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

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

Filing Status Check only one box.	If y	Single Married filing jointly cou checked the MFS box, enter the round is a child but not your dependent	name of y	_	•	• •		_		, ,	_		, , ,	
Your first name	•	· · ·	Last name								Your social security number			
If joint return, sp	oouse	s's first name and middle initial	Last nar	ne							Spous	e's social	security nu	mber
Home address	instructions. Apt. no								Presidential Election Campa Check here if you, or your					
City, town, or po	omplete spaces below. State						ZIP	code	spouse if filing jointly, want \$3 to go to this fund. Checking a box below will not change					
Foreign country name				Foreign province/state/county Foreign							your tax or refund.  You Spouse			ouse
At any time du	ring	2020, did you receive, sell, send, exc	hange, o	r othen	wise a	cquire a	any f	inancial in	terest in	any virtual c	urrency	?   Ye	es 🗌 No	<b>5</b>
Standard Deduction	So	meone can claim:  You as a de Spouse itemizes on a separate retur	•			•		a depende	nt					
Age/Blindness	Yo	u: Uwere born before January 2, 1	956	Are b	lind	Spo	use:	☐ Was	born be	efore January	2, 1956		s blind	
Dependents		(2) Social secu							•	1 '	structions):			
If more	(1)	First name Last name	number			ber	to you			Child tax o	redit	Credit fo	or other deper	ndents
than four dependents,	_												<u> </u>	
see instructions	; <u> </u>												<del></del>	
and check here ▶	_												<del></del>	
		Managara and an and a Attack to	Γ (a) M	V 0										
Attach Sch. B if	1	Wages, salaries, tips, etc. Attach I	<b>2a</b>									b		
		'		3a			<ul><li>b Taxable interest</li><li>b Ordinary dividends</li></ul>							
required.	48	-	4a					rainary aiv axable amo			. 4			
	5a		5a					axable amo			-	b		
Standard	68		6a			_					. 6			_
Deduction for—	7	Social security benefits   6a   b Taxable amount								_ —	7			
Single or     Married filing	8	Other income from Schedule 1, lin				•						3		
separately,	9		Other income from Schedule 1, line 9									9		
\$12,400 • Married filing	10	Adjustments to income:		,	Ju. 10									
jointly or Qualifying a From Schedule 1, line 22								1	10a					
\$24,800 • Head of	c							_			<b>▶</b> 10	Oc		
household, \$18,650	11									▶ 1	1			
If you checked	12										<del></del>	2		
any box under Standard	13	Qualified business income deduct		•			,	995-A .			. 1	3		
Deduction, see instructions.	14	Add lines 12 and 13									. 1	4		
SGE ITISH UCHOUS.	15	Taxable income. Subtract line 14	from line	11. If	zero c	or less, e	enter	-0			. 1	5		

Form 1040 (2020)	)										Page 2	
	16	Tax (see instructions). Check	if any from Form	(s): <b>1</b>	8814	<b>2</b> 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 dependent	ts						. 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 Sch	edule	2, line 10				. 23		
	24	Add lines 22 and 23. This is	your <b>total tax</b>							▶ 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					
If you have a qualifying child,	d	Add lines 25a through 25c					·			. 25d		
	26	2020 estimated tax payments and amount applied from 2019 return										
	27	Earned income credit (EIC)					27					
attach Sch. EIC.	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, line 13										
	32	Add lines 27 through 31. These are your <b>total other payments and refundable credits</b>								▶ 32		
	33	Add lines 25d, 26, and 32. These are your <b>total payments</b>										
Dafaaal	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you <b>overpaid</b>								. 34		
Refund	35a	Amount of line 34 you want <b>refunded to you.</b> If Form 8888 is attached, check here <b>&gt;</b>								35a		
Direct deposit?	▶b	Routing number										
See instructions.	▶d	Account number						ı –				
	36	Amount of line 34 you want	applied to your	2021 est	imate	dtax▶	36				•	
Amount	37	•	• • • • • • • • • • • • • • • • • • • •				-		1	> 37		
You Owe	٥.	Subtract line 33 from line 24. This is the <b>amount you owe now</b>										
For details on		2020. See Schedule 3, line 12e, and its instructions for details.							OI			
how to pay, see instructions.	38	Estimated tax penalty (see in	•				38					
Third Party	Do	you want to allow another	person to disc	uss this	returr	n with the IRS?	See					
Designee		tructions							•		∐ No	
		signee's me ▶			Phone no. ►				onal Ide oer (PII)	entification  N) ►		
Sign		der penalties of perjury, I declare t	hat I have examine			accompanying sch	edules a			<del>'</del>	st of my knowledge and	
_		ief, they are true, correct, and com										
Here	Yo	ur signature	•	Date		Your occupation					nt you an Identity	
	k .		\ \							Protection P see inst.) ▶	IN, enter it here	
Joint return? See instructions. Keep a copy for your records.	Sp	ouse's signature. If a pint return, t	ooth must sign	nost sign. Date Spouse's occupation						If the IRS sent your spouse an		
	<b>/</b>	<b>4</b>		J. Sans Special Specia			Iden				tity Protection PIN, enter it here	
	Ph	one no.		Email add	dress							
Paid	Pre	parer's name	Preparer's signat	ure			Date		PTIN		Check if:	
											Self-employed	
Preparer	Fire	n's name ▶							F	Phone no.		
Use Only	Firm's address ► Firm'								irm's EIN	n's EIN ▶		
Go to www.irs.ac	v/Forn	11040 for instructions and the late	st information.								Form <b>1040</b> (2020	