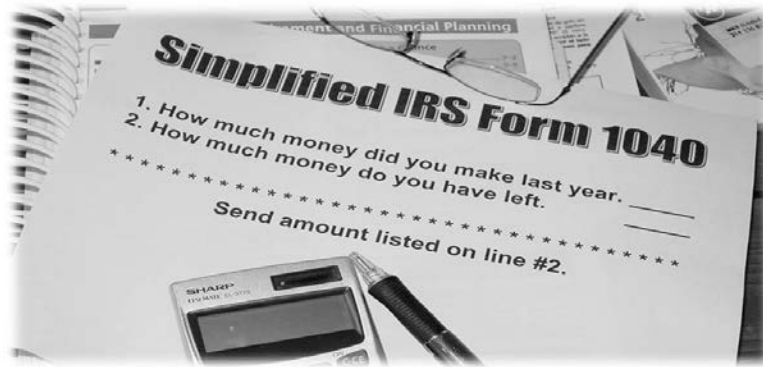


**You probably feel like this is all too true...**



In this package you will find: A monthly employee expense log, assignment organizer, minimum mileage log, and a sheet to keep track of you trips home. You will find these forms useful when it is time to file your taxes. We have mirrored the assignment itinerary pages with the ones in our **Client Workbook**. Come the end of the year, you can substitute these for the ones in the workbook.

Other things:

Mileage log: We have Daina's version of a Minimum Mileage Log in here. It is not the perfect solution. A little log book, kept up meticulously is better, but if you refuse to do the former, at least to her version. It is the lowest form of documentation that would be acceptable in an audit situation.

Also, keep a copy of every contract! You may have need of it someday. Either for an audit or even to prove your hours to renew your healthcare license.

**TravelTax, LLC**



*Tax Consultants and Taxpayer Representatives, US, Canadian, and International  
Joseph Smith EA/ RRT (Enrolled Agent: Admitted to Practice before the IRS)  
info@traveltax.com - 866.272.7871 - Box 1643, Norfolk, NE 68702*

**GENERAL JOB EXPENSES** This is to help you keep track of regular monthly employee expenses. You can total up this info and transfer it to our workbook at the end of the year.

	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	TOTAL
Uniforms/ Work Clothing													
Laundry / Cleaning Uniforms													
Postage/Fax/Shipping (NOT moving exp)													
Books/ Journals/Magazines													
Union Dues													
Supplies													
Equipment													
Licenses													
Job Physicals/ Job Medical													
Testing													
Professional Memberships													
Professional Insurance													
Fingerprints & License Verification													
Computers w/ % business use													
Other													
<b>REIMBURSED</b>													

**COMMUNICATION EXPENSES – expense of 1<sup>st</sup> land line is not deductible**

1 <sup>st</sup> phone or cell													
2 <sup>nd</sup> phone/ other													
3 <sup>rd</sup> / other													
Internet													
Est. % Bus Use													

**Expenses for Work Related Continuing Education OR Obtaining License (i.e. CA) - Not college courses**

Date Left	Date Returned	Cost	Destination	Airfare	Miles Driven	Cost of Rental Car	Gas For Rental	Lodging	Other	Reimbursements

# MINIMUM MILEAGE LOG

Fold this up and clip a pen to it, keep it in your car. This will record mileage to and from assignments, and then a one way commute for one shift. Remember you can use your triptometer for the mileage, or you can pencil in the odometer readings and do the math. This is the absolute minimum of records, if you use a mileage book, you don't need this.

Odometer Reading January 1 \_\_\_\_\_ Odometer Reading December 31<sup>st</sup> \_\_\_\_\_  
*(You may need to utilize a repair or oil change invoice near the beginning or end of the year if you did not keep a record, estimate as best you can.)*

