E 1040)-S	Department of the U.S. Tax	Treasury—Internal Reve Return for S	enue Servi enior	ice (99)	201	9	OMB No. 154	5-0074	IRS Use Only	y—Do not w	rite or staple in this spa	ice.	
Filing		Single							☐ Married filing		g separately (MFS)			
Status		\Box Head of household (HOH) \Box Qualifying widow(er) (QW) you checked the MFS box, enter the name of spouse. If you checked the HOH or QW box, enter the										o child's		
Check only one box.		ie if the qualifying								I QVV DOX,	enter th	e criiid s		
Your first nar Enter you	Last name Enter your last name							Your social security number 000-00-0000						
En all manufactures and the state of the sta					Last name spouse last name							Spouse's social security number		
	ox, see instructions.						Check her		ntial Election Campa e if you, or your spouse i	-				
City, town or post office, state, and ZIP code. If you have a foreign address, also complete spaces below (see instructions).											nt \$3 to go to this fund. box below will not chang d.			
Foreign country name Enter your Country Name										postal code		than four depender dand ✓ here ► [
Standard		neone can clai	m: 🗌 You as								à rage men	Luagid V liele ▶ [
Deduction		Spouse itemize												
Age/Blindness		:				□ A								
Depender	11 00011 0	ouse: U Was to be instructions)				rity number	blind (3) Relationship to you		you	(4) 🗸	/ if qualifie	s for (see inst.):		
(1) First name Last name							7.5	× 450		Child tax c	redit	Credit for other depend	dents	
				+	1 1							<u> </u>		
				+						⊢∺				
	1	Wages, salari	es, tips, etc. A	ttach I	Form(s	s) W-2 .					. 1			
Attach Schedule B if required.	2a			2a				b Taxable interest			. 2b	,		
	3a			3a			7	b Ordinary dividends			. 3b)		
	4a	4a IRA distributions		4a				b Taxable	unt	. 4b				
	C	Pensions and	annuities .	4c				d Taxable ame		unt	. 4d	ı		
	5a	Social security	benefits	5a				b Taxable amo		unt	. 5b			
	6				Schedule D if required. If not required, check h						□ 6			
Month/Da	7a	Other income	e 1, lir	e 1, line 9						. 7a	ı			
b Add lines 1, 2b, 3b, 4b, 4d,					5b, 6, and 7a. This is your total income ▶						▶ 7b)		
	8a	8a Adjustments to income from			Schedule 1, line 22						. 8a	ı		
Standard	b	Subtract line 8	3a from line 7b	. This	is you	r adjust	ed gı	ross incor	ne .		▶ 8b			
Deduction	9 Standard deduction or itemized deductions (from Schedule A) 9													
See Standard Deduction Chart below.	10	Qualified busines	s income deduct	uction. Attach Form 8995 or Form 8995-A 10										
	11a	Add lines 9 ar	nd 10								. 118	a		
	b	Taxable inco												
Standard		dd the number					\neg							
Deduction Chart*			AND the number boxes checked	the number of THEN s checked is de		ur standar		IF your filing status is		AND the number of boxes checked is		THEN your stand deduction is		
	Single		1			3,850		Head of household		1		20,000		
	Marriad		2 1			5,500	+-	TIOUSETIOIU		1		21,650		
	Married filing jointly or Qualifying		2			5,700 7,000	M	arried filing		2		13,500 14,800		
			3			3,300		parately		3		16,100		
	widow(er)		4			9,600				4		17,400		
		*Don't use this chart if someone can claim you (or your spouse if filing jointly) as a dependent, your spouse itemizes on a separate return, or you were a dual-status alien. Instead, see instructions.												
	5	ouse itellizes	on a separate	cratti	, or yo	u were a	uud	-Status all	en. In	sicau, see	ร แเอเเน(2110112.		