1040		ent of the Treasury—Internal R			201	7	OMB N	o. 1545-0074	IRS Use C)nly—D	o not write or :	staple in this	s space.
Eor the year Ian 1-Dec		7, or other tax year beginning			, 2017, e	anding		,2		See separate instructions.			
Your first name and		, of other tax year beginning	Last nan	ne	, 2017, 6	siluing		, 2	.0		ur social se		
If a joint ratura, apou	oo'o firat	name and initial	Last nan	20						6.00	ouse's social		umbor
lf a joint return, spou	156 5 11/51	name and initial	Last han	ne						Spo		security no	umber
			L .										
Home address (num	ber and s	street). If you have a P.O. b	ox, see ins	structions.					Apt. no.		Make sure		
											and on lin		
City, town or post offic	e, state, a	nd ZIP code. If you have a for	eign addres	ss, also complete sp	baces below (s	see instr	uctions).				residential El		
											ck here if you, or y, want \$3 to go		
Foreign country nam	e			Foreign prov	/ince/state/co	ounty		Foreign	postal code		x below will not		
										refun	nd.	You 📃	Spouse
Filing Status	1	Single				4	Hea	d of household	(with qual	ifying p	person). (See	instruction	ns.)
i ning Status	2	Married filing jointly (even if only one had income) If the qualifying person is a ch								nild bu	t not your de	pendent, e	nter this
Check only one	3	Married filing separa											
box.		and full name here.	(er) (see i	nstruc	tions)								
	6a											ecked	
Exemptions	b						on 6a and						
	c			(2) Dependent's		(3) Dependent's		(4) ✓ if child under age 1		7	No. of ch on 6c wh		
	(1) First	•	social security number			relationship to you		qualifying for child tax cre		lit	 lived wi did not l 		
	(1) 1130	lanc Last ham	,					(see instructions)		_	you due te	divorce	
If more than four]	—	or separa (see instru		
dependents, see]	—	Depender		
instructions and]]	_	not entere	d above	
check here ►	d	Total number of even							<u> </u>		Add num		
	-	Total number of exem	•			• •	• •		· · ·	<u>.</u>	lines abo	ve 🕨	
Income	7	Wages, salaries, tips,		()		• •	• •		· ·	7			
	8a	Taxable interest. Atta		•						8a			
Attach Form(s)	b	Tax-exempt interest.				8b				_			
W-2 here. Also	Phere. Also b Qualified dividends 9a Ordinary dividends 9b b Qualified dividends 9b 9b 9b								· · ·	9a			
attach Forms													
W-2G and	10	Taxable refunds, cred	Taxable refunds, credits, or offsets of state and local income taxes										
1099-R if tax was withheld.	11	Alimony received								11			
was withileid.	12 Business income or (loss). Attach Schedule C or C-EZ .							· <u> </u>	12				
If	13	Capital gain or (loss).	Attach So	chedule D if req	uired. If not	t requi	red, ch	eck here 🕨		13			
If you did not get a W-2,	14	Other gains or (losses). Attach	Form 4797 .						14			
see instructions.	15a	IRA distributions .	15a			b Ta	xable a	mount .		15b			
	16a	Pensions and annuities	5 16a			b Ta	xable a	mount .		16b			
	17	Rental real estate, roy	alties, pa	artnerships, S co	prporations,	, trusts	s, etc. A	ttach Sched	lule E	17			
	18	Farm income or (loss)	. Attach S	Schedule F .					[18			
	19	Unemployment comp	ensation						[19			
	20a	Social security benefits	20a			b Ta	xable a	mount .	[20b			
	21	Other income. List typ	e and an	nount						21			
	22	Other income. List typ Combine the amounts in	n the far rig	ght column for line	es 7 through	21. Th	is is you	ir total incom	e 🕨	22			
	23	Educator expenses				23							
Adjusted	24	Certain business expens	es of rese	rvists, performing	artists, and								
Gross		fee-basis government of	ficials. Atta	ach Form 2106 or	2106-EZ	24							
Income	25	Health savings accou	nt deduct	tion. Attach For	m 8889 .	25							
	26	Moving expenses. Att				26							
	27					27							
	28		ductible part of self-employment tax. Attach Schedule SE 27 If-employed SEP, SIMPLE, and qualified plans . 28						1 1				
	29	Self-employed health							1 1				
	30	Penalty on early witho							+				
	31a	Alimony paid b Reci				31a			+				
	32	IRA deduction							+				
	33	Student loan interest							+				
	34 25	Reserved for future us											
	35	Domestic production ad				35				00			
	36 37	Add lines 23 through							· ·	36			-
	37	Subtract line 36 from	. 22. I	nis is your auju	sted gross	nicor	ile .	• • •		37			

Form 1040 (2017)			Page 2							
	38	Amount from line 37 (adjusted gross income)	38								
Tax and	39a	Check [You were born before January 2, 1953, Blind.] Total boxes									
		if: □ Spouse was born before January 2, 1953, □ Blind. ∫ checked ► 39a									
Credits	b	If your spouse itemizes on a separate return or you were a dual-status alien, check here 39b									
