£1040

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.

2020

OMB No. 1545-0074

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Form **1040** (2020)

Cat. No. 11320B

Filing Status Check only one box.	If yo	u checked the MFS box, enter the r	name of y					☐ Head of ed the HOH o						
					ast name Johnson								cial securit	y number
If joint return, spouse's first name and middle initial Last name Jessica William				st name								use'	s social sec	urity number
Home address (number and street). If you have a P.O. box, see instructions 1500 E 80TH LOS ANGELES CA 90001-3404 USA				ritions.						1500 C			ere if you,	
City, town, or post office. If you have a foreign address, also complete specifing				spaces below.			State	Paris	ZIP	3870 to		spouse if filing jointly, want \$3 to go to this fund. Checking a cox below will not change		
France				Foreign province/state/county Paris					Foreign postal code 5763		e you	ır tax	or refund.	✓ Spouse
At any time du	ring 20	20, did you receive, sell, send, exc	hange, c	r otherv	vise a	cquire a	ny fi	nancial intere	st in	any virtual	curren	су?	✓ Yes	☐ No
Standard Deduction	_	eone can claim:	•			•		a dependent						
Age/Blindness	You:	Were born before January 2, 1	956	Are b	lind	Spo	use:	☐ Was bor	n be	efore Januar	y 2, 19	56	_ ls bli	nd
•	ependents (see instructions): (1) First name Last name			(2) Social security number				(3) Relationship to you Child tax co				qualifies for (see instructions): credit Credit for other dependents		
If more than four dependents, see instructions and check here ▶ □	(1)11	rst name Last name						,		Office tax of edit				
	_							+						
	1	Wages, salaries, tips, etc. Attach	Form(s) \	N-2 .							.	1		4500
Attach	2a	Tax-exempt interest	2a		10	00	b Ta	xable interest	t		. [2b		4000
Sch. B if required.	3a	Qualified dividends	3a	2000			b Ordinary dividends					3b		5000
Toquirou.	4a	IRA distributions	4a	a 3000				xable amoun		. [4b		1000	
	5a	Pensions and annuities	5a		10	00	b Ta	xable amoun	t.		. [5b		4000
Standard Deduction for— Single or	6a	Social security benefits	b Taxable amount								6b		4500	
	7	Capital gain or (loss). Attach Schedule D if required. If not required, check here ▶										7		2400
Married filing separately, \$12,400	8	Other income from Schedule 1, line 9									.	8		1000
	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income										9		9850
Married filing jointly or Qualifying widow(er), \$24,800	10	Adjustments to income:						1						
	а	From Schedule 1, line 22												
	b	b Charitable contributions if you take the standard deduction. See instructions 10b												
Head of household, \$18,650	С	Add lines 10a and 10b. These are	your tot	al adjus	stmer	nts to in	com	ne			•	100	;	2500
	11	Subtract line 10c from line 9. This is your adjusted gross income										11		6500
If you checked	12	Standard deduction or itemized	deducti	ons (fro	m Sc	hedule	A)					12		1000
any box under Standard Deduction, see instructions.	13	Qualified business income deduction. Attach Form 8995 or Form 8995-A										13		2000
	14	Add lines 12 and 13										14		3000
	15	Taxable income. Subtract line 14	from lin	e 11. If :	zero c	or less.	enter	-0				15		3500

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	16	Tax (see instructions). Check if any from Form(s): 1 🗸 8814 2 🗌 4972 3 🔲	16	2500			
	17	Amount from Schedule 2, line 3	17	1500			
	18	Add lines 16 and 17	18	4000			
	19	Child tax credit or credit for other dependents	19	4500			
	20	Amount from Schedule 3, line 7	20	8500			
	21	Add lines 19 and 20	21	4000			
	22	Subtract line 21 from line 18. If zero or less, enter -0	22	3400			
	23	Other taxes, including self-employment tax, from Schedule 2, line 10	23	7210			
	24	Add lines 22 and 23. This is your total tax	24	12000			
	25	Federal income tax withheld from:					
	а	Form(s) W-2)				
	b	Form(s) 1099)				
	С	Other forms (see instructions))				
	d	Add lines 25a through 25c	25d	18640			
If you have a qualifying child, attach Sch. EIC. If you have	26	2020 estimated tax payments and amount applied from 2019 return	26	3300			
	27	Earned income credit (EIC)	1				
	28	Additional child tax credit. Attach Schedule 8812	ا ا				
nontaxable combat pay,	29	American opportunity credit from Form 8863, line 8	ا آ				
see instructions.	30	Recovery rebate credit. See instructions	ا آ				
	31	Amount from Schedule 3, line 13	ا آ				
	32	Add lines 27 through 31. These are your total other payments and refundable credits	32	2910			
	33	Add lines 25d, 26, and 32. These are your total payments	33	3596			
Refund	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid	34	4221			
	35a	Amount of line 34 you want refunded to you. If Form 8888 is attached, check here ▶ □	35a	563			
Direct deposit?	►b	Routing number 0 0 4 4 7 3 8 7 4 ▶ c Type: ☐ Checking ✓ Savings					
See instructions.	►d	Account number 5 5 7 8 4 3 9 0 2 8 3 4 2 3					
	36	Amount of line 34 you want applied to your 2021 estimated tax > 36					
Amount	37	Subtract line 33 from line 24. This is the amount you owe now	37	1654			
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)	1				
Third Party	Do	you want to allow another person to discuss this return with the IRS? See		_			
Designee	ins	tructions	selow.	✓ No			
			Personal identification number (PIN) ▶				
0:				4 of our located at a cond			
Sign		der penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to ief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which					
Here	You	ur signature Date Your occupation If the	IRS ser	nt you an Identity			
		tim inhuan 01/20/1980 parametic	ection PI	N, enter it here			
Joint return?		(see	inst.) ▶	0 9 8 7 6 5			
See instructions. Keep a copy for	Spo			RS sent your spouse an			
your records.	,		inst.) ▶	ity Protection PIN, enter it here nst.) > 3 4 5 6 5 4			
	————	one no. 76839694 Email address johnsonnn@gmail.com.us		3 4 3 0 3 4			
Paid Preparer		parer's name Preparer's signature Date PTIN		Check if:			
		in Timber justin jackson 11/23/1988 8765	45	Self-employed			
			ne no.				
Use Only			's EIN ▶				
		21040 for instructions and the latest information		Form 1040 (2020)			