

2016 AIRCREW TAXES PILOT TAX RETURN ORGANIZER

All Clients MUST Sign Below For Aircrew Taxes To Start Your Return

I have retained Aircrew Taxes to prepare my 2016 Income Tax returns. I hereby verify that the information provided in this Organizer is accurate and complete. I understand it is my responsibility and my continuing obligation until I have verified my tax return and it is filed, to include any and all information concerning income, deductions and other information necessary for the preparation of my personal income tax return. I have not overstated my deductions or understated my income, and acknowledge that false information on a tax return could constitute a federal crime. I understand it is my responsibility to review my Income Tax Return after Aircrew Taxes has prepared it, and to verify that it contains accurate information. If I am billed for an amount due by Aircrew Taxes, I will promptly pay the full amount due and I hereby acknowledge that I will be responsible for any resulting collection fees due to nonpayment, and any attorney's fees incurred by Aircrew Taxes pursuant to a collection action. The laws of Georgia shall be applicable to all aspects of this agreement, and I hereby consent to jurisdiction of the Courts of Cobb County, Georgia regardless of where I actually reside. (If filing a joint return, both you and your spouse must sign.)

Taxpayer Signature _____ Spouse Signature _____ Date _____

Client Instructions to Complete Tax Return

Please DO NOT SEND ORIGINAL TAX DOCUMENTS, send copies only. You will need the originals to help resolve possible discrepancies. If you send your original tax documents there will be additional fees of \$50 to return documents to you.

GENERAL TAX RETURN PREPARATION PROCESS:

- 1) Complete the tax organizer filling in only the sections that apply to your tax situation. Send the completed organizer, and **copies only**, of your tax documents to Aircrew Taxes. New clients must include previous year's tax return. Previous year's clients please send short checklist that we e-mailed back to Aircrew Taxes, checking off items included.
- 2) Make payment with credit card, check, or authorized deduction from your refund.
- 3) Aircrew Taxes will contact you to resolve any questions and discuss possible deductions and tax strategies. We will review each return with every client in person or on the phone. We will then e-mail the return to you for review.
- 4) Contact Aircrew Taxes with any changes to your tax return.
- 5) Aircrew Taxes will e-mail completed tax return with E-file authorization form to you.
- 6) Fax or scan signed Form 8879 E-file Authorization to Aircrew Taxes so we may e-file your tax return.

GENERAL INSTRUCTIONS:

- 1) New Clients may send tax returns from up to three previous tax years for a missed deductions review.
- 2) Send copies of IRS tax forms and documents listed in the tax organizer, no originals please. Keep your receipts for your own records.
- 3) Please complete the tax organizer and required worksheets before calling with questions. You may write questions on the organizer. We will review each return with every client in person or on the phone. Most questions should be handle during our interview with you. If you still believe you need some guidance completing the organizer please call us.
- 4) Income and deduction items should only be provided in one place. If you provide the amounts more than once we will duplicate the deduction or income items. This applies to rental property and small businesses as well.
- 5) Please check that you emailed or mailed all the items you intended to send. Please name items scanned by the name on the face of the document (*company* form W-2, *provider* form 1099-R, etc.).
- 6) Please attempt to send the tax organizer and all IRS tax forms concurrently.

SMALL BUSINESS:

- 1) If you have a 1099-MISC and operate a small business, complete the worksheet from the small business tab on the website.
- 2) Send all business related 1099-MISC tax forms designated as income for the business.
- 3) Please let us know if you have a home office for your small business and notate the form 1098 statements "Home Office".
- 4) C- Corporations (Form 1120), Sub Chapter S-Corporations (Form 1120S), and Partnerships (Form 1065) are not considered small businesses. A Limited Liability Company, L.L.C., may be a small business if it is disregarded by the IRS and therefore will be completed with the Small Business Worksheet for Schedule C. It also may be a C-Corporation, S-Corporation, or Partnership requiring a separate business return on Form 1120, Form 1120S or Form 1065.

RENTAL PROPERTY:

- 1) If you have rental real estate, please download and complete the worksheet from the rental real estate tab on the website.
- 2) Send any Form 1099 statements with rental income and Form 1098 mortgage interest statements with rental mortgage interest.
- 3) If we did not prepare your last year's tax return we must have the information from either the Depreciation and Amortization Report or Asset Entry Worksheet from your previous return to calculate depreciation for your rental property.

