		Î.	E	7		
S. Individual Inc	come Tax Return	2020	OMB No. 1545	0074 IPS (Inc. O.	. D	
Single Married filting	jointly Married filing se	paralely (MFS)	Mand of harman and	17.	27	it write or staple in this space ow(er) (QW)
If you checked the MFS box, enter the person is a child but not your depends	name of your spouse. If you checke	d the HOH or QW box.	enter the child's name if	the qualifying		
name and middle initial Last name						
Momas J Price					Your social security number	
joint return, spouse's first name and middle initial	Last name				.,	er and the same of
Home address (number and street) if you have a PO box 3916 N Potsdam Ave PM	see instructions R 1969			Apt no		Presidential Election Campai Check here if you, or your
City town or post office if you have a foreign address, als		State	120		_	spouse # filing parity want \$3
Sioux Falls	and the spaces below	SD		ZIP code 57104		to go to this fund Checking a box below will not change
Foreign country name Foreign	gn province/state/county	1 00		Foreign postal code		your tax or refund.
		(You Spou	
at anytime during 2020, did you receive, sell,	send, exchange, or otherwi	se acquire financi	al interest in any v	rtual currency?	_	Yes X
standard Someone can claim: You		Outre as a dependent		- Control of		ies n
Deduction Spouse demizes on a separate re	eturn or you were a dual-status alien	rich galde en ind belek. L				
Age/Blindness You: Were born before Jan.	uary 2, 1956 Are blind	Spouse:	Was born before Ja	nuary 2 1956	is bir	nd
Dependents (see instructions):	dents (see instructions): (2) Social security (3) Relationship				4) if qualifies for (see instructions)	
(1) First name Lad name humber to you				Child tax on		Credit for other dependents
own four						
nd dieds						
m						
Attach 1 Wages, salanes, tips, etc Atta	-ED: 0 0				1	30,80
Sch B if Za Tax-exempt interest		11 b Taxable in	terest		2b	
required 3a Qualified dividends 3a 3,086 b Ordinary dividends					3b	3,09
4a IRA distributions 4a Taxable amount				y [4b	
	5a	b Taxable ar		, I	5b	
Standard 6a Soc. sec. ben. 6a b Taxable amount					6b	
Deduction for 7 Capital gain or (loss) Attach Schedule D if required, if not required, check here Single of R Other income from Schedule 1 line 9				▶ 📗	7	9,69
Maried Brig					8	
9 Add lines 1, 2b, 3b, 4b, 5b, 6b, 7, and 8 This is your total income					9	43,59
- Marred Bing 10 Adjustments to income:			Las I			
a From Schedule 1, line 22			10a	0		
b Charitable contributions if you take the standard deduction See instructions 10b						
result of household. C Add line 10a and 10b. These are your total adjustments to income household. 11 Subtract line 10c from line 9. This is your adjusted gross income					10c	40.50
110,000				•	11	43,59
12 Standard deduction or itemized deductions (from Schedule A)					12	12,40
Standard 13 Guarries Ficuries deducation. Adjacts Forth 6995-A					13	10.40
Ontactive. 14 Add lines 12 and 13 15 Taxable income. Subtract line 14 from line 11 If zero or less, enter -0-						
me imbudions.				-	15	12,40