Adjustments to Income

ORG28

	TRADITIONAL IRA CONTRIB	UTIONS		Taxpayer	Spouse	
1	Traditional IRA contributions made for 2018					
2	Check if you were covered by a retirement plan at wo					
3	Check if you wish to make an additional contribution	to vour traditional IRA	before the			
	due date of your return					
4	If line 3 is checked, check this box to contribute the r					
5	Or enter the amount you wish to contribute		<u>_</u>	154		
	If you (a) received traditional IRA distributions during 2018 and you have made nondeductible IRA contributional IRAs, including SIMPLE IRAs, OR (b) choose to make any nondeductible traditional IRA contributional this information:				any of your or 2018 , please	
6	Enter the value of all of your IRAs on 12/31/2018					
7	Enter the value of all recharacterizations after 12/31/2	2018				
8	Enter the amount of any outstanding rollovers as of 1					
If you received IRA distributions during 2018, please complete ORG7.						
ROTH IRA CONTRIBUTIONS				Taxpayer	Spouse	
1	Roth IRA contributions made for 2018					
2	Check if you wish to make an additional contribution to your Roth IRA before the					
_	due date of your return					
3	If line 2 is checked, check this box to contribute the maximum allowable amount					
4	Or enter the amount you wish to contribute					
CELE EMPLOYED DENGLON CONTRIBUTIONS				Tavaavav	Snove -	
	SELF-EMPLOYED PENSION CONT	KIBUTIONS		Taxpayer	Spouse	
Money Purchase Plan Keogh and Multiple Plans:						
1 a Payments made and/or expected to be made to a money purchase Keogh plan for 2018						
b Check this box if you wish to contribute the maximum amount to your money purchase Keogh for 2018						
Profit Sharing Plan Keogh:						
2 a Payments made and/or expected to be made to a profit sharing Keogh for 2018						
b Check this box if you wish to contribute the maximum amount to your profit sharing						
D-6	Keogh for 2018					
Defined Benefit Plan Keogh: 3 Payments made and/or expected to be made to a defined benefit Keogh plan for 2018						
SEP:						
4 a Payments made and/or expected to be made to a SEP for 2018						
b Check this box if you wish to contribute the maximum amount to your SEP for 2018						
Self-Employed SIMPLE Plan:						
5 a Payments made and/or expected to be made to a self-employed SIMPLE plan for 2018						
b Enter matching contributions only to report on Form 1040 to a self-employed SIMPLE						
plan for 2018						
Individual 401(k): 6 a Elective deferrals made and/or expected to be made to an Individual 401(k) plan						
for 2018						
b Catch-up contributions made and/or expected to be made to an Individual 401(k) for 2018						
c Employer matching profit-sharing contribution made and/or expected to be made to an Individual 401(k) plan for 2018.						
d Check this box if you wish to contribute the maximum amount to your Individual 401(k)						
for 2018						
	7 a Elective deferrals made or expected to be made to a designated Roth 401(k) plan for 2018					
	• Catch-up contributions made or expected to be made to a designated Not	, , ,	<u> </u>			
		() F				
ALIMONY PAID						
	ecipient's name Recipient's SSN Alimony paid					
1	•	-	, , , , ,			
2						