

# Federal Electronic Filing Instructions

Tax Year 2024

**You are responsible for confirming the status of your electronically filed return.** You can confirm the status of your return by going to <https://www.taxact.com/ef/efile-center>. You will need to enter the primary social security number and last name on the return along with your ZIP code.

**Self Select PIN:** You do not need to mail any paper signature forms to the IRS. Your return has been successfully filed once you receive your acceptance from the IRS.

**Balance Due:**

A direct withdrawal of the balance due (\$2,666) will be scheduled for March 23, 2025 once the return is accepted by the IRS.

For the year Jan. 1–Dec. 31, 2024, or other tax year beginning _____, 2024, ending _____			See separate instructions.
Your first name and middle initial <b>Sixten A</b>		Last name <b>Linusson</b>	Your social security number <b>851-67-8224</b>
If joint return, spouse's first name and middle initial <b>Janelle L</b>		Last name <b>Stetter</b>	Spouse's social security number <b>159-68-7557</b>
Home address (number and street). If you have a P.O. box, see instructions. <b>2060 Stone Mill Rd</b>			Apt. no.
City, town, or post office. If you have a foreign address, also complete spaces below. <b>Lancaster</b>		State <b>PA</b>	ZIP code <b>17603</b>
Foreign country name		Foreign province/state/county	Foreign postal code
			<input type="checkbox"/> You <input type="checkbox"/> Spouse

**Filing Status** ☐ Single ☐ Head of household (HOH)

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 name (see instructions and attach statement if required): \_\_\_\_\_

**Digital Assets** At any time during 2024, did you: (a) receive (as a reward, award, or payment for property or services); or (b) sell, exchange, or otherwise dispose of a digital asset (or a financial interest in a digital asset)? (See instructions.) ☐ Yes ☒ No

**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, 1960 ☐ Are blind **Spouse:** ☐ Was born before January 2, 1960 ☐ Is blind

	(see instructions):		(2) Social security number	(3) Relationship to you	(4) Check if qualifies for (see instructions):	
	(1) First name	Last name			Child tax credit	Credit for other dependents
If more than four dependents, see instructions and check here <input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>

