

**2019 Federal Tax Return Filing Instructions
FOR THE YEAR ENDING
December 31, 2019**

Prepared for																	
Tax Summary	<table> <tr> <td>Gross Income.....</td> <td align="right">\$30000</td> </tr> <tr> <td>Adjusted Gross Income.....</td> <td align="right">\$30000</td> </tr> <tr> <td>Total Deductions.....</td> <td align="right">\$12400</td> </tr> <tr> <td>Total Taxable Income.....</td> <td align="right">\$17600</td> </tr> <tr> <td>Total Tax.....</td> <td align="right">\$1918</td> </tr> <tr> <td>Total Payments.....</td> <td align="right">\$0</td> </tr> <tr> <td>Refund Amount.....</td> <td align="right">\$0</td> </tr> <tr> <td>Amount You Owe.....</td> <td align="right">\$1977</td> </tr> </table>	Gross Income.....	\$30000	Adjusted Gross Income.....	\$30000	Total Deductions.....	\$12400	Total Taxable Income.....	\$17600	Total Tax.....	\$1918	Total Payments.....	\$0	Refund Amount.....	\$0	Amount You Owe.....	\$1977
Gross Income.....	\$30000																
Adjusted Gross Income.....	\$30000																
Total Deductions.....	\$12400																
Total Taxable Income.....	\$17600																
Total Tax.....	\$1918																
Total Payments.....	\$0																
Refund Amount.....	\$0																
Amount You Owe.....	\$1977																
Make check payable to	United States Treasury																
Mailing Address	Internal Revenue Service P.O. Box 1303 Charlotte, NC 28201-1303																

Instructions

STEP 1 - Sign and date Form

STEP 2 - Assemble what you need to mail

Attach any schedules and forms behind Form 1040 in order of the Attachment Sequence Number shown in the upper right corner of the schedule or form. If there are supporting statements, arrange them in the same order as the schedules or forms they support and attach them last. Do not attach correspondence or other items unless required to do so. Attach a copy of each W-2, W-2G, and 2439 to the front of Form 1040. Also attach Form(s) 1099-R or 1099-G if tax was withheld.

STEP 3 - Pay balance due on your taxes

Make your check or money order for 1977 payable to the United States Treasury. Do not send cash and do not forget to sign it. Write your Social Security number(s) and daytime phone number on your check or money order (U.S. funds only).

STEP 4 - Mail Form(s)

Mail Form 1040 and associated documents to the address above. Retain the proof of mailing to avoid a late filing penalty. We recommend you use one of these methods to send your 1040

U.S. Postal Service certified mail.

If you are not mailing to an address with a post office box, you may also use certain private delivery services (PDS) designated by the IRS to meet the 'timely mailing as timely filing' rule for tax returns. Go to [IRS.gov/PDS](https://www.irs.gov/PDS) for current list of designated services. For the IRS mailing addresses to use if you're using PDS go to [IRS.gov/PDSstreetAddresses](https://www.irs.gov/PDSstreetAddresses).

INTERNAL REVENUE SERVICE
P O Box 0
0

Fold here for #10 envelope

INTERNAL REVENUE SERVICE
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0

Fold here for 6x9 envelope

Fold here for #10 envelope

2020 TWO YEAR COMPARISON

	2020	2019	Keep for Your Records Difference
Filing status	1		
INCOME:			
Wages, salaries, tips, etc.	30,000		30,000
Interest income			
Ordinary dividend income			
IRA distributions and pension income			
Taxable social security income			
Capital gain or (loss) (Schedule D)			
Schedule 1 Income			
Refunds of state and local taxes			
Business income or (loss) (Schedule C)			
Other gains or (losses) (Form 4797)			
Rental real estate, partnerships, estates, etc. (Schedule E)			
Farm income or (loss) (Schedule F)			
Unemployment compensation			
Other income			
Total income	30,000		30,000
ADJUSTMENTS:			
Schedule 1 Adjustments			
Deductible part of self-employment tax			
Self-employed SEP, SIMPLE and qualified plans deduction. ...			
Self-employed health insurance			
IRA contributions			
Student loan interest deduction			
Other adjustments			
Total adjustments			
ADJUSTED GROSS INCOME:	30,000		30,000
DEDUCTIONS:			
Standard deduction or Itemized deductions	12,400		12,400
If itemized, Schedule A deductions:			
Medical and dental expenses			
Sales, income, and other taxes paid			
Interest paid			
Gifts to charity			
Casualty and theft losses			
Other miscellaneous deductions			
Qualified Business Income Deduction			
TAX COMPUTATION (BEFORE CREDITS):			
Taxable income	17,600		17,600
Tax	1,918		1,918
Tax calculation method			
Schedule 2 - Taxes			
Alternative minimum tax			
Excess advance premium tax credit repayment			
Tax rate			

