

Filing Status

☐ Single
☐ Married filing separately (MFS) (formerly Married)
☐ Qualifying widow(er) (QW)

If you checked the QW box, enter the child's name if the qualifying person is a child but not your dependent ▶

Check only one box.

Your first name and middle initial

Last name

Your identifying number (see instructions)

Home address (number and street or rural route). If you have a P.O. box, see instructions.

Apt. no.

Check if: ☐ Individual ☐ Estate or Trust

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

Dependents (see instructions):	(1) First name		Last name		(2) Dependent's identifying number	(3) Dependent's relationship to you	(4) <input checked="" type="checkbox"/> if qualifies for (see instr.):	
							Child tax credit	Credit for other dependents
If more than four dependents, see instructions and check here ▶ <input type="checkbox"/>							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>

Income Effectively Connected With U.S. Trade or Business

1a

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

1a

b

Scholarship and fellowship grants. Attach Form(s) 1042-S or required statement. See instructions

1b

c

Total income exempt by a treaty from Schedule OI (Form 1040-NR), Item L, line 1(e)

1c

2a

Tax-exempt interest

2a

2b

Taxable interest

3a

Qualified dividends

3a

3b

Ordinary dividends

4a

IRA distributions

4a

4b

Taxable amount

5a

Pensions and annuities

5a

5b

Taxable amount

6

Reserved for future use

6

7

Capital gain or (loss). Attach Schedule D (Form 1040) if required. If not required, check here . ▶ ☐

7

8

Other income from Schedule 1 (Form 1040), line 9

8

9

Add lines 1a, 1b, 2b, 3b, 4b, 5b, 7, and 8. This is your **total effectively connected income** . . ▶

9

10

Adjustments to income:

a

From Schedule 1 (Form 1040), line 22

10a

b

Charitable contributions for certain residents of India. See instructions

10b

c

Scholarship and fellowship grants excluded

10c

d

Add lines 10a through 10c. These are your **total adjustments to income** ▶

10d

11

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

11

12

Itemized deductions (from Schedule A (Form 1040-NR)) or, for certain residents of India, standard deduction. See instructions

12

13a

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

13a

13b

Exemptions for estates and trusts only. See instructions

c

Add lines 13a and 13b

13c

14

Add lines 12 and 13c

14

15

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

15

16	Tax (see instructions). Check if any from Form(s): 1 <input type="checkbox"/> 8814 2 <input type="checkbox"/> 4972 3 <input type="checkbox"/>	16	
17	Amount from Schedule 2 (Form 1040), line 3	17	
18	Add lines 16 and 17	18	
19	Child tax credit or credit for other dependents	19	
20	Amount from Schedule 3 (Form 1040), line 7	20	
21	Add lines 19 and 20	21	
22	Subtract line 21 from line 18. If zero or less, enter -0-	22	
23a	Tax on income not effectively connected with a U.S. trade or business from Schedule NEC (Form 1040-NR), line 15	23a	
b	Other taxes, including self-employment tax, from Schedule 2 (Form 1040), line 10	23b	
c	Transportation tax (see instructions)	23c	
d	Add lines 23a through 23c	23d	
24	Add lines 22 and 23d. This is your total tax	24	
25	Federal income tax withheld from:		
a	Form(s) W-2	25a	
b	Form(s) 1099	25b	
c	Other forms (see instructions)	25c	
d	Add lines 25a through 25c	25d	
e	Form(s) 8805	25e	
f	Form(s) 8288-A	25f	
g	Form(s) 1042-S	25g	
26	2020 estimated tax payments and amount applied from 2019 return	26	
27	Reserved for future use	27	
28	Additional child tax credit. Attach Schedule 8812 (Form 1040)	28	
29	Credit for amount paid with Form 1040-C	29	
30	Reserved for future use	30	
31	Amount from Schedule 3 (Form 1040), line 13	31	
32	Add lines 28 through 31. These are your total other payments and refundable credits	32	
33	Add lines 25d, 25e, 25f, 25g, 26, and 32. These are your total payments	33	
Refund	34 If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid	34	
	35a Amount of line 34 you want refunded to you . If Form 8888 is attached, check here <input type="checkbox"/>	35a	
Direct deposit? See instructions.	b Routing number <input type="text"/> c Type: <input type="checkbox"/> Checking <input type="checkbox"/> Savings		
	d Account number <input type="text"/>		
	e If you want your refund check mailed to an address outside the United States not shown on page 1, enter it here.		
	36 Amount of line 34 you want applied to your 2021 estimated tax	36	
Amount You Owe	37 Amount you owe. Subtract line 33 from line 24. For details on how to pay, see instructions	37	
	38 Estimated tax penalty (see instructions)	38	
Third Party Designee (Other than paid preparer)	Do you want to allow another person (other than your paid preparer) to discuss this return with the IRS? See instructions <input type="checkbox"/> Yes. Complete below. <input type="checkbox"/> No		
	Designee's name <input type="text"/>	Phone no. <input type="text"/>	Personal identification number (PIN) <input type="text"/>
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.		
	Your signature <input type="text"/>	Date <input type="text"/>	Your occupation <input type="text"/>
			If the IRS sent you an Identity Protection PIN, enter it here (see inst.) <input type="text"/>
	Phone no. <input type="text"/>	Email address <input type="text"/>	
Paid Preparer Use Only	Preparer's name <input type="text"/>	Preparer's signature <input type="text"/>	Date <input type="text"/>
	Firm's name <input type="text"/>	PTIN <input type="text"/>	Check if: <input type="checkbox"/> Self-employed
	Firm's address <input type="text"/>	Phone no. <input type="text"/>	Firm's EIN <input type="text"/>