

Filing Checklist for E-filed 2018 Tax Return - Save for Your Records

Prepared on: 05/23/2019 01:36:04 am

Return: C:\Users\david\Documents\HRBlock\BYRON KAUFFMAN 2018 Tax Return.T18

Step 1. Keep a copy

Print a copy of the return on standard forms for your records. We recommend that you also print and retain these supporting forms, which don't need to be sent to the IRS:

- - Background Worksheet
- - Last Year's Data Worksheet
- - Health Care Coverage
- - Affordability Exemption
- - Health Care Summary

2018 return information - Keep this for your records

Here is some additional information about your 2018 return. Keep this information with your records.

You will need your 2018 AGI to electronically sign your return next year:

Adjusted gross income: \$746

Confirmation Summary

The IRS accepted your federal return on WED MAY 22, 2019 04:19:02 PM.

2018 federal Submission ID is 440076-2019142-3106061

Quick Summary

Income		\$803
Adjustments	-	\$57
Adjusted gross income		\$746
Deductions	-	\$12,000
Taxable income		\$0
Tax withheld or paid already		\$55
Actual tax due	-	\$114
Refund applied to next year	-	\$0
You Owe		\$59

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

Your first name and initial BYRON	Last name KAUFFMAN	Your social security number 200-56-5504
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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	Last name	Spouse's social security number
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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). If you have a P.O. box, see instructions. 3010 N PENINSULA DRIVE	Apt. no.	Presidential Election Campaign (see inst.) <input type="checkbox"/> You <input type="checkbox"/> Spouse
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City, town or post office, state, and ZIP code. If you have a foreign address, attach Schedule 6. DAYTONA BEACH FL 32118	If more than four dependents, see inst. and <input checked="" type="checkbox"/> here <input type="checkbox"/>
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Dependents (see instructions):		(2) Social security number	(3) Relationship to you	(4) <input checked="" type="checkbox"/> if qualifies for (see inst.):	
(1) First name	Last name			Child tax credit	Credit for other dependents
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input 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.

Your signature Spouse's signature. If a joint return, both must sign.	Date Date	Your occupation ILLUSTRATOR Spouse's occupation	If the IRS sent you an Identity Protection PIN, enter it here (see inst.) <input type="text"/> If the IRS sent you an Identity Protection PIN, enter it here (see inst.) <input type="text"/>
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Paid Preparer Use Only Preparer's name Firm's name ▶ Firm's address ▶	Preparer's signature Phone no.	PTIN	Firm's EIN	Check if: <input type="checkbox"/> 3rd Party Designee <input type="checkbox"/> Self-employed
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1 Wages, salaries, tips, etc. Attach Form(s) W-2		1	0
Attach Form(s) W-2. Also attach Form(s) W-2G and 1099-R if tax was withheld.	2a Tax-exempt interest	2a	0
	3a Qualified dividends	3a	0
	4a IRAs, pensions, and annuities	4a	0
	5a Social security benefits	5a	
	b Taxable interest	2b	0
	b Ordinary dividends	3b	0
	b Taxable amount	4b	0
	b Taxable amount	5b	
6 Total income. Add lines 1 through 5. Add any amount from Schedule 1, line 22		6	803
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	746
8 Standard deduction or itemized deductions (from Schedule A)		8	12,000
9 Qualified business income deduction (see instructions)		9	0
10 Taxable income. Subtract lines 8 and 9 from line 7. If zero or less, enter -0-		10	0
11 a Tax (see inst.) 0 (check if any from: 1 <input type="checkbox"/> Form(s) 8814 2 <input type="checkbox"/> Form 4972 3 <input type="checkbox"/>)		11	0
b Add any amount from Schedule 2 and check here <input type="checkbox"/>		11	0
12 a Child tax credit/credit for other dependents b Add any amount from Schedule 3 and check here <input type="checkbox"/>		12	0
13 Subtract line 12 from line 11. If zero or less, enter -0-		13	0
14 Other taxes. Attach Schedule 4		14	114
15 Total tax. Add lines 13 and 14		15	114
16 Federal income tax withheld from Forms W-2 and 1099		16	0
17 Refundable credits: a EIC (see inst.) 55 b Sch. 8812 c Form 8863		17	55
Add any amount from Schedule 5 0		17	55
18 Add lines 16 and 17. These are your total payments		18	55
19 If line 18 is more than line 15, subtract line 15 from line 18. This is the amount you overpaid		19	
20a Amount of line 19 you want refunded to you. If Form 8888 is attached, check here <input type="checkbox"/>		20a	
Direct deposit? <input type="checkbox"/> See instructions.	b Routing number XXXXXXXXXX c Type: <input type="checkbox"/> Checking <input type="checkbox"/> Savings		
	d Account number XXXXXXXXXXXXXXXXXXXX		
21 Amount of line 19 you want applied to your 2019 estimated tax		21	
Amount You Owe	22 Amount you owe. Subtract line 18 from line 15. For details on how to pay, see instructions	22	59
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.

