

Filing status: ☐ Single ☒ Married filing jointly ☐ Married filing separately ☐ Head of household ☐ Qualifying widow(er)

Your first name and initial: David A Last name: Watts Your social security number: [redacted]

Your standard deduction: ☐ Someone can claim you as a dependent ☒ You were born before January 2, 1954 ☐ You are blind

If joint return, spouse's first name and initial: Vivian E Last name: Watts Spouse's social security number: [redacted]

Spouse standard deduction: ☐ Someone can claim your spouse as a dependent ☒ Spouse was born before January 2, 1954 ☒ Full-year health care coverage or exempt (see inst.)

☐ Spouse is blind ☐ Spouse itemizes on a separate return or you were dual-status alien

Home address (number and street). If you have a P.O. box, see instructions. 8717 Mary Lee Apt. no. [redacted] Presidential Election Campaign (see inst.) ☒ You ☒ Spouse

City, town or post office, state, and ZIP code. If you have a foreign address, attach Schedule 6. Annandale VA 22003 If more than four dependents, see inst. and ✓ here ☐

Dependents (see instructions):		(2) Social security number	(3) Relationship to you	(4) ✓ if qualifies for (see inst.):	
(1) First name	Last name			Child tax credit	Credit for other dependents
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

Sign Here Under penalties of perjury, I 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.

Joint return? See instructions. Keep a copy for your records.

Your signature: [redacted] Date: [redacted] Your occupation: consultant

Spouse's signature. If a joint return, both must sign. [redacted] Date: [redacted] Spouse's occupation: state legislator

If the IRS sent you an Identity Protection PIN, enter it here (see inst.) [redacted]

If the IRS sent you an Identity Protection PIN, enter it here (see inst.) [redacted]

Paid Preparer Use Only

Preparer's name: [redacted] Preparer's signature: [redacted] PTIN: [redacted] Firm's EIN: [redacted] Check if: ☐ 3rd Party Designee ☐ Self-employed

Firm's name: Self-Prepared Phone no.: [redacted]

Firm's address: [redacted]

For Disclosure, Privacy Act, and Paperwork Reduction Act Notice, see separate instructions. Form **1040** (2018)

1	Wages, salaries, tips, etc. Attach Form(s) W-2	1	40,140.
2a	Tax-exempt interest	2a	
3a	Qualified dividends	3a	
4a	IRAs, pensions, and annuities	4a	135,090.
5a	Social security benefits	5a	17,576.
6	Total income. Add lines 1 through 5. Add any amount from Schedule 1, line 22	6	387.
7	Adjusted gross income. If you have no adjustments to income, enter the amount from line 6; otherwise, subtract Schedule 1, line 36, from line 6	7	201,253.
8	Standard deduction or itemized deductions (from Schedule A)	8	26,600.
9	Qualified business income deduction (see instructions)	9	
10	Taxable income. Subtract lines 8 and 9 from line 7. If zero or less, enter -0-	10	174,653.
11	a Tax (see inst.) 30,496. (check if any from: 1 <input type="checkbox"/> Form(s) 8814 2 <input type="checkbox"/> Form 4972 3 <input type="checkbox"/>)	11	30,496.
12	b Add any amount from Schedule 2 and check here <input type="checkbox"/>	12	
13	a Child tax credit/credit for other dependents b Add any amount from Schedule 3 and check here <input type="checkbox"/>	13	30,496.
14	Subtract line 12 from line 11. If zero or less, enter -0-	14	0.
15	Other taxes. Attach Schedule 4	15	30,496.
16	Total tax. Add lines 13 and 14	16	31,391.
17	Federal income tax withheld from Forms W-2 and 1099	17	
18	Refundable credits: a EIC (see inst.) b Sch. 8812 c Form 8863	18	31,391.
19	Add any amount from Schedule 5	19	895.
20a	Add lines 16 and 17. These are your total payments	20a	895.
21	If line 18 is more than line 15, subtract line 15 from line 18. This is the amount you overpaid	21	
22	Amount of line 19 you want refunded to you. If Form 8888 is attached, check here <input type="checkbox"/>	22	
23	Routing number <input checked="" type="checkbox"/> Checking <input type="checkbox"/> Savings	23	
24	Account number	24	
25	Amount of line 19 you want applied to your 2019 estimated tax	25	
26	Amount you owe. Subtract line 18 from line 15. For details on how to pay, see instructions	26	
27	Estimated tax penalty (see instructions)	27	