Office (678) 797-1040 Cell (678) 332-6905 Fax (770) 795-9799
Fax or E-mail Organizer to info@aircrewtaxes.com
www.aircrewtaxes.com

Tax Documents Required to Complete Accurate Return

It is very important that you include all of your IRS tax forms, especially income items in your tax return. These forms are sent by payers to you and the IRS, therefore the items will be included in your tax return by the IRS. Each Form 1099 is matched to your Social Security number, so the IRS will send out a tax bill if you fail to report one. In fact, you're almost guaranteed an audit or at least a tax notice if you fail to report a Form 1099. Even if an issuer has your old address, the information will be reported to the IRS (and your state tax authority) based on your Social Security number. Missing tax documents are your responsibility. In Addition to your IRS tax forms please send a completed Tax Organizer and Small Business and Rental Property Worksheets if required.

Income Related IRS Tax Forms-Copies Only

- Form W-2 (wage and salary income)
- Form W-2G (gambling winnings)
- Form 1099-INT (interest income)
- Form 1099-DIV (dividends)
- Form 1099-G (state tax refunds and unemployment compensation)
- Form 1099-B (sales of stock, bonds, or other investments)
- Form 1099-R (distributions from individual retirement accounts, 401(k) plans, and other types of retirement savings plans)
- Form 1099-C (canceled debts)
- Form 1099-A (foreclosure of a home)
- Form 1099-K (business or rental income processed by third party networks)
- Form 1099-LTC (benefits received from a long-term care policy)
- Form 1099-MISC (self-employment and other various types of income)
- Form 1099-OID (original issue discount on bonds)
- Form 1099-PATR (patronage dividends)
- Form 1099-Q (distributions from an education savings plan)
- Form 1099-QA (distributions from an ABLE account)
- Form 1099-S (proceeds from the sale of real estate)
- Form 1099-SA (distributions from health savings accounts)
- Form SSA-1099 (Social Security benefits)
- Form RRB-1099 (Railroad retirement benefits)
- Schedule K-1 (income from partnerships, S corporations, estates, or trusts)

Expense Related IRS Tax Forms-Copies Only

- Form 1098-E (student loan interest)
- Form 1098-T (tuition for higher education)
- Form 1098 (mortgage interest)
- Form 1098-C (charitable contribution of vehicles)
- Form 1098-MA (homeowner mortgage payments)
- Form 1097-BTC (bond tax credit)
- Form 1095-A Health Insurance Marketplace Statement, 1095-B Health Coverage, 1095-C Employer Provided Health

Additional Items

- Small Business Worksheet-Self Employed-1099 Income-Schedule C Worksheet (Download at www.aircrewtaxes.com)
- Rental Income and Expenses Worksheet (Download at www.aircrewtaxes.com)
- Rental Property-Depreciation and Amortization Report or Asset Entry Worksheet from your previous return(new clients only)
- Realized gain/loss report for any stocks, bonds, mutual funds and other capital investments sold during the year
- Closing Statement if Purchased, Sold or Refinanced Home or Rental Property
- Final Year Pay Stub for deductions and non-taxable per deim deductions

Personal Information (Please Print Clearly)

	Taxpayer	Spouse
Last Name (According to SS card)		
First Name		
Middle Initial		
Social Security Number		
Occupation		
Date of Birth (mm/dd/yyyy)		
E-Mail Address		
Work Phone		
Cell Phone		
Home Phone		
Fax Number		

Tax Address: This is your current state residency where you pay tax for this tax year and the address on your federal tax return.

Address		Apt. #	
City	State	ZIP	

Federal Filing Status (Check Box of Filing Status)

<input type="checkbox"/>	1 Single
<input type="checkbox"/>	2 Married Filing Jointly
<input type="checkbox"/>	3 Married Filing Separate Spouse Name _____ Spouse Soc Sec # _____
If MFS , Did you live apart from your spouse during the last 6 months of 2016?(Y or N) Did your spouse itemize deductions?(Y or N)	
<input type="checkbox"/>	4 Head of Household: If someone else is using the exemption for your custodial child please fill out below if claiming status.
Name:	Social Security #:
Relationship:	Number months lived with you:
<input type="checkbox"/>	5 Qualifying Widow Spouse's Date of Death _____

Dependent Information (Name must appear as on the social security card)

Dependent must be under 19 or under 24 and a full-time student for at least 5 months during the year to qualify as a dependent and for the Earned Income Credit. If your dependent children did not live with you, you must provide Form 8832, Release of Claim, or a copy of your divorce decree. Dependents income must be under \$3800 unless a full time student.

