

Filing Status: Single, Married filing jointly, Married filing separately (MFS), Head of household (HOH), Qualifying widow(er) (QW). Includes instructions for MFS, HOH, and QW.

Personal information section: Your first name and middle initial (IRENE D), Last name (ARHOLEKAS), Your social security number (089-60-6408), Spouse's social security number.

Home address section: Home address (22-39 28TH STREET), City (ASTORIA), State (NY), ZIP code (11105). Includes Presidential Election Campaign checkbox.

At any time during 2020, did you receive, sell, send, exchange, or otherwise acquire any financial interest in any virtual currency? Yes/No.

Standard Deduction: 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, 1956, Are blind; Spouse: Was born before January 2, 1956, Is blind.

Dependents table with columns: (1) First name, Last name, (2) Social security number, (3) Relationship to you, (4) Child tax credit, Credit for other dependents. Includes entry for AMIRA M NAMMARI.

Main income and deduction table with lines 1 through 15. Includes sub-rows 2a, 3a, 4a, 5a, 6a, 10a, 10b, 10c. Total income: 84,299. Taxable income: 65,649.

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	8,786.
17	Amount from Schedule 2, line 3	17	
18	Add lines 16 and 17	18	8,786.
19	Child tax credit or credit for other dependents	19	2,000.
20	Amount from Schedule 3, line 7	20	
21	Add lines 19 and 20	21	2,000.
22	Subtract line 21 from line 18. If zero or less, enter -0-	22	6,786.
23	Other taxes, including self-employment tax, from Schedule 2, line 10	23	0.
24	Add lines 22 and 23. This is your total tax	24	6,786.
25	Federal income tax withheld from:		
a	Form(s) W-2	25a	6,898.
b	Form(s) 1099	25b	
c	Other forms (see instructions)	25c	
d	Add lines 25a through 25c	25d	6,898.
26	2020 estimated tax payments and amount applied from 2019 return	26	
27	Earned income credit (EIC) No	27	
28	Additional child tax credit. Attach 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 13	31	
32	Add lines 27 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	6,898.
34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid	34	112.
35a	Amount of line 34 you want refunded to you . If Form 8888 is attached, check here <input type="checkbox"/>	35a	112.
▶ b	Routing number 0 2 1 4 0 7 9 1 2 ▶ c Type: <input checked="" type="checkbox"/> Checking <input type="checkbox"/> Savings		
▶ d	Account number 7 0 4 0 2 6 9 9 5 3		
36	Amount of line 34 you want applied to your 2021 estimated tax	36	
37	Subtract line 33 from line 24. This is the amount you owe now	37	
Note: Schedule H and Schedule SE filers, line 37 may not represent all of the taxes you owe for 2020. See Schedule 3, line 12e, and its instructions for details.			
38	Estimated tax penalty (see instructions)	38	

- If you have a qualifying child, attach Sch. EIC.
- If you have nontaxable combat pay, see instructions.

Refund

Direct deposit? See instructions.

Amount You Owe

For details on how to pay, see instructions.

Third Party Designee

Do you want to allow another person to discuss this return with the IRS? See instructions Yes. Complete below. 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 TEACHER	If the IRS sent you an Identity Protection PIN, enter it here (see inst.)
Spouse's signature. If a joint return, both must sign.	Date	Spouse's occupation	If the IRS sent your spouse an Identity Protection PIN, enter it here (see inst.)

Phone no. _____ Email address _____

Paid Preparer Use Only

Preparer's name MOHAMMED A QUAYYUM	Preparer's signature MOHAMMED A QUAYYUM	Date 04/23/2021	PTIN P00534569	Check if: <input type="checkbox"/> Self-employed
Firm's name ▶ SNS ACCOUNTING & GENERAL SERVICES	Phone no.			
Firm's address ▶ 3542 31ST ST ASTORIA NY 11106	Firm's EIN ▶ 11-3533912			