Filing Status		Single Married filing jointly	N	/larried	filing sep	parately (MFS)	Head of househ	nold (HOH) Qua	alifying wi	dow(er) (QW)	FILING STA Please check	
Check only one box.	If you checked the MFS box, enter the name of spouse. If you checked the HOH or QW box, enter the child's name if the spouse of								the quali	fying person is	the box that	
	a chi	ld but not your dependent.									applies to yo	
Your first name and middle initial				Last name					Your social security number			
John A.			[Doe					1 2 3 4 5 6 7 8 9			
If joint return, s	If joint return, spouse's first name and middle initial			Last name						Spouse's social security number		
Home address	(numbe	er and street). If you have a P.O. box	x, see ir	instructions. Personally-Identifying Apt. no.				Presidential Election Campaign				
^{ert} Florida Department of Corrections, Centerville Station, PO				Box 12100 Corrections # 12345					Check here if you, or your spouse if filing			
	ost offic	ce, state, and ZIP code. If you have	a foreiç	gn add	ress, als	o complete sp	paces below (see instru	uctions).		ant \$3 to go to this a box below will no		
Tallahassee, FI	32317	-2100							tax or refu		Spouse	
Foreign countr	y name	ıme			Foreign province/state/county Foreign				If more than four dependents,			
tely							•			tructions and 🗸	· · · · · · · · · · · · · · · · · · ·	
Standard	Som	eone can claim: You as a dep	enden'	t	You	spouse as a	denendent					
Deduction					_	•	аоронаот					
		Spouse itemizes on a separate retur	n or yo	u were	a uuai-	status alleri						
Age/Blindness	You:	Were born before January 2,	1955		Are blind	Spouse:	Was born before	re January 2, 1955	Is b	lind		
Dependents (see ins	tructions):		(2)	Social se	curity number	(3) Relationship to yo	u (4) √ i	if qualifies f	or (see instruction	3):	
(1) First name		Last name			Child tax co				credit Credit for other dependents			
-												
						 				_ =		
	1	Wages salaries tips etc Attach	Form(e)	1 1/1/-2					1			
-	1	Wages, salaries, tips, etc. Attach	1						. 1		\$1	
	2a	Tax-exempt interest .	2	а				Attach Sch. B if requi	red 2I	b	\$1	
Standard	2a 3a	Tax-exempt interest	3	a a			b Ordinary dividends	Attach Sch. B if requi	red 2I	b Sections	2b, 7b, and 8l	
Deduction for-	2a 3a 4a	Tax-exempt interest	3:	a a			b Ordinary dividendsb Taxable amount		red 21 red 31 . 41	Sections State \$1 \$12,200	2b, 7b, and 8l if you make l as an indiv	
Deduction for—Single or Married filing separately,	2a 3a 4a c	Tax-exempt interest	26 36 46	a a a c			b Ordinary dividendsb Taxable amountd Taxable amount		red 21 red 31 . 41	b Sections b State \$1 \$12,200 \$24,400	2b, 7b, and 8l if you make	
• Single or Married filing separately, \$12,200	2a 3a 4a c	Tax-exempt interest	2: 3: 4: 4: 5:	a a a c			b Ordinary dividendsb Taxable amountd Taxable amountb Taxable amount		red 2l red 3l . 4l . 5i	Sections State \$1	2b, 7b, and 8l if you make l as an indivi	
Single or Married filing separately, \$12,200 Married filing jointly or Qualifying	2a 3a 4a c 5a	Tax-exempt interest	23 44 46 56 edule D	a a a c			b Ordinary dividendsb Taxable amountd Taxable amountb Taxable amount		red 21 red 31 . 41 . 46 . 51	b Sections b State \$1 \$12,200 d \$24,400 b	2b, 7b, and 8l if you make l as an indivi	
• Single or Married filing separately, \$12,200 • Married filing	2a 3a 4a c	Tax-exempt interest	23 44 46 56 edule D	a a c a if requ	uired. If n		b Ordinary dividendsb Taxable amountd Taxable amountb Taxable amountheck here		red 2l red 3l . 4l . 5i	b Sections b State \$1 \$12,200 d \$24,400 b	2b. 7b. and 8l if you make I as an indivi as a couple	
