South Beach Tax and Financial Services

Powerline Worker's Work Sheet

Name _____ Tax Year _____

Check Applicable Status	GO TO :
Self-Employed ◯ ▶	Table C below
Employee ◯ ▶	Table C & A Below

TABLE C

***For Self employment** , the expense captions below are an expansion of, a supplement to, Sch. C and W/S C-1. Use Sch. C and W/S C-1 **FIRST** and then supplement with this Worksheet. Enlarge the scope of the interview here. DO NOT repeat any of the expenses captioned on Sch. C or on W/S C-1. Carry to Sch. C as shown below.
*** For an employee,** the expense captions below are to be used whenever applicable, and the total will carry to TABLE A as shown below.

DESCRIPTION	AMOUNT
Barrel pins/bull pins/drift pins	
Body belt	
Bolt cutters/circle cutters/side cutters	
Boomers	
Bucket/with lid/oval/tool skirt	
Channel locks/skiver/ruler	
Chisels/punches/vise grips	
Dead man	
Dog bone/Johnny ball	
Dykes	
Erection wrench holder	
File/file card	
Gauntlet gloves	
Glass pliers/needle nose pliers	
Guy jack	
Jacob's ladder	
Jiggler	
Marlin splice	
Nut bag w/ inside loops	
Tool pouch/plier pouch/scissor pouch	
Safety hooks/extensions/straps/pads	
Saw dust pump	
Skinning knife/stripper	
Stiff legs	
Traveler/Dolly	
Socket sets/wrenches, crescent etc...	
Subtotal, for an Employee, Carry to TABLE A----->	
TOTAL for **Self-Employed** to **Sch. C, line 48** Describe as "From W/S C-15"	

DEDUCTIBLE MILEAGE (not commuting) (requires W/S TC-10)	**MILES**
Travel To: Customer site	
Supply store	
Other:	
TOTAL To W/S A-32 ◯ or Form 2106 ◯	

TABLE A

For employee expenses only

The expense captions below are in addition to those in Table C, and are not to be used for the self-employed as they are included in Schedule C or on W/S C-1

DESCRIPTION		AMOUNT
Advertising		
Alarm service-burglaries, fire, etc.		
Answering service		
Bank service charges		
Clerical services/Public stenographer		
Contract services/Outside services		
Credit Card membership		
Delivery/Freight/Express		
Educational expenses	**A-16**	
Employment seeking expenses	**A-17**	
Entertainment/Meals	**(see A-20)**	
Equipment rental		
Gifts	**(Requires W/S TC-10)**	
Insurance		
Internet/DSL/Cable fees		
Meetings & Conventions	**M-1**	
Occupational license renewals		
Postage/FedEx/UPS		
Printing/Reproduction/Copies		
Professional dues and expenses	**M-1**	
Rent on business property (not home)		
Repairs to equipment		
Security/Patrol Services/Watchdog		
Seminars and workshops	**M-1**	
Subcontracts		
Supplies office and general		
Telephone, pager, fax, etc	**A-9**	
Trade/Technical Books/ Publications/ Periodicals/Tools/Supplies	**A-10**	
Uniforms	**A-11**	
Utilities (other than home office)		
Other:		
----->SUBTOTAL FROM TABLE C----->		
Amount from W/S A-99, column A	**A-99**	
TOTAL for Employee to **Form 2106, line 4**		

Enter Reimbursement from accountable plans, if any, on Form 2106.

DO NOT net against expenses here.

OTHER TRANSPORTATION COSTS (not commuting)	**AMOUNT**
Taxicab, Bus, Subway, etc.	
Tolls, Parking	
Total To Form 2106, line 2 or Sch. C, line 48	