1040	Department of the Treasury—Internal Reven U.S. Individual Income	ue Service Tax Re		99) n	20	18 OMB No.	1545-00	74 IRS Use C	Dnly—Do not w	rite or staple in this space.		
Filing status:	Single Married filing jointly	Married	filing s	epara	ately 🗌 F	lead of household	Qua	alifying widow(er)			
Your first name and initial			Last name						Your so	Your social security number		
Your standard ded	uction: 📃 Someone can claim yo	u as a depen	ident		You were	oorn before Januar	/ 2, 1954	You	are blind			
If joint return, spouse's first name and initial				Last name					Spouse's social security number			
Spouse standard deduction: Someone can claim your spouse as a dependent Spouse was born before January 2, 1954 Spouse is blind Spouse itemizes on a separate return or you were dual-status alien										Full-year health care coverage or exempt (see inst.)		
Home address (number and street). If you have a P.O. box, see instructions.								Apt. no.	Presidential Election Campaign (see inst.) You Spouse			
City, town or post of	office, state, and ZIP code. If you have	e a foreign ac	ddress	, atta	ich Schedule	e 6.				han four dependents, and ✓ here ►		
Dependents (se	e instructions):	(2) Soci	ocial security number (3) Relations		(3) Relationship	ip to you (4) 🗸 if qualifies for (see inst.):			
(1) First name Last name								Child ta:	k credit	Credit for other dependents		
		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, t, 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			Date	e	Your occupation	our occupation		If the IRS sent you an Identity Protection PIN, enter it here (see inst.)			
	Spouse's signature. If a joint return, both must sign.				Date Spouse's occupation					If the IRS sent you an Identity Protection PIN, enter it here (see inst.)		
Paid Preparer	Preparer's name Preparer's signature								Firm's EIN	Check if:		
										3rd Party Designee		
	Firm's name ►							no.		Self-employed		
Use Only	Firm's address ►											
For Disclosure, Priv	vacy Act, and Paperwork Reduction	Act Notice,	, see s	separ	rate instruct	ions.	Cat.	No. 11320B		Form 1040 (2018)		

Form 1040 (2018))							Page	∍2
	1	Wages, salaries, tips, et. Attach F		1		_			
Attach Form(s) W-2. Also attach Form(s) W-2G and 1099-R if tax was withheld.	2a	Tax-exempt interest	2a		b Taxable interest		2b		
	3a	Qualified dividends	3a		b Ordinary dividends .		3b		
	4a	IRAs, pensions, and annuities .	4a		b Taxable amount		4b		
	5a	Social security benefits	5a		b Taxable amount		5b		
	6	Total income. Add lines 1 through 5. Add		6					
Standard Deduction for – • Single or married filing separately, \$12,000 • Married filing jointly or Qualifying widow(er), \$24,000	7	Adjusted gross income. If you ha		_					
		subtract Schedule 1, line 36, from		7					
	8	Standard deduction or itemized de		8					
	9	Qualified business income deducti	E E	9					
	10	Taxable income. Subtract lines 8 a		10					
	11	a Tax (see inst.) (check		11					
		b Add any amount from Schedule 2 and check here							
 Head of household, \$18,000 	12	a Child tax credit/credit for other dependents b Add any amount from Schedule 3 and check here >					12		
	13	Subtract line 12 from line 11. If zer	E E	13					
If you checked any box under Standard deduction, see instructions.	14	Other taxes. Attach Schedule 4 .	-	14					
	15	Total tax. Add lines 13 and 14 .	·	15					
	16	Federal income tax withheld from I					16		
	17	Refundable credits: a EIC (see inst.)							
		Add any amount from Schedule 5	·			•	17		
	18	Add lines 16 and 17. These are you	ur total payments .				18		
Refund	19	If line 18 is more than line 15, subt	·	19					
	20a	Amount of line 19 you want refund		20a					
Direct deposit? See instructions.	►b	Routing number	ngs						
	► d	Account number							
	21	Amount of line 19 you want applied	to your 2019 estimated	tax 🕨	21				
Amount You Owe	22	Amount you owe. Subtract line 18		22		_			
	23	Estimated tax penalty (see instruct	ions)		23				