Filing Statu Check only one box.	If y	Single Married filing jointly ou checked the MFS box, enter the son is a child but not your depend	e name of								
Your first nam	e and m	niddle initial	Last na	ime					Your so	cial securi	ty number
If joint return,	spouse'	s first name and middle initial	Last na	ime	***************************************				Spouse	's social ser	curity number
Home address	(numb	er and street). If you have a P.O. box, s	see Instructi	ions.	ii -			Apt. no.			on Campaign
City, town, or post office. If you have a foreign address, also complete s			paces below. State ZIP or			ZIP code	spouse to go to	Check here if you, or your spouse if filing jointly, want \$3 to go to this fund. Checking a			
Foreign country	ry name			Foreign pre	ovince/state/c	ounty		oreign postal code		ow will not x or refund.	
At any time d	uring 2	021, did you receive, sell, exchang	ge, or other	erwise dis	pose of any	financi	al interest in	any virtual curre	ncy?	Yes	☐ No
Standard Deduction	-	neone can claim: You as a Spouse itemizes on a separate re			Your spouse dual-status a		ependent				
Age/Blindnes	s You	: Were born before January 2	1957	Are bli	nd Spor	ıse:	Was born	before January	2. 1957	I is bi	ind
Dependent If more than four dependents, see instructior and check	(1) F	instructions): First name Last name		10.00	ocial security number	(3	3) Relationship to you		jualifies fo	r (see instru	
here									=(" -		
Attach Sch. B if required.	1 2a 3a 4a 5a	Wages, salaries, tips, etc. Attack Tax-exempt interest Qualified dividends IRA distributions Pensions and annuities	2a 3a 4a 5a	W-2 .		Ordin Taxa	ble interest nary dividend ble amount		. 1 2b . 3b . 4b		
Standard	6a	Social security benefits	6a		-		ble amount .		6b		
Deduction for— Single or Married filing separately, \$12,650	7 8 9	7 Capital gain or (loss). Attach Schedule D if required. If not required, check here						7 8			
Married filing	10	Adjustments to income from Sch					4.70		. 10		
jointly or Qualifying	11	Subtract line 10 from line 9. This	1	The same of the sa	ross incom	e \		2	► 11		
widow(er), \$25,100	12a										
Head of household, \$18,800	- b	b Charitable contributions if you take the standard deduction (see Instructions)						. 120			
If you checked any box under	13	Qualified business income dedu	ction from	Form 89	95 or Form 8	995-A			. 13		
Standard Deduction, see instructions.	14 15	Add lines 12c and 13	4 from lin	e 11. If ze	ero or less, e	nter -0		F F F F	. 14		

