1040	-S	R Department of the Treasury-Internal Ret U.S. Income Tax Ret	venue Service urn for S	eniors	202	4 OM	B No. -0074	IRS Use Only	/—Do not wri	ite or sta	ple in this space.
For the year Jan	. 1–Dec	c. 31, 2024, or other tax year beginning		, 20	24, ending	!		, 20	See sep	arate i	nstructions.
Your first nan	ne and	I middle initial	Last name	•					Your so	cial se	curity number
ROBERT			RETIRE						+		1111
		se's first name and middle initial	Last name								security numbe
ROXANNE Home addres		nber and street). If you have a P.O. I					A	pt. no.			ction Campaigr
123 FAN	ITAS	STIC AVENUE							Check h	ere if y	ou, or your
	•	ffice. If you have a foreign address, a	lso complete	e spaces be	elow. State		ZIP c				jointly, want \$3 nd. Checking a
HAPPYV Foreign coun			Foreia	n province	/state/count	NC tv	_	7516 postal code	box belo your tax		not change nd.
							0			You	
Filing Status		Single 🛛 Married filing ju Head of household (HOH)						Married	l filing s	epara	ately (MFS)
Check only one box.		bu checked the MFS box, ente the if the qualifying person is a					ked the	HOH or	QSS bo>	k, ente	er the child's
		If treating a nonresident alien box and enter their name (see							entire ta	ix yea	ar, check the
Digital Assets	pro	any time during 2024, did perty or services); or (b) s a financial interest in a dig	ell, excha	ange, or	otherwis	se dispo	se of a	a digital a		Yes	X No
Standard Deduction		meone can claim:							ndent	*	
	Ag	e/Blindness { You: Spouse:	⊠ Were ⊠ Was I		efore Jan fore Janu		960	🗆 Is bi	ind		
Dependent (see instructions		First name Last name	(2)	Social secu	rity number	(3) Relationsl you	hip to (4	Check the b Child tax c	· · · ·		see instructions): r other dependents
If more than fou	,										
dependents, see											
instructions and check here	\leftarrow										
Income	1a	Total amount from Form	(s) W-2 k		ee instru	ctions)	I		. 1a		
Attach		Household employee wa							. 1b		
Form(s) W-2 here. Also	b		-				• •				
attach Forms W-2G and	С	Tip income not reported				,			. 1c		
1099-R if tax	d	Medicaid waiver paymen	ts not rep	oorted c	on Form(s	s) W-2 (s	ee ins	tructions	s) 1d		
was withheld.	е	Taxable dependent care	benefits	from Fo	orm 2441	, line 26			. 1e		
lf you did not get a Form	f	Employer-provided adop	tion ben	efits fro	m Form 8	8839, lin	e 29		. 1f		
W-2, see instructions.	g	Wages from Form 8919,	line 6 .						. 1g		
	h	Other earned income (se	e instruc	tions) .					. 1h		
	i	Nontaxable combat pay	election	(see ins	tructions	s) <u> </u>	1i				
	z	Add lines 1a through 1h		` 		·			. 1z		
Attach	2a		2a		h) Taxabl	le inte	rest	. 2b		5,000.
Schedule B	_			10 -							
if required.	<u>3a</u>		3a	17,5) Ordina					22,000.
	4a		4a			Taxabl			. 4b		
	5a	Pensions and annuities	5 a		b) Taxabl	le amo	ount .	. 5b		
	6a	,	6a	45,0) Taxabl			. 6b		15,965.
	С	If you elect to use the instructions)									

For Disclosure, Privacy Act, and Paperwork Reduction Act Notice, see separate instructions.

Cat. No. 71930F

Form **1040-SR** (2024)

