

For the year Jan. 1–Dec. 31, 2024, or other tax year beginning _____, 2024, ending _____, 20_____

See separate instructions.

Your first name and middle initial		Last name		Your identifying number (see instructions)	
HSIANG-WEI		HUANG		750 43 6908	
Home address (number and street). If you have a P.O. box, see instructions.					
4609 UNION BAY PL NE					
APT 251					
City, town, or post office. If you have a foreign address, also complete spaces below.				State	ZIP code
SEATTLE				WA	98105
Foreign country name		Foreign province/state/county		Foreign postal code	

Filing Status	<input checked="" type="checkbox"/> Single	<input type="checkbox"/> Married filing separately (MFS)	<input type="checkbox"/> Qualifying surviving spouse (QSS)	<input type="checkbox"/> Estate	<input type="checkbox"/> Trust
	If you checked the QSS box, enter the child's name if the qualifying person is a child but not your dependent:				
Check only one box.					

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.)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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Dependents (see instructions):	(1) First name	Last name	(2) Dependent's identifying number	(3) Relationship to you	(4) Check the box if qualifies for (see inst.):
					Child tax credit
					Credit for other dependents
					<input type="checkbox"/>
					<input type="checkbox"/>
If more than four dependents, see instructions and check here <input type="checkbox"/>					<input type="checkbox"/>

Income Effectively Connected With U.S. Trade or Business	1a	Total amount from Form(s) W-2, box 1 (see instructions)			1a	78885	
	b	Household employee wages not reported on Form(s) W-2			1b	0	
	c	Tip income not reported on line 1a (see instructions)			1c	0	
	d	Medicaid waiver payments not reported on Form(s) W-2 (see instructions)			1d	0	
	e	Taxable dependent care benefits from Form 2441, line 26			1e	0	
	f	Employer-provided adoption benefits from Form 8839, line 29			1f	0	
	g	Wages from Form 8919, line 6			1g	0	
	h	Other earned income (see instructions)			1h	0	
	i	Reserved for future use			1i		
	j	Reserved for future use			1j		
	k	Total income exempt by a treaty from Schedule OI (Form 1040-NR), item L, line 1(e)			1k	0	
	z	Add lines 1a through 1h			1z	78885	
	2a	Tax-exempt interest	2a	0	b Taxable interest	2b	2968
	3a	Qualified dividends	3a	155	b Ordinary dividends	3b	155
	4a	IRA distributions	4a		b Taxable amount	4b	0
5a	Pensions and annuities	5a		b Taxable amount	5b	0	
6	Reserved for future use			6			
7	Capital gain or (loss). Attach Schedule D (Form 1040) if required. If not required, check here <input type="checkbox"/>			7	446		
8	Additional income from Schedule 1 (Form 1040), line 10			8	0		
9	Add lines 1z, 2b, 3b, 4b, 5b, 7, and 8. This is your total effectively connected income			9	82454		
10	Adjustments to income from Schedule 1 (Form 1040), line 26. These are your total adjustments to income			10	0		
11	Subtract line 10 from line 9. This is your adjusted gross income			11	82454		
12	Itemized deductions (from Schedule A (Form 1040-NR)) or, for certain residents of India, standard deduction (see instructions)			12	0		
13a	Qualified business income deduction from Form 8995 or Form 8995-A	13a	0				
b	Exemptions for estates and trusts only (see instructions)	13b	0				
c	Add lines 13a and 13b	13c		13c	0		
14	Add lines 12 and 13c	14		14	0		
15	Subtract line 14 from line 11. If zero or less, enter -0-. This is your taxable income			15	82454		

Tax and Credits	16	Tax (see instructions). Check if any from Form(s): 1 <input type="checkbox"/> 8814 2 <input type="checkbox"/> 4972 3 <input type="checkbox"/>	16	13177
	17	Amount from Schedule 2 (Form 1040), line 3	17	0
	18	Add lines 16 and 17	18	13177
	19	Child tax credit or credit for other dependents from Schedule 8812 (Form 1040)	19	0
	20	Amount from Schedule 3 (Form 1040), line 8	20	0
	21	Add lines 19 and 20	21	0
	22	Subtract line 21 from line 18. If zero or less, enter -0-	22	13177
	23a	Tax on income not effectively connected with a U.S. trade or business from Schedule NEC (Form 1040-NR), line 15	23a	0
	b	Other taxes, including self-employment tax, from Schedule 2 (Form 1040), line 21	23b	0
	c	Transportation tax (see instructions)	23c	0
	d	Add lines 23a through 23c	23d	0
	24	Add lines 22 and 23d. This is your total tax	24	13177
Payments	25	Federal income tax withheld from:		
	a	Form(s) W-2	25a	11586
	b	Form(s) 1099	25b	0
	c	Other forms (see instructions)	25c	0
	d	Add lines 25a through 25c	25d	11586
	e	Form(s) 8805	25e	0
	f	Form(s) 8288-A	25f	0
	g	Form(s) 1042-S	25g	0
	26	2024 estimated tax payments and amount applied from 2023 return	26	0
	27	Reserved for future use	27	
	28	Additional child tax credit from Schedule 8812 (Form 1040)	28	0
	29	Credit for amount paid with Form 1040-C	29	0
	30	Reserved for future use	30	
	31	Amount from Schedule 3 (Form 1040), line 15	31	0
	32	Add lines 28, 29, and 31. These are your total other payments and refundable credits	32	0
	33	Add lines 25d, 25e, 25f, 25g, 26, and 32. These are your total payments	33	11586
Refund	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid	34	0
	35a	Amount of line 34 you want refunded to you . If Form 8888 is attached, check here <input type="checkbox"/>	35a	0
	b	Routing number	c Type: <input type="checkbox"/> Checking <input type="checkbox"/> Savings	
	d	Account number		
	e	If you want your refund check mailed to an address outside the United States not shown on page 1, enter it here.		
	36	Amount of line 34 you want applied to your 2025 estimated tax	36	0
Amount You Owe	37	Subtract line 33 from line 24. This is the amount you owe . For details on how to pay, go to www.irs.gov/Payments or see instructions	37	1591
	38	Estimated tax penalty (see instructions)	38	0
Third Party Designee	Do you want to allow another person to discuss this return with the IRS? See instructions. <input type="checkbox"/> Yes . Complete below. <input checked="" type="checkbox"/> No			
	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.)
			STUDENT	
	Phone no. 206-670-7312	Email address	hsiangwei0903@gmail.com	
Paid Preparer Use Only	Preparer's name	Preparer's signature	Date	PTIN
	Firm's name	Check if: <input type="checkbox"/> Self-employed		
	Firm's address	Phone no.		
		Firm's EIN		