

For the year Jan. 1–Dec. 31, 2016, or other tax year beginning 01/01, 2016, ending 12/30, 2016		See separate instructions.
Your first name and initial Emily	Last name Hill	Your social security number 5 7 4 9 6 3 9 4 7
If a joint return, spouse's first name and initial N/A	Last name N/A	Spouse's social security number N / A
Home address (number and street). If you have a P.O. box, see instructions. 8901 COMPTON LOS ANGELES CA 90002-1333 USA		Apt. no. 8901
City, town or post office, state, and ZIP code. If you have a foreign address, also complete spaces below (see instructions). London		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
Foreign country name England	Foreign province/state/county N/A	Foreign postal code RG6 4UT

Filing Status

Check only one box.

- 1 ☒ Single
- 2 ☐ Married filing jointly (even if only one had income)
- 3 ☐ Married filing separately. Enter spouse's SSN above and full name here. ▶
- 4 ☐ Head of household (with qualifying person). (See instructions.) If the qualifying person is a child but not your dependent, enter this child's name here. ▶
- 5 ☐ Qualifying widow(er) with dependent child

ExemptionsIf more than four dependents, see instructions and check here ☐

6a <input type="checkbox"/> Yourself. If someone can claim you as a dependent, do not check box 6a		Boxes checked on 6a and 6b	
b <input type="checkbox"/> Spouse		No. of children on 6c who:	
c Dependents:		• lived with you	
(1) First name Last name (2) Dependent's social security number (3) Dependent's relationship to you (4) <input checked="" type="checkbox"/> if child under age 17 qualifying for child tax credit (see instructions)		• did not live with you due to divorce or separation (see instructions)	
Marry Hill 258 08 3679 sister <input type="checkbox"/>		Dependents on 6c not entered above	
Rudy Henry 1 5 6 8 8 1 8 8 7 cousin <input type="checkbox"/>		Add numbers on lines above ▶	
Rush Henry 1 6 6 2 5 6 8 8 0 cousin <input checked="" type="checkbox"/>			
d Total number of exemptions claimed			

Income

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

If you did not get a W-2, see instructions.

7 Wages, salaries, tips, etc. Attach Form(s) W-2	7	100
8a Taxable interest. Attach Schedule B if required	8a	90
b Tax-exempt interest. Do not include on line 8a	8b	75
9a Ordinary dividends. Attach Schedule B if required	9a	125
b Qualified dividends	9b	150
10 Taxable refunds, credits, or offsets of state and local income taxes	10	256
11 Alimony received	11	324
12 Business income or (loss). Attach Schedule C or C-EZ	12	119
13 Capital gain or (loss). Attach Schedule D if required. If not required, check here <input type="checkbox"/>	13	95
14 Other gains or (losses). Attach Form 4797	14	522
15a IRA distributions	15a	450
b Taxable amount	15b	50
16a Pensions and annuities	16a	340
b Taxable amount	16b	40
17 Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E	17	95
18 Farm income or (loss). Attach Schedule F	18	100
19 Unemployment compensation	19	200
20a Social security benefits	20a	52
b Taxable amount	20b	5
21 Other income. List type and amount	21	0
22 Combine the amounts in the far right column for lines 7 through 21. This is your total income ▶	22	2346

Adjusted Gross Income

23 Educator expenses	23	100
24 Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106 or 2106-EZ	24	0
25 Health savings account deduction. Attach Form 8889	25	100
26 Moving expenses. Attach Form 3903	26	50
27 Deductible part of self-employment tax. Attach Schedule SE	27	0
28 Self-employed SEP, SIMPLE, and qualified plans	28	0
29 Self-employed health insurance deduction	29	57
30 Penalty on early withdrawal of savings	30	7
31a Alimony paid b Recipient's SSN ▶	31a	0
32 IRA deduction	32	90
33 Student loan interest deduction	33	100
34 Tuition and fees. Attach Form 8917	34	50
35 Domestic production activities deduction. Attach Form 8903	35	1000
36 Add lines 23 through 35	36	1554
37 Subtract line 36 from line 22. This is your adjusted gross income ▶	37	792

Tax and Credits**Standard Deduction for—**

• People who check any box on line 39a or 39b or who can be claimed as a dependent, see instructions.

• All others:
Single or Married filing separately, \$6,300
Married filing jointly or Qualifying widow(er), \$12,600
Head of household, \$9,300

