

Filing status: Single Married filing jointly Married filing separately Head of household Qualifying widow(er)

Your first name and initial: **JASON** Last name: **GRIFFITH** Your social security number: [REDACTED]

Your standard deduction: Someone can claim you as a dependent You were born before January 2, 1954 You are blind

If joint return, spouse's first name and initial: **MELISSA** Last name: **GRIFFITH** Spouse's social security number: [REDACTED]

Spouse standard deduction: Someone can claim your spouse as a dependent Spouse was born before January 2, 1954 Full-year health care coverage or exempt (see inst.)

Spouse is blind Spouse itemizes on a separate return or you were dual-status alien

Home address (number and street): **33 MAIN STREET** Apt. no.: [REDACTED] Presidential Election Campaign (see inst.): You Spouse

City, town or post office, state, and ZIP code. If you have a foreign address, attach Schedule 6. **WHITESBURG, KY 41858** If more than four dependents, see inst. and check here

Dependents (see instructions):		(2) Social security number	(3) Relationship to you	(4) Check if qualifies for (see inst.):	
(1) First name	Last name			Child tax credit	Credit for other dependents
NOAH	GRIFFITH	[REDACTED]	SON	<input type="checkbox"/>	<input checked="" type="checkbox"/>
EMMA	GRIFFITH	[REDACTED]	DAUGHTER	<input type="checkbox"/>	<input checked="" type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

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: **66900** Date: **03-07-2019** Your occupation: [REDACTED] If the IRS sent you an Identity Protection PIN, enter it here (see inst.): [REDACTED]

Spouse's signature. If a joint return, both must sign. **00292** Date: **03-07-2019** Spouse's occupation: [REDACTED] If the IRS sent you an Identity Protection PIN, enter it here (see inst.): [REDACTED]

Paid Preparer Use Only

Preparer's signature: [REDACTED] PTIN: **P00728854** Firm's EIN: **80-0428310** Check if: 3rd Party Designee Self-employed

Preparer's name: [REDACTED] Phone no.: [REDACTED]

Firm's name: [REDACTED]

Firm's address: [REDACTED]

For Disclosure, Privacy Act, and Paperwork Reduction Act Notice, see separate instructions. Form **1040** (2018)

1	Wages, salaries, tips, etc. Attach Form(s) W-2	1	82,797
2a	Tax-exempt interest	2a	
3a	Qualified dividends	3a	
4a	IRAs, pensions, and annuities	4a	
5a	Social security benefits	5a	
6	Total income. Add lines 1 through 5. Add any amount from Schedule 1, line 22	6	11,993
7	Adjusted gross income. If you have no adjustments to income, enter the amount from line 6; otherwise, subtract Schedule 1, line 36, from line 6	7	91,608
8	Standard deduction or itemized deductions (from Schedule A)	8	24,000
9	Qualified business income deduction (see instructions)	9	2,194
10	Taxable income. Subtract lines 8 and 9 from line 7. If zero or less, enter -0-	10	65,414
11	a Tax (see inst.) 7,470 (check if any from: 1 <input type="checkbox"/> Form(s) 8814 2 <input type="checkbox"/> Form 4972 3 <input type="checkbox"/>)	11	7,470
12	b Add any amount from Schedule 2 and check here <input type="checkbox"/>	12	3,641
13	a Child tax credit/credit for other dependents 1,000 b Add any amount from Schedule 3 & check here <input checked="" type="checkbox"/>	13	3,829
14	Subtract line 12 from line 11. If zero or less, enter -0-	14	1,668
15	Other taxes. Attach Schedule 4	15	5,497
16	Total tax. Add lines 13 and 14	16	5,942
17	Refundable credits: a EIC (see inst.) b Sch 8812 c Form 8863 1,760	17	1,760
18	Add any amount from Schedule 5	18	7,702
19	If line 18 is more than line 15, subtract line 15 from line 18. This is the amount you overpaid	19	2,205
20a	Amount of line 19 you want refunded to you. If Form 8888 is attached, check here <input type="checkbox"/>	20a	2,205
21	Amount of line 19 you want applied to your 2019 estimated tax	21	
22	Amount you owe. Subtract line 18 from line 15. For details on how to pay, see instructions	22	
23	Estimated tax penalty (see instructions)	23	

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.

