Department of the Treasury—Internal Revenue Service (99)
U.S. Individual Income Tax Return

For Disclosure, Privacy Act, and Paperwork Reduction Act Notice, see separate instructions.

IRS Use Only—Do not write or staple in this space.

Form **1040** (2020)

Cat. No. 11320B

Filing Status		Single  Married filing jointly	Marrie	d filing	separ	rately (N	IFS)	Head of	hous	sehold (HOH)		Qua	lifying wi	dow(e	r) (QW)
Check only one box.		u checked the MFS box, enter the noon is a child but not your dependent		our spo	ouse.	If you ch	neck	ed the HOH o	r QV	V box, enter	the cl	hild's	name if	the qu	alifying
Your first name	and mi	ddle initial	Last nar	ne							Yo	ur so	cial secu	rity nui	mber
Anthony Kelly											9	8	0 9 7	0 2	0 0
If joint return, sp	ouse's	first name and middle initial	Last nar	ne							Sp	ouse'	's social s	ecurity	number
Lauren			Watsor	n							0	5	6 0 4	1 0	8 5
Home address (	numbe	er and street). If you have a P.O. box, see	instructio	ns.						Apt. no.	Pre	eside	ntial Elec	tion Ca	ampaign
10221 COMPT	ON L	OS ANGELES CA 90002-2805 USA	A							10221			here if you		
City, town, or po	ost offic	ce. If you have a foreign address, also co	mplete sp	aces be	low.		State	Э	ZIP	code			if filing jo this fund		
615 E 80TH L	AN ac	NGELES CA 90001-3255 USA						LA		61500		_	ow will no		•
Foreign country	name		F	oreign p	rovinc	e/state/c	ounty	/	For	eign postal cod	le yo	ur tax	k or refund	d.	· ·
N/A			N	I/A						N/A			You		Spouse
At any time dur	ring 20	020, did you receive, sell, send, exch	nange, o	r otherv	vise a	acquire a	any f	inancial intere	est ir	any virtual	currer	ncy?	Yes	<b>✓</b>	No
Standard	Som	eone can claim:	pendent		Your	spouse	as a	a dependent							
Deduction		Spouse itemizes on a separate return or you were a dual-status alien													
Age/Blindness	You:	✓ Were born before January 2, 1	956	Are b	lind	Spo	use:	Was bo	rn be	efore Januar	y 2, 19	956	✓ Is b	olind	
Dependents	(see	instructions):							(4) 🗸 if	f qualifies for (see instructions):					
If more	<b>(1)</b> Fi	1) First name Last name						to you		Child tax	credit	t	Credit for o	ther de	pendents
than four	E	Evelyn Collins			005 78 5758			friend							
dependents, see instructions	. ——														
and che <u>ck</u>														<u>Ц</u>	
here ▶ 🔲												$\overline{}$		Ш	
A44 I-	1_	Wages, salaries, tips, etc. Attach F	orm(s) V	V-2 .								1			2501
Attach Sch. B if	2a	Tax-exempt interest	2a				<b>b</b> Ta	xable interes	t			2b	)		5202
required.	3a	Qualified dividends	3a				<b>b</b> Or	dinary divide	ends			3b	)		3405
	4a	IRA distributions	4a				<b>b</b> Ta	xable amoun	t.			4b	)		4508
	5a	Pensions and annuities	5a				<b>b</b> Ta	xable amoun	t.			5b	)		1008
Standard	6a	,	6a					xable amoun	t.		·	6b	)		2004
Deduction for— Single or	7	Capital gain or (loss). Attach Scheo	dule D if	require	d. If r	not requi	ired,	check here		•	Ш	7			3006
Married filing separately,	8	Other income from Schedule 1, lin										8			4006
\$12,400	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7,	and 8. Tl	his is yo	our <b>to</b>	tal inco	me				<b>•</b>	9			46708