Form 1040 (2021	1)		- III	Mile	Page
	16	Tax (see instructions). Check if any from Form(s): 1 8814 2 4972 3		16	
	17	Amount from Schedule 2, line 3		17	
	18	Add lines 16 and 17		18	25 (1) 25
	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	10 m 201 1975
	22	Subtract line 21 from line 18. If zero or less, enter -0		22	
	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	
	25	Federal income tax withheld from:	- 7	-76	
	а	Form(s) W-2			
	b	Form(s) 1099			
	C	Other forms (see instructions)			
	d	Add lines 25a through 25c		25d	
	26	2021 estimated tax payments and amount applied from 2020 return		26	
f you have a qualifying child,	27a	Earned income credit (EIC)			
attach Sch. ElC.		Check here if you were born after January 1, 1998, and before		,	
		January 2, 2004, and you satisfy all the other requirements for		7.11	
		taxpayers who are at least age 18, to claim the EIC. See instructions ▶ ☐			
	Ь	Nontaxable combat pay election , , 27b			
	b c	Prior year (2019) samed income			
	28	Refundable child tax credit or additional child tax credit from Schedule 8812 28	-		
	29	American opportunity credit from Form 8863, line 8			
	30	Recovery rebate credit. See instructions	_		
	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	11010
	33	Add lines 25d, 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 .	in t	34	
	35a	Amount of line 34 you want refunded to you. If Form 8888 is attached, check here		35a	
Direct deposit? See instructions.	▶ b	Routing number Checking Sav	ings		
dea mandenona,	►d	Account number			
	36	Amount of line 34 you want applied to your 2022 estimated tax			
Amount	37	Amount you owe. Subtract line 33 from line 24. For details on how to pay, see instructions .		37	
You Owe	38	Estimated tax penalty (see instructions)			
Third Party		you want to allow another person to discuss this return with the IRS? See	1-4-6-	term F	No
Designee		structions			_ NO
		rsignee's Phone Personal		ation	
Sign	Un	der penalties of perjury, I declare that I have examined this return and accompanying schedules and statements,	and to th	ne best of	my knowledge an
		lief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of			
Here	Yo	ur signature Date Your occupation			ou an Identity
			Protect (see ins		enter it here
Joint return?	D-				
See instructions. Keep a copy for	Sp	ouse's signature. If a joint return, both must sign. Date Spouse's occupation			our spouse an on PIN, enter it hen
your records.			(see ins		JAT III, CIRCI II HOI
	Ph	one no. Email address			
		eparer's name Preparer's signature Date PT	IN	Ch	neck if:
Paid					Self-employed
Preparer	Fin	m's name	Phone	Trapping.	
Use Only		m's address >		rm's EIN ►	
	1-11	n 1040 for instructions and the latest information.	FIDIT S.I		Form 1040 (202)

SCHEDULE 1 (Form 1040)

Department of the Treasury Internal Revenue Service

Additional Income and Adjustments to Income

► Attach to Form 1040, 1040-SR, or 1040-NR.

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

OMB No. 1545-0074

2021

Attachment Sequence No. 01

Name(s) shown on Form 1040, 1040-SR, or 1040-NR

Your social security number

Par	Additional Income		
1	Taxable refunds, credits, or offsets of state and local income taxes		1
2a	Alimony received		2a
b	Date of original divorce or separation agreement (see instructions)		The state of the s
3	Business income or (loss). Attach Schedule C		3
4	Other gains or (losses). Attach Form 4797		4
5	Rental real estate, royalties, partnerships, S corporations, tru Schedule E		5
6	Farm income or (loss). Attach Schedule F		6
7	Unemployment compensation		7
8	Other income:		
a	Net operating loss	8a (
b	Gambling income	8b	
C	Cancellation of debt	8c	(2)
d	Foreign earned income exclusion from Form 2555	8d (
е	Taxable Health Savings Account distribution	8e	
f	Alaska Permanent Fund dividends	8f	
g	Jury duty pay	8g	
h	Prizes and awards	8h	
i	Activity not engaged in for profit income	8i	
j	Stock options	8j	
k	Income from the rental of personal property if you engaged in the rental for profit but were not in the business of renting such property	8k	
1	Olympic and Paralympic medals and USOC prize money (see instructions)	81	
m	Section 951(a) inclusion (see instructions)	8m	
n	Section 951A(a) inclusion (see instructions)	8n	1
0	Section 461(I) excess business loss adjustment	80	
p	Taxable distributions from an ABLE account (see instructions) .	8p	
Z	Other income. List type and amount ▶	8z	
9	Total other income. Add lines 8a through 8z		9
10	Combine lines 1 through 7 and 9. Enter here and on Form 10 1040-NR, line 8	40, 1040-SR, or	10

