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

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

| Filing Status Check only | | | | d filing separately (M | | | | | | | | | |
|---|---------|--|--|-------------------------------|------------------|---------------------------|---|---------------------------------------|---------------------------------|---------------------------------|-----------------------------|--------------|--|
| one box. | | u checked the MFS box, enter the n on is a child but not your dependent | | | necke | ed the HOH or | r QW | box, enter th | e child | d's n | ame if the | e qualifying | |
| Your first name | | | | Last name | | | | | | | Your social security number | | |
| | | | | Taylor | | | | | | 0 0 3 5 4 2 3 4 5 | | | |
| | | | | ne | | | | | Spouse's social security number | | | | |
| | | | | ts | | | | | 0 9 7 8 9 8 4 4 4 | | | | |
| | | | | | | | | Presi | Presidential Election Campaign | | | | |
| | | | | | | | | | Check here if you, or your | | | | |
| City, fown, or post office, it you have a foreign address, also complete spaces below. | | | | | | | spouse if filing jointly, want \$3 to go to this fund. Checking a | | | | | | |
| 516 N WESTMORELAND LOS ANGELES CA 90004-2230 USA LA 51 | | | | | | 5163 | box below will not change | | | | | | |
| Foreign country name | | | | Foreign province/state/county | | | | ign postal code | your tax or refund. | | | | |
| Australia | | | | Sydney | | | | 7563 | ☐ You ✓ Sp | | | ✓ Spouse | |
| At any time du | ring 20 | 020, did you receive, sell, send, excl | hange, o | r otherwise acquire a | any fi | nancial intere | st in | any virtual cu | rrency | y? [| ✓ Yes | □ No | |
| Standard | Som | eone can claim: | nendent | Your spouse | 2 8 8 | denendent | | | | | | | |
| Deduction | _ | Spouse itemizes on a separate retur | • | • | | | | | | | | | |
| | | | | | | | | | 105 | _ | | | |
| | _ | Were born before January 2, 1 | 956 | - | use: | | | fore January 2 | | | Is bli | | |
| Dependents | | | (2) Social security (3) Relationsl number to you | | | (3) Relationshi | ip | | | alifies for (see instructions): | | | |
| If more | (1) F | rst name Last name | | | | | | Child tax credit | | | Credit for other dependents | | |
| than four dependents, | - | Henry Roberts | | | | brother | | | | | ✓ | | |
| see instructions | s — | Louis Roberts | 9 3 8 4 9 8 7 6 9 | | | son | | | | | | | |
| and check here ▶ ✓ | - | Emma Taylor | | | | sister | \dashv | | | | ✓ | | |
| | | Mark Johnson | - () 1 | [6 5 4 7 6 5 1 1 0] friend | | | | | | | <u></u> | | |
| Attach | 1 | Wages, salaries, tips, etc. Attach F | | 05.4 | | | ٠ | | ٠ - | 1 | | 455 | |
| Sch. B if required. | 2a | | 2a | 407 | | b Taxable interest | | · · · · · · · · · · · · · · · · · · · | | 2b | | 543 | |
| | 3a | | 3a | | | | | | | 3b | | 975 | |
| | 4a | | 4a | | b Taxable amount | | | | | 4b | | 130 | |
| | 5a | | 5a | | | xable amount | | | | 5b | | 450 | |
| Standard Deduction for— Single or Married filing separately, \$12,400 | 6a | , | 6a | | | xable amount | | | <u> </u> | 6b | | 633 | |
| | 7 | Capital gain or (loss). Attach Schedule D if required. If not required, check here | | | | | | | | | | 786 | |
| | 8 | Other income from Schedule 1, lin | | | • | | • | | : - | 8 | | 761 | |
| | 9 | , | | | | | | | | 754 | | | |
| Married filing jointly or Qualifying widow(er), \$24,800 | 10 | Adjustments to income: | | | | 1 | | | 75.4 | | | | |
| | a | From Schedule 1, line 22 | | | | | | | | | | | |
| | b | indicate the state of the state | | | | | | | 743 | | | 0.57 | |
| • Head of household, \$18,650 • If you checked any box under Standard Deduction, see instructions. | С | Add lines 10a and 10b. These are | • | - | | ne | ٠ | | | 10c | | 357 | |
| | 11 | | | | | | | | | 11 | | 742 | |
| | 12 | Standard deduction or itemized | | · | | | | | | 12 | | 745 | |
| | 13 | Qualified business income deduction. Attach Form 8995 or Form 8995-A | | | | | | | | 13 | | 533 | |
| | 14 | Add lines 12 and 13 | | | | | | | | 14 | | 375 | |
| | 15 | Taxable income. Subtract line 14 from line 11. If zero or less, enter -0 | | | | | | | . | 15 | | 543 | |
| For Disclosure, | Privac | y Act, and Paperwork Reduction Act N | lotice, se | e separate instruction | s. | | Cat | No. 11320B | | | Form | 1040 (2020) | |