First Name	Last Name	MI	SSN	Relationship	Date of Birth	# Mos at Home	Care Expenses	Student
					/ /			Y or N
					/ /			Y or N
					/ /			Y or N
					/ /			Y or N
					/ /			Y or N

Direct Deposit/Funds Withdrawal Information

Use direct deposit for tax refund? No additional fees	Y or N	Use electronic funds withdrawal for balance due?	Y or N
Account Type? Circle One	Checking or Saving	Name of Bank?	
Routing Number?		Account Number?	

Payment Method for Tax Preparation Fees

All preparation and related fees must be paid prior to completion of return.

<input type="checkbox"/>	Check (\$25 charge for all returned checks)
<input type="checkbox"/>	Credit Card (please circle card type)
	Visa
	Mastercard
Card Number	Expiration Date
Name on Card	Signature
	Security Code
	Biling Zip Code
<input type="checkbox"/>	Withhold Tax Fees from my Refund (\$35 Bank fee for this service)
Taxpayer's Drivers License # & state	Spouse's Drivers License # & state
Date Issued / /	Date Expired / /
Date Issued / /	Date Expired / /
U.S. Citizen	Resident Alien
Non Resident Alien	U.S. Citizen
Resident Alien	Non Resident Alien
Do you owe back taxes to the IRS or state?	Y or N
Do you owe back child support?	Y or N
Do you have delinquent student loans?	Y or N
Did the IRS garnish your refund last year?	Y or N

Interest Income

Not required if providing all 1099-INT interest statements.

Owner SS#	Bank/Institution	Box Numbers and Amounts in each Box from each separate 1099-INT

Dividend Income

Not required if providing all 1099-DIV dividend or 1099-B broker statements.

Owner SS#	Institution	Box Numbers and Amounts in each Box from each separate 1099-DIV

Stocks & Bonds Sold

Please provide 1099-B Proceeds From Broker and Barter Exchange Transactions and year-end broker statements. Must have purchase date, cost, sales date and sales proceeds for each sales. **(You Must Provide Aircrew Taxes With The Cost Of Each Stock Sales If Not On 1099-B)**

Stock Name or Description	Date Sold	Date Acquired	Sales Price	Cost Plus Fees
	/ /2016	/ /	\$	\$
	/ /2016	/ /	\$	\$
	/ /2016	/ /	\$	\$
	/ /2016	/ /	\$	\$
	/ /2016	/ /	\$	\$
	/ /2016	/ /	\$	\$

State Income Tax Refunds and Unemployment Compensation

Not required if providing 1099-Gs and/or 1099-G for unemployment benefits.

State Refunds Received in 2016 (this tax year)	State	Amount	\$	State	Amount	\$
Additional State Tax paid in 2016 when filed	State	Amount	\$	State	Amount	\$
Did you itemize last year?	Taxpayer	Y or N		Spouse	Y or N	
State Unemployment Compensation Received	State	Amount	\$	State	Amount	\$
State Unemployment Benefits Repaid	State	Amount	\$	State	Amount	\$

Alimony Received

Taxpayer Amount	\$	Spouse Amount	\$
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IRA, Pension, 401(k), and Annuities Distributions and Rollovers

Not required if providing all 1099-R statements for distributions and rollovers. Circle T or S for taxpayer or spouse.

Taxpayer or Spouse	T or S Distribution #1	T or S Distribution #2	T or S Distribution #3
Name of payer institution			
Gross distribution from 1099-R box 1			
Reason for distribution			
Amount of Rollover			
Name of receiving institution			
Type of account (401k, IRA, Pension, Roth)			

Social Security Benefits and Other Income

Not required if providing SSA 1099s and RRB 1099s and 1099MISCs.

	Taxpayer	Spouse
Amounts for Social Security Benefits	\$	\$
Amounts for Railroad Benefits	\$	\$
Amounts for 1099 MISC not requiring Schedule C for business income	\$	\$
Amounts for 1099 MISC not requiring Schedule C for business income	\$	\$

Educator Expenses For Teachers Only

Un-reimbursed amounts spent on books, supplies, and materials used in the classroom by kindergarten to 12th grade teacher.

Taxpayer Amount	\$	Spouse Amount	\$
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Health Savings Accounts (HSA)

Provide Forms 5498-SA and /or 1099-SA if applicable. All HSA questions concern tax year 2016.

