

Form 1040

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

2024

OMB No. 1545-0074

IRS Use Only—Do not write or staple in this space.

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 social security number																																																																											
If joint return, spouse's first name and middle initial		Last name			Spouse's social security number																																																																											
Home address (number and street). If you have a P.O. box, see instructions.			Apt. no.		Presidential Election Campaign																																																																											
City, town, or post office. If you have a foreign address, also complete spaces below.			State	ZIP code	Check here if you, or your spouse if filing jointly, want \$3 to go to this fund. Checking a box below will not change your tax or refund.																																																																											
Foreign country name		Foreign province/state/county		Foreign postal code	<input type="checkbox"/> You <input type="checkbox"/> Spouse																																																																											
Filing Status <input type="checkbox"/> Single <input type="checkbox"/> Head of household (HOH) Check only one box. <input type="checkbox"/> Married filing jointly (even if only one had income) <input type="checkbox"/> Qualifying surviving spouse (QSS) <input type="checkbox"/> Married filing separately (MFS) 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: _____ <input type="checkbox"/> 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 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 type="checkbox"/> No																																																																																
Standard Deduction Someone can claim: <input type="checkbox"/> You as a dependent <input type="checkbox"/> Your spouse as a dependent <input type="checkbox"/> Spouse itemizes on a separate return or you were a dual-status alien																																																																																
Age/Blindness You: <input type="checkbox"/> Were born before January 2, 1960 <input type="checkbox"/> Are blind Spouse: <input type="checkbox"/> Was born before January 2, 1960 <input type="checkbox"/> Is blind																																																																																
Dependents (see instructions): <table border="1"> <thead> <tr> <th>(1) First name</th> <th>Last name</th> <th>(2) Social security number</th> <th>(3) Relationship to you</th> <th>(4) Check the box if qualifies for (see instructions): Child tax credit</th> <th>Credit for other dependents</th> </tr> </thead> <tbody> <tr><td> </td><td> </td><td> </td><td> </td><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr> </tbody> </table>						(1) First name	Last name	(2) Social security number	(3) Relationship to you	(4) Check the box if qualifies for (see instructions): Child tax credit	Credit for other dependents					<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"/>	<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>																																	
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Standard Deduction for— <ul style="list-style-type: none"> Single or Married filing separately, \$14,600 Married filing jointly or Qualifying surviving spouse, \$29,200 Head of household, \$21,900 If you checked any box under Standard Deduction, see instructions. 																																																																																

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
	17	Amount from Schedule 2, line 3			17
	18	Add lines 16 and 17			18
	19	Child tax credit or credit for other dependents from Schedule 8812			19
	20	Amount from Schedule 3, line 8			20
	21	Add lines 19 and 20			21
	22	Subtract line 21 from line 18. If zero or less, enter -0			22
	23	Other taxes, including self-employment 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 from:			
	a	Form(s) W-2			25a
	b	Form(s) 1099			25b
	c	Other forms (see instructions)			25c
	d	Add lines 25a through 25c			25d
If you have a qualifying child, attach Sch. EIC.	26	2024 estimated tax payments and amount applied from 2023 return			26
	27	Earned income credit (EIC)			27
	28	Additional child tax credit from Schedule 8812			28
	29	American opportunity credit from Form 8863, line 8			29
	30	Reserved for future use			30
	31	Amount from Schedule 3, line 15			31
	32	Add lines 27, 28, 29, and 31. These are your total other payments and refundable credits			32
	33	Add lines 25d, 26, and 32. These are your total payments			33
Refund	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid			34
Direct deposit? See instructions.	35a	Amount of line 34 you want refunded to you . If Form 8888 is attached, check here <input type="checkbox"/>			35a
	b	Routing number	c Type:	<input type="checkbox"/> Checking <input type="checkbox"/> Savings	
	d	Account number			
	36	Amount of line 34 you want applied to your 2025 estimated tax			36
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
	38	Estimated tax penalty (see instructions)			38
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 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.				
Joint return? See instructions. Keep a copy for your records.	Your signature Isabella	Date 02/10/2025	Your occupation Spouse's occupation	If the IRS sent you an Identity Protection PIN, enter it here (see inst.)	If the IRS sent your spouse an Identity Protection PIN, enter it here (see inst.)
	Phone no.	Email address			
Paid Preparer Use Only	Preparer's name	Preparer's signature	Date	PTIN	Check if: <input type="checkbox"/> Self-employed
	Firm's name				Phone no.
	Firm's address				Firm's EIN