Tax Calculation Methods:

Sch D = Sch D tax worksheet	QDCGTW = Qual Div Cap Gain Tax WS
Sch J = Inc Aver for Farmer/Fisherman	F8615 = Child with unearned income
FEITW = Foreign Earned Income Tax WS	TCW = Tax Comp Worksheet (rates)
TABLE = Tax Table	

2020 TWO YEAR COMPARISON

Keep for Your Records

	2020	2019	Difference
CREDITS:			
Child and other dependents tax credit			
Schedule 3 - Non refundable credits			
Foreign tax credit			
Child care credit			
Education credit			
Retirement Savings contribution credit			
Other credits			
Total credits			
OTHER TAXES:			
Self-employment tax			
Additional tax on IRA's			
Health Care (Individual Responsibility)			
Other taxes			
TOTAL TAXES	1,918		1,918
PAYMENTS:			
Federal income tax withheld			
Earned income credit			
Additional child tax credit			
Schedule 3 - Refundable Credits & Payments			
Estimated payments made			
American Opportunity Credit			
ACA Premium Tax Credit			
Other payments			
Total payments			
AMOUNT DUE / REFUND:			
Amount overpaid			
Overpayment applied to next year			
Refund			
Amount due	1,977		1,977
Penalty			1,977

Form

1040

Department of the Treasury--Internal Revenue Service (99)

2020

OMB No. 1545-0074

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

Filing status

☒ Single
☐ Married filing jointly
☐ Married filing separately (MFS)
☐ Head of household (HOH)
☐ Qualifying widow(er) (QW)

Check only one box.

If you 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 person is a child but not your dependent

▶

Your first name and middle initial

Last name

Your social security number

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.

City, town, or post office. If you have a foreign address, also complete spaces below.

State

ZIP code

Foreign country name

Foreign province/state/county

Foreign postal code

Presidential Election Campaign

Check here if you, or your spouse if filing jointly, want \$3 to go to this fund. Checking a box below will not change your tax or refund.

☐ You
☐ Spouse

At any time during 2020, did you receive, sell, send, exchange, or otherwise acquire any financial interest in any virtual currency?

☐ Yes
☐ No

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):

(1) First name

Last name

(2) Social security number

(3) Relationship to you

(4) ✓ if qualifies for (see inst.):

Child tax credit

Credit for other dependents

If more than four dependents, see instructions and check here

▶ ☐

Attach Sch. B if required.

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.

1 Wages, salaries, tips, etc. Attach Form(s) W-2

2a Tax-exempt interest

3a Qualified dividends

4a IRA distributions

5a Pensions and annuities

6a Social security benefits

7 Capital gain or (loss). Attach Schedule D if required. If not required, check here

8 Other income from Schedule 1, line 9

9 Add lines 1, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income

10 Adjustments to income:

a From Schedule 1, line 22

b Charitable contributions if you take the standard deduction. See instructions

c Add lines 10a and 10b. These are your total adjustments to income

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

15 Taxable income. Subtract line 14 from line 11. If zero or less, enter -0-

1 30,000

2b Taxable interest

3b Ordinary dividends

4b Taxable amount

5b Taxable amount

6b Taxable amount

7

8

9 30,000

10a

10b

10c

11 30,000

12 12,400

13

14 12,400

15 17,600

For Disclosure, Privacy Act, and Paperwork Reduction Act Notice, see separate instructions.

Form 1040 (2020)

GEB 20 1040S1 TXO 1040 Form Software Copyright 1996 - 2021 HRB Tax Group, Inc.

