

Form **1040**

Department of the Treasury—Internal Revenue Service (99) **U.S. Individual Income Tax Return**

2018

OMB No. 1545-0074

IRS Use Only—Do not write or staple in this space.

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

Your first name and initial: G Last name: Spouse's social security number: 9830

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:

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.)

Home address (number and street). If you have a P.O. box, see instructions. Apt. no. 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. If more than four dependents, see inst. and ✓ here

Table with 5 columns: (1) First name, Last name, (2) Social security number, (3) Relationship to you, (4) Child tax credit, Credit for other dependents. Includes header 'Dependents (see instructions):' and a row for 'Joint return? See instructions. Keep a copy for your records.'

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.

Joint return? See instructions. Keep a copy for your records. Your signature, Date (04-11-2019), Your occupation (Student), Spouse's signature, Date, Spouse's occupation, and Identity Protection PIN fields.

Paid Preparer Use Only

Preparer's name, Preparer's signature, PTIN, Firm's EIN, Firm's name, Firm's address, Phone no., and Check if: 3rd Party Designee, Self-employed.

	1	Wages, salaries, tips, etc. Attach Form(s) W-2			1	0
	2a	Tax-exempt interest	2a		2b	0
Attach Form(s) W-2. Also attach Form(s) W-2G and 1099-R if tax was withheld.	3a	Qualified dividends	3a		3b	
	4a	IRAs, pensions, and annuities	4a		4b	
	5a	Social security benefits	5a		5b	
	6	Total income. Add lines 1 through 5. Add any amount from Schedule 1, line 22	6		6	0
	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		7	0
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.	8	Standard deduction or itemized deductions (from Schedule A)	8		8	12000
	9	Qualified business income deduction (see instructions)	9		9	
	10	Taxable income. Subtract lines 8 and 9 from line 7. If zero or less, enter -0-	10		10	0
	11	a Tax (see inst.) _____ (check if any from: 1 <input type="checkbox"/> Form(s) 8814 2 <input type="checkbox"/> Form 4972 3 <input type="checkbox"/> _____) b Add any amount from Schedule 2 and check here ▶ <input type="checkbox"/>	11		11	
	12	a Child tax credit/credit for other dependents _____ b Add any amount from Schedule 3 and check here ▶ <input type="checkbox"/>	12		12	
	13	Subtract line 12 from line 11. If zero or less, enter -0-	13		13	0
	14	Other taxes. Attach Schedule 4	14		14	
	15	Total tax. Add lines 13 and 14	15		15	0
	16	Federal income tax withheld from Forms W-2 and 1099	16		16	65. 00
	17	Refundable credits: a EIC (see inst.) _____ b Sch. 8812 _____ c Form 8863 _____ Add any amount from Schedule 5	17		17	
18	Add lines 16 and 17. These are your total payments	18		18	65. 00	
Refund	19	If line 18 is more than line 15, subtract line 15 from line 18. This is the amount you overpaid	19		19	65. 00
	20a	Amount of line 19 you want refunded to you. If Form 8888 is attached, check here ▶ <input type="checkbox"/>	20a		20a	65. 00
Direct deposit? See instructions.	b	Routing number _____ ▶ c Type: <input type="checkbox"/> Checking <input type="checkbox"/> Savings				
	d	Account number _____				
	21	Amount of line 19 you want applied to your 2019 estimated tax . . . ▶ 21				-0-
Amount You Owe	22	Amount you owe. Subtract line 18 from line 15. For details on how to pay, see instructions . . . ▶ 22			22	
	23	Estimated tax penalty (see instructions) ▶ 23			23	

**Substitute for Form W-2, Wage and Tax Statement, or
Form 1099-R, Distributions From Pensions, Annuities, Retirement
or Profit-Sharing Plans, IRAs, Insurance Contracts, etc.**

▶ Attach to Form 1040 or 1040X.

▶ Go to www.irs.gov/Form4852 for the latest information.

