

1040 U.S. Individual Income Tax Return (99)

2019

OMB No. 1545-0047

OMB No. 1545-0047 Use this only—Do not write or stamp in this space

**Filing Status**  Single  Married filing jointly  Married filing separately (MFS)  Head of household (HOH)  Qualifying widow(er) (QW)

Check only 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: Gwenie K Last name: Clover Your social security number: 321564994

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): 111 Purple Banner Dr Apt. no.:

City, town or post office, state, and ZIP code. If you have a foreign address, also complete spaces below (see instructions): Mableton IN 46944

Foreign country name: Foreign province/state/county: Foreign postal code:

Presidential Election Campaign: Check here if you or your spouse (if filing jointly), want \$3 to go to the fund. Checking a box below will not change your tax or refund.  You  Spouse

If more than four dependents, see instructions and / here ▶

**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):

(1) First name	Last name	(2) Social security number	(3) Relationship to you	(4) <input checked="" type="checkbox"/> If qualifies for see instructions: Child tax credit	Credit for other dependents
1	Wages, salaries, tips, etc. Attach Form(s) W-2	2a	2b	1	44,440.00
2a	Tax-exempt interest	2a	2b	2b	0
3a	Qualified dividends	3a	3b	3b	0
4a	IRA distributions	4a	4b	4b	0
c	Pensions and annuities	4c	d	4d	0
5a	Social security benefits	5a	b	5b	0
6	Capital gain or (loss). Attach Schedule D if required. If not required, check here	6	7a	7a	0
7a	Other income from Schedule 1, line 9	7a	7b	7b	44,440.00
b	Add lines 1, 2b, 3b, 4b, 5b, 6, and 7a. This is your total income	8a	8a	8a	0
8a	Adjustments to income from Schedule 1, line 22	8b	8b	8b	44,440.00
b	Subtract line 8a from line 7b. This is your adjusted gross income	9	9	9	12,200.00
9	Standard deduction or itemized deductions (from Schedule A)	10	10	10	0
10	Qualified business income deduction. Attach Form 8995 or Form 8995-A	11a	11a	11a	12,200.00
11a	Add lines 9 and 10	11b	11b	11b	32,200.00
b	Taxable income. Subtract line 11a from line 8b				

**Standard Deduction for—**  
 • Single or Married Filing Separately, \$12,000  
 • Married Filing Jointly or Qualifying Widow(er), \$24,000  
 • Head of household, \$18,000  
 \* If you checked any box under Standard Deduction, see instructions.