<b>Income</b>  <b>Attach Form(s) W-2 here. Also attach Forms W-2G and 1099-R if tax was withheld.</b>  If you did not get a Form W-2, see instructions.  <b>Attach Sch. B if required.</b>  <b>Standard Deduction for-</b> <ul style="list-style-type: none"><li>Single or Married filing separately, \$14,600</li><li>Married filing jointly or Qualifying surviving spouse, \$29,200</li><li>Head of household, \$21,900</li><li>If you checked any box under Standard Deduction, see instructions.</li></ul>	<b>1a</b> Total amount from Form(s) W-2, box 1 (see instructions) . . . . .	<b>1a</b>	<b>66,837.</b>	
	<b>b</b> Household employee wages not reported on Form(s) W-2 . . . . .	<b>1b</b>		
	<b>c</b> Tip income not reported on line 1a (see instructions) . . . . .	<b>1c</b>		
	<b>d</b> Medicaid waiver payments not reported on Form(s) W-2 (see instructions) . . . . .	<b>1d</b>		
	<b>e</b> Taxable dependent care benefits from Form 2441, line 26 . . . . .	<b>1e</b>		
	<b>f</b> Employer-provided adoption benefits from Form 8839, line 29 . . . . .	<b>1f</b>		
	<b>g</b> Wages from Form 8919, line 6 . . . . .	<b>1g</b>		
	<b>h</b> Other earned income (see instructions) . . . . .	<b>1h</b>		
	<b>i</b> Nontaxable combat pay election (see instructions) . . . . . <b>1i</b>			
	<b>z</b> Add lines 1a through 1h . . . . .	<b>1z</b>	<b>66,837.</b>	
	<b>2a</b> Tax-exempt interest . . . . . <b>2a</b>	<b>2b</b> Taxable interest . . . . .	<b>2b</b>	
	<b>3a</b> Qualified dividends . . . . . <b>3a</b>	<b>b</b> Ordinary dividends . . . . .	<b>3b</b>	
	<b>4a</b> IRA distributions . . . . . <b>4a</b>	<b>b</b> Taxable amount . . . . .	<b>4b</b>	
	<b>5a</b> Pensions and annuities . . . . . <b>5a</b>	<b>b</b> Taxable amount . . . . .	<b>5b</b>	
	<b>6a</b> Social security benefits . . . . . <b>6a</b>	<b>b</b> Taxable amount . . . . .	<b>6b</b>	
<b>c</b> If you elect to use the lump-sum election method, check here (see instructions) . . . . . <input type="checkbox"/>				
<b>7</b> Capital gain or (loss). Attach Schedule D if required. If not required, check here . . . . . <input type="checkbox"/>	<b>7</b>			
<b>8</b> Additional income from Schedule 1, line 10 . . . . .	<b>8</b>			
<b>9</b> Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your <b>total income</b> . . . . .	<b>9</b>	<b>66,837.</b>		
<b>10</b> Adjustments to income from Schedule 1, line 26 . . . . .	<b>10</b>			
<b>11</b> Subtract line 10 from line 9. This is your <b>adjusted gross income</b> . . . . .	<b>11</b>	<b>66,837.</b>		
<b>12</b> <b>Standard deduction or itemized deductions</b> (from Schedule A) . . . . .	<b>12</b>	<b>29,200.</b>		
<b>13</b> Qualified business income deduction from Form 8995 or Form 8995-A . . . . .	<b>13</b>			
<b>14</b> Add lines 12 and 13 . . . . .	<b>14</b>	<b>29,200.</b>		
<b>15</b> Subtract line 14 from line 11. If zero or less, enter -0-. This is your <b>taxable income</b> . . . . .	<b>15</b>	<b>37,637.</b>		

<b>Tax and Credits</b>	<b>16</b>	<b>Tax</b> (see instructions). Check if any from Form(s): 1 <input type="checkbox"/> 8814 2 <input type="checkbox"/> 4972 3 <input type="checkbox"/> _____	<b>16</b>	<b>4,051.</b>
	<b>17</b>	Amount from Schedule 2, line 3	<b>17</b>	
	<b>18</b>	Add lines 16 and 17	<b>18</b>	<b>4,051.</b>
	<b>19</b>	Child tax credit or credit for other dependents from Schedule 8812	<b>19</b>	
	<b>20</b>	Amount from Schedule 3, line 8	<b>20</b>	<b>200.</b>
	<b>21</b>	Add lines 19 and 20	<b>21</b>	<b>200.</b>
	<b>22</b>	Subtract line 21 from line 18. If zero or less, enter -0-	<b>22</b>	<b>3,851.</b>
	<b>23</b>	Other taxes, including self-employment tax, from Schedule 2, line 21	<b>23</b>	
<b>24</b>	Add lines 22 and 23. This is your <b>total tax</b>	<b>24</b>	<b>3,851.</b>	

<b>Payments</b>	<b>25</b>	Federal income tax withheld from:		
	<b>a</b>	Form(s) W-2	<b>25a</b>	<b>1,292.</b>
	<b>b</b>	Form(s) 1099	<b>25b</b>	
	<b>c</b>	Other forms (see instructions)	<b>25c</b>	
	<b>d</b>	Add lines 25a through 25c	<b>25d</b>	<b>1,292.</b>
	<b>26</b>	2024 estimated tax payments and amount applied from 2023 return	<b>26</b>	
	<b>27</b>	Earned income credit (EIC) <b>NO</b>	<b>27</b>	
	<b>28</b>	Additional child tax credit from Schedule 8812	<b>28</b>	
	<b>29</b>	American opportunity credit from Form 8863, line 8	<b>29</b>	
	<b>30</b>	Reserved for future use	<b>30</b>	
	<b>31</b>	Amount from Schedule 3, line 15	<b>31</b>	
	<b>32</b>	Add lines 27, 28, 29, and 31. These are your <b>total other payments and refundable credits</b>	<b>32</b>	<b>0.</b>
<b>33</b>	Add lines 25d, 26, and 32. These are your <b>total payments</b>	<b>33</b>	<b>1,292.</b>	

