

Filing status: ☐ Single ☒ Married filing jointly ☐ Married filing separately ☐ Head of household ☐ Qualifying widow(er) **N/A**

Your first name and initial
 Jacqueline

Last name
 Porter

Your social security number
 2 5 8 5 4 1 6 8 4

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
 Gretchen

Last name
 Ward

Spouse's social security number
 2 6 5 2 5 9 7 4 1

Spouse standard deduction: ☐ Someone can claim your spouse as a dependent ☐ Spouse was born before January 2, 1954
☐ Spouse is blind ☒ Spouse itemizes on a separate return or you were dual-status alien

☒ Full-year health care coverage or exempt (see inst.)

Home address (number and street). If you have a P.O. box, see instructions.
 5 Pleasant Rd.

Apt. no.
 23D

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.
 Chesterton, IN 46304

If more than four dependents, see inst. and ✓ here ☒

Dependents (see instructions):		(2) Social security number	(3) Relationship to you	(4) ✓ if qualifies for (see inst.):	
(1) First name	Last name			Child tax credit	Credit for other dependents
Brandy	Cortez	1 7 8 4 9 8 4 6 5	son	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Jasmine	Mcki	1 4 8 4 4 6 4 5 1	daughter	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Joan	Copeland	8 8 9 7 4 3 9 4 1	daughter	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Doris	Gutierrez	6 6 3 5 8 2 5 6 4	son	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Sign Here
 Joint return? See instructions. Keep a copy for your records.

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
Jacqueline Porter

Date
 03/18/2018

Your occupation
 nurse

If the IRS sent you an Identity Protection PIN, enter it here (see inst.)
 5 8 9 7 8 4

Spouse's signature. If a joint return, **both** must sign.
Gretchen Ward

Date
 03/18/2018

Spouse's occupation
 dentist

If the IRS sent you an Identity Protection PIN, enter it here (see inst.)
 2 8 9 7 4 9

Paid Preparer Use Only

Preparer's name
 Amelia Alvarado

Preparer's signature
Amelia Alvarado

PTIN
 172603175

Firm's EIN
 654986163

Check if:
☒ 3rd Party Designee
☐ Self-employed

Firm's name ▶ Fernando Walters

Phone no.
 942063559

Firm's address ▶ 66 Amerige RoadBattle Ground, WA 98604

Attach Form(s)
W-2. Also attach
Form(s) W-2G and
1099-R if tax was
withheld.

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.

1	Wages, salaries, tips, etc. Attach Form(s) W-2	1	\$7,315	1
2a	Tax-exempt interest	2a	\$5,892	1
3a	Qualified dividends	3a	\$17,331	1
4a	IRAs, pensions, and annuities	4a	\$28,054	1
5a	Social security benefits	5a	\$7,315	1
6	Total income. Add lines 1 through 5. Add any amount from Schedule 1, line 22	6	\$30,460	1
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	\$30,460	1
8	Standard deduction or itemized deductions (from Schedule A)	8	\$28,054	1
9	Qualified business income deduction (see instructions)	9	\$33,267	1
10	Taxable income. Subtract lines 8 and 9 from line 7. If zero or less, enter -0-	10	\$17,331	1
11	a Tax (see inst.) \$7,315 (check if any from: 1 <input type="checkbox"/> Form(s) 8814 2 <input checked="" type="checkbox"/> Form 4972 3 <input type="checkbox"/>)	11	\$5,892	1
12	b Add any amount from Schedule 2 and check here <input checked="" type="checkbox"/>	12	\$17,331	1
13	a Child tax credit/credit for other dependents \$5,892 b Add any amount from Schedule 3 and check here <input checked="" type="checkbox"/>	13	\$28,054	1
14	Subtract line 12 from line 11. If zero or less, enter -0-	14	\$33,267	1
15	Other taxes. Attach Schedule 4	15	\$5,892	1
16	Total tax. Add lines 13 and 14	16	\$30,460	1
17	Federal income tax withheld from Forms W-2 and 1099	17	\$33,267	1
18	Refundable credits: a EIC (see inst.) \$17,331 b Sch. 8812 \$33,267 c Form 8863 \$7,315	18	\$28,054	1
19	Add any amount from Schedule 5 \$30,460	19	\$17,331	1
20a	Add lines 16 and 17. These are your total payments	20a	\$5,892	1
21	If line 18 is more than line 15, subtract line 15 from line 18. This is the amount you overpaid	21	\$5,892	1
22	Amount of line 19 you want refunded to you . If Form 8888 is attached, check here <input checked="" type="checkbox"/>	22	\$17,331	1
23	Routing number 1 5 4 1 9 8 4 1 6 c Type: <input type="checkbox"/> Checking <input checked="" type="checkbox"/> Savings	23	\$28,054	1
24	Account number 9 8 9 5 2 1 6 9 8 7 4 5 1 3 6 5 1			
25	Amount of line 19 you want applied to your 2019 estimated tax	25	\$5,892	1
26	Amount you owe . Subtract line 18 from line 15. For details on how to pay, see instructions	26	\$17,331	1
27	Estimated tax penalty (see instructions)	27	\$28,054	1

Refund

Direct deposit?
See instructions.