**SCHEDULE 1
(Form 1040)**

Department of the Treasury
Internal Revenue Service

Additional Income and Adjustments to Income

▶ **Attach to Form 1040.**
▶ **Go to www.irs.gov/Form1040 for instructions and the latest information.**

OMB No. 1545-0074

2018
Attachment
Sequence No. **01**

Name(s) shown on Form 1040		Your social security number		
BYRON KAUFFMAN		200-56-5504		
Additional Income	1-9b Reserved	1-9b		
	10 Taxable refunds, credits, or offsets of state and local income taxes	10	0	
	11 Alimony received	11		
	12 Business income or (loss). Attach Schedule C or C-EZ	12	803	
	13 Capital gain or (loss). Attach Schedule D if required. If not required, check here <input type="checkbox"/>	13	0	
	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	0	
	19 Unemployment compensation	19		
	20a Reserved	20b		
	21 Other income. List type and amount ▶	21	0	
	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	803	
	Adjustments to Income	23 Educator expenses	23	0
		24 Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106	24	0
		25 Health savings account deduction. Attach Form 8889	25	0
		26 Moving expenses for members of the Armed Forces. Attach Form 3903	26	0
		27 Deductible part of self-employment tax. Attach Schedule SE	27	57
		28 Self-employed SEP, SIMPLE, and qualified plans	28	0
		29 Self-employed health insurance deduction	29	
		30 Penalty on early withdrawal of savings	30	0
31a Alimony paid b Recipient's SSN ▶		31a		
32 IRA deduction		32	0	
33 Student loan interest deduction		33		
34 Reserved		34		
35 Reserved		35		
36 Add lines 23 through 35		36	57	

**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
BYRON KAUFFMAN		200-56-5504
Other Taxes	57 Self-employment tax. Attach Schedule SE	57 114
	58 Unreported social security and Medicare tax from: Form a <input type="checkbox"/> 4137 b <input type="checkbox"/> 8919	58 0
	59 Additional tax on IRAs, other qualified retirement plans, and other tax-favored accounts. Attach Form 5329 if required	59 0
	60a Household employment taxes. Attach Schedule H	60a 0
	b Repayment of first-time homebuyer credit from Form 5405. Attach Form 5405 if required	60b 0
	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 0
	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	64 114

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

Schedule 4 (Form 1040) 2018

**SCHEDULE C-EZ
(Form 1040)**

Department of the Treasury
Internal Revenue Service (99)

Name of proprietor

BYRON

KAUFFMAN

Net Profit From Business

(Sole Proprietorship)

- ▶ Partnerships, joint ventures, etc., generally must file Form 1065.
- ▶ Attach to Form 1040, 1040NR or 1041. ▶ See instructions on page 2.

OMB No. 1545-0074

2018

Attachment
Sequence No. **09A**

Social security number (SSN)

200-56-5504

Part I General Information

**You may use
Schedule C-EZ
instead of
Schedule C
only if you:**

- Had business expenses of \$5,000 or less,
- Use the cash method of accounting,
- Did not have an inventory at any time during the year,
- Did not have a net loss from your business,
- Had only one business as either a sole proprietor, qualified joint venture, or statutory employee.