<b>Refund</b>	<b>34</b>	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you <b>overpaid</b>	<b>34</b>	<b>0.</b>
	<b>35a</b>	Amount of line 34 you want <b>refunded to you</b> . If Form 8888 is attached, check here <input type="checkbox"/>	<b>35a</b>	<b>0.</b>
	<b>b</b>	Routing number <b>XXXXXX</b>	<b>c</b> Type: <input type="checkbox"/> Checking <input type="checkbox"/> Savings	
	<b>d</b>	Account number <b>XXXXXX</b>		
<b>36</b>	Amount of line 34 you want <b>applied to your 2025 estimated tax</b>	<b>36</b>		

<b>Amount You Owe</b>	<b>37</b>	Subtract line 33 from line 24. This is the <b>amount you owe</b> . For details on how to pay, go to <a href="http://www.irs.gov/Payments">www.irs.gov/Payments</a> or see instructions	<b>37</b>	<b>2,666.</b>
	<b>38</b>	Estimated tax penalty (see instructions)	<b>38</b>	<b>107.</b>

<b>Third Party Designee</b>	Do you want to allow another person to discuss this return with the IRS? See instructions <input type="checkbox"/> <b>Yes</b> . Complete below. <input type="checkbox"/> <b>No</b>		
	Designee's name	Phone no.	Personal identification number (PIN)

<b>Sign Here</b>	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.)
			<b>Software Engineer</b>	
	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.)
		<b>unemployed</b>		
Phone no. <b>(717) 696-8551</b>		Email address		

<b>Paid Preparer Use Only</b>	Preparer's signature		Date	PTIN	Check if: <input type="checkbox"/> Self-employed
	Preparer's name		Phone no.		
	Firm's name				
	Firm's address				
Firm's EIN					

**SCHEDULE 3**  
**(Form 1040)**

Department of the Treasury  
Internal Revenue Service

**Additional Credits and Payments**

Attach to Form 1040, 1040-SR, or 1040-NR.  
Go to [www.irs.gov/Form1040](http://www.irs.gov/Form1040) for instructions and the latest information.

OMB No. 1545-0074

**2024**

Attachment  
Sequence No. **03**

Name(s) shown on Form 1040, 1040-SR, or 1040-NR

**Sixten A Linusson and Janelle L Stetter**

Your social security number

**851-67-8224**

**Part I Nonrefundable Credits**


<b>1</b>	Foreign tax credit. Attach Form 1116 if required . . . . .	<b>1</b>	
<b>2</b>	Credit for child and dependent care expenses from Form 2441, line 11. Attach Form 2441 . . . . .	<b>2</b>	
<b>3</b>	Education credits from Form 8863, line 19 . . . . .	<b>3</b>	
<b>4</b>	Retirement savings contributions credit. Attach Form 8880 . . . . .	<b>4</b>	<b>200.</b>
<b>5a</b>	Residential clean energy credit from Form 5695, line 15 . . . . .	<b>5a</b>	
<b>b</b>	Energy efficient home improvement credit from Form 5695, line 32 . . . . .	<b>5b</b>	
<b>6</b>	Other nonrefundable credits:		
<b>a</b>	General business credit. Attach Form 3800 . . . . .	<b>6a</b>	
<b>b</b>	Credit for prior year minimum tax. Attach Form 8801 . . . . .	<b>6b</b>	
<b>c</b>	Adoption credit. Attach Form 8839 . . . . .	<b>6c</b>	
<b>d</b>	Credit for the elderly or disabled. Attach Schedule R . . . . .	<b>6d</b>	
<b>e</b>	Reserved for future use . . . . .	<b>6e</b>	
<b>f</b>	Clean vehicle credit. Attach Form 8936 . . . . .	<b>6f</b>	
<b>g</b>	Mortgage interest credit. Attach Form 8396 . . . . .	<b>6g</b>	
<b>h</b>	District of Columbia first-time homebuyer credit. Attach Form 8859 . . . . .	<b>6h</b>	
<b>i</b>	Qualified electric vehicle credit. Attach Form 8834 . . . . .	<b>6i</b>	
<b>j</b>	Alternative fuel vehicle refueling property credit. Attach Form 8911 . . . . .	<b>6j</b>	
<b>k</b>	Credit to holders of tax credit bonds. Attach Form 8912 . . . . .	<b>6k</b>	
<b>l</b>	Amount on Form 8978, line 14. See instructions . . . . .	<b>6l</b>	
<b>m</b>	Credit for previously owned clean vehicles. Attach Form 8936 . . . . .	<b>6m</b>	
<b>z</b>	Other nonrefundable credits. List type and amount: _____	<b>6z</b>	
<b>7</b>	Total other nonrefundable credits. Add lines 6a through 6z . . . . .	<b>7</b>	
<b>8</b>	Add lines 1 through 4, 5a, 5b, and 7. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 20 . . . . .	<b>8</b>	<b>200.</b>

