E 1040-SR Department of the Treasury-Internal Revenue Service U.S. Income Tax Return for Seniors 2024 OMB No. 1545-0074

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For the year Jan	. 1-Dec	c. 31, 2024, or other ta	x year beginning		, 2024, enc	ing		, 20	See se	parate in	structions.	
Your first nam	e and	l middle initial		Last n	ame				Your s	ocial sec	urity number	
If joint return, spouse's first name and middle initial Last n					name					Spouse's social security number		
Home addres	s (nun	nber and street). If	you have a P.O. b	ox, see	instructions.			Apt. no.	Preside	ential Elec	— tion Campaign	
City town or	nost o	ffice If you have a	foreign address als	so com	plete spaces below.	State	1 7	IP code		here if you if filing jo	u, or your intly, want \$3	
IONE				WA			.ir code	to go to		l. Checking a		
Foreign country name				Foreign province/state/county Foreign				eign postal code	your tax or refund.			
 Filing		Single 🗵 M	arried filing jo	intly	(even if only on	e had in	come)	☐ Married		∐ You separat	Spouse tely (MFS)	
Status			, ,		ualifying surviv	• .	•	•	J	,	,	
Check only one box.					ame of your spou: ut not your depen		checked	the HOH or C)SS bo	ox, enter	the child's	
					l-status alien spo ctions and attach				entire t	ax year	, check the	
Digital Assets					a) receive (as a change, or othe							
	(or	a financial into	erest in a digi	tal as	set)? (See instr	uctions.	<u>.)</u>	<u> </u>	_ •	☐ Yes	⊠ No	
Standard Deduction					dependent eturn or you w				ident			
Deduction		_	•		ere born before				olind			
	Age	e/Blindness			as born before							
Dependents	•	<u>.</u>			(2) Social security nun	ber (3) Rel		(4) Check the bo	x if quali	fies for (se	e instructions):	
(see instructions)		Irst name	Last name				you	Child tax cre	edit	Credit for o	ther dependents	
If more than four dependents, see				-								
instructions and check here								 			무	
Income	1a	Total amoun	t from Form(s		2. box 1 (see in	struction			1:		5254	
Attach Form(s) W-2			•	•	•		•					
here. Also attach Forms					•	. ,			10	;		
W-2G and 1099-R if tax	ď		•		•	•	-2 (see	instructions)	10	i		
was withheld.	е	Taxable dep	I amount from Form(s) W-2, box 1 (see instructions)									
If you did not	f	Employer-pr	ovided adopt	ion b	enefits from Fo	rm 8839), line 2	9	11	F		
get a Form W-2, see instructions.	9	Wages from	Form 8919, I	ine 6					10	,		
monucions.	h	Other earned income (see instructions)						11	1			
	i	Nontaxable of	combat pay e	electio	on (see instruct	ions) .	1i		3 · 3	, å		
	z	Add lines 1a	through 1h						12	2	5254	
Attach	2a	Tax-exempt	interest .	2a		b Ta	xable ir	nterest	2k		•	
Schedule B if required.	За	Qualified div	idends	За	_	b Or	dinary o	dividends .	3k	,		
	4a	IRA distribut	ions	4a		b Ta	xable a	mount	4k)		
	5a	Pensions and	d annuities	5a		b Ta	xable a	mount	5b			
	6a	Social securit	ty benefits .	6a	34730	b Ta	xable a	mount	6k	.		
	C	If you elect instructions)	to use the I	ump-	sum election r	nethod,	check	here (see □]	7.00		

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-01111	1040-SR	(2024)

