

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.

Assignment 1			
Start Date mm/dd/yy		End Date mm/dd/yy	
City			
Company			
Was this contract: Self-employment (1099)? <input type="checkbox"/> Employee (W2)? <input type="checkbox"/>			
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 your car, 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 (paid by you, not company)			
Did you receive a Per Diem 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 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"/>
Return home at the end of contract			
<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 2			
Start Date mm/dd/yy		End Date mm/dd/yy	
City			
Company			
Was this contract: Self-employment (1099)? <input type="checkbox"/> Employee (W2)? <input type="checkbox"/>			
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 your car, 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 (paid by you, not company)			
Did you receive a Per Diem 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 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"/>
Return home at the end of contract			
<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			

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Assignment 3			
Start Date mm/dd/yy		End Date mm/dd/yy	
City			
Company			
Was this contract: Self-employment (1099)? <input type="checkbox"/> Employee (W2)? <input type="checkbox"/>			
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 your car, 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 (paid by you, not company)			
Did you receive a Per Diem 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 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"/>
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			
Was this contract: Self-employment (1099)? <input type="checkbox"/> Employee (W2)? <input type="checkbox"/>			
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 your car, 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 (paid by you, not company)			
Did you receive a Per Diem 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 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"/>
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			

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