<b>ASSIGNMENT 1</b>	DESTINATION	DATE OF DEPARTURE	DATE OF ARRIVAL	MILES DRIVEN TO DESTINATION	Estimated excess miles <i>(side trip to see family, etc)</i>
	<i>One way</i> commute for one shift. You need to record the distance from your temporary residence to the hospital. Remember to double this to account for round trips.		MILES TO HOSPITAL	Enter total # shifts worked on contract. _____	Optional: list all dates worked here:
	DESTINATION	DATE OF DEPARTURE	DATE OF ARRIVAL	MILES DRIVEN TO DESTINATION	Estimated excess miles <i>(side trip to see family, etc)</i>
<b>ASSIGNMENT 2</b>	DESTINATION	DATE OF DEPARTURE	DATE OF ARRIVAL	MILES DRIVEN TO DESTINATION	Estimated excess miles <i>(side trip to see family, etc)</i>
	<i>One way</i> commute for one shift. You need to record the distance from your temporary residence to the hospital. Remember to double this to account for round trips.		MILES TO HOSPITAL	Enter total # shifts worked on contract. _____	Optional: list all dates worked here:
	DESTINATION	DATE OF DEPARTURE	DATE OF ARRIVAL	MILES DRIVEN TO DESTINATION	Estimated excess miles <i>(side trip to see family, etc)</i>
<b>ASSIGNMENT 3</b>	DESTINATION	DATE OF DEPARTURE	DATE OF ARRIVAL	MILES DRIVEN TO DESTINATION	Estimated excess miles <i>(side trip to see family, etc)</i>
	<i>One way</i> commute for one shift. You need to record the distance from your temporary residence to the hospital. Remember to double this to account for round trips.		MILES TO HOSPITAL	Enter total # shifts worked on contract. _____	Optional: list all dates worked here:
	DESTINATION	DATE OF DEPARTURE	DATE OF ARRIVAL	MILES DRIVEN TO DESTINATION	Estimated excess miles <i>(side trip to see family, etc)</i>
<b>ASSIGNMENT 4</b>	DESTINATION	DATE OF DEPARTURE	DATE OF ARRIVAL	MILES DRIVEN TO DESTINATION	Estimated excess miles <i>(side trip to see family, etc)</i>
	<i>One way</i> commute for one shift. You need to record the distance from your temporary residence to the hospital. Remember to double this to account for round trips.		MILES TO HOSPITAL	Enter total # shifts worked on contract. _____	Optional: list all dates worked here:
	DESTINATION	DATE OF DEPARTURE	DATE OF ARRIVAL	MILES DRIVEN TO DESTINATION	Estimated excess miles <i>(side trip to see family, etc)</i>
<b>ASSIGNMENT 5</b>	DESTINATION	DATE OF DEPARTURE	DATE OF ARRIVAL	MILES DRIVEN TO DESTINATION	Estimated excess miles <i>(side trip to see family, etc)</i>
	<i>One way</i> commute for one shift. You need to record the distance from your temporary residence to the hospital. Remember to double this to account for round trips.		MILES TO HOSPITAL	Enter total # shifts worked on contract. _____	Optional: list all dates worked here:
	DESTINATION	DATE OF DEPARTURE	DATE OF ARRIVAL	MILES DRIVEN TO DESTINATION	Estimated excess miles <i>(side trip to see family, etc)</i>

There is a separate form for expenses related to trips back to your tax home during assignment. The mileage driven on those trips can be computed from the info you put on here.

## Appendix A Continued – Itinerary for Tax Year

*List every extension as a separate assignment. List your mileage! You may be eligible to deduct more than what you received from your company..*