Type of high deductible plan?	Self Only or Family	Months in high deductible plan?	
Plan in effect for December?	Y or N	Total HSA contributions to your account	\$
Total Employer HSA contributions	\$	Total HSA distributions	\$
Total payroll deduction HSA contributions	\$	Total unreimbursed qualified medical expenses	\$

Moving Expenses

Only job related moves are deductible. Meals are not deductible. (Mileage rate for 2016 is 19 cents)

Old Primary Residence	Old Work (BASE)	Transportation Expense	\$
New Primary Residence	New Work (BASE)	Storage Expense	\$
Miles from Old HOME to New BASE	Date Moved	/ /2016	Travel Expense
Miles from Old HOME to Old BASE	Mileage Driven During Move		Lodging Expense

Self-Employed Contributions to SEP, SIMPLE and Qualified Plans

Type of Plan	Taxpayer Amount	Spouse Amount
Money Purchase Plan	\$	\$
Profit Sharing Plan	\$	\$
Defined Benefit Plan	\$	\$
SEP Plan	\$	\$
SIMPLE Plan	\$	\$
Individual 401(k) Plan	\$	\$
Roth 401(k) Plan	\$	\$

Alimony Paid

Recipients Name	Recipients SS#	Amount Paid	\$
Recipients Name	Recipients SS#	Amount Paid	\$

Traditional And Roth IRA Contributions

(Do Not Include 401(k) Contributions)	Taxpayer	Spouse
Traditional IRA Contribution Amount Made by 4/15/17	\$	\$
Roth IRA Contribution Amount Made by 4/15/17	\$	\$
Non-Deductible IRA Contributions	\$	\$

Education Savings Accounts

List contributions made on or before 12/31/16	Student Name	Amount
Excess Contributions to Coverdell Education Plan (amounts in excess of \$2,000)		\$
Contributions to State Prepaid Tuition Program	State Plan Name	\$
Contributions to State College Savings 529 Plan	State Plan Name	\$

Student Loan Interest and Educational Deduction and Credits

Provide all 1098-Es for student loan interest paid in 2016 and all 1098-Ts for educational tuition and fees. For a complete list of education expenses please request the Educational Deduction and Credit Worksheet

You may claim qualified expenses and fees for yourself, your spouse, and your dependent children as Tuition and Fees Deduction or the American Opportunity Credit or the Lifetime Learning Credit. You must file a joint return if married. For the Lifetime Learning Credit you may be taking as little as one course, and can be taking it to improve or acquire job skills rather than obtaining a degree.

Provide All 1098-Ts and 1098-Es	Student 1	Student 2
Name of Student		
Name of School and City and State where located		
Tuition Paid in 2016	\$	\$
Year in College and was student at least halftime?	1 st 2 nd 3 rd 4 th Grad, Yes or No	1 st 2 nd 3 rd 4 th Grad, Yes or No
Amount of 529 Plan Withdrawals		
Student Loan Interest Paid in 2016	\$	\$

Medical Expenses

(Do Not Include Medical Expenses Paid By Insurance Or By Flexible Spending Accounts)

Prescriptions Medications	\$	Eyeglasses and Contacts	\$
Health Insurance Premiums – After Tax	\$	Medical Equipment and Supplies	\$
Taxpayer's portion on Form 1095-A premiums	\$	Medical Travel – Number of Miles	#
Spouse's portion on Form 1095-A premiums	\$	Medical Transportation Ambulance fees	\$
Long Term Care Insurance premiums for taxpayer	\$	Medical Lodging (up to \$50 per night)	\$
Long Term Care Insurance premiums for spouse	\$	Lasik and Radial Keratotomy	\$
Long Term Care Costs dependent child under 27	\$	Other – Including COBRA or Specify:	\$
Fees for Physician/Dentist/Chiropractor	\$	Other	\$
Fees for Hospital and Clinics	\$	Other	\$
Lab and X-ray	\$	Other	\$
Long Term Care Costs	\$	Other	\$

Taxes Paid

(Do Not Include Real Estate Taxes For A Rental Property Input On Rental Worksheet)

Real Estate taxes on Principal Residence	\$	Personal Property Tax (Car Tag or Advalorem Fee)	\$
Real Estate taxes on Second Home or Land	\$	Personal Property Tax (boat or airplane)	\$
Real Estate taxes on Vacation Home	\$	Sales Tax on Motor Vehicle or Boat or Aircraft	\$
Personal Property Tax (Car Tag or Advalorem Fee)	\$	Sales Tax on Motor Vehicle or Boat or Aircraft	\$

Homeowner Mortgage Interest and Points Information

(Do Not Include Mortgage Interest For A Rental Property Input On Rental Worksheet)

Not required if providing all 1098 Mortgage Interest Statement. If you purchased, sold or refinanced a house, send a copy of the closing statement. You may have multiple 1098 Mortgage Interest Statements please provide all of them.