DAVID A WATTS
VIVIAN E WATTS
8717 MARY LEE

ANNANDALE VA 22003

SSN - You ☐ WATT

Vendor ID 1555 XXXXX ☐

SSN - Spouse WATT

Fed Adj Gross Income (FAGI)	1.	201253.	Withholding (VA) - You	20A.	5338.
Additions	2.		Withholding (VA) - Spouse	20B.	2402.
Subtotal	3.	201253.	Estimated Payments	21.	
Age Deduction - You	4A.	12000.	2017 Overpayment	22.	
Age Deduction - Spouse	4B.		Extension Payments	23.	
Soc Sec & Tier 1 Railroad	5.	14940.	Credit - Low-Income or EIC	24.	
State Income Tax Overpayment	6.	387.	Credit - Schedule OSC	25.	
Subtractions	7.		Reserved for Future Use	26.	
Subtotal Subtractions	8.	27327.	Credits - Schedule CR	27.	
Total VA Adj Gross Income (VAGI)	9.	173926.	Total Payments / Credits	28.	7740.
Itemized Deductions - VA Sch. A	10.		Tax You Owe	29.	742.
State / Local Income Tax - VA Sch. A	11.		Tax Overpayment	30.	
Standard / Itemized Deductions	12.	6000.	Overpayment Credited to Next Year	31.	
Exemptions	13.	3460.	VAC - Virginia 529 / ABLEnow	32.	
Deductions: <i>Long Term Care Insurance Premiums</i>	14.	7966.	VAC - Other Contributions	33.	
Subtotal (Deductions & Exemptions)	15.	17426.	Addition to Tax, Penalty & Interest	34.	
VA Taxable Income	16.	156500.	Sales and Use Tax	35.	91.
Amount of Tax	17.	8741.	Amount You Owe		833.
Spouse Tax Adjustment (STA)	18.	259.	Will Pay by Credit/Debit Card	N	
VAGI - Spouse	18A.	57150.	Your Refund		
Net Amount of Tax	19.	8482.	Bank Routing #		
			Bank Account #		

For the year Jan. 1–Dec. 31, 2017, or other tax year beginning , 2017, ending , 20 See separate instructions.

Your first name and initial David A	Last name Watts	Your social security number
If a joint return, spouse's first name and initial Vivian E	Last name Watts	Spouse's social security number
Home address (number and street). If you have a P.O. box, see instructions. 8717 Mary Lee		Apt. no.
City, town or post office, state, and ZIP code. If you have a foreign address, also complete spaces below (see instructions). Annandale VA 22003		Presidential Election Campaign Check here if you, or your spouse if filing jointly, want \$3 to go to this fund. Checking a box below will not change your tax or refund. <input checked="" type="checkbox"/> You <input checked="" type="checkbox"/> Spouse
Foreign country name	Foreign province/state/county Foreign postal code	

Filing Status

1 ☐ Single

2 ☒ Married filing jointly (even if only one had income)

3 ☐ Married filing separately. Enter spouse's SSN above and full name here. ▶

4 ☐ Head of household (with qualifying person). (See instructions.)
If the qualifying person is a child but not your dependent, enter this child's name here. ▶

5 ☐ Qualifying widow(er) (see instructions)

Check only one box.

