



Note: The form, instructions, or publication you are looking for begins after this coversheet.

Please review the updated information below.

Reporting Excess Deductions on Termination of an Estate or Trust on Forms 1040, 1040-SR, and 1040-NR for Tax Year 2018 and Tax Year 2019

Under [Proposed Regulations 113295-18](#), an excess deduction on termination of an estate or trust allowed in arriving at adjusted gross income (Internal Revenue Code (IRC) section 67(e) expenses) is reported as an adjustment to income on Forms 1040, 1040-SR, and 1040-NR; non-miscellaneous itemized deductions are reported, as applicable, on Schedule A (Form 1040 or 1040-SR) or Schedule A (Form 1040-NR); and miscellaneous itemized deductions are not deductible. Taxpayers may rely on the proposed regulations for tax years of beneficiaries beginning after 2017 and before the final regulations are published.

For tax year 2019, an excess deduction for IRC section 67(e) expenses is reported as a write-in on Schedule 1 (Form 1040 or 1040-SR), Part II, line 22, or Form 1040-NR, line 34. On the dotted line next to line 22 or line 34 (depending on which form is filed), enter the amount of the adjustment and identify it using the code "ED67(e)". Include the amount of the adjustment in the total amount reported on line 22 or line 34.

For tax year 2018, an excess deduction for IRC section 67(e) expenses is reported as a write-in on Schedule 1 (Form 1040), line 36, or Form 1040-NR, line 34. On the dotted line next to line 36 or line 34, (depending on which form is filed), enter the amount of the adjustment and identify it using the code "ED67(e)". Include the amount of the adjustment in the total amount reported on line 36 or line 34.

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 Morris		Last name Hodges		Your social security number 5 9 8 4 6 5 1 3 2	
If joint return, spouse's first name and middle initial Antonia		Last name Nelson		Spouse's social security number 1 4 8 9 4 5 1 5 4	
Home address (number and street). If you have a P.O. box, see instructions. 9464 Illinois Ave.				Apt. no. 27E	Presidential Election Campaign Check here if you, or your spouse if filing jointly, want \$3 to go to this fund. Checking a box below will not change your tax or refund. <input checked="" type="checkbox"/> You <input type="checkbox"/> Spouse
City, town or post office, state, and ZIP code. If you have a foreign address, also complete spaces below (see instructions). Hendersonville, NC 28792					
Foreign country name N/A		Foreign province/state/county N/A		Foreign postal code N/A	If more than four dependents, see instructions and ✓ here ▶ <input checked="" type="checkbox"/>

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
Jonathan	Gilbert	1 4 8 9 6 4 5 1 5	father	<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"/>

Standard Deduction for—

- Single or Married filing separately, \$12,200
- Married filing jointly or Qualifying widow(er), \$24,400
- Head of household, \$18,350
- If you checked any box under **Standard Deduction**, see instructions.

1 Wages, salaries, tips, etc. Attach Form(s) W-2		1	\$27,274
2a Tax-exempt interest	2a \$14,866	b Taxable interest. Attach Sch. B if required	2b \$30,489
3a Qualified dividends	3a \$43,796	b Ordinary dividends. Attach Sch. B if required	3b \$14,866
4a IRA distributions	4a \$27,274	b Taxable amount	4b \$43,796
c Pensions and annuities	4c \$28,523	d Taxable amount	4d \$28,523
5a Social security benefits	5a \$30,489	b Taxable amount	5b \$30,489
6 Capital gain or (loss). Attach Schedule D if required. If not required, check here			6 \$27,274
7a Other income from Schedule 1, line 9			7a \$43,796
b Add lines 1, 2b, 3b, 4b, 4d, 5b, 6, and 7a. This is your total income			7b \$14,866
8a Adjustments to income from Schedule 1, line 22			8a \$27,274
b Subtract line 8a from line 7b. This is your adjusted gross income			8b \$30,489
9 Standard deduction or itemized deductions (from Schedule A)	9 \$28,523		
10 Qualified business income deduction. Attach Form 8995 or Form 8995-A	10 \$14,866		
11a Add lines 9 and 10		11a	\$43,796
b Taxable income. Subtract line 11a from line 8b. If zero or less, enter -0-		11b	\$27,274

12a	Tax (see inst.) Check if any from Form(s): 1 <input type="checkbox"/> 8814 2 <input checked="" type="checkbox"/> 4972 3 <input type="checkbox"/>	12a	\$14,866	
b	Add Schedule 2, line 3, and line 12a and enter the total	12b		\$30,489
13a	Child tax credit or credit for other dependents	13a	\$28,523	
b	Add Schedule 3, line 7, and line 13a and enter the total	13b		\$14,866
14	Subtract line 13b from line 12b. If zero or less, enter -0-	14		\$28,523
15	Other taxes, including self-employment tax, from Schedule 2, line 10	15		\$27,274
16	Add lines 14 and 15. This is your total tax	16		\$43,796
17	Federal income tax withheld from Forms W-2 and 1099	17		\$30,489
18	Other payments and refundable credits:			
a	Earned income credit (EIC)	18a	\$30,489	
b	Additional child tax credit. Attach Schedule 8812	18b	\$28,523	
c	American opportunity credit from Form 8863, line 8	18c	\$27,274	
d	Schedule 3, line 14	18d	\$14,866	
e	Add lines 18a through 18d. These are your total other payments and refundable credits	18e		\$14,866
19	Add lines 17 and 18e. These are your total payments	19		\$43,796
20	If line 19 is more than line 16, subtract line 16 from line 19. This is the amount you overpaid	20		\$27,274
21a	Amount of line 20 you want refunded to you . If Form 8888 is attached, check here <input checked="" type="checkbox"/>	21a		\$28,523
b	Routing number 4 6 8 7 4 1 6 5 6	c	Type: <input type="checkbox"/> Checking <input checked="" type="checkbox"/> Savings	
d	Account number 2 5 9 8 5 2 5 6 4 1 0 6 5 1 6 8 4			
22	Amount of line 20 you want applied to your 2020 estimated tax	22	\$14,866	
23	Amount you owe. Subtract line 19 from line 16. For details on how to pay, see instructions	23		\$43,796
24	Estimated tax penalty (see instructions)	24	\$27,274	

RefundDirect deposit?
See instructions.**Amount You Owe****Third Party Designee**

(Other than paid preparer)

Do you want to allow another person (other than your paid preparer) to discuss this return with the IRS? See instructions. ☒ **Yes.** Complete below. ☐ **No**

Designee's name ▶	Mario Henry	Phone no. ▶	518657446	Personal identification number (PIN) ▶	2 5 8 9 5
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Sign HereJoint 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	Date	Your occupation	If the IRS sent you an Identity Protection PIN, enter it here (see inst.)
<i>Morris Hodges</i>	12/27/2019	Lifeguard	9 8 5 6 6 2
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.)
<i>Antonia Nelson</i>	12/27/2019	Mechanic	7 5 6 2 6 3
Phone no.	Email address		
459768527	klaudon@icloud.com		

Paid Preparer Use Only

Preparer's name	Preparer's signature	Date	PTIN	Check if:
Belinda Reyes	<i>Belinda Reyes</i>	12/27/2019	643496769	<input checked="" type="checkbox"/> 3rd Party Designee
Firm's name ▶	Firm's address ▶	Phone no.	Firm's EIN ▶	<input type="checkbox"/> Self-employed
Leona Owens	729 Arch Court Roanoke Rapids, NC 27870	963645599	292032834	

Go to www.irs.gov/Form1040 for instructions and the latest information.Form **1040** (2019)