Form 1040-SR	(2024)	ROBERT RETIREE & ROXANNE RETIREE 1	11-	11–1111 Page 2
	7	Capital gain or (loss). Attach Schedule D if required. If not required, check here] 7	5,000.
	8	Additional income from Schedule 1, line 10	8	1,223.
	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income	9	49,188.
	10	Adjustments to income from Schedule 1, line 26	10	0.
	11	Subtract line 10 from line 9. This is your adjusted gross income	11	49,188.
Standard Deduction	12	Standard deduction or itemized deductions (from Schedule A)	12	2 32,300.
See Standard	13	Qualified business income deduction from Form 8995 or Form 8995-A	13	3
Deduction Chart on the last page	14	Add lines 12 and 13	14	32,300.
of this form.	J 15	Subtract line 14 from line 11. If zero or less, enter -0 This is you taxable income		5 16,888.
Tax and	16	Tax (see instructions). Check if any from:		
Credits		1 🗌 Form(s) 8814 2 🗌 Form(s) 4972 3 🗌	16	0.
	17	Amount from Schedule 2, line 3	17	0.
	18	Add lines 16 and 17	18	0 .
	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	I 0.
	22	Subtract line 21 from line 18. If zero or less, enter -0	22	2 0.
	23	Other taxes, including self-employment tax, from Schedule 2, line 21	23	3
	24	Add lines 22 and 23. This is your total tax	24	1
Payments	5 25 a			
	þ	Form(s) 1099	_	
	C	Cher forms (see instructions)		
	d	Add lines 25a through 25c	25	d
If you have	26	2024 estimated tax payments and amount applied from 2023 return	26	5
a qualifying child, attach	27	Earned income credit (EIC)	_	
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 .		
	31	Amount from Schedule 3, line 15		
	32	Add lines 27, 28, 29, and 31. These are your total other payments and refundable credits	32	2
	33	Add lines 25d, 26, and 32. These are your total payments	33	B 0.
Go to www.ii	rs.gov/l	Form1040SR for instructions and the latest information.		Form 1040-SR (2024)

CDA

Form 1040-SR	(2024)	ROBERT RETIREE & F	ROXANNE	RETIR	EE		11	1-11		Page 3
Refund	34	If line 33 is more than li amount you overpaid .			ne 24 from lin		is the	34		
	35a	Amount of line 34 you w	/ant refun 	ded to y	/ou . If Form 8	888 is atta	iched,	35a		
Direct deposit? See	, p	Routing number XXXX	x x x x	xx	c Type: 🖸 c	hecking	Savings			
instructions.	d	Account number XXXX	x x x x	xxxx		x x x				
	36	Amount of line 34 you estimated tax				36				
Amount You Owe		Subtract line 33 from line For details on how to pay			-		ctions	37		0.
	38	Estimated tax penalty (se	e instruct	tions) .		38				
Third Party Designee		o you want to allow another pers	son to discu	iss this retu	urn with the IRS?		. Complet		v. 🛛 No	
Designee	De	esignee's me		Phone no.		Persor	nal identifi er (PIN)		v. 🖾 NG	,
Sign Here	of	nder penalties of perjury, I declare the my knowledge and belief, they are to cormation of which preparer has any	true, correct, a							
Joint return?	Yo	our signature	Da	ate	Your occupation		Prote	IRS ser ection Pl inst.)	t you an Iden N, enter it her	tity e
See instructions Keep a copy for your records.	Sr	ouse's signature. If a joint return, both i	must sign. Da	ate	Spouse's occupati	ion	If the Ident (see	ity Prote	t your spouse ction PIN, ent	an er it here
		one no.	En	mail address						
Paid	Pr		eparer's signa			Date	PTIN		Check if:	nployed
Preparer	Fir	m's name	<u>ELF-PREPA</u>	ARED			Phor	ne no.		ipioyeu
Use Only	Fir	m's address					Firm	's EIN		
	5.90	orm1040SR for instructions and the						FU	m 1040-S	(2024)

SCHEDULE	1
(Form 1040)	

Department of the Treasury

Internal Revenue Service

Additional Income and Adjustments to Income

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

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

OMB No. 1545-0074

Your social security number

111-11-1111

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

ROBERT RETIREE & ROXANNE RETIREE

For 2024, enter the amount reported to you on Form(s) 1099-K that was included in error or for personal

Note: The remaining amounts reported to you on Form(s) 1099-K should be reported elsewhere on your return depending on the nature of the transaction. See *www.irs.gov/1099k*.

