Government of the District of Columbia

2015 D-40 SUB Individual Income Tax Return

1 5 0 4 0 0 4 1 0 0 0 1

STAPLE OTHER REQUESTED DOCUMENTS IN UPPER LEFT

STAPLE W-2S AND ANY OTHER WITHHOLDING STATEMENTS HERE

Tax period ending MMYY

Personal information

Mark if X Amended return

Mark if X Filing for a deceased taxpayer

SOFTWARE DEVELOPER USE ONLY

VENDOR ID# 1234

Your telephone number 1234567890

Your social security number (SSN) 123456789 and Date of Birth (MMDDYYYY) 12345678

Spouse's/registered domestic partner's SSN 123456789 and Date of Birth (MMDDYYYY) 12345678

Your first name ABCDEFGHIJKLABC M.I. A Last name ABCDEFGHIJKLABCDEFGH

Spouse's/registered domestic partner's first name ABCDEFGHIJKLABC M.I. A Last name ABCDEFGHIJKLABCDEFGH

Home address (number, street and suite/apartment number if applicable)
12345ABCDEFGHIJKLABCDEFGHIJKLA
12345ABCDEFGHIJKLABCDEFGHIJKLA

City ABCDEFGHIJKLABCDEFGH State AB ZIP Code + 4 123456789

Filing Status

1 Mark only one: X Single X Married filing jointly X Married filing separately X Dependent claimed by someone else

X Married filing separately on same return Enter combined amounts for lines 4 - 42. See instructions.

X Registered domestic partners filing jointly or X filing separately on same return

X Head of household Enter qualifying dependent and/or non-dependent information on Schedule S.

X Qualifying widow(er) with dependent child. Enter qualifying dependent information onSchedule S.

2 Mark if you are: X Part-year resident in DC from 00 (month)to 00 (month); # of months in DC 00 See instructions.

Complete your federal return first -- Enter your dependents' information on DC Schedule S

Income Information

a	Wages, salaries, unemployment compensation and/or tips, see instructions		a	$123456789.00
b	Business income or loss, see instructions.	Mark if loss X	b	$123456789.00
c	Capital gain (or loss).	Mark if loss X	c	$123456789.00
d	Rental real estate, royalties, partnerships, etc.	Mark if loss X	d	$123456789.00

Computation of DC Gross and Adjusted Gross Income

3	Federal adjusted gross income. From adjusted gross income lines on federal Forms 1040, 1040A, 1040EZ, 1040NR or 1040NR-EZ.	Mark if loss X	3	$123456789.00

Additions to DC Income

4	Franchise tax deducted on federal forms, see instructions.		4	$123456789.00
5	Other additions from DC Schedule I, Calculation A, Line 8.		5	$123456789.00
6	Add Lines 3, 4 and 5.	Mark if loss X	6	$123456789.00

Subtractions from DC Income

7	Part year residents, enter income received during period of nonresidence, see instructions.	7	$123456789.00
8	Taxable refunds, credits or offsets of state and local income tax.	8	$123456789.00
9	Taxable amount of social security and tier 1 railroad retirement	9	$123456789.00
10	Income reported and taxed this year on a DC franchise or fiduciary return.	10	$123456789.00
11	DC and federal government survivor benefits, see instructions.	11	$123456789.00
12	Other subtractions from DC Schedule I, Calculation B, Line 16.	12	$123456789.00
13	Total subtractions from DC income, Lines 7 - 12.	13	$123456789.00
14	DC adjusted gross income, Line 6 minus Line 13.	Mark if loss X 14	$123456789.00

Rev 10/15

Enter your last name ABCDEFGHIJKLABCDEFGH
Enter your SSN 1234567879

15 Deduction type Take the same type of deduction you took on your federal return.
Mark which type: X Standard X Itemized See instructions for amount to enter on Line 16.

16 DC deduction amount. Do not copy from federal return. For amount to enter, see instructions. 16 $123456789.00

17 Number of exemptions If more than 1 (more than 2 if filing jointly), or if you or your spouse/domestic partner are over 65 or blind, attach a completed Calculation G, Schedule S. 17 00

18 Exemption amount. Multiply $1,775 by number on Line 17. Part-year DC residents see Cal E. *If AGI is greater than $152,499, see instructions on pages 10 and 25. 18 $123456789.00

19 Add Lines 16 and 18. 19 $123456789.00

20 DC Taxable income Subtract Line 19 from Line 14. Enter result. Mark if loss X 20 $123456789.00

DC tax, credits and payments

21 Tax If Line 20 is $100,000 or less, use tax tables. If more, use Calculation I
Mark X if filing separately on same return. Complete Calculation J on Schedule S. 21 $123456789.00

22 Credit for child and dependent care expenses $1234.00 x .32 Enter result > 22 $123456789.00
From federal Form 2441; if part-year DC resident, from Line 5, DC Form D-2441.

