

## IMPORTANT NEWS

A major lawsuit, *Scholl v. Mnuchin*, has ordered that prisoners also be considered eligible for the Covid-19 stimulus check.

You could receive \$1,200...if you filed a 2018 or 2019 tax return, OR if you did not qualify because you were paid less than \$12,000 last year. **This decision overrules whatever you might have been told by your facility!**

***The filing deadline is OCTOBER 15, 2020.***

***What should you do if you think you or someone else qualifies?***

1. Fill out and file the IRS Form 1040 (instructions on reverse) for 2019 (or if you are over 65, the 1040sr)

You can file a *simplified paper tax return* if:

1. You haven't filed a tax return for 2019, and
2. You were not required to file a tax return for 2019, typically because your income was too low, and
3. You have a Social Security number that lets you work in the United States

Important: You can't be claimed as someone else's dependent

### Instructions

1. Write "EIP2020" on the top of your form.
2. Check the filing status that applies to you ("single," "married") *Remember: you CANNOT receive a stimulus payment if you can be claimed as a dependent.*
3. Lines 1-11:
  - 6. Enter \$1 on lines 2b, 7b, and 8b.
  - Enter \$0.00 on line 11b.
  - Leave every other line in this section blank.
4. Mail the return to:  
**SEE BELOW! Addresses vary by state.**

If you are interested in reading the *Scholl v. Mnuchin* decision, please write to: **National Lawyers Guild c/o Santa Rita Jail Hotline (558 Capp Street San Francisco, CA 94110)** and we can send you a copy.

**We are including 2 copies of the 1040—one for you, and one to either copy or give to someone else. There is also a copy of the 1040-SR in case you or someone you know is over 65. Please help us spread this news and if you can, spread these forms around.**

## WHERE TO SEND THE FORM! For Form 1040 and Form 1040-SR addresses for taxpayers living within the 50 states

If you live in...	And you <i>ARE NOT</i> enclosing a payment use this address	and you <i>ARE</i> enclosing a payment use this address
Arkansas, Georgia, Indiana, Iowa, Kentucky, Missouri, New Jersey, Oklahoma, Tennessee, Virginia	Department of the Treasury Internal Revenue Service Kansas City, MO 64999-0002	Internal Revenue Service P.O. Box 931000 Louisville, KY 40293-1000
Connecticut, District of Columbia, Maryland, Rhode Island, West Virginia	Department of the Treasury Internal Revenue Service Ogden, UT 84201-0002	Internal Revenue Service P. O. Box 931000 Louisville, KY 40293-1000
Florida, Louisiana, Mississippi, Texas	Department of the Treasury Internal Revenue Service Austin, TX 73301-0002	Internal Revenue Service P.O. Box 1214 Charlotte, NC 28201-1214
Alabama, North Carolina, South Carolina	Department of the Treasury Internal Revenue Service Kansas City, MO 64999-0002	Internal Revenue Service P O Box 1214 Charlotte, NC 28201-1214
Alaska, California, Hawaii, Washington	Department of the Treasury Internal Revenue Service Fresno, CA 93888-0002	Internal Revenue Service P.O. Box 7704 San Francisco, CA 94120-7704
Illinois, Michigan, Minnesota, Ohio, Wisconsin	Department of the Treasury Internal Revenue Service Fresno, CA 93888-0002	Internal Revenue Service P.O. Box 802501 Cincinnati, OH 45280-2501
Arizona, Colorado, Idaho, Kansas, Montana, Nebraska, Nevada, New Mexico, Oregon, North Dakota, South Dakota, Utah, Wyoming	Department of the Treasury Internal Revenue Service Ogden, UT 84201-0002	Internal Revenue Service P O Box 802501 Cincinnati, OH 45280-2501
Delaware, Maine, Massachusetts, New Hampshire, New York, Vermont	Department of the Treasury Internal Revenue Service Kansas City, MO 64999-0002	Internal Revenue Service P.O. Box 37008 Hartford, CT 06176-7008
Pennsylvania	Department of the Treasury Internal Revenue Service Ogden, UT 84201-0002	Internal Revenue Service P.O. Box 37008 Hartford, CT 06176-7008

Filing Status

- Single Married filing jointly Married filing separately (MFS) Head of household (HOH) Qualifying widow(er) (QW)

Check only one box.