Married filing jointly or	10	Adjustments to income:						1	1						
Qualifying	а	From Schedule 1, line 22						10	а		6538	_			
widow(er), \$24,800	b	Charitable contributions if you take	the stan	dard de	duction	on. See	instr	uctions 10	b		6536				
Head of	С	Add lines 10a and 10b. These are	your <b>tot</b> a	al adjus	stme	nts to in	com	ne			•	100	С		6455
household, \$18,650	11	Subtract line 10c from line 9. This	is your <b>a</b>	djuste	d gro	ss inco	me					11			7658
If you checked any box under	12	Standard deduction or itemized	deducti	ons (fro	m Sc	hedule	A)					12	?		3427
Standard	13	Qualified business income deducti	on. Atta	ch Forn	n 899	5 or For	m 89	995-A				13	В		8009
Deduction, see instructions.	14	Add lines 12 and 13										14			6008
	15	Taxable income. Subtract line 14	from line	e 11. If a	zero d	or less, e	enter	-0				15	<b>i</b>		1055

Form 1040 (2020	)						Page <b>2</b>	
	16	Tax (see instructions). Check if any from Form(s): 1 🗸 88	14 <b>2</b> 4972	3 🗌		16	2350	
	17	Amount from Schedule 2, line 3				17	5437	
	18	Add lines 16 and 17				18	1000	
	19	Child tax credit or credit for other dependents				19	753	
	20	Amount from Schedule 3, line 7				20	5430	
	21	Add lines 19 and 20				21	15790	
	22	Subtract line 21 from line 18. If zero or less, enter -0				22	5436	
	23	Other taxes, including self-employment tax, from Sched	le 2, line 10			23	7650	
	24	Add lines 22 and 23. This is your total tax			. ▶	24	12780	
	25	Federal income tax withheld from:						
	а	Form(s) W-2		25a	4220			
	b	Form(s) 1099		25b	1000			
	С	Other forms (see instructions)		25c	2000			
	d	Add lines 25a through 25c				25d	6220	
If you have a	26	2020 estimated tax payments and amount applied from	2019 return			26	5438	
qualifying child,	27	Earned income credit (EIC)		27	4359			
attach Sch. EIC.	28	Additional child tax credit. Attach Schedule 8812		28	5326			
nontaxable	29	American opportunity credit from Form 8863, line 8		29	6743			
combat pay, see instructions.	30	Recovery rebate credit. See instructions		30	4562			
	31	Amount from Schedule 3, line 13		31	2428			
	32	Add lines 27 through 31. These are your total other pay	ments and refundal	ble credits	. ▶	32	6534	
	33	Add lines 25d, 26, and 32. These are your total paymen	s		. ▶	33	3657	
Refund	34	If line 33 is more than line 24, subtract line 24 from line 3	3. This is the amoun	t you <b>overpaid</b>		34	6338	
Heruna	35a	Amount of line 34 you want refunded to you. If Form 88	▶ □	35a	6335			
Direct deposit?	▶b	Routing number 0 5 2 0 8 8 8 6 3	▶ c Type:	Savings				
See instructions.	►d	Account number 5 2 0 6 3 4 0 0 4 4	4 0 1 0 0	4				
	36	Amount of line 34 you want applied to your 2021 estimate	ted tax 🕨	36	45830			
Amount	37	Subtract line 33 from line 24. This is the amount you ow	e now		. ▶	37	6430	
You Owe		Note: Schedule H and Schedule SE filers, line 37 may	f the taxes you o	we for				
For details on how to pay, see		2020. See Schedule 3, line 12e, and its instructions for d	nstructions for details.					
