

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.
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Filing Status ☐ Single ☒ Married filing jointly ☐ Married filing separately (MFS) ☐ 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 name and middle initial Albert T.	Last name Gaytor	Your social security number 266 51 1966
If joint return, spouse's first name and middle initial Allison A.	Last name Gaytor	Spouse's social security number 266 34 1967

Home address (number and street). If you have a P.O. box, see instructions.
12340 Cocoshell Road

Apt. no. _____

City, town or post office, state, and ZIP code. If you have a foreign address, also complete spaces below (see instructions).
Coral Gables, FL 33134

Foreign country name _____ Foreign province/state/county _____ Foreign postal code _____

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):		(2) Social security number	(3) Relationship to you	(4) ✓ if qualifies for (see instructions):	
(1) First name	Last name			Child tax credit	Credit for other dependents
Crocker	Gaytor	261 55 1212	Son	<input type="checkbox"/>	<input checked="" type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

1 Wages, salaries, tips, etc. Attach Form(s) W-2 1 67,024 2a Tax-exempt interest 2a _____ 3a Qualified dividends 3a _____ 4a IRA distributions 4a _____ c Pensions and annuities 4c _____ 5a Social security benefits 5a _____ 6 Capital gain or (loss). Attach Schedule D if required. If not required, check here <input type="checkbox"/> 6 _____ 7a Other income from Schedule 1, line 9 7a _____ b Add lines 1, 2b, 3b, 4b, 5b, 6, and 7a. This is your total income 7b 67,362 8a Adjustments to income from Schedule 1, line 22 8a _____ b Subtract line 8a from line 7b. This is your adjusted gross income 8b 67,362 9 Standard deduction or itemized deductions (from Schedule A) 9 24,400 10 Qualified business income deduction. Attach Form 8995 or Form 8995-A 10 _____ 11a Add lines 9 and 10 11a 24,400 b Taxable income. Subtract line 11a from line 8b 11b 42,962	2b Taxable interest. Attach Sch. B if required 2b 338 b Ordinary dividends. Attach Sch. B if required 3b _____ b Taxable amount 4b _____ d Taxable amount 4d _____ b Taxable amount 5b _____ 6 _____ 7b 67,362 8a _____ 8b 67,362 9 24,400 10 _____ 11a 24,400 11b 42,962
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Standard Deduction for—
 • Single or Married filing separately, \$12,000
 • Married filing jointly or Qualifying widow(er), \$24,400
 • Head of household, \$18,350
 • If you checked any box under *Standard Deduction*, see instructions.

For Disclosure, Privacy Act, and Paperwork Reduction Act Notice, see separate instructions. Cat. No. 11320B Form **1040** (2019)

Form 1040 (2019)

Page 2

12a	Tax (see inst.) Check if any from Form(s): 1 <input type="checkbox"/> 8814 2 <input type="checkbox"/> 4972 3 <input type="checkbox"/>	12a	4,769	12b	4,769
b	Add Schedule 2, line 3, and line 12a and enter the total				
13a	Child tax credit or credit for other dependents	13a	500	13b	500
b	Add Schedule 3, line 7, and line 13a and enter the total				
14	Subtract line 13b from line 12b. If zero or less, enter -0-	14	4,269		
15	Other taxes, including self-employment tax, from Schedule 2, line 10	15			
16	Add lines 14 and 15. This is your total tax	16	4,269		
17	Federal income tax withheld from Forms W-2 and 1099	17	5,634		
18	Other payments and refundable credits:				
a	Earned income credit (EIC)	18a			
b	Additional child tax credit. Attach Schedule 8812	18b			
c	American opportunity credit from Form 8863, line 8	18c			
d	Schedule 3, line 14	18d			
e	Add lines 18a through 18d. These are your total other payments and refundable credits	18e			
19	Add lines 17 and 18e. These are your total payments	19	5,634		
Refund	20 If line 19 is more than line 16, subtract line 16 from line 19. This is the amount you overpaid	20	1,365		
Direct deposit? See instructions.	21a Amount of line 20 you want refunded to you . If Form 8888 is attached, check here <input type="checkbox"/>	21a	1,365		
	b Routing number	c Type: <input type="checkbox"/> Checking <input type="checkbox"/> Savings			
	d Account number				
	22 Amount of line 20 you want applied to your 2020 estimated tax	22			
Amount You Owe	23 Amount you owe. Subtract line 19 from line 16. For details on how to pay, see instructions	23			
	24 Estimated tax penalty (see instructions)	24			
Third Party Designee	Do you want to allow another person (other than your paid preparer) to discuss this return with the IRS? See instructions. <input type="checkbox"/> Yes. Complete below. <input type="checkbox"/> No				
(Other than paid preparer)	Designee's name	Phone no.	Personal identification number (PIN)		
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	Date	Your occupation	If the IRS sent you an Identity Protection PIN, enter it here (see inst.)	
Joint return? See instructions. Keep a copy for your records.	Spouse's signature. If a joint return, both must sign.	Date	Spouse's occupation	If the IRS sent your spouse an Identity Protection PIN, enter it here (see inst.)	
	Phone no.	Email address			
Paid Preparer Use Only	Preparer's name	Preparer's signature	Date	PTIN	Check if: <input type="checkbox"/> 3rd Party Designee <input type="checkbox"/> Self-employed
	Firm's name	Firm's address		Phone no.	Firm's EIN

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

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