Form 1040
U.S. Individual Income Tax Return
2020

OMB No. 1545-0074

Filing Status
Check only one box.

☐ Single  ☐ Married filing jointly  ☐ Married filing separately (MFS)
☐ Head of household (HOH)  ☐ Qualifying widow(er) (QW)

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 a child but not your dependent.

Your first name and middle initial  Last name  Your social security number

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.

City, town, or post office. If you have a foreign address, also complete spaces below.

State  ZIP code

Foreign country name  Foreign province/state/county  Foreign postal code

At any time during 2020, did you receive, sell, send, exchange, or otherwise acquire any financial interest in any virtual currency?

☐ Yes  ☐ No

Standard Deduction

Someone can claim:  ☐ You as a dependent  ☐ Your spouse as a dependent

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

If more than four dependents, see instructions and check here.

(1) First name  Last name  (2) Social security number  (3) Relationship to you  (4) ☑ if qualifies for

Credit for other dependents

Standard Deduction for—
• Single or Married filing separately, $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.

1  Wages, salaries, tips, etc. Attach Form(s) W-2  ................

2a Tax-exempt interest  ................  2a  Taxable interest  ................  2b

3a Qualified dividends  ................  3a  Ordinary dividends  ................  3b

4a IRA distributions  ................  4a  Taxable amount  ................  4b

5a Pensions and annuities  ................  5a  Taxable amount  ................  5b

6a Social security benefits  ................  6a  Taxable amount  ................  6b

7  Capital gain or (loss). Attach Schedule D if required. If not required, check here  ................  7

8  Other income from Schedule 1, line 9  ................  8

9  Add lines 1, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income  ................  9

10 Adjustments to income:

a  From Schedule 1, line 22  ................  10a

b  Charitable contributions if you take the standard deduction. See instructions  ................  10b

c  Add lines 10a and 10b. These are your total adjustments to income  ................  10c

11 Subtract line 10c from line 9. This is your adjusted gross income  ................  11

12 Standard deduction or itemized deductions (from Schedule A)  ................  12

13 Qualified business income deduction. Attach Form 8995 or Form 8995-A  ................  13

14 Add lines 12 and 13  ................  14

15 Taxable income. Subtract line 14 from line 11. If zero or less, enter -0-  ................  15

For Disclosure, Privacy Act, and Paperwork Reduction Act Notice, see separate instructions.
16 Tax (see instructions). Check if any from Form(s):  
   1� 8814  2� 4972  3�  

17 Amount from Schedule 2, line 3  

18 Add lines 16 and 17  

19 Child tax credit or credit for other dependents  

20 Amount from Schedule 3, line 7  

21 Add lines 19 and 20  

22 Subtract line 21 from line 18. If zero or less, enter -0-.  

23 Other taxes, including self-employment tax, from Schedule 2, line 10  

24 Add lines 22 and 23. This is your **total tax**  

25 Federal income tax withheld from:  
   a Form(s) W-2  
   b Form(s) 1099  
   c Other forms (see instructions)  
   d Add lines 25a through 25c  

26 2020 estimated tax payments and amount applied from 2019 return  

27 Earned income credit (EIC)  

28 Additional child tax credit. Attach Schedule 8812  

29 American opportunity credit from Form 8863, line 8  

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 25d, 26, and 32. These are your **total payments**  

34 Refund  
   If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you **overpaid**  
   Direct deposit? See instructions.  
   b Routing number  
   c Type: Checking  
   d Account number  
   e Amount of line 34 you want **refunded to you**. If Form 8888 is attached, check here  
   f Amount of line 34 you want **applied to your 2021 estimated tax**  

36 Amount You Owe  
   Subtract line 33 from line 24. This is the **amount you owe now**  
   Note: Schedule H and Schedule SE filers, line 37 may not represent all of the taxes you owe for 2020. See Schedule 3, line 12e, and its instructions for details.  

