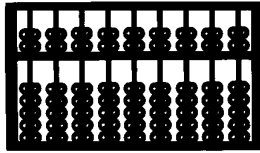
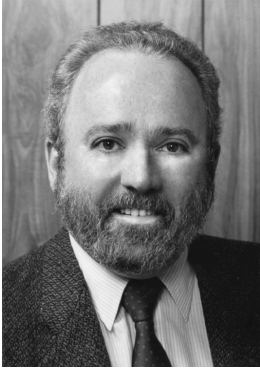


COMPLETE



BUSINESS SERVICES

1734 Divisadero Street
San Francisco, CA 94115-3012
Tel 415 202-8555 or 800 FILE-TAX
Fax 415 921-2347 or 800 374-1873
Email sfo@filetax.com
<http://www.filetax.com>



This tax organizer has been developed just for flight crews. We think it's the finest checklist in the industry. We have included the most common items of income and expense. Your suggestions for changes and additions are important to us. Please Email any comments or suggestions you have to sfo@filetax.com.

You are free to use this questionnaire to help you or your professional preparer to complete your return. If you would like the firm who knows and cares enough about flight crews to do your return, we have a great offer. Complete Business Services will prepare your United States Federal Income Tax return and one state for a "fly-by" rate of only \$150.00 US. Add \$50.00 US for each additional state return. You must use the flight crew organizer to get this fixed low rate. Send us your organizer, complete set of original W-2 forms and other attachments. You need to include a check or credit card authorization. If filing a long form will not save you any money, we will do short form federal and state returns for \$50 US. Add \$25 US for each additional state.

We will complete your return usually in five business days and mail it to you for signature. Your complete return will have mailing instructions, mailing envelopes and a copy for your file. If you send us any original documents, we will return them to you.

If we have questions, we'll call you. If you have other areas of income or expenses that are not included in the "fly-by" rate, we will call you and tell you the additional cost before we do any work. Your personal tax consultant will be available to answer questions or help with your tax planning. You will be billed a reduced hourly rate of \$90.00 US. Your consultation can be in person, a telephone appointment or by Email. Charges, if any, will be billed as incurred.

TO PAY BY CREDIT CARD, PLEASE COMPLETE AND RETURN THIS AUTHORIZATION.

We accept VISA, MASTERCARD, AMERICAN EXPRESS and DISCOVER.



NAME ON CARD _____

AMOUNT _____

CARD NUMBER _____

SIGNATURE _____

VISA/MC/AX/DC _____

EXPIRATION DATE _____

DATE SIGNED _____

1. PERSONAL INFORMATION

Flight Personnel

NAME	SPOUSE'S NAME
SOCIAL SECURITY NUMBER	SPOUSE'S SOCIAL SECURITY NUMBER
DATE OF BIRTH	SPOUSE'S DATE OF BIRTH
ADDRESS	PHONE
	FAX
	E-MAIL

FILING STATUS	NAME(S) OF DEPENDENTS	DATE OF BIRTH	SOCIAL SECURITY NO.	RELATIONSHIP	MONTHS AT
<input type="checkbox"/> SINGLE	HOME				
<input type="checkbox"/> MARRIED FILING JOINTLY					
<input type="checkbox"/> MARRIED FILING SEPARAATELY					
<input type="checkbox"/> HEAD OF HOUSEHOLD WITH QUALIFYING PERSON					
<input type="checkbox"/> QUALIFYING WIDOW/ER WITH DEPENDENT CHILD					

2. MISCELLANEOUS INCOME

Include amounts from Savings and Interest-bearing accounts (if total is over \$400, list by institution and amount). **Attach all documents.**

INTEREST _____ DIVIDEND _____

OTHER _____
(List Type, Amount, Recipient and Address)

If you want your refund deposited to your account attach a void check.

3. MISCELLANEOUS DEDUCTIONS

Other circumstances may affect your income and/or your allowable deductions.

REAL ESTATE TAXES PAID _____

HOME MORTGAGE INTEREST _____
(Attach 1098)

OTHER MORTGAGE INTEREST _____
List Payee's Name, Address and Social Security # ➡

CASH CONTRIBUTIONS _____
(Individual contributions over \$250 must be supported by a statement from the charitable organization.) Use back to list

NON-CASH CONTRIBUTIONS _____
(Clothing, furniture, etc.)

