E1040 Department of the Treasury-Internal Revenue Service (99) U.S. Individual Income Tax Return

2020

OMB No. 1545-007

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

Person is a child but not your dependent Your first name and middle initial Last name Spouse's social security number If joint return, spouse's first name and middle initial Last name Home address (number and street). If you have a P.O. box, see instructions. City, town, or post office. If you have a foreign address, also complete spaces below. City, town, or post office. If you have a foreign address, also complete spaces below. Foreign country name Foreign province/state/county	Filing Status Check only	ш	Single Married filing jointly currently single married filing jointly single.		rried filing s					•	-					
If joint return, spouse's first name and middle initial Last name Spouse's social security number Apt. no. Presidential Election Campaign Check here if you, or your Spouse's social security name Foreign post office. If you have a foreign address, also complete spaces below. State ZIP code Spouse's middle filling Jointy, want \$3 to go to this fund. Checking a box below will not change your tax or return. You Spouse Standard Standard Spouse Spouse Standard Spouse Spouse Standard Spouse	one box.	person is a child but not your dependent														
Home address (number and street). If you have a P.O. box, see instructions. Apt. no. 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.	Your first name and middle initial				Last name							Your social security number				
City, town, or post office. If you have a foreign address, also complete spaces below. State	If joint return, sp	oouse's	first name and middle initial	Last	Last name							Spouse's social security number				
Standard Some can claim: You as a dependent You sa se a dependent You sa a dependent You sa a dependent You sa a dependent You sa se a dependent You se se a se a dependent You sa se a dependent You se se a se a dependent You se se a dependent You se se a se a dependent You se se a se a dependent You se se a dependent You se se a dependent You se se a se a dependent You se se a dependent You se se se sinctions You se se a se a dependent You se se se se se sinctions You se se a se a dependent You se se se sinctions You se se si	Home address (number and street). If you have a P.O. box, see instructions. Apt. no.									, ,						
At any time during 2020, did you receive, sell, send, exchange, or otherwise acquire any financial interest in any virtual currency? Yes No Standard Someone can claim: You as a dependent Your spouse as a dependent Deduction 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 (3) Relationship (4) Check if qualifies for (see instructions): Child tax credit Credit for other dependents See instructions	City, town, or post office. If you have a foreign address, also complete spaces bel					State ZI				ZIP code sp		ouse it go to t	f filing jo his fun	ointly, v d. Chec	vant \$3 king a	
Someone can claim:	Foreign country	name			Foreign pro	vince/state/county						your tax or refund.			_	
Age/Blindness You: Were born before January 2, 1956 Are blind Spouse: Was born before January 2, 1956 Is blind Dependents (see instructions): If more than four dependents, see instructions and check here 1 Wages, salaries, tips, etc. Attach Form(s) W-2 Attach Sch. Bif required. 3a Qualified dividends . 3a b Taxable amount . 4b Is Taxable amount . 5b Is Aboution for Single or Acquisited from Schedule 1, line 9 Add lines 1, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income . From Schedule 1, line 9 Add lines 1, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total adjustments to income . From Schedule 1, line 9 Add lines 10 and 10b. These are your total adjustments to income . From Schedule 1, line 9 Standard Deduction or Schadular or Carbon deduction or itemized deduction for Standard or Deduction for Schaduar or Line and the carbon deduction for Schadular or Carbon	At any time dur	ing 202	20, did you receive, sell, send, exchar	nge, oi	r otherwise a	acquire any	financia	I interest in	any v	irtual curre	ncy?		Y	es	No	
Age/Blindness You: Were born before January 2, 1956	Standard				_	•		pendent	•		·					
Dependents (see instructions): If more than four dependents, see instructions and check here	Deduction	Ш	Spouse itemizes on a separate retur	m or y	ou were a d	ual-status a	lien									
If more than four dependents, see instructions and check here ▶ 1	Age/Blindness	You	u: Were born before January 2, 1956 Are blind Spouse: Was born before January 2, 19											s blind	<u></u>	
If more than four dependents, see instructions and check here > Attach Sch. B if required. Attach	Dependents	number to you										- 1	•		,	
