



EMPLOYEE REPRESENTATION REGARDING USE OF COMPANY VEHICLE WORKSHEET

(applies to purchased and leased vehicles)

Compa	any name:			
Emplo	/ee name:			
Vehicle	e Description (YEAR, MAKE, MODEL			
Report	ing Period:	To:		
Odome	eter Reading – BEGINNING:	ENDING:		
	S requires employers to provide certa loyees.	ain information on their tax returns related to	vehicles pr	ovided
Please	•	pe maintained to document the use of busine estions. If you are provided more than one velle.		
	mpleted worksheet must be returned of the vehicle will be included in you	no later than or 100% ur Form W-2 income.	of the valu	e of
1.	Was the vehicle available for your p	personal use during off-duty hours?	□ YES	□ NO
2.	Do you have another vehicle availa	ble for your personal use, including a car you	u own perso □ YES	•
3.	Are you an officer or one percent (1	%) or greater owner of this business?	□ YES	□ NO
4.	How many commuting roundtrips did you make in this vehicle (generally 260 per year)?			
5.	Please provide the number of miles	for each category below:		
	Business miles			
	Commuting miles			
	Personal miles			
6.	Did the employer pay the cost of fue	el consumed by this vehicle?	□ YES	□ NO
	swered this survey, please sign and	ed in the preparation of your annual W2. Afted and return the for	•	read
Emplo	/ee's Signature & Date			