And you:

- Had no employees during the year,
- Do not deduct expenses for business use of your home,
- Do not have prior year unallowed passive activity losses from this business, and
- Are not required to file **Form 4562**, Depreciation and Amortization, for this business. See the instructions for Schedule C, line 13, to find out if you must file.

A Principal business or profession, including product or service ILLUSTRATOR	B Enter business code (see page 2) ▶ 541400
C Business name. If no separate business name, leave blank. BYRON KAUFFMAN ILLUSTRATOR	D Enter your EIN (see page 2)
E Business address (including suite or room no.). Address not required if same as on page 1 of your tax return. 3010 N PENINSULA DRIVE City, town or post office, state, and ZIP code DAYTONA BEACH FL 32118	
F Did you make any payments in 2018 that would require you to file Form(s) 1099? (see the Instructions for Schedule C) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
G If "Yes," did you or will you file required Forms 1099? <input type="checkbox"/> Yes <input type="checkbox"/> No	

Part II Figure Your Net Profit

1 Gross receipts. Caution: If this income was reported to you on Form W-2 and the "Statutory employee" box on that form was checked, see <i>Statutory employees</i> in the instructions for Schedule C, line 1, and check here <input type="checkbox"/>	1	1,750
2 Total expenses (see page 2). If more than \$5,000, you must use Schedule C	2	947
3 Net profit. Subtract line 2 from line 1. If less than zero, you must use Schedule C. Enter on both Schedule 1 (Form 1040), line 12 , and Schedule SE, line 2 , or on Form 1040NR, line 13 and Schedule SE, line 2 (see instructions). (Statutory employees do not report this amount on Schedule SE, line 2.) Estates and trusts, enter on Form 1041, line 3	3	803

Part III Information on Your Vehicle. Complete this part **only** if you are claiming car or truck expenses on line 2.

4 When did you place your vehicle in service for business purposes? (month, day, year) ▶ _____

5 Of the total number of miles you drove your vehicle during 2018, enter the number of miles you used your vehicle for:

a Business _____ **b** Commuting (see instructions) _____ **c** Other _____

6 Was your vehicle available for personal use during off-duty hours? Yes No

7 Do you (or your spouse) have another vehicle available for personal use? Yes No

8a Do you have evidence to support your deduction? Yes No

b If "Yes," is the evidence written? Yes No

**SCHEDULE SE
(Form 1040)**

Department of the Treasury
Internal Revenue Service (99)

Self-Employment Tax

▶ Go to www.irs.gov/ScheduleSE for instructions and the latest information.
▶ Attach to Form 1040 or Form 1040NR.