23 Non-refundable credits from DC Schedule U, Part 1a, Line 7 Attach DC Schedule U. 23 $123456789.00

24 DC Low Income Credit Use Calc. LIC/EITC to see if LIC or EITC is a greater benefit. See instructions, 24 $123456789.00

24a Enter the number of exemptions claimed on your federal return. 00

25 Total non-refundable credits. Add Lines 22, 23 and 24. 25 $123456789.00

26 Total tax. Subtract Line 25 from Line 21. If Line 21 is less than Line 25, leave Line 26 blank. 26 $123456789.00

27 DC Earned Income Tax Credit Leave blank if you took Line 24 DC Low Income Credit (LIC)

27a Enter the number of qualified EITC children. 00 27b Enter earned income amount 27b $123456789.00

27c For filers **with** qualifying children. Enter federal EITC $1234.00 X .40 Enter result > 27d $123456789.00

27e For filers **without** qualifying children. See instructions for special calculations. Enter result > 27e $123456789.00

28 Property Tax Credit. From your DC Schedule H; attach a copy. 28 $123456789.00

29 Refundable credits from DC Schedule U, Part 1b, Line 3 Attach DC Schedule U. 29 $123456789.00

30 DC income tax withheld shown on Forms W-2 and 1099. Attach these forms. 30 $123456789.00

31 2015 estimated income tax payments and amount applied from 2014 return. 31 $123456789.00

32 Tax paid with extension of time to file or with original return if this is an amended return. 32 $123456789.00

33 Total payments and refundable credits. Add Lines 27d or 27e and 28 - 32. 33 $123456789.00

Refund Complete if Line 33 is more than Line 26.

34 Amount you overpaid 34 $123456789.00
Subtract Line 26 from Line 33

35 Amount to be applied to your 2016 estimated tax 35 $123456789.00

36 Penalty See instructions 36 $123456789.00

Mark if Form D-2210 is attached X

37 Underpayment Interest 37 $123456789.00

38 Refund *Subtract sum of Lines 35, 36 and 37 from Line 34.* 38 $123456789.00

39 Contribution amount *from Sched. U, Part II, Line 5* 39 $123456789.00
Can not exceed refund amt on Line 38
Put additional amt on Line 42.

40 Net refund 40 $123456789.00
Subtract Line 39 from Line 38

Amount owed Complete if Line 33 is equal to or less than Line 26.

41 Tax due 41 $123456789.00
Subtract Line 33 from Line 26

42 Contribution amount 42 $123456789.00
from Schedule U, Part II, Line 6

43a Penalty $12345.00
43b Interest $12345.00
Enter total P & I. 43 $123456789.00

Mark if Form D-2210 is attached X

44 Underpayment Interest 44 $123456789.00

45 Total amount due 45 $123456789.00
Add Lines 41 - 44

Will this refund request or amount owed go to or come from an account outside the U.S.? Yes X No X See instructions

Refund Options: **For information on the tax refund card and program limitations, see instructions or visit our website:** otr.dc.gov/refundprepaidcards.

Make one refund choice X Direct deposit X Tax refund card X Paper check

Direct Deposit *To have your refund deposited to your* X ***checking*** *OR* X ***savings*** *account, **mark** X and enter bank routing and account numbers.*
Routing Number XXXXXXXXX Account Number XXXXXXXXXXXXXXXXX

Third Party Designee *To authorize another person discuss this return with OTR, mark here* X *and enter **the name and phone** number of that person*
Designee's name Phone number 1234567890

Signature Under penalties of law, I declare that I have examined this return and, to the best of my knowledge, it is correct. Declaration of paid preparer is based on information available to the preparer.

Your signature Date Preparer's signature Date

Spouse's/registered domestic partner's signature if filing jointly Date Preparer's Tax Identification Number (PTIN) PTIN telephone number
123456789 1234567890