104		artment of the Treasury—Internal Revenue Se 5. Individual Income Ta		(99) Return)	201	9 OMB NO	o. 1545-0	0074 IRS Use Only	r−Do not v	vrite or s	staple in this	s space.
Filing Status Check only one box.	If yo	Single Married filing jointly Married filing separately (MFS) Head of household (HOH) Qualifying widow(er) (QW) ou checked the MFS box, enter the name of spouse. If you checked the HOH or QW box, enter the child's name if the qualifying person is nild but not your dependent.											
Your first name	La	st name						Your social security number					
If joint return, spouse's first name and middle initial				Last name							's socia	al security	/ number
								Check her jointly, wa Checking a	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				
Foreign country name				Foreign province/state/county Foreign po				Foreign postal code	tax or refund. You Spouse If more than four dependents, see instructions and ✓ here ►				
Standard Deduction		eone can claim: You as a dependent Your spouse as a dependent Spouse itemizes on a separate return or you were a dual-status alien											
Age/Blindness	You:	Were born before January 2, 195	5	Are blin	d	Spouse:	Was born	before .	January 2, 1955	Is bl	ind		
Dependents (see instructions): (2) Social security number (3) Relationship to you (4) ✓ if qua (1) First name Last name Child tax credit									•	structions): for other de			
Standard Deduction for— • Single or Married filing separately, \$12,200 • Married filing jointly or Qualifying widow(er), \$24,400 • Head of household, \$18,350 • If you checked any box under <i>Standard</i> <i>Deduction</i> , see instructions.	1 2a 3a 4a c 5a 6 7a b 8a b 9 10 11a b	Wages, salaries, tips, etc. Attach For Tax-exempt interest Qualified dividends IRA distributions Pensions and annuities Social security benefits Capital gain or (loss). Attach Schedul Other income from Schedule 1, line 9 Add lines 1, 2b, 3b, 4b, 4d, 5b, 6, and Adjustments to income from Schedul Subtract line 8a from line 7b. This is y Standard deduction or itemized de Qualified business income deduction Add lines 9 and 10	2a 3a 4a 4c 5a a D if 1 7a. T a 1, lir your a duction Attack	required. If his is your he 22 . djusted gr ons (from S ch Form 89 	r tota ross i Schec	I income income dule A) r Form 8995	 b Ordinary div b Taxable am d Taxable am b Taxable am b Taxable am c A A A A A A A A A A A A A A A A A A A	idends. A Iount Iount	ach Sch. B if requir ttach Sch. B if requir				
For Disclosure, Privacy Act, and Paperwork Beduction Act Notice, see separate instructions.										. 11	•	Form 10	40 (2019)

Orgin Here Here Vour signature Joint return? Date Your occupation See instructions. Keep a copy for your records. Spouse's signature. If a joint return, both must sign. Date Spouse's occupation Phone no. Email address Paid Preparer's name Preparer's signature Date PTIN Check if: 3rd Party Designature Date PTIN Check if:	Form 1040 (2019	9)										Page 2	
13a Child tax credit or credit for other dependents 13a b Add Schedule 3, line 7, and line 13a and enter the total + 14 Subtract line 13b from line 12b, if are or less, enter-0. 14 15 Other taxes, including self-employment tax, from Schedule 2, line 10 15 16 Add lines 14 and 15. This is your total tax + 17 Federal income tax withheld from Forms W2- and 1099 + * if you have a substration condition withheld from Forms W2- and 1099 + 17 • if you have a substration condition with end form Form 8863, line 8 18a - • if you have a substration with the form Form 8863, line 8 18a - - • if you have a substration with the 13b and the region with the anount you overpaid 20 - - • Add lines 12 and 18e. These are your total ther payments and refundable credits > 19 - 20 11a - - - - 21a Amount of line 2 you wart refunded to you. IF orm 8865 is tatabeed, end beck here - - - 21a 21a Amount of line 2 you wart refunded to you. IF orm 8865 is tatabeed, end beck here - 22a - - <th></th> <th>12a</th> <th>Tax (see ins</th> <th>st.) Check if any from Fo</th> <th>orm(s): 1 🗌 8814</th> <th>4 2 🗌 4972</th> <th>3</th> <th>12a</th> <th></th> <th></th> <th></th> <th></th>		12a	Tax (see ins	st.) Check if any from Fo	orm(s): 1 🗌 8814	4 2 🗌 4972	3	12a					
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Amount You Owe 23 Amount you owe. Subtract line 19 from line 16. For details on how to pay, see instructions ▶ 23 Third Party Designee (Other than paid preparer) Do you want to allow another person (other than your paid preparer) to discuss this return with the IRS? See instructions. ▶ 24 Sign Here Designee's name Phone name Phone no. Personal identification number (PIN) ▶ Joint return? See instructions. 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 correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge. Joint return? See instructions. Spouse's signature. If a joint return, both must sign. Date Your occupation If the IRS sent you an Identify Protection PIN, enter it here (see inst.) Phone no. Email address Phone no. Email address Preparer's name Preparer's signature Date PTIN Check if: 3rd Party Designer's name Preparer's name ▶ Preparer's signature Date Ptone no. Self-employe	See instructions.	►d	Account nu	imber									
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Go to www.irs.gov/Form1040 for instructions and the latest information.

Form **1040** (2019)