

Filing Status ☒ Single ☐ Married filing jointly ☐ Married filing separately (MFS) ☐ Head of household (HOH) ☐ Qualifying widow(er) (QW)
Check only one box.
If you 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 a child but not your dependent. ▶

Your first name and middle initial Hyun Jae		Last name Oh	Your social security number 636-67-6002	
If joint return, spouse's first name and middle initial		Last name	Spouse's social security number	
Home address (number and street). If you have a P.O. box, see instructions. 5913 Veranda Dr			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 tax or refund. <input type="checkbox"/> You <input type="checkbox"/> Spouse	
City, town or post office, state, and ZIP code. If you have a foreign address, also complete spaces below (see instructions). W Springfield VA 22152-1416				
Foreign country name		Foreign province/state/county	Foreign postal code	If more than four dependents, see instructions and ✓ here ▶ <input type="checkbox"/>

Standard Deduction **Someone 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, 1955 ☐ Are blind **Spouse:** ☐ Was born before January 2, 1955 ☐ Is blind

Dependents (see instructions):		(2) Social security number	(3) Relationship to you	(4) ✓ if qualifies for (see instructions):	
(1) First name	Last name			Child tax credit	Credit for other dependents
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

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 **Standard Deduction**, see instructions.

1 Wages, salaries, tips, etc. Attach Form(s) W-2		1 27,960.
2a Tax-exempt interest	2a	2b
3a Qualified dividends	3a	3b
4a IRA distributions	4a	4b
c Pensions and annuities	4c	4d
5a Social security benefits	5a	5b
6 Capital gain or (loss). Attach Schedule D if required. If not required, check here ▶ <input type="checkbox"/>		6
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 27,960.
8a Adjustments to income from Schedule 1, line 22		8a
b Subtract line 8a from line 7b. This is your adjusted gross income ▶		8b 27,960.
9 Standard deduction or itemized deductions (from Schedule A)	9 12,200.	
10 Qualified business income deduction. Attach Form 8995 or Form 8995-A	10	
11a Add lines 9 and 10		11a 12,200.
b Taxable income. Subtract line 11a from line 8b. If zero or less, enter -0-		11b 15,760.

12a	Tax (see inst.) Check if any from Form(s): 1 <input type="checkbox"/> 8814 2 <input type="checkbox"/> 4972 3 <input type="checkbox"/> _____	12a	1,699.	
b	Add Schedule 2, line 3, and line 12a and enter the total			12b 1,699.
13a	Child tax credit or credit for other dependents	13a		
b	Add Schedule 3, line 7, and line 13a and enter the total			13b
14	Subtract line 13b from line 12b. If zero or less, enter -0-			14 1,699.
15	Other taxes, including self-employment tax, from Schedule 2, line 10			15 0.
16	Add lines 14 and 15. This is your total tax			16 1,699.
17	Federal income tax withheld from Forms W-2 and 1099			17 1,985.
18	Other payments and refundable credits:			

- If you have a qualifying child, attach Sch. EIC.
- If you have nontaxable combat pay, see instructions.

a	Earned income credit (EIC)	18a		
b	Additional child tax credit. Attach Schedule 8812	18b		
c	American opportunity credit from Form 8863, line 8	18c		
d	Schedule 3, line 14	18d		
e	Add lines 18a through 18d. These are your total other payments and refundable credits			18e
19	Add lines 17 and 18e. These are your total payments			19 1,985.

RefundDirect deposit?
See instructions.

20	If line 19 is more than line 16, subtract line 16 from line 19. This is the amount you overpaid	20	286.																				
21a	Amount of line 20 you want refunded to you . If Form 8888 is attached, check here <input type="checkbox"/>	21a	286.																				
b	Routing number <table border="1"><tr><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td></tr></table>	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	c Type: <input type="checkbox"/> Checking <input type="checkbox"/> Savings	
X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X				
d	Account number <table border="1"><tr><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td></tr></table>	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X		
X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X				
22	Amount of line 20 you want applied to your 2020 estimated tax	22																					

Amount You Owe

23	Amount you owe. Subtract line 19 from line 16. For details on how to pay, see instructions	23	
24	Estimated tax penalty (see instructions)	24	

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. ☐ **Yes.** Complete below. ☒ **No**

Designee's name ▶	Phone no. ▶	Personal identification number (PIN) ▶	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>										

Sign HereJoint return?
See instructions.
Keep a copy for your records.

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 true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Your signature	Date	Your occupation	If the IRS sent you an Identity Protection PIN, enter it here (see inst.) <table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>										
Spouse's signature. If a joint return, both must sign.	Date	Spouse's occupation	If the IRS sent your spouse an Identity Protection PIN, enter it here (see inst.) <table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>										
Phone no.	Email address												

Paid Preparer Use Only

Preparer's name	Preparer's signature	Date	PTIN	Check if: <input type="checkbox"/> 3rd Party Designee <input type="checkbox"/> Self-employed
Firm's name ▶	Self-Prepared		Phone no.	
Firm's address ▶			Firm's EIN ▶	

Go to www.irs.gov/Form1040 for instructions and the latest information.

