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.

Married filing separately, \$12,400 Married filing separately, \$12,400 Married filing jointly or Qualifying widow(er), \$24,800 Head of household, \$18,650 If you checked any box under Standard Deduction, see instructions. Add lines 1, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income Prom Schedule 1, line 22 India 10a India 10b Adjustments to income: India 10a India 10b Add lines 10a and 10b. These are your total adjustments to income India 10c India	Filing Status		Single Married filing jointly	Marr	ried filing	sepai	rately (N	(IFS	Head	of hou	sehold (HOH)	☐ Qı	ualify	ing wid	ow(er) (QW)
Posson is a Chillo but not your dependent Rebecca			u checked the MFS box, enter the name of your spouse. If you checked the HOH or QW box, enter the child's name if the qualifying													
Rebecca Durmstrang Durmst		pers	son is a child but not your depende	ent ►												
If joint return, spouse's first name and middle initial Last name Spouse's social security number Home address (number and street), if you have a P.O. box, see instructions. Apt. no. Crew (Crew of prost) of the province of the	Your first name and middle initial														-	
Home address (number and street). If you have a P.O. box, see instructions. 68 Thomas Lane City, town, or post office. If you have a foreign address, also complete spaces below. City, town, or post office. If you have a foreign address, also complete spaces below. Comparison of the comparison of	Rebecca			Durm	strang							0 0	6	7 2 5	5 5	1
City, town, or post office. If you have a foreign address, also complete spaces below. City town, or post office. If you have a foreign address, also complete spaces below. City town, or post office. If you have a foreign address, also complete spaces below. City town, or post office. If you have a foreign address, also complete spaces below. City town, or post office. If you have a foreign address, also complete spaces below. City town, or post office. If you have a foreign address, also complete spaces below. City town, or post office. If you have a foreign address, also complete spaces below. City town, or post office. If you have a foreign address, also complete spaces below. City town, or post office. If you have a foreign address, also complete spaces below. City town and town are a foreign address, also complete spaces below. City town and town are a foreign address, also complete spaces below. City town and town are a foreign address, also complete spaces below. City town and town are a foreign address, also complete spaces below. City town and town and town are a foreign address, also complete spaces below. City town and town are a foreign power and a foreign address, also complete spaces below. City town and a foreign address, also complete spaces below. City town and a dependent and town and a dependent and power and a de	If joint return, sp	Last n	Last name							Spous	se's s	social sec	curity	number		
City, town, or post office. If you have a foreign address, also complete spaces below. CA 7783 Toreign country name Foreign province/state/county Forei	Home address (numb	er and street). If you have a P.O. box, se	ee instruc	tions.						Apt. no.	Presid	denti	al Electi	on Ca	mpaign
Ontario Foreign country name Foreign province/state/county Foreign postal code You Spouse Spo	68 Thomas La	ne														
Foreign country name	City, town, or po	ost off	ice. If you have a foreign address, also	complete	spaces be	elow.		Stat	te	ZIP	code			· ·	•	
At any time during 2020, did you receive, sell, send, exchange, or otherwise acquire any financial interest in any virtual currency?	Ontario								CA		7783	box below will not change				
At any time during 2020, did you receive, sell, send, exchange, or otherwise acquire any financial interest in any virtual currency?	Foreign country name				Foreign province/state/county				У	For	reign postal code your tax				_	_
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, 1956 Are blind Spouse: Was born before January 2, 1956 Is blind Dependents (see instructions): (2) Social security to you Child tax credit Credit for other dependents than four dependents, see instructions and check here													L	<u>√</u> You	;	pouse
Deduction	At any time du	ing 2	020, did you receive, sell, send, ex	change,	or other	wise a	acquire	any f	financial inte	erest ir	n any virtual c	urrency	? [Yes	√ I	No
Age/Blindness You: Were born before January 2, 1956 Are blind Spouse: Was born before January 2, 1956 Is blind Dependents (see instructions): (2) Social security number (3) Relationship to you (4) ✓ if qualifies for (see instructions): Credit for other dependents for the dependents. dependents, see instructions and check here Image:		Son	neone can claim: 🔲 You as a d	depende	nt 🗌	Your	spouse	e as	a depender	nt						
Dependents (see instructions): (i) First name	Deduction		pouse itemizes on a separate return or you were a dual-status alien													
