Form 1040

Department of the Treasury - Internal Revenue Service

U.S. Individual Income Tax Return 2019

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

Filing Status
☐ Single ☐ Married filing jointly ☐ 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 and middle initial
Florence C

Last name
Brownell

Your social security number
473043457

Spouse’s social security number

Home address (number and street). If you have a P.O. box, see instructions.
7 East Medieval Dr.

Apt. no.
630

City, town or post office, state, and ZIP code. If you have a foreign address, also complete spaces below (see instructions).
Henrico VA 23228

Foreign country name

Foreign province/state/county

Foreign postal code

If more than four dependents, see instructions and check 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
Your: ☐ Were born before January 2, 1955 ☐ Are blind
Spouse: ☐ Was born before January 2, 1955 ☐ Is blind

Dependents (see instructions):

 Dependents (see instructions): (1) First name Last name Social security number Relationship to you (i) If qualifies for (see instructions): Child tax credit Credit for other dependents

<table>
<thead>
<tr>
<th>Dependent</th>
<th>First name</th>
<th>Last name</th>
<th>Social security number</th>
<th>Relationship to you</th>
<th>Child tax credit</th>
<th>Credit for other dependents</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Juan</td>
<td>Brownell</td>
<td>465066633</td>
<td>Father</td>
<td>☐</td>
<td>☐</td>
</tr>
</tbody>
</table>

Standard Deduction for—
☐ Single or Married filing separately, $12,200
☐ Married filing jointly or Qualifying widow(er), $24,400
☐ Head of household, $18,360
☐ If you checked any box under Standard Deduction, see instructions.

1. Wages, salaries, tips, etc. Attach Form(s) W-2:
2a. Tax-exempt interest:
3a. Qualified dividends:
4a. IRA distributions:
5a. Social security benefits:
6. Capital gain or (loss). Attach Schedule D if required. If not required, check here.
7a. Other income from Schedule 1, line 9
7b. Add lines 1, 2b, 3b, 4b, 5b, 6, and 7a. This is your total income
8a. Adjustments to income from Schedule 1, line 22
8b. Subtract line 8a from line 7b. This is your adjusted gross income
9. Standard deduction or itemized deductions (from Schedule A)
10. Qualified business income deduction. Attach Form 8995 or Form 8995-A
11a. Add lines 9 and 10
11b. Taxable income. Subtract line 11a from line 8b. If zero or less, enter -0-

For Disclosure, Privacy Act, and Paperwork Reduction Act Notice, see separate instructions.
<table>
<thead>
<tr>
<th>Line</th>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>12a</td>
<td>Tax (see Inst.)</td>
<td>53,610.59</td>
</tr>
<tr>
<td>13a</td>
<td>Child tax credit or credit for other dependents</td>
<td>3,400.00</td>
</tr>
<tr>
<td>14</td>
<td>Subtract line 13b from line 12b. If zero or less, enter -0-</td>
<td></td>
</tr>
<tr>
<td>15</td>
<td>Other taxes, including self-employment tax, from Schedule 2, line 10</td>
<td></td>
</tr>
<tr>
<td>16</td>
<td>Add lines 14 and 15. This is your total tax</td>
<td></td>
</tr>
<tr>
<td>18</td>
<td>Other payments and refundable credits</td>
<td></td>
</tr>
<tr>
<td>19</td>
<td>Add lines 17 and 16. These are your total payments</td>
<td></td>
</tr>
<tr>
<td>20</td>
<td>If line 19 is more than line 16, subtract line 16 from line 19. This is the amount you overpaid</td>
<td></td>
</tr>
<tr>
<td>21a</td>
<td>Amount of line 20 you want refunded to you. If Form 8888 is attached, check here</td>
<td></td>
</tr>
<tr>
<td>22</td>
<td>Amount of line 20 you want applied to your 2020 estimated tax</td>
<td></td>
</tr>
<tr>
<td>23</td>
<td>Amount you owe. Subtract line 19 from line 16. For details on how to pay, see instructions</td>
<td></td>
</tr>
<tr>
<td>24</td>
<td>Estimated tax penalty (see instructions)</td>
<td></td>
</tr>
</tbody>
</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.*

Your signature: [Signature]

Date: 05/20/20

Your occupation: Captain

Spouse's signature: [Signature]

Date: [Date]

Spouse's occupation: [Occupation]

If the IRS sent you an Identity Protection PIN, enter it here (see inst.): [PIN]

If the IRS sent your spouse an Identity Protection PIN, enter it here (see inst.): [PIN]

Phone no.: 919-884-9745

Email address: FlorenceCBrownell999@gmail.com

Preparer's name: [Name]

Preparer's signature: [Signature]

Date: [Date]

PTIN: [PTIN]

Check if: 3rd Party Designee

Self-employed

Firm’s name: [Name]

Firm’s address: [Address]

Phone no.: [Phone]

Firm’s EIN: [EIN]

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