

RELOCATION INCOME TAX ALLOWANCE (RITA) CERTIFICATION

1. Name:		2. EmplID:	
3. TONO:		4. Day Time Phone Number:	
5. Last Duty Station:		6. Current Duty Station:	

7. Federal Tax Filing Status:

- Single
- Married Filing Joint Return
- Head of Household
- Married Filing Separate Return
- Qualified Widow(er) with Dependent Child(ren)

8. Gross compensation as shown on your W-2 forms for the tax year, and/or net earnings (or loss) from self-employment income as shown on your Schedule SE form.

Form	All W-2's for current year	All Schedule SE(s) for current year
a. Employee	\$	\$
b. Spouse	\$	\$
c. Total Gross Compensation	\$	\$

9. State Tax Returns

- o Since most non-deductible moving expense reimbursements will be taxed at the new location, the Federal Travel Regulations do not provide for a RITA allowance related to state taxes at the employee's old location.
- o However, in very limited circumstances, the employee may be subject to state taxes in two states at the new location. This would be true if the employee's state of residence at the new location and state where the employee worked at the new location were different and both taxed the employee's RITA income – without either of these states allowing an adjustment or credit for this double taxation.
- o If either state allows an adjustment or credit for this double taxation, then the RITA allowance is based on the other state's tax rate – otherwise, it is based on the sum of the tax rates for both states at the new location.
- o List below the name (s) of the state (s) which taxed your non-deductible moving expense reimbursements for this tax year.

9a. State 1

9b. State 2

10. Local State Returns

- o If the employee incurs an additional local income tax liability as a result of moving expense reimbursements. Specify the name of all locations and the applicable tax withholding rate(s) for this tax year, ie. 1%, 2%, ect. These local tax rates are expressed as a percent of one of the following: income, federal tax or state tax, and are listed in the "Type of Tax" column. Please contact your local tax authorities if you are unsure of these items.

	Locality	Percent	Type of Tax
10a.		%	
10b.		%	

11. I agree that if the 12-month service agreement is violated, the total amount of the RITA allowance will become a debt due the US government and will be repaid in accordance with the Federal Travel Regulations. The above information is true and accurate in the best of my knowledge, but I (we) agree to notify the relocation office of any changes to the above (i.e. from amended tax returns, tax audit, ect.) so that the appropriate adjustment to the RITA can be made.

11a. Employee's Signature

11b. Date

11c. Spouse's Signature

11d. Date

IF EMPLOYEE AND SPOUSE FILED A JOINT RETURN, BOTH MUST SIGN THIS FORM

In compliance with Privacy Act of 1974 the following information is provided: Solicitation of the information on this form is authorized by 5 U.S.C. Chapter 57 as implemented by the Federal Travel Regulations (FPMR101-7), E.O. 11609 of July 22, 1971, E.O. 11012 of March 27, 1962, and E.O. 9397 of November 22, 1943. The primary purpose of the information is to facilitate the review, approval, accounting and payment of funds for travel and certain relocation allowance expenses to be incurred under appropriate administrative authorization. The requested information will be used by officers and employees of this agency who have a need for such information in the performance of their official duties. The information will be disclosed to appropriate Federal, State, local or foreign agencies, when relevant to civil, criminal or regulatory investigations or prosecutions, or when pursuant to a requirement by this agency in connection with the hiring or firing of an employee, security clearances, or other investigations of the performance of official duty while in Government service. Disclosure of the requested information is voluntary; however, failure to provide the information required may result in delay or suspension relocation income tax allowance request.