16 Tax (see instructions). Check if any from Form(s): 1 <input type="checkbox"/> 8814 2 <input type="checkbox"/> 4972 3 <input type="checkbox"/>	16	1,918
17 Amount from Schedule 2, line 3	17	
18 Add lines 16 and 17	18	1,918
19 Child tax credit or credit for other dependents	19	
20 Amount from Schedule 3, line 7	20	
21 Add lines 19 and 20	21	
22 Subtract line 21 from line 18. If zero or less, enter -0-	22	1,918
23 Other taxes, including self-employment tax, from Schedule 2, line 10	23	
24 Add lines 22 and 23. This is your total tax .	24	1,918
25 Federal income tax withheld from:		
a Form(s) W-2	25a	
b Form(s) 1099	25b	
c Other forms (see instructions)	25c	
d Add lines 25a through 25c	25d	
26 2020 estimated tax payments and amount applied from 2019 return	26	
27 Earned income credit (EIC)	27	
28 Additional child tax credit. Attach Schedule 8812	28	
29 American opportunity credit from Form 8863, line 8	29	
30 Recovery rebate credit. See instructions	30	
31 Amount from Schedule 3, line 13	31	
32 Add lines 27 through 31. These are your total other payments and refundable credits	32	
33 Add lines 25d, 26, and 32. These are your total payments .	33	
Refund 34 If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid	34	
35a Amount of line 34 you want refunded to you . If Form 8888 is attached, check here <input type="checkbox"/>	35a	
<div style="display: flex; justify-content: space-between;"> <div> Direct deposit? See instructions. </div> <div> b Routing number _____ </div> <div> c Type: <input type="checkbox"/> Checking <input type="checkbox"/> Savings </div> </div>		
d Account number _____		
36 Amount of line 34 you want applied to your 2021 estimated tax	36	
Amount You Owe 37 Subtract line 33 from line 24. This is the amount you owe now .	37	1,977
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.		
38 Estimated tax penalty (see instructions)	38	59
Third Party Designee Do you want to allow another person to discuss this return with the IRS? See instructions. <input type="checkbox"/> Yes. Complete below. <input checked="" type="checkbox"/> No		
Designee's name ▶	Phone no. ▶	Personal identification number (PIN) ▶
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.		
Your signature	Date	Your occupation
Spouse's signature. If a joint return, both must sign.	Date	Spouse's occupation
Phone no.	Email address	
Paid Preparer Use Only		
Preparer's name	Preparer's signature	Date
Firm's name ▶	Phone no.	
Firm's address ▶	Firm's EIN ▶	

Go to www.irs.gov/Form1040 for instructions and the latest information.Form **1040** (2020)

Schedule AI – Annualized Income Installment Method (See the instructions.)

Estates and trusts, **don't** use the period ending dates shown to the right. Instead, use the following: 2/29/20, 4/30/20, 7/31/20, and 11/30/20.

	(a) 1/1/20–3/31/20	(b) 1/1/20–5/31/20	(c) 1/1/20–8/31/20	(d) 1/1/20–12/31/20
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Part I Annualized Income Installments

1 Enter your adjusted gross income for each period. See instructions. (Estates and trusts, enter your taxable income without your exemption for each period.)	1				30,000
2 Annualization amounts. (Estates and trusts, see inst.)	2	4	2.4	1.5	1
3 Annualized income. Multiply line 1 by line 2	3				30,000
4 If you itemize, enter itemized deductions for the period shown in each column. All others, enter -0-, and skip to line 7. Exception: Estates and trusts, skip to line 9.	4	0	0	0	0
5 Annualization amounts	5	4	2.4	1.5	1
6 Multiply line 4 by line 5	6				
7 In each column, enter the full amount of your standard deduction from Form 1040 or 1040-SR, line 12. (Form 1040-NR filers, enter -0-. Exception: Indian students and business apprentices, see instructions.)	7	12,400	12,400	12,400	12,400
8 Enter the larger of line 6 or line 7	8	12,400	12,400	12,400	12,400
9 Deduction for qualified business income. Estates and trusts: Subtract this amount from the amount on line 3, skip line 10, and enter the result on line 11	9				0
10 Add lines 8 and 9	10	12,400	12,400	12,400	12,400
11 Subtract line 10 from line 3	11				17,600
12 Form 1040, 1040-SR, or 1040-NR filers, enter -0- in each column. (Estates and trusts, see instructions.)	12	0	0	0	0
13 Subtract line 12 from line 11. If zero or less, enter -0-	13				17,600
14 Figure your tax on the amount on line 13. See inst.	14				1,918
15 Self-employment tax from line 36 (complete Part II below)	15				
16 Enter other taxes for each payment period including, if applicable, Additional Medicare Tax and/or Net Investment Income Tax. See instructions	16				
17 Total tax. Add lines 14, 15, and 16	17				1,918
18 For each period, enter the same type of credits as allowed on Form 2210, Part I, lines 1 and 3. See instructions	18				
19 Subtract line 18 from line 17. If zero or less, enter -0-	19	0	0	0	1,918
20 Applicable percentage	20	22.5%	45%	67.5%	90%
21 Multiply line 19 by line 20	21				

Complete lines 22–27 of one column before going to line 22 of the next column.