Refund

Direct deposit? See instructions.

b Routing number: [REDACTED] **c** Type: Checking Savings

d Account number: [REDACTED]

SCHEDULE 1
(Form 1040)

Additional Income and Adjustments to Income

OMB No. 1545-0074

2018

Attachment
Sequence No. **01**

Department of the Treasury
Internal Revenue Service

▶ Attach to Form 1040.

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

Name(s) shown on Form 1040

Your social security number

Name(s) shown on Form 1040		Your social security number	
JASON & MELISSA GRIFFITH		[REDACTED]	
Additional Income	1-9b	Reserved	1-9b
	10	Taxable refunds, credits, or offsets of state and local income taxes	10 189
	11	Alimony received	11
	12	Business income or (loss). Attach Schedule C or C-EZ	12 11,804
	13	Capital gain or (loss). Attach Schedule D if required. If not required, check here <input type="checkbox"/>	13
	14	Other gains or (losses). Attach Form 4797	14
	15a	Reserved	15b
	16a	Reserved	16b
	17	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E	17
	18	Farm income or (loss). Attach Schedule F	18
	19	Unemployment compensation	19
	20a	Reserved	20b
21	Other income. List type and amount ▶	21	
	22	Combine the amounts in the far right column. If you don't have any adjustments to income, enter here and include on Form 1040, line 6. Otherwise, go to line 23	22 11,993
Adjustments to Income	23	Educator expenses	23
	24	Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106	24
	25	Health savings account deduction. Attach Form 8889	25
	26	Moving expenses for members of the Armed Forces. Attach Form 3903	26
	27	Deductible part of self-employment tax. Attach Schedule SE	27 834
	28	Self-employed SEP, SIMPLE, and qualified plans	28
	29	Self-employed health insurance deduction	29
	30	Penalty on early withdrawal of savings	30
	31a	Alimony paid b Recipient's SSN ▶	31a
	32	IRA deduction	32
	33	Student loan interest deduction	33 2,348
34	Reserved	34	
35	Reserved	35	
	36	Add lines 23 through 35	36 3,182

For Paperwork Reduction Act Notice, see your tax return instructions.

Schedule 1 (Form 1040) 2018

EEA

SCHEDULE 3
(Form 1040)

Nonrefundable Credits

OMB No. 1545-0074

2018

Attachment
Sequence No. **03**

Department of the Treasury
Internal Revenue Service

▶ Attach to Form 1040.

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

Name(s) shown on Form 1040

Your social security number

JASON & MELISSA GRIFFITH

Nonrefundable Credits	48	Foreign tax credit. Attach Form 1116 if required	48	
	49	Credit for child and dependent care expenses. Attach Form 2441	49	
	50	Education credits from Form 8863, line 19	50	2,641
	51	Retirement savings contributions credit. Attach Form 8880	51	
	52	Reserved	52	
	53	Residential energy credit. Attach Form 5695	53	
	54	Other credits from Form a <input type="checkbox"/> 3800 b <input type="checkbox"/> 8801 c <input type="checkbox"/> _____	54	
	55	Add the amounts in the far right column. Enter here and include on Form 1040, line 12	55	2,641

For Paperwork Reduction Act Notice, see your tax return instructions.

Schedule 3 (Form 1040) 2018

EEA

SCHEDULE 4
(Form 1040)

Department of the Treasury
Internal Revenue Service

Other Taxes

▶ **Attach to Form 1040.**

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

OMB No. 1545-0074

2018

Attachment
Sequence No. **04**

Name(s) shown on Form 1040

Your social security number

JASON & MELISSA GRIFFITH

Other Taxes	57	Self-employment tax. Attach Schedule SE	57	1,668
	58	Unreported social security and Medicare tax from: Form a <input type="checkbox"/> 4137 b <input type="checkbox"/> 8919	58	
	59	Additional tax on IRAs, other qualified retirement plans, and other tax-favored accounts. Attach Form 5329 if required	59	
	60a	Household employment taxes. Attach Schedule H	60a	
	b	Repayment of first-time homebuyer credit from Form 5405. Attach Form 5405 if required	60b	
	61	Health care: individual responsibility (see instructions)	61	
	62	Taxes from: a <input type="checkbox"/> Form 8959 b <input type="checkbox"/> Form 8960 c <input type="checkbox"/> Instructions; enter code(s) _____	62	
	63	Section 965 net tax liability installment from Form 965-A	63	
	64	Add the amounts in the far right column. These are your total other taxes . Enter here and on Form 1040, line 14	64	1,668

For Paperwork Reduction Act Notice, see your tax return instructions.

Schedule 4 (Form 1040) 2018

EEA