Form 5329
(Rev. January 2020)
Department of the Treasury Internal Revenue Service (99

Additional Taxes on Qualified Plans (Including IRAs) and Other Tax-Favored Accounts

Attach to Form 1040, 1040-SR, or 1040-NR.
Go to www.irs.gov/Form5329 for instructions and the latest information.

OMB No. 1545-0074								
2019								

Attachment Sequence No. 29 Your social security number

Name of individual subject to additional tax. If married filing jointly, see instructions.
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Your	social	security	numbe

	Home address (number and street), or P.O. box if		Apt. no.		
Fill in Your Address Only if You Are Filing This Form by Itself and Not With Your Tax Return	City, town or post office, state, and ZIP code. If y spaces below. See instructions.	and ZIP code. If you have a foreign address, also complete the 5.			
,	Foreign country name	Foreign province/state/county	Foreign post	al code	

If you **only** owe the additional 10% tax on early distributions, you may be able to report this tax directly on Schedule 2 (Form 1040 or 1040-SR), line 6, or Form 1040-NR, line 57, without filing Form 5329. See the instructions for Schedule 2 (Form 1040 or 1040-SR), line 6, or for Form 1040-NR, line 57.

Par	Additional Tax on Early Distributions. Complete this part if you took a taxable distribution (other distribution) before you reached age 59½ from a qualified retirement plan (including an IRA) or modified endow are reporting this tax directly on Form 1040, 1040-SR, or 1040-NR—see above). You also may have to complete the provided endow of the prov	vment	contract (unless you
	you qualify for an exception to the additional tax on early distributions or for certain Roth IRA distributions. See		
1	Early distributions included in income. For Roth IRA distributions, see instructions	1	
2	Early distributions included on line 1 that are not subject to the additional tax (see instructions).		
	Enter the appropriate exception number from the instructions:	2	
3	Amount subject to additional tax. Subtract line 2 from line 1	3	
4	Additional tax. Enter 10% (0.10) of line 3. Include this amount on Schedule 2 (Form 1040 or 1040-SR), line 6, or Form 1040-NR, line 57	4	
	Caution: If any part of the amount on line 3 was a distribution from a SIMPLE IRA, you may have to include 25% of that amount on line 4 instead of 10%. See instructions.		
Part	Additional Tax on Certain Distributions From Education Accounts and ABLE Account if you included an amount in income, on Schedule 1 (Form 1040 or 1040-SR), line 8, or Form 10 Coverdell education savings account (ESA), a qualified tuition program (QTP), or an ABLE account.	040-N	
5	Distributions included in income from a Coverdell ESA, a QTP, or an ABLE account	5	
6	Distributions included on line 5 that are not subject to the additional tax (see instructions)	6	
7	Amount subject to additional tax. Subtract line 6 from line 5	7	
8	Additional tax. Enter 10% (0.10) of line 7. Include this amount on Schedule 2 (Form 1040 or 1040-SR), line 6, or Form 1040-NR, line 57	8	
Part		ontrib	uted more to your
	traditional IRAs for 2019 than is allowable or you had an amount on line 17 of your 2018 Form 5329	9.	
9	Enter your excess contributions from line 16 of your 2018 Form 5329. See instructions. If zero, go to line 15	9	
10	If your traditional IRA contributions for 2019 are less than your maximum allowable contribution, see instructions. Otherwise, enter -0		
11	2019 traditional IRA distributions included in income (see instructions) 11		
12	2019 distributions of prior year excess contributions (see instructions) 12		
13	Add lines 10, 11, and 12	13	
14	Prior year excess contributions. Subtract line 13 from line 9. If zero or less, enter -0	14	
15	Excess contributions for 2019 (see instructions)	15	
16	Total excess contributions. Add lines 14 and 15	16	
17	Additional tax. Enter 6% (0.06) of the smaller of line 16 or the value of your traditional IRAs on December 31, 2019 (including 2019 contributions made in 2020). Include this amount on Schedule 2 (Form 1040 or 1040-SR), line 6, or Form 1040-NR, line 57	17	
Part	Additional Tax on Excess Contributions to Roth IRAs. Complete this part if you contributions for 2019 than is allowable or you had an amount on line 25 of your 2018 Form 5329.	uted r	nore to your Roth
18	Enter your excess contributions from line 24 of your 2018 Form 5329. See instructions. If zero, go to line 23	18	
19	If your Roth IRA contributions for 2019 are less than your maximum allowable contribution, see instructions. Otherwise, enter -0		
20	2019 distributions from your Roth IRAs (see instructions)		
21	Add lines 19 and 20	21	
22	Prior year excess contributions. Subtract line 21 from line 18. If zero or less, enter -0	22	
23	Excess contributions for 2019 (see instructions)	23	
24	Total excess contributions. Add lines 22 and 23	24	
25	Additional tax. Enter 6% (0.06) of the smaller of line 24 or the value of your Roth IRAs on December 31, 2019 (including 2019 contributions made in 2020). Include this amount on Schedule 2 (Form 1040 or 1040-SR), line 6, or Form 1040-NR, line 57	25	
	contributions made in 2020 , include this amount on schedule 2 (round 1040 or 1040 on 1040 or 70, inte 0, or FOITI 1040 NR, life 37	20	