If you checked the MFS box, enter the name of spouse. If you checked the HOH or QW box, enter the child's name if the qualifying person is a child but not your dependent.

Form fields for personal information: Your first name and middle initial, Last name, Your social security number, Spouse's social security number, Home address, Apt. no., Presidential Election Campaign, City, town or post office, state, and ZIP code, Foreign country name, Foreign province/state/county, Foreign postal code.

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, 1955, Are blind, Spouse: Was born before January 2, 1955, Is blind

Dependents (see instructions):

Table with 5 columns: (1) First name, Last name, (2) Social security number, (3) Relationship to you, (4) Child tax credit, Credit for other dependents

Standard Deduction for— Single or Married filing separately, \$12,200; Married filing jointly or Qualifying widow(er), \$24,400; Head of household, \$18,350; If you checked any box under Standard Deduction, see instructions.

Main income table with rows 1-11b: 1 Wages, salaries, tips, etc. Attach Form(s) W-2; 2a Tax-exempt interest; 3a Qualified dividends; 4a IRA distributions; c Pensions and annuities; 5a Social security benefits; 6 Capital gain or (loss); 7a Other income from Schedule 1, line 9; b Add lines 1, 2b, 3b, 4b, 4d, 5b, 6, and 7a. This is your total income; 8a Adjustments to income from Schedule 1, line 22; b Subtract line 8a from line 7b. This is your adjusted gross income; 9 Standard deduction or itemized deductions (from Schedule A); 10 Qualified business income deduction; 11a Add lines 9 and 10; b Taxable income. Subtract line 11a from line 8b. If zero or less, enter -0-

<b>12a</b>	Tax (see inst.) Check if any from Form(s): 1 <input type="checkbox"/> 8814 2 <input type="checkbox"/> 4972 3 <input type="checkbox"/>	<b>12a</b>	
<b>b</b>	Add Schedule 2, line 3, and line 12a and enter the total	<b>12b</b>	
<b>13a</b>	Child tax credit or credit for other dependents	<b>13a</b>	
<b>b</b>	Add Schedule 3, line 7, and line 13a and enter the total	<b>13b</b>	
<b>14</b>	Subtract line 13b from line 12b. If zero or less, enter -0-	<b>14</b>	
<b>15</b>	Other taxes, including self-employment tax, from Schedule 2, line 10	<b>15</b>	
<b>16</b>	Add lines 14 and 15. This is your <b>total tax</b>	<b>16</b>	
<b>17</b>	Federal income tax withheld from Forms W-2 and 1099	<b>17</b>	
<b>18</b>	Other payments and refundable credits:		
<b>a</b>	Earned income credit (EIC)	<b>18a</b>	
<b>b</b>	Additional child tax credit. Attach Schedule 8812	<b>18b</b>	
<b>c</b>	American opportunity credit from Form 8863, line 8	<b>18c</b>	
<b>d</b>	Schedule 3, line 14	<b>18d</b>	
<b>e</b>	Add lines 18a through 18d. These are your <b>total other payments and refundable credits</b>	<b>18e</b>	
<b>19</b>	Add lines 17 and 18e. These are your <b>total payments</b>	<b>19</b>	

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

**Refund**

Direct deposit?  
See instructions.