1 Name(s) shown on return G [REDACTED]	2 Your social security number [REDACTED]-9830
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3 Address
[REDACTED] SC [REDACTED]

4 Enter year in space provided and check one box. For the tax year ending December 31, 2018,
I have been unable to obtain (or have received an incorrect) Form W-2 **OR** Form 1099-R.
I hereby notify the IRS of this fact. The amounts shown on line 7 or line 8 are my best estimates for all wages or payments made to me and tax withheld by my employer or payer named on line 5.

5 Employer's or payer's name, address, and ZIP code HARRIS TEETER, LLC [REDACTED]	6 Employer's or payer's TIN (if known) 56-[REDACTED]
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7 Form W-2. Enter wages, tips, other compensation, and taxes withheld.

a Wages, tips, and other compensation	0	f State income tax withheld	13.06
b Social security wages	0	(Name of state)	SC
c Medicare wages and tips	0	g Local income tax withheld	
d Social security tips	.	(Name of locality)	
e Federal income tax withheld	15.67	h Social security tax withheld	39.98
		i Medicare tax withheld	9.35

8 Form 1099-R. Enter distributions from pensions, annuities, retirement or profit-sharing plans, IRAs, insurance contracts, etc.

a Gross distribution		f Federal income tax withheld	
b Taxable amount		g State income tax withheld	
c Taxable amount not determined	<input type="checkbox"/>	(Name of state)	
d Total distribution	<input type="checkbox"/>	h Local income tax withheld	
e Capital gain (Included in line 8b)		(Name of locality)	
		i Employee contributions	
		j Distribution codes	

9 How did you determine the amounts on lines 7 and 8 above?
Lines 7 (a), (b), (c), are corrected as I did not receive any "wages" as defined in IRC Section 3401(a) and 3121(a).
Lines 7 (e), (h), and (i) were derived from the W-2 information return sent to me.

10 Explain your efforts to obtain Form W-2, Form 1099-R, or Form W-2c, Corrected Wage and Tax Statement.

None

General Instructions

Section references are to the Internal Revenue Code.

Future developments. For the latest information about developments related to Form 4852, such as legislation enacted after it was published, go to www.irs.gov/Form4852.

Purpose of form. Form 4852 serves as a substitute for Forms W-2, W-2c, and 1099-R and is completed by you or your representatives when (a) your employer or payer doesn't issue you a Form W-2 or Form 1099-R or (b) an employer or payer has issued an incorrect Form W-2 or Form 1099-R. Attach this form to the back of your income tax return before any supporting forms or schedules.

You should always attempt to get your Form W-2, Form W-2c, or Form 1099-R from your employer or payer before contacting the IRS or filing Form 4852. If you don't receive the missing or corrected form from your employer or payer by the end of February, you may call the IRS at 800-829-1040 for assistance. You must provide your name, address (including ZIP code), phone number, social security number, and dates of employment. You also must provide your employer's or payer's name, address (including ZIP code), and phone number. The IRS will contact your employer or payer and request the missing form. The IRS also will send you a Form 4852. If you don't receive the missing form in sufficient time to file your income tax return timely, you may use the Form 4852 that the IRS sent you.

If you received an incorrect Form W-2 or Form 1099-R, you should always attempt to have your employer or payer issue a corrected form before filing Form 4852.

Note: Retain a copy of Form 4852 for your records. To help protect your social security benefits, keep a copy of Form 4852 until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year. After September 30 following the date shown on line 4, you may use your Social Security online account to verify wages reported by your employers. Please visit www.SSA.gov/myaccount. Or, you may contact your local SSA office to verify wages reported by your employer.

Will I need to amend my return? If you receive a Form W-2, Form W-2c, or Form 1099-R after your return is filed with Form 4852, and the information you receive indicates that the information reported on your original return is incorrect, you must amend your return by filing Form 1040X, Amended U.S. Individual Income Tax Return. You are responsible for filing your income tax return with accurate information regardless of whether you receive a Form W-2, Form W-2c, or Form 1099-R and regardless of whether the information on any forms received is correct.

