

**WESTBROOK & CO., P.C.**  
**INFORMATION REGARDING COMPENSATION FROM**  
**PERSONAL USE OF COMPANY-OWNED/LEASED AUTOMOBILES**  
**2020**

The following information **must** be supplied for **each** employee or shareholder who was provided a company-owned/leased vehicle or airplane for personal use. This information is used to report the value of the non-cash fringe benefit as compensation to the employee or shareholder. If you had more than one such employee or shareholder, you may copy this form or additional forms will be provided upon request. **Do not include vehicles or airplanes owned personally. In order to serve you more efficiently, please complete all information below.**

The employee's portion of employment taxes and required withholdings for this benefit can be withheld from the employee only if you **RETURN THIS COMPLETED FORM BEFORE YOUR LAST PAYROLL FOR THE YEAR**. Otherwise, you as the employer will pay both the employee and employer portions of employment taxes if the benefit is added to wages as a year-end adjustment. If you elect to include as a year-end adjustment, then **RETURN THIS FORM BY DECEMBER 23, 2020**, so that we can compute the compensation and withholdings which should be included on Form W-2. This calculation must be made **prior to completing Form 941 and Forms W-2** since it will result in an adjustment to these forms. If you are a *semi-weekly depositor*, the tax liability resulting from a year-end adjustment must be initiated no later than **TUESDAY, JANUARY 5, 2021**. The adjustment is effective on the last day of the year which is a Thursday. Therefore, if you are a *semi-weekly depositor*, please return this form no later than **DECEMBER 23, 2020**.

1. Do you have employees/shareholders that are provided company owned/leased automobiles?  
 (Circle one) YES NO

NOTE: If you do have such employees/shareholders, please complete items 2 through 10 and sign below. If you do not have such employees/shareholders, complete only item 2 and **sign below**.

2. Company Name \_\_\_\_\_

3. Employee/Shareholder Name \_\_\_\_\_  
 Employee 2020 gross wages \_\_\_\_\_

4. Vehicle Information:	Auto #1	Auto #2	Auto #3	Airplane/Auto #4
a. Year	_____	_____	_____	_____
b. Make & Model	_____	_____	_____	_____
c. Date Acquired	_____	_____	_____	_____
d. Cost	_____	_____	_____	_____

5. Mileage/Hours Information for 2020

a. Business	_____	_____	_____	_____
b. Personal commuting	_____	_____	_____	_____
c. Other personal	_____	_____	_____	_____
d. Total miles/hours (a + b + c)	_____	_____	_____	_____

6. Do you have records substantiating the mileage/hours shown above? (Circle one) YES NO

7. Does the company provide gas for the vehicle? (Circle one) YES NO

8. Number of days during the year that the vehicle was available to drive to work.

Auto #1 \_\_\_\_\_ Auto #2 \_\_\_\_\_ Auto #3 \_\_\_\_\_ Auto #4 \_\_\_\_\_

9. Is employee/shareholder an officer or director of the company? (Circle one) YES NO

10. Does employee own 1% or more of the company's stock? (Circle one) YES NO

Signed: \_\_\_\_\_ Date: \_\_\_\_\_