# CONSTRUCTION WORKERS DEDUCTIONS

Client: _____ ID#_____ 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 | |
|---|---|
| Batteries (Non - Automotive) | |
| Bed Liner, Truck | |
| Blades, Replacement | |
| Brooms, Mops, etc. | |
| Brushes | |
| Buckets | |
| Chain Saw, Electric/Gas | |
| Cleaning Supplies | |
| Compressor, Air | |
| Equipment Rentals | |
| Flashlght | |
| Gasoline, Equipment | |
| Gear, Rain | |
| Generator | |
| Hammers, All Types | |
| Ladders | |
| Propane, All Types | |
| Repairs, All Types (Attach List) | |
| Rope, All Types | |
| Safety Equipment (Attach List) | |
| Saws, Electric/Gas | |
| Shovels | |
| Tape | |
| Tool Bags, All Types | |
| Tool Boxes, All Types | |
| Tools | |
| Other _____ | |
| Other _____ | |
| Other _____ | |
| Other _____ | |
| Other _____ | |
| Other _____ | |
| Other _____ | |
| Other _____ | |
| Total | |

| Vehicle & Travel | |
|---|---|
| See Vehicle, Travel & Entertainment Worksheet | |
| **Professional** | |
| Licenses & Permits | |
| Subscriptions | |
| Union Dues | |
| Other _____ | |
| Other _____ | |
| Other _____ | |
| Other _____ | |
| Other _____ | |
| Total | |
| **Uniforms** | |
| Coveralls | |
| Hardhats, etc. | |
| Uniforms, Shirts, Pants | |
| Safety Boots | |
| Other _____ | |
| Other _____ | |
| Other _____ | |
| Total | |
| **Telephone** | |
| Cell Phone | |
| Long Distance | |
| Pager | |
| Other _____ | |
| Other _____ | |
| Other _____ | |
| Total | |

## Other Information

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