37 Estimated tax penalty (see instructions)  

38 Third Party Designee  
   Do you want to allow another person to discuss this return with the IRS? See instructions  
   a Designee's name  
   b Phone no.  
   c Personal identification number (PIN)  

Sign Here  
   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.  
   a Your signature  
   b Date  
   c Your occupation  
   d If the IRS sent you an Identity Protection PIN, enter it here (see inst.)  
   e If the IRS sent your spouse an Identity Protection PIN, enter it here (see inst.)  
   f Phone no.  
   g Email address  

Paid Preparer Use Only  
   a Firm's name  
   b Firm's address  
   c PTIN  
   d Check if: Self-employed  

Go to www.irs.gov/Form1040 for instructions and the latest information.
## Part I  Additional Income

1. Taxable refunds, credits, or offsets of state and local income taxes
2a. Alimony received
   - Date of original divorce or separation agreement (see instructions)
3. Business income or (loss). Attach Schedule C
4. Other gains or (losses). Attach Form 4797
5. Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E
6. Farm income or (loss). Attach Schedule F
7. Unemployment compensation
8. Other income. List type and amount
   - Combine lines 1 through 8. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 8

## Part II  Adjustments to Income

10. Educator expenses
11. Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106
12. Health savings account deduction. Attach Form 8889
13. Moving expenses for members of the Armed Forces. Attach Form 3903
15. Self-employed SEP, SIMPLE, and qualified plans
16. Self-employed health insurance deduction
17. Penalty on early withdrawal of savings
18a. Alimony paid
   - Recipient’s SSN
   - Date of original divorce or separation agreement (see instructions)
19. IRA deduction
20. Student loan interest deduction
21. Tuition and fees deduction. Attach Form 8917
22. Add lines 10 through 21. These are your adjustments to income. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 10a
### Additional Taxes

**Part I**  
**Tax**

1. Alternative minimum tax. Attach Form 6251

2. Excess advance premium tax credit repayment. Attach Form 8962

3. Add lines 1 and 2. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 17

**Part II**  
**Other Taxes**

4. Self-employment tax. Attach Schedule SE

5. Unreported social security and Medicare tax from Form:  
   a. 4137  
   b. 8919

6. Additional tax on IRAs, other qualified retirement plans, and other tax-favored accounts. Attach Form 5329 if required

7a. Household employment taxes. Attach Schedule H

7b. Repayment of first-time homebuyer credit from Form 5405. Attach Form 5405 if required

8. Taxes from:  
   a. Form 8959  
   b. Form 8960  
   c. Instructions; enter code(s)

9. Section 965 net tax liability installment from Form 965-A

10. Add lines 4 through 8. These are your **total other taxes**. Enter here and on Form 1040 or 1040-SR, line 23, or Form 1040-NR, line 23b

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For Paperwork Reduction Act Notice, see your tax return instructions.
### Part I  Nonrefundable Credits

1. Foreign tax credit. Attach Form 1116 if required ........................................... 1
2. Credit for child and dependent care expenses. Attach Form 2441 .................... 2
3. Education credits from Form 8863, line 19 ................................................... 3
4. Retirement savings contributions credit. Attach Form 8880 ......................... 4
5. Residential energy credits. Attach Form 5695 ................................................. 5
6. Other credits from Form:  
   - a ☐ 3800  
   - b ☐ 8801  
   - c ☐ ........................................................................................................ 6
7. Add lines 1 through 6. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 20 7

### Part II  Other Payments and Refundable Credits

8. Net premium tax credit. Attach Form 8962 .................................................... 8
9. Amount paid with request for extension to file (see instructions) .................. 9
10. Excess social security and tier 1 RRTA tax withheld ................................. 10
11. Credit for federal tax on fuels. Attach Form 4136 ........................................ 11
12. Other payments or refundable credits:  
   - a Form 2439 ......................................................................................... 12a
   - b Qualified sick and family leave credits from Schedule(s) H and Form(s) 7202  ......................................................... 12b
   - c Health coverage tax credit from Form 8885 ...................................... 12c
   - d Other: ........................................................................................................ 12d
   - e Deferral for certain Schedule H or SE filers (see instructions) ........... 12e
   - f Add lines 12a through 12e ..................................................................... 12f
13. Add lines 8 through 12f. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 31 13

For Paperwork Reduction Act Notice, see your tax return instructions.
**Schedule C (Form 1040)**

**Profit or Loss From Business**

**Sole Proprietorship**


Attach to Form 1040, 1040-SR, 1040-NR, or 1041; partnerships generally must file Form 1065.

