

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 Check only one box.	<input type="checkbox"/> Single	<input type="checkbox"/> Head of household (HOH)
	<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): If more than four dependents, see instructions and check here . . . <input type="checkbox"/>	(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"/>

Income	1a Total amount from Form(s) W-2, box 1 (see instructions)	1a
Attach Form(s) W-2 here. Also attach Forms W-2G and 1099-R if tax was withheld.	b Household employee wages not reported on Form(s) W-2	1b
If you did not get a Form W-2, see instructions.	c Tip income not reported on line 1a (see instructions)	1c
Attach Sch. B if required.	d Medicaid waiver payments not reported on Form(s) W-2 (see instructions)	1d
	e Taxable dependent care benefits from Form 2441, line 26	1e
	f Employer-provided adoption benefits from Form 8839, line 29	1f
	g Wages from Form 8919, line 6	1g
	h Other earned income (see instructions)	1h
	i Nontaxable combat pay election (see instructions)	1i
	z Add lines 1a through 1h	1z
	2a Tax-exempt interest	2a
	3a Qualified dividends	3a
	4a IRA distributions	4a
	5a Pensions and annuities	5a
	6a Social security benefits	6a
	c If you elect to use the lump-sum election method, check here (see instructions) <input type="checkbox"/>	
	7 Capital gain or (loss). Attach Schedule D if required. If not required, check here <input type="checkbox"/>	7
	8 Additional income from Schedule 1, line 10	8
	9 Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income	9
	10 Adjustments to income from Schedule 1, line 26	10
	11 Subtract line 10 from line 9. This is your adjusted gross income	11
	12 Standard deduction or itemized deductions (from Schedule A)	12
	13 Qualified business income deduction from Form 8995 or Form 8995-A	13
	14 Add lines 12 and 13	14
	15 Subtract line 14 from line 11. If zero or less, enter -0-. This is your taxable income	15

Standard Deduction for—

- 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.