**Part II Other Payments and Refundable Credits**

<b>9</b>	Net premium tax credit. Attach Form 8962. . . . .	<b>9</b>	
<b>10</b>	Amount paid with request for extension to file (see instructions) . . . . .	<b>10</b>	
<b>11</b>	Excess social security and tier 1 RRTA tax withheld . . . . .	<b>11</b>	
<b>12</b>	Credit for federal tax on fuels. Attach Form 4136 . . . . .	<b>12</b>	
<b>13</b>	Other payments or refundable credits:		
<b>a</b>	Form 2439 . . . . .	<b>13a</b>	
<b>b</b>	Section 1341 credit for repayment of amounts included in income from earlier years . . . . .	<b>13b</b>	
<b>c</b>	Net elective payment election amount from Form 3800, Part III, line 6, column (j) . . . . .	<b>13c</b>	
<b>d</b>	Deferred amount of net 965 tax liability (see instructions) . . . . .	<b>13d</b>	
<b>z</b>	Other refundable credits (see instructions): _____	<b>13z</b>	
<b>14</b>	Total other payments or refundable credits. Add lines 13a through 13z . . . . .	<b>14</b>	
<b>15</b>	Add lines 9 through 12 and 14. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 31. . . . .	<b>15</b>	<b>0.</b>

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

Schedule 3 (Form 1040) 2024



**You *cannot* take this credit if *either* of the following applies.**

- The amount on Form 1040, 1040-SR, or 1040-NR, line 11, is more than \$38,250 (\$57,375 if head of household; \$76,500 if married filing jointly).
- The person(s) who made the qualified contribution or elective deferral **(a)** was born after January 1, 2007; **(b)** is claimed as a dependent on someone else's 2024 tax return; or **(c)** was a **student** (see instructions).

	(a) You	(b) Your spouse
1 Traditional and Roth IRA contributions, and ABLE account contributions by the designated beneficiary for 2024. <b>Do not</b> include rollover contributions . . .		
2 Elective deferrals to a 401(k) or other qualified employer plan, voluntary employee contributions, and 501(c)(18)(D) plan contributions for 2024 (see instructions) . . . . .	18,386.	
3 Add lines 1 and 2 . . . . .	18,386.	
4 Certain distributions received <b>after</b> 2021 and <b>before</b> the due date (including extensions) of your 2024 tax return (see instructions). If married filing jointly, include <b>both</b> spouses' amounts in <b>both</b> columns. See instructions for an exception . . . . .		
5 Subtract line 4 from line 3. If zero or less, enter -0- . . . . .	18,386.	
6 In each column, enter the <b>smaller</b> of line 5 or \$2,000 . . . . .	2,000.	
7 Add the amounts on line 6. If zero, <b>stop</b> ; you can't take this credit . . . . .		2,000.
8 Enter the amount from Form 1040, 1040-SR, or 1040-NR, line 11* . . . . .	66,837.	
9 Enter the applicable decimal amount from the table below.		
		x 010
10 Multiply line 7 by line 9 . . . . .		200.
11 Limitation based on tax liability. Enter the amount from the Credit Limit Worksheet in the instructions . . . . .		4,051.
12 <b>Credit for qualified retirement savings contributions.</b> Enter the <b>smaller</b> of line 10 or line 11 here and on Schedule 3 (Form 1040), line 4 . . . . .		200.