Par	t I Additional Income			
1	Taxable refunds, credits, or offsets of state and local income taxes		1	
2a			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 Sche	edule E	5	1,223.
6	Farm income or (loss). Attach Schedule F		6	
7	Unemployment compensation		7	
8	Other income:			
а	Other Income: Net operating loss Gambling Operative of diskt	8a ()	
b	Gambling	8b		
С		8c		
d	Foreign earned income exclusion from Form 2555	8d ()	
е	Income from Form 8853	8e		
f	Income from Form 8889	8f	4	
g	Alaska Permanent Fund dividends	8g		
h	Jury duty pay	8h		
i	Prizes and awards	8i		
j	Activity not engaged in for profit income	8j		
k	Stock options	8k		
I	Income from the rental of personal property if you engaged in the rental for			
	profit but were not in the business of renting such property	81	_	
m	Olympic and Paralympic medals and USOC prize money (see instructions) .	8m	_	
n	Section 951(a) inclusion (see instructions)	8n	_	
0	Section 951A(a) inclusion (see instructions)	80	_	
р	Section 461(I) excess business loss adjustment	8p	_	
q	Taxable distributions from an ABLE account (see instructions)	8q	_	
r	Scholarship and fellowship grants not reported on Form W-2	8r	_	
S	Nontaxable amount of Medicaid waiver payments included on Form 1040, line			
	1a or 1d	8s ()	
t	Pension or annuity from a nonqualifed deferred compensation plan or a			
	nongovernmental section 457 plan	8t	_	
u	Wages earned while incarcerated	8u	_	
v	Digital assets received as ordinary income not reported elsewhere. See instructions	8v		
z	Other income. List type and amount:	0-		
0	Total other income. Add lines 9a through 97	8z	9	
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 1040-SR, or 1040-NR, line 8		10	1,223.
For Pa	perwork Reduction Act Notice, see your tax return instructions. Cat. No.	71479F	Schedu	ule 1 (Form 1040) 2024

	Adjustments to Income			Page
1 E	Educator expenses		11	
	Certain business expenses of reservists, performing artists, and fee-basis governme			
	Form 2106		12	
			13	
4 N	Health savings account deduction. Attach Form 8889 .		14	
5 [Deductible part of self-employment tax. Attach Schedule SE		15	
6 8	Deductible part of self-employment tax. Attach Schedule SE		16	
7 8	Self-employed health insurance deduction	• • • • • •	17	
8 F	Penalty on early withdrawal of savings		18	
9a /	Alimony paid		19a	
b F	Recipient's SSN			
c [Date of original divorce or separation agreement (see instructions):			
2 0 I	RA deduction		20	
21 8	RA deduction		21	
2 F	Reserved for future use		22	
.3 /	Reserved for future use . <td></td> <td>23</td> <td></td>		23	
.4 (Other adjustments:			
a	Jury duty pay (see instructions)	4a		
	Deductible expenses related to income reported on line 8I from the rental of			
		4b		
	Nontaxable amount of the value of Olympic and Paralympic medals and USOC			
		4c		
		4d		
		4e		
		4f		
-		4g		
	Attorney fees and court costs for actions involving certain unlawful discrimination claims (see instructions) .	4h		
	Attorney fees and court costs you paid in connection with an award from the RS for information you provided that helped the IRS detect tax law violations 2	4i		
j ⊦	Housing deduction from Form 25552	4j		
		4k		
z (Other adjustments. List type and amount:			
_		4z		
			25	
	Add lines 11 through 23 and 25. These are your adjustments to income . Enter 1040, 1040-SR, or 1040-NR, line 10	here and on Form	26	