Exemptions

6a ☒ Yourself. If someone can claim you as a dependent, do not check box 6a

b ☒ Spouse

c Dependents:		(2) Dependent's social security number	(3) Dependent's relationship to you	(4) <input checked="" type="checkbox"/> if child under age 17 qualifying for child tax credit (see instructions)
(1) First name	Last name			
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

If more than four dependents, see instructions and check here ☐

d Total number of exemptions claimed

Boxes checked on 6a and 6b 2

No. of children on 6c who:
• lived with you
• did not live with you due to divorce or separation (see instructions)

Dependents on 6c not entered above

Add numbers on lines above ▶ 2

Income

7 Wages, salaries, tips, etc. Attach Form(s) W-2 7 35,940.

8a Taxable interest. Attach Schedule B if required 8a

b Tax-exempt interest. Do not include on line 8a 8b

9a Ordinary dividends. Attach Schedule B if required 9a 51.

b Qualified dividends 9b 51.

10 Taxable refunds, credits, or offsets of state and local income taxes 10 996.

11 Alimony received 11

12 Business income or (loss). Attach Schedule C or C-EZ 12

13 Capital gain or (loss). Attach Schedule D if required. If not required, check here ☐ 13

14 Other gains or (losses). Attach Form 4797 14

15a IRA distributions 15a b Taxable amount 15b 14,748.

16a Pensions and annuities 16a 132,485. b Taxable amount 16b 125,988.

17 Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E 17

18 Farm income or (loss). Attach Schedule F 18

19 Unemployment compensation 19

20a Social security benefits 20a 17,234. b Taxable amount 20b 14,649.

21 Other income. List type and amount 21

22 Combine the amounts in the far right column for lines 7 through 21. This is your **total income** ▶ 22 192,372.

Adjusted Gross Income

23 Educator expenses 23

24 Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106 or 2106-EZ 24

25 Health savings account deduction. Attach Form 8889 25

26 Moving expenses. Attach Form 3903 26

27 Deductible part of self-employment tax. Attach Schedule SE 27

28 Self-employed SEP, SIMPLE, and qualified plans 28

29 Self-employed health insurance deduction 29

30 Penalty on early withdrawal of savings 30

31a Alimony paid b Recipient's SSN ▶ 31a

32 IRA deduction 32

33 Student loan interest deduction 33

34 Tuition and fees. Attach Form 8917 34

35 Domestic production activities deduction. Attach Form 8903 35

36 Add lines 23 through 35 36

37 Subtract line 36 from line 22. This is your **adjusted gross income** ▶ 37 192,372.

SCHEDULE A
(Form 1040)

Department of the Treasury
Internal Revenue Service (99)

Itemized Deductions

► Go to www.irs.gov/ScheduleA for instructions and the latest information.

► Attach to Form 1040.

Caution: If you are claiming a net qualified disaster loss on Form 4684, see the instructions for line 28.

