1040

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

2020

OMB No. 1545-007

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

Filing Status	i	Single Married filing jointly	Marrie	d filing	separately	(MFS)	✓ Head of	hous	sehold (HOH)	Qua	lifying wi	dow(er) (QW)	
Check only one box.	-	u checked the MFS box, enter the r on is a child but not your dependen	_	our spo	ouse. If you	chec	ked the HOH o	r QV	V box, enter the	child's	name if	the qua	alifying	
Your first name and middle initial				Last name							Your social security number			
Stephen Thomas				Richards							3 3 8	8 1	9 1	
If joint return, spouse's first name and middle initial				ne					;	Spouse	's social s	ecurity	number	
Jenny				Richards						1 1 4	4 2 5	5 9	1 1	
Home address	(numbe	r and street). If you have a P.O. box, see	instructio	ns.					Apt. no.	Preside	ntial Elect	ion Ca	mpaign	
42 Wallaby La	ane										here if you			
City, town, or post office. If you have a foreign address, also cor Sydney				mplete spaces below. State				ZIP	spouse if filing jointly, to go to this fund. Che box below will not che			. Checl	king a	
Foreign country name			Foreign province/state/co				ounty F				cor refund		, -	
										You Spous				
At any time du	ring 20	20, did you receive, sell, send, exc	hange, o	r other	wise acquir	e any	financial intere	st ir	any virtual curr	ency?	☐ Yes		No	
Standard	Som	eone can claim: 🔲 You as a de	pendent	✓	Your spou	ise as	a dependent							
Deduction		Spouse itemizes on a separate retur	n or you	were a	dual-statu	s alier	1							
Age/Blindness	You:	Were born before January 2, 1	956	Are b	olind S	oouse	: Was bor	n be	efore January 2,	1956	✓ Is b	olind		
Dependents	(see	instructions):		(2)	Social secur	ity	(3) Relationsh	ip	(4) ✓ if qua		`			
If more	(1) Fi	rst name Last name			number		to you		Child tax cre	1 '				
than four dependents,														
see instructions	3 ——													
and check					 							<u> </u>		
here ►													0.000	
Attach	1	Wages, salaries, tips, etc. Attach I	_ ` ´	V - 2 .	· · · i			٠		1		10	9,000	
Sch. B if	2a	' <u>-</u>	2a		b Taxable in		t		2b					
required [3a		3a				Ordinary divide			3b				
	4a	_	4a							4b				
	5a		5a				axable amoun			5b				
Standard Deduction for—	6a	,	b Taxable amount						6b)				
Single or	7	Capital gain or (loss). Attach Schedule D if required. If not required, check here							▶ ⊔	7				
Married filing separately,	8	Other income from Schedule 1, lin					8							
\$12,400	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7,	and 8. Th	nis is yo	our total in	come		٠	•	9				
Married filing jointly or	10	Adjustments to income:					1							
Qualifying a From Schedule 1, line 22							10	_						
widow(er), \$24,800	b	Charitable contributions if you take	naritable contributions if you take the standard deduction. See instructions 10b											
Head of	С	Add lines 10a and 10b. These are your total adjustments to income												
household, \$18,650 L If you checked any box under Standard	11	Subtract line 10c from line 9. This is your adjusted gross income												
	12	Standard deduction or itemized deductions (from Schedule A)								12				
	13	Qualified business income deduction. Attach Form 8995 or Form 8995-A								13				
Deduction, see instructions.	14	Add lines 12 and 13								14				
	15	Taxable income. Subtract line 14	from line	e 11. If	zero or less	s, ente	er -0			15	5	10	9,000	

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	16	Tax (see instructions). Check	if any from Form	(s): 1 88	14 2 🗌 4972	3 🗌			16		
	17	Amount from Schedule 2, lin	e3						17		
	18	Add lines 16 and 17							18		
	19	Child tax credit or credit for other dependents							19		
	20	Amount from Schedule 3, lin	e7						20		
	21	Add lines 19 and 20							21		
	22	Subtract line 21 from line 18	. If zero or less,	enter -0				. [22		
	23	Other taxes, including self-e	mployment tax,	from Schedu	e 2, line 10			. [23		
	24	Add lines 22 and 23. This is	your total tax					▶ □	24		
	25	Federal income tax withheld	from:								
	а	Form(s) W-2				25a					
	b	Form(s) 1099				25b					
	С	Other forms (see instructions	s)			25c					
	d	Add lines 25a through 25c	•					. 2	25d		
• If you have a	26	2020 estimated tax payments and amount applied from 2019 return							26		
 If you have a L qualifying child, 	27	Earned income credit (EIC)		•		27					
attach Sch. EIC. If you have	28	Additional child tax credit. A				28					
nontaxable	29	American opportunity credit				29					
combat pay, see instructions.	30	Recovery rebate credit. See		•		30					
	31	Amount from Schedule 3, lin				31					
	32	Add lines 27 through 31. These are your total other payments and refundable credits									
	33	Add lines 27 through 31. These are your total other payments and refundable credits 32 Add lines 25d, 26, and 32. These are your total payments									
Defined	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid							34		
Refund	35a	Amount of line 34 you want refunded to you. If Form 8888 is attached, check here .									
Direct deposit?	▶b	Amount of line 34 you want refunded to you. If Form 8888 is attached, check here \Delta \sqrt{38} Routing number									
See instructions.	▶d	Account number									
	36	Amount of line 34 you want a	applied to your	2021 estimat	ed tax ▶	36					
Amount	37					1		•	37		
You Owe	· ·	Subtract line 33 from line 24. This is the amount you owe now Note: Schedule H and Schedule SE filers, line 37 may not represent all of the taxes you owe for									
For details on		2020. See Schedule 3, line 12e, and its instructions for details.									
how to pay, see instructions.	38	Estimated tax penalty (see in				38					
Third Party	Do	you want to allow another									
Designee		structions					s. Com	olete bel	ow.	☐ No	
		signee's	Phone		onal identification						
	na	me >		no. 🕨	•		number	(PIN) ►			
Sign		der penalties of perjury, I declare to ief, they are true, correct, and com									
Here		•	piete. Declaration t		1	ised on all lillo	illiation o			t you an Identity	
	. 10	ur signature		Date	Your occupation					N, enter it here	
Joint return?			Winning					(see ins	ee inst.) ▶		
See instructions.	Sp	ouse's signature. If a joint return, t	ooth must sign.	Date	Spouse's occupation			If the IRS sent your spouse an			
Keep a copy for your records.	,				Ider		tity Protection PIN, enter it here				
your records.						(see inst.) ▶					
		one no.	Email address						FINI OL		
Paid		eparer's name	Preparer's signat	ure		Date		ΓIN		Check if:	
Preparer		th Barreiles						1	\perp	Self-employed	
Use Only		m's name ▶						Phone r			
	-								n's EIN ▶		
Go to www.irs.go	v/Forn	n1040 for instructions and the late:	st information.							Form 1040 (2020)	