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Form **172**(January 2025) Department of the Treasury Internal Revenue Service

Net Operating Losses (NOLs)

For Individuals, Estates, and Trusts.

Go to www.irs.gov/Form172 for instructions and the latest information.

OMB No. 1545-0074

For calendar year , or other tax year beginning		and ending			
Name(s	s) shown on return			Social security or emp	oloyer identification number
Addres	s (number and street). If you ha	eve a P.O. box, see instructions.	Apt. or suite no.	Spouse's social secu	rity number (SSN)
City, to	wn, or post office. If you have a	foreign address, also complete spaces below. St.	ate ZIP code	Daytime phone numbe	
Foreign	country name	Foreign province/count	y	Foreign postal code	
	NOV				
Pai					_
1		act your standard deduction or itemizer it here. For estates and trusts, enter			_
		on, income distribution deduction, and			1
2		osses before limitation. Enter as a posi		2	
3	Nonbusiness capital g	ains (without regard to any section 120	02 exclusion) 3		
4		ne 3, enter the difference. Otherwise, e	enter -0 4		
5	If line 3 is more the Otherwise, enter -0-	an line 2, enter the difference.			
6		ns (see instructions). Enter as a positiv	ve number 6	5	
7	Nonbusiness income instructions)	other than capital gains (see			
8	Add lines 5 and 7 .				
9		ne 8, enter the difference. Otherwise, e	nter -0		9
10		an line 6, enter the difference. But don't enter more than line 5			
11		s before limitation. Enter as a positive		1	
12	·	s (without regard to any section			
13	Add lines 10 and 12	_	1	3	
14		ine 11. If zero or less, enter -0	1		
15	Add lines 4 and 14.		1	5	
16	Schedule D (Form 1 short-term and long-positive number. If you	oined net short-term and long-term cap 040). Estates and trusts, enter, if a term loss from Schedule D (Form u don't have a loss on that line (and do ines 16 through 21 and enter on line 2	any, the total net 1041). Enter as a on't have a section	6	
17	Section 1202 exclusio	n. Enter as a positive number			17
18		· · · · · · · · · · · · · · · · · · ·	1	8	
19	• The loss on line 16;				
		1040, \$1,500 when married filing sepa			
20		line 19, enter the difference. Otherwise line 18, enter the difference. Otherwise			21
21 22			e, enter -u		22
23		ses from other years. Enter as a positi		-	23
24		1, 9, 17, and 21 through 23. If the res		-	-
		e, you don't have an NOL			24
		lation and the instructions			Farm 179 (1 0005)

Form 172 (1-2025)

Page 2

Part II NOL Carryover (see instructions)

Par	NOL Carryover (see instructions)				
Complete one column before going to the next		2nd preceding tax year		1st preceding tax year	
column. Start with the earliest carryback year.		ended:		ended:	
1	NOL deduction. Enter as a positive number .				
2	Taxable income before the current year NOL carryback. For estates and trusts, increase this amount by the sum of the charitable deduction (see instructions)	\mathbf{S}		/IR	
3	Net capital loss deduction (see instructions) .				
4	Section 1202 exclusion. Enter as a positive number (see instructions)				
5	Qualified business income deduction (see instructions)	\mathcal{T}			
6	Adjustment to adjusted gross income (AGI) (see instructions)	JIVI			
7	Adjustment to itemized deductions from line 33 below (see instructions)				
8	Estates and trusts, enter exemption amount .				
9	Modified taxable income. Add lines 2 through 8. If zero or less, enter -0		KA		
10	NOL carryover to the subsequent year. Subtract line 9 from line 1. Enter the result from the first preceding tax year here and on the net operating loss line of Schedule 1 (Form 1040) or Form 1040-NR or the net operating loss deduction line of Form 1041. If zero or less, enter -0- (see instructions)		3, 2		4
	Adjustment to Itemized Deductions (Individuals Only). Complete lines 11 through 33 for the carryback year(s) for which you itemized deductions only if line 3, 4, or 5 above is more than zero.				
11	AGI before the current year NOL carryback				
12	Add lines 3 through 6 above				
13	Modified AGI. Add lines 11 and 12				
14	Medical and dental expenses after AGI limitation from Sch. A (Form 1040), or as previously adjusted				
15	Medical and dental expenses before AGI limitation from Sch. A (Form 1040), or as previously adjusted				
16	Multiply line 13 by 7.5% (0.075)				
17	Subtract line 16 from line 15. If zero or less, enter -0				
18	Subtract line 17 from line 14				
19	Mortgage insurance premiums from Sch. A (Form 1040), for tax years before 2022, or as previously adjusted				
20	Refigured mortgage insurance premiums (see instructions)				
21	Subtract line 20 from line 19				

Form 172 (1-2025) Page **3**

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Par	t II NOL Carryover (see instructions) (co	ntinued)			
Complete one column before going to the next column. Start with the earliest carryback year.		2nd preceding tax year		1st preceding tax year	
		ended:		ended:	
22	Modified AGI from line 13				
23	Enter as a positive number any NOL carryback				
	from a prior year that was deducted to figure line 11				
24	Add lines 22 and 23				
25	Total charitable contributions for Sch. A (Form				
	1040 or Form 1040-NR), or as previously adjusted (see instructions)				
26	Refigured charitable contributions (see instructions)				
27	Subtract line 26 from line 25				
28	Casualty and theft losses deduction from Form 4684				
29	Casualty and theft losses before AGI limitation from Form 4684				
30	Multiply line 22 by 10% (0.10)				
31	Subtract line 30 from line 29. If zero or less, enter -0				
32	Subtract line 31 from line 28				
33	Combine lines 18, 21, 27, and 32; enter the result here and on line 7				
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