| Form 1040 (2020 |) | | | | | | | | Page 2 | | |
|---|--|--|--------------------|----------------------|--------|----------|--|-----------------------------|-------------------|--|--|
| | 16 | Tax (see instructions). Check if any from For | m(s): 1 881 | 4 2 🗸 4972 | 3 🗌 | | | 16 | 536 | | |
| | 17 | Amount from Schedule 2, line 3 | | | | | | 17 | 997 | | |
| | 18 | Add lines 16 and 17 | | | | | | 18 | 753 | | |
| | 19 | Child tax credit or credit for other depende | ents | | | | | 19 | 842 | | |
| | 20 | Amount from Schedule 3, line 7 | | | | | | 20 | 424 | | |
| | 21 | Add lines 19 and 20 | | | | | | 21 | 555 | | |
| | 22 | Subtract line 21 from line 18. If zero or less | s, enter -0 | | | | | 22 | 675 | | |
| | 23 | Other taxes, including self-employment tax, from Schedule 2, line 10 | | | | | | | 335 | | |
| | 24 Add lines 22 and 23. This is your total tax | | | | | | | 24 | 892 | | |
| | | | | | | | | | | | |
| | а | Form(s) W-2 | | | 25a | | 873 | | | | |
| | b | Form(s) 1099 | | | 25b | | 378 | | | | |
| | С | Other forms (see instructions) | | | 25c | | 198 | | | | |
| | d | Add lines 25a through 25c | | | | | | 25d | 3754 | | |
| If you have a | 26 | 2020 estimated tax payments and amount | applied from 20 | 019 return | | | | 26 | 754 | | |
| qualifying child, | 27 | Earned income credit (EIC) | | | 27 | | 744 | | | | |
| attach Sch. EIC. | 28 | Additional child tax credit. Attach Schedule | e 8812 | | 28 | | 756 | | | | |
| nontaxable combat pay, | 29 | American opportunity credit from Form 886 | 63, line 8 | | 29 | | 478 | | | | |
| see instructions. | 30 | Recovery rebate credit. See instructions . | | | 30 | | 224 | | | | |
| | 31 | Amount from Schedule 3, line 13 | | | 31 | | 2678 | | | | |
| | 32 | Add lines 27 through 31. These are your to | tal other paym | ents and refunda | ble cr | edits | . ▶ | 32 | 5723 | | |
| | 33 | Add lines 25d, 26, and 32. These are your | total payments | | | | . ▶ | 33 | 6536 | | |
| Refund | 34 | If line 33 is more than line 24, subtract line | 24 from line 33. | This is the amour | nt you | overpaid | | 34 | 763 | | |
| Herana | 35a | Amount of line 34 you want refunded to you. If Form 8888 is attached, check here | | | | | | | 745 | | |
| Direct deposit? | ►b | Routing number 0 3 3 4 1 1 7 0 0 Capacitan Savings Savings | | | | | | | | | |
| See instructions. | ►d | Account number 9 3 5 8 4 2 3 8 7 6 4 5 6 7 7 6 5 | | | | | | | | | |
| | 36 | Amount of line 34 you want applied to you | r 2021 estimate | ed tax 🕨 | 36 | | | | | | |
| Amount | 37 | Subtract line 33 from line 24. This is the an | nount you owe | now | | | . ▶ | 37 | 864 | | |
| You Owe | | Note: Schedule H and Schedule SE filers, line 37 may not represent all of the taxes you owe for | | | | | | | | | |
| For details on how to pay, see | | 2020. See Schedule 3, line 12e, and its instructions for details. | | | | | | | | | |
| instructions. | 38 | Estimated tax penalty (see instructions) . | | 🕨 | 38 | | 654 | | | | |
| Third Party | | you want to allow another person to dis | | | | _ | | | _ | | |
| Designee | ins | instructions | | | | | | | □ No | | |
| | | Designee's name ► Sonaim Hill Phone no. ► 6758396542 Personal iden number (PIN) | | | | | | 0 5 6 7 5 | | | |
| 0: | | | | d accommon ting cab | | | | | | | |
| Sign | | 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. | | | | | | | | | |
| Here | You | ur signature | Date | Date Your occupation | | | If the | he IRS sent you an Identity | | | |
| | | ovilia toylor | 06/27/1975 | | | | Prote | ction P | IN, enter it here | | |
| Joint return? See instructions. Keep a copy for | L | <u> </u> | | programmer | | | + ` | nst.) 🕨 | 7 0 0 0 0 7 | | |
| | Spo | ouse's signature. If a joint return, both must sign. | Date | Iden | | | PIRS sent your spouse an tity Protection PIN, enter it here inst.) ► 0 0 5 6 7 4 | | | | |
| your records. | | jummy roberts | 07/27/1978 | | | | | | | | |
| | ———Pho | one no. 658935922 | Email address | oliviatl@gmail.c | om us | | 1, | | 0 0 0 0 0 7 7 1 | | |
| Paid Preparer | | parer's name Preparer's sign | ature . | | Date | | TIN | | Check if: | | |
| | Tim | | tim p | tim pery 10/09/ | | | 5693 | 3 | Self-employed | | |
| | | irm's name ► AI-COS company | | | | | | | | | |
| Use Only | | | | | | | | | 's EIN ► 677783 | | |
| 0- 1 | | form1040 for instructions and the latest information | | | | | | | | | |