Primary mortgage interest Lender _____	\$	Qualified Mortgage Insurance Premiums	\$
Primary mortgage interest Lender _____	\$	Did you sell your home in 2016?	Y or N
Equity line loan Lender _____	\$	Number of years lived in home before selling?	
Second mortgage Lender _____	\$	Did you purchase your home in 2016?	Y or N
Vacation Home mortgage Lender _____	\$	Did you refinance your home in 2016?	Y or N
Origination or Discount Points	\$	Number of years you refinanced?	

Casualty/Theft & Loss

Description of Casualty Event	Event Date	Property	Purchase Date	Cost	Value after Loss	Insurance
				\$	\$	\$

Miscellaneous Expenses

Tax Prep Fees Paid in 2016	\$	Margin or Investment Interest Paid	\$
Tax Fees Paid in an Audit	\$	Certain Attorney and Accounting Fees	\$
Tax Prep Software/Books/Publications.	\$	Safe Deposit Box Rental.	\$
Tax Prep Mailing/Fed Ex Fees Paid in 2016	\$	IRA Management Fees.	\$
Investment Expense	\$	Other	\$

Charitable Contributions Non Cash Donations Only

If you donated any household goods, please estimate the value and include the name and address of the charitable organization. The IRS requires all the information requested below. Your return will be delayed if you do not provide this information.

Name of Charity			
Address of Charity			
City, State, Zip			
Donation Description			
Date of Donation	2016	2016	2016
Date Acquired			
How Acquired(Circle One)	Purchase Gift Created Bequest	Purchase Gift Created Bequest	Purchase Gift Created Bequest
Total Original Cost	\$	\$	\$
Value of Donations	\$	\$	\$
How Valued (Circle One)	Thrift Replacement Equal sale	Thrift Replacement Equal sale	Thrift Replacement Equal sale
Name of Charity			
Address of Charity			
City, State, Zip			
Donation Description			
Date of Donation	2016	2016	2016
Date Acquired			
How Acquired(Circle One)	Purchase Gift Created Bequest	Purchase Gift Created Bequest	Purchase Gift Created Bequest
Total Original Cost	\$	\$	\$
Value of Donations	\$	\$	\$
How Valued (Circle One)	Thrift Replacement Equal sale	Thrift Replacement Equal sale	Thrift Replacement Equal sale
Name of Charity			
Address of Charity			
City, State, Zip			
Donation Description			
Date of Donation	2016	2016	2016
Date Acquired			
How Acquired(Circle One)	Purchase Gift Created Bequest	Purchase Gift Created Bequest	Purchase Gift Created Bequest
Total Original Cost	\$	\$	\$
Value of Donations	\$	\$	\$
How Valued (Circle One)	Thrift Replacement Equal sale	Thrift Replacement Equal sale	Thrift Replacement Equal sale
Name of Charity			
Address of Charity			
City, State, Zip			
Donation Description			
Date of Donation	2016	2016	2016
Date Acquired			
How Acquired(Circle One)	Purchase Gift Created Bequest	Purchase Gift Created Bequest	Purchase Gift Created Bequest
Total Original Cost	\$	\$	\$
Value of Donations	\$	\$	\$
How Valued (Circle One)	Thrift Replacement Equal sale	Thrift Replacement Equal sale	Thrift Replacement Equal sale

Pilot Professional Deductions

Receipts are not required for travel expenses under \$75 if entered into your logbook, including item, date & cost. Always purchase items with credit cards, debit cards or by check so that you will have a record of the purchase if you lose the receipt. Do not send receipts; keep them for your records. **(Aircrew Taxes Will Complete TOTAL BLOCKS)**

Married Pilots – If both you and your spouse fly, use an additional Professional Deduction sheet. DO NOT combine expenses on this form! AIRLINE EMPLOYEED BY