22 Enter the total of the amounts in all previous columns of line 27	22				
23 Subtract line 22 from line 21. If zero or less, enter -0-	23	0	0	0	0
24 Enter 25% (0.25) of line 9 on page 1 of Form 2210 in each column	24				
25 Subtract line 27 of the previous column from line 26 of that column	25				
26 Add lines 24 and 25	26				
27 Enter the smaller of line 23 or line 26 here and on Form 2210, Part IV, line 18	27				

Part II Annualized Self-Employment Tax (Form 1040, 1040-SR, or 1040-NR filers only)

28 Net earnings from self-employment for the period (see instructions)	28				
29 Prorated social security tax limit	29	\$34,425	\$57,375	\$91,800	\$137,700
30 Enter actual wages for the period subject to social security tax or the 6.2% portion of the 7.65% railroad retirement (tier 1) tax. Exception: If you filed Form 4137 or Form 8919, see instr.	30				
31 Subtract line 30 from line 29. If zero or less, enter -0-	31				
32 Annualization amounts (see instructions)	32				
33 Multiply line 32 by the smaller of line 28 or line 31	33				
34 Annualization amounts	34	0.116	0.0696	0.0435	0.029
35 Multiply line 28 by line 34	35				
36 Add lines 33 and 35. Enter here and on line 15 above	36				

2020 WAGES AND SALARIES SUMMARY ATTACHMENT

Employer Name	Employer EIN	T or S	Wages	Federal Withholding	Social Security Tax Withheld	State	State Wages	State Tax Withheld	Local Tax Withheld
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0	0	T	30,000	0	0				
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Total			30,000						
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A voucher is printed at the bottom of this page.

NOTE: This is a new scannable voucher approved by the IRS for filing of the 1040-V for the year 2020. This is different than the voucher that is on the IRS website.

- ▶ Use this voucher when making a payment with Form 1040.
- ▶ Do not staple this voucher or your payment to Form 1040.
- ▶ Make your check or money order payable to the "United States Treasury".
- ▶ Write your Social Security Number (SSN) on your check or money order.

Mail payment to:

INTERNAL REVENUE SERVICE
P O Box 0

▼ Detach Here and Mail with Your Payment and Return ▼

Department of the Treasury Internal Revenue Service		2020 OMB No. 1545-0074	Form 1040-V Payment Voucher
<p>▶ Use Form 1040-V when paying the balance due on Form 1040, Form 1040A, 1040EZ, or 1040NR.</p> <p>▶ Enter your SSN on your check or money order</p> <p>▶ If your name, address, or SSN is incorrect, see instructions.</p>		Amount you are paying by check or money order. Make your check or money order payable to "United States Treasury"	Dollars 1,977

1729

For Privacy Act and Paperwork Reduction Act Notice, see instructions.



INTERNAL REVENUE SERVICE
P O Box 0

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2021 FEDERAL ESTIMATED TAX WORKSHEET

Keep for Your Records

	2020 (a)	Adjustment (b)	2021 ES Tax (c)
Filing Status	1		1
1. Ordinary income (Wages, Interest, Taxable Refunds, Rental, etc)	30,000		30,000
2. Qualified dividends and/or long term capital gain income (5% or 15%)			
3a. Self-employment income (Taxpayer)			
b. Self-employment income (Spouse)			
4. Adjustments			
5. Adjusted Gross Income (lines 1-3 less line 4)	30,000		30,000
6. Itemized deductions			
7. Standard deduction	12,400		12,400
8. Qualified Business Income Deduction	4,300		
9. Taxable income (line 5 less (the greater of line 6 or line 7) less line 8)	17,600		17,600
10. Tax	1,918		1,915
11. Alternative minimum tax			
12. Nonrefundable credits			
13. Summary (lines 10 and 11 less line 12)	1,918		1,915
14a. Self-employment tax (Worksheet not supported by BW)			
b. Other taxes (2020 Form 1040 Schedule 2, lines 4 through 7)			
15. Refundable credits (2020 Form 1040, lines 18a, 18b, and 18c, and Schedule 3, lines 8 through 12)			
16. Gross 2020 estimated tax (line 13 plus line 14 less line 15)	1,918		1,915
17. Required payment to avoid penalty *	1,724		1,724
18. Selected estimated tax (see assumptions below)			1,724
19. Withholding			
20. Total 2020 estimated tax payments paid to date			
21. Balance due (line 18 less lines 19 and 20)			1,724

VOUCHER AMOUNTS

Due Date	Estimated Tax	Overpayment Applied	Tentative Amount	Voucher Amount	Date Paid	Amount Paid
04/15/2021	431		431	431		
06/15/2021	431		431	431		
09/15/2021	431		431	431		
01/15/2022	431		431	431		
TOTALS:	1,724		1,724	1,724		

Assumptions:

* The required payment to avoid penalty is the lesser of 100% of 2018 tax (line 16, column a) or 90% of 2018 ES tax (line 16, column c). If 2018 AGI is greater than \$150,000 (\$75,000, MFS), then the required payment is 110% of 2018 tax or 90% of 2018 ES tax. For farmers and fisherman (2018 ES option 5), the required annual payment is the lesser of 100% of 2018 tax or 66.67% of 2018 ES tax. These calculations are automatically based on the 2018 ES Tax option selected. Refer to Pub 505 for more information.