If more than four dependents, see instructions and check here ▶	Age/Blindness	You	: Were born before January 2,	1956	Are b	lind	Spo	use:	: Was l	orn b	efore January	2, 1956	3	☐ Is bl	ind	
If more in than four dependents, than four dependents, see instructions and check here ▶ □ Attach Sch. B if required. Attach Sch. B if requ	Dependents	ependents (see instructions): (2) Social security (3) Relationship (4) ✓ if quality								qualifies	for (s	see instru	ctions):		
dependents, see instructions and check here	If more	(1) F	irst name Last name		number			to you		Child tax cred		Cr	edit for ot	her dep	endents	
see instructions and check here 1																
and check here ▶ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □													1			
Attach Sch. B if required. 2a Tax-exempt interest . 2a b Taxable interest . 2b 57000 3a Qualified dividends . 3a b Ordinary dividends . 3b Taxable amount . 4b 645 4a IRA distributions . 4a b Taxable amount . 5b 5a Pensions and annuities . 5a b Taxable amount . 6b 5a Pensions and annuities . 6a b Taxable amount . 6b 4a Other income from Schedule D if required. If not required, check here . 7 475 8 Other income from Schedule 1, line 9 . 8 Married filing jointly or Qualifying widow(er), \$24,800 • Married filing jointly or Capital gain or (loss), Attach Schedule D if required. If not required income . 9 9 • Capital gain or (loss), Attach Schedule D if required. If not required, check here . 9 10 10 add lines 1, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income . 9 9 • Capital gain or (loss), Attach Schedule D if required. If not required, check here . 9 10 10 add lines 1, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income . 9 10 10 add lines 1, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income . 10 10 add lines 10a and 10b. These are your total adjustments to income . 10 10 10 10 10 10 10 10 10 10 10 10 10	and check												4			
Attach Sch. B if Sch. B if required. 2a Tax-exempt interest . 2a b Taxable interest . 2b 57000 3a Qualified dividends . 3a b Ordinary dividends . 3b IRA distributions . 4a b Taxable amount . 4b 645 Standard Deduction for- Single or Married filing separately, \$12,400 Married filing jointly or Qualifying widow(er), \$24,800 Head of household, \$18,650 Household, \$18,650 It Subtract line 10c from line 9. This is your adjusted gross income It you checked any box under Standard Deduction, see instructions, see instructions see	here ► ∐												Ц,			
Sch. B if required. 3a Qualified dividends . 3a b Ordinary dividends . 3b 4a IRA distributions . 4a b Taxable amount . 4b 645 5a Pensions and annuities . 5a b Taxable amount . 5b 6a Social security benefits . 6a b Taxable amount . 6b 7 Capital gain or (loss). Attach Schedule D if required. If not required, check here . 5 capitally, \$12,400 capitall	Attach			I I''	W-2 .			٠					-			57000
Standard Pensions and annuities Sa b Taxable amount 5b b Taxable amount 5b b Taxable amount 5b b Taxable amount 5b 5a 5a b Taxable amount 5b 5a 5a 5a 5a 5a 5a 5a			•		3a							· —				5/000
5a Pensions and annuities . 5a b Taxable amount . 5b 6a Social security benefits . 6a b Taxable amount . 6b 7 Capital gain or (loss). Attach Schedule D if required. If not required, check here . 7 475 8 Other income from Schedule 1, line 9 . 8 9 Add lines 1, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income . 9 10 Adjustments to income: a From Schedule 1, line 22 . 10a b Charitable contributions if you take the standard deduction. See instructions b Head of household, \$18,650 If you checked any box under Standard Deduction, see instructions. Deduction, see instructions. Deduction, see instructions. Add lines 12 and 13 . 14	required.							•				. –				CAE
Standard Deduction for— Single or Married filing separately, \$12,400 • Married filing jointly or Qualifying widow(er), \$24,800 • Head of household, \$18,650 • If you checked any box under Standard Deduction, see instructions. • Standard Deduction, see instructions. • Capital gain or (loss). Attach Schedule D if required. If not required, check here • Capital gain or (loss). Attach Schedule D if required. If not required, check here • Capital gain or (loss). Attach Schedule D if required. If not required, check here • Capital gain or (loss). Attach Schedule D if required. If not required, check here • Capital gain or (loss). Attach Schedule D if required. If not required, check here • Capital gain or (loss). Attach Schedule D if required. If not required, check here • Capital gain or (loss). Attach Schedule D if required. If not required, check here • Capital gain or (loss). Attach Schedule D if required. If not required, check here • Capital gain or (loss). Attach Schedule D if required. If not required, check here • Capital gain or (loss). Attach Schedule D if required. If not required, check here • Capital gain or (loss). Attach Schedule D if required. If not required, check here • Capital gain or (loss). Attach Schedule D if required. If not required, check here • Capital gain or (loss). Attach Schedule D if required. If not required, check here • Capital gain or (loss). Attach Schedule D if required. If not required, check here • Capital gain or (loss). Attach Schedule D if required. If not required. If no															040	