<b>Assignment 1</b>			
Start Date mm/dd/yy		End Date mm/dd/yy	
City			
Company			
How many days were spent at home during this assignment? _____			
<b>Travel to assignment</b>			
Number of days en route _____			
Mileage (if your own car)		Lodging	
Car or Trailer Rental		Tolls	
Gas for Rental (only)		Parking	
Fares (Plane, train, etc)		Taxi	
Shipping		Other	
Reimbursements/Travel pay			
<b>During assignment – see page 15 for trips home</b>			
Total miles on <b>your car</b> , from temporary residence to temporary worksite during entire contract: _____			
Car Rental Cost		Tolls	
Rental: Total miles placed on car		Parking	
Rental: Commuting miles		Transit Fares	
Gas for Rental		Other	
Did you live in company provided housing?	Y <input type="checkbox"/>	N <input type="checkbox"/>	
Were you taxed on the value of your housing?	Y <input type="checkbox"/>	N <input type="checkbox"/>	Unsure <input type="checkbox"/>
Or did you receive a housing stipend?	Y <input type="checkbox"/>	N <input type="checkbox"/>	
Were you taxed on the stipend?	Y <input type="checkbox"/>	N <input type="checkbox"/>	Unsure <input type="checkbox"/>
Housing Expenses:			
Did you receive a Per Diem / Tax Advantage for Meals?	Y <input type="checkbox"/>	N <input type="checkbox"/>	
Were you taxed on this?	Y <input type="checkbox"/>	N <input type="checkbox"/>	Unsure <input type="checkbox"/>
Did you receive a Blended/Combined Reimbursement?	Y <input type="checkbox"/>	N <input type="checkbox"/>	
Were you taxed on this?	Y <input type="checkbox"/>	N <input type="checkbox"/>	Unsure <input type="checkbox"/>
Did you receive a car allowance during contract?	Y <input type="checkbox"/>	N <input type="checkbox"/>	
Were you taxed on this?	Y <input type="checkbox"/>	N <input type="checkbox"/>	Unsure <input type="checkbox"/>
<i>If you are sending contracts with all the "numbers" you do not have to fill in this box and skip to Returning Home information.</i>			
Amount of housing stipend: _____ per _____? HR / DAY / WK / MONTH / TOTAL			
Amount of meal/incidentals: _____ per _____? HR / DAY / WK / MONTH / TOTAL			
Amount of blended rate: _____ per _____? HR / DAY / WK / MONTH / TOTAL			
Amount of car allowance: _____ per _____? HR / DAY / WK / MONTH / TOTAL <small>(not for travel to or from assignment, but for auto expenses during assignment)</small>			
<b>Return home at the end of contract</b>			
<i>(If directly to next assignment skip this section and go to next column)</i>			
Number of days en route _____			
Mileage (if your own car)		Lodging	
Car Rental		Tolls	
Gas for Rental (only)		Parking	
Fares (Plane, train, etc)		Taxi	
Shipping		Other	
Reimbursements/Travel Pay			

<b>Assignment 2</b>			
Start Date mm/dd/yy		End Date mm/dd/yy	
City			
Company			
How many days were spent at home during this assignment? _____			
<b>Travel to assignment</b>			
Number of days en route _____			
Mileage (if your own car)		Lodging	
Car or Trailer Rental		Tolls	
Gas for Rental (only)		Parking	
Fares (Plane, train, etc)		Taxi	
Shipping		Other	
Reimbursements/Travel pay			
<b>During assignment – see page 15 for trips home</b>			
Total miles on <b>your car</b> , from temporary residence to temporary worksite during entire contract: _____			
Car Rental Cost		Tolls	
Rental: Total miles placed on car		Parking	
Rental: Commuting miles		Transit Fares	
Gas for Rental		Other	
Did you live in company provided housing?	Y <input type="checkbox"/>	N <input type="checkbox"/>	
Were you taxed on the value of your housing?	Y <input type="checkbox"/>	N <input type="checkbox"/>	Unsure <input type="checkbox"/>
Or did you receive a housing stipend?	Y <input type="checkbox"/>	N <input type="checkbox"/>	
Were you taxed on the stipend?	Y <input type="checkbox"/>	N <input type="checkbox"/>	Unsure <input type="checkbox"/>
Housing Expenses:			
Did you receive a Per Diem / Tax Advantage for Meals?	Y <input type="checkbox"/>	N <input type="checkbox"/>	
Were you taxed on this?	Y <input type="checkbox"/>	N <input type="checkbox"/>	Unsure <input type="checkbox"/>
Did you receive a Blended/Combined Reimbursement?	Y <input type="checkbox"/>	N <input type="checkbox"/>	
Were you taxed on this?	Y <input type="checkbox"/>	N <input type="checkbox"/>	Unsure <input type="checkbox"/>
Did you receive a car allowance during contract?	Y <input type="checkbox"/>	N <input type="checkbox"/>	
Were you taxed on this?	Y <input type="checkbox"/>	N <input type="checkbox"/>	Unsure <input type="checkbox"/>
<i>If you are sending contracts with all the "numbers" you do not have to fill in this box and skip to Returning Home information.</i>			
Amount of housing stipend: _____ per _____? HR / DAY / WK / MONTH / TOTAL			
Amount of meal/incidentals: _____ per _____? HR / DAY / WK / MONTH / TOTAL			
Amount of blended rate: _____ per _____? HR / DAY / WK / MONTH / TOTAL			
Amount of car allowance: _____ per _____? HR / DAY / WK / MONTH / TOTAL <small>(not for travel to or from assignment, but for auto expenses during assignment)</small>			
<b>Return home at the end of contract</b>			
<i>(If directly to next assignment skip this section and go to next column)</i>			
Number of days en route _____			
Mileage (if your own car)		Lodging	
Car Rental		Tolls	
Gas for Rental (only)		Parking	
Fares (Plane, train, etc)		Taxi	
Shipping		Other	
Reimbursements/Travel Pay			

