Five Steps for Filing a Relocation Income Tax (RIT) Allowance Claim

These instructions and forms can also be used if you need to file a RIT claim for prior years – simply enter the calendar year associated with the year you are submitting.

If you received reimbursement within a calendar year for your TOS and Withholding Tax Allowance (WTA) was applied to your reimbursement, you are required to submit a RIT claim. The requirement to file a RIT claim is based upon the calendar year in which you received the reimbursement, not the year in which you incurred the expense.

To be in compliance with Federal Travel Regulations, your RIT claim must be received by ASC B&F Travel TOS no later than August 1st each year. This will ensure that your RIT claim will be reviewed, approved, and processed by the National Finance Center prior to the August 31st deadline.

Getting Started…

Step One: To verify that you need to submit a RIT claim, look at your W-2 from USDA.

- If there is a $-amount in Block 14 “Moving Allowance Taxed, you must file a RIT claim.
- You will need to make a copy of all of your W-2s. Do not send originals.
- In order to protect your PII, please redact (black out) your social security number(s) on all of your W-2s and other forms submitted.

Step Two: Complete the Form AD-1000 – Claim for Relocation Income Tax Allowance for the Calendar Year your reimbursements were paid to you. You have the choice of filling out the information electronically or by printing the form and completing the form by hand.

<table>
<thead>
<tr>
<th>Field</th>
<th>Information Needed</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name</td>
<td>Your Last Name, First Name</td>
</tr>
<tr>
<td>Social Security Number</td>
<td>Leave blank</td>
</tr>
<tr>
<td>Agency Code</td>
<td>11</td>
</tr>
<tr>
<td>Reporting Date</td>
<td>Enter the date you reported to duty at the new official station</td>
</tr>
</tbody>
</table>

Block 1 – GROSS COMPENSATION

Form W-2:
Employee – Enter the total gross wages from Block 1 “Wages, tips, other compensation” of your W-2. If you have more than one W-2, enter the total amount from Block 1 of all your W-2s. Attach a copy of each W-2 to your RIT claim.

Spouse - If your filing status on your Federal Tax Return was *Married, Filing Separate Return* and you live in a community property state* or if your filing status was *Married, Filing Joint Return*, enter the total gross wages from your spouse’s W-2 (if your spouse had wages). If your spouse had more than one W-2, enter the total amount of all his/her W-2s here. Attach a copy of each W-2 to your RIT claim.
Schedule SE:
Employee – Enter the sum of your self-employment net earnings from lines 1 and 2 of the Schedule SE Form (1040). Attach a copy of the Schedule SE Form (1040) to your RIT claim.

Spouse - If your filing status on your 2016 Federal Tax Return was *Married, Filing Separate Return* and you live in a community property state* or if your filing status was *Married, Filing Joint Return*, enter the sum of your spouse’s self-employment net earnings from lines 1 and 2 of the Schedule SE Form (1040). Attach a copy of the Schedule SE Form (1040) to your RIT claim.

* Community property states are: Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Texas, and Washington.

Total Enter the total for the amounts shown in the W-2 and Schedule SE blocks.

Total Earned Income Enter the sum of the Employee Total and Spouse Total

Note: If the Total Earned Income is $20,000 or less, check the Box on the left.

Block 2 – FILING STATUS – Check the box that indicates the filing status used on your 2016 Federal Tax Return.

Block 3 – STATE TAX LIABILITY

State Name Enter the state abbreviation for the state(s) where you incurred a state tax liability for relocation reimbursements.

Marginal Tax Rate Leave blank

Tax Basis Leave blank

Check-Off Box Check this box ONLY if your filing status was "Married Filing Separate Return" and you reside in a community property state.

Block 4 – LOCAL TAX LIABILITY

Locality Name Enter the name of each locality where you incurred local income tax liability. If Block 19 of your W-2 is blank, do not enter anything in this section.

Type Enter 1 for City; 2 for County

Marginal Tax Rate Leave blank

Tax Basis Leave blank

Block 5 – TAXABLE RELOCATION PAYMENTS - Enter the amount of taxable moving expense reimbursement from Block 14 of your USDA W-2.