Penalties. The IRS will challenge the claims of individuals who attempt to avoid or evade their federal tax liability by using Form 4852 in a manner other than as prescribed. Potential penalties for the improper use of Form 4852 include:

FORM 1099-DIV

CORRECTED (if checked)

This form is in a format prescribed by the IRS. It has been modified for clarity by USAA Investment Management Company.

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code USAA FEDERAL SAVINGS BANK c/o USAA GROWTH & INCOME FUND 9800 FREDERICKSBURG ROAD SAN ANTONIO, TX 78288		1a Total ordinary dividends 0.00	OMB No. 1545-0110 2018 Form 1099-DIV	Dividends and Distributions
PAYER'S federal identification number 74-6393739		1b Qualified dividends 0.00		
RECIPIENT'S identification number XXX-XX-9830		* Short-term capital gain 0.00	2a Total capital gain distributions (Long-term) -0-	Copy B For Recipient This is important tax information and is being furnished to the IRS. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.
RECIPIENT'S name G [REDACTED]		2b Unrecap. Sec. 1250 gain \$ 0.00	4 Federal income tax withheld \$ 0.00	
Account number (see instructions) 37- [REDACTED]		3 Nondividend distributions \$ 0.00	8 Foreign country or U.S. possession	
		7 Foreign tax paid \$ 0.00	12 Specified private activity bond interest dividends \$ 0.00	
		11 Exempt-interest dividends \$ 0.00		

Form 1099-DIV (keep for your records) www.irs.gov/Form1099DIV Department of the Treasury-Internal Revenue Service

This corrected Form 1099-DIV is submitted to rebut a document known to have been submitted by the party identified above as "PAYER," which erroneously alleges a payment to the party identified above as the "RECIPIENT" of "gains, profit or income" made in the course of a "trade or business," or connected to a governmental unit, agency, or instrumentality thereof or otherwise constituted gains, profits, or income within the meaning of relevant law.

Under the penalty of perjury, I declare that I have examined this statement and to the best of my knowledge and belief, it is true, correct, and complete.

G [REDACTED] April 13, 2019

FORM 1099-DIV

CORRECTED (if checked)

This form is in a format prescribed by the IRS. It has been modified for clarity by USAA Investment Management Company.

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code USAA FEDERAL SAVINGS BANK c/o USAA CORNERSTONE MODERATE FUND 9800 FREDERICKSBURG ROAD SAN ANTONIO, TX 78238		1a Total ordinary dividends 0.00 1b Qualified dividends 0.00 * Short-term capital gain \$ 0.00	OMB No. 1545-0110 2018 Form 1099-DIV	Dividends and Distributions
PAYER'S federal identification number 74-6393739	RECIPIENT'S identification number XXX-XX-9830	2b Unrecap. Sec. 1250 gain \$ 0.00	2a Total capital gain distributions (Long-term) \$ 0.00	Copy B For Recipient This is important tax information and is being furnished to the IRS. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.
		3 Nondividend distributions \$ 0.00	4 Federal income tax withheld \$ 0.00	
RECIPIENT'S name G [REDACTED]		7 Foreign tax paid \$ 0.00	8 Foreign country or U.S. possession	
Account number (see instructions) 47- [REDACTED]		11 Exempt-interest dividends \$ 0.00	12 Specified private activity bond interest dividends \$ 0.00	

Form 1099-DIV (keep for your records) www.irs.gov/Form1099DIV Department of the Treasury-Internal Revenue Service

This corrected Form 1099-DIV is submitted to rebut a document known to have been submitted by the party identified above as "PAYER," which erroneously alleges a payment to the party identified above as the "RECIPIENT" of "gains, profit or income" made in the course of a "trade or business," or connected to a governmental unit, agency, or instrumentality thereof or otherwise constituted gains, profits, or income within the meaning of relevant law.

Under the penalty of perjury, I declare that I have examined this statement and to the best of my knowledge and belief, it is true, correct, and complete.

G [REDACTED] April 13, 2019