SCHEDULE B (Form 1040)		Interest and Ordinary Dividends		OMB No. 1	545-0074	
Department of the Treas		Attach to Form 1040 or 1040-SR. Go to www.irs.gov/ScheduleB for instructions and the latest information.		20 Attachmer Sequence		
Name(s) shown on retur			Your	Your social security number		
		E & ROXANNE RETIREE	111-11-1111			
	1	List name of payer. If any interest is from a seller-financed mortgage and the		Amo		
Interest	•	buyer used the property as a personal residence, see the instructions and list this interest first. Also, show that buyer's social security number and address:				
(See instructions and the Instructions for Form 1040, line 2b.)		BANK OF AMERICA ALLY BANK SCHWAB	-		750 3,000 1,250	Э.
Note: If you received a Form 1099-INT, Form 1099-OID, or substitute statement from a brokerage firm, list the firm's name as the payer and enter the total interest shown on that			1			
form.	2 3	Add the amounts on line 1	2		5,000).
	4 ote:	Subtract line 3 from line 2. Enter the result here and on Form 1040 or 1040-SR, line 2b If line 4 is over \$1,500, you must complete Part III.	4	Amo	5,000 ount).
	5	List name of payer:				_
Ordinary Dividends		VANGUARD SCHWAB	-		0,000 2,000	
(See instructions and the Instructions for Form 1040, line 3b.))		5			
Note: If you received a Form 1099-DIV or substitute statement from a brokerage firm,			-			
list the firm's name as the payer and enter the ordinary	6				0.000	
	6 oter	Add the amounts on line 5. Enter the total here and on Form 1040 or 1040-SR, line 3b If line 6 is over \$1,500, you must complete Part III.	6	2	2,000	J .
Part IIIYoForeignac	ou m	nust complete this part if you (a) had over \$1,500 of taxable interest or ordinary di nt; or (c) received a distribution from, or were a grantor of, or a transferor to, a foreign				gn
Accounts and Trusts Caution: If required, failure to file FinCEN Form	7a	At any time during 2024, did you have a financial interest in or signature authority of account (such as a bank account, securities account, or brokerage account) locate country? See instructions	ed in a 	financial a foreign 	Yes N	
114 may result in substantial penalties. Additionally, you			EN F	orm 114		
may be required to file Form 8938, Statement of Specified Foreign	b	If you are required to file FinCEN Form 114, list the name(s) of the foreign country(- financial account(s) is (are) located:				
	8	During 2024, did you receive a distribution from, or were you the grantor of, or the foreign trust? If "Yes," you may have to file Form 3520. See instructions			X	ζ

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

Schedule B (Form 1040) 2024

SCHEDULE D (Form 1040)

Capital Gains and Losses

OMB No. 1545-0074

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

Use Form 8949 to list your transactions for lines 1b, 2, 3, 8b, 9, and 10. Go to www.irs.gov/ScheduleD for instructions and the latest information.

Attachment Sequence No. 12

Internal Revenue Service Name(s) shown on return

Department of the Treasury

ROBERT RETIREE & ROXANNE RETIREE

Your social security number 111-11-1111

20

Did you dispose of any investment(s) in a qualified opportunity fund during the tax year? Yes X No	
If "Yes," attach Form 8949 and see its instructions for additional requirements for reporting your gain or loss.	

Part I Short-Term Capital Gains and Losses – Generally Assets Held One Year or Less (see instructions)

lines This	instructions for how to figure the amounts to enter on the below. form may be easier to complete if you round off cents to le dollars.	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gain or loss from Form(s) 8949, Part I line 2, column (g)	
1a	Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b.				•
1b	Totals for all transactions reported on Form(s) 8949 with Box A checked				
2	Totals for all transactions reported on Form(s) 8949 with Box B checked				
3	Totals for all transactions reported on Form(s) 8949 with Box C checked				
4	Short-term gain from Form 6252 and short-term gain or (loss) from Forms 4	684, 6781, and 88	. 4	
5	Net short-term gain or (loss) from partnerships, Schedule(s) K-1				
6	Short-term capital loss carryover. Enter the amount, if ar Worksheet in the instructions				
7	Net short-term capital gain or (loss). Combine lines 1a term capital gains or losses, go to Part II below. Otherwise	•			

Long-Term Capital Gains and Losses-Generally Assets Held More Than One Year (see instructions) Part II

lines This	instructions for how to figure the amounts to enter on the below. form may be easier to complete if you round off cents to e dollars.	(c) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustme to gain or los Form(s) 8949, line 2, colun	s from Part II,	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
8a	Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b.					
8b	Totals for all transactions reported on Form(s) 8949 with Box D checked	15,000.	10,000.			5,000.
9	Totals for all transactions reported on Form(s) 8949 with Box E checked					
10	Totals for all transactions reported on Form(s) 8949 with Box F checked.					
11	Gain from Form 4797, Part I; long-term gain from Forms from Forms 4684, 6781, and 8824	11				
12	Net long-term gain or (loss) from partnerships, S corporat	ions, estates, and	trusts from Scheo	lule(s) K-1	12	
13	Capital gain distributions. See the instructions				13	
14	Long-term capital loss carryover. Enter the amount, if any	, from line 13 of y	our Capital Loss	Carryover		
	Worksheet in the instructions	14	()			
15	Net long-term capital gain or (loss). Combine lines 8a	•		o to Part III		
	on the back				15	5,000.
For F	Paperwork Reduction Act Notice, see your tax return instruction	ons.	Cat. No. 11338H		Schedu	le D (Form 1040) 2024