AIRLINE EMPLOYEED BY		BASE DOMICILED			
Union Dues	\$	Luggage	\$	Computer Paper	\$
Union Initiation Fee	\$	Luggage Wheels	\$	Trip Trading Software	\$
Union Assessments	\$	Luggage Repairs	\$	Bid Service Fees	\$
TOTAL UNION DUES		Garment Bag	\$	Bid Mailing Fees	\$
Professional Subscriptions	\$	Flight Bag	\$	Mobile Flica Fees	\$
Trade Publications	\$	Lunch Bag	\$	Internet Access Fees	\$
Organizational Dues	\$	Airline Luggage Tags	\$	Mobile Internet Access Fees	\$
TOTAL SUBSCRIPTIONS		Jet Bridge/Jet Way Keys	\$	Internet Long Distance Fees	\$
Uniform Payroll Deduction	\$	Cockpit Keys	\$	Computer Usage Fees (PC FOS)	\$
Uniform Pants	\$	Personal Organizer	\$	Company Mailing Expense	\$
Uniform Shirt	\$	Flashlight	\$	Company Copy/Fax Expense	\$
Uniform Alterations	\$	Batteries	\$	Other Bidding/Communication Cost	\$
Uniform Belt	\$	Logbook	\$	TOTAL COMMUNICATION	
Uniform Epaulets	\$	Electronic Logbook	\$	FAA Medical Expenses	\$
Uniform Tie	\$	Portable Alarm Clock	\$	Company Loss of License Insurance	\$
Uniform Hat	\$	Portable Curling Iron	\$	ALPA Loss of License Insurance	\$
Uniform Jacket	\$	Portable Hair Dryer	\$	TOTAL FAA MEDICAL	
Uniform Winter Jacket	\$	Portable Iron	\$	CFI Renewal	\$
Uniform Leather Jacket	\$	Portable Security Device	\$	Personal Flight Training	\$
Uniform Sweater	\$	Portable Smoke Detector	\$	Upgrade Training Expenses	\$
Uniform Scarf	\$	Int'l Voltage Converter	\$	Type Rating Expenses	\$
Uniform Wings	\$	Company Business Cards	\$	Written Exam Expenses	\$
Uniform Dry Cleaning	\$	Ear Piece / Headset	\$	Other Training Costs: _____	\$
Uniform Travel Laundering	\$	Dual Time Zone Watch	\$	TOTAL FLIGHT TRAINING	
Uniform Home Laundering	\$	Cockpit Supplies – Maps etc.	\$	Manual Replacement	\$
Uniform Shoes	\$	Sunglasses	\$	ID Replacement	\$
Uniform Shoe Shine	\$	Other Travel Item: _____	\$	Drug Testing Expenses	\$
Uniform Shoe Repair	\$	TOTAL TRAVEL ITEMS		Foreign Language Expenses	\$
Uniform Other: _____	\$	Passport Fee	\$	Reserve Emergency Cab Fares	\$
TOTAL UNIFORM		Passport Photo	\$	Other Job Expense: _____	\$
Job Search Sim Prep	\$	Passport Expedite Fees	\$	Other Job Expense: _____	\$
Job Search Interview Prep	\$	Foreign Visa	\$	TOTAL MISCELLANEOUS	
Job Search Publications	\$	TOTAL PASSPORT		Transportation on Layovers	\$
Job Search Hotels	\$	Cell Phone Purchase this year	\$	Subway and Bus Fees on Layovers	\$
Job Search Transportation Interview	\$	Cell Phone Service for Work	\$	Train Fees on Layovers	\$
Job Search Resume	\$	Second Telephone Line	\$	Rental Cars on Layovers	\$
Job Search Copying and Mailing	\$	Calling Card Calls	\$	Layover Meal Transportation	\$
Job Search Telephone	\$	Collect/Hotel Calls	\$	ATM Fees on Layovers	\$
Job Search Application Fees	\$	VoIP or Skype	\$	Check Cashing Fees on Layovers	\$
Job Search Other: _____	\$	Company Phone Expense	\$	Overnight Other: _____	\$
TOTAL JOB SEARCH		Printer Toner/Ink Cartridges	\$	TOTAL OVERNIGHT TRAVEL	

Situational Pilot Professional Deductions

Co-Terminal Multi-Airport Bases Transportation

If you fly out of more than one airport, transportation between airports is deductible.

