

ARKANSAS INDIVIDUAL INCOME TAX EMPLOYEE BUSINESS EXPENSES

Taxpayer's legal name			Occupation in which you incurred expenses Social security number				
Pa:	rt I Employee Business	Expenses and Reim	bursemen	ts			
Ste	ep 1 Enter Your Expenses	3		Column A Other Than Meals and Entertainment	Column B Meals and Entertainment		
1.	Vehicle expense from line 22 or line 29	. (Rural mail carriers: see instruc	tions.) 1	00)		
2.	Parking fees, tolls, and transportation, i involve overnight travel or commuting to			00	<u>)</u>		
3.	Travel expense while away from home rental, etc. Do not include meals and e			00	<u>)</u>		
4.	Business expenses not included on line entertainment.			00)		
5.	Meals and entertainment expenses (se	e instructions)	5		00		
6.	Total expenses. In column A, add lines column B, enter the amount from line 5	s 1 through 4 and enter the result	i. In 6 _	00	00		
	Enter Reimbursement Enter reimbursements received from your box 1 of Form W-2. Include any reimbur of your Form W-2 (see instructions)	rsements reported under code "L	ted to you in " in box 12	for Expenses			
Ste	ep 3 Figure Expenses To			joc	<u>, </u>		
8.	Subtract line 7 from line 6. If zero or les line 6 in column A, report the excess as			00	00		
	Note. If both columns of line 8 are zero, y expenses. Stop here and attach Form AR		less				
9.	In column A, enter the amount from line (Employees subject to Department of T Multiply meal expenses incurred while instead of 50%. For details, see instruc	ransportation (DOT) hours of sel away from home on business by	rvice limits: 80% (.80)	oc) 00		
10.	Add the amounts on line 9 of both colun	nns and enter the total here. Also	, enter the total	on Schedule			



Part II Vehicle Expenses

Sec are c	tion A - General Information (you must laiming vehicle expenses).	(a) Vehicle 1	(b) Vehicle 2				
11.	Enter the date the vehicle was placed in serv	vice	11	1 1	1	1	
	Total miles the vehicle was driven during 202		ſ	miles		miles	
	Business miles included on line 12		[miles		miles	
14.	Percent of business use. Divide line 13 by lin	ne 12	14	%		%	
	Average daily roundtrip commuting distance		ı	miles		miles	
	Commuting miles included on line 12		Ī	miles		miles	
	Other miles. Add lines 13 and 16 and subtra			miles		miles	
18.	Was your vehicle available for personal use			☐ Yes	□No		
	Do you (or your spouse) have another vehic				_	□No	
	Do you have evidence to support your milea			□No			
	If "yes", is the evidence hand written? (See i	•				□No	
	tion B - Standard Mileage Rate (See th						
	Multiply line 13 by 62.5 cents (.625) for miles			•			
	tion C - Actual Expenses			(b) Vehicle 2			
		(a) Veh		(b) ve	Ticle 2		
23.	Gasoline, oil, repairs, vehicle insurance, etc			00		00	
24a	.Vehicle rentals24			00		10.0	
b	.Inclusion amount (see instructions) 24	b00	la	00		loo	
	Subtract line 24b from line 24a	C	(00	<u> </u>	00	
25.	Value of employer-provided vehicle (applies only if 100% of annual lease value was included on Form W-2 - see						
00	instructions).			00		00	
	Add lines 23, 24c, and 25			00	<u> </u>	00	
21.	Multiply line 26 by the percentage on line 14	7		00		00	
28.	Depreciation (see instructions)		C	00		00	
29.	Add lines 27 and 28. Enter total here						
	and on line 1			00		00	
Sec	tion D - Depreciation of Vehicles (Use	this section only if you o	wned the vehicle ar	nd are completing section	on C for the	e vehicle.)	
	Enter cost or other basis (see instructions)	00		00			
31.	Enter section 179 deduction (see instructions)			00		00	
32.	Multiply line 30 by line 14 (see instructions if you claimed the section 179 deduction or special allowance)	2 00		00)		
33.	Enter depreciation method and percentage (see instructions)						
34.	Multiply line 32 by the percentage on line 33 (see instructions)34		(00		00	
35.	Add lines 31 and 34		(00		00	
36.	Enter the applicable limit explained in the line 36 instructions	3 00		00			
37.	Multiply line 36 by the percentage on line 14	7	0	00		00	
	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	3	C	00		00	