MEDICAL AND DENTAL EXPENSES _____
(Do not include reimbursed expenses)

4. TRAVEL SUMMARY

<p>REIMBURSED TRAVEL EXPENSES The costs listed below are travel costs that are reimbursed by the employer on a per diem basis.</p>	Taxpayer incurs costs of transport, food and miscellaneous items while traveling.	
	<p>TRAVEL EXPENSES (Transportation costs away from base.)</p>	<p>MEALS (Cost of food while away from base. Subject to the 50% exclusion rules.)</p>
TOTAL DAYS AWAY	TIPS TO DRIVERS	HIGH COST ALLOCATION
LESS TURNAROUND TRIPS	TELEPHONE CALLS	AVERAGE COST ALLOCATION
NUMBER OF DAYS OVERNIGHT	OTHER	LOW COST ALLOCATION
NUMBER OF DAYS TRAVELED: DOMESTIC / USA		INTERNATIONAL ALLOCATION
NUMBER OF DAYS TRAVELED: INTERNATIONAL		
TOTAL TRAVEL TO FORM 2106		TOTAL MEALS TO FORM 210

EXPENSES LISTED BELOW ARE SUBJECT TO THE 2% AGI LIMITATIONS.

THESE ITEMS ARE ORDINARY AND NECESSARY

It is the Taxpayer's responsibility to be able to support the amounts listed on this schedule.
Support consists of but not limited to Flight Schedules, Log Books, Receipts and Canceled Checks.

UNIFORM ADDITIONS

\$ _____

- | | | |
|----------------------|----------------------|---------------------|
| _____ Belts | _____ Pants | _____ Skirts |
| _____ Boots | _____ Rain gear | _____ Stockings |
| _____ Ear muff | _____ Safety glasses | _____ Support hoses |
| _____ Ear protector | _____ Safety shoes | _____ Sweaters |
| _____ Emblems | _____ Scarves | _____ Ties |
| _____ Hats / helmets | _____ Shoes | _____ |
| _____ Gloves | _____ Shoe polish | _____ |
| _____ Jackets | _____ Shirts | _____ |

UNIFORM MAINTENANCE

\$ _____

- | | | |
|--------------------|------------------------|-------|
| _____ Alternations | _____ Laundry supplies | _____ |
| _____ Cleaning | _____ Repairs | _____ |
| _____ Laundry | _____ | _____ |

LUGGAGE / TRAVEL CASE

\$ _____

- | | | |
|---------------------|-------------------|-------|
| _____ ID case | _____ Suitcases | _____ |
| _____ Map case | _____ Travel bags | _____ |
| _____ Maps | _____ Travel case | _____ |
| _____ Passport cash | _____ Travel cart | _____ |
| _____ Repairs | _____ | _____ |

ASSOCIATION AND UNION DUES

\$ _____

- | | | |
|----------------------------------|----------------------|-------|
| _____ Union | _____ Union meetings | _____ |
| _____ Professional subscriptions | _____ Other | _____ |
| _____ Union dues | | |

4. TRAVEL SUMMARY (continued)

Taxpayer incurs costs of transport, food and miscellaneous items while traveling.

EXPENSES LISTED BELOW ARE SUBJECT TO THE 2% AGI LIMITATIONS.

THESE ITEMS ARE ORDINARY AND NECESSARY

It is the Taxpayer's responsibility to be able to support the amounts listed on this schedule.
Support consists of but not limited to Flight Schedules, Log Books, Receipts and Canceled Checks.

COMMUNICATION AND BID SERVICE \$ _____

- | | | |
|-------------------------|----------------------|--------------------------|
| _____ Answering machine | _____ FAXes | _____ Repairs |
| _____ Answering service | _____ Line charges | _____ Toll calls at home |
| _____ Beeper | _____ On line charge | _____ Toll calls away |
| _____ Bid fees | _____ Pager | _____ |
| _____ Extra telephone | _____ Pay phones | _____ |

TOOLS & EQUIPMENT \$ _____

- | | | |
|----------------------|------------------------|---------------------|
| _____ Batteries | _____ Ear protectors | _____ Subscriptions |
| _____ Binoculars | _____ Hand tools | _____ Tape recorder |
| _____ Briefcase | _____ Modem | _____ Tools |
| _____ Business cards | _____ Notebooks | _____ Travel books |
| _____ Calculator | _____ Printer | _____ |
| _____ Camera | _____ Safety equipment | _____ |
| _____ Clipboard | _____ Software | _____ |
| _____ Computer | _____ Stationery | _____ |

PASSPORT & PASSPORT PHOTOS \$ _____

- | | | |
|------------------------|-----------------|-------|
| _____ Immigration fees | _____ Visa fees | _____ |
| _____ Photos | _____ | _____ |

