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Your Federal Tax Return for
FREE!!

<b>1040</b>	-5	Department of the Treasury—Internal Rev U.S. Tax Return for S	venue Sen	Service (9	19) 2	<b>021</b>	1	OMB No. 1545	5-0074	IRS Use Onl	y—Do	not wri	te or staple	e in this space.
Filing Status		Single Head of household (HOH)		☐ Ma ☐ Qua	rried alifyin		w(	(er) (QW)		/arried fil	ing	sepa	arately	(MFS)
Check only one box.		ou checked the MFS box, enter ne if the qualifying person is a c							ed the	HOH or (	QW	box,	enter t	he child's
Your first name and middle initial				Last name							Your social security number			
If joint return,	spous	se's first name and middle initial	La	st name							Spo	ouse's	social se	ecurity numbe
Home addres	s (num	nber and street). If you have a P.O. I	oox,	see instri	uctions.					Apt. no.	1			on Campaign
City, town, or	post o	ffice. If you have a foreign address, a	lso c	complete	spaces	below.	Stat	te	ZIP c	ode	spo \$3	ouse if to go	f filing joi to this fu	intly, want
Foreign country name				Foreign province/state/county Foreign						ign postal code not char			nge your tax or  You Spouse	
		ring 2021, did you receive, st in any virtual currency?								of any	. 1	<b>•</b> [	Yes	□No
Standard Deduction		<b>neone can claim:</b> ☐ Yo Spouse itemizes on a sepa		s a dep te retur				Your spoι a dual-sta			ende	ent		
	Age	e/Blindness { You: Spouse:		Were b	orn b	efore J	Jar an	nuary 2, 1 uary 2, 19	957 957	☐ Are ☐ Is b				
Dependent (see instructions		First name Last name		<b>(2)</b> S	ocial sec	urity numb	oer	(3) Relationshi	p to	(4) ✓ if of Child tax of		1		uctions): ther dependents
If more than four dependents, see instructions and	·													
check here ►														
	1	Wages, salaries, tips, etc	. A	ttach F	orm(s	s) W-2						1		
Attach Schedule B	<b>2</b> a	Tax-exempt interest .	1	2a				<b>b</b> Taxable	e inte	erest .		2b		
if required.	<u>3a</u>	Qualified dividends	-   ;	3a			ı	<b>b</b> Ordina	y div	ridends		3b		
	4a	IRA distributions	4	4a			-	<b>b</b> Taxable	e am	ount .		4b		
	5a	Pensions and annuities		5a			ı	<b>b</b> Taxable	e am	ount .		5b		
	6a	Social security benefits .		6a			ı	<b>b</b> Taxable	e am	ount .		6b		
	7	Capital gain or (loss). Attach Schedule D if required. If not required, check here									7			
	8	Other income from Sche	dul	e 1, lin	e 10							8		
	9	Add lines 1, 2b, 3b, 4b, 5	5b, 6b, 7, and 8. This is your <b>total income</b> ▶							<b>•</b>	9			
	10	Adjustments to income from Schedule 1, line 26									10			
	11	Subtract line 10 from line	9.	This is	your	adjust	tec	d gross ir	com	ie	<b>•</b>	11		

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Standard Deduction See Standard	12a	Standard deduction or itemized deductions (from Schedule A)		
Deduction Chart on the last page of this form.	b	Charitable contributions if you take the standard deduction (see instructions)		
OT UIIS TOTTI.	C	Add lines 12a and 12b	12c	
	13	Qualified business income deduction from Form 8995 or Form 8995-A .	13	
	14	Add lines 12c and 13	14	
	15	<b>Taxable income.</b> Subtract line 14 from line 11. If zero or less, enter -0	15	
	16	Tax (see instructions). Check if any from:		
		<b>1</b> □ Form(s) 8814 <b>2</b> □ Form 4972 <b>3</b> □	16	
	17	Amount from Schedule 2, line 3	17	
	18	Add lines 16 and 17	18	
	19	19		
	20	Amount from Schedule 3, line 8	20	
	21	Add lines 19 and 20	21	
	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 <b>total tax</b>	24	
<b>25</b> Fee		Federal income tax withheld from:		
	а	Form(s) W-2		
	b	Form(s) 1099		
	С	Other forms (see instructions)		
	d	Add lines 25a through 25c	25d	
	26	2021 estimated tax payments and amount applied from 2020 return	26	
If you have a qualifying child, attach Sch. EIC.	27a	Earned income credit (EIC)		
	b	Nontaxable combat pay election . 27b		
	С	Prior year (2019) earned income . 27c		
	28	Refundable child tax credit or additional child tax credit from Schedule 8812		

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American opportunity credit from Form 8863, line 8 .

Recovery rebate credit. See instructions . . . . .

Amount from Schedule 3, line 15 . . . . . . . .

and refundable credits . . . . . . . . . .

Add lines 27a and 28 through 31. These are your total other payments

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

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Refund	34	If line 33 is more that amount you <b>overpaid</b>	is the <b>3</b> 4	4							
Direct deposit? See instructions.	35a	Amount of line 34 you check here	ched, ▶ □ 35	a							
	▶b	Routing number	Savings								
	►d	Account number									
	36	Amount of line 34 ye			-	36					
Amount You Owe	37	<b>Amount you owe.</b> S pay, see instructions			line 24. For 6		ow to . ► 37	7			
	38	Estimated tax penalty	(see instru	uctions) .		38					
Third Party Designee  Do you want to allow another person to d instructions			person to dis		turn with the IRS	Complete be al identification (PIN)					
Sign Here	my kr	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.									
Joint return? See instructions. Keep a copy for your records.		ur signature	Date	Your occupation			If the IRS sent you an Identity Protection PIN, enter it here (see inst.)				
	Spouse's signature. If a joint return, <b>both</b> must sign.			Date	Spouse's occupa	ation		If the IRS sent your spouse an Identity Protection PIN, enter it here (see inst.)			
	Phone no.			Email address	5	'					
Paid Preparer Use Only	Pro	eparer's name	Preparer's signature			Date	PTIN	Check if:  Self-employed			
	Fir	m's name ▶	Phone no	Phone no.							
	Fir	m's address ▶	Firm's Ell	Firm's EIN ▶							
Go to www.irs	gov/F	orm1040SR for instructions and	the latest info	ormation.				Form <b>1040-SR</b> (2021)			