instructions.	38	Estimated tax penalty (see instructions)		38	1250			
Third Party		you want to allow another person to discuss this re-						
Designee		ructions			•		✓ No	
		ignee's Phoi			nal identif er (PIN)			
Ciana		er penalties of periury, I declare that I have examined this return a					et of my knowledge and	
Sign		ef, they are true, correct, and complete. Declaration of preparer (ot	, , ,		,		,	
Here	Yo	r signature Date	Your occupation		If the	IRS se	nt you an Identity	
	<b>k</b>	anthony kelly 12/10/1986	Judge		- 1		IN, enter it here	
Joint return? See instructions.					· `	nst.) ►		
Keep a copy for	Sp	use's signature. If a joint return, <b>both</b> must sign. Date	Spouse's occupation	on			nt your spouse an ection PIN, enter it here	
your records.		laren waston 02/19/1978	nurse		- 1	nst.) ►		
	Ph	ne no. 00141386308 Email addres	mirachael123@g	mail.com.us				
Doid	Pre	parer's name Preparer's signature		Date	PTIN		Check if:	
Paid	Mark	Collins	rk collins	10/20/1990	0987	0	Self-employed	
Preparer	Fire	n's name ► STATE company		-	Phon	Phone no. 8760765000876		
Use Only	Fire	n's address ► 2025 E 76TH LOS ANGELES CA 90001-27	12 USA		Firm'	s EIN 🕨	▶ 080686	
Go to www.irs.go	ov/Forn	1040 for instructions and the latest information.					Form <b>1040</b> (2020)	

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Check only one box.		u checked the MFS box, enter the noon is a child but not your dependent		our spo	ouse.	If you ch	neck	ed the HOH o	r QV	V box, enter	the cl	hild's	name if	the qu	alifying
Your first name	and mi	ddle initial	Last nar	ne							Yo	ur so	cial secu	rity nui	mber
Anthony Kelly											9	8	0 9 7	0 2	0 0
If joint return, sp	ouse's	first name and middle initial	Last nar	ne							Sp	ouse'	's social s	ecurity	number
Lauren			Watsor	n							0	5	6 0 4	1 0	8 5
Home address (	numbe	er and street). If you have a P.O. box, see	instructio	ns.						Apt. no.	Pre	eside	ntial Elec	tion Ca	ampaign
10221 COMPT	ON L	OS ANGELES CA 90002-2805 USA	A							10221			here if you		
City, town, or po	ost offic	ce. If you have a foreign address, also co	mplete sp	aces be	low.		State	Э	ZIP	code			if filing jo this fund		
615 E 80TH L	AN ac	NGELES CA 90001-3255 USA						LA		61500		_	ow will no		•
Foreign country	name		F	oreign p	rovinc	e/state/c	ounty	/	For	eign postal cod	le yo	ur tax	k or refund	d.	·
N/A			N	I/A						N/A			You		Spouse
At any time dur	ring 20	020, did you receive, sell, send, exch	nange, o	r otherv	vise a	acquire a	any f	inancial intere	est ir	any virtual	currer	ncy?	Yes	<b>✓</b>	No
Standard	Som	eone can claim:	pendent		Your	spouse	as a	a dependent							
Deduction		Spouse itemizes on a separate return or you were a dual-status alien													
Age/Blindness	You:	✓ Were born before January 2, 1	956	Are b	lind	Spo	use:	Was bo	rn be	efore Januar	y 2, 19	956	✓ Is b	olind	
Dependents	(see	instructions):							(4) 🗸 if	f qualifies for (see instructions):					
If more	<b>(1)</b> Fi	1) First name Last name						to you		Child tax	credit	t	Credit for o	ther de	pendents
than four	E	Evelyn Collins			005 78 5758			friend							
dependents, see instructions	. ——														
and che <u>ck</u>														<u>Ц</u>	
here ▶ 🔲												$\overline{}$		Ш	
A44 I-	1_	Wages, salaries, tips, etc. Attach F	orm(s) V	V-2 .								1			2501
Attach Sch. B if	2a	Tax-exempt interest	2a				<b>b</b> Ta	xable interes	t			2b	)		5202
required.	3a	Qualified dividends	3a				<b>b</b> Or	dinary divide	ends			3b	)		3405
	4a	IRA distributions	4a				<b>b</b> Ta	xable amoun	t.			4b	)		4508
	5a	Pensions and annuities	5a				<b>b</b> Ta	xable amoun	t.			5b	)		1008
Standard	6a	,	6a					xable amoun	t.		·	6b	)		2004
Deduction for— Single or	7	Capital gain or (loss). Attach Scheo	dule D if	require	d. If r	not requi	ired,	check here		•	Ш	7			3006
