Form **1040** Department of the Treasury—Internal Revenue Service (99)

U.S. Individual Income Tax Return 2019

OMB No. 1545-0074 | IRS Use Only—Do not write or staple in this space.

Filing Status Check only one box.

☑ Single ☐ Married filing jointly ☐ Married filing separately (MFS) ☐ Head of household (HOH) ☐ Qualifying widow(er) (QW)

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	Last name	Your social security number
Gwennie K	Clover	321 56 4444
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. Apt. no.

111 Purple Banner Dr.

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

Mayberry, 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 this 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) ✓ if qualifies for (see instructions): Child tax credit	Credit for other dependents
			☐	☐
			☐	☐
			☐	☐
			☐	☐

1	Wages, salaries, tips, etc. Attach Form(s) W-2			1	44,440.00
2a	Tax-exempt interest	2a	0	b Taxable interest. Attach Sch. B if required 2b	0
3a	Qualified dividends	3a	0	b Ordinary dividends. Attach Sch. B if required 3b	0
4a	IRA distributions	4a	0	b Taxable amount 4b	0
c	Pensions and annuities	4c	0	d Taxable amount 4d	0
5a	Social security benefits	5a	0	b Taxable amount 5b	0
6	Capital gain or (loss). Attach Schedule D if required. If not required, check here ▶ ☑			6	0
7a	Other income from Schedule 1, line 9			7a	0
b	Add lines 1, 2b, 3b, 4b, 4d, 5b, 6, and 7a. This is your **total income** ▶			7b	44,440.00
8a	Adjustments to income from Schedule 1, line 22			8a	0
b	Subtract line 8a from line 7b. This is your **adjusted gross income** ▶			8b	44,440.00
9	**Standard deduction or itemized deductions** (from Schedule A)	9	12,200.00		
10	Qualified business income deduction. Attach Form 8995 or Form 8995-A	10	0		
11a	Add lines 9 and 10			11a	12,200.00
b	**Taxable income.** Subtract line 11a from line 8b			11b	32,220.00

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.