**2021 ESTIMATED PAYMENT OF
FORM 1040 INDIVIDUAL INCOME TAX**

TAXPAYER'S COPY

Taxpayer's Social Security Number		Spouse's Social Security Number		For Calendar Year 2021 or Fiscal Year Ending	
First Name(s) and Initial(s)		Last Name(s)		Estimated Tax for the Year	
Address				Overpayment Credited to this Year	
City, State, Zip				Total Amount to be Paid	
Blank				Installment Due April 15, 2021	
Make Check or Money Order Payable To: United States Treasury				June 15, 2021	
Include SS#(s) on Payment.				Sept. 15, 2021	
Payment Record	April 15, 2021	June 15, 2021	Sept. 15, 2021	Jan. 15, 2022	
Amount Paid					
Date					
Check Number					
				Jan. 15, 2022	

2021 ESTIMATED PAYMENT OF FORM 1040 INDIVIDUAL INCOME TAX

Department of the Treasury
Internal Revenue Service

PRACTITIONER'S COPY

Taxpayer's Social Security Number	Spouse's Social Security Number	For Calendar Year 2021 or Fiscal Year Ending	
First Name(s) and Initial(s)	Last Name(s)	Estimated Tax for the Year	
Address		Overpayment Credited to this Year	
City, State, Zip		Total Amount to be Paid	
<u>Blank</u> Make Check or Money Order Payable To: United States Treasury		Installment Due April 15, 2021	
		June 15, 2021	
		Sept. 15, 2021	
		Jan. 15, 2022	

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This is different than the voucher that is on the IRS website.

- ▶ Do not send cash.
- ▶ Make your check or money order payable to the "United States Treasury".
- ▶ Write your Social Security Number (SSN) and 2021 Form 1040ES on your check or money order.
- ▶ Enclose, but do not staple or attach, your payment with this voucher.
- ▶ Mail payment before April 15, 2021.

Mail payment to:
Internal Revenue Service
P O Box 0

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20 1040ESS1 TXO 1040

▼ Detach Here and Mail with Your Payment ▼

Form **1040-ES** (2021)

Form 1040-ES

Department of the Treasury
Internal Revenue Service

2021

OMB No. 1545-0074

Estimated Tax

**Payment
Voucher 1**

Calendar year -
Due April 15, 2021

- ▶ Make your check or money order payable to "United States Treasury."
- ▶ Enter your SSN and "2021 Form 1040- ES" on your payment .
- ▶ If your name, address, or SSN is incorrect, see instructions.

**Amount of estimated tax you are
paying by check or money order.**

Dollars

1729

For Privacy Act and Paperwork Reduction Act Notice, see instructions.



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- ▶ Make your check or money order payable to the "United States Treasury".
- ▶ Write your Social Security Number (SSN) and 2021 Form 1040ES on your check or money order.
- ▶ Enclose, but do not staple or attach, your payment with this voucher.
- ▶ Mail payment before June 15, 2021.

Mail payment to:
Internal Revenue Service
P O Box 0

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20 1040ESS2 TXO 1040

▼ Detach Here and Mail with Your Payment ▼

Form **1040-ES** (2021)

Form 1040-ES

Department of the Treasury
Internal Revenue Service

2021

OMB No. 1545-0074

Estimated Tax

**Payment
Voucher 2**

Calendar year -
Due June 15, 2021

- ▶ Make your check or money order payable to "United States Treasury."
- ▶ Enter your SSN and "2021 Form 1040- ES" on your payment .
- ▶ If your name, address, or SSN is incorrect, see instructions.

**Amount of estimated tax you are
paying by check or money order.**

Dollars

1729

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- ▶ Do not send cash.
- ▶ Make your check or money order payable to the "United States Treasury".
- ▶ Write your Social Security Number (SSN) and 2021 Form 1040ES on your check or money order.
- ▶ Enclose, but do not staple or attach, your payment with this voucher.
- ▶ Mail payment before September 15, 2021.

Mail payment to:
Internal Revenue Service
P O Box 0

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20 1040ESS3 TXO 1040

▼ Detach Here and Mail with Your Payment ▼

Form 1040-ES (2021)

Form 1040-ES

Department of the Treasury
Internal Revenue Service

2021

OMB No. 1545-0074

Estimated Tax

**Payment
Voucher 3**

Calendar year -
Due Sept. 15, 2021

- ▶ Make your check or money order payable to "United States Treasury."
- ▶ Enter your SSN and "2021 Form 1040- ES" on your payment .
- ▶ If your name, address, or SSN is incorrect, see instructions.