If line 8 is-		And your filing status is-		
Over—	But not over—	Married filing jointly	Head of household	Single, Married filing separately, or Qualifying surviving spouse
---	\$23,000	0.5	0.5	0.5
\$23,000	\$25,000	0.5	0.5	0.2
\$25,000	\$34,500	0.5	0.5	0.1
\$34,500	\$37,500	0.5	0.2	0.1
\$37,500	\$38,250	0.5	0.1	0.1
\$38,250	\$46,000	0.5	0.1	0.0
\$46,000	\$50,000	0.2	0.1	0.0
\$50,000	\$57,375	0.1	0.1	0.0
\$57,375	\$76,500	0.1	0.0	0.0
\$76,500	---	0.0	0.0	0.0

**Note:** If line 9 is zero, **stop**; you can't take this credit.

# Pennsylvania Electronic Filing Instructions

## Tax Year 2024

These instructions are provided to help you understand and complete the final steps for electronically filing your Pennsylvania return. We highly recommend that you print these instructions for your reference.

### **You are responsible for confirming the status of your electronically filed return.**

You can confirm the status of your return by going to

<https://www.taxact.com/ef/efile-center>. You will need to enter the Primary Social Security Number and Last Name on the return along with your ZIP Code.

## **Pennsylvania Individual Income Tax Return**

**As a Self Select PIN participant, you do not need to complete any paper signature forms for the Pennsylvania Department of Revenue. Your PA income tax return has been successfully filed once you receive your acceptance from the Pennsylvania Department of Revenue.**

### **Balance Due Amount:**

\$0

### **Pennsylvania Payment of Tax Due:**

Personal income tax payments equal to or greater than \$15,000 must be made electronically. Payments not made electronically will be subject to a penalty equaling 3 percent of the payment amount not to exceed \$500.

If you are filing electronically, you can request that the Department process an ACH debit from your checking or savings account, or you can pay by credit card through Official Payment Corp's website at [www.officialpayments.com](http://www.officialpayments.com) or via telephone at 1-800-2PAYTAX (1-800-272-9829). They charge a 2.49 percent convenience fee (\$1.00 minimum charge) for processing the credit card transaction. If you wish to pay by check or money order, mail to PA Department of Revenue, 1 Revenue Place, Harrisburg PA 17129-0001. Please indicate your Social Security number and the tax year on your payment.

**\*\*If you would like to check on the status of your return you may call the toll-free automated phone service at 1-888-PATAXES(1-888-728-2937), 24 hours a day, 7 days a week. The PA Department of Revenue advises that you should wait at least 30 days from the date of acknowledgment before calling the number.**

**PA-40 - 2024**  
**Pennsylvania Income Tax Return**  
 ENTER ONE LETTER OR NUMBER IN EACH BOX (08-24)

851678224 159687557

LINUSSON

SIXTEN A Occupation SOFTWARE E

JANELLE L Occupation UNEMPLOYED

STETTER

2060 STONE MILL RD

LANCASTER PA 17603

717-696-8551 36520

N Extension. N Amended Return.

R Residency Status.  
PAResident/NNonresident/Part-Year Resident  
from toJ Single, Married/Filing Jointly,  
Married/Filing Separately, Final Return

N Deceased

N Taxpayer Date of Death

N Spouse Date of Death

N Farmers.