Three Letter Airport Code		Number of Round Trips		Cost Per Round Trip	\$
Three Letter Airport Code		Number of Round Trips		Cost Per Round Trip	\$

Initial, Recurrent, Type Rating and Upgrade Training Expenses (If You Are Based Where Your Training Is Held You Are Not Allowed To Take A Per Diem Deduction For Training)

Number of Days in Training		Three Letter Code of Training City	
Hotel/Housing Expense During Training	\$	Phone Expense During Training	\$
Transportation Expense During Training	\$	Type Rating Expenses	\$
Upgrade Training Expenses	\$	Other Training Costs	\$

FFDO Expenses

Number of Days in Training		Equipment Costs	\$
Three Letter Code of Training City		Gun Permit Fees	\$
Hotel/Housing Expense During Training	\$	Range Fees	\$
Transportation Expense During Training	\$	Ammunition Costs	\$
Phone Expense During Training	\$	Other FFDO Costs	

Union and Company Business Travel Expenses

Commuting expenses to your base for trips are NOT deductible. However, travel/overnight expenses for company or union meetings are deductible

Hotel Expense	\$	Meals and Entertainment Expense	\$
Transportation Expense	\$	Other Costs: _____	\$

Temporary Duty Expenses

Number of Days during the tax year on TDY		Three Letter City Code for Location of TDY	
Hotel/Housing Expense for TDY	\$	Amount of per diem paid during your TDY	\$
Transportation Expense during TDY	\$	Meal Expense during TDY	\$

Commuter Pad Moving Expenses

If you had a base change commuter pad moving expenses are deductible

Old Primary Residence		Old Work (BASE)		Transportation Expense	\$
New Primary Residence		New Work (BASE)		Storage Expense	\$
Miles from Old HOME to New BASE		Date Moved	/ /2016	Travel Expense	\$
Miles from Old HOME to Old BASE		Mileage Driven During Move		Lodging Expense	\$

National Guard / Military Reserve Duty

If your reserve military base is not in the same city as your home or airline base, all unreimbursed expenses in traveling to/from and while on duty at the military base during reserve drill are deductible.

Number of nights spent at Post		Three Letter City Code for Location of Post	
Hotel/Housing Expense not reimbursed	\$	What was the total per diem paid?	\$
Transportation Expense not reimbursed	\$	Meal Expense	\$
Phone Expense while on duty	\$	Other Expense: _____	\$
Utility Expense not reimbursed	\$	Commuting miles driven to / from / at post	\$

Entertainment Expense

If you discuss company business or union news while on a layover costs during this business discussion are deductible. The expenses of your activities associated with this discussion are deductible including meals. You must have a receipt with time, date, subject of discussion and persons present. Qualifying items may include Museums, Tours, and Broadway Shows etc. as long as you had a bona fide discussion of company or union business. Enter your yearly Entertainment Expense while discussing company business: \$ _____

Other Job Expenses/W-2 Non-Airline Employee Deductions

If you have another job with a W-2 or your spouse has a job with a W-2 enter non-reimbursed employee related business expenses below. This deduction sheet only be used if you have a W-2 for another job.

(Do Not Include Pilot Or Flight Attendant Deductions On This Worksheet)

Union Dues and Professional Dues	\$	Meals and Entertainment Expense	\$	Other _____	\$
Professional Subscriptions	\$	Office Supplies	\$	Other _____	\$
Uniform and Protective Clothing	\$	Office Equipment	\$	Other _____	\$
Job Search Costs	\$	Licenses	\$	Other _____	\$
Local Parking Fees and Transportation	\$	Telephone Calls	\$	Other _____	\$
Travel Expense Lodging	\$	Cell Phone	\$	Other _____	\$
Travel Expense Airfare	\$	Pager	\$	Other _____	\$
Travel Expense Car Rental	\$	Internet	\$	Other _____	\$
Business Gifts	\$	Postage	\$	Other _____	\$
Education Expense Job Related	\$	Other _____	\$	Other _____	\$

Vehicle Expense - Mileage rate for 2016 is 54 cents per mile.

Year & Make and Model Vehicle		Do you have evidence to support the deduction?	Yes or No
Date First Used for Business		Is this evidence written?	Yes or No
Type of Vehicle: Car, Van, Truck		Is another vehicle available for personal use?	Yes or No
Total Mileage		Was the vehicle available for personal use during off duty hours?	Yes or No
Business Mileage		Was the vehicle leased?	Yes or No
Commuting Mileage		Was the vehicle used for hire?	Yes or No
Personal Mileage		Actual Expenses: Gas, Oil, Repairs, Insurance, ect.	\$

Home Office – To be deductible as an employee must have been required by employer if an employee.

Area Used for Business - Square Footage/Room	Sq/ft	Mortgage Interest	\$
Total Area - Square Footage of Home	Sq/ft	Real Estate Taxes	\$
Number of Days in Year Office was in Home		Insurance – Homeowners/Renters	\$
Date of Using Room as Home Office	\$	Repair and Maintenance	\$
Fair Market Value of Home with Home Office	\$	Utilities Except Water per Month	\$
Cost of Home with Home Office	\$	Rent Paid for Year	\$
Improvement to Home Office	\$	Other Specify: _____	\$
Land Value on Property Tax Statement	\$	Other Specify: _____	\$
Building Value on Property Tax Statement	\$	Other Specify: _____	\$

What are adequate records according IRS Publication 463 Travel, Entertainment, Gift and Car Expenses?