**Initial or dig signature** \_\_\_\_\_

Assignment 3			
Start Date mm/dd/yy		End Date mm/dd/yy	
City			
Company			
How many days were spent at home during this assignment? _____			
Travel to assignment			
Number of days en route _____			
Mileage (if your own car)		Lodging	
Car or Trailer Rental		Tolls	
Gas for Rental (only)		Parking	
Fares (Plane, train, etc)		Taxi	
Shipping		Other	
Reimbursements/Travel pay			
During assignment – see page 15 for trips home			
Total miles on <b>your car</b> , from temporary residence to temporary worksite during entire contract: _____			
Car Rental Cost		Tolls	
Rental: Total miles placed on car		Parking	
Rental: Commuting miles		Transit Fares	
Gas for Rental		Other	
Did you live in company provided housing?	Y <input type="checkbox"/>	N <input type="checkbox"/>	
Were you taxed on the value of your housing?	Y <input type="checkbox"/>	N <input type="checkbox"/>	Unsure <input type="checkbox"/>
Or did you receive a housing stipend?	Y <input type="checkbox"/>	N <input type="checkbox"/>	
Were you taxed on the stipend?	Y <input type="checkbox"/>	N <input type="checkbox"/>	Unsure <input type="checkbox"/>
Housing Expenses:			
Did you receive a Per Diem / Tax Advantage for Meals?	Y <input type="checkbox"/>	N <input type="checkbox"/>	
Were you taxed on this?	Y <input type="checkbox"/>	N <input type="checkbox"/>	Unsure <input type="checkbox"/>
Did you receive a Blended/Combined Reimbursement?	Y <input type="checkbox"/>	N <input type="checkbox"/>	
Were you taxed on this?	Y <input type="checkbox"/>	N <input type="checkbox"/>	Unsure <input type="checkbox"/>
Did you receive a car allowance during contract?	Y <input type="checkbox"/>	N <input type="checkbox"/>	
Were you taxed on this?	Y <input type="checkbox"/>	N <input type="checkbox"/>	Unsure <input type="checkbox"/>
If you are sending contracts with all the "numbers" you do not have to fill in this box and skip to Returning Home information.			
Amount of housing stipend: _____ per _____? HR / DAY / WK / MONTH / TOTAL			
Amount of meal/incidentals: _____ per _____? HR / DAY / WK / MONTH / TOTAL			
Amount of blended rate: _____ per _____? HR / DAY / WK / MONTH / TOTAL			
Amount of car allowance: _____ per _____? HR / DAY / WK / MONTH / TOTAL <small>(not for travel to or from assignment, but for auto expenses during assignment)</small>			
Return home at the end of contract			
(If directly to next assignment skip this section and go to next column)			
Number of days en route _____			
Mileage (if your own car)		Lodging	
Car Rental		Tolls	
Gas for Rental (only)		Parking	
Fares (Plane, train, etc)		Taxi	
Shipping		Other	
Reimbursements/Travel Pay			