For Privacy Act and Paperwork Reduction Act Notice, see your tax return instructions.

Form 53	329 (2019	9)								Page 2
Part				ntributions to Coverdell than is allowable or you had		•		•		•
26	Enter	the excess c	ontributions from line 32	of your 2018 Form 5329. See	instruction	s. If ze	ero, go	to line 31	26	
27			•	ESAs for 2019 were less t ructions. Otherwise, enter -0-		27				
28	2019	distributions	from your Coverdell ES	SAs (see instructions)		28				
29	Add I	ines 27 and 2	28						29	
30	Prior	year excess	contributions. Subtract	line 29 from line 26. If zero or	r less, ente	er -0			30	
31	Exces	ss contributio	ons for 2019 (see instruc	ctions)					31	
32	Total	excess cont	ributions. Add lines 30 a	and 31					32	
33	Additional tax. Enter 6% (0.06) of the smaller of line 32 or the value of your Coverdell ESAs on									
	Dece	mber 31, 20 [.]	19 (including 2019 cont	ributions made in 2020). Incl 040-NR, line 57	ude this a	moun	t on So	hedule 2	33	
Part				ributions to Archer MSA					ur em	olover contributed
				than is allowable or you had	•					•
34				of your 2018 Form 5329. See				-	34	
35				for 2019 are less than the m			/0			
			2	Otherwise, enter -0		35				
36				s from Form 8853, line 8		36				
37									37	
38				line 37 from line 34. If zero or					38	
39		•		ctions)					39	
40				and 39					40	
41				smaller of line 40 or the						
41			. ,	ributions made in 2020). Incl	•					
	(Form	1040 or 104	40-SR) line 6 or Form 1	040-NR, line 57		moun	011 00		41	
Part				ntributions to Health Sa						this part if you
r ar c				employer contributed more t	-		-	•	•	
			ne 49 of your 2018 Forn		o your ric	5/10/10	2010		novac	io or you had an
42				8 of your 2018 Form 5329. If	zero do t	o line	/7		42	
				•			4/ .		42	
43			-	2019 are less than the m		43				
44				Otherwise, enter -0		44			-	
44 45									45	
45									45	
46				line 45 from line 42. If zero or					46	
47				ctions)		• •	• •		47	
48				and 47		• •	· ·		48	
49				line 48 or the value of your HSAs of						
				on Schedule 2 (Form 1040 or 1040					49	
Part V				tributions to an ABLE Ac	count. C	omple	ete this	part if cor	ntributi	ons to your ABLE
			2019 were more than is							
50			·	ctions)					50	
51				iller of line 50 or the value of y						
				e 2 (Form 1040 or 1040-SR), I					51	
Part				umulation in Qualified Re			•	-	As). (Complete this part
				equired distribution from you						
52		•	· ·	ee instructions)					52	
53		•	•	9					53	
54				ss, enter -0					54	
55	Addit 1040-	tional tax. E -SR), line 6, c	Enter 50% (0.50) of lin or Form 1040-NR, line 5	e 54. Include this amount 7	on Sched	lule 2	(Form	1040 or	55	
Sign 4		Only if You	Under penalties of perjury, I d	eclare that I have examined this form,	including acc	ompany	ing attach	ments, and to	o the bes	st of my knowledge and
		his Form	belief, it is true, correct, and co	mplete. Declaration of preparer (other the	nan taxpayer) i	is based	on all info	ormation of wh	nich prep	arer has any knowledge.
		Not With								
	Tax Re		Your signature					Date		
D-''		Print/Type prep		Preparer's signature		Date		Check	□ if	PTIN
Paid									nployed	
Prep		Firma's name								
Use	Only	Firm's address						hone no.		