

Sample 1040 Form Answers

Directions: Use the information from the W2 to complete the 1040 for Billie Does.

Form 1040	Department of the Treasury—Internal Revenue Service (99)	2021	OMB No. 1545-0074	IRS Use Only—Do not write or staple in this space.
U.S. Individual Income Tax Return				
Filing Status <input type="checkbox"/> Single <input type="checkbox"/> Married filing jointly <input type="checkbox"/> Married filing separately (MFS) <input type="checkbox"/> Head of household (HOH) <input type="checkbox"/> Qualifying widow(er) (QW) Check only one box. If you checked the MFS box, enter the name of your spouse. If you checked the HOH or QW box, enter the child's name if the qualifying person is a child but not your dependent ▶				
Your first name and middle initial Billie J.		Last name Does		Your social security number 1 2 3 4 5 6 7 8 9
If joint return, spouse's first name and middle initial		Last name		Spouse's social security number
Home address (number and street). If you have a P.O. box, see instructions. 6101 N. America Ave.				Presidential Election Campaign 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. <input type="checkbox"/> You <input type="checkbox"/> Spouse
City, town, or post office. If you have a foreign address, also complete spaces below. Belton, MO 64012			Apt. no.	
State MO			ZIP code	
Foreign country name			Foreign province/state/county	
Foreign postal code				
At any time during 2021, did you receive, sell, exchange, or otherwise dispose of any financial interest in any virtual currency? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
Standard Deduction Someone can claim: <input type="checkbox"/> You as a dependent <input type="checkbox"/> Your spouse as a dependent <input type="checkbox"/> Spouse itemizes on a separate return or you were a dual-status alien				
Age/Blindness You: <input type="checkbox"/> Were born before January 2, 1957 <input type="checkbox"/> Are blind Spouse: <input type="checkbox"/> Was born before January 2, 1957 <input type="checkbox"/> Is blind				
Dependents (see instructions):				
If more than four dependents, see instructions and check here ▶ <input type="checkbox"/>				
(1) First name	Last name	(2) Social security number	(3) Relationship to you	(4) <input checked="" type="checkbox"/> if qualifies for (see instructions): Child tax credit
				Credit for other dependents
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
1 Wages, salaries, tips, etc. Attach Form(s) W-2				1 39,027
2a Tax-exempt interest	2a	b Taxable interest	2b	
3a Qualified dividends	3a	b Ordinary dividends	3b	
4a IRA distributions	4a	b Taxable amount	4b	
5a Pensions and annuities	5a	b Taxable amount	5b	
6a Social security benefits	6a	b Taxable amount	6b	
7 Capital gain or (loss). Attach Schedule D if required. If not required, check here ▶ <input type="checkbox"/>				7
8 Other income from Schedule 1, line 10				8
9 Add lines 1, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income				9 39,027
10 Adjustments to income from Schedule 1, line 26				10 0
11 Subtract line 10 from line 9. This is your adjusted gross income				11 39,027
12a Standard deduction or itemized deductions (from Schedule A)		12a 12,550		
b Charitable contributions if you take the standard deduction (see instructions)		12b 0		
c Add lines 12a and 12b				12c 12,550
13 Qualified business income deduction from Form 8995 or Form 8995-A				13
14 Add lines 12c and 13				14 12,550
15 Taxable income. Subtract line 14 from line 11. If zero or less, enter -0-				15 26,477

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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 2,978
17	Amount from Schedule 2, line 3	17
18	Add lines 16 and 17	18
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
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 2,978
25	Federal income tax withheld from:	
a	Form(s) W-2	25a 3,125
b	Form(s) 1099	25b
c	Other forms (see instructions)	25c
d	Add lines 25a through 25c	25d 3,125
26	2021 estimated tax payments and amount applied from 2020 return	26
27a	Earned income credit (EIC) Check here if you were born after January 1, 1998, and before January 2, 2004, and you satisfy all the other requirements for taxpayers who are at least age 18, to claim the EIC. See instructions <input type="checkbox"/>	27a
b	Nontaxable combat pay election	27b
c	Prior year (2019) earned income	27c
28	Refundable child tax credit or additional child tax credit from Schedule 8812	28
29	American opportunity credit from Form 8863, line 8	29
30	Recovery rebate credit. See instructions	30
31	Amount from Schedule 3, line 15	31
32	Add lines 27a and 28 through 31. These are your total other payments and refundable credits	32
33	Add lines 25d, 26, and 32. These are your total payments	33 3,125
Refund	34 If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid	34 147
35a	Amount of line 34 you want refunded to you . If Form 8888 is attached, check here <input type="checkbox"/>	35a 147
b	Routing number	c Type: <input type="checkbox"/> Checking <input type="checkbox"/> Savings
d	Account number	
36	Amount of line 34 you want applied to your 2022 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 0
38	Estimated tax penalty (see instructions)	38
Third Party Designee	Do you want to allow another person to discuss this return with the IRS? See instructions <input type="checkbox"/> Yes. Complete below. <input type="checkbox"/> No	
	Designee's name	Phone no. Personal identification number (PIN)
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	Date	Your occupation
Spouse's signature. If a joint return, both must sign.	Date	Spouse's occupation
Phone no.	Email address	
Paid Preparer Use Only	Preparer's name	Preparer's signature
	Firm's name	Date
	Firm's address	PTIN
		Check if: <input type="checkbox"/> Self-employed
		Phone no.
		Firm's EIN

If you have a qualifying child, attach Sch. EIC.

Direct deposit? See instructions.

Joint return? See instructions. Keep a copy for your records.