Government of the District of Columbia

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2008 D-40 SUB Individual Income Tax Return



OFFICIAL USE ONLY

Leave lines blank that do not apply.

Personal information

		Width II 22 I IIIII 8	ioi a ucceascu taxpay	/CI					\vdash		
Your	social security number (SSN)	Spouse's/registered domestic partner's SSN	Your daytin	ne phone numb	er						
12	3456789	123456789	12345	67890							
Your	first name	M.I. Last name									
AB	CDEFGHIJKLABC	A ABCDEFGHIJK	LABCDEFGH								
	se's/domestic partner's first nar										
	CDEFGHIJKLABC	A ABCDEFGHIJK	LABCDEFGH								
	e address (number, street and a										
	Schedule S for longer, in-care-o										
		LABCDEFGHIJKLA									
		LABCDEFGHIJKLA									
City											
	CDEFGHIJKLABCD										
		EFGH AD 12343076									
	ing Status										
1		X Married filing jointly X M							omed	one els	se_
		ied filing separately on same return						ns.			
		red domestic partners filing jointly	X filing sepa								
	X Head	of household Enter qualifying depen	dent and/or non-dependent	information	on Sch	edule	s.				
2	Mark if you are: X Part-yea	ar resident In DC from 00 (mon	h) to 00 (month), #	of months	00		See in	strut.	os.		
	*(Complete your federal return first	Enter your dependent	s' informati	on or	י חר	Scho	مارية	c *		
		complete your rederal return mist	Litter your dependent	5 IIIIOIIIIati	011 01	I DC	JUIL	uuic			_
Inc	ome Information		Round cents to the nearest	dollar. If th	ne amou	nt is	zero,	leave	the l	ines bla	nk.
a		ployment compensation and/or tips	see instructions	a \$1:	234	567	89.	00			
b	Business income or los	S, see instructions	Mark if loss X				789.				
			IVIAIN II 1000								
С	Capital gain or loss		Mark if loss X	c \$1	234	567	89.	0.0			
d	Rental real estate, royal	ties partnerships etc	Mark if loss X				89.				
- G	rionarioa ostato, roya	nico, partificionipo, cio.	IVIAIN II 1055 44	u PI	234	307	٠,	00			
Corr	mutation of DC Gross	s and Adjusted Gross Income									
3	Federal adjusted gros		Max	k if loss X	0	Ċ 1	234	565	200	0.0	
J		, Line 21; 1040EZ, Line 4;	Ivial	K II IOSS A	3	γТ	234	307	0 9	. 00	
		ne 86; 1040NR-EZ, Line 10									
4	Additions to DC Inc					1					
4		on federal forms, 1120 and 1120S	, see instructions		4		234				
5		C Schedule I, Calculation A, Line 8			5		234				
6	Add lines 3, 4 and 5		Ma	rk if loss X	6	\$1	234	567	89	. 00	
	Subtractions from										
7		g period of nonresidence, see instru			7	\$1	234	567	89	.00	
8	Taxable refunds, credits	s or offsets of state and local income	tax		8	\$1	234	567	89	.00	
9	Taxable amount of soci	al security and tier 1 railroad retirer	nent		9	\$1	234	567	89	.00	
	Forms 1040 Line 20b, or	1040A Line 14b									
10	Income reported and ta	xed this year on a DC franchise or	iduciary return		10	\$1	234	567	89	.00	
						ı.					
11	DC and federal govern	ment pension and annuity limited e	xclusion, see instructions	5	11	\$1	234	567	89	. 00	
			mestic partner is 62 or								
	n joa aro	. , , , , , , , , , , , , , , , , , , ,	7.1.1.1.1.1.10.10.10.10								
12	DC and federal govern	ment survivor benefits, see instruction	ns		12	\$1	234	567	89	.00	
13		n DC Schedule I, Calculation B, Line			13		234				
13	Other Subtractions Ifon	1 DO Scriedule I, Calculation B, Line			13	Ϋ́	_ J T	50/	ری		
4.4	Add the subtractions for	na DC income			11	Ċ 1	234	567	80	0.0	
14		om DC income, Lines 7 - 13		1. 16 1- 37							
15	DC adjusted gross inco	DME, Line 6 minus Line14.	Mar	k if loss X	15	ÞΤ	∠34	20/	89	. 00	

