	Depa	rtment of the Treasury - Internal Revenue Service	<b>28</b>												
ੂ 1040		6. Individual Income Tax Re	(99	9)	2020		OMB	No. 1545-0074	IRS Use	only - D	o nat w	rite or staple	in this space.		
Filing Status	Пе	ingle Married filing jointly	Married filing	cana	rately (MES)	Head	of h	ousahold (H	ж П	Dualifyir	a wide	w/ar\ /OV	ın.		
Check only		checked the MFS box, enter the name of	_	-	,			,	_	-	-	. , .	,		
one box.	-	d but not your dependent. MARC	-	-			u	r box, critisi ti	ic ciliu 5 i	igine ii	ine que	unying poi	301113		
Your first nam			Last name							ΤY	our so	ial securi	ty number		
GRETCHEN	я т		WHITME	P.							and section	One ordered when well and the same	and the same of th		
		e's first name and middle initial	Last name							Sr	ouse's	social se	curity number		
,	•										To the second se	Carried Committee on the Committee of	And the second second second second		
Home address	s (num	ber and street). If you have a P.O. b	ox, see inst	ructi	ons.				Apt. no.				on Campaign		
The second of th	The same of the	and the state of t						1				ere if you, o			
City, town, or	post o	office. If you have a foreign address,	also comple	ete s	paces below		T	State ZIP co	ode	st	to thi	s fund, Che	tly, want \$3 to ecking a box		
LANSING						MI48911				be	w wols		ige your tax oi		
Foreign count	Fore	Foreign province/state/county Foreign postal code						re	fund.	X You	Spouse				
	,			3 1			•			_		24 100			
At any time dur	ing 20	20, did you receive, sell, send, exch	nange, or oth	herw	ise acquire a	ny finan	cial	interest in a	nv virtua	LUrrer	ncv?	☐ Yes	X No		
		one can claim: You as a depend													
Deduction		pouse itemizes on a separate return				-									
_		•													
Age/Blindness	You:	Were born before January 2, 1956	Are blin	nd	Spouse:	Wast	orn	before Janua	ry 2, 1956		Is blin	d			
Dependents (see instructions): (2) Social security number (3) Relationship to you											(4) √ if qualifies for (see instructions):				
If more than four (1) F	irst na	me Last name					ı .			Child	tax cre	dit Credit f	or other dependents		
depend-								The state of the s	terminas prompti plata <b>m</b> atel printer material material and material printer						
ents, see instr. and															
check here	-														
					4										
	_1_	Wages, salaries, tips, etc. Attach Fe	orm(s) W-2			******		STI	MT 1	1		13	7,379.		
Attach	2a	Tax-exempt interest 22	<u> </u>		0,315.	<b>b</b> Taxa	ble ir	nterest		2b			8.		
Sch. B if	3a	Qualified dividends 3	a	1	2,910.	<b>b</b> Ordin	nary	dividends		3b		1	3,372.		
required.	4a	IRA distributions 42	a			<b>b</b> Taxa	ble a	mount	*****	4b					
	5a	Pensions and annuities 5a	3			<b>b</b> Taxal	ble a	mount		5b					
	6a	Social security benefits6				<b>b</b> Taxal	ble a	mount		6b					
Standard	7	Capital gain or (loss). Attach Sched	dule D if requ	uired	. If not requi	ed, che	ck h	ere	▶∐	7			1,500.		
Deduction for -	8	Other income from Schedule 1, line 9													
<ul> <li>Single or Married filing separately,</li> </ul>	9								9		14:	9,259.			
\$12,400	10	Adjustments to income:								14 TOPRIS.					
<ul> <li>Married filing jointly or</li> </ul>	а	a From Schedule 1, line 22 10a 10a 150 Charitable contributions if you take the standard deduction. See instr. 10b 150													
Qualifying widow(er),	b							150.							
\$24,800	c	dd lines 10a and 10b. These are your total adjustments to income								10c			150.		
<ul> <li>Head of household,</li> </ul>	11	Subtract line 10c from line 9. This is your adjusted gross income							11			9,109.			
\$18,650	12								12		1:	2,400.			
<ul> <li>If you checked any box under</li> </ul>	13 Qualified business income deduction. Attach Form 8995 or Form 8995-A  14 Add lines 12 and 13						13			92.					
Standard Deduction,								14	_	12	2,492.				
see instructions.	15	Taxable income. Subtract line 14	from line 11.										5 617.		
		If zero or lose on													

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LHA For Disclosure, Privacy Act, and Paperwork Reduction Act Notice, see separate instructions.