Part I		Summary			
16	Con	nbine lines 7 and 15 and enter the result	16		5,000
		line 16 is a gain , enter the amount from line 16 on Form 1040, 1040-SR, or 1040-NR, line 7. nen, go to line 17 below.			
		line 16 is a loss , skip lines 17 through 20 below. Then, go to line 21. Also be sure to complete e 22.			
		line 16 is zero , skip lines 17 through 21 below and enter -0- on Form 1040, 1040-SR, or 040-NR, line 7. Then, go to line 22.			
17	Are	lines 15 and 16 both gains?			
	Χ	Yes. Go to line 18.			
		No. Skip lines 18 through 21, and go to line 22.			
18		ou are required to complete the 28% Rate Gain Worksheet (see instructions), enter the punt, if any, from line 7 of that worksheet	18		
19		ou are required to complete the Unrecaptured Section 1250 Gain Worksheet (see ructions), enter the amount, if any, from line 18 of that worksheet	19		
20	Δro	lines 18 and 19 both zero or blank and you are not filing Form 4952?			
20	X	Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 16. Don't complete lines 21 and 22 below.			
		No. Complete the Schedule D Tax Worksheet in the instructions. Don't complete lines 21 and 22 below.			
21	lf lin	e 16 is a loss, enter here and on Form 1040, 1040-SR, or 1040-NR, line 7, the smaller of:			
		ne loss on line 16; or 3,000), or if married filing separately, (\$1,500)	21	(
	Not	e: When figuring which amount is smaller, treat both amounts as positive numbers.			
22	Doy	you have qualified dividends on Form 1040, 1040-SR, or 1040-NR, line 3a?			
		Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 16.			
		No. Complete the rest of Form 1040, 1040-SR, or 1040-NR.			
			Scl	nedule D (Fo	orm 1040) 20

Form 8949 (2024)					Attach	ment Sequence No.	12A Page 2
Name(s) shown on return. Name and SSN of			red if shown on other s	ide Social secu	-	r taxpayer identifica	ation number
ROBERT RETIREE & F						<u>L-11-1111</u>	
Before you check Box D, E, or F be statement will have the same inform broker and may even tell you which	nation as Form 1						
Part II Long-Term. Tran instructions). For				eld more than ⁻	1 year are	generally long.	-term (see
Note: You may a to the IRS and fo 8a; you aren't rec	ggregate all le r which no ad	ong-term tra justments o	ansactions rep or codes are re	quired. Enter th	ne totals d	irectly on Sche	
You must check Box D, E, or a separate Form 8949, page 2, more of the boxes, complete as	F below. Chec for each applic	k only one b able box. If y	oox. If more than you have more lo	one box applies	s for your lo	ng-term transac	
X (D) Long-term transactio (E) Long-term transaction	ns reported on	Form(s) 1099	9-B showing bas)
(F) Long-term transaction	is not reported	to you on Fo	orm 1099-B		Adjustment i	f any, to gain or loss	
1 (a)	(b)	(c) Date sold or	(d) Proceeds	(e) Cost or other basis See the Note below	If you enter an enter a c	amount in column (g), ode in column (f).	(h) Gain or (loss) Subtract column (e)
Description of property (Example: 100 sh. XYZ Co.)	Date acquired (Mo., day, yr.)	disposed of (Mo., day, yr.)	(sales price) (see instructions)	and see Column (e) in the separate instructions.	(f) Code(s) from instructions	(g) Amount of adjustment	from column (d) and combine the result with column (g).
500 SHARES IVV	05/01/20	05/01/24	15,000	. 10,000.		0.	5,000.
	Ť						
·							
			N				
		$\langle \ \rangle$					
2 Totals. Add the amounts in colur negative amounts). Enter each t Schedule D, line 8b (if Box D abo above is checked), or line 10 (if Bo	otal here and inc	lude on your ne 9 (if Box E	15,000	10,000.		0.	5,000.
Note: If you checked Box D above	but the basis re	ported to the I	IRS was incorrect.	enter in column (e	e) the basis a	as reported to the	IRS, and enter an

Note: If you checked Box D above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See *Column* (g) in the separate instructions for how to figure the amount of the adjustment.