Mark if X Amended return

Mark if X Filing for a deceased taxpayer

65 66 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85

Enter your last name ABCDEFGHIJKLABCDEFGH Enter your SSN 1234567879

15	DC adjusted gross income Er	nter adj	justed gross incom	e from Line	15, page 1	! Mark	if loss	X 1	.5	\$	12	3 4	5	67	89	. 00
16	Deduction type Take the same type	e of ded	duction you took o	n your fedei	ral return								Ш			
	Mark which type: X Standard See	instruc	tions for amount t	o enter on	Line 17								Ш			
	X Itemized See	instruc	ctions for amount t	o enter on	Line 17. Att	tach DC Schedule	s S						Ш			
17	DC deduction amount Do not copy from	m federa	al form. For amount	to enter, see	instructions.			1	.7	\$	12	3 4	5 6 ء	67	89	. 00
(If cl	laiming std deduction, real estate ta 2345678900 and or net disa	axes an aster lo	nd or net disaster oss <u>\$23456</u>	loss on fe 789 0 0	<i>deral returr</i>) See instr	n, enter amt.of r ructions. Include	eal estate in Line 1	e taxes 17 amt.					H			
18	Number of exemptions If more partner are over 65 or blind, attack					ou or your spous	e/domest	ic	18					(00	
19	Exemption amount Multiply \$1,6	675 by i	number on line18.	Part-year L	C residents	see Cal H to dete	rmine am	nt.]	19	\$	12	34	15	67	89	. 0 0
20	Add Lines 17 and 19.															. 00
21	Taxable income Subtract Line 20	from Li	ine 15. Enter resul	t, if minus.		Marl	c if loss									
DC t	ax, credits and payments										Т	П	П	П		
22	Tax	ss, use	tax tables. If more	, use Calcu	lation I			2	22	\$	12	34	.56	578	89	. 00
			on same return			J on Schedule S										
23	Credit for child and dependent					7. 00 x.32		sult 2	23	\$	12	3 4	5	67	89	. 0 0
	Enter from fed Form 2441, Line 9 or 1040															
24	Non-refundable credits from DO	C Sche	edule U, Part 1	a, line 6	Attach Sci	hedule U		2	24	\$	12	34	56	578	89.	.00
25	DC Low Income Credit Complete							2								. 00
26	Total non-refundable credits Ac	dd Line	s 23 24 and 25					2	26	\$	12	3 4	15	67	89	. 00
27	Total tax Subtract Line 26 fro	om Lir	ne 22. If Line 2	22 is less	than Lin	e 26, leave b	lank.	2	27	\$	12	3 4	5	67	89	. 0 0
28	DC Earned Income Tax Credit	Ent	ter your federal	EIC \$1	23456	7.00 x .40	Enter re	sult 2	28	\$	12	3 4	5	67	89	. 0 0
28a	Enter the number of qualified	EITC (children					2	28a	\$				(00	
29	Property Tax Credit Attach a comp	pleted L	DC Schedule H.						29	-	12	3 4	1 5	67	89	. 00
30	Refundable credits from DC Sc	hedul	e U. Part 1b. li	ne 4 Atta	ch DC Sche	edule U		-	30	\$	1 2	3 4	15	67	29	. 0 0
31	DC income tax withheld from Fo					.duic o			31							. 00
32	2008 estimated income tax pa			ach conec	i copies.											. 00
33	Payments made with extension			h original	return if th	nis is an amend	ed returr									. 0 0
34	Total payments and refundable															. 0 0
	nd Complete only if Line 34 is more					olete only if Line .	34 is equa	al to or le								
35	Amount you overpaid	35	\$1234567	99 00	40 Tax	duo			40	ے	17 -)) .	1 5	67	00	.00
	Subtract Line 27 from Line 34.	33	\$1234367	69.00		tract Line 34 from	n Line 27.		+0	٦	, 12	. 3 -	± 5	0 /	09	. 00
36	Amount to be applied	36	\$1234567	89 00	41 Con	ntribution amo	ınt		41	¢	:12	234	15	67	89	.00
	to your 2009 estimated tax	30	71234307	03.00		n Schedule U,				۲						
37	Contribution amount	37	\$1234567	89 00	42 Tota	ıl due			12	¢	:12	234	15	67	89	.00
	from Schedule U, Part II, Line		Ψ1231307	09.00		Lines 40 and	1 41.		-	7						
38	Add Lines 36 and 37.	38	\$1234567	89 00		Payment option	ıs				\pm		\Box	_		\Box
39	Refund	39	\$1234567		•	Make check or n										
39	Subtract Line 38 from Line 35.	33	Ş123 1 307	09.00	1	To pay by credit www.officialpayr									000	
Dire	ct Deposit To have your refund d	lonosito	nd into your choo	king Y	or savings										000.	
Dile	enter the routing and account num	nbers b	ed into your check below, see instruc	tions.	or savirigs	A account,	IIIaik A	ior only	one	acc	Juiii	ιyμ	e al	IIu		
Rout	ing Number XXXXXX		, , , , , , , , , ,		Accour	nt Number	XXX	xxx	ХX	хx	XΧ	X	хx	ΧΣ	ζ	
	Party Designee To authorize a		person to discuss	this retur			Х	and e	nter	the	nam	ie a	nd r	ohon	e nu	mber
	at person. See instructions.		pordon to discuss	, this rotari	· · · · · · · · · · · · · · · · · · ·	o i i i, onooit noro		una o	1101	LIIO				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
of tha							Phone	number	12	34	56	78	90			
	ee's name							Harribor				_	_			
Design	ee's name	to the be	est of my knowledge, this	s return is corre	ect. Declaration	n of paid preparer is ba	sed on all th	ne informat	tion a	vailab	le to t	he pi	epare	er.		
Design	ature Under penalties of law, I declare that,	to the be	est of my knowledge, thi	s return is corr	ect. Declaration	n of paid preparer is ba	ased on all th	ne informat	tion a	vailab	le to i	the p	repar	er.		
Design Sign	ature Under penalties of law, I declare that,	to the be			_			ne informat			le to	the p	repar	er.		
Design Sign		to the be		s return is corre	Paid	d preparer's signatu		ne informat	Da	ate						
Sign Your s	ature Under penalties of law, I declare that,		D	ate	Paid		re		Da	ate 234	156	678	89		mber	

66 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85