Assignment 4			
Start Date mm/dd/yy		End Date mm/dd/yy	
City			
Company			
How many days were spent at home during this assignment? _____			
Travel to assignment			
Number of days en route _____			
Mileage (if your own car)		Lodging	
Car or Trailer Rental		Tolls	
Gas for Rental (only)		Parking	
Fares (Plane, train, etc)		Taxi	
Shipping		Other	
Reimbursements/Travel pay			
During assignment – see page 15 for trips home			
Total miles on <b>your car</b> , from temporary residence to temporary worksite during entire contract: _____			
Car Rental Cost		Tolls	
Rental: Total miles placed on car		Parking	
Rental: Commuting miles		Transit Fares	
Gas for Rental		Other	
Did you live in company provided housing?	Y <input type="checkbox"/>	N <input type="checkbox"/>	
Were you taxed on the value of your housing?	Y <input type="checkbox"/>	N <input type="checkbox"/>	Unsure <input type="checkbox"/>
Or did you receive a housing stipend?	Y <input type="checkbox"/>	N <input type="checkbox"/>	
Were you taxed on the stipend?	Y <input type="checkbox"/>	N <input type="checkbox"/>	Unsure <input type="checkbox"/>
Housing Expenses:			
Did you receive a Per Diem / Tax Advantage for Meals?	Y <input type="checkbox"/>	N <input type="checkbox"/>	
Were you taxed on this?	Y <input type="checkbox"/>	N <input type="checkbox"/>	Unsure <input type="checkbox"/>
Did you receive a Blended/Combined Reimbursement?	Y <input type="checkbox"/>	N <input type="checkbox"/>	
Were you taxed on this?	Y <input type="checkbox"/>	N <input type="checkbox"/>	Unsure <input type="checkbox"/>
Did you receive a car allowance during contract?	Y <input type="checkbox"/>	N <input type="checkbox"/>	
Were you taxed on this?	Y <input type="checkbox"/>	N <input type="checkbox"/>	Unsure <input type="checkbox"/>
If you are sending contracts with all the "numbers" you do not have to fill in this box and skip to Returning Home information.			
Amount of housing stipend: _____ per _____? HR / DAY / WK / MONTH / TOTAL			
Amount of meal/incidentals: _____ per _____? HR / DAY / WK / MONTH / TOTAL			
Amount of blended rate: _____ per _____? HR / DAY / WK / MONTH / TOTAL			
Amount of car allowance: _____ per _____? HR / DAY / WK / MONTH / TOTAL <small>(not for travel to or from assignment, but for auto expenses during assignment)</small>			
Return home at the end of contract			
(If directly to next assignment skip this section and go to next column)			
Number of days en route _____			
Mileage (if your own car)		Lodging	
Car Rental		Tolls	
Gas for Rental (only)		Parking	
Fares (Plane, train, etc)		Taxi	
Shipping		Other	
Reimbursements/Travel Pay			

Initial or dig signature \_\_\_\_\_

Assignment 5			
Start Date mm/dd/yy		End Date mm/dd/yy	
City			
Company			
How many days were spent at home during this assignment? _____			
<b>Travel to assignment</b>			
Number of days en route _____			
Mileage (if your own car)		Lodging	
Car or Trailer Rental		Tolls	
Gas for Rental (only)		Parking	
Fares (Plane, train, etc)		Taxi	
Shipping		Other	
Reimbursements/Travel pay			
<b>During assignment</b> – see page 15 for trips home			
Total miles on <b>your car</b> , from temporary residence to temporary worksite during entire contract: _____			
Car Rental Cost		Tolls	
Rental: Total miles placed on car		Parking	
Rental: Commuting miles		Transit Fares	
Gas for Rental		Other	
Did you live in company provided housing?	Y <input type="checkbox"/>	N <input type="checkbox"/>	
Were you taxed on the value of your housing?	Y <input type="checkbox"/>	N <input type="checkbox"/>	Unsure <input type="checkbox"/>
Or did you receive a housing stipend?	Y <input type="checkbox"/>	N <input type="checkbox"/>	
Were you taxed on the stipend?	Y <input type="checkbox"/>	N <input type="checkbox"/>	Unsure <input type="checkbox"/>
Housing Expenses:			
Did you receive a Per Diem / Tax Advantage for Meals?	Y <input type="checkbox"/>	N <input type="checkbox"/>	
Were you taxed on this?	Y <input type="checkbox"/>	N <input type="checkbox"/>	Unsure <input type="checkbox"/>
Did you receive a Blended/Combined Reimbursement?	Y <input type="checkbox"/>	N <input type="checkbox"/>	
Were you taxed on this?	Y <input type="checkbox"/>	N <input type="checkbox"/>	Unsure <input type="checkbox"/>
Did you receive a car allowance during contract?	Y <input type="checkbox"/>	N <input type="checkbox"/>	
Were you taxed on this?	Y <input type="checkbox"/>	N <input type="checkbox"/>	Unsure <input type="checkbox"/>
<i>If you are sending contracts with all the "numbers" you do not have to fill in this box and skip to Returning Home information.</i>			
Amount of housing stipend: _____ per _____? HR / DAY / WK / MONTH / TOTAL			
Amount of meal/incidentals: _____ per _____? HR / DAY / WK / MONTH / TOTAL			
Amount of blended rate: _____ per _____? HR / DAY / WK / MONTH / TOTAL			
Amount of car allowance: _____ per _____? HR / DAY / WK / MONTH / TOTAL <i>(not for travel to or from assignment, but for auto expenses during assignment)</i>			
<b>Return home at the end of contract</b> <i>(If directly to next assignment skip this section and go to next column)</i>			
Number of days en route _____			
Mileage (if your own car)		Lodging	
Car Rental		Tolls	
Gas for Rental (only)		Parking	
Fares (Plane, train, etc)		Taxi	
Shipping		Other	
Reimbursements/Travel Pay			