TRAINING AND EDUCATION \$ _____

- | | | |
|-------------------------|-----------------------------|-------------------------------|
| _____ Books | _____ Course fees | _____ Language tapes |
| _____ Registration | _____ Tuition fees | _____ Language classes |
| _____ Seminars | _____ First aid | _____ Meetings |
| _____ Supplies | _____ Safety classes | _____ Professional publishers |
| _____ Trade publicatons | _____ Language translations | _____ |
| _____ Flight training | _____ Language dictionaries | _____ |

LIQUOR SHORTAGES \$ _____

TAX PREPARATION \$ _____

OTHER EXPENSES \$ _____

- | | | |
|---------------------------|----------------------------|-------|
| _____ Liability insurance | _____ Medical exam license | _____ |
| _____ Resumes | _____ Licenses | _____ |
| _____ Misc. repairs | _____ | _____ |

TOTAL TO SCHEDULE

4. TRAVEL SUMMARY (continued)

AUTO TRAVEL Note: Trips between your home and primary work location are not deductible

PURPOSE	TOTAL MILES	PARKING
Away from home business (overnight)	_____	_____
Between first and second job	_____	_____
Classes	_____	_____
Equipment maintenance	_____	_____
Meetings	_____	_____
Purchasing equipment and supplies	_____	_____
Purchasing uniforms	_____	_____
Repairs	_____	_____
Seminars	_____	_____
Training	_____	_____
Uniform maintenance	_____	_____
Other _____	_____	_____
_____	_____	_____
_____	_____	_____

TRAVEL AWAY FROM HOME OVERNIGHT

TRANSPORTATION

Airfare	_____
Car rental	_____
Parking	_____
Taxi	_____
Train, bus, subway	_____
Other	_____

LIST OUT-OF-TOWN TRIPS (other than regular flights)

DATES	BUSINESS PURPOSE
_____	_____
_____	_____
_____	_____
_____	_____

MISCELLANEOUS

Laundry	_____
Lodging	_____
Meals	_____
Porter, bell captain	_____
Other	_____

REGULAR SCHEDULED FLIGHTS (complete destination detail sheets)

_____	Total number of flights during year
_____	Total number of days away from home

SPECIAL QUESTIONS

Were you reimbursed for any of your business expenses? Yes No

If so, how much were you reimbursed? (List by individual expense category)

List any equipment sold that was previously claimed as a business expense:

Date sold	Amount	Description
_____	_____	_____
_____	_____	_____
_____	_____	_____

Were your reimbursements included in your W-2 form Yes No

If you get an annual report of expenses and per diem, please attach.

Attach any W-2 expenditures provided by your employer.

If you get an annual report of per diem be sure you attach W-2 expenditures if any were sent to you.

5. DESTINATION DETAIL SHEET (DOMESTIC)

CONTINENTAL US — PER DIEM RATES ARE CALCULATED ON A DAILY BASIS.

PLEASE NOTE NUMBER OF DAYS AWAY, EXCLUDE TURNS.

ABE _____	ABI _____	ABQ _____	ABR _____	ACT _____	ACY _____
ADK _____	AFW _____	AGS _____	ALB _____	AMA _____	ATL _____
AUS _____	BDL _____	BFI _____	BFL _____	BGR _____	BHM _____
BIL _____	BIS _____	BNA _____	BOI _____	BOS _____	BRO _____
BTR _____	BUF _____	BUR _____	BWI _____	BZN _____	CAE _____
CAK _____	CHA _____	CHS _____	CID _____	CLE _____	CLT _____
CMH _____	COS _____	CPR _____	CRP _____	CVG _____	CYS _____
DAB _____	DAL _____	DAY _____	DCA _____	DEN _____	DFW _____
DLH _____	DSM _____	DTT _____	DTW _____	EGE _____	ELP _____
EUG _____	EWR _____	FAR _____	FAT _____	FAY _____	FLL _____
FSD _____	FSD _____	FTW _____	FWA _____	GEG _____	GFK _____
GGG _____	GJT _____	GRR _____	GSO _____	GSP _____	GTF _____
GUC _____	HDN _____	HLN _____	HOU _____	HRL _____	HSV _____
HUF _____	IAD _____	IAH _____	ICT _____	IDA _____	IND _____
ISP _____	JAC _____	JAN _____	JAX _____	JFK _____	LAN _____
LAS _____	LAX _____	LBB _____	LGA _____	LGB _____	LIT _____
LNK _____	LVS _____	LWB _____	MAF _____	MCI _____	MCO _____
MDT _____	MDW _____	MEM _____	MFE _____	MGM _____	MIA _____
MKE _____	MLB _____	MLI _____	MOB _____	MSN _____	MSP _____
MSY _____	MWH _____	MYR _____	NFL _____	OAK _____	OGD _____
OKC _____	OMA _____	ONT _____	ORD _____	ORF _____	PAE _____
PBI _____	PDX _____	PDX _____	PHF _____	PHL _____	PHX _____
PIA _____	PIH _____	PIT _____	PMD _____	PNS _____	PQI _____
PSP _____	PUB _____	PVD _____	PDM _____	RDU _____	RFD _____
RIC _____	RNO _____	ROC _____	ROW _____	RST _____	RSW _____
SAN _____	SAN _____	SAT _____	SAV _____	SBA _____	SBN _____
SCK _____	SDF _____	SEA _____	SFO _____	SGF _____	SHV _____
SJC _____	SLC _____	SMF _____	SNA _____	SNA _____	SPI _____
SPS _____	SRQ _____	STL _____	SWF _____	SYR _____	TLH _____
TPA _____	TUL _____	TUS _____	TYS _____	YKM _____	

