

2020 IA 1040 Iowa Individual Income Tax Return

For fiscal year beginning _____ / _____ / _____ and ending _____ / _____ / _____

Step 1: Fill in all spaces. You must fill in your Social Security number (SSN).

Your last name: _____ Your first name/middle initial: _____

Spouse's last name: _____ Spouse's first name/middle initial: _____

Current mailing address (number and street, apartment, lot, or suite number) or PO Box: _____

City, State, ZIP: _____

Spouse SSN: _____ Your SSN: _____

Step 2 Filing Status: Mark one box only

1	Single: Were you claimed as a dependent on another person's Iowa return? Yes <input type="checkbox"/> No <input type="checkbox"/>	Email Address: _____
2	Married filing a joint return. (Two-income families may benefit by using status 3 or 4.)	Check this box if you or your spouse were 65 or older as of 12/31/20. <input type="checkbox"/>
3	Married filing separately on this combined return. Spouse use column B.	Residence on 12/31/20: County No. _____ School District No. _____
4	Married filing separate returns. Spouse's name: _____ ▲ SSN: _____ Net Income: \$ _____	
5	Head of household with qualifying person. If qualifying person is not claimed as a dependent on this return, enter the person's name and SSN below.	
6	Qualifying widow(er) with dependent child. Name: _____ SSN: _____	

Step 3 Exemptions

	B. Spouse (Filing Status 3 ONLY)	A. You or Joint
a. Personal Credit: Col. A: Enter 1 (enter 2 if filing status 2 or 5); Col. B: Enter 1 if filing status 3..... ▲	_____ X \$ 40 = \$ _____	_____ X \$ 40 = \$ _____
b. Enter 1 for each taxpayer who is 65 or older and/or 1 for each taxpayer who is blind..... ▲	_____ X \$ 20 = \$ _____	_____ X \$ 20 = \$ _____
c. Dependents: Enter 1 for each dependent..... ▲	_____ X \$ 40 = \$ _____	_____ X \$ 40 = \$ _____
d. Enter first names of dependents here _____	e. Total \$ _____	e. Total \$ _____

Step 4 Reportable Social Security benefits as calculated on line 13 of Iowa Social Security Worksheet

B. Spouse/Status 3 ▲ A. You or Joint ▲

	B. Spouse/Status 3	A. You or Joint	B. Spouse/Status 3	A. You or Joint
Step 5 Gross Income				
1. Wages, salaries, tips, etc.....1.	_____	_____	_____	_____
2. Taxable interest income. If more than \$1,500, complete Sch. B.....2.	_____	_____	_____	_____
3. Ordinary dividend income. If more than \$1,500, complete Sch. B.....3.	_____	_____	_____	_____
4. Taxable alimony received.....4.	_____	_____	_____	_____
5. Business income/(loss). See instructions.....5.	_____	_____	_____	_____
6. Capital gain/(loss). See instructions.....6.	_____	_____	_____	_____
7. Other gains/(losses). See instructions.....7.	_____	_____	_____	_____
8. Taxable IRA distributions.....8.	_____	_____	_____	_____
9. Taxable pensions and annuities.....9.	_____	_____	_____	_____
10. Rents, royalties, partnerships, estates, etc. See instructions.....10.	_____	_____	_____	_____
11. Farm income/(loss). See instructions.....11.	_____	_____	_____	_____
12. Unemployment compensation. See instructions.....12.	_____	_____	_____	_____
13. Gambling winnings.....13.	_____	_____	_____	_____
14. Other income, bonus depreciation, and section 179 adjustment.....14.	_____	_____	_____	_____
15. Gross Income. Add lines 1-14.....15.	_____	_____	_____	_____

NOTE: Use only blue or black ink, no pencils or red ink.

Step 6 Adjustments to Income

16. Payments to an IRA, Keogh, or SEP.....16.	_____	_____	_____	_____
17. Deductible part of self-employment tax.....17.	_____	_____	_____	_____
18. Health insurance premium.....18.	_____	_____	_____	_____
19. Penalty on early withdrawal of savings.....19.	_____	_____	_____	_____
20. Alimony paid.....20.	_____	_____	_____	_____
21. Pension/retirement income exclusion.....21.	_____ ▲	_____	_____	_____
22. Moving expense deduction from federal form 3903.....22.	_____	_____	_____	_____
23. Iowa capital gain deduction; Include corresponding IA 100 schedule.....23.	_____ ▲	_____	_____	_____
24. Other adjustments.....24.	_____	_____	_____	_____
25. Total adjustments. Add lines 16-24.....25.	_____	_____	_____ ▲	_____
26. Net Income. Subtract line 25 from line 15.....26.	_____	_____	_____ ▲	_____

Step 7 Federal Taxes and Qualified Deductions

27. Federal income tax refund/overpayment received in 2020.....27.	_____ ▲	_____	_____	_____
28. Self-employment/household employment/other federal taxes.....28.	_____ ▲	_____	_____	_____
29. Addition for federal taxes. Add lines 27 and 28.....29.	_____	_____	_____	_____
30. Total. Add lines 26 and 29.....30.	_____	_____	_____	_____
31. Federal tax withheld in 2020, federal estimated tax payments made in 2020, and federal taxes paid in 2020 for 2019 and prior years.....31.	_____ ▲	_____	_____	_____
32. Qualified business income deduction. 25.0% (.25) of federal amount. See instructions.....32.	_____ ▲	_____	_____	_____
33. DPAD 199A(g) deduction. 25.0% (.25) of federal amount.....33.	_____ ▲	_____	_____	_____
34. Total federal tax and other qualified deductions. Add lines 31, 32, and 33.....34.	_____	_____	_____	_____
35. Balance. Subtract line 34 from line 30. Enter here and on line 36, page 2.....35.	_____	_____	_____ ▲	_____



