



ELECTRONIC TAX FILING  
and  
TAX PREPARATION PACKET

"Once a Client - Always a Client"

Visit us at our website [www.cubetax.com](http://www.cubetax.com)

If you have any questions, contact

**CUBE TAX SERVICE**

**512.833.7856**

**email at [fdustin@cubetax.com](mailto:fdustin@cubetax.com)**

## Section I: General Information

Did the IRS adjust your previous year's refund? Y/N      Did you receive an IRS 3094 Letter? Y/N  
 Did you receive a Form 8836? Y/N **(If yes, completed Form 8836(s) must be sent to Cube Tax Service)**

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_ Zip Code: \_\_\_\_\_

(PO Box only if PO will not deliver to your home)

Daytime Telephone: \_\_\_\_\_ Evening Telephone: \_\_\_\_\_ Cell: \_\_\_\_\_

Your email address: \_\_\_\_\_ (To let you know when your return has been accepted)

	First Name	MI	Last Name	Date of Birth	Social Security #	Relationship	# Mos In House
Taxpayer						XXXXX	XXXXX
Spouse						XXXXX	XXXXX
Dependent							
Dependent							
Dependent							
Dependent							
Dependent							
Dependent							

Filing Status: Single: \_\_\_\_ Head of Household: \_\_\_\_ Married Filing Jointly: \_\_\_\_ Married Filing Separately: \_\_\_\_

If you selected Married Filing Separately you do not qualify for electronic filing and the dependent care; EIC; hope and lifetime education credit; and adoption credit generally are not available.

### SIGNATURE

**I understand that Cube Tax Service provides tax preparation service and is not a tax consultant and does not provide tax advice. To the best of my knowledge and belief the information provided to Cube Tax Service is true, correct and complete. I understand that Cube Tax Service does not withhold their fee from my refund.**

Signature \_\_\_\_\_ Date \_\_\_\_\_      Signature \_\_\_\_\_ Date \_\_\_\_\_

## Section II: Additional Information Needed to Have Your Return Prepared

### Sources of Income:

W-2            \_\_\_ NO or \_\_\_ YES    #? \_\_\_\_\_ (attached)  
Interest        \_\_\_ NO or \_\_\_ YES (attach 1099INT)  
Dividends      \_\_\_ NO or \_\_\_ YES (attach 1099DIV)  
Rental          \_\_\_ NO or \_\_\_ YES  
Social Security \_\_\_ NO or \_\_\_ YES (attach 1099Soc Sec)  
Other            \_\_\_\_\_

### Distributions:

IRA            \_\_\_ NO or \_\_\_ YES (attach all 1099R Forms)  
Pension        \_\_\_ NO or \_\_\_ YES (attach all 1099R Forms)

**Attach a copy of last year's return, if not done by  
Cube Tax Service.**

### **SELF-EMPLOYED INCOME/EXPENSES:**

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### **RENTAL INCOME:**

Address of Property/Income/Expenses:

1099 Misc? \_\_\_\_\_

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### **IRA CONTRIBUTIONS MADE FOR TAX YEAR 2012:**

	<u>Deductible</u>	<u>Non-Deductible</u>	<u>Roth</u>
Taxpayer \$	_____	\$ _____	\$ _____
Spouse \$	_____	\$ _____	\$ _____

### **DEDUCTIONS:**

\_\_\_ Itemized or \_\_\_ Standard (if you paid real estate taxes on your home list below)  
Home Interest \$ \_\_\_\_\_ **Real Estate Taxes** \$ \_\_\_\_\_  
Contributions: Cash \$ \_\_\_\_\_ Non Cash \$ \_\_\_\_\_  
**Attach 1098C** valuation if you donated a car or boat.  
State Sales Paid: \$ \_\_\_\_\_  
Other Deductions: \_\_\_\_\_

### **CHILD CARE PROVIDER INFORMATION:**

<u>NAME</u>	<u>ADDRESS</u>	<u>EIN or SS#</u>	<u>\$ AMOUNT</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Number of your children cared for \_\_\_\_\_

### **ADDITIONAL INFORMATION:**

**NOTE:** Attach any 1098's received. If 1098 is not available you **MUST** provide the Name, Address and EIN or SS# of any individual to which you paid interest. This includes interest paid on any home mortgage, rental property, business equipment etc.

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