Standard	40	Itemized deductions (from Schedule A) or your standard deduction (see left margin)	40								
Deduction for—	41	Subtract line 40 from line 38	41								
People who	42	Exemptions. If line 38 is \$156,900 or less, multiply \$4,050 by the number on line 6d. Otherwise, see instructions	42								
check any box on line	43	Taxable income. Subtract line 42 from line 41. If line 42 is more than line 41, enter -0-	43								
39a or 39b or	44	Tax (see instructions). Check if any from: a Sorm(s) 8814 b Form 4972 c	44								
who can be claimed as a	45	Alternative minimum tax (see instructions). Attach Form 6251	45								
dependent, see	46	Excess advance premium tax credit repayment. Attach Form 8962	46								
instructions.	47	Add lines 44, 45, and 46	47								
All others:	48	Foreign tax credit. Attach Form 1116 if required 48									
Single or Married filing	49	Credit for child and dependent care expenses. Attach Form 2441 49	-								
separately,		Education credits from Form 8863, line 19 50	-								
\$6,350 Married filing	50	Retirement savings contributions credit. Attach Form 8880 51	-								
jointly or	51										
Qualifying widow(er),	-										
\$12,700	53	Residential energy credit. Attach Form 5695 53 Other credits from Form: a 3800 b 8801 c 54	-								
Head of household,	54										
\$9,350	55	Add lines 48 through 54. These are your total credits	55	<u> </u>							
	56	Subtract line 55 from line 47. If line 55 is more than line 47, enter -0	56								
_	57	Self-employment tax. Attach Schedule SE	57	<u>├</u> ───							
Other	58	Unreported social security and Medicare tax from Form: a 4137 b 8919	58								
Taxes	59	Additional tax on IRAs, other qualified retirement plans, etc. Attach Form 5329 if required	59								
	60a	Household employment taxes from Schedule H	60a								
	b	First-time homebuyer credit repayment. Attach Form 5405 if required	60b								
	61	Health care: individual responsibility (see instructions) Full-year coverage 📃	61								
	62	Taxes from: a Form 8959 b Form 8960 c Instructions; enter code(s)	62								
	63	Add lines 56 through 62. This is your total tax	63								
Payments	64	Federal income tax withheld from Forms W-2 and 1099 64									
	65	2017 estimated tax payments and amount applied from 2016 return 65									
If you have a	66a	Earned income credit (EIC)									
qualifying child, attach	b	Nontaxable combat pay election 66b									
Schedule EIC.	67	Additional child tax credit. Attach Schedule 8812 67									
	68	American opportunity credit from Form 8863, line 8 68									
	69	Net premium tax credit. Attach Form 8962 69									
	70	Amount paid with request for extension to file	-								
	71	Excess social security and tier 1 RRTA tax withheld 71	1								
	72	Credit for federal tax on fuels. Attach Form 4136 72	1								
	73	Credits from Form: a 2439 b Reserved c 8885 d 73									
	74	Add lines 64, 65, 66a, and 67 through 73. These are your total payments	74								
Refund	75	If line 74 is more than line 63, subtract line 63 from line 74. This is the amount you overpaid	75								
	76a	Amount of line 75 you want refunded to you. If Form 8888 is attached, check here	76a								
Direct deposit?	► b	Routing number Sauran Charles a Construction of the second secon									
See	► d	Account number									
instructions.	77	Amount of line 75 you want applied to your 2018 estimated tax 77									
Amount	78	Amount you owe. Subtract line 74 from line 63. For details on how to pay, see instructions	78								
You Owe	79	Estimated tax penalty (see instructions)									
	-		. Com	plete below. 🗌 No							
Third Party Designee		signee's Phone Personal ider									
	nar	name no. number (PIN)									
Sign		enalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowle ely list all amounts and sources of income I received during the tax year. Declaration of preparer (other than taxpayer) is based on all info									
Here	Your signature Date Your occupation Date Date Date Date Date Date Date Date										
Joint return? See											
instructions. Keep a copy for	Spouse's signature. If a joint return, both must sign. Date Spouse's occupation If the IRS sent you an Identity										
your records.			PIN, er	nter it							
-	Pri	nt/Type preparer's name Preparer's signature Date	nere (s	see inst.)							
Paid	1 11			Check 🔲 if							
Preparer				self-employed							
Use Only		m's name 🕨		Firm's EIN ►							
	Firr	m's address ►	Phone	e no.							

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