Department of the Treasury-Internal Revenue Service U.S. Individual Income Tax Return IRS Use Only - Do not write or staple in this space. OMB No. 1545-0074 X Single Married filing jointly Married filing separately (MFS) Head of household (HOH) Qualifying widow(er) (QW) **Filing Status** Check only 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 one box. a child but not your dependent Your first name and middle initial Your social security number Last name 490-54-9999 pe 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. Apt. no. **Presidential Election Campaign** Check here if you, or your spouse City, town, or post office. If you have a foreign address, also complete spaces below. State ZIP code if filing jointly, want \$3 to go to this fund. Checking a box below will not change your tax or refund. Foreign country name Foreign province/state/county Foreign postal code You Spouse At any time during 2021, did you receive, sell, send, exchange, or otherwise acquire any financial interest in any virtual currency? Yes No Someone can claim: You as a dependent Your spouse as a dependent Standard **Deduction** Spouse itemizes on a separate return or you were a dual-status alien Age/Blindness You: Were born before January 2, 1957 Are blind Spouse: Was born before January 2, 1957 (3) Relationship (4) Check if qualifies for (see instructions): (2) Social security Dependents (see instructions): number to vou (1) First name Last name Child tax credit Credit for other dependents If more than four dependents. see instructions and check here > 49,000. Wages, salaries, tips, etc. Attach Form(s) W-2 1 Attach 2a **b** Taxable interest 2b Sch. B if За Qualified dividends . . . 3a **b** Ordinary dividends 3b required.

b Taxable amount

b Taxable amount

b Taxable amount

12a

4a

5a

6a

Capital gain or (loss). Attach Schedule D if required. If not required, check here.

Charitable contributions if you take the standard deduction (see instructions) · · · ·

Other income from Schedule 1, line 10

Adjustments to income from Schedule 1, line 26

Subtract line 10 from line 9. This is your adjusted gross income

Standard deduction or itemized deductions (from Schedule A)

Qualified business income deduction from Form 8995 or Form 8995-A

Taxable income. Subtract line 14 from line 11. If zero or less, enter -0- .

Add lines 1, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your ${\color{blue} \textbf{total income}}$.

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

UYA

4a

5a

6a

10

11

12a

b

С

13

15

Standard Deduction for -

Single or married

filing separately, \$12,550

Married filing jointly or Qualifying

widow(er).

\$25,100

Head of household,

\$18,800

Standard Deduction,

If you checked

any box under

see instructions

IRA distributions . .

Pensions and annuities .

Add lines 12a and 12b

Social security benefits

49,000.

49,000.

12,550.

12,550.

36,450

4b

5b

6b

7

8

9

10

11

12c

13

14

15

Form 1040 (202	21) pe	a a						490-	54-99	99 Page 2	
	16	Tax (see instructions). Check if	any from Form(s):	1 8814 2	4972	3 🔲			. 16	4,178.	
	17	Amount from Schedule 2, line 3							. 17		
	18	Add lines 16 and 17							. 18	4,178.	
	19	Nonrefundable child tax credit or credit for other dependents from Schedule 8812							. 19		
	20	Amount from Schedule 3, line 8							. 20		
	21	Add lines 19 and 20							. 21	0.	
	22	Subtract line 21 from line 18. If z	ero or less, enter -	0					. 22	4,178.	
	23	Other taxes, including self-employment tax, from Schedule 2, line 21							. 23		
	24	Add lines 22 and 23. This is your total tax							24	4,178.	
	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		
If you have a qualifying child, attach Sch. EIC.	26	2021 estimated tax payments and amount applied from 2020 return									
		Earned income credit (EIC)									
		Check here if you were born after January 1, 1998, and before									
		January 2, 2004, and you satisfy	all the other requir	rements for							
		taxpayers who are at least age 1	•		▶ 🗍						
	b	Nontaxable combat pay election									
	С	Prior year (2019) earned income									
	28	Refundable child tax credit or ad			8812	. 28					
	29	American opportunity credit from									
	30	Recovery rebate credit. See inst						,400			
	31	Amount from Schedule 3, line 15									
	32	Add lines 27a and 28 through 31. These are your total other payments and refundable credits							32	1,400.	
	33	Add lines 25d, 26, and 32. These are your total payments								1,400.	
	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid							0.		
Refund Direct deposit? See instructions.	35a	Amount of line 34 you want refunded to you. If Form 8888 is attached, check here						1	0.		
	▶ b	Routing number XXXXXX									
	▶d	Account number XXXXXX			<u> </u>	Ū	_	•			
	36	Amount of line 34 you want appl		estimated tax		▶ 36					
Amount	37	Amount you owe. Subtract line					-		37	2,828.	
You Owe	38	Estimated tax penalty (see instructions)							•		
Third Party											
Designee	See	se instructions									
•	Dec	esignee's Phone Personal identification						ion			
		ne >	no. ▶ number (PIN)				1011				
Sign	Un	nder 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,									
Here	cor	orrect, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.									
	Yo	ur signature	Date Your occupation						u an Identity Protection		
Joint return? See instructions.									N, enter it here ee inst.) ▶	;	
Keep a copy for	Sp	Spouse's signature. If a joint return, both must sign.		Date Spouse's occupation					If the IRS sent your spouse an Identity		
your records.							Protection PIN, enter it here (see inst.) ▶				
	——Ph	one no.	Email address				13	*			
Paid		eparer's name	ure Date			е	PTIN		Check if:		
Preparer										Self-employed	
Use Only	Fir	m's name ▶	1					Phone	no.	<u> </u>	
Jac Offiny		Firm's address • Firm's FI									

Go to www.irs.gov/Form1040 for instructions and the latest information.