Par	Adjustments to Income			
11	Educator expenses		11	
12	Certain business expenses of reservists, performing artists, and fee-bofficials. Attach Form 2106	0	12	
13	Health savings account deduction. Attach Form 8889	,	13	
14	Moving expenses for members of the Armed Forces. Attach Form 3	903	14	
15	Deductible part of self-employment tax. Attach Schedule SE		15	
16	Self-employed SEP, SIMPLE, and qualified plans		16	
17	Self-employed health insurance deduction		17	
18	Penalty on early withdrawal of savings		18	
19a	Alimony paid		19a	
b	Recipient's SSN	- 11		
C	Date of original divorce or separation agreement (see instructions)			
20	IRA deduction		20	
21	Student loan interest deduction		21	
22	Reserved for future use		22	
23	Archer MSA deduction		23	
24	Other adjustments:			
a	Jury duty pay (see instructions)	4a		
b	Deductible expenses related to income reported on line 8k from	.4b		
C	Nontaxable amount of the value of Olympic and Paralympic medals and USOC prize money reported on line 81	24c		
d	Reforestation amortization and expenses	24d		
е	Repayment of supplemental unemployment benefits under the Trade Act of 1974	24e		
f	Contributions to section 501(c)(18)(D) pension plans	24f		
g	Contributions by certain chaplains to section 403(b) plans 2	24g		
h	Attorney fees and court costs for actions involving certain unlawful discrimination claims (see instructions)	4h		
i	Attorney fees and court costs you paid in connection with an award from the IRS for information you provided that helped the IRS detect tax law violations	24i		
j	Housing deduction from Form 2555	24j		
k	Excess deductions of section 67(e) expenses from Schedule K-1	4k	- 00	
Z	Other adjustments. List type and amount ▶	4z		
25	Total other adjustments. Add lines 24a through 24z		25	
26	Add lines 11 through 23 and 25. These are your adjustments to	income. Enter		
	here and on Form 1040 or 1040-SR, line 10, or Form 1040-NR, line		26	

SCHEDULE 2 (Form 1040)

Department of the Treasury Internal Revenue Service

Additional Taxes

► Attach to Form 1040, 1040-SR, or 1040-NR.

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

OMB No. 1545-0074

2021

Attachment
Sequence No. 02

Name(s) shown on Form 1040, 1040-SR, or 1040-NR

Your social security number

Pa	rt I Tax	
1	Alternative minimum tax. Attach Form 6251	1
2	Excess advance premium tax credit repayment. Attach Form 8962	2
3	Add lines 1 and 2. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 17.	3
Pa	other Taxes	
4	Self-employment tax. Attach Schedule SE	4
5	Social security and Medicare tax on unreported tip income. Attach Form 4137	
6	Uncollected social security and Medicare tax on wages. Attach Form 8919	
7	Total additional social security and Medicare tax. Add lines 5 and 6	7
8	Additional tax on IRAs or other tax-favored accounts. Attach Form 5329 if required	8
9	Household employment taxes. Attach Schedule H	9
10	Repayment of first-time homebuyer credit. Attach Form 5405 if required	10
11	Additional Medicare Tax. Attach Form 8959	11
12	Net investment income tax. Attach Form 8960	12
13	Uncollected social security and Medicare or RRTA tax on tips or group-term life insurance from Form W-2, box 12	13
14	Interest on tax due on installment income from the sale of certain residential lots and timeshares	14
15	Interest on the deferred tax on gain from certain installment sales with a sales price over \$150,000	15
16	Recapture of low-income housing credit. Attach Form 8611	16
	(cc	ontinued on page 2)

Part II Other Taxes (continued)