<b>20</b>	If line 19 is more than line 16, subtract line 16 from line 19. This is the amount you <b>overpaid</b>	<b>20</b>	
<b>21a</b>	Amount of line 20 you want <b>refunded to you</b> . If Form 8888 is attached, check here <input type="checkbox"/>	<b>21a</b>	
<b>b</b>	Routing number	<b>c</b> Type: <input type="checkbox"/> Checking <input type="checkbox"/> Savings	
<b>d</b>	Account number		
<b>22</b>	Amount of line 20 you want <b>applied to your 2020 estimated tax</b>	<b>22</b>	

**Amount You Owe**

<b>23</b>	<b>Amount you owe.</b> Subtract line 19 from line 16. For details on how to pay, see instructions	<b>23</b>	
<b>24</b>	Estimated tax penalty (see instructions)	<b>24</b>	

**Third Party Designee**

(Other than paid preparer)

Do you want to allow another person (other than your paid preparer) to discuss this return with the IRS? See instructions.  **Yes**. Complete below.  **No**

Designee's name	Phone no.	Personal identification number (PIN)	
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**Sign Here**

Joint return?  
See instructions. Keep a copy for your records.

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	If the IRS sent you an Identity Protection PIN, enter it here (see inst.)
Spouse's signature. If a joint return, <b>both</b> 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	Preparer's signature	Date	PTIN	Check if: <input type="checkbox"/> 3rd Party Designee <input type="checkbox"/> Self-employed
Firm's name	Phone no.		Firm's EIN	
Firm's address				

Filing Status

- Single Married filing jointly Married filing separately (MFS) Head of household (HOH) Qualifying widow(er) (QW)

Check only one box.

If you checked the MFS box, enter the name of spouse. If you checked the HOH or QW box, enter the child's name if the qualifying person is a child but not your dependent.

Form fields for personal information: Your first name and middle initial, Last name, Your social security number, Spouse's social security number, Home address, Apt. no., Presidential Election Campaign, City, town or post office, state, and ZIP code, Foreign country name, Foreign province/state/county, Foreign postal code.

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, 1955 Are blind Spouse: Was born before January 2, 1955 Is blind

Dependents (see instructions):

Table with 5 columns: (1) First name, Last name, (2) Social security number, (3) Relationship to you, (4) Child tax credit, Credit for other dependents.

Main income table with rows 1-11b. Includes categories like Wages, salaries, tips, Tax-exempt interest, Qualified dividends, IRA distributions, Pensions and annuities, Social security benefits, Capital gain or (loss), Other income from Schedule 1, Adjustments to income, Standard deduction or itemized deductions, Qualified business income deduction, and Taxable income.

Standard Deduction for— Single or Married filing separately, \$12,200 Married filing jointly or Qualifying widow(er), \$24,400 Head of household, \$18,350 If you checked any box under Standard Deduction, see instructions.

<b>12a</b>	Tax (see inst.) Check if any from Form(s): 1 <input type="checkbox"/> 8814 2 <input type="checkbox"/> 4972 3 <input type="checkbox"/>	<b>12a</b>	
<b>b</b>	Add Schedule 2, line 3, and line 12a and enter the total	<b>12b</b>	
<b>13a</b>	Child tax credit or credit for other dependents	<b>13a</b>	
<b>b</b>	Add Schedule 3, line 7, and line 13a and enter the total	<b>13b</b>	
<b>14</b>	Subtract line 13b from line 12b. If zero or less, enter -0-	<b>14</b>	
<b>15</b>	Other taxes, including self-employment tax, from Schedule 2, line 10	<b>15</b>	
<b>16</b>	Add lines 14 and 15. This is your <b>total tax</b>	<b>16</b>	
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<b>a</b>	Earned income credit (EIC)	<b>18a</b>	
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<b>c</b>	American opportunity credit from Form 8863, line 8	<b>18c</b>	
<b>d</b>	Schedule 3, line 14	<b>18d</b>	
<b>e</b>	Add lines 18a through 18d. These are your <b>total other payments and refundable credits</b>	<b>18e</b>	
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• If you have a qualifying child, attach Sch. EIC.  
 • If you have nontaxable combat pay, see instructions.

**Refund**

Direct deposit?  
See instructions.