Deduction for— Single or Married filing separately, \$12,200 Married filing jointly or Qualifying widow(er), \$24,400 Head of	2a 3a 4a c 5a	Tax-exempt interest	26 36 46 56 edule D	a a c a if requ	uired. If n	ot required, c	b Ordinary dividendsb Taxable amountd Taxable amountb Taxable amountheck here	s. Attach Sch. B if requi	red 21 red 31 . 41 . 46 . 51	Sections State \$1	2b, 7b, and 8l if you make l as an indivi	
Deduction for— Single or Married filing separately, \$12,200 Married filing jointly or Qualifying widow(er), \$24,400	2a 3a 4a c 5a 6	Tax-exempt interest	26 36 46 46 56 edule D ne 9	a a c a if requ	uired. If n is your t	ot required, c	 b Ordinary dividends b Taxable amount d Taxable amount b Taxable amount heck here 	s. Attach Sch. B if requi	red 21 red 31 . 41 . 51 . 6	b	2b. 7b. and 8b if you make I as an indivi as a couple	
Deduction for— Single or Married filing separately, \$12,200 Married filing jointly or Qualifying widow(er), \$24,400 Head of household, \$18,350 If you checked	2a 3a 4a c 5a 6 7a b	Tax-exempt interest	2; 3; 4; 4; 5; edule D ne 9 . and 7a edule 1,	a a c a if requ a. This , line 2	uired. If n	oot required, c	 b Ordinary dividends b Taxable amount d Taxable amount b Taxable amount heck here 	s. Attach Sch. B if requi	red 21 red 31 . 41 . 51 . 6 . 71	b	2b. 7b. and 8b if you make l as an indivi as a couple	
Deduction for— Single or Married filing separately, \$12,200 Married filing jointly or Qualifying widow(er), \$24,400 Head of household, \$18,350	2a 3a 4a c 5a 6 7a b 8a	Tax-exempt interest	26 36 46 46 56 edule D ne 9 . and 7a edule 1, s is your	a a c a if requ a. This , line 2	uired. If n is your t 2 .	ot required, c	 b Ordinary dividends b Taxable amount d Taxable amount b Taxable amount heck here 	s. Attach Sch. B if requi	red 2l red 3l . 4l . 5l . 7l . 7l . 8i	b	2b. 7b. and 8l if you make l as an indivi as a couple \$1 11b: State \$6	
Deduction for— Single or Married filing separately, \$12,200 Married filing jointly or Qualifying widow(er), \$24,400 Head of household, \$18,350 If you checked any box under Standard Deduction,	2a 3a 4a c 5a 6 7a b 8a	Tax-exempt interest	2a 3a 4a 4a 5a edule D ne 9 and 7a edule 1, is is your I deduct	a a c a if requ i a. This , line 2 r adjust	uired. If n is your t 2 isted gro (from Sc	ot required, c otal income ss income hedule A) .	b Ordinary dividends b Taxable amount d Taxable amount b Taxable amount heck here	s. Attach Sch. B if requi	red 2l red 3l . 4l . 5l . 7l . 7l . 8i	Sections State \$1	2b. 7b. and 8l if you make I as an indivi as a couple \$1 11b: State \$6 ake less than \$1	
Deduction for— Single or Married filing separately, \$12,200 Married filing jointly or Qualifying widow(er), \$24,400 Head of household, \$18,350 If you checked any box under Standard	2a 3a 4a c 5a 6 7a b 8a b	Tax-exempt interest	2a 3a 4a 4a 5a edule D ne 9 and 7a edule 1, is is your I deduct	a a c a if requ i a. This , line 2 r adjust	uired. If n is your t 2 isted gro (from Sc	ot required, c otal income ss income hedule A) .	b Ordinary dividends b Taxable amount d Taxable amount b Taxable amount heck here	s. Attach Sch. B if requi	red 2l red 3l . 4l . 5l . 7l . 7l . 8i	Sections	2b. 7b. and 8b if you make I as an indivias a couple \$1 n.11b: State \$6 ake less than 8	

Fill in Sections 2b, 7b, 8b, and 11b as instructed above. Do NOT fill in any other line items.

