E 1040 Department of the Treasury—Internal Revenue Service U.S. Individual Income Tax Return



1040		artment of the Treasury—Internal Revenue Servi S. Individual Income Ta)		turn	202	4	OMB No. 1545	-0074	IRS Use O	nly—Do r	not wr	ite or staple ir	n this space.
For the year Jan	For the year Jan. 1–Dec. 31, 2024, or other tax year beginning, 2024, ending, 20 S							See	See separate instructions.				
Your first name	irst name and middle initial Last name					You	r soc	cial security	number				
If joint return, spouse's first name and middle initial Last name									Spo	use's	social sec	urity number	
Home address	numbe	r and street). If you have a P.O. box, see	instruc	tions.				A	pt. no.			itial Electio ere if you, o	n Campaign
City, town, or po	ost offic	ce. If you have a foreign address, also co	mplete	spaces bel	low.	Sta	ite	ZIP co	ode	spo to g	use i	f filing joint	ly, want \$3 Checking a
Foreign country name				Foreign province/state/county				Foreig				or refund.	Spouse
Filing Status		Single					☐ Head	of hou	sehold (H	OH)			
Check only one box.	•	 □ Married filing jointly (even if only one had income) □ Married filing separately (MFS) □ Qualifying surviving spouse (QSS) If you checked the MFS box, enter the name of your spouse. If you checked the HOH or QSS box, enter the child's name if the qualifying person is a child but not your dependent: □ If treating a nonresident alien or dual-status alien spouse as a U.S. resident for the entire tax year, check the box and enter their name (see instructions and attach statement if required): 											
Digital Assets		ny time during 2024, did you: (a) reco									ell,	Yes	☐ No
Standard Deduction		eone can claim: You as a de Spouse itemizes on a separate retur	•		•		a dependent						
Age/Blindness	You:	Were born before January 2, 1	960	Are bl	ind Spo	use	: Was bor		re Januar			Is bli	
Dependents If more		instructions): rst name Last name		(2) Social security number			(3) Relationshi to you		(4) Check the box Child tax cred				nstructions): er dependents
than four dependents,	-]			
see instructions and check]			
here \square												L	
Income	1a	Total amount from Form(s) W-2, be	•		,						<u>1a</u> 1b		
Attach Form(s)		 b Household employee wages not reported on Form(s) W-2								. +	1c		
W-2 here. Also attach Forms	d									.	1d		
W-2G and	-2G and 99-R if tax e Taxable dependent care benefits from Form 2441, line 26				· · · · · · · · · · · · · · · · · · ·						1e		
1099-R if tax was withheld.						·	1f						
If you did not	g								·	1g			
get a Form	h	•	ations)					.	1h				
W-2, see instructions.	i	Nontaxable combat pay election (see instructions)											
	z	Add lines to through th								.	1z		
Attach Sch. B	2a	Tax-exempt interest	2a			b T	axable interest			. [2b		
if required.	За	Qualified dividends	3a			b 0	ordinary divider	nds .		. [3b		
	4a	IRA distributions	4a			b T	axable amount	t		. [4b		
Standard Deduction for—	5a	Pensions and annuities	5a			b T	axable amount	t		. [5b		
Single or	6a	Social security benefits	6a			b T	axable amount	t			6b		
Married filing separately,	С	c If you elect to use the lump-sum election method, check here (see instructions)											
\$14,600	7										7		
Married filing jointly or	8									. [8		
Qualifying surviving spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income									9		
\$29,200 Head of	10	Adjustments to income from Schedule 1, line 26									10		
household,	11	Subtract line 10 from line 9. This is your adjusted gross income									11		
\$21,900 If you checked	Standard deduction or itemized deductions (from Schedule A)										12		
any box under Standard	13	13 Qualified business income deduction from Form 8995 or Form 8995-A							13				
Deduction,	14							14					
see instructions.	Subtract line 14 from line 11. If zero or less, enter -0 This is your taxable income								15	L .			

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Tax and	16	Tax (see instructions). Check	if any from Form	(s): 1 881	4 2 4972	3 🗌		16			
Credits	17	Amount from Schedule 2, lin	e3					17			
	18	Add lines 16 and 17						18			
	19	Child tax credit or credit for o	other dependent	ts from Schedi	ule 8812			19			
	20	Amount from Schedule 3, lin	e8					20			
	21	Add lines 19 and 20						21			
	22	Subtract line 21 from line 18	22								
	23	Other taxes, including self-er	mployment tax,	from Schedule	2, line 21 .			23			
	24	Add lines 22 and 23. This is	your total tax					24			
Payments	25	Federal income tax withheld									
-	а	Form(s) W-2				25a					
	b	Form(s) 1099				25b					
	С	Other forms (see instructions	s)			25c					
	d	Add lines 25a through 25c						25d			
If you have a	26	2024 estimated tax payment	s and amount ap	pplied from 20	23 return	.,		26			
qualifying child, attach Sch. EIC.	27	Earned income credit (EIC)									
attach Sch. Elo.	28	Additional child tax credit from	n Schedule 8812			28					
	29	American opportunity credit	from Form 8863	3, line 8		29					
	30	Reserved for future use .									
	31	Amount from Schedule 3, lin	e 15			31					
	32	Add lines 27, 28, 29, and 31.	32								
	33	Add lines 25d, 26, and 32. These are your total payments									
Refund	· · · · · · · · · · · · · · · · · · ·							34			
	35a	Amount of line 34 you want refunded to you . If Form 8888 is attached, check here									
Direct deposit? See instructions.	b	Routing number									
occ mondenons.	d	Account number				36					
	36	Amount of line 34 you want a									
Amount	37	Subtract line 33 from line 24.									
You Owe	38	For details on how to pay, go Estimated tax penalty (see in		-				37			
Third Party											
Designee		Oo you want to allow another person to discuss this return with the IRS? See instructions							No		
	Des	signee's		Phone			onal identifi				
	nar			no.			ber (PIN)				
Sign		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.									
Here			picte. Deciaration (, 0		
	YO	Your signature		Date Your occupation				f the IRS sent you an Identity Protection PIN, enter it here			
Joint return? See instructions. Keep a copy for					(se		e inst.)				
	Spe	ouse's signature. If a joint return, b	Date Spouse's occupation				If the IRS sent your spouse an Identity Protection PIN, enter it here (see inst.)				
your records.											
	———Pho	one no.		Email address			,				
·		eparer's name	Preparer's signat	l .		Date	PTIN		Check if:		
Paid									Self-employed		
Preparer	Firr	Firm's name Pho									
Use Only	Firm's address Firm'										
								Form 1040 (2024)			