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	B. Spouse/Status 3	A. You or Joint	B. Spouse/Status 3	A. You or Joint
Step 8 Taxable Income				
36. BALANCE. From side 1, line 35		36.	.00	.00
37. Deduction. Check one box <input checked="" type="checkbox"/> Itemized.(Include IA Schedule A) <input type="checkbox"/> Standard <input type="checkbox"/>		37.	.00	.00
38. TAXABLE INCOME. SUBTRACT line 37 from line 36		38.	.00	.00
Step 9 Tax, Credits, and Check-off Contributions				
39. Tax from tables or alternate tax	.00	39.	.00	.00
40. Iowa lump-sum tax. See instructions	.00	40.	.00	.00
41. Iowa alternative minimum tax. Include IA 6251	.00	41.	.00	.00
42. Total tax. ADD lines 39, 40, and 41		42.	.00	.00
43. Total exemption credit amount(s) from Step 3, side 1	.00	43.	.00	.00
44. Tuition and textbook credit for dependents K-12	.00	44.	.00	.00
45. Volunteer firefighter/EMS/reserve peace officer credit	.00	45.	.00	.00
46. Total credits. ADD lines 43, 44, and 45	.00	46.	.00	.00
47. BALANCE. SUBTRACT line 46 from line 42. If less than zero, enter zero	.00	47.	.00	.00
48. Credit for nonresident or part-year resident. Must include IA 126 and federal return	.00	48.	.00	.00
49. BALANCE. SUBTRACT line 48 from line 47. If less than zero, enter zero	.00	49.	.00	.00
50. Out-of-state tax credit. Must include IA 130	.00	50.	.00	.00
51. BALANCE. SUBTRACT line 50 from line 49. If less than zero, enter zero	.00	51.	.00	.00
52. Other nonrefundable Iowa credits. Must include IA 148 Tax Credits Schedule	.00	52.	.00	.00
53. BALANCE. SUBTRACT line 52 from line 51. If less than zero, enter zero	.00	53.	.00	.00
54. School district surtax or EMS surtax. Take percentage from table; multiply by line 53	.00	54.	.00	.00
55. Total state and local tax. ADD lines 53 and 54	.00	55.	.00	.00
56. TOTAL state and local tax before contributions. Combine columns A and B on line 55 and enter here		56.	.00	.00
57. Contributions will reduce your refund or add to the amount you owe. Amounts must be in whole dollars.				
Fish/Wildlife 57a: <input checked="" type="checkbox"/> State Fair 57b: <input checked="" type="checkbox"/> Firefighters/Veterans 57c: <input checked="" type="checkbox"/> Child Abuse Prevention 57d: <input checked="" type="checkbox"/> Enter here		57.	.00	.00
58. TOTAL STATE AND LOCAL TAX, AND CONTRIBUTIONS. Add line 56 and line 57 and enter here		58.	.00	.00
Step 10 Credits				
59. Iowa fuel tax credit. Include IA 4136	.00	59.	.00	.00
60. Check One: Child and dependent care credit <input type="checkbox"/> OR <input checked="" type="checkbox"/> Early childhood development credit		60.	.00	.00
61. Iowa earned income tax credit. 15.0% (.15) of federal credit	.00	61.	.00	.00
62. Other refundable credits. Include IA 148 Tax Credits Schedule	.00	62.	.00	.00
63. Iowa income tax withheld	.00	63.	.00	.00
64. Estimated and voucher payments made for tax year 2020	.00	64.	.00	.00
65. TOTAL. ADD lines 59 through 64 and enter here	.00	65.	.00	.00
66. TOTAL CREDITS. ADD columns A and B on line 65 and enter here		66.	.00	.00
Step 11 Refund				
67. If line 66 is more than line 58, subtract line 58 from line 66. This is the amount you overpaid		67.	.00	.00
68. Amount of line 67 to be REFUNDED		68.	.00	.00
68a. Routing number: <input type="text"/>		68b. Type	Checking <input type="checkbox"/>	Savings <input type="checkbox"/>
68c. Account number: <input type="text"/>				
69. Amount of line 67 to be applied to your 2021 estimated tax	.00	69.	.00	.00
Step 12 Pay				
70. If line 66 is less than line 58, subtract line 66 from line 58. This is the AMOUNT OF TAX YOU OWE		70.	.00	.00
71. Penalty for underpayment of estimated tax from IA 2210, IA 2210S, or IA 2210F. Check if annualized income method is used <input type="checkbox"/>		71.	.00	.00
72. Penalty and interest <input checked="" type="checkbox"/> 72a. Penalty <input type="text"/> .00 <input checked="" type="checkbox"/> 72b. Interest <input type="text"/> .00 ADD. Enter total		72.	.00	.00
73. TOTAL AMOUNT DUE. ADD lines 70, 71, and 72. Enter here		73.	.00	.00

Step 13 I, the undersigned, declare under penalties of perjury or false certificate, that I have examined this return, and, to the best of my knowledge and belief, it is true, correct, and complete.

SIGN HERE	<input type="checkbox"/>				
Your signature	Date	Check if deceased	Date of death	Preparer's signature	Date
SIGN HERE	<input type="checkbox"/>				
Spouse's signature	Date	Check if deceased	Date of death	Preparer's PTIN	Firm's FEIN
			Daytime telephone number		Daytime telephone number

This return is due April 30, 2021. Sign, enclose W-2s, and verify SSNs.
MAILING ADDRESS: Iowa Income Tax Document Processing,
PO BOX 9187, Des Moines IA 50306-9187
Make check payable to Iowa Department of Revenue

