

Part 1 - General Income Sources (W-2s and 1099s)

First Name	Middle Name	Last Name	Social Security Number	
Street Address 1	Street Address 2	City	State	Zip Code
Employer or Institution Name	Firm EIN Number	Federal Income Tax Withheld	Federal Taxable Income	Line
				1
				2
				3
				4
				5
				6
				7
				8
				9
				10
	Totals	\$ -	\$ -	11
Effective withholding rate				
Child Support Received From:				
First Name	Last Name	Social Security Number	Amount Received	Line
				12
				13
		Total	\$ -	14
Alimony Received From:				
First Name	Last Name	Social Security Number	Amount Received	Line
				15
				16
		Total	\$ -	17
Early Withdrawals made from Retirement Accounts (Prior to age 62.)				
Withdrawn from: Institution Name	EIN Number	Last Four Digits of Account Number	Total Amount Withdrawn	Line
				18
				19
		Total	\$ -	20
Penalty for early withdrawal from retirement Accounts (50% of Tax Rate)		7.50%	\$ -	21

Part 2 - Investment Income

Net Income or Loss on Assets

Filer	First Name	Middle Name	Last Name	Social Security Number		
Institution / Payer Name	Last Four Digits of Account Number	Federal Income Tax Withheld	Net Income (loss)	Date Sold	Line	
					1	
					2	
					3	
					4	
					5	
					6	
					7	
					8	
					9	
					10	
					11	
					12	
					13	
					14	
					15	
					16	
					17	
					18	
					19	
					20	
There is no deduction for annual net loss.	Total	\$ -	\$ -		21	

NOTE:

Each company with whom you have a taxable investment event is obligated to provide you with a Federal form 1111 by January 31. If you completed a transaction with them during the tax year, they will list each transaction you made during the year, sorted by investment type along with the gain or sale for each transaction. A final summary of transactions will be provided showing the net gain or loss for the year. That is the amount that should be entered on Federal Form 1111.

Any transaction that has multiple purchases of an item will use the average cost of purchase to compute the weighted average cost and then the profits on the transaction.

There is no deduction for a net loss for the full year.

There is no tax loss carryforward.

Each firm is only obligated to provide you with a Federal Form 1111 if your net investment gains for the year are greater than \$1000.00.

Gambling earnings in excess of \$1000.00 should be listed by payer.

Real Property should be physical address of asset.

The first \$250,000 of the net gain on the sale of primary residence is exempt from taxation.

Form 1040		United States of America Federal Individual Tax Return for Year 2018			
Part 3 - Dependents and Deductions					
Filer	First Name	Middle Name	Last Name	Social Security Number	
Dependents: (You must enter yourself if you wish to take yourself as a dependent)					
First Name	Middle Name	Last Name	Date of Birth	Social Security #	Line
					1
					2
					3
					4
					5
					6
					7
					8
					9
					10
Deduction for each qualified dependent is:			\$4,000	Total Dependents	11
Child Support Paid to:					
First Name	Middle Name	Last Name	Social Security Number	Total Amount Received	Line
					12
					13
			Total	\$ -	14
Alimony Paid to:					
First Name	Middle Name	Last Name	Social Security Number	Total Amount Received	Line
					15
					16
			Total	\$ -	17
Contributions made to Retirement Accounts					
sited with: Institution Name		Firm EIN Number	Last Four Digits of Account	Total Amount Invested	Line
					18
					19
					20
					21
Contributions Limited to 25% of total income (1040 Part 2, Line 7)			Total	\$ -	22
2018 Social Security Entitlement in dollars					Line
					23

Form 1040 United States of America Federal Individual Tax Return for Year 2018

Part 4 - Determination of Tax Liability and Amount Due or to be Refunded

	First Name	Middle Name	Last Name	Social Security Number	
	Street Address 1	Street Address 2	City	State	Zip Code
Income					
Line 1	Wages and salaries		\$ -	(From 1040 Part 1) Line 16	
Line 2	Child support received		\$ -	(From 1040 Part 1) Line 21	
Line 3	Alimony received		\$ -	(From 1040 Part 1) Line 25	
Line 4	Early withdrawals from qualified retirement plans		\$ -	(From 1040 Part 1) Line 30	
Line 5	Investment Income		\$ -	(From 1040 Part 2) Line 21	
Line 6	Total Income: Add together lines 1 through 5			\$ -	
Deductions					
Line 7	Allowed deduction for dependents			(From 1040 Part 3) Line 11	
Line 8	Child support paid		\$ -	(From 1040 Part 3) Line 14	
Line 9	Alimony paid		\$ -	(From 1040 Part 3) Line 17	
Line 10	Contributions made to retirement accounts		\$ -	(From 1040 Part 3) Line 22	
Line 11	Credit for Social Security not taken		\$ -	(From 1040 Part 3) Line 23	
Line 12	Total Deductions: Add together lines 7 through 11			\$ -	
Net Taxable Income					
Line 13	Subtract line 12 from line 6 (Enter zero if less than zero)			\$ -	
Taxes					
Line 14	2018 Federal Individual Income Tax Rate (Includes FICA and Medicare, FUTA abolished)			15%	
Line 15	Gross Federal Tax Due: multiply Line 13 times Line 14			\$ -	
Line 16	Enter penalty for early withdrawal of retirement savings if applicable (From 1040 Part 1) Line 21			\$ -	
Line 17	Federal Minimum Tax: if line line 15 is less than \$120, enter \$120.			\$ -	
Line 18	Total Tax Liability			\$ -	
Line 19	Total federal taxes withheld on W-2s, 1099s or other documents			\$ -	
Final Results					
Line 20	If line 18 is greater than line 19, subtract line 18 from line 19 and this is the amount you must pay the IRS by June 30, 2016.			\$ -	
Line 21	If line 19 is greater than or equal to line 18, subtract line 19 from line 18 and this is the amount that the IRS will automatically refund to you by August 31, 2016.			\$ -	
Your effective income tax rate for this tax year is:			(line 6 divided by line 18)		
I understand that if I misrepresent dependents on my tax return I have committed a felony and a jail sentence of in federal prison may be imposed and that I have committed perjury if other errors or omissions are found on this tax return. I further declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.					
Line 22	Your Signature			Date	
Line 23	Email Address			Daytime Phone Number	
Third Party Designee			Do you want to allow another person to discuss this return with the IRS? Type "Yes" here >		
Line 24	Designee's Name (If "YES" checked on line above)		Phone Number	Designee's SS #	
Line 25	Paid Preparer Only		Name	Signature	Date
Line 26	Firm Phone Number		Firm Name	Firm EIN #	PTIN
Line 27	Complete Firm Address: _____				