1040		artment of the Treasury-Internal Revenue S. Individual Income		x Return	201	8	MB No. 1545-00	74 IRS Use	Only-Do not w	rrite or staple in this space.
Filing status:	Si	ngle Married filing jointly	Marrie	ed filing separate	elv He	ad of house	ehold Qual	lifying widow(e	r)	
Your first name		0 _ 0, , _	Τ.	Last name	.,			,	<u> </u>	cial security number
Your standard of	deduction	on: Someone can claim you	as a de	pendent \(\)	You were bo	rn before J	anuary 2, 1954	You	are blind	
If joint return, sp	ouse's	first name and initial	ı	Last name					Spouse	's social security number
Spouse standard	deductio	n: Someone can claim your spo	use as	a dependent	Spou	se was borr	n before January	2, 1954	ı —	-year health care coverag
Spouse is blind Spouse itemizes on a separate return or you were dual-status alien							T	or e	exempt (see inst.)	
Home address (number and street).						Apt. no.	Preside (see ins	ntial Election Campaign		
		1710			0				(000 1110	You Spouse
City, town or po	st office	e, state, and ZIP code. If you have a	foreign	address, attach	Schedule 6				I	than four dependents,
Donandants	(coo ir	estructions):		I		40.5.				and check here
Dependents	(See II	,		(2) Social secur	rity number	(3) Rela	ationship to you		Check if qual ax credit	lifies for (see inst.): Credit for other dependents
(1) First name		Last name						Offind to	7	
]	
									1	H
]	
Sign	Under p	penalties of perjury, I declare that I have ex	kamined	this return and acc	companying s	hedules and	statements, and to	the best of my l	nowledge and	d belief, they are true,
Here		and complete. Declaration of preparer (ot							· ·	
Joint return?	Y	our signature		Date	Yo	ur occupation	1		If the IRS s	ent you an Identity Protection
See instructions.									PIN, enter i here (see ir	
Keep a copy for your records.	S	pouse's signature. If a joint return, both m	Date	Sp	Spouse's occupation			If the IRS s	ent you an Identity Protection	
,									PIN, enter i here (see ir	
Paid	Pr	eparer's signature					PTIN	Firm's E	IN	Check if:
Preparer	_									3rd Party Designer
Use Only Preparer's name							Phone n	10.		Self-employed
,	Fir	m's name ►								
	Fir	m's address								
For Disclosure,	Privac	y Act, and Paperwork Reduction A	Act Not	ice, see separa	te instructi	ons.				Form 1040 (2018
F 4040 (0040										D (
Form 1040 (2018	<u>)</u> 1	Magaz calarias tips ata Attach F	-a === (a)	W 2					1	Page 2
	2a	Wages, salaries, tips, etc. Attach F Tax-exempt interest	2a			, , , , ,	axable interest		1 2b	
Attach Form(s)	3a	Qualified dividends	3a				rdinary dividend	• • • • •	3b	
W-2. Also attach Form(s) W-2G and 1099-R if tax was withheld.	4a	IRAs, pensions, and annuities .	4a				axable amount		4b	
	5a	Social security benefits · · ·	5a				axable amount		5b	
	6	Total income. Add lines 1 through 5. Add		nount from Schedul	le 1, line 22				6	
	7	Adjusted gross income If you have	no od	iuatmanta ta inac	ma ontart	no omount f	irom lina 6: atha	nuino		
	, 1	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								
Deduction for-	8	Standard deduction or itemized	deduct	ions (from Sche	dule A)				8	
Single or married filing separately,	9	Qualified business income deduction	on (see	instructions)					9	
\$12,000	10	Taxable income. Subtract lines 8 a			or less, ent	er-0	<u></u>		10	
Married filing jointly or Qualifying	11	a Tax (see inst)	(chec	rom: 1 Form	n(s) 8814 2	Form 4	972 3)		
widow(er), \$24,000		b Add any amount from Schedule	2 and c	check here .				▶ ∐	11	
Head of	12	a Child tax credit/credit for other dependents b Add any amount from Schedule 3 & check here								
household, \$18,000	13	Subtract line 12 from line 11. If zero or less, enter -0-							13	
If you checked any box under	14	Other taxes. Attach Schedule 4							14	
Standard deduction, see instructions.	15	Total tax. Add lines 13 and 14							15	
	16	Federal income tax withheld from F							16	
	17	Refundable credits: a EIC (see inst.)								
	40	Add lines 16 and 17. These are us							17	
	18	Add lines 16 and 17. These are your total payments							18	
Refund	19 202					•	•		19	
Direct deposit?	20a ► b	Amount of line 19 you want refund	ieu to) 	you. II Form 888	o is attache				20a	
See instructions.	► b ► d	Routing number Account number	+		+	c Type:	Checking	Savings		
,	21	Account number Amount of line 19 you want applie	d to vo	ur 2019 actimat	ted tax	▶ 21				
Amount You Owe		Amount you owe. Subtract line 1					nstructions		22	
Amount fou Owe	23	Estimated tax negalty (see instruct		10. 1 01 0610		D pay, see 1				