<b>20</b>	If line 19 is more than line 16, subtract line 16 from line 19. This is the amount you <b>overpaid</b>	<b>20</b>	
<b>21a</b>	Amount of line 20 you want <b>refunded to you</b> . If Form 8888 is attached, check here <input type="checkbox"/>	<b>21a</b>	
<b>b</b>	Routing number	<b>c</b> Type: <input type="checkbox"/> Checking <input type="checkbox"/> Savings	
<b>d</b>	Account number		
<b>22</b>	Amount of line 20 you want <b>applied to your 2020 estimated tax</b>	<b>22</b>	

**Amount You Owe**

<b>23</b>	<b>Amount you owe.</b> Subtract line 19 from line 16. For details on how to pay, see instructions	<b>23</b>	
<b>24</b>	Estimated tax penalty (see instructions)	<b>24</b>	

**Third Party Designee**

(Other than paid preparer)

Do you want to allow another person (other than your paid preparer) to discuss this return with the IRS? See instructions.  **Yes.** Complete below.  **No**

Designee's name	Phone no.	Personal identification number (PIN)
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**Sign Here**

Joint return?  
See instructions. Keep a copy for your records.

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	If the IRS sent you an Identity Protection PIN, enter it here (see inst.)
Spouse's signature. If a joint return, <b>both</b> 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	Preparer's signature	Date	PTIN	Check if: <input type="checkbox"/> 3rd Party Designee <input type="checkbox"/> Self-employed
Firm's name	Phone no.		Firm's EIN	
Firm's address				

**Filing Status**  Single  Married filing jointly  Married filing separately (MFS)  
 Head of household (HOH)  Qualifying widow(er) (QW)  
 Check only one box. If you checked the MFS box, enter the name of spouse. If you checked the HOH or QW box, enter the child's name if the qualifying person is a child but not your dependent. ▶

Your first name and middle initial	Last name	Your social security number
If joint return, spouse's first name and middle initial	Last name	Spouse's social security number
Home address (number and street). If you have a P.O. box, see instructions.		Apt. no.
City, town or post office, state, and ZIP code. If you have a foreign address, also complete spaces below (see instructions).		Presidential Election Campaign Check here if you, or your spouse if filing jointly, want \$3 to go to this fund. Checking a box below will not change your tax or refund. <input type="checkbox"/> You <input type="checkbox"/> Spouse
Foreign country name	Foreign province/state/county	Foreign postal code
If more than four dependents, see inst. and ✓ here ▶ <input type="checkbox"/>		

**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, 1955  Are blind  
**Spouse:**  Was born before January 2, 1955  Is blind

Dependents (see instructions): (1) Firstname Last name	(2) Social security number	(3) Relationship to you	(4) ✓ if qualifies for (see inst.): Child tax credit Credit for other dependents	
			<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>

	1 Wages, salaries, tips, etc. Attach Form(s) W-2.....		<b>1</b>					
Attach Schedule B if required.	2a Tax-exempt interest . . .	<b>2a</b>	b Taxable interest . . . <b>2b</b>					
	3a Qualified dividends . . .	<b>3a</b>		b Ordinary dividends . . . <b>3b</b>				
	4a IRA distributions . . .	<b>4a</b>			b Taxable amount . . . <b>4b</b>			
	c Pensions and annuities . . .	<b>4c</b>				d Taxable amount . . . <b>4d</b>		
	5a Social security benefits . . .	<b>5a</b>					b Taxable amount . . . <b>5b</b>	
6 Capital gain or (loss). Attach Schedule D if required. If not required, check here ▶ <input type="checkbox"/>	<b>6</b>	b Add lines 1, 2b, 3b, 4b, 4d, 5b, 6, and 7a. This is your <b>total income</b> . . . ▶ <b>7b</b>						
7a Other income from Schedule 1, line 9.....	<b>7a</b>		8a Adjustments to income from Schedule 1, line 22 .....					
8a Adjustments to income from Schedule 1, line 22 .....	<b>8a</b>			b Subtract line 8a from line 7b. This is your <b>adjusted gross income</b> . . . ▶ <b>8b</b>				
9 Standard deduction or itemized deductions (from Schedule A)	<b>9</b>				11a Add lines 9 and 10 .....			
10 Qualified business income deduction. Attach Form 8995 or Form 8995-A	<b>10</b>					b <b>Taxable income.</b> Subtract line 11a from line 8b. If zero or less, enter -0- . . . <b>11b</b>		
11a Add lines 9 and 10 .....	<b>11a</b>	Add the number of boxes checked in the "Age/Blindness" section of <i>Standard Deduction</i> . . . ▶						
IF your filing status is . . .	AND the number of boxes checked is . . .		THEN your standard deduction is . . .				IF your filing status is . . .	AND the number of boxes checked is . . .
Single	1		13,850	Head of household			1	20,000
	2		15,500	Married filing jointly or	1		13,500	
Married filing jointly	1		25,700	Married filing separately	2	14,800		
	2	27,000		3	16,100			
Qualifying widow(er)	3	28,300		4	17,400			
	4	29,600						

