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Form **1040**

Department of the Treasury—Internal Revenue Service

U.S. Individual Income Tax Return

OMB No. 1545-0074

20XX

IRS Use Only—Do not write or staple in this space.

Your first name and middle initial

Last name

Your social security number

XXXXXXXXXXXXX X

XXXXXXXXXXXXXXXXXXXXX

999999999

If joint return, spouse's first name and middle initial

Last name

Spouse's social security number

XXXXXXXXXXXXX X

XXXXXXXXXXXXXXXXXXXXX

999999999

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

Apt. no.

Taxpayer Date of Death

XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX

XXXXX

01/01/01

City, town or post office. If you have a foreign address, also complete spaces below.

State

ZIP code

Spouse's Date of Death

XXXXXXXXXXXXXXXXXXXXX

XX

9999999999

01/01/01

Foreign country name

Foreign province/state/county

Foreign postal code

XXXXXXXXXXXXXXXXXXXXX

XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX

9999999999999999

Filing Status

Standard Deduction - Someone can claim:

Presidential Election Campaign

Check only one box.

☒ Single

☒ Married filing jointly

☒ Married filing separately (MFS)

☒ Head of household (HOH)

☒ Qualifying surviving spouse (QSS)

☒ You as a dependent

☒ Your spouse as a dependent

☒ Spouse itemizes on a separate return or you were a dual-status alien

Age/Blindness

Born before 1/2/1958:

Blind:

☒ You

☒ Spouse

☒ You

☒ Spouse

Check here if you, or your spouse if filing jointly, want \$3 to go to this fund. Checking a box below will not change your tax or refund.

If you checked the MFS box, enter the name of your spouse. If you checked the HOH or QSS box, enter the child's name if the qualifying person is a child but not your dependent:

XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX

Digital Assets

At any time during 20XX, did you: (a) receive (as a reward, award, or payment for property or services); or (b) sell, exchange, gift, or otherwise dispose of a digital asset (or a financial interest in a digital asset)? (See instructions.)

☒ Yes ☒ No

Dependents (see instructions):

(1) First name

Last name

(2) Social security number

(3) Relationship to you

(4) Check the box if qualifies for (see instructions):

Child tax credit

Credit for other dependents

If more than four dependents, see instructions and check here ☒

XXXXXXXXXXXXX

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999999999

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Income

1a Total amount from Form(s) W-2, box 1 (see instructions)

1a 999,999,999

Attach Form(s) W-2 here. Also attach Forms W-2G and 1099-R if tax was withheld.

b Household employee wages not reported on Form(s) W-2

1b 999,999,999

c Tip income not reported on line 1a (see instructions)

1c 999,999,999

d Medicaid waiver payments not reported on Form(s) W-2 (see instructions)

1d 999,999,999

e Taxable dependent care benefits from Form 2441, line 26

1e 999,999,999

f Employer-provided adoption benefits from Form 8839, line 29

1f 999,999,999

g Wages from Form 8919, line 6

1g 999,999,999

h Other earned income (see instructions)

1h 999,999,999

i Nontaxable combat pay election (see instructions)

1i 999,999,999

z Add lines 1a through 1h

1z 999,999,999

Attach Sch. B if required.

2a Tax-exempt interest

2a 999,999,999

b Taxable interest

2b 999,999,999

3a Qualified dividends

3a 999,999,999

b Ordinary dividends

3b 999,999,999

4a IRA distributions

4a 999,999,999

b Taxable amount

4b 999,999,999

5a Pensions and annuities

5a 999,999,999

b Taxable amount

5b 999,999,999

6a Social sec. ben.

6a 999,999,999

b Taxable amount

6b 999,999,999

Standard Deduction for –

c If you elect to use the lump-sum election method, check here (see instructions)

☒

7 Capital gain or (loss). Attach Schedule D if required.

☒

7 999,999,999

8 Other income from Schedule 1, line 10

8 999,999,999

9 Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your **total income**

9 999,999,999

10 Adjustments to income from Schedule 1, line 26

10 999,999,999

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

11 999,999,999

12 **Standard deduction or itemized deductions** (from Schedule A)

12 999,999,999

13 Qualified business income deduction from Form 8995 or Form 8995-A

13 999,999,999

14 Add lines 12 and 13

14 999,999,999

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

15 999,999,999

This is your **taxable income**

15 999,999,999

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

Form 1040 (20XX)