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If you checked any box under	12	Standard deduction or itemized	deducti	ons (fro	m Sc	hedule	A)					12	?		3427
Standard	13	Qualified business income deducti	on. Atta	ch Forn	n 899	5 or For	m 89	995-A				13	В		8009
Deduction, see instructions.	14	Add lines 12 and 13										14			6008
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Form 1040 (2020	)						Page <b>2</b>	
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	21	Add lines 19 and 20				21	15790	
	22	Subtract line 21 from line 18. If zero or less, enter -0				22	5436	
	23	Other taxes, including self-employment tax, from Sched	le 2, line 10			23	7650	
	24	Add lines 22 and 23. This is your total tax			. ▶	24	12780	
	25	Federal income tax withheld from:						
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	С	Other forms (see instructions)		25c	2000			
	d	Add lines 25a through 25c				25d	6220	
If you have a	26	2020 estimated tax payments and amount applied from	2019 return			26	5438	
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attach Sch. EIC.	28	Additional child tax credit. Attach Schedule 8812		28	5326			
nontaxable	29	American opportunity credit from Form 8863, line 8		29	6743			
combat pay, see instructions.	30	Recovery rebate credit. See instructions		30	4562			
	31	Amount from Schedule 3, line 13		31	2428			
	32	Add lines 27 through 31. These are your total other pay	ments and refundal	ble credits	. ▶	32	6534	
	33	Add lines 25d, 26, and 32. These are your total paymen	s		. ▶	33	3657	
Refund	34	If line 33 is more than line 24, subtract line 24 from line 3	3. This is the amoun	t you <b>overpaid</b>		34	6338	
Heruna	35a	Amount of line 34 you want refunded to you. If Form 88	▶ □	35a	6335			
Direct deposit?	▶b	Routing number 0 5 2 0 8 8 8 6 3	▶ c Type:	Savings				
See instructions.	►d	Account number 5 2 0 6 3 4 0 0 4 4	4 0 1 0 0	4				
	36	Amount of line 34 you want applied to your 2021 estimate	ted tax 🕨	36	45830			
Amount	37	Subtract line 33 from line 24. This is the amount you ow	e now		. ▶	37	6430	
You Owe		Note: Schedule H and Schedule SE filers, line 37 may	f the taxes you o	we for				
For details on how to pay, see		2020. See Schedule 3, line 12e, and its instructions for d	nstructions for details.					
instructions.	38	Estimated tax penalty (see instructions)		38	1250			
Third Party		you want to allow another person to discuss this re-						
Designee		ructions			•		✓ No	
		ignee's Phoi			nal identif er (PIN)			
Ciana		er penalties of periury, I declare that I have examined this return a					et of my knowledge and	
Sign		ef, they are true, correct, and complete. Declaration of preparer (ot	, , ,		,		,	
Here	Yo	r signature Date	Your occupation		If the	IRS se	nt you an Identity	
	<b>k</b>	anthony kelly 12/10/1986	Judge		- 1		IN, enter it here	
Joint return? See instructions.					· `	nst.) ►		
Keep a copy for	Sp	use's signature. If a joint return, <b>both</b> must sign. Date	Spouse's occupation	on			nt your spouse an ection PIN, enter it here	
your records.		laren waston 02/19/1978	nurse		- 1	nst.) ►		
	Ph	ne no. 00141386308 Email addres	mirachael123@g	mail.com.us				
Doid	Pre	parer's name Preparer's signature		Date	PTIN		Check if:	
Paid	Mark	Collins	rk collins	10/20/1990	0987	0	Self-employed	
Preparer	Fire	n's name ► STATE company		-	Phon	Phone no. 8760765000876		
Use Only	Fire	n's address ► 2025 E 76TH LOS ANGELES CA 90001-27	12 USA		Firm'	s EIN 🕨	▶ 080686	
Go to www.irs.go	ov/Forn	1040 for instructions and the latest information.					Form <b>1040</b> (2020)	

Department of the Treasury—Internal Revenue Service (99)

I S Individual Income Tax Return

2017

ш - Э - О	0.5.	individual inco	me ra	x Return			OMB No.	1545-0074	IRS Use Or	nly—D	o not write or staple in this	space.