**Standard Deduction Chart\***

IF your filing status is . . .	AND the number of boxes checked is . . .	THEN your standard deduction is . . .	IF your filing status is . . .	AND the number of boxes checked is . . .	THEN your standard deduction is . . .
Single	1	13,850	Head of household	1	20,000
	2	15,500	Married filing jointly or	1	13,500
Married filing jointly	1	25,700	Married filing separately	2	14,800
	2	27,000		3	16,100
Qualifying widow(er)	3	28,300		4	17,400
	4	29,600			

\* Don't use this chart if someone can claim you (or your spouse if filing jointly) as a dependent, your spouse itemizes on a separate return, or you were a dual-status alien. Instead, see instructions.

12a Tax (see instructions). Check if any from:

1  Form(s) 8814 2  Form 4972 3  \_\_\_\_\_ 12a

b Add Schedule 2, line 3, and line 12a and enter the total . . . . . ▶ 12b

13a Child tax credit or credit for other dependents ..... 13a

b Add Schedule 3, line 7, and line 13a and enter the total . . . . . ▶ 13b

14 Subtract line 13b from line 12b. If zero or less, enter -0- ..... 14

15 Other taxes, including self-employment tax, from Schedule 2, line 10 ..... 15

16 Add lines 14 and 15. This is your total tax . . . . . ▶ 16

17 Federal income tax withheld from Forms W-2 and 1099 ..... 17

18 Other payments and refundable credits:

a Earned income credit (EIC) ..... 18a

b Additional child tax credit. Attach Schedule 8812 ..... 18b

c American opportunity credit from Form 8863, line 8 ..... 18c

d Schedule 3, line 14 ..... 18d

e Add lines 18a through 18d. These are your total other payments and refundable credits ▶ 18e

19 Add lines 17 and 18e. These are your total payments . . . . . ▶ 19

Refund 20 If line 19 is more than line 16, subtract line 16 from line 19. This is the amount you overpaid 20

21a Amount of line 20 you want refunded to you. If Form 8888 is attached, check here ▶  21a

Direct deposit? ▶ b Routing number ..... ▶ c Type:  Checking  Savings See instructions.

d Account number ..... ▶ 22

22 Amount of line 20 you want applied to your 2020 estimated tax ▶ 22

Amount You Owe 23 Amount you owe. Subtract line 19 from line 16. For details on how to pay, see instructions ▶ 23

24 Estimated tax penalty (see instructions) . . . . . ▶ 24

Third Party Designee

Do you want to allow another person (other than your paid preparer) to discuss this return with the IRS? See instructions.  Yes. Complete below.  No

(Other than paid preparer) 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 If the IRS sent you an Identity Protection PIN, enter it here (see inst.)

Joint return? See instructions. Keep a copy for your records.

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 Preparer's signature Date PTIN Check if:  3rd Party Designee  Self-employed

Firm's name ▶ Phone no.

Firm's address ▶ Firm's EIN ▶