

Note: The draft you are looking for begins on the next page.

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Almost every form and publication has a page on IRS.gov with a friendly shortcut. For example, the Form 1040 page is at IRS.gov/Form1040; the Pub. 501 page is at IRS.gov/Pub501; the Form W-4 page is at IRS.gov/W4; and the Schedule A (Form 1040/SR) page is at IRS.gov/ScheduleA. If typing in a link above instead of clicking on it, be sure to type the link into the address bar of your browser, not a Search box.

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If you have comments on reducing paperwork and respondent (filer) burden, with respect to draft or final forms, please respond to the relevant information collection through the Federal Register process; for more info, click here.

E 1040	-S	Department of the Treasury—Internal Reversity U.S. Tax Return for S	nue Serv enio i	ice (99)	20	21	OMB No. 1545-0	0074	IRS Use Only-	–Do not v	write or sta _l	ple in this space.
Filing Status		Single Head of household (HOH)		Quali		/idow	(er) (QW)		arried filir			
Check only one box.		ou checked the MFS box, enter ne if the qualifying person is a cl						d the I	HOH or Q	W box	k, enter	the child's
Your first nam			Last na							Your s	ocial sec	curity number
If joint return,	spous	se's first name and middle initial	Last na	ame		Δ	S			Spouse	's social s	security number
Home address	s (num	nber and street). If you have a P.O. be	ox, see	instruct	tions.			7	Apt. no.			ction Campaign
City, town, or post office. If you have a foreign address, also complete spaces below. State ZIP code						Check here if you, or your spouse if filing jointly, want \$3 to go to this fund. Checking a box below will						
Foreign count	ry nan	ne	Fo	reign pr	ovince/st	ate/cou	nty Fo	reign p	ostal code		ange you You	_
		ring 2021, did you receive, st in any virtual currency?	sell, e		_		wise dispo		any	•	☐ Yes	□No
Standard Someone can claim: ☐ You as a dependent ☐ Your spouse as a dependent ☐ Spouse itemizes on a separate return or you were a dual-status alien Age/Blindness { You: ☐ Were born before January 2, 1957 ☐ Are blind Spouse: ☐ Was born before January 2, 1957 ☐ Is blind												
Dependents (see instructions)		First name Last name		(2) Soci	al security	number	(3) Relationship you	to	(4) ✓ if qu Child tax cre		1 '	structions):
If more than four dependents, see instructions and check here ▶												
	1	Wages, salaries, tips, etc.	Δtta	ch Fo	rm(s) M	I-2				1		
Attach		Tax-exempt interest .	2a		iiii(3) v		b Taxable	intere	 est	21		
Schedule B if required.		Qualified dividends	3a				b Ordinary			31		
<i>J</i>	4a	IRA distributions	4a				b Taxable	amoı	unt	4	o	
	5a	Pensions and annuities	5a				b Taxable	amoı	unt	5l	o	
	6a	Social security benefits .	6a				b Taxable	amoı	unt	6l	o	
7 Capital gain or (loss). Attach Schedule D if required. If not requ				•] _7	,						
	8	Other income from Schedule 1, line 10						. 8	3			
	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income ▶					9)				
	10	Adjustments to income from Schedule 1, line 26						10	ס			
	11	Subtract line 10 from line 9. This is your adjusted gross income ▶ 1							<u> 1</u>	1		

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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)			
Of this form.	c	Add lines 12a and 12b	12c		
	13	13			
	14	Add lines 12c and 13	14		
	15	Taxable income. Subtract line 14 from line 11. If zero or less, enter -0	15		
	16	Tax (see instructions). Check if any from:			
		1 □ Form(s) 8814 2 □ Form 4972 3 □	16		
	17	Amount from Schedule 2, line 3	17		
	18	Add lines 16 and 17	18		
	 Nonrefundable child tax credit or credit for other dependents from Schedule 8812				
	21 Add lines 19 and 20				
	22 Subtract line 21 from line 18. If zero or less, enter -0				
	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:			
	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	Check here if you had not reached the age of 19 by December 31, 2021, and satisfy all other	-		
	h	requirements for claiming the EIC. See instructions ► ☐ Nontaxable combat pay election . 27b			
		· , — — — — — — — — — — — — — — — — — —			
	28	Prior year (2019) earned income . 27c Refundable child tax credit or additional child tax credit from Schedule 8812			

Go to www.irs.gov/Form1040SR for instructions and the latest information.

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American opportunity credit from Form 8863, line 8 $\,$.

Recovery rebate credit. See instructions

Amount from Schedule 3, line 15

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 overpaid	•	subtract lii	ne 24 from lir	ne 33. This	is the 34			
	35a	Amount of line 34 you check here	u want ref	unded to	you. If Form .	8888 is atta	iched, ▶ □ 35 a	1		
Direct deposit? See Instructions.	_	Routing number								
	36	Amount of line 34 ye estimated tax		pplied to		36				
Amount You Owe	37	Amount you owe. Subtract line 33 from line 24. For details on how to pay, see instructions						1		
	38	Estimated tax penalty	(see instru	uctions) .		38				
Third Party Designee	ins Des nar	o you want to allow another structions		Phone no.		al identification r (PIN)	N)			
Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based of which preparer has any knowledge.										
Joint return?		Your signature		Date	Your occupation			If the IRS sent you an Identity Protection PIN, enter it here (see inst.)		
See instructions. Keep a copy for your records.	Spouse's signature. If a joint return, both must sign.			Date	Spouse's occupa	tion		If the IRS sent your spouse an Identity Protection PIN, enter it here (see inst.)		
	Pho	one no.		Email address			•			
Paid Proparer	Pre	eparer's name	Preparer's si	gnature		Date	PTIN	Check if: Self-employed		
Preparer Use Only	Firm's name ▶						Phone no.	Phone no.		
USE OILLY	Firm's address ▶						Firm's EIN	Firm's EIN ▶		
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Standard Deduction Chart*

Add the number of boxes checked in the "Age/Blindness" section of Standard Deduction on page 1 ▶

IF your filing status is	AND the number of boxes checked is	THEN your standard deduction is
Single	DAET AC	\$14,250
$ \boldsymbol{\nu}$	RAF 2 AS	15,950 \$26,450
Married	2	27,800
filing jointly	Idlict 370	29,150
		30,500
Qualifying	1 7	\$26,450
widow(er)	$\frac{2}{\sqrt{2}}$	27,800
Head of		\$20,500
household	2	22,200
	1	\$13,900
Married filing	2	15,250
separately**	3	16,600
	4	17,950

^{*}Don't use this chart if someone can claim you (or your spouse if filing jointly) as a dependent, your spouse itemizes on a separate return, or you were a dual-status alien. Instead, see instructions.

Go to www.irs.gov/Form1040SR for instructions and the latest information.

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^{**}You can check the boxes for your spouse if your filing status is married filing separately and your spouse had no income, isn't filing a return, and can't be claimed as a dependent on another person's return.