**Part I: Income**

1. Gross receipts or sales. See instructions for line 1 and check the box if this income was reported to you on Form W-2 and the "Statutory employee" box on that form was checked. □
2. Returns and allowances. □
3. Subtract line 2 from line 1. □
4. Cost of goods sold (from line 42). □
5. Gross profit. Subtract line 4 from line 3. □
6. Other income, including federal and state gasoline or fuel tax credit or refund (see instructions). □

**Part II: Expenses**

Enter expenses for business use of your home only on line 30.

8. Advertising. □
9. Car and truck expenses (see instructions). □
10. Commissions and fees. □
11. Contract labor (see instructions). □
12. Depletion. □
13. Depreciation and section 179 expense deduction (not included in Part III) (see instructions). □
14. Employee benefit programs (other than on line 19). □
15. Insurance (other than health). □
16. Interest (see instructions): □
   a. Mortgage (paid to banks, etc.) □
   b. Other □
17. Legal and professional services □
18. Office expense (see instructions). □
19. Pension and profit-sharing plans. □
20. Rent or lease (see instructions): □
   a. Vehicles, machinery, and equipment □
   b. Other business property □
21. Repairs and maintenance □
22. Supplies (not included in Part III) □
23. Taxes and licenses □
24. Travel and meals: □
   a. Travel □
   b. Deductible meals (see instructions) □
25. Utilities □
26. Wages (less employment credits) □
27. Other expenses (from line 48) □
28. Total expenses before expenses for business use of home. Add lines 8 through 27a. □
30. Expenses for business use of your home. Do not report these expenses elsewhere. Attach Form 8829 unless using the simplified method. See instructions.

**Simplified method filers only:** Enter the total square footage of (a) your home: □

and (b) the part of your home used for business: □. Use the Simplified Method Worksheet in the instructions to figure the amount to enter on line 30. □


**Part III: Net profit or (loss)**

- If you checked 32a, enter the loss on both Schedule 1 (Form 1040), line 3, and on Schedule SE, line 2. (If you checked the box on line 1, see instructions). Estates and trusts, enter on Form 1041, line 3. □
- If a loss, you must go to line 32. □
- If you have a loss, check the box that describes your investment in this activity. See instructions. □

<table>
<thead>
<tr>
<th>Loss Investment</th>
<th>Loss Investment Comment</th>
</tr>
</thead>
<tbody>
<tr>
<td>All investment is at risk.</td>
<td>□</td>
</tr>
<tr>
<td>Some investment is not at risk.</td>
<td>□</td>
</tr>
</tbody>
</table>

For Paperwork Reduction Act Notice, see the separate instructions.

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Schedule C (Form 1040) 2020
### Part III  Cost of Goods Sold (see instructions)

33 Method(s) used to value closing inventory:  
   a  Cost  
   b  Lower of cost or market  
   c  Other (attach explanation)

34 Was there any change in determining quantities, costs, or valuations between opening and closing inventory?  
   If “Yes,” attach explanation.

35 Inventory at beginning of year. If different from last year’s closing inventory, attach explanation.

36 Purchases less cost of items withdrawn for personal use.

37 Cost of labor. Do not include any amounts paid to yourself.

38 Materials and supplies.

39 Other costs.

40 Add lines 35 through 39.

41 Inventory at end of year.

42 Cost of goods sold. Subtract line 41 from line 40. Enter the result here and on line 4.

### Part IV  Information on Your Vehicle.

Complete this part only if you are claiming car or truck expenses on line 9 and are not required to file Form 4562 for this business. See the instructions for line 13 to find out if you must file Form 4562.

43 When did you place your vehicle in service for business purposes? (month/day/year)

44 Of the total number of miles you drove your vehicle during 2020, enter the number of miles you used your vehicle for:
   a  Business  
   b  Commuting (see instructions)  
   c  Other

45 Was your vehicle available for personal use during off-duty hours?

46 Do you (or your spouse) have another vehicle available for personal use?

47a Do you have evidence to support your deduction?

   b  If “Yes,” is the evidence written?

### Part V  Other Expenses.

List below business expenses not included on lines 8–26 or line 30.

48 Total other expenses. Enter here and on line 27a.