OMB No. 1545-0074

2017

Attachment
Sequence No. **07**

Name(s) shown on Form 1040

David A & Vivian E Watts

Your social security number

Medical and Dental Expenses	Caution: Do not include expenses reimbursed or paid by others.			
	1	Medical and dental expenses (see instructions)	1	16,121.
	2	Enter amount from Form 1040, line 38 2		192,372.
	3	Multiply line 2 by 7.5% (0.075).	3	14,428.
	4	Subtract line 3 from line 1. If line 3 is more than line 1, enter -0-	4	1,693.
Taxes You Paid	5 State and local (check only one box):			
	a	<input checked="" type="checkbox"/> Income taxes, or	5	7,519.
	b	<input type="checkbox"/> General sales taxes		
	6	Real estate taxes (see instructions)	6	7,163.
	7	Personal property taxes	7	842.
	8	Other taxes. List type and amount ► Foreign Taxes Int Div	8	13.
	9	Add lines 5 through 8	9	15,537.
	Interest You Paid	10	Home mortgage interest and points reported to you on Form 1098	10
11		Home mortgage interest not reported to you on Form 1098. If paid to the person from whom you bought the home, see instructions and show that person's name, identifying no., and address ►	11	
12		Points not reported to you on Form 1098. See instructions for special rules	12	
13		Mortgage insurance premiums (see instructions)	13	
14		Investment interest. Attach Form 4952 if required. See instructions	14	
15		Add lines 10 through 14	15	
Gifts to Charity		16	Gifts by cash or check. If you made any gift of \$250 or more, see instructions.	16
	17	Other than by cash or check. If any gift of \$250 or more, see instructions. You must attach Form 8283 if over \$500	17	
	18	Carryover from prior year	18	
	19	Add lines 16 through 18	19	4,655.
Casualty and Theft Losses	20	Casualty or theft loss(es) other than net qualified disaster losses. Attach Form 4684 and enter the amount from line 18 of that form. See instructions	20	
Job Expenses and Certain Miscellaneous Deductions	21	Unreimbursed employee expenses—job travel, union dues, job education, etc. Attach Form 2106 or 2106-EZ if required. See instructions. ► Employee business expenses	21	19,424.
	22	Tax preparation fees	22	
	23	Other expenses—investment, safe deposit box, etc. List type and amount ►	23	
	24	Add lines 21 through 23	24	19,424.
	25	Enter amount from Form 1040, line 38 25		192,372.
	26	Multiply line 25 by 2% (0.02)	26	3,847.
	27	Subtract line 26 from line 24. If line 26 is more than line 24, enter -0-	27	15,577.
Other Miscellaneous Deductions	28	Other—from list in instructions. List type and amount ►	28	
Total Itemized Deductions	29	Is Form 1040, line 38, over \$156,900? <input type="checkbox"/> No. Your deduction is not limited. Add the amounts in the far right column for lines 4 through 28. Also, enter this amount on Form 1040, line 40. <input checked="" type="checkbox"/> Yes. Your deduction may be limited. See the Itemized Deductions Worksheet in the instructions to figure the amount to enter.	29	37,462.
	30	If you elect to itemize deductions even though they are less than your standard deduction, check here <input type="checkbox"/>		

Employee Business Expenses

▶ Attach to Form 1040 or Form 1040NR.

▶ Go to www.irs.gov/Form2106 for instructions and the latest information.

Your name

Vivian E Watts

Occupation in which you incurred expenses

state legislator

Social security number

Part I Employee Business Expenses and Reimbursements**Step 1 Enter Your Expenses**

	Column A Other Than Meals and Entertainment	Column B Meals and Entertainment
1 Vehicle expense from line 22 or line 29. (Rural mail carriers: See instructions.)	2,330.	
2 Parking fees, tolls, and transportation, including train, bus, etc., that didn't involve overnight travel or commuting to and from work	204.	
3 Travel expense while away from home overnight, including lodging, airplane, car rental, etc. Don't include meals and entertainment.	8,006.	
4 Business expenses not included on lines 1 through 3. Don't include meals and entertainment	17,240.	
5 Meals and entertainment expenses (see instructions)		4,069.
6 Total expenses. In Column A, add lines 1 through 4 and enter the result. In Column B, enter the amount from line 5	27,780.	4,069.

Note: If you weren't reimbursed for any expenses in Step 1, skip line 7 and enter the amount from line 6 on line 8.**Step 2 Enter Reimbursements Received From Your Employer for Expenses Listed in Step 1**

7 Enter reimbursements received from your employer that weren't reported to you in box 1 of Form W-2. Include any reimbursements reported under code "L" in box 12 of your Form W-2 (see instructions).	9,681.	1,419.
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Step 3 Figure Expenses To Deduct on Schedule A (Form 1040 or Form 1040NR)

8 Subtract line 7 from line 6. If zero or less, enter -0-. However, if line 7 is greater than line 6 in Column A, report the excess as income on Form 1040, line 7 (or on Form 1040NR, line 8)	18,099.	2,650.
Note: If both columns of line 8 are zero, you can't deduct employee business expenses. Stop here and attach Form 2106 to your return.		
9 In Column A, enter the amount from line 8. In Column B, multiply line 8 by 50% (0.50). (Employees subject to Department of Transportation (DOT) hours of service limits: Multiply meal expenses incurred while away from home on business by 80% (0.80) instead of 50%. For details, see instructions.)	18,099.	1,325.
10 Add the amounts on line 9 of both columns and enter the total here. Also, enter the total on Schedule A (Form 1040), line 21 (or on Schedule A (Form 1040NR), line 7). (Armed Forces reservists, qualified performing artists, fee-basis state or local government officials, and individuals with disabilities: See the instructions for special rules on where to enter the total.) . ▶		19,424.



