you have been reimbursed, expect to be reimbursed, or are reimbursable.

Equipment/Supplies	Amount	Professional	Amount
Batteries (Non-Automotive)		Licenses and Permits	
Bed Liner, Truck		Subscriptions	
Blades, Replacement		Union Dues	
Brooms, Mops, etc			
Brushes		Uniforms	
Buckets		Coveralls	
Chain Saw, Electric/Gas		Hardhats, etc	
Cleaning Supplies		Uniforms, Shirts, Pants	
Compressor, Air		Safety Boots	
Equipment Rentals		Other:	
Flashlights			
Gasoline, Equipment		Telephone	
Gear, Rain		Cell Phone	
Generator		Long Distance	
Hammers, All Types		Pager	
Repairs, All Types		Other:	
Rope, All Types		Other:	
Safety Equipment (Attach List with amount and date purchased)		Other:	
Saws. Electric/Gas		Notes or Additional Information	
Shovels		<div style="border: 1px solid black; height: 100%; width: 100%;"></div>	
Tape			
Tool Bags, All Types			
Tool Boxes, All Types			
Other:			
Other:			
Vehicle & Travel			
Total Miles for Year			
Business Miles for Year			
Finance Charges			
Gas & Oil			
Insurance			
Lease Payments			
Misc			
Registration			
Repairs			