Filing Status		Single X Married filing jointly	Ma	rried filing sen	arately (MFS)	☐ Head of househo	old (HO	H) \(\sum_\) Qualifyir	na wido	w(er) (QW)		
Check only	Laured	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										
one box.		shild but not your dependent.										
Your first name	and mi	ddle initial	Last name						Your social security number			
DYSON				FRANCIS								
If joint return, spouse's first name and middle initial				Last name						Spouse's social security number		
DINIT T				BASTIN								
Home address	(numbe	r and street). If you have a P.O. box, se-	e ins	instructions. Apt. no.						Presidential Election Campaign		
3665 LAWRENCEVILLE HWY				B08						Check here if you, or your spouse if filing jointly, want \$3 to go to this fund.		
,		e, state, and ZIP code. If you have a for	eign	address, also	complete sp	aces below (see instru	ctions).			ox below will not chang		
TUCKER,	GA	30084						tax	or refund.	You Sr		
Foreign country	name			Foreign	province/state	e/county	Foreign postal code			an four dependents		
								Si	see instructions and ✓ here ►			
Standard	Some	eone can claim: Nou as a dependent	ent	Your	spouse as a	dependent						
Deduction		Spouse itemizes on a separate return or	you	were a dual-s	status alien							
Age/Blindness	You:	Were born before January 2, 1958	5 [Are blind	Spouse:	Was born before	a Janua	ary 2, 1955	Is bline	d		
Dependents (see ins	WHAT THE PARTY OF	T	(2) Social security number (3) Relationship to you				(4) ✓ it qualifies for (see instructions):				
(1) First name Last name								Child tax credit		Credit for other depend		
ETHAN DYSON					***************************************	SON						
EMMA DYSON						DAUGHTER						
	1	Wages, salaries, tips, etc. Attach Form	n(s) V	N-2					1	19		
Standard Deduction for— Single or Married filing separately, \$12,200 Married filing jointly or Dualifying widow(er), \$24,400 Head of household, \$13,350 If you checked any box under Standard Deduction, see instructions,	2a	Tax-exempt interest	2a			b Taxable interest. A	ttach S	Sch. B if required	2b			
	за	Qualified dividends ,	3a	3a		b Ordinary dividends. Attach Sch. B if requi		Sch. B if required	3b			
	4a	IRA distributions	4a			b Taxable amount	1 1		4b			
	c	Pensions and annuities	4c			d Taxable amount	x = x		4d			
	5a	Social security benefits	5a			b Taxable amount		* * * *	5b			
	6	Capital gain or (loss). Attach Schedule D if required. If not required, check here										
	7a	Other income from Schedule 1, line 9							7a			
	b	Add lines 1, 2b, 3b, 4b, 4d, 5b, 6, and 7a. This is your total income							7b	20		
	8a	Adjustments to income from Schedule 1, line 22							8a			
	b	Subtract line 8a from line 7b. This is your adjusted gross income							8b	20		
	9	Standard deduction or itemized deductions (from Schedule A) 9 24400)			
	10	Qualified business income deduction. Attach Form 8995 or Form 8995-A 10							-			
	11a	Add lines 9 and 10							11a	24		
	b	Taxable income. Subtract line 11a from line 8b. If zero or less, enter -0-							11b			