| F | orm 1040 U.S. Indivi | 2024 OMB No. 1545-0074 | | | | |
|---|---|----------------------------------|----------|-------------|-----------------------------|--|
| Dep | partment of the Treasury—Internal Revenue | | | | | |
| For | the year Jan. 1-Dec. 31, 2024, or other tax year | beginning, 2024, ending | _, 20 | | | |
| Your first name and middle initial Last | | Last name | ast name | | Your social security number | |
| MICHAEL | | R WILSON | | 555-44-3333 | } | |
| Hom | ne address (number and street). If you have a P. | O. box, see instructions. | | Apt. no. | | |
| City, | town, or post office | State | ZIP code | | | |
| | ng Status ck only one box. Single Married filing jointly (even if only one had Married filing separately (MFS) Head of household (HOH) Qualifying surviving spouse (QSS) | d income) | | | | |
| Inc | ome | | | | | |
| 1a | Total amount from Form(s) W-2, box 1 (se | ee instructions) | | 65,000.00 | 1a | |
| 2b | Taxable interest | | | 1,250.00 | 2b | |
| 9 | Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income | | | 97,950.00 | 9 | |
| 11 | Subtract line 10 from line 9. This is your a | djusted gross income | | 97,950.00 | 11 | |
| 12 | Standard deduction or itemized deduction | s (from Schedule A) | | 14,600.00 | 12 | |

83,350.00 15

15 Subtract line 14 from line 11. If zero or less, enter -0-. This is your taxable income

| Tax and Credits | | | | | | | | |
|---|---|------|-----------|-----|--|--|--|--|
| 16 | Tax (see instructions). Check if any from Form(s): | | 13,644.50 | 16 | | | | |
| 24 | Add lines 22 and 23. This is your total tax | | 13,644.50 | 24 | | | | |
| Payments | | | | | | | | |
| 25 | Federal income tax withheld from: | | | | | | | |
| | a Form(s) W-2 | | 12,600.00 | 25a | | | | |
| 33 | Add lines 25d, 26, and 32. These are your total payments | | 12,600.00 | 33 | | | | |
| Amount You Owe | | | | | | | | |
| 37 | Subtract line 33 from line 24. This is the amount you owe | | 1,044.50 | 37 | | | | |
| | | | | | | | | |
| 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. | | | | | | | | |
| Your | signature | Date | | | | | | |

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Form 1040 (2024)

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