		7, or other tax year beginning		ember 26	, 2017	, ending	Septemb	er 26 , 20	20		e separate instructio	
Your first name and	initial		Last nan	ne						You	ur social security num	nber
Gordon			Armstro	Armstrong 2 5 6 1 4 5 6 1 6							6	
If a joint return, spor	use's first	name and initial	Last nan	Last name Spouse's social security numb								
Becky			Colon							2	5 2 6 1 1 0 6	5
Home address (num	ber and s	street). If you have a P.O. I	oox, see ins	structions.				/	Apt. no.		Make sure the SSN(s)	
56 Poor House Dr									09F		and on line 6c are co	rrect.
City, town or post office	ce, state, a	and ZIP code. If you have a fo	reign addre	ss, also complete s	paces below	(see inst	ructions).				residential Election Cam	
Dallas, GA 30132								1-			k here if you, or your spouse y, want \$3 to go to this fund.	
Foreign country nan	ne			Foreign pro	vince/state	county		Foreign p	ostal code	a box	x below will not change your t	
N/A		_		N/A				N	/A	refun	id. 🗸 You 🗌	Spouse
Filing Status	1	Single				4					person). (See instruction	
_	2	Married filing jointly						qualifying pers name here. I			t not your dependent, er	nter this
Check only one	3	Married filing sepai	-	er spouse's SS	SN above	_						
box.		and full name here.				5	<u> </u>	ying widow(	, ,	istruc		
Exemptions	6a	Yourself. If some				t, <b>do n</b> o	ot check b	oox 6a		. }	Boxes checked on 6a and 6b	2
	b			(0) D					nder age 17	<u>.</u>	No. of children on 6c who:	
	C (1) Firet	Dependents:		(2) Dependent's social security num		( <b>3)</b> Depen lationship		qualifying for ch	f child under age 17 ig for child tax credit		<ul> <li>lived with you</li> </ul>	2
	(1) First			5 8 5 2 6 1			,,,,,	(see instru	ictions)		<ul> <li>did not live with you due to divorce</li> </ul>	
If more than four	Melod			1 1						-	or separation (see instructions)	0
dependents, see	Cassa	ndra Singleto Wells		1 5 4 1 5 6 5 4 8 9 1 5		cle o				-	Dependents on 6c	
instructions and check here ► ✓	Kurt Cristir			984198				<u> </u>			not entered above	2
CHECK HEIE FY	d	Total number of exer								_	Add numbers on lines above ▶	6
	7	Wages, salaries, tips	•							7	\$6,178	1
Income	8a	Taxable interest. Atta		` '					-	8а	\$28,896	
	b	Tax-exempt interest				1		\$10.79		- Ou	\$20,070	
Attach Form(s)	9a	Ordinary dividends.								9a	\$8,450	1
W-2 here. Also attach Forms	b	•				. 9b		\$35.51			<b>40/100</b>	
W-2G and	10	Taxable refunds, credits, or offsets of state and local income taxes								10	\$37,118	1
1099-R if tax	11	Alimony received								11	\$10,797	
was withheld.	12									12	\$19,056	1
	13	Capital gain or (loss).	Attach S	chedule D if red	quired. If n	ot requ	ired, chec	k here		13	\$35,514	1
If you did not get a W-2,	14	Other gains or (losse	s). Attach	Form 4797 .						14	\$6,178	1
see instructions.	15a	IRA distributions .	15a	\$19	9,056	1 <b>b</b> T	axable am	ount		15b	\$19,056	1
	16a	Pensions and annuities 16a \$19,301 1 b Taxable amount								16b	\$8,450	1
	17	Rental real estate, ro	yalties, pa	artnerships, S c	orporation	s, trust	s, etc. Att	ach Sched	ule E	17	\$19,301	1