OMB No. 1545-0074

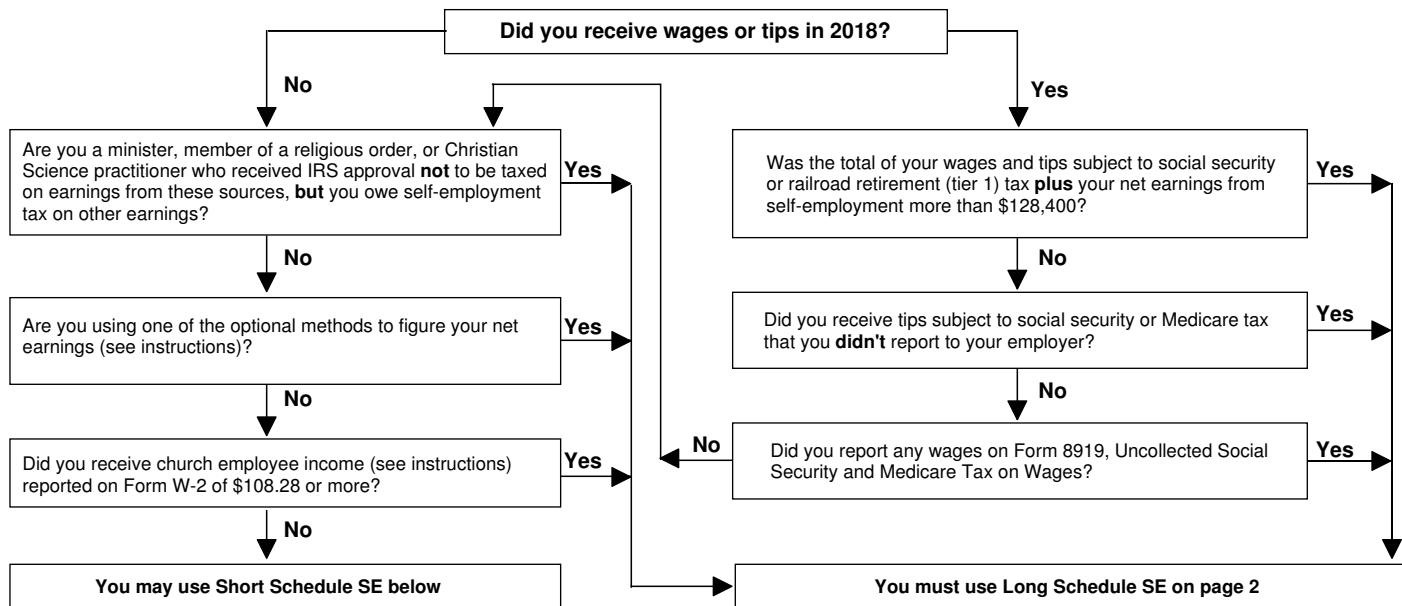
2018
Attachment
Sequence No. **17**

Name of person with self-employment income (as shown on Form 1040 or Form 1040NR)	Social security number of person with self-employment income ▶
BYRON KAUFFMAN	200-56-5504

Before you begin: To determine if you must file Schedule SE, see the instructions.

May I Use Short Schedule SE or Must I Use Long Schedule SE?

Note: Use this flowchart **only** if you must file Schedule SE. If unsure, see *Who Must File Schedule SE* in the instructions.



Section A—Short Schedule SE. Caution: Read above to see if you can use Short Schedule SE.

1a Net farm profit or (loss) from Schedule F, line 34, and farm partnerships, Schedule K-1 (Form 1065), box 14, code A.	1a	0
b If you received social security retirement or disability benefits, enter the amount of Conservation Reserve Program payments included on Schedule F, line 4b, or listed on Schedule K-1 (Form 1065), box 20, code AH	1b	(0)
2 Net profit or (loss) from Schedule C, line 31; Schedule C-EZ, line 3; Schedule K-1 (Form 1065), box 14, code A (other than farming); and Schedule K-1 (Form 1065-B), box 9, code J1. Ministers and members of religious orders, see instructions for types of income to report on this line. See instructions for other income to report	2	803
3 Combine lines 1a, 1b, and 2.	3	803
4 Multiply line 3 by 92.35% (0.9235). If less than \$400, you don't owe self-employment tax; don't file this schedule unless you have an amount on line 1b ▶	4	742
Note: If line 4 is less than \$400 due to Conservation Reserve Program payments on line 1b, see instructions.		
5 Self-employment tax. If the amount on line 4 is: • \$128,400 or less, multiply line 4 by 15.3% (0.153). Enter the result here and on Schedule 4 (Form 1040), line 57, or Form 1040NR, line 55. • More than \$128,400, multiply line 4 by 2.9% (0.029). Then, add \$15,921.60 to the result. Enter the total here and on Schedule 4 (Form 1040), line 57, or Form 1040NR, line 55.	5	114
6 Deduction for one-half of self-employment tax. Multiply line 5 by 50% (0.50). Enter the result here and on Schedule 1 (Form 1040), line 27, or Form 1040NR, line 27	6	57

2018

Form 1040- V

Department of the Treasury
Internal Revenue Service

▼ Detach Here and Mail With Your Payment and Return ▼

Form **1040-V**
Department of the Treasury
Internal Revenue Service (99)

Payment Voucher

OMB No. 1545-0074

▶ Do not staple or attach this voucher to your payment or return.

2018

Use this voucher when making a payment with Form 1040. Write your social security number (SSN) on your check or money order.

Amount you are paying by check or money order.
Make your check or money order payable to
"United States Treasury"

Dollars

59

200-56-5504

KIA 1017

BYRON

KAUFFMAN

3010 N PENINSULA DRIVE
DAYTONA BEACH

FL 32118

200565504 PQ KAUF 30 0 201812 610