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03																																																																																		03				
04																																																																																		04				
05	Form 1040 (20XX)																														Page 2																																																			05				
06	Name XXX																														SSN 999999999																																																			06				
07	Tax and Credits		16		Tax (see instructions). Check if any from Form(s): 1 <input checked="" type="checkbox"/> 8814 2 <input checked="" type="checkbox"/> 4972																																																																							07										
08					3 <input checked="" type="checkbox"/> XXXXXXXXXX 999,999,999																														16 999,999,999																																																			08
09			17		Amount from Schedule 2, line 3																														17 999,999,999																																																			09
10			18		Add lines 16 and 17																														18 999,999,999																																																			10
11			19		Child tax credit or credit for other dependents from Schedule 8812																														19 999,999,999																																																			11
12			20		Amount from Schedule 3, line 8																														20 999,999,999																																																			12
13			21		Add lines 19 and 20																														21 999,999,999																																																			13
14			22		Subtract line 21 from line 18. If zero or less, enter -0-																														22 999,999,999																																																			14
15			23		Other taxes, including self-employment tax, from Schedule 2, line 21																														23 999,999,999																																																			15
16			24		Add lines 22 and 23. This is your total tax																														24 999,999,999																																																			16
17	Payments		25		Federal income tax withheld from:																																																																							17										
18			a		Form(s) W-2 25a 999,999,999																																																																							18										
19			b		Form(s) 1099 25b 999,999,999																																																																							19										
20			c		Other forms (see instructions) 25c 999,999,999																																																																							20										
21			d		Add lines 25a through 25c 25d 999,999,999																																																																							21										
22			26		20XX estimated tax payments and amount applied from 20XX return 26 999,999,999																																																																							22										
23	If you have a qualifying child, attach Sch. EIC.		27		Earned income credit (EIC) 27 999,999,999																																																																							23										
24			28		Additional child tax credit from Schedule 8812 28 999,999,999																																																																							24										
25			29		American opportunity credit from Form 8863, line 8 29 999,999,999																																																																							25										
26			30		Reserved for future use 30																																																																							26										
27			31		Amount from Schedule 3, line 15 31 999,999,999																																																																							27										
28			32		Add lines 27, 28, 29, and 31. These are your total other payments and refundable credits 32 999,999,999																																																																							28										
29			33		Add lines 25d, 26, and 32. These are your total payments 33 999,999,999																																																																							29										
30	Refund		34		If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid 34 999,999,999																																																																							30										
31			35a		Amount of line 34 you want refunded to you . If Form 8888 is attached, check here <input checked="" type="checkbox"/> 35a 999,999,999																																																																							31										
32			b		Routing number 999999999 c Type: <input checked="" type="checkbox"/> Checking <input checked="" type="checkbox"/> Savings																																																																							32										
33	Direct deposit?		d		Account number 9999999999999999																																																																							33										
34	See instructions.		36		Amount of line 34 you want applied to your 20XX estimated tax 36 999,999,999																																																																							34										
35			37		Subtract line 33 from line 24. This is the amount you owe . 37 999,999,999																																																																							35										
36	Amount You Owe				For details on how to pay, go to www.irs.gov/Payments or see instructions																																																																							36										
37			38		Estimated tax penalty (see instructions) 38 999,999,999																																																																							37										
38																																																																												38										
39	Third Party Designee				Do you want to allow another person to discuss this return with the IRS? See instructions <input checked="" type="checkbox"/> Yes . Complete below. <input checked="" type="checkbox"/> No																																																																							39										
40					Designee's name Phone no. Personal identification																																																																							40										
41					XX 999-999-9999 number (PIN) 99999																																																																							41										
42																																																																												42										
43	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.																																																																							43										
44																																																																												44										
45	Joint return?				Your signature Date If the IRS sent you an Identity Protection PIN, enter it here																																																																							45										
46	See instructions.				XX (see instr.) 999999																																																																							46										
47	Keep a copy for your records.				Spouse's signature. If a joint return, both must sign. Date If the IRS sent your spouse an Identity Protection PIN, enter it here																																																																							47										
48					XX (see instr.) 999999																																																																							48										
49																																																																												49										
50					Your occupation XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX Spouse's occupation XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX																																																																							50										
51																																																																												51										
52					Phone no. 999-999-9999 Email address XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX																																																																							52										
53	Paid				Preparer's name XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX																																																																							53										
54																																																																												54										
55	Preparer				Preparer's signature Date PTIN Check if:																																																																							55										
56					XX 01/01/10 999999999999 <input checked="" type="checkbox"/> Self-employed																																																																							56										
57	Use Only				Firm's name XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX Phone no. 999-999-9999																																																																							57										
58																																																																												58										
59					XX																																																																							59										
60					Firm's address XXXXXXXXXXXXXXXXXXXXXXX XX XXXXXXXXXX Firm's EIN 9999999999																																																																							60										
61					Go to www.irs.gov/Form1040 for instructions and the latest information. Form 1040 (20XX)																																																																							61										
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