dependents, see instructions and check here	If more	(1) F	irst name Last name		number .			-	Child tax credi				Credit fo	r other o	dependents	
and check here Tarker Married fling jointly or Qualifying Widow(er), \$24,800 Head of household, \$24,800 Head of household	dependents,	-									_			H		
Attach Sch. Bif required. Attach Sch. Bif requi		; —								+				Н		
Attach Sch. B if required. 2a	here >															
Sch. B if required. 3a Qualified dividends			Wages, salaries, tips, etc. Attach Fo	orm(s)	W-2							1				
required. 3a Qualified dividends 3a Ad distributions 4a RA distributions 4a RA distributions 4a RA distributions 5a Deduction for Standard 5b Taxable amount 5b 5c Capital gain or (loss). Attach Schedule D if required. If not required, check here 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 your total income 9 Adjustments to income:	Sch. B if	2a	Tax-exempt interest	2a			b Taxable interest .					2b				
Standard Social security benefits Sa b Taxable amount Sb Standard Deduction for-Single or Married fling separately, \$12,400 Married fling jointly or Qualifying Widow(er), \$24,800 Head of household, \$18,650 If you checked any box under Standard Deduction, see instructions, see i		3a	Qualified dividends	3a			b Ordinary dividends					3b				
Standard Deduction for Deduction for Single or Married filing separately, \$12,400 Married filing jointly or Qualifying widow(er), \$48,800 Head of household, \$18,650 Hy ou checked any box under Standard Deduction, see instructions.		4a	IRA distributions	4a			b Taxable amount .					4b				
Total Pode		5a	Pensions and annuities	5a	b Taxable amount .							5b				
Single or Married filing separately, \$12,400 Married filing jointly or Qualifying widow(er), \$24,800 Head of household, \$11 Subtract line 10c from line 9. This is your adjusted gross income. 10 Subtract line 10c from line 9. This is your adjusted gross income. 11 Standard deduction or itemized deduction. Attach Form 8995 or Form 8995-A 12 Add lines 12 and 13	separately,	6a	Social security benefits 6a b Taxable amount								6b					
Married filing separately, \$12,400 Married filing sporartely, \$12,400 Married filing jointly or Qualifying widow(er), \$24,800 Head of household, \$11 Subtract line 10c from line 9. This is your adjusted gross income. 10 Charitable contributions if you take the standard deduction. See instructions 10 Charitable contributions if you take the standard deduction. See instructions 10 Charitable contributions if you take the standard deduction. See instructions 10 Charitable contributions if you take the standard deduction. See instructions 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		7	Capital gain or (loss). Attach Schedule D if required. If not required, check here ▶													
\$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. 10 Add lines 1, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income. 9 Add lines 1, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income. 9 Add lines 1, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income. 9 In Adjustments to income. 10 Charitable contributions if you take the standard deduction. See instructions 10b 11 Subtract line 10a and 10b. These are your total adjustments to 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		8	Other income from Schedule 1, line 9													
Married filing jointly or Qualifying widow(er), \$24,800 b Charitable contributions if you take the standard deduction. See instructions C Add lines 10a and 10b. These are your total adjustments to income		9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income													
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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		b	Charitable contributions if you take the standard deduction. See instructions 10b													
\$18,650 If you checked any box under Standard Deduction, see instructions. 10 Subtract line 10c from line 9. This is your adjusted gross income	Head of	С	Add lines 10a and 10b. These are	. ▶	10c											
If you checked any box under Standard Deduction, see instructions. 12 Standard deduction or itemized deductions (from Schedule A)		11	Subtract line 10c from line 9. This i	s your	adjusted g	gross inco	ne				. ▶	11				
Standard Deduction, see instructions. 13 Qualified business income deduction. Attach Form 8995 or Form 8995-A	If you checked any box under Standard Deduction,	12	Standard deduction or itemized	deduc	tions (from	Schedule	Α)					12				
Deduction, see instructions. 14 Add lines 12 and 13		13	Qualified business income deduction. Attach Form 8995 or Form 8995-A													
		14	Add lines 12 and 13									14				
	366 IIISHUGHOHS.	15	Taxable income. Subtract line 14 from line 11. If zero or less, enter -0													

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

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