38	Amount from line 37 (adjusted gross income)	38	700
39a	Check <input type="checkbox"/> You were born before January 2, 1952, <input type="checkbox"/> Blind. Total boxes checked ▶ 39a <input type="checkbox"/>		
	if: <input type="checkbox"/> Spouse was born before January 2, 1952, <input type="checkbox"/> Blind.		
b	If your spouse itemizes on a separate return or you were a dual-status alien, check here ▶ 39b <input type="checkbox"/>		
40	Itemized deductions (from Schedule A) or your standard deduction (see left margin)	40	123
41	Subtract line 40 from line 38	41	577
42	Exemptions. If line 38 is \$155,650 or less, multiply \$4,050 by the number on line 6d. Otherwise, see instructions	42	0
43	Taxable income. Subtract line 42 from line 41. If line 42 is more than line 41, enter -0-	43	577
44	Tax (see instructions). Check if any from: a <input type="checkbox"/> Form(s) 8814 b <input checked="" type="checkbox"/> Form 4972 c <input type="checkbox"/>	44	140
45	Alternative minimum tax (see instructions). Attach Form 6251	45	122
46	Excess advance premium tax credit repayment. Attach Form 8962	46	133
47	Add lines 44, 45, and 46	47	415
48	Foreign tax credit. Attach Form 1116 if required	48	32
49	Credit for child and dependent care expenses. Attach Form 2441	49	65
50	Education credits from Form 8863, line 19	50	66
51	Retirement savings contributions credit. Attach Form 8880	51	90
52	Child tax credit. Attach Schedule 8812, if required	52	90
53	Residential energy credits. Attach Form 5695	53	45
54	Other credits from Form: a <input type="checkbox"/> 3800 b <input checked="" type="checkbox"/> 8801 c <input type="checkbox"/>	54	70
55	Add lines 48 through 54. These are your total credits	55	458
56	Subtract line 55 from line 47. If line 55 is more than line 47, enter -0-	56	43

Other Taxes

57	Self-employment tax. Attach Schedule SE	57	100
58	Unreported social security and Medicare tax from Form: a <input type="checkbox"/> 4137 b <input checked="" type="checkbox"/> 8919	58	190
59	Additional tax on IRAs, other qualified retirement plans, etc. Attach Form 5329 if required	59	111
60a	Household employment taxes from Schedule H	60a	245
b	First-time homebuyer credit repayment. Attach Form 5405 if required	60b	643
61	Health care: individual responsibility (see instructions) Full-year coverage <input checked="" type="checkbox"/>	61	654
62	Taxes from: a <input type="checkbox"/> Form 8959 b <input checked="" type="checkbox"/> Form 8960 c <input type="checkbox"/> Instructions; enter code(s)	62	33
63	Add lines 56 through 62. This is your total tax	63	2019

Payments

If you have a qualifying child, attach Schedule EIC.

64	Federal income tax withheld from Forms W-2 and 1099	64	456
65	2016 estimated tax payments and amount applied from 2015 return	65	55
66a	Earned income credit (EIC)	66a	768
b	Nontaxable combat pay election 66b 109		
67	Additional child tax credit. Attach Schedule 8812	67	500
68	American opportunity credit from Form 8863, line 8	68	200
69	Net premium tax credit. Attach Form 8962	69	100
70	Amount paid with request for extension to file	70	200
71	Excess social security and tier 1 RRTA tax withheld	71	543
72	Credit for federal tax on fuels. Attach Form 4136	72	226
73	Credits from Form: a <input checked="" type="checkbox"/> 2439 b <input type="checkbox"/> Reserved c <input type="checkbox"/> 8885 d <input type="checkbox"/>	73	100
74	Add lines 64, 65, 66a, and 67 through 73. These are your total payments	74	3148

Refund

Direct deposit? See instructions.

75	If line 74 is more than line 63, subtract line 63 from line 74. This is the amount you overpaid	75	1129
76a	Amount of line 75 you want refunded to you . If Form 8888 is attached, check here <input type="checkbox"/>	76a	1129
b	Routing number 7 6 5 4 6 9 5 6 4 ▶ c Type: <input type="checkbox"/> Checking <input checked="" type="checkbox"/> Savings		
d	Account number 0 9 8 7 8 6 5 4 6 5 3 4 5 5 6 6 4		
77	Amount of line 75 you want applied to your 2017 estimated tax ▶	77	1000

Amount You Owe

78	Amount you owe. Subtract line 74 from line 63. For details on how to pay, see instructions ▶	78	1129
79	Estimated tax penalty (see instructions)	79	20

Third Party Designee

Do you want to allow another person to discuss this return with the IRS (see instructions)? ☐ **Yes.** Complete below. ☒ **No**

Designee's name ▶	Phone no. ▶	Personal identification number (PIN) ▶
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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 accurately list all amounts and sources of income I received during the tax year. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Your signature <i>emilly hill</i>	Date 06/17/1979	Your occupation <i>lawyer</i>	Daytime phone number 001431675849
Spouse's signature. If a joint return, both must sign. N/A	Date N/A	Spouse's occupation N/A	If the IRS sent you an Identity Protection PIN, enter it here (see inst.) N / A

Paid Preparer Use Only

Print/Type preparer's name <i>Jose Taylor</i>	Preparer's signature <i>jose taylor</i>	Date 04/30/1978	Check <input type="checkbox"/> if self-employed	PTIN N/A
Firm's name ▶ <i>WISH PH Company</i>	Firm's EIN ▶ <i>64567</i>			
Firm's address ▶ <i>8701 MAIE LOS ANGELES CA 90002-1340 USA</i>	Phone no. <i>7643965577</i>			