Deduction for—Single or Married filing separately, \$12,400 8 Other income from Schedule 1, line 9 8 9 Add lines 1, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income ▶ 9 • Married filing jointly or Qualifying widow(er), \$24,800 • Head of household, \$18,650 • Charitable contributions if you take the standard deduction. See instructions • 10c • Head of household, \$18,650 • Subtract line 10c from line 9. This is your adjusted gross income ▶ 10c • If you checked any box under Standard Deduction, see instructions, see instructions. • Add lines 12 and 13 • 12 • Add lines 12 and 13 • Add lines 12 and 13 • 14												_				
Single or Married filing separately, \$12,400 Married filing jointly or Qualifying widow(er), \$24,800 Head of household, \$18,650 If you checked any box under Standard Deduction, see instructions. Single or Married filing separately, \$12,400 Married filing separately, \$12,400 Married filing jointly or Qualifying widow(er), \$24,800 Lead of household, \$18,650 If you checked any box under Standard Deduction, see instructions. Add lines 10 and 10 b. These are your total adjustments to income Standard deduction or itemized deductions (from Schedule A) Qualified business income deduction. Attach Form 8995 or Form 8995-A Add lines 12 and 13 Add lines 12 and 13			•													475
separately, \$12,400 Married filing jointly or Qualifying widow(er), \$24,800 Head of household, \$18,650 If you checked any box under Standard Deduction, see instructions. Is possible to the property of t	Single or											-			4/5	
## Add lines 1, 26, 35, 45, 50, 65, 7, and 8. This is your total income ## Add lines 1, 26, 35, 45, 50, 65, 7, and 8. This is your total income ## Add lines 1, 26, 35, 45, 50, 65, 7, and 8. This is your total income ## Add lines 1, 26, 35, 45, 50, 65, 7, and 8. This is your total income ## Add lines 1, 26, 35, 45, 50, 65, 7, and 8. This is your total income ## Add lines 1, 26, 35, 45, 50, 65, 7, and 8. This is your total income ## Add lines 1, 26, 35, 45, 50, 65, 7, and 8. This is your total income ## Add lines 1, 26, 35, 45, 50, 65, 7, and 8. This is your total income ## Add lines 1, 26, 35, 45, 50, 65, 7, and 8. This is your total income ## Add lines 1, 26, 35, 45, 50, 65, 7, and 8. This is your total income ## Add lines 1, 26, 35, 45, 50, 65, 7, and 8. This is your total income ## Add lines 1, 26, 35, 45, 50, 65, 7, and 8. This is your total income ## Add lines 1, 26, 35, 45, 50, 65, 7, and 8. This is your total income ## Add lines 1, 26, 35, 45, 50, 65, 7, and 8. This is your total income ## Add lines 1, 26, 35, 45, 50, 65, 7, and 8. This is your total income ## Add lines 1, 26, 35, 45, 50, 65, 7, and 8. This is your total income ## Add lines 1, 26, 35, 45, 50, 65, 7, and 8. This is your total income ## Add lines 1, 26, 35, 45, 50, 65, 7, and 8. This is your total income ## Add lines 1, 26, 35, 45, 55, 65, 7, and 8. This is your total income ## Add lines 1, 26, 35, 45, 55, 65, 7, and 8. This is your total income ## Add lines 1, 26, 35, 45, 55, 65, 7, and 8. This is your total income ## Add lines 1, 26, 35, 45, 55, 65, 7, and 8. This is your total income ## Add lines 1, 26, 35, 45, 55, 65, 7, and 8. This is your total income ## Add lines 1, 26, 35, 45, 55, 65, 7, and 8. This is your total income ## Add lines 1, 26, 35, 45, 55, 65, 7, and 8. This is your total income ## Add lines 1, 26, 35, 45, 55, 65, 7, and 8. This is your total income ## Add lines 1, 26, 35, 45, 55, 65, 7, and 8. This is your total income ## Add lines 1, 26, 35, 45, 55, 65, 7, and 8. This is your total adjustment																
jointly or Qualifying widow(er), \$24,800 Head of household, \$18,650 If you checked any box under Standard Deduction, see instructions. Add lines 10 and 10 b. These are your total adjustments to income Subtract line 10c from line 9. This is your adjusted gross income 10a 10b 4500 10c 11 Subtract line 10c from line 9. This is your adjusted gross income 11 Standard deduction or itemized deductions (from Schedule A) 12 Qualified business income deduction. Attach Form 8995 or Form 8995-A 13 Add lines 12 and 13 . 14 Add lines 12 and 13 .		_		, and 8.	This is ye	our to	tai inco	ome					9			
b Charitable contributions if you take the standard deduction. See instructions C Add lines 10a and 10b. These are your total adjustments to income 10b 10c 11 Subtract line 10c from line 9. This is your adjusted gross income 12 Standard deduction or itemized deductions (from Schedule A) 13 Qualified business income deduction. Attach Form 8995 or Form 8995-A 14 Add lines 12 and 13	jointly or		a From Schedule 1, line 22													