You should keep the proof you need in an account book, diary, log, statement of expense, trip sheets, or similar record. You should also keep documentary evidence that, together with your record, will support each element of an expense. You generally must have documentary evidence, such as receipts, cancelled checks, or bills to support your expenses. Documentary evidence is not needed if your travel expense other than lodging is less than \$75 or you have a transportation expense for which a receipt is not readily available. Documentary evidence ordinarily will be considered adequate if it shows the amount, date, place, and essential character of the expense. You must generally provide a written statement of the business purpose of an expense. However, the degree of proof varies according to the circumstances in each case. If the business purpose of an expense is clear from the surrounding circumstances, then you do not need to give a written explanation. If you do not have complete records to prove an element of an expense, then you must prove the element with your own written or oral statements containing specific information about the element, and other supporting evidence that is sufficient to establish the element. If the element is the description of a gift, or the cost, time, place, or date of and expense, the supporting evidence must be either direct evidence or documentary evidence. Direct evidence can be written statements, or oral testimony of your guests or other witness setting forth detailed information about the element. Documentary evidence can be receipts, paid bills, or similar evidence. If the element is either the business relationship of your guests or the business purpose of the amount spent, the supporting evidence can be circumstantial rather than direct. For example, the nature of your work, such as making deliveries, provides circumstantial evidence of the use of your car for business purposes. Invoices of deliveries establish when you used the car for business. If you cannot produce a receipt because of reasons beyond your control, you can prove a deduction by reconstructing your records or expenses. Reasons beyond your control include fire, flood, and other casualties.

Tax Credits

Child and Dependent Care Expenses Credit

Qualifying expense for care that allows you to work or look for work. Deduction only allowed for children under age 13.

NOTE: Social Security Number or ID Number is required to receive credit!

Care Provider's Name	Provider's Address and Phone Number	Provider's SS# or EIN	Child's Name	Paid
				\$
				\$
				\$
				\$

Other Tax Credits

Do you have a Qualified Mortgage Interest Credit Certificate issued by federal or state government?	Y or N
Did you adopt a child this year?	Y or N
Did you buy a new plug-in electric vehicle or plug-in electrical drive conversion kit in 2011?	Y or N
Were you a first home buyer in the District of Columbia before 2012 and have a carryforward?	Y or N
Did you have Alternative Motor Vehicle or Qualified Plug-In Electric Drive?	Y or N

Residential Energy Credits

The nonbusiness energy credit has a lifetime limit of \$500.

Did you claim residential energy credits on your 2006 through 2015 tax returns?	Y or N
Did you install insulation, energy efficient windows, doors, skylights, heating and AC systems, water heaters, biomass stoves, metal or asphalt roofs in 2016? You must provide a copy of manufactures certificate and sales receipt.	Y or N
Did you install alternative energy equipment, such as a solar hot water heater, geothermal heat pump or wind turbine? You must provide a copy of manufactures certificate and sales receipt.	Y or N

First Time Home Buyers Credit Recapture

Did you take the First Time Homebuyers Credit in 2008?	Y or N
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Additional Tax Payments Made to Federal or State

Include only Estimated Tax Payments made for the 2016 tax year.

Quarterly Tax Payments	Date Payment Made	Federal Amount	State Amount	Local Amount
First Quarter due 4/15/16		\$	\$	\$
Second Quarter due 6/15/16		\$	\$	\$
Third Quarter due 9/15/16		\$	\$	\$
Fourth Quarter due 1/15/16		\$	\$	\$

Taxes Paid with Extensions to Federal or State

Federal Amount	\$	State of _____ amount	\$	State of _____ amount	\$
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State Tax Renters Credit

If you paid rent in CA, IN, MA, MI, MN, NJ, WI or any other state in 2016 with a renters credit please complete the following section, Minnesota residents provide a copy of your Certificate of Rent Paid (CRP)

Landlords Name					
Landlords Address					
Apartment Address					
Monthly Rent	\$	Total Rent Paid	\$	Dates Rented	

State K-12 Education Credits for AZ, IL, IA, & MN

Name of Student	Grade	Expenses	Name of School	Address	State	Zip Code
		\$				
		\$				