**Amount of estimated tax you are
paying by check or money order.**

Dollars

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For Privacy Act and Paperwork Reduction Act Notice, see instructions.



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- ▶ Make your check or money order payable to the "United States Treasury".
- ▶ Write your Social Security Number (SSN) and 2021 Form 1040ES on your check or money order.
- ▶ Enclose, but do not staple or attach, your payment with this voucher.
- ▶ Mail payment before January 17, 2022.

Mail payment to:
Internal Revenue Service
P O Box 0

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20 1040ESS4 TXO 1040

▼ Detach Here and Mail with Your Payment ▼

Form **1040-ES** (2021)

Form 1040-ES Department of the Treasury Internal Revenue Service	2021 OMB No. 1545-0074	Estimated Tax	Payment Voucher 4	Calendar year - Due January 17, 2022
▶ Make your check or money order payable to "United States Treasury." ▶ Enter your SSN and "2021 Form 1040- ES" on your payment . ▶ If your name, address, or SSN is incorrect, see instructions.			Amount of estimated tax you are paying by check or money order.	Dollars

1729

For Privacy Act and Paperwork Reduction Act Notice, see instructions.



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2021 CARRYFORWARD INFORMATION

Keep for Your Records

Itemized Returns Only – 2020 state and local tax refund (this amount may not be taxable in 2021)	_____
Charitable contributions carryover to 2021	_____
Estimated short-term capital loss carryover	_____
Estimated long-term capital loss carryover	_____
2020 tax liability (for 2021 Form 2210 purposes)	1,918
Form 8839: 2020 carryover of unqualified expenses	_____
Refund amount applied to 2021	_____
Disallowed investment interest in 2020	_____
Additional state taxes paid	_____
Form 8396: Mortgage interest credit from 2018	_____
Mortgage interest credit from 2019	_____
Mortgage interest credit from 2020	_____
Form 8801: Minimum tax credit carryforward	0
Potential 2021 IRA contribution from 2020 tax refund	_____

NOL carryforward:		Regular Tax		AMT Tax	
from 1999	_____	from 2009	_____	from 1999	_____
from 2000	_____	from 2010	_____	from 2000	_____
from 2001	_____	from 2011	_____	from 2001	_____
from 2002	_____	from 2012	_____	from 2002	_____
from 2003	_____	from 2013	_____	from 2003	_____
from 2004	_____	from 2014	_____	from 2004	_____
from 2005	_____	from 2015	_____	from 2005	_____
from 2006	_____	from 2016	_____	from 2006	_____
from 2007	_____	from 2017	_____	from 2007	_____
from 2008	_____	from 2018	_____	from 2008	_____
Gross NOL generated in 2019	_____	Gross AMT NOL generated in 2019	_____		
To be absorbed in carryback period	_____	To be absorbed in carryback period	_____		
Net carryforward from 2019	_____	Net carryforward from 2019	_____		
Total carryforward to 2020	_____	Total carryforward to 2020	_____		

- The amounts carried to next year from Schedule(s) E, pages 1 and/or 2, are found on Form 8582, Worksheet 6. Carryover AMT amounts are found on the AMT Form 8582, Worksheet 6.
- Foreign Tax Credit carryforward to 2021
- General Business Credit carryforward to 2021
- First-Time Homebuyer Credit Repayment carryforward to 2021
- If there are Form(s) 6252 in this tax return, the gross profit ratio and prior payments received (including the current year payments) will carry forward from each Form 6252.
- Amounts from Form 6251, lines 16 through 18, lines 27 and 28 are automatically carried forward to 2021.



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2020 Colorado Individual Income Tax Return

☒ Full-Year ☐ Part-Year or Nonresident (or resident, part-year, non-resident combination) ☐ Mark if Abroad on due date -- see instructions