	18	Farm income or (loss	•						_	18	\$37,118	1
	19	Unemployment comp	1 1							19	\$35,514	1
	20a	Social security benefit			,	1 <b>b</b> T	axable am	ount		20b	\$10,797	
	21	Other income. List ty				sh 01 T	hio ic v	total incom		21	\$28,896	
	22	Combine the amounts i								22	\$19,301	1
Adjusted	23	Educator expenses						\$35,51	4 1			
Gross	24	Certain business expen fee-basis government o				1		¢/ 17	0 1			
Income	25	· ·				. 25		\$6,17				
-	25 26	Health savings account Moving expenses. At						\$28,89 \$10.30				
	27	Deductible part of self-						\$19,30 \$10,79				
	28	Self-employed SEP,						\$8,45				
	29	Self-employed health						\$19,05				
	30	Penalty on early with						\$35,51				
	31a	Alimony paid <b>b</b> Rec						\$37,11				
	32	IRA deduction						\$28,89				
	33	Student loan interest						\$19,30				
	34	Tuition and fees. Atta						\$10,79				
	35	Domestic production a	ctivities de					\$6,17				
	36	Add lines 23 through								36	\$19,301	1
	37	Subtract line 36 from	line 22. T	his is your <b>adi</b> i	usted are:	ss inco	me .		•	37	\$35 514	

Form 1040 (2017	()							F	age Z
	38	Amount from line 37 (adjus	sted gross income	)			38	\$6,178	1
Tourond	39a	( —	orn before January	•	☐ Blind.	Total boxes			
Tax and		· · · · · · · · · · · · · · · · · · ·	s born before Janu			checked ▶ 39a 2		ļ	
Credits	b	If your spouse itemizes on a		• •				ļ	
			•	-			40	¢20.00/	1
Standard Deduction	40	Itemized deductions (from					40	\$28,896	
for—	41	Subtract line 40 from line 3					41	\$10,797	1
<ul> <li>People who check any</li> </ul>	42	Exemptions. If line 38 is \$15	42	\$19,301	1				
box on line	43	Taxable income. Subtract	t line 42 from line	41. If line 42 is	more than li	ne 41, enter -0	43	\$6,178	1
39a or 39b <b>or</b> who can be	44	Tax (see instructions). Check	c if any from: <b>a</b>	Form(s) 8814	<b>b</b> ✓ Form	4972 <b>c</b> N/A	44	\$8,450	1
claimed as a	45	Alternative minimum tax	(see instructions)	. Attach Form 6	251		45	\$10,797	1
dependent, see	46	Excess advance premium	tax credit repayme	ent. Attach Forn	n 8962 .		46	\$37,118	1
instructions.	47	Add lines 44, 45, and 46					47	\$35,514	
All others:	48	Foreign tax credit. Attach				\$35,514		Ψ00,011	<u> </u>
Single or		· ·	·				-		
Married filing separately,	49	Credit for child and depende	·			\$10,797	-	ļ	
\$6,350	50	Education credits from Fo				\$19,301		ļ	
Married filing jointly or	51	Retirement savings contr	ibutions credit. A	ttach Form 888	30 <b>51</b>	\$6,178		ļ	
Qualifying	52	Child tax credit. Attach So	chedule 8812, if re	equired	52	\$28,896	1	ļ	
widow(er), \$12,700	53	Residential energy credits.	Attach Form 569	5	53	\$10,797	1		
Head of	54	Other credits from Form: a	3800 <b>b</b> ✓ 880	1 c 🗌	54	\$8,450			
household,	55	Add lines 48 through 54. T	hese are vour <b>tot</b> a	al credits			55	\$19.301	1
\$9,350	56	Subtract line 55 from line	•				56	\$6,178	1
·	57	Self-employment tax. Atta					57	\$35,514	
0.11	58	Unreported social security				<b>b</b> □ 8919	58		
Other		'			_	_		\$10,797	