Page 2

	7	Capital gain or (loss). Attach Schedule D if required. I check here	· · · · · —	7	
	8	Additional income from Schedule 1, line 10		8	-2055
	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your to		9	3199
	10	Adjustments to income from Schedule 1, line 26		10	
	11	Subtract line 10 from line 9. This is your adjusted gross	income	11	3199
Standard Deduction	12	Standard deduction or itemized deductions (from Sci	nedule A)	12	32300
See Standard	13	Qualified business income deduction from Form 8995 o	r Form 8995-A .	13	
Deduction Chart on the last page	14	Add lines 12 and 13	14	32300	
of this form.	15	Subtract line 14 from line 11. If zero or less, enter taxable income	15	0	
Tax and	16	Tax (see instructions). Check if any from:			
Credits		1 ☐ Form(s) 8814 2 ☐ Form(s) 4972 3 ☐		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 Sch	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	0	
	23	Other taxes, including self-employment tax, from Sched	23	0	
	24	Add lines 22 and 23. This is your total tax	<u> </u>	24	0
Payments	25	Federal income tax withheld from:		*	
	а	Form(s) W-2	25a 66	- 12 - 12 - 12 - 12	
	b	Form(s) 1099	25b		
	C	Other forms (see instructions)	25c		
	d	Add lines 25a through 25c		25d	66
	26	2024 estimated tax payments and amount applied from	2023 return	26	
If you have a qualifying child, attach	<u>27</u>	Earned income credit (EIC)	27		
Sch. EIC.	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	31 108		
	32	Add lines 27, 28, 29, and 31. These are your total other refundable credits	payments and	32	108
	33	Add lines 25d, 26, and 32. These are your total paymer	nts	33	174

Form 1040-SR	(2024)									Page 3	
Refund	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid								174	
	35a	Amount of line 34 yo check here			-		iched,	35a		174	
Direct deposit?	b	Routing number XXX	x x x x	X X X	c Type:	Checking	Savings	4			
See instructions.	d	Account number XXX	x x x x	[x x x	x x x x x	X X X					
	36	Amount of line 34 y estimated tax			_	36					
Amount You Owe		Subtract line 33 from For details on how to	ine 24. Thi	s is the am	ount you ow		ctions	37			
	38	Estimated tax penalty	(see instru	uctions).		38			og ar se		
Third Party Designee		you want to allow another structions	person to dis	scuss this ret	urn with the IRS		. Complet	e below	. 🗆	No	
		esignee's					Personal identification				
		me	45-415	no.			er (PIN)			<u></u> _	
Sign Here	of	der penalties of perjury, I decla my knowledge and belief, they ormation of which preparer has	are true, corre	ct, and comple	,	, ,					
	Yo	Your signature		Date	Date Your occupation			he IRS sent you an Identity otection PIN, enter it here			
Joint return?					CONSTRUCTION			inst.)	i, enter it i	ieie	
See instructions. Keep a copy for your records.	Sp	Spouse's signature. If a joint return, both must sign.		Date	- in the same of the same is a same of the				ne IRS sent your spouse an ntity Protection PIN, enter it her		
your records.					RETIRED		(see i	nst.)			
		one no.		Email address							
Paid	Pr	eparer's name	Preparer's si	gnature		Date	PTIN		Check if:		

Go to www.irs.gov/Form1040SR for instructions and the latest information. QNA

Firm's name

Firm's address

Preparer

Use Only

Form 1040-SR (2024)

Phone no.

Firm's EIN

Self-employed

SCHEDULE 1 (Form 1040)

Additional Income and Adjustments to Income

Attach to Form 1040, 1040-SR, or 1040-NR.

OMB No. 1545-0074 Attachment Sequence No. 01

Your social security number

Department of the Treasury Internal Revenue Service

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

Go to www.irs.gov/Form1040 for instructions and the latest information.

				
	124, enter the amount reported to you on Form(s) 1099-K that was included in error	or for personal		
	The remaining amounts reported to you on Form(s) 1099-K should be reported elsewh	ro on vour return	dopondi	ing on the
	of the transaction. See www.irs.gov/1099k.	ere on your return	uepenui	ng on the
Par			1 . 1	
1	Taxable refunds, credits, or offsets of state and local income taxes		1	
2a	Alimony received		2a	
b	Date of original divorce or separation agreement (see instructions):			
3	Business income or (loss). Attach Schedule C		3	
4	Other gains or (losses). Attach Form 4797		4	
5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule		5	-2055
6	Farm income or (loss). Attach Schedule F		6	
7	Unemployment compensation		7	
8	Other income:	,		
а	Net operating loss		<u>)</u>	
b	Gambling	<u> </u>		
С	Cancellation of debt			
d	Foreign earned income exclusion from Form 2555	() [[]	
е	Income from Form 8853			
f	Income from Form 8889			
g	Alaska Permanent Fund dividends			
h	Jury duty pay			
i	Prizes and awards		- (4)	
j	Activity not engaged in for profit income			
k	Stock options			
- 1	Income from the rental of personal property if you engaged in the rental for		- 3	
	profit but were not in the business of renting such property			
m	Olympic and Paralympic medals and USOC prize money (see instructions) . 8m			
n	Section 951(a) inclusion (see instructions)		x x	
0	Section 951A(a) inclusion (see instructions)			
р	Section 461(I) excess business loss adjustment			
q	Taxable distributions from an ABLE account (see instructions) 8q			
r	Scholarship and fellowship grants not reported on Form W-2 8r		1	
s	Nontaxable amount of Medicaid waiver payments included on Form 1040, line			
	1a or 1d	()	
t	Pension or annuity from a nonqualifed deferred compensation plan or a		W _V	
	nongovernmental section 457 plan			
u	Wages earned while incarcerated 8u			
ν	Digital assets received as ordinary income not reported elsewhere. See		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
	instructions			
z	Other income. List type and amount:		7	
	8z			
9	Total other income. Add lines 8a through 8z		9	
10	Combine lines 1 through 7 and 9. This is your additional income. Enter here and	on Form 1040,		
	1040 SP, or 1040-NP, line 8		110	-2055

