

FORM

1040-S

Department of the Treasury

U.S. INDIVIDUAL INCOME TAX RETURN

Filing Status: SINGLE

20

TAX YEAR

PERSONAL INFORMATION

FIRST NAME

LAST NAME

SOCIAL SECURITY NUMBER (SSN)

HOME ADDRESS (NUMBER AND STREET)

APT / SUITE NO.

CITY, TOWN, OR POST OFFICE

STATE

ZIP CODE

☐ Check if you wish to contribute \$3 to the Presidential Election Campaign Fund

INCOME

No.	Income Sources & Adjustments	Amount (\$)
1	Wages, salaries, tips, etc. (Attach Form(s) W-2)	
2	Taxable interest	
3	Ordinary dividends	
4	IRA distributions (Taxable amount)	
5	Pensions and annuities (Taxable amount)	
6	Social Security benefits (Taxable amount)	
7	Capital gain or (loss)	
8	Other income	
9	Total Income (Add lines 1 through 8)	

No.	Income Sources & Adjustments	Amount (\$)
10	Adjustments to income (From Schedule)	
11	Adjusted Gross Income (Subtract line 10 from line 9)	

TAX & DEDUCTIONS

12	Standard Deduction for Single Filer	
13	Qualified business income deduction	
14	Total Deductions (Add lines 12 and 13)	
15	Taxable Income (Subtract line 14 from line 11. If zero or less, enter -0-)	
16	Tax (including alternative minimum tax)	

PAYMENTS & CREDITS

17	Federal income tax withheld from Form(s) W-2 and 1099	
18	Other payments or refundable credits	
19	Total Payments (Add lines 17 and 18)	

REFUND OR AMOUNT OWED

20	REFUND (If line 19 is larger than line 16, subtract line 16 from line 19)	
21	AMOUNT YOU OWE (If line 16 is larger than line 19, subtract line 19 from line 16)	

Sign Here: Under penalties of perjury, I declare that I have examined this return and accompanying schedules, and to the best of my knowledge and belief, they are true, correct, and complete.

Your Signature

Date

Your Occupation

Identity Protection PIN (if applicable)

Phone Number

Email Address