DOMESTIC TOTAL _____

5. DESTINATION DETAIL SHEET (INTERNATIONAL)

INTERNATIONAL, ALASKA, HAWAII, PUERTO RICO & VIRGIN ISLANDS — PER DIEM IS CALCULATED ON A TRIP BASIS.

PLEASE NOTE NUMBER OF 2 1/2 DAY TRIPS.

ACA _____	ACA _____	ADL _____	AGP _____	AKL _____	ALC _____
AMS _____	ANF _____	ANU _____	APW _____	ARI _____	ARN _____
ASU _____	AUA _____	AUA _____	AXA _____	AXA _____	BAQ _____
BCN _____	BDA _____	BDA _____	BEL _____	BER _____	BGI _____
BGO _____	BHX _____	BNE _____	BOG _____	BRU _____	BSB _____
BZE _____	CCP _____	CCS _____	CGN _____	CHC _____	CLO _____
CNQ _____	COR _____	CPH _____	CPQ _____	CTG _____	CUN _____
CUR _____	CUR _____	CZM _____	DUB _____	DUS _____	EDI _____
EZE _____	FPO _____	FRA _____	FUK _____	GCM _____	GCM _____
GDL _____	GIG _____	GLA _____	GND _____	GND _____	GOA _____
GRU _____	GUA _____	GVA _____	GYE _____	HAI _____	HAM _____
HEL _____	HKD _____	IQQ _____	IQT _____	JUU _____	KIN _____
KMJ _____	KOJ _____	LAX _____	LAX _____	LGW _____	LHR _____
LIM _____	LIS _____	LPB _____	LPL _____	LUX _____	LYS _____
MAD _____	MAN _____	MAO _____	MBJ _____	MDZ _____	MEL _____
MEX _____	MGA _____	MID _____	MIL _____	MQV _____	MTY _____
MUC _____	MBD _____	MLM _____	MZT _____	NAN _____	NAS _____
NCE _____	NGO _____	NGS _____	NOU _____	NRT _____	NUE _____
OPO _____	ORY _____	OSA _____	OSL _____	PAP _____	PAR _____
PIO _____	PLS _____	PLS _____	PLU _____	PML _____	POA _____
POP _____	POP _____	POS _____	PPG _____	PSA _____	PTY _____
PUR _____	QPP _____	RES _____	ROM _____	SAL _____	SAP _____
SCL _____	SCQ _____	SDQ _____	SFJ _____	SJO _____	SMA _____
SMA _____	SNN _____	SPK _____	STN _____	SVQ _____	SXM _____
SXM _____	SYD _____	SZG _____	TGU _____	TRN _____	TXL _____
TYL _____	TYO _____	TYO _____	UIO _____	UVF _____	UVF _____
VCE _____	VIE _____	VVI _____	YEG _____	YFS _____	YHM _____
YHZ _____	YJT _____	YMX _____	YOW _____	YQB _____	YQM _____
YQX _____	YUL _____	YVR _____	YVR _____	YWG _____	YYC _____
YYR _____	YYT _____	YYZ _____	ZIH _____	ZRH _____	

AK, HI, PR & VI

ADN _____	ANC _____	ANC _____	BQN _____	FAI _____	FAI _____
HNL _____	HNL _____	ITO _____	NRR _____	NRR _____	OGG _____
OGG _____	OFF _____	PSE _____	SJU _____	SJU _____	STT _____
STT _____	STX _____	STX _____			

INTERNATIONAL TOTAL _____

HOW MANY 1.5 DAY TRIPS? _____ HOW MANY 2.5 DAY TRIPS? _____ HOW MANY TRIPS LONGER 2.5 DAYS? _____