*Must include DR 0104PN

Your Last Name		Your First Name		Middle Initial
Date of Birth (MM/DD/YYYY)		SSN or ITIN	Deceased	<input type="checkbox"/> If checked and claiming a refund, you must include the DR 0102 and death certificate with your return.
Enter the following information from your current driver license or state identification card.		State of Issue	Last 4 characters of ID number	Date of Issuance
If Joint, Spouse's Last Name		Spouse's First Name		Middle Initial
Spouse's Date of Birth (MM/DD/YYYY)		Spouse's SSN or ITIN	Deceased	<input type="checkbox"/> If checked and claiming a refund, you must include the DR0102 and death certificate with your return.
Enter the following information from your spouse's current driver license or state identification card.		State of Issue	Last 4 characters of ID number	Date of Issuance
Mailing Address		Phone Number		
City	State	Zip Code	Foreign Country (if applicable)	
Round To The Nearest Dollar				
1. Enter Federal Taxable Income from your federal income tax form: 1040 line 15 or 1040 SR line 15				17,600.00
Include W-2s and 1099s with CO withholding.				
Additions to Federal Taxable Income				
2. State Addback, enter the state income tax deduction from your federal form 1040 or 1040 SR schedule A, line 5a (see instructions)				00
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3. Business Interest Expense Deduction Addback (see instructions)				00



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Name			SSN or ITIN	
4. Excess Business Loss Addback (see instructions)	• 4			00
5. Net Operating Loss Addback (see instructions)	• 5			00
20 CO2 TXO 1040 Form Software Copyright 1996 – 2021 HRB Tax Group, Inc.				
6. Other Additions, explain (see instructions)	• 6			00
Explain:				
7. Subtotal, sum of lines 1 through 6	7		17,600	00
Colorado Subtractions				
8. Subtractions from the DR 0104AD Schedule, line 20, you must submit the DR 0104AD schedule with your return.	• 8		0	00
9. Colorado Taxable Income, subtract line 8 from line 7	• 9		17,600	00
Tax, Prepayments and Credits: see 104 Book for full-year tax table and part-year DR 0104PN Schedule				
10. Colorado Tax from tax table or the DR 0104PN line 36, you must submit the DR 0104PN with your return if applicable.	• 10		790	00
11. Alternative Minimum Tax from the DR 0104AMT line 8, you must submit the DR 0104AMT with your return.	• 11		0	00
12. Recapture of prior year credits	• 12		0	00
13. Subtotal, sum of lines 10 through 12	13		790	00
14. Nonrefundable Credits from the DR 0104CR line 43, the sum of lines 14, 15, and 16 cannot exceed line 13, you must submit the DR 0104CR with your return.	• 14		0	00
15. Total Nonrefundable Enterprise Zone credits used – as calculated, or from the DR 1366 line 87, the sum of lines 14, 15, and 16 cannot exceed line 13, you must submit the DR 1366 with your return.	• 15		0	00
16. Strategic Capital Tax Credit from DR 1330, the sum of lines 14, 15, and 16 cannot exceed line 13, you must submit the DR 1330 with your return.	• 16		0	00
17. Net Income Tax, sum of lines 14, 15, and 16. Subtract that sum from line 13.	17		790	00
18. Use Tax reported on the DR 0104US schedule line 7, you must submit the DR 0104US with your return.	• 18		0	00
19. Net Colorado Tax, sum of lines 17 and 18	19		790	00
20. CO Income Tax Withheld from W-2s and 1099s, you must submit the W-2s and/or 1099s claiming Colorado withholding with your return.	• 20		0	00
21. Prior-year Estimated Tax Carryforward	• 21		0	00
22. Estimated Tax Payments, enter the sum of the quarterly payments remitted for this tax year	• 22		0	00
23. Extension Payment remitted with the DR 0158-I	• 23		0	00
24. Other Prepayments: <input type="checkbox"/> • DR 0104BEP <input type="checkbox"/> • DR 0108 <input type="checkbox"/> • DR 1079	• 24		0	00



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Name	SSN or ITIN
25. Gross Conservation Easement Credit from the DR 1305G line 33, you must submit the DR 1305G with your return. ● 25	0 00
26. Innovative Motor Vehicle Credit from the DR 0617, you must submit each DR 0617 with your return. ● 26	0 00
27. Refundable Credits from the DR 0104CR line 9, you must submit the DR 0104CR with your return. ● 27	0 00
28. Subtotal, sum of lines 20 through 27 28	0 00
29. Federal Adjusted Gross Income from your federal income tax form: 1040 line 11, or 1040 SR line 11 ● 29	30,000 00
30. Overpayment, if line 28 is greater than line 19 then subtract line 19 from line 28 30	0 00
31. Estimated Tax Credit Carryforward to 2021 first quarter, if any. ● 31	0 00
If you have an overpayment on line 32 below and would like to donate all or a portion of your overpayment to a qualified Colorado charity, include Form DR 0104CH to contribute.	
32. Refund, subtract line 31 from line 30 (see instructions) ● 32	0 00
Direct Deposit Routing Number <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Type: <input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> CollegeInvest 529 Account Number <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	
For questions regarding CollegeInvest direct deposit or to open an account, visit CollegeInvest.org or call 800-448-2424.	
33. Net Tax Due, subtract line 28 from line 19 33	790 00
34. Delinquent Payment Penalty (see instructions) ● 34	0 00
35. Delinquent Payment Interest (see instructions) ● 35	0 00
36. Estimated Tax Penalty, you must submit the DR 0204 with your return. (see instructions) ● 36	0 00
37. Amount You Owe, sum of lines 33 through 36 ● 37	790
The State may convert your check to a one-time electronic banking transaction. Your bank account may be debited as early as the same day received by the State. If converted, your check will not be returned. If your check is rejected due to insufficient or uncollected funds, the Department of Revenue may collect the payment amount directly from your bank account electronically.	