S24,800 Head of household, \$18,650 If you checked any box under Standard deduction or itemized deductions (from Schedule A) Qualified business income deduction. See instructions in your take the standard deduction in See instructions. See instructions in your take the standard deduction in See instructions. See instructions in your take the standard deduction. See instructions in your take the standard deduction in your take the standard deduction. See instructions in your take the standard deduction in your take the your take the standard deduction in your take the standard deduction in your take the yo																
household, \$18,650 I1 Subtract line 10c from line 9. This is your adjusted gross income If you checked any box under Standard Deduction, see instructions. Add lines 12 and 13 Subtract line 10c from line 9. This is your adjusted gross income Standard deduction or itemized deductions (from Schedule A) Qualified business income deduction. Attach Form 8995 or Form 8995-A 13 Add lines 12 and 13 14 Subtract line 10c from line 9. This is your adjusted gross income 12 I1 S4754756	\$24,800		Chartable Contributions if you take the standard deduction. Cee instructions													
If you checked any box under Standard Deduction, see instructions.				· · · · · · · · · · · · · · · · · · ·										547	54756	
any box under Standard Standard Deduction, see instructions. 13 Qualified business income deduction. Attach Form 8995 or Form 8995-A		_	· · · ·											J-11		
Deduction, see instructions. 14 Add lines 12 and 13 1.	any box under	_								-	-					
see instructions.	Deduction,			Caon. All	acii i Oli	11 099	0 01 1 01	0	JJJ-∧ .							
	see instructions.	15													45	74747

Form 1040 (2020)									Page 2		
	16	Tax (see instructions). Check	if any from Form	(s): 1 88	314 2 🗌 497	2 3 🗌			16			
	17	Amount from Schedule 2, lin	e3						17			
	18	Add lines 16 and 17							18			
	19	· ·							19			
	20								20			
	21	Add lines 19 and 20							21			
	22	Subtract line 21 from line 18. If zero or less, enter -0-										
	23	Other taxes, including self-employment tax, from Schedule 2, line 10							23			
	24	Add lines 22 and 23. This is	Add lines 22 and 23. This is your total tax									
	25	Federal income tax withheld	•									
	а	Form(s) W-2				25a						
	b	Form(s) 1099										
	c	Other forms (see instructions										
	d	Add lines 25a through 25c	•						25d			
	26	2020 estimated tax payment							26			
 If you have a L qualifying child, 	27	Earned income credit (EIC)	•			1 1						
attach Sch. EIC.	28	Additional child tax credit. A										
 If you have nontaxable 	29	American opportunity credit										
combat pay, see instructions.	30	• • • •										
see iristructions.	31	Recovery rebate credit. See instructions										
	32						odite	. •	32			
	33	Add lines 27 through 31. These are your total other payments and refundable credits Add lines 25d, 26, and 32. These are your total payments										
	34								33 34			
Refund	35a	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid										
Direct deposit?	> b	Amount of line 34 you want refunded to you. If Form 8888 is attached, check here \(\begin{array}{c} \) 35a										
See instructions.	►d											
	36	Account number Amount of line 34 you want a	applied to your	2021 actima	tod tov	▶ 36						
A									27	457457474		
Amount You Owe	37	Subtract line 33 from line 24. This is the amount you owe now										
For details on		Note: Schedule H and Schedule SE filers, line 37 may not represent all of the taxes you owe for 2020. See Schedule 3, line 12e, and its instructions for details.										
how to pay, see	38					_						
instructions.		Estimated tax penalty (see in										
Third Party Designee		Do you want to allow another person to discuss this return with the IRS? See instructions								□No		
Designee		signee's	Phone				Personal identif					
		me ►		no.			nber (PIN)					
Sign		der penalties of perjury, I declare t										
Here	bel	belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of							prepare	er has any knowledge.		
11010	Yo	ur signature		Date	Your occupation	on				nt you an Identity		
Joint return? See instructions.				Banker			(see			Protection PIN, enter it here see inst.) ►		
	Sn	ouse's signature. If a joint return, t				nation				ne IRS sent your spouse an		
Keep a copy for	Sp	ouse's signature. If a joint return, t	Date Spouse's occupation					Identity Protection PIN, enter it here (see inst.) ►				
your records.												
	Ph	one no.		Email addres	s							
Paid Preparer	Pre	eparer's name	Preparer's signat	ure		Date		PTIN		Check if:		
	Stev	e McAccountingPerson						11445	6	✓ Self-employed		
	Fire	m's name ▶				•	-	Phone	e no.			
Use Only	Fire	m's address ▶						Firm's	n's EIN ▶			
Go to www.irs.gov/Form1040 for instructions and the latest information.												