BAA

REV 02/23/20 Intuit.cq.cfp.sp

Form **1040** (2019)



HYUN JAE OH

5913 VERANDA DR

W SPRINGFIELD

VA 221521416

SSN - You



OH

636676002

Vendor ID

1555

XXXXXX



SSN - Spouse

Fed Adj Gross Income (FAGI)	1.	27960.	Withholding (VA) - You	19A.	1229.
Additions	2.		Withholding (VA) - Spouse	19B.	
Subtotal	3.	27960.	Estimated Payments	20.	
Age Deduction - You	4A.		2018 Overpayment	21.	
Age Deduction - Spouse	4B.		Extension Payments	22.	
Soc Sec & Tier 1 Railroad	5.		Credit - Low-Income or EIC	23.	
State Income Tax Overpayment	6.		Credit - Schedule OSC	24.	
Subtractions	7.		Credits - Schedule CR	25.	
Subtotal Subtractions	8.		Total Payments / Credits	26.	1229.
Total VA Adj Gross Income (VAGI)	9.	27960.	Tax You Owe	27.	
Itemized Deductions - VA Sch A	10.		Tax Overpayment	28.	191.
Standard Deduction	11.	4500.	Overpayment Credited to Next Year	29.	
Exemptions	12.	930.	VAC - Virginia 529 / ABLEnow	30.	
Deductions	13.		VAC - Other Contributions	31.	
Subtotal (Deductions & Exemptions)	14.	5430.	Addition to Tax, Penalty & Interest	32.	
VA Taxable Income	15.	22530.	Sales and Use Tax	33.	
Amount of Tax	16.	1038.	Amount You Owe		
Spouse Tax Adjustment (STA)	17.		Will Pay by Credit/Debit Card	IN	
VAGI - Spouse	17A.		Your Refund		191.
Net Amount of Tax	18.	1038.	Bank Routing #		
			Bank Account #		





Filing Status, Age & License Information

Additional Filing Information

Filing Status 1

Locality 059

Federal Head of Household

Name or Filing Status Change

DOB - You 09061985

Address Change

VA Driver's License ID - You C62493470

VA Return Not Filed Last Year X

VA Driver's License - Iss. Date - You 10152019

Dependent on Another's Return X

Spouse Name (Filing Status 3 Only)

Farmer / Fisherman / Merchant Seaman

DOB - Spouse

Amended

VA Driver's License ID - Spouse

NOL

VA Driver's License - Iss. Date - Spouse

Overseas on Due Date

Federal EIC & Amount

Exemptions (A)

Exemptions (B)

You 1

65 & Over - You

Deceased Indicator

Spouse

65 & Over - Spouse

No Sales & Use Tax Due Indicator X

Dependents

Blind - You

Obtain Electronic 1099G

Total (A) 1

Blind - Spouse

ID Theft PIN

Total (B)

Contact Information

I (We), the undersigned, declare under penalty of law that I (we) have examined this return & to the best of my (our) knowledge, it is a true, correct & complete return. If you are requesting direct deposit of your refund by providing bank information on your return, you are certifying that the information provided is for a domestic account within the territorial jurisdiction of the United States.

Signature - You _____ Date

Phone - You 7034740010

Signature - Spouse _____ Date

Phone - Spouse

Signature - Preparer SELF-PREPARED Date

Phone - Preparer

The Tax Department may discuss my/our return with my/our preparer.

Preparer Information 7

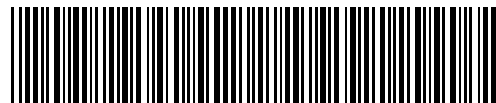
File by May 1, 2020

Include Page 1, Page 2 and all supporting 760CG documents.

2019 Schedule INC/CG

636676002

Report all W-2s, 1099s & VK-1s with VA Withholding



HYUN JAE

OH

Your/ Spouse SSN	Withholding Type	VA Withholding	Employer FEIN	VA Account Number	VA Wages, tips, other comp.
636676002	W	1108.	461673211	30461673211F001	24000.
636676002	W	121.	833607804	30833607804F001	3960.

Total VA Withholding	SSN	VA Withholding
You	636676002	1229.
Spouse		

Total # of W-2s, 1099s & VK-1s	02
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To avoid delays - be sure to enter all information, including the Employer's FEIN.

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X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X				
d	Account number <table border="1"><tr><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td></tr></table>	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X		
X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X				
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Amount You Owe

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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. ☐ **Yes.** Complete below. ☒ **No**

Designee's name ▶	Phone no. ▶	Personal identification number (PIN) ▶	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>						

Sign Here

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 true, correct, 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	Your occupation	If the IRS sent you an Identity Protection PIN, enter it here (see inst.) <table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>						
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Phone no.	Email address								

Paid Preparer Use Only

Preparer's name	Preparer's signature	Date	PTIN	Check if: <input type="checkbox"/> 3rd Party Designee <input type="checkbox"/> Self-employed
Firm's name ▶	Self-Prepared		Phone no.	
Firm's address ▶			Firm's EIN ▶	

Go to www.irs.gov/Form1040 for instructions and the latest information.

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Form **1040** (2019)