SCHEDULE E (Form 1040)

Supplemental Income and Loss

(From rental real estate, royalties, partnerships, S corporations, estates, trusts, REMICs, etc.)

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service Name(s) shown on return

Attach to Form 1040, 1040-SR, 1040-NR, or 1041. Go to www.irs.gov/ScheduleE for instructions and the latest information. Attachment Sequence No. 13

Your social security number

Par		nd Ro	yalties e Scheduk	e C . See	instru	etions. If you	are an ind		ort farm
	Note: If you are in the business of renting personal proper rental income or loss from Form 4835 on page 2, line 40.								
	Did you make any payments in 2024 that would require you								
	If "Yes," did you or will you file required Form(s) 1099? .				• •			. <u> Ye</u>	S NO
1a	Physical address of each property (street, city, state, ZII	P cod	e)						
Α								L	ink:2
В									
С									
1b	Type of Property (from list below) 2 For each rental real estate proper above, report the number of fair	rental						nal Use QJV	
Α	5 personal use days. Check the Q			Α	2	45			
В	if you meet the requirements to t			В		-			
С	qualified joint venture. See instru	ICHON	s.	С					
Туре	of Property:								
	Single Family Residence 3 Vacation/Short-Term Ren Multi-Family Residence 4 Commercial	tal	5 Land 6 Roya			Self-Rental Other (desc	ribe)		
	-					Properti	ies:		
Incor				A		В			С
3	Rents received	3		400	0				
4	Royalties received	4							
Expe	nses:								
5	Advertising	5							
6	Auto and travel (see instructions)	6							
7	Cleaning and maintenance	7							
8	Commissions	8							
9	Insurance	9		62	0				
10	Legal and other professional fees	10							-
11	Management fees	11							<u> </u>
12	Mortgage interest paid to banks, etc. (see instructions)	12		160	0				
13	Other interest	13							
14	Repairs	14		56	0			1	
15	Supplies	15	<u> </u>	17	5				
16	Taxes	16		46	8				
17	Utilities	17		45	0				
18	Depreciation expense or depletion	18	1	218	2			1	
19	Other (list)	19							
20	Total expenses. Add lines 5 through 19	20		605	5				
21	Subtract line 20 from line 3 (rents) and/or 4 (royalties). If result is a (loss), see instructions to find out if you must								
	file Form 6198	21		-205	5				
22	Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions)	22		205	5)	()(
23a	Total of all amounts reported on line 3 for all rental prope	rties			23a	4	000	* **	
b	Total of all amounts reported on line 4 for all royalty prop	erties			23b				
C	Total of all amounts reported on line 12 for all properties				23c	1	600	1	
d	Total of all amounts reported on line 18 for all properties				23d	2	182		
е	Total of all amounts reported on line 20 for all properties				23e	6	055		
24	Income. Add positive amounts shown on line 21. Do not		-				. 24	<u> </u>	
25	Losses. Add royalty losses from line 21 and rental real estate	e losse	es from lin	ie 22. Ei	nter to	tal losses her	e 25	(2055
26	Total rental real estate and royalty income or (loss).							1.5	4
	here. If Parts II, III, and IV, and line 40 on page 2 do no Schedule 1 (Form 1040), line 5. Otherwise, include this ar						on - 26	- Tay II I	-2055