Form 1040 (2020)

Form 1040 (2020)	GRE	TCHEN E. WHITMER		Page 2
STMT 4	16	Tax (see Instructions). Check if any from Form(s): 1 8814 2 4972 3	16	25,706.
	17	Amount from Schedule 2, line 3	17	
	18	Add lines 16 and 17	18	25,706.
	19	Child tax credit or credit for other dependents	19	500.
	20	Amount from Schedule 3, line 7	20	283.
	21	Add lines 19 and 20	21	783.
	22	Subtract line 21 from line 18. If zero or less, enter -0-	22	24,923.
	23	Other taxes, including self-employment tax, from Schedule 2, line 10	23	720.
	24	Add lines 22 and 23. This is your total tax	24	25,643.
	25	Federal income tax withheld from:	35.6	
	а	Form(s) W-2 SEE STATEMENT 5 25a 22,847.		
	b	Form(s) 1099		
	С	Other forms (see instructions)	name.	
	d	Add lines 25a through 25c	25d	22,847.
If you have a qualifying child, attach Sch. EIC. If you have nontaxable combat pay, see instructions	26	2020 estimated tax payments and amount applied from 2019 return STATEMENT 6	26	5,240.
	27	Earned income credit (EIC)	ESTRE?	
	28	Additional child tax credit. Attach Schedule 8812 28		
	29	American opportunity credit from Form 8863, line 8		
	30	Recovery rebate credit. See instructions 30		
	31	Amount from Schedule 3, line 13		
	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	28,087.
Refund	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid	34	2,444.
	35a	Amount of line 34 you want refunded to you. If Form 8888 is attached check here	35a	
Direct deposit? See Instructions.	<b>▶</b> b	Routing number C Type: Checking Savings	ALL MARKET	
	<b>▶</b> d	Account number	Series .	
	36	Amount of line 34 you want applied to your 2021 estimated tax > 36 2,444.		
Amount	37	Subtract line 33 from line 24. This is the amount you owe now	37	
You Owe		Note: Schedule H and Schedule SE filers, line 37 may not represent all of the taxes you owe for	Allen Market	Maka filiah fi fendagi mengangak di karan 18 20 mm tanggan yang bi asambinggang di 18 mm tanggan sang pada makan sanggan sanggan sanggan sanggan sanggan sanggan sanggan sanggan sanggan sanggan 18 mm tanggan sanggan s
For details on how to pay, see		2020. See Schedule 3, line 12e, and its instructions for details.	100 miles 100 miles 200 miles	
instructions.		Estimated tax penalty (see instructions) 38	Service of the servic	
Third Party		you want to allow another person to discuss this return with the IRS? See		П
Designee	ins	tructions \rightarrow \forall Yes. Complete belo	w.	∐ No
	Des	ignee's Phone Personal ident	ification	on opposite PF - November (All Control
	nam	he Person the Statements, and to the best of my keep penalties of perjury, I declare that I have examined this return and accompanying achedules and statements, and to the best of my keep penalties of perjury, I declare that I have examined this return and accompanying achedules and statements, and to the best of my keep penalties of perjury, I declare that I have examined this return and accompanying achedules and statements, and to the best of my keep penalties of perjury.	poulede	a and balial they are true
C!	COTT	ect, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge,	nowledg	
Sign	You	r signature Pate Your occupation		If the IRS sent you an Identity Protection PIN, enter it here
Here		OUTEE RYPOURTUR		(see inst.)
	Sno	Use's signature. If a joint return, both must sign.  Date  CHIEF EXECUTIVE  Spouse's occupation		If the IRS sent your spouse
Joint return? See instructions.	) opo	ood a digramatic in a partition in the state of the state		an Identity Protection PIN,
Keep a copy for your records,				enter it here (see inst.)
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GO TO WWW.IIS.G	iov/ra	rm1040 for instructions and the latest information.		FORM 1040 (2020)