		(From rea			••							
	-					-			trusts, neivile	, e.c.,) 24	
ROBERT RETIREE Pattl Income or Loss From Rental Real Estate and Royalties Note: fyoa are in the business of renting personal property, use Schedule C. See instructions. If you are rental income or loss from Form 4836 on page 2, line 40. A Did you make any payments in 2024 that would require you to file Form(s) 1099? See instructions . B A Did you make any payments in 2024 that would require you to file Form(s) 1099? See instructions . Image: Schedule C. See instructions . Image: Schedule C. See instructions . Image: Schedule C. See instructions . A Did you make any payments in 2024 that would require you to file Form(s) 1099? See instructions . Image: Schedule C. See instructions . Image: Schedule C. See instructions . A Did you method the requirements to file as a qualified joint venture. See instructions . Image: Schedule C. See instructions . Image: Schedule C. See instructions . Type of Property: 1 Single Family Residence 3 Vacation/Short/Term Rental 5 Land 6 Royalties Received			Attachm Sequen	nent ce No. 13								
Name(s)	shown on return		You								al security	
										11	1-11-	1111
Part	Note: If yo	ou are in the	e business of ren	ting personal prope	nd Ro erty, use	yalties Schedule	C . See	instru	ctions. If you a	re an indiv	vidual, rep	ort farm
Α					ı to file	Form(s) 1	099? \$	See ins	structions .		. 🗌 Ye	s 🛛 No
B It	f "Yes," did you	or will yo	u file required F	Form(s) 1099? .							. 🗌 Ye	s 🗌 No
1a	Physical add	ress of ead	ch property (str	eet, city, state, ZI	P cod	e)						
Α	100 BEAC	HFRON	T DRIVE V	VILMINGTON	, NC	2751	6					
1b								Fa		Person Da		QJV
A	,		personal use d	lays. Check the Q	JV bo	x only	Α		-	C	-	
									100		,	
С			quaimed joint v	venture. See instru	uctions	ō.	С					
					ntal							•
2	wuiti-Family Re	sidence	4 Comme	ercial		6 Roya	lities	8	Other (descr	ibe)		
										es:		
		J						~ ~	В			C
					_		15,0	00.				
	-											
-					5							
6	Auto and trave	el (see inst	ructions) .		6							
			ce				5,0	00.				
			~		-			F O				
-					-		<u> </u>	50.				
		· · · · ·					2 0	00				
13	Other interest				-							
							2,0	00.				
								F 0				
							۷,۱	50.				
						•	7	77.				
	Other (list)	•										
20	Total expense	s. Add line	es 5 through 19		20		13,7	77.				
21												
							1 0	22				
22					21		1,2	23.				
					22	()	()	()
23a	Total of all am	ounts repo	orted on line 3 t	for all rental prope		·		23a	15	,000.		,
b												
									1.2	777.		
										1,223.		
						-		nter to	tal losses here		(<u> </u>
	Total rental re	eal estate	and royalty in	ncome or (loss).	Comb	ine lines 2	24 and	25. E	nter the resu	It		,
										1 1		
						in the tot				· 26		1,223.
For Pa	perwork Reduct	ion Act No	tice, see the se	parate instructions	s.		Cat. N	o. 1134	4L	Sch	nedule E (F	orm 1040) 2024

Federal Schedule E Depreciation Schedule Business Activity: 100 BEACHFRONT DRIVE

Asset Description	Date In Service	Asset Cost	Bus %	Current 179	Current Bonus	Life	Conv	Depr % Current
	Date Sold	Depr Basis	Land	Prior 179	Prior Bonus	Method	Prior Depr	Depr
	01/01/10	200,000.	50.00			27.50	MM	7.3846
VACATION RENTAL		100,000.	300,000.			SL	89,483.	777.
	S							
						V		
V								
			\mathbf{O}					

2024

Social Security Number 111-11-1111 222-22-2222

2024

Alternative Minimum Tax Depreciation Report Business Activity: 100 BEACHFRONT DRIVE

Description	Cost	Depr Basis	Life	Method	Prior Depr	Current Depr	AMT Adj
VACATION RENTAL P	200,000.	10,517.	27.5	SL	89,483.	777.	
)			