			DEPENDEN
17	Other additional taxes:		
a	Recapture of other credits. List type, form number, and amount ▶	17a	
b	Recapture of federal mortgage subsidy. If you sold your home in 2021, see instructions	17b	
C	Additional tax on HSA distributions. Attach Form 8889	17c	
d	Additional tax on an HSA because you didn't remain an eligible individual. Attach Form 8889	17d	
e	Additional tax on Archer MSA distributions. Attach Form 8853.	17e	
f	Additional tax on Medicare Advantage MSA distributions. Attach Form 8853	17f	
g	Recapture of a charitable contribution deduction related to a fractional interest in tangible personal property	17g	
h	Income you received from a nonqualified deferred compensation plan that fails to meet the requirements of section 409A	17h	A
i	Compensation you received from a nonqualified deferred compensation plan described in section 457A	17i	-
j	Section 72(m)(5) excess benefits tax	17 j	
k	Golden parachute payments	17k	
1	Tax on accumulation distribution of trusts	171	
m	Excise tax on insider stock compensation from an expatriated corporation	17m	100
n	Look-back interest under section 167(g) or 460(b) from Form 8697 or 8866	17n	
0	Tax on non-effectively connected income for any part of the year you were a nonresident alien from Form 1040-NR	170	
p	Any interest from Form 8621, line 16f, relating to distributions from, and dispositions of, stock of a section 1291 fund	17p	
q	Any interest from Form 8621, line 24	17q	
Z	Any other taxes. List type and amount ▶	17z	
18	Total additional taxes. Add lines 17a through 17z		18
19	Additional tax from Schedule 8812	, . ,	19
20	Section 965 net tax liability installment from Form 965-A	20	
21	Add lines 4, 7 through 16, 18, and 19. These are your total other and on Form 1040 or 1040-SR, line 23, or Form 1040-NR, line 23b		21

SCHEDULE 3 (Form 1040)

Additional Credits and Payments

OMB No. 1545-0074

Attachment Sequence No. 03

Department of the Treasury Internal Revenue Service ► Attach to Form 1040, 1040-SR, or 1040-NR.

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

Name(s) shown on Form 1040, 1040-SR, or 1040-NR

Your social security number

Par	Nonrefundable Credits		
1	Foreign tax credit. Attach Form 1116 if required		1
2	Credit for child and dependent care expenses from Form 2441 Form 2441	, line 11. Attach	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 nonrefundable credits:		
a	General business credit. Attach Form 3800	6a	
b	Credit for prior year minimum tax. Attach Form 8801	6b	
C	Adoption credit. Attach Form 8839	6c	
d	Credit for the elderly or disabled. Attach Schedule R	6d	
e	Alternative motor vehicle credit. Attach Form 8910	6e	
f	Qualified plug-in motor vehicle credit. Attach Form 8936	6f	
g	Mortgage interest credit. Attach Form 8396	6g	
h	District of Columbia first-time homebuyer credit. Attach Form 8859	6h	
i	Qualified electric vehicle credit. Attach Form 8834	6i	
j	Alternative fuel vehicle refueling property credit. Attach Form 8911	6j	
k	Credit to holders of tax credit bonds. Attach Form 8912	6k	
1	Amount on Form 8978, line 14. See instructions	61	
Z	Other nonrefundable credits. List type and amount	6z	
7	Total other nonrefundable credits. Add lines 6a through 6z		7
8	Add lines 1 through 5 and 7. Enter here and on Form 1040, 1040 line 20		8
		(C	ontinued on page 2)

Par	Other Payments and Refundable Credits		
9	Net premium tax credit. Attach Form 8962		9
10	Amount paid with request for extension to file (see instructions) .		10
11	Excess social security and tier 1 RRTA tax withheld		11
12	Credit for federal tax on fuels. Attach Form 4136		12
13	Other payments or refundable credits:		
a	Form 2439	13a	1,34 (%)
b	Oualified sick and family leave credits from Schedule(s) H and Form(s) 7202 for leave taken before April 1, 2021	13b	
C	Health coverage tax credit from Form 8885	13c	
d	Credit for repayment of amounts included in income from earlier years	13d	
е	Reserved for future use	13e	
f	Deferred amount of net 965 tax liability (see instructions)	13f	
g	Credit for child and dependent care expenses from Form 2441, line 10. Attach Form 2441	13g	
h	Qualified sick and family leave credits from Schedule(s) H and Form(s) 7202 for leave taken after March 31, 2021	13h	
Z	Other payments or refundable credits. List type and amount ▶	13z	
14	Total other payments or refundable credits. Add lines 13a through	13z	14
15	Add lines 9 through 12 and 14. Enter here and on Form 1040, 1040 line 31		15

Schedule 3 (Form 1040) 2021