

BUREAU OF INDIVIDUAL TAXES PO BOX 280501 HARRISBURG PA 17128-0501

PERSONAL INCOME TAX EMPLOYEE BUSINESS EXPENSE AFFIDAVIT

Form REV-775 is to be used in the event that you are unable to provide a copy of your employer's reimbursement policy or your employer refuses to provide you and the Department of Revenue with either an employer letter or a completed REV-757.

SECTION I. GENERAL	GENERAL INFORMATION				
1. Name		SSN		Tax Year	
2. Primary Taxpayer Name (Shown first on the PA-40)		Primary Taxpayer SSN (Shown first on the PA-40)			
3. Employer Name		FEIN			
4. Employer Contact	Contact Title	Contact Phone		Number	
SECTION II. AFFIDAVIT					
I hereby state that I am the person named above and have incurred employee business expenses as indicated on this form for the tax year shown above. I also state that I am required to incur the employee business expenses in order to perform the duties and responsibilities of my position and that I am (please check all that apply):					
☐ Not reimbursed in any manner for the expenses.					
Reimbursed only for some of my expenses via a per-diem rate that is less than the federal per-diem expense rate or at a fixed amount and the reimbursed expenses at these lower rates are not included on my PA Schedule UE nor claimed on my return.					
Reimbursed in full for some of my expenses by my employer and the reimbursed expenses are not included on my PA Schedule UE nor claimed on my return.					
Signature			Date		

Please notarize in the space below.

PERSONAL INCOME TAX EMPLOYEE BUSINESS EXPENSE AFFIDAVIT

SECTION

EXPENSE SUMMARY WORKSHEET

- Part List the part of the PA Schedule UE where the expense was claimed.
- Line # List the respective line from the PA Schedule UE where the expense was claimed.
- Claimed Expense Description Provide a description of the item being claimed and provide the business related purpose.
- Claimed Expense Amount Provide the amount of expense being claimed.

Photocopied receipts are required to support the expenses claimed and all expenses must be clearly identified on the receipt(s).

PART	LINE #	CLAIMED EXPENSE DESCRIPTION	CLAIMED EXPENSE AMOUNT

PERSONAL INCOME TAX EMPLOYEE BUSINESS EXPENSE AFFIDAVIT INSTRUCTIONS

Prior to completing this affidavit, please read brochure REV-637, Unreimbursed Allowable Employee Business Expenses for PA Personal Income Tax Purposes. Please remember that for an expense to be allowable, it must meet all of the following conditions:

- 1. The actual amount paid must be reported. Expenses may not be estimated, guessed or calculated using federal per diem rates.
- The expenses must be reasonable. The amount of expenses should not be excessive in relation to income, type of expenditure or purpose of expense.
- 3. The expenses must be **necessary** and a condition of employment. Expenses cannot be incurred to make the job more convenient or productive.
- 4. Only **ordinary** expenses are allowable. The expenses must be similar to those incurred by other employees in the same trade or profession.
- 5. The expenses must be **directly related** to the employee's present trade, business or profession. Expenses from a previous job or incurred for a future occupation may not be taken as Unreimbursed Expenses.
- 6. The expenses **must be unreimbursed**.

Section I.

- Block 1. Provide the required information for the taxpayer (employee) claiming the business expenses.
- Block 2. Provide the required information for the primary taxpayer listed on the PA-40.
- Block 3. Provide the employer's name and federal employer identification number.
- Block 4. Provide the name of a contact within your employer's human resource, payroll or accounting office; including their title and phone number. So we have a point of contact to affirm any assertions being made.

Section II.

Complete the appropriate information on the affidavit, sign the form, and have the document notarized by a licensed Notary Public.

Section III.

To expedite the processing of your income tax return, we recommend that you provide a detailed listing of your expenses and photocopies of any original expense documentation with the submission of your affidavit. (See Expense Summary Worksheet for an example.)

NOTE: Please do not send original receipts to the department as they will not be returned and should be retained for your records.

Mail the form and documentation to the department at:

PENNSYLVANIA DEPARTMENT OF REVENUE PO BOX 280501 HARRISBURG PA 17128-0501

or fax the form and documentation information to the department using a DEX-93, Personal Income Tax Fax Cover Sheet, to 717-783-5823. Faxing the form and documentation to the department will help to reduce the processing time of your return.