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

Form 1040 (2019	9)								Page 2
	12a	Tax (see inst.) Check if any from F	orm(s): 1 881	4 2 4972	3 🗌	12a			
	b	Add Schedule 2, line 3, and line	12a and enter the	total				12b	
	13a	Child tax credit or credit for other	er dependents .			13a			
	b	Add Schedule 3, line 7, and line	13a and enter the	total			▶	13b	
	14	Subtract line 13b from line 12b.	If zero or less, ent	er -0				14	
	15	Other taxes, including self-empl	oyment tax, from	Schedule 2, line	10			15	
	16	Add lines 14 and 15. This is you	r total tax				▶	16	
	17	Federal income tax withheld from	m Forms W-2 and	1099				17	
If you have a	18	Other payments and refundable							
qualifying child, attach Sch. EIC.	а	Earned income credit (EIC) .				18a			
If you have	b	Additional child tax credit. Attac	h Schedule 8812			18b			
nontaxable combat pay, see	С	American opportunity credit from	n Form 8863, line	8		18c			
instructions.	d	Schedule 3, line 14				18d			
	е	Add lines 18a through 18d. Thes	se are your total o	ther payments	and refundable cred	its	•	18e	
	19	Add lines 17 and 18e. These are	your total payme	ents			•	19	
Refund	20	If line 19 is more than line 16, su	btract line 16 fron	n line 19. This is	the amount you over	paid		20	
neiuliu	21a	Amount of line 20 you want refu	nded to you. If Fo	orm 8888 is atta	ched, check here		. ▶ 🗌	21a	BANK ACCOUNT:
Direct deposit?	▶b	Routing number			▶ c Type:	Checking	Savings		If you have a bank account en
See instructions.	►d	Account number					, i		that information in lines 21b through d. If you don't have a
	22	Amount of line 20 you want app	lied to your 2020	estimated tax		22			bank account leave this section
Amount	23	Amount you owe. Subtract line	19 from line 16. F	or details on ho	w to pay, see instructi	ons	•	23	blank.
You Owe	24	Estimated tax penalty (see instru	uctions)			24			
Third Party Designee	Do	you want to allow another persor	(other than your	oaid preparer) to	discuss this return w	ith the IRS? See in	structions	s	Yes. Complete below.
(Other than	De	signee's	Phone		Perso	nal identifi	cation		
paid preparer)	naı	me 🕨		no. ►		numbe	er (PIN)	<u> </u>	
Sign Here		der penalties of perjury, I declare that I rect, and complete. Declaration of prep						knowled	ge and belief, they are true,
	Yo	our signature		Date	Your occupation		lf th	ne IRS se	ent you an Identity
	\	John a. 1	0-1	2/29/20			Pro	tection F	PIN, enter it here
Joint return? See instructions. Keep a copy for		J. Ca. A	Say	7-72	Unemployed		(see	e inst.)	
	Sp	ouse's signature. If a joint return,	Date Spouse's occupati		Ider			ent your spouse an	
your records.	,						inst.)	tection PIN, enter it here	
	Phone no.			Email address					
		eparer's name			Date PTIN			Check if:	
Paid	' ''	Preparer's name Preparer's signa		itai 0		Date			3rd Party Designee
Preparer Use Only								Self-employed	
		m's name ▶			Phone no.				
		m's address ▶					Firr	n's EIN	
Go to www.irs.g	ov/Forn	n1040 for instructions and the late	st information.						Form 1040 (2019)