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Name					SSN or ITIN		
Third Party Designee							
Do you want to allow another person to discuss this return and any related information with the Colorado Department of Revenue? See the instructions.							
● <input checked="checked" type="checkbox"/> No ● <input type="checkbox"/> Yes. Complete the following:							
Designee's Name				Phone Number			
Sign Below Under penalties of perjury, I declare that to the best of my knowledge and belief, this return is true, correct and complete.							
Your Signature				Date (MM/DD/YY)			
Spouse Signature. If joint return, BOTH must sign.				Date (MM/DD/YY)			
Paid Preparer's Name				Paid Preparer's Phone			
Paid Preparer's Address		City	State		Zip		

File and pay at: [Colorado.gov/RevenueOnline](https://colorado.gov/RevenueOnline)

If you are filing this return **with** a check or payment, please mail the return to:

COLORADO DEPARTMENT OF REVENUE
Denver, CO 80261-0006

If you are filing this return **without** a check or payment, please mail the return to:

COLORADO DEPARTMENT OF REVENUE
Denver, CO 80261-0005

These addresses and zip codes are exclusive to the Colorado Department of Revenue, so a street address is not required.



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State of Colorado Individual Income Tax Declaration for Electronic Filing**Do not mail this form to the IRS or the Colorado Department of Revenue. Retain with your records.**

Taxpayer SSN or ITIN		Spouse SSN or ITIN (If Joint Return)		Submission ID	
Taxpayer Last Name		Taxpayer First Name		Middle Initial	
Spouse Last Name (If Joint Return)		Spouse First Name (If Joint Return)			
Street Address				Phone Number	
City				State	Zip

Part I -- Tax Return Information

1. Total Income, line 9 from your federal form 1040	1	\$	30,000
2. Taxable Income, line 15 on federal form 1040	2	\$	17,600
3. Colorado Tax, Line 19 on Colorado form 104	3	\$	790
4. Colorado Tax Withheld, Line 20 on Colorado form 104	4	\$	
20 CO84531 TXO 1040 Form Software Copyright 1996 - 2021 HRB Tax Group, Inc.			
5. Refund, Line 32 Colorado form 104	5	\$	
6. Amount You Owe, Line 37 on Colorado form 104	6	\$	790

Part II -- Declaration of Tax Payer

Under penalties of perjury, I declare that the information I have provided for electronic filing and the amounts shown in Part I above agree with the amounts shown on my 2020 Federal/Colorado income tax returns, and that said tax returns, statements, schedules and attachments are true, correct, and complete to the best of my knowledge and belief. I understand that I (or my Electronic Return Originator (ERO) if applicable) may be required to provide paper copies of this declaration, my returns, withholding statements, schedules, and attachments upon request by the Colorado Department of Revenue at any time during the period covered by the Colorado statute of limitations.

Signature	Date	Spouse's Signature (If Joint Return, Both Must Sign)	Date

Part III -- Declaration of ERO/Preparer/TransmitterIf the transmitter did not prepare the tax return, check here ☐

If I am not the preparer, I declare only that the amounts shown in Part I above agree with the amounts shown on the taxpayer's 2020 Federal/Colorado income tax returns. If I am the preparer, under penalties of perjury I declare that I have reviewed the above taxpayer's 2020 Federal/Colorado income tax returns and that the information provided to me by the taxpayer and the amounts shown in Part I above agree with the amounts shown on said tax returns, and that said tax returns, statements, schedules, and attachments are true, correct, and complete to the best of my knowledge and belief. As preparer, I further declare that I have obtained the taxpayer's signature on this form at the time of filing and have provided the taxpayer with copies of all forms and information filed. I also agree to maintain this signed Form (DR 8453) for the period covered by the Colorado statute of limitations, and to provide paper copies of this declaration, said returns, withholding statements, schedules and attachments upon request by the Colorado Department of Revenue at any time during this period.

ERO's Signature	Preparer Identification Number or Your SSN
Check if also Preparer <input type="checkbox"/>	Date (MM/DD/YY)