DAVID A WATTS
VIVIAN E WATTS
8717 MARY LEE

ANNANDALE VA 22003

SSN - You [WATT Vendor ID 1555 XXXXX]

SSN - Spouse WATT

Fed Adj Gross Income (FAGI)	1	192372	Withholding (VA) - You	20A.	5353
Additions	2.	4809	Withholding (VA) - Spouse	20B.	2166
Subtotal	3.	197181	Estimated Payments	21.	
Age Deduction - You	4A.	12000	2016 Overpayment	22.	
Age Deduction - Spouse	4B.		Extension Payments	23.	
Soc Sec & Tier 1 Railroad	5.	14649	Credit - Low-Income or EIC	24.	
State Income Tax Overpayment	6.	996	Credit - Schedule OSC	25.	
Subtractions	7.		Reserved for Future Use	26.	
Subtotal Subtractions	8.	27645	Credits - Schedule CR	27.	
Total VA Adj Gross Income (VAGI)	9.	169536	Total Payments / Credits	28.	7519
Fed Itemized Deductions	10.	37462	Tax You Owe	29.	
State / Local Income Tax	11.	7519	Tax Overpayment	30.	208
Standard / Itemized Deductions	12.	29943	Overpayment Credited to Next Year	31.	
Exemptions	13.	3460	VAC - College Savings / ABLEnow	32.	
Deductions	14.		VAC - Other Contributions	33.	50
Subtotal (Deductions & Exemptions)	15.	33403	Addition to Tax, Penalty & Interest	34.	
VA Taxable Income	16.	136133	Sales and Use Tax	35.	81
Amount of Tax	17.	7570	Amount You Owe		
Spouse Tax Adjustment (STA)	18.	259	Will Pay by Credit/Debit Card N		
VAGI - Spouse	18A.	58387	Your Refund [77
Net Amount of Tax [19.	7311	Bank Routing # C		
			Bank Account #		

_____ DTD _____ LTD \$_____

Tax History Report

► Keep for your records

2018

Name(s) Shown on Return

David A & Vivian E Watts

	Five Year Tax History:				
	2014	2015	2016	2017	2018
Filing status	MFJ	MFJ	MFJ	MFJ	MFJ
Total income	306,490.*	195,105.	198,065.	192,372.	201,253.
Adjustments to income					
Adjusted gross income	306,490.	195,105.	198,065.	192,372.	201,253.
Tax expense	20,728.	15,943.	16,375.	15,537.	10,000.
Interest expense . . .					
Contributions	3,530.	4,235.	5,155.	4,655.	4,660.
Misc. deductions . . .	13,116.	16,522.	13,838.	15,577.	
Other itemized ded'ns	4,409.	12,335.	9,431.	1,693.	0.
Total itemized/ standard deduction . .	41,740.	49,035.	44,799.	37,462.	26,600.
Exemption amount . .	7,742.	8,000.	8,100.	8,100.	0.
QBI deduction					
Taxable income	257,008.	138,070.	145,166.	146,810.	174,653.
Tax	58,847.	26,101.	27,830.	28,175.	30,496.
Alternative min tax . .	7,476.		867.		
Total credits					
Other taxes	381.				
Payments	55,204.	34,577.	35,424.	34,265.	31,391.
Form 2210 penalty . .					
Amount owed	11,500.				
Applied to next year's estimated tax .					
Refund		8,476.	6,727.	6,090.	895.
Effective tax rate % . .	21.64	13.38	14.49	14.65	15.15
**Tax bracket %	33.0	25.0	25.0	25.0	24.0

**Tax bracket % is based on Taxable income.

* Large IRA withdrawal
for house renovation and car purchase