

**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 <i>Kevin</i>	Last name <i>Torres</i>	Your social security number <i>112 145 1789 6</i>
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. <i>471 Centre Ave</i>		Apt. no. <i>112</i>
City, town, or post office. If you have a foreign address, also complete spaces below. <i>Houston</i>	State <i>TX</i>	ZIP code <i>77002</i>
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. <input checked="" type="checkbox"/> You <input type="checkbox"/> 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):		(2) Social security number	(3) Relationship to you	(4) <input checked="" type="checkbox"/> If qualifies for (see instructions):	
(1) First name	Last name			Child tax credit	Credit for other dependents
If more than four dependents, see instructions and check here ▶ <input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

Attach Sch. B if required.  <b>Standard Deduction for—</b> • 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.	<b>1</b>	Wages, salaries, tips, etc. Attach Form(s) W-2	<b>1</b>	<i>91,160.</i>
	<b>2a</b>	Tax-exempt interest	<b>2a</b>	
	<b>3a</b>	Qualified dividends	<b>3a</b>	<i>1,500.</i>
	<b>4a</b>	IRA distributions	<b>4a</b>	
	<b>5a</b>	Pensions and annuities	<b>5a</b>	
	<b>6a</b>	Social security benefits	<b>6a</b>	<i>670.</i>
	<b>7</b>	Capital gain or (loss). Attach Schedule D if required. If not required, check here ▶ <input type="checkbox"/>	<b>7</b>	
	<b>8</b>	Other income from Schedule 1, line 9	<b>8</b>	<i>540.</i>
	<b>9</b>	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your <b>total income</b>	<b>9</b>	<i>91,700.</i>
	<b>10</b>	Adjustments to income:		
	<b>a</b>	From Schedule 1, line 22	<b>10a</b>	<i>12,000.</i>
	<b>b</b>	Charitable contributions if you take the standard deduction. See instructions	<b>10b</b>	<i>179.</i>
	<b>c</b>	Add lines 10a and 10b. These are your <b>total adjustments to income</b>	<b>10c</b>	<i>12,179.</i>
	<b>11</b>	Subtract line 10c from line 9. This is your <b>adjusted gross income</b>	<b>11</b>	<i>79,521.</i>
	<b>12</b>	<b>Standard deduction or itemized deductions</b> (from Schedule A)	<b>12</b>	
<b>13</b>	Qualified business income deduction. Attach Form 8995 or Form 8995-A	<b>13</b>	<i>4,500.</i>	
<b>14</b>	Add lines 12 and 13	<b>14</b>	<i>4,500.</i>	
<b>15</b>	<b>Taxable income.</b> Subtract line 14 from line 11. If zero or less, enter -0-	<b>15</b>	<i>75,021</i>	

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

Cat. No. 11320B

Form **1040** (2020)

16	Tax (see instructions). Check if any from Form(s): 1 <input type="checkbox"/> 8814 2 <input checked="" type="checkbox"/> 4972 3 <input type="checkbox"/>	16	4,112
17	Amount from Schedule 2, line 3	17	200
18	Add lines 16 and 17	18	4,312
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	4,312
23	Other taxes, including self-employment tax, from Schedule 2, line 10	23	120
24	Add lines 22 and 23. This is your <b>total tax</b>	24	4,432
25	Federal income tax withheld from:		
a	Form(s) W-2	25a	7,951
b	Form(s) 1099	25b	102
c	Other forms (see instructions)	25c	
d	Add lines 25a through 25c	25d	8,053
26	2020 estimated tax payments and amount applied from 2019 return	26	1,000
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	7100
30	Recovery rebate credit. See instructions	30	1100
31	Amount from Schedule 3, line 13	31	
32	Add lines 27 through 31. These are your <b>total other payments and refundable credits</b>	32	8,200
33	Add lines 25d, 26, and 32. These are your <b>total payments</b>	33	17,253
34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you <b>overpaid</b>	34	12,821
35a	Amount of line 34 you want <b>refunded to you</b> . If Form 8888 is attached, check here <input checked="" type="checkbox"/>	35a	12,821
▶ b	Routing number 121235698 ▶ c Type: <input type="checkbox"/> Checking <input checked="" type="checkbox"/> Savings		
▶ d	Account number 100456783		
36	Amount of line 34 you want <b>applied to your 2021 estimated tax</b>	36	12,000
37	Subtract line 33 from line 24. This is the <b>amount you owe now</b>	37	10,000
	<b>Note:</b> 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	1,500

• If you have a qualifying child, attach Sch. EIC.  
• If you have nontaxable combat pay, see instructions.

**Refund**

Direct deposit?  
See instructions.

**Amount You Owe**

For details on how to pay, see instructions.

**Third Party Designee**

Do you want to allow another person to discuss this return with the IRS? See instructions

☐ Yes. Complete below.

☒ 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

If the IRS sent you an Identity Protection PIN, enter it here (see inst.) ▶

Spouse's signature. If a joint return, both must sign.

Date

Spouse's occupation

If the IRS sent your spouse an Identity Protection PIN, enter it here (see inst.) ▶

Phone no.

445-692-1154

Email address

k.torres@some.com

**Paid Preparer Use Only**

Preparer's name

Preparer's signature

Date

PTIN

Check if:

☐ Self-employed

Firm's name ▶

Phone no.

Firm's address ▶

Firm's EIN ▶