	TAXPAYER INFO	ORMATION	SPOUSE INFORMATION			
	First Name Last Name					
	SSN		SSN	 		
TUCKER	Occupation		Occupation			
CPA P.C	Date of Birth / Telephone: Home ()	Date of Birth//				
222 M/ Andones In	Work () _	Telephone: Home () Work ()				
223 W Anderson Ln Suite. A100				()		
Austin, TX 78752	Email Address			\/		
(512) 462-3656	Street Address					
Fax (512) 462-2715	City State Zip					
info@dtuckerCPA.com			ICE USE ONLY:			
-		TNO CONTROL	Quote:\$	TP:_		
	FIL	ING STATUS				
Single	Married	ed Head of Household		☐ Married Filing Separate		
SALARIES AND WAGES (enclose all W-2 forms)						
W-2 Gross Income	Federal Withheld	FICA	Medicare	Other (code)	Other \$	
2						
3			くしつ			
4						
	REFUND	TPI	ADJUST	MENTS TO INC	COME	
		V.				

	REFUND
Automatic deposit?	Yes (attach a VOID check)
DEPEND	ENTS (Name must be exactly as on Social Security Card)
Name*	
Date of Birth SSN	/ Full Time Student
Relationship	
Months Lived at Home	
Name*/	
SSN	——— Full Time Student
Months Lived at Home	
World Lived at Home	
Name*	
Date of Birth/	/
SSN	Full Time Student
Relationship	
Months Lived at Home	
Name*	
Date of Birth/	/
SSN	——— Full Time Student
Relationship	
Months Lived at Home	

ADJUSTMENTS TO INCOME
ALIMONY PAID
Payee
Payee's SSN
Amount
IRA CONTRIBUTIONS, ETC.
IRA Deduction
SIMPLE Plan Deduction
Keogh/SEP Deduction
Education IRA Deduction
Penalty on Early Withdrawal

ESTIMATED TAX PAYMENTS					
FEDERAL	Date Paid	Amount			
Overpayment-Prior Year					
1 st Quarter					
2 nd Quarter					
3 rd Quarter					
4 th Quarter					
STATE	Date Paid	Amount			
Overpayment-Prior Year					
1 st Quarter					
2 nd Quarter					
3 rd Quarter					
4 th Quarter					

OTHER INCOME				OTHER INCOME (CONTINUED)			
	ITEREST — Attach Forms 1099INT Payer Amount		INCOME FROM PARTNERSHIPS, ESTATES, LLCS, TRUSTS AND S CORPORATIONS Attach Forms K-1 and list any not received yet.				
DIVIDENDS — Attach Forms 1099DIV Payer Amount				OTHER INCOME Including jury duty fees, finder's fees, director's fees, prizes, gambling winnings, disability payments, unreported tip income and any other income (whether taxable or non-taxable)			
Amount Received:	D — Attach Forn d not itemize in					Attach detailed schedule	
CAPITAL GAINS —			099S			RENTAL INCOME & EXPENSES	
PENSIONS/IRA/AN Paye ALIMONY RECEIVE Payer Payer's SSN UNEMPLOYMENT Taxpayer Amount Spouse Amount	D BENEFITS RECEI	Amoun	ach Forms	1099G	e	Property #1 # INCOME Rents Received EXPENSES Advertising Association Dues Auto & Travel Cleaning/Maintenance Insurance Labor Professional Fees Miscellaneous Mortgage Interest Other Interest Repairs & Maintenance Supplies Taxes Telephone Utilities Improvements Other:	2
SOCIAL SECURITY I Taxpayer Amount Spouse Amount							

ITEMIZED DEDUCTIONS	INCOME FROM BUSINESS OR PROFESSION
MEDICAL & DENTAL EXPENSES	GENERAL INFORMATION
Attach detailed schedule	
Insurance Premiums	Cash Basis Accrual Basis
Doctors, Dentists, etc. (Net)	First Year Taxpayer Spouse
	Principal Business/Profession
	Business Name
	Business Address
	City, State, Zip
TAXES PAID	, , , ,
	INCOME
State & Local Income Tax	Gross Receipts or Sales
Real Estate Taxes – Residence	Returns and Allowances
Real Estate Taxes – Other Property	Other Income
Other Taxes	
	COST OF GOODS SOLD – If Applicable
	Inventory at Beginning of the Year
	Purchases
	Cost of Labor
	Materials & Supplies
	Other Costs
INTEREST PAID – Attach Forms 1098	Inventory at End of the Year
INTEREST PAID - ACCUCIT OTHIS 1098	EXPENSES
Home Mortgage (1 st)	Advertising
Home Mortgage (2 nd)	Car & Truck Expenses* Or Miles Driven: Total Bus
Home Mortgage (Equity Line)	Commissions
Student Loan Interest	Employee Benefit Programs
	Insurance (other than health)
_1 \	Health Insurance Premiums for Self*
	Interest
	Legal & Professional
	Office Expense
CONTRIBUTIONS – Attach Detailed Schedule	Pension & Profit Sharing Plans
	Rent – Vehicles, Machinery & Equipment
Contributions by Cash or Check	Rent – Business Property
Contributions Other than Cash	Repairs & Maintenance
	Supplies
	Taxes – Property
MISCELLANOUS DEDUCTIONS	Taxes – Other
WIISCELLANGUS DEDUCTIONS	Travel Total Meals & Entertainment*
Union/Professional Dues	Utilities
Investment Expenses	Wages
Tax Return Preparation Fees	Other*
Safe Deposit Box Rental	*Attach detailed schedules
Unreimbursed Employee	
Business Expenses*	HOME OFFICE
Other:	Did you have a home office during the year?
	Yes No
*Attach detailed schedule	If yes, attach detailed schedule of expenses including mortgage interest
	(or rent), real estate taxes, utilities, property insurance, maintenance & cleaning