Block 6 – CERTIFICATIONS

Employee’s Signature Sign and date these blocks

Spouse’s Signature If you checked the box "Married Filing Joint Return" in Block 2, your spouse MUST sign and date these blocks regardless of whether or not he/she had income recorded in Block 1 – Gross Compensation.
Step Three: Complete the Form AD-616R – Travel Voucher (Relocation) – You have the choice of filling out the information electronically or by printing the form and completing it by hand. Please use the blank AD-616R located on the ASC-TOS webpage at: http://fsweb.asc.fs.fed.us/bfm/programs/financial-operations/travel/tos/rit.php. Do not use a previously submitted/processed AD-616R voucher.

To complete the form electronically simply press the <Tab> key to navigate to the fields you need to complete.

Complete only the following fields:

Section A – IDENTIFICATION

1. Travel Authorization No. Enter your TOS authorization number (Example: 6CS1125031234)
3. Name Enter your name: Last Name, First Name, Middle Initial
7. Dates of Travel Expenses Leave blank, ASC-TOS staff will complete
10. Date Reported Enter the date you reported to the New Official Duty Station
12. Official Duty Station Enter the City and State abbreviation where you are currently stationed
13. Resident City and State Enter only if different that Block 12
   Note: Leave Block 2 in Section A blank (Social Security Number)

Section B – TRAVEL VOUCHER MAILING ADDRESS OPTIONS
Select one of the following options (16, 18, or 19 only):

16. Salary Address Check this block to route the reimbursement to your salary or electronic funds (EFT) routing number where you normally receive your salary payment. (Recommended)
17. T&A Contact Point Do Not check this block. It will route the reimbursement to your T&A contact address.
18. Special Address Check this block to route the reimbursement check to an address other than your salary address or travel EFT account. Enter the desired address on the lines provided.

19. Travel EFT Account Check this block to route the travel reimbursement to an EFT account other than your salary account. Then enter the code used to identify the EFT account on Line 1. This code consists of a 9-digit routing number for the financial institution; a 1-digit alpha character for the account type ("C" for checking and "S" for savings); and your account number (not to exceed 25 positions). Leave Lines 2 and 3 blank. Do not show spaces or
special characters in the EFT account code. Example: 123456789C12345…

Section C – TRANSPORTATION COSTS – Leave this section blank; calculations are processed at the National Finance Center.

Section D – CLAIMS – Leave this section blank; calculations are processed at the National Finance Center.

Section F – CERTIFICATION

52. Claimant’s Signature
Sign this block. If you have a LINC Pass, you can sign in this block with your digital signature. If you are not able to sign the voucher digitally, you will need to print the AD-616R on 8 ½ X 11 paper and sign the hard copy original in “blue ink”.

53. Date
Enter the date.

54. Final Voucher Indicator
This block is always “N”. This prevents premature closure of your TOS authorization.

Page 2 of the AD-616R:

Traveler’s Name
Enter your name (Last Name, First Name, Middle Initial).

Section G – Remarks
Enter the calendar year (last 2 digits) of the RIT claim.

Step Four: Submit your Completed RIT Forms to ASC B&F Travel-TOS

Before submitting your completed forms, check the following list:

✓ Has your Employee Personal Page (EPP) been updated with your current mailing address?
✓ Have you signed/dated Blocks 52/53 of the AD-616R?
✓ Have you signed/dated Block 6 of the AD-1000? Has your spouse signed/dated Block 6 (if applicable)?
✓ Have you attached copies of all W-2s and if applicable Schedule SE Forms (1040) Forms?
✓ Have you redacted (blacked out) all SSNs to protect your PII?
✓ Did you make a copy of the RIT claim for your records?

There are 3 options for submitting your completed/signed RIT claim:

1) Scan and e-mail – The Preferred Method
   - If you are sending from a Forest Service computer, the e-mail address is FS-asc tos
   - If you are sending from a computer outside the Forest Service, the e-mail address is asc_tos@fs.fed.us.

2) Fax to ASC-TOS at 1-866-689-4968

3) Mail the hard copy original to:
Do not submit your RIT claim directly to NFC. Sending your RIT claim directly to NFC will delay processing of your claim since the claim would be returned to ASC for approval.

Note: When submitting a hard copy original, we request that you print the forms on 8 ½” X 11”-size paper.

**Step Five:** ASC B&F Travel-TOS will review your claim, approve and send to the National Finance Center for processing

The ASC B&F Travel-TOS staff will review your RIT claim to ensure the package is complete to include all forms and signatures. The ASC-TOS Approving Official will approve the AD-616R and AD-1000 and submit the RIT claim electronically to the National Finance Center for processing.

Failure to submit your completed RIT claim may result in the garnishment of your wages by the National Finance Center.