School District Name PENN MANOR1a Gross Compensation. Do not include exempt income, such as combat zone pay and  
qualifying retirement benefits. See the instructions.

1b Unreimbursed Employee Business Expenses.

1c Net Compensation. Subtract Line 1b from Line 1a.

2 Interest Income. Complete **PA Schedule A** if required.3 Dividend and Capital Gains Distributions Income. Complete **PA Schedule B** if required.

4 Net Income or Loss from the Operation of a Business, Profession, or Farm.

5 Net Gain or Loss from the Sale, Exchange, or Disposition of Property.

6 Net Income or Loss from Rents, Royalties, Patents, or Copyrights.

7 Estate or Trust Income. Complete and submit **PA Schedule J**.8 Gambling and Lottery Winnings. Complete and submit **PA Schedule T**.9 **Total PA Taxable Income.** Add only the positive income amounts from Lines 1c,  
2, 3, 4, 5, 6, 7, and 8. DO NOT ADD any losses reported on Lines 4, 5, or 6.10 **Other Deductions.** Enter the appropriate code for the type of deduction.  
See the instructions for additional information.11 **Adjusted PA Taxable Income.** Subtract Line 10 from Line 9.

1a 85223

1b 0

1c 85223

2 0

3 0

4 0

5 0

6 0

7 0

8 0

9 85223

10 0

11 85223



PA-40 - 2024

Social Security Number

851678224

Name(s) SIXTEN A LINUSSON AND JANELL

12 PA Tax Liability. Multiply Line 11 by 3.07 percent (0.0307).

13 Total PA Tax Withheld. See the instructions.

14 Credit from your 2023 PA Income Tax return.

15 2024 Estimated Installment Payments. REV-459B included.

16 2024 Extension Payment.

17 Nonresident Tax Withheld from your PA Schedule(s) NRK-1. (Nonresidents only)

18 Total Estimated Payments and Credits. Add Lines 14, 15, 16, and 17.

## Tax Forgiveness Credit. Submit PA Schedule SP.

19a Filing Status: 01 Unmarried or Separated 02 Married 03 Deceased

19b Dependents, Section II, Line 2, PA Schedule SP

20 Total Eligibility Income from Section III, Line 11, PA Schedule SP.

21 Tax Forgiveness Credit from Section IV, Line 16, PA Schedule SP.

22 Resident Credit. Submit your PA Schedule(s) G-L and/or RK-1.

23 Total Other Credits. Submit your PA Schedule OC and/or PA Schedule DC.

24 TOTAL PAYMENTS and CREDITS. Add Lines 13, 18, 21, 22, and 23.

25 USE TAX. Due on internet, mail order, or out-of-state purchases. See instructions.

26 TAX DUE. If the total of Line 12 and Line 25 is more than line 24, enter the difference here.

27 Penalties and Interest. See the instructions. Enter Code:

If including form REV-1630/REV-1630A, mark the box.

28 TOTAL PAYMENT DUE. See the instructions.

29 OVERPAYMENT. If Line 24 is more than the total of Line 12, Line 25, and Line 27, enter the difference here.

The total of Lines 30 through 36 must equal Line 29.

30 Refund - Amount of Line 29 you want as a check mailed to you.

31 Credit - Amount of Line 29 you want as a credit to your 2025 estimated account.

32 Refund donation line. Enter the organization code and donation amount. See instructions.

33 Refund donation line. Enter the organization code and donation amount. See instructions.

34 Refund donation line. Enter the organization code and donation amount. See instructions.

35 Refund donation line. Enter the organization code and donation amount. See instructions.

36 Refund donation line. Enter the organization code and donation amount. See instructions.

Signature(s). Under penalties of perjury, I (we) declare that I (we) have examined this return, including all accompanying schedules and statements, and to the best of my (our) belief, they are true, correct, and complete.

Your Signature

Spouse's Signature, if filing jointly

Preparer's Name and Telephone Number

Date

E-File Opt Out

N

Firm FEIN

Preparer's PTIN

