Note: The draft you are looking for begins on the next page.

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Almost every form and publication has a page on IRS.gov with a friendly shortcut. For example, the Form 1040 page is at <u>IRS.gov/Form1040</u>; the Pub. 501 page is at <u>IRS.gov/Pub501</u>; the Form W-4 page is at <u>IRS.gov/W4</u>; and the Schedule A (Form 1040/SR) page is at <u>IRS.gov/ScheduleA</u>. If typing in a link above instead of clicking on it, be sure to type the link into the address bar of your browser, not a Search box.

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If you have comments on reducing paperwork and respondent (filer) burden, with respect to draft or final forms, please respond to the relevant information collection through the Federal Register process; for more info, click <u>here</u>.

104			rtment of the Treasury—Internal Revenue Serv 5. Individual Income Tax		(99) turn	20	020		8 No. 154	5-0074	IRS Use Or	ily—Do no	ot write or s	taple ir	this space.
Filing Statu Check only one box.	s	If yo	ingle D Married filing jointly U Arried filing jointly U Arried the MFS box, enter the non is a child but not your dependen	ame o	-										w(er) (QW) e qualifying
Your first name	e a	nd mi	ddle initial	Last r	name							Your	social se	curity	number
If joint return, s	spo	ouse's	first name and middle initial	Last r	name							Spou	se's socia	al secu	urity number
Home address	(n	iumbe	r and street). If you have a P.O. box, see	instruc	tions.					A	Apt. no.	Cheo	ck here if	you, c	
City, town, or p	200	st offic	e. If you have a foreign address, also co	omplete	spaces be	elow.		State		ZIP co	ode	to go box l	o to this fu below wil	und. C I not c	ly, want \$3 Checking a change
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Deduction		<u> </u>	pouse itemizes on a separate retur	n or yo	ou were a	u dual-s	status al	ien							
Age/Blindnes	-			956	Are b		Spou				ore January			ls blir	
Dependent	S		nstructions):		(2)	Social :	security	(3)	Relations to you	hip	(4) ✓ if Child tax		for (see in		tions): er dependents
lf more than four		(1) 1 1							,			creait	Credit		
dependents,															 7
see instruction and check	s]
here															
	`	1	Wages, salaries, tips, etc. Attach I	=orm(s) W-2 .	· · ·							1		-
Attach	-	2a		2a	,		b	Taxabl	e interes	st .		. [2b		
Sch. B if		3a	· · –	3a							ds		3b		
required.	Л	4a	IRA distributions	4a									4b		
		5a	Pensions and annuities	5a		b	b Taxable amount .					5b			
Standard		6a	Social security benefits	6a b Taxable amount					nt		. [6b			
Deduction for -		7	Capital gain or (loss). Attach Schedule D if required. If not required, check here										7		
 Single or Married filing 															
separately, \$12,400		9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7,	and 8.	This is y	our tot	al incor	ne.					9		
 Married filing 	•	10	Adjustments to income:												
jointly or Qualifying		а	From Schedule 1, line 22						. 10	a					
widow(er), \$24,800		b	Charitable contributions if you take	the sta	andard de	eductio	on. See ir	nstructio	ns 10	b					
Head of		с	Add lines 10a and 10b. These are	your t	otal adju	stmen	ts to ind	come					10c		
household, \$18,650	Ŀ	11	Subtract line 10c from line 9. This	is you	r adjuste	d gros	s incon	ne.					11		
 If you checked 		12	Standard deduction or itemized	deduc	ctions (fro	om Scl	hedule A).				. [12		
any box under Standard		13	Qualified business income deduct						Α				13	_	
Deduction, see instructions.	.	14	Add lines 12 and 13										14		
		15	Taxable income. Subtract line 14	from I	ine 11. If	zero o	r less, ei	nter -0-					15		
For Disclosure	, P	rivacy	Act, and Paperwork Reduction Act N							Cat. I	No. 11320B			Form	1040 (2020)

Form 1040 (2020)										Page 2			
	16	Tax (see ins	structions). Chec	k if any from Form	(s): 1 🗌 881	4 2 4972	3 🗌			16				
	17	Amount fro	m Schedule 2, I	line 3						17				
	18	Add lines 1	6 and 17							18				
	19	Child tax cr	edit or credit fo	r other dependent	ts					19				
	20	Amount fro	m Schedule 3, I	line 7						20				
	21	Add lines 1	9 and 20							21				
	22	Subtract lin	e 21 from line 1	8. If zero or less,	enter -0					22				
	23	Other taxes	s, including self-	employment tax,	from Schedule	2, line 10 .				23				
	24	Add lines 2	2 and 23. This is	s your total tax						24				
	25	5 Federal income tax withheld from:												
	а	Form(s) W-	2				25a							
	b	Form(s) 109	99				25b							
	с	Other forms	s (see instructio	ns)			25c							
	d	Add lines 2	Add lines 25a through 25c											
If you have a	26			nts and amount a						26				
qualifying child,	27	Earned inco	ome credit (EIC)				27							
attach Sch. EIC.	28			Attach Schedule 8			28							
nontaxable	29	American o	pportunity cred	it from Form 8863	8, line 8		29							
combat pay, see instructions.	30	Recovery rebate credit. See instructions												
)	31	Amount from Schedule 3, line 13												
	32	Add lines 27 through 31. These are your total other payments and refundable credits												
	33	Add lines 2												
Refund	34	Add lines 25d, 26, and 32. These are your total payments												
neiuliu	35a	Amount of I	line 34 you wan	t refunded to you	I. If Form 8888	is attached, ch	eck her	е		35a				
Direct deposit?	►b	Routing nun	nber			► c Type:	Chec	king	Saving	s				
See instructions.	►d	Account nun	nber					ľ	0					
	36	Amount of I	line 34 you wan	t applied to your	2021 estimate	dtax 🕨	36	Γ						
Amount	37									37				
You Owe		Subtract line 33 from line 24. This is the amount you owe now												
For details on														
how to pay, see instructions.	38			instructions)			38							
Third Party Designee	Do			er person to disc			? See							
	instructions									e below.	🗌 No			
		signee's			Phone					ntification				
		ne 🕨			no. 🕨				ber (PIN					
Sign											st of my knowledge and			
Here	belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all info Your signature Date Your occupation										, ,			
	10	ir signature			Date Your occupation						ent you an Identity PIN, enter it here			
Joint return?									(s	ee inst.) 🕨				
See instructions.	Sp	ouse's signatu	re. If a joint return	f a joint return, both must sign.		Spouse's occupa	use's occupation				ent your spouse an			
Keep a copy for your records.	/									Identity Protection PIN, enter				
,									(S	ee inst.) 🕨				
		one no.		Email address										
Paid	Pre	parer's name		Preparer's signat	ure		Date		PTIN		Check if:			
Preparer											Self-employed			
		n's name 🕨							I P	hone no.	one no. m's EIN ►			
Use Only		n's address <												