Taxes	59	Additional tax on IRAs, other	•	•		•	59	\$8,450	<u> </u>
	60a	Household employment tax					60a	\$19,301	1
	b	First-time homebuyer credi	t repayment. Attacl	n Form 5405 if re	equired .	· <u>·</u> · · · · ·	60b	\$6,178	1
	61	Health care: individual resp	onsibility (see instr	uctions) Full-y	ear coveraç	ge <b>√</b>	61	\$10,797	1
	62	Taxes from: <b>a</b> Form 8	959 <b>b</b> 🗌 Form 8	960 <b>c</b> 🗸 Inst	ructions; e	enter code(s) 25985498	62	\$37,118	1
	63	Add lines 56 through 62. T	his is your <b>total t</b> a	ıx		<u> </u>	63	\$28,896	1
<b>Payments</b>	64	Federal income tax withhe	ld from Forms W-	2 and 1099 .	. 64	\$6,178	1	ļ	
	65	2017 estimated tax payment	s and amount appli	ed from 2016 retu	urn <b>65</b>	\$10,797	1	ļ	
If you have a	66a	Earned income credit (El	C)		. 66a	\$35,514	1	ļ	
qualifying child, attach	b	Nontaxable combat pay elect	ion <b>66b</b>	\$28,896	1			ļ	
Schedule EIC.	67	Additional child tax credit. A	ttach Schedule 88	12	. 67	\$19,301	1	ļ	
	68	American opportunity cre	dit from Form 886	63. line 8	. 68	\$8,450		ļ	
	69	Net premium tax credit. A		-		\$28,896		ļ	
	70	Amount paid with request				\$10,797		ļ	
	71	Excess social security and			. 71	\$19,301		ļ	
	72	Credit for federal tax on fu			. 72		-	ļ	
				_		\$6,178	-	ļ	
	73	Credits from Form: <b>a</b> 2439 <b>b</b>			73	\$35,514	<u> </u>		
	74	Add lines 64, 65, 66a, and					74	\$6,178	1
Refund	75	If line 74 is more than line	· ·			· -	75	\$19,301	1
	76a	Amount of line 75 you war	1 1 1 1				76a	\$10,797	1
Direct deposit?	▶ b	Routing number 5 8	3 4 9 8 4	1 9 6	c Type:	Checking  Savings			
See	► d	Account number 2 !	5 4 1 6 9	4 1 6 5	1 6 0	0 6 0 6		ļ	
instructions.	77	Amount of line 75 you want	applied to your 20	18 estimated ta	x ▶ 77	\$6,178	1	ļ	
Amount	78	Amount you owe. Subtract	ct line 74 from line	63. For details	on how to p	ay, see instructions	78	\$19,301	1
You Owe	79	Estimated tax penalty (see	instructions) .		. 79	\$10,797	1		
Third Party	Do	you want to allow another	person to discuss	this return with	the IRS (see	e instructions)? Ve	s. Com	plete below.	No
Designee	Des	signee's		Phone		Personal ide			
		me Amber Bailey		no. ►	99791030			0 1 0	9 4
Sign		enalties of perjury, I declare that I have ely list all amounts and sources of inco							
Here		w signature		1	Your occupat		1	me phone number	omougo.
Joint return? See		Gordon K	rmstrong	09/13/2017			,	•	
instructions.	Sp.	U			:hef Spauss's se	vunction	If the II	128254828	tootion
Keep a copy for your records.	Spi	ouse's signature. If a joint returr Bec	i, <b>both</b> must sign. Ly Colon	09/13/2017	Spouse's occ	συρατίστι	PIN er	RS sent you an Identity Protential	
			<i>f</i> -	, ,	olice	ls.	here (s	ee inst.) 2 5 1 8	9 4
Paid	Pri	nt/Type preparer's name	Preparer's signatu	re Tyler P	adilla	Date Date		k 🗹 if PTIN	
Preparer	Tyle	r Padilla		0		09/13/2017		mployed 8299325	501
Use Only	Firr	m's name ► Cedric Reeve	S				Firm's	s EIN ▶ 9881594	03
Joo Jiny	Firm	m's address ► 669 NE. Home	ewood CircleIrmo	SC 29063			Phone	e no. 2383430	38
	1 1111			1					