Assignment 6			
Start Date mm/dd/yy		End Date mm/dd/yy	
City			
Company			
How many days were spent at home during this assignment? _____			
<b>Travel to assignment</b>			
Number of days en route _____			
Mileage (if your own car)		Lodging	
Car or Trailer Rental		Tolls	
Gas for Rental (only)		Parking	
Fares (Plane, train, etc)		Taxi	
Shipping		Other	
Reimbursements/Travel pay			
<b>During assignment</b> – see page 15 for trips home			
Total miles on <b>your car</b> , from temporary residence to temporary worksite during entire contract: _____			
Car Rental Cost		Tolls	
Rental: Total miles placed on car		Parking	
Rental: Commuting miles		Transit Fares	
Gas for Rental		Other	
Did you live in company provided housing?	Y <input type="checkbox"/>	N <input type="checkbox"/>	
Were you taxed on the value of your housing?	Y <input type="checkbox"/>	N <input type="checkbox"/>	Unsure <input type="checkbox"/>
Or did you receive a housing stipend?	Y <input type="checkbox"/>	N <input type="checkbox"/>	
Were you taxed on the stipend?	Y <input type="checkbox"/>	N <input type="checkbox"/>	Unsure <input type="checkbox"/>
Housing Expenses:			
Did you receive a Per Diem / Tax Advantage for Meals?	Y <input type="checkbox"/>	N <input type="checkbox"/>	
Were you taxed on this?	Y <input type="checkbox"/>	N <input type="checkbox"/>	Unsure <input type="checkbox"/>
Did you receive a Blended/Combined Reimbursement?	Y <input type="checkbox"/>	N <input type="checkbox"/>	
Were you taxed on this?	Y <input type="checkbox"/>	N <input type="checkbox"/>	Unsure <input type="checkbox"/>
Did you receive a car allowance during contract?	Y <input type="checkbox"/>	N <input type="checkbox"/>	
Were you taxed on this?	Y <input type="checkbox"/>	N <input type="checkbox"/>	Unsure <input type="checkbox"/>
<i>If you are sending contracts with all the "numbers" you do not have to fill in this box and skip to Returning Home information.</i>			
Amount of housing stipend: _____ per _____? HR / DAY / WK / MONTH / TOTAL			
Amount of meal/incidentals: _____ per _____? HR / DAY / WK / MONTH / TOTAL			
Amount of blended rate: _____ per _____? HR / DAY / WK / MONTH / TOTAL			
Amount of car allowance: _____ per _____? HR / DAY / WK / MONTH / TOTAL <i>(not for travel to or from assignment, but for auto expenses during assignment)</i>			
<b>Return home at the end of contract</b> <i>(If directly to next assignment skip this section and go to next column)</i>			
Number of days en route _____			
Mileage (if your own car)		Lodging	
Car Rental		Tolls	
Gas for Rental (only)		Parking	
Fares (Plane, train, etc)		Taxi	
Shipping		Other	
Reimbursements/Travel Pay			

Initial or dig signature \_\_\_\_\_

## Appendix A Continued – Almost done!

### Additional Questions for Mobile Professionals

**Vehicle Info:** Annual Miles = miles driven for every purpose during the tax year (not just work). We need this information if you are to claim a mileage deduction. If nothing else, an accurate estimate can be obtained by looking at oil change/repair receipts near the beginning or end of the year (they have your odometer readings on them).

Annual Miles on Vehicle 1 \_\_\_\_\_ Date placed in service (mm/dd/yy) \_\_\_\_\_  
 (date of purchase or very first travel contract)

Annual Miles on Vehicle 2 \_\_\_\_\_ Date placed in service (mm/dd/yy) \_\_\_\_\_  
 (date of purchase or very first travel contract)

Y  N  1) Do you have a travel log that records your travel expenses and mileage?  
*This would be required by the IRS in an audit.*

Y  N  2) Did you make any trips home DURING an assignment or between an extension of an assignment in the same metropolitan area?  
 If so, list the dates and expenses below. Use additional sheets if necessary.

RECORD OF TRIPS HOME								
Deductions for trips home during assignments are LIMITED to the amount you would deduct if you had stayed at the assignment. (Revenue Ruling 54-477)								
Trip #	Date Departed	Date returned	Airfare	Miles Driven	Car Rental	Gas for Rental	Tolls & Parking	Taxi
1								
2								
3								
4								
5								
6								
7								
8								
9								
10								
11								
12								
13								
14								
15								
16								

**Initial or dig signature** \_\_\_\_\_

## Appendix B – RETURNING Client with NO TAX HOME

Below is all of the information we need if you do not have a tax home. It is more to determine how to file you based on residency requirements and to let us know how your income was taxed. You will notice there is no mileage to keep track of unless you are qualifying for moving expenses. Sad, but true. With no tax home, you can no more deduct commuting miles than a regular employee. But on the other hand, there is a whole lot less record keeping involved. If you are unsure if you were taxed on reimbursements, leave the box empty and we will try to help you determine that from your contracts. Some contracts are less clear than others, and if you can, enclose a check stub with these.

### Assignment Itinerary

	Assignment 1	Assignment 2	Assignment 3	Assignment 4	Assignment 5
Start Date (mm/dd/yy)					
End Date (mm/dd/yy)					
Location : City & State					
Were you taxed on meals? <i>n/a = did not receive</i>	Y <input type="checkbox"/> N <input type="checkbox"/> n/a <input type="checkbox"/>	Y <input type="checkbox"/> N <input type="checkbox"/> n/a <input type="checkbox"/>	Y <input type="checkbox"/> N <input type="checkbox"/> n/a <input type="checkbox"/>	Y <input type="checkbox"/> N <input type="checkbox"/> n/a <input type="checkbox"/>	Y <input type="checkbox"/> N <input type="checkbox"/> n/a <input type="checkbox"/>
Enter amount of meal reimbursement <b>Only if NOT taxed</b>					
Did you live in company provided housing or receive a stipend?	Housing <input type="checkbox"/> Stipend <input type="checkbox"/>	Housing <input type="checkbox"/> Stipend <input type="checkbox"/>	Housing <input type="checkbox"/> Stipend <input type="checkbox"/>	Housing <input type="checkbox"/> Stipend <input type="checkbox"/>	Housing <input type="checkbox"/> Stipend <input type="checkbox"/>
Were you taxed on the value of the housing or the stipend? <i>n/a = did not receive</i>	Y <input type="checkbox"/> N <input type="checkbox"/> n/a <input type="checkbox"/>	Y <input type="checkbox"/> N <input type="checkbox"/> n/a <input type="checkbox"/>	Y <input type="checkbox"/> N <input type="checkbox"/> n/a <input type="checkbox"/>	Y <input type="checkbox"/> N <input type="checkbox"/> n/a <input type="checkbox"/>	Y <input type="checkbox"/> N <input type="checkbox"/> n/a <input type="checkbox"/>
Enter amount of housing <b>Only if NOT taxed</b>					
<b>OR</b> Amount of combined or blended reimbursements <b>Only if NOT taxed</b>					
<b>Other untaxed reimbursements</b>					

**No Tax Home Moving Expenses – Unfortunately the IRS only allows for moving expenses if you *expect* to be in one location for at least 9 months AND / OR *have been* in one location for at least 9 months. Enter expenses here for any moves that qualify.**

	Move 1	Move 2		Move 1	Move 2
Miles from your OLD Home to NEW workplace			Miles from OLD home to OLD workplace		
Miles driven to new residence			Tolls		
Lodging expenses			Car or trailer rental		
Utility hook ups			Shipping		
Up to 30 days of storage fees			Cost of hiring movers		
Reimbursements			Other		

#### Moves to Foreign Countries

Date of Move \_\_\_\_\_ City and country of old workplace \_\_\_\_\_  
 City and country of new workplace \_\_\_\_\_

**Initial or dig signature** \_\_\_\_\_