

2014 SCHEDULE H SUB Homeowner and Renter Property Tax Credit



Important: Read the eligibility requirements before completing.

Personal information

Your social security number (SSN) 123456789

Your daytime telephone number 1234567890

SOFTWARE DEVELOPER USE ONLY

VENDOR ID# 1234

Your first name ABCDEFGHIJKL

M.I. A

Last name ABCDEFGHIJKLABCDEFGH

Spouse's/registered domestic partner's SSN 123456789

Spouse's/registered domestic partner's first name ABCDEFGHIJKL

M.I. A

Last name ABCDEFGHIJKLABCDEFGH

Mailing address (number, street and apartment number if applicable)

12345ABCDEF... ABCDEFGHIJKLABCDEF

City ABCDEFGHIJKLABCDEFGH

State AB Zipcode + 4 123456789

Address of DC property (number, street and apartment number if applicable) for which you are claiming credit if different from above

12345ABCDEF... ABCDEFGHIJKLABCDEF

Type of property for which you are claiming credit. Mark only one: X House X Apartment X Rooming house X Condominium

Complete Section A or Section B, whichever one applies.

Do not claim this credit for an exempt property owned by a government, a house of worship or a non-profit organization

Section A Credit claim based on rent paid

Round cents to the nearest dollar. If amount is zero or less, leave the line blank.

- 1 Federal adjusted gross income of the tax filing unit (see instructions). From Line 32 on page 2. 1 \$ 123456789.00
2 Rent paid on this property in 2014. \$ 123456789.00 x .20 = 2 \$ 123456789.00
3 Property tax credit. Use the 'Computing Your Property Tax Credit' Worksheet. 3 \$ 123456789.00
4 Rent supplements received in 2014 by you or by your landlord on your behalf. 4 \$ 123456789.00
5 Property tax credit. Subtract Line 4 from Line 3, D-40 filers enter here and on Line 29 of D-40. 5 \$ 123456789.00

6 Landlord's name

ABCDEFGHIJKLABCDEF... ABCDEFGHIJKLABCD

Landlord's address (number, street and apartment number if applicable)

12345ABCDEF... ABCDEFGHIJKLABCDEF

Landlord's telephone number 1234567890

City ABCDEFGHIJKLABCDEFGH

State AB Zipcode + 4 123456789

Section B Claim based on real property tax paid

Round cents to the nearest dollar. If amount is zero or less, leave the line blank.

- 7 Federal adjusted gross income of the tax filing unit (see instructions). From Line 32 on page 2. 7 \$ 123456789.00
8 DC real property tax paid by you on this property in 2014. 8 \$ 123456789.00
9 Property tax credit. Use the 'Computing Your Property Tax Credit' Worksheet. Enter here and on Line 29 of D-40. 9 \$ 123456789.00

10 Enter information from your real property tax bill or assessment. If a section is blank on your tax bill, leave it blank here.

Square number 1234 Suffix number 1234 Lot number 1234

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Your last name **ABCDEFGHIJKLMN**
 Your SSN. **123456789**



Federal Adjusted Gross Income of the tax filing unit (see instructions) - Report the AGI of every member of your tax filing unit, including income subject to federal but not DC income tax. See following pages to add additional dependents.

			COLUMN A (YOU)	COLUMN B(SPOUSE/DP)	COLUMN C (DEPENDENT#1)
Name (Last, First)			ABCDEFGHIJKLMN	ABCDEFGHIJKLMN	ABCDEFGHIJKLMN
Social Security Number (SSN)			123456789	123456789	123456789
Date of Birth (MMDDYYYY)			MMDDYYYY	MMDDYYYY	MMDDYYYY
1	Wages, salaries, tips, etc.	\$1	123456789.00	123456789.00	123456789.00
2	Taxable interest	2	123456789.00	123456789.00	123456789.00
3	Ordinary Dividends	3	123456789.00	123456789.00	123456789.00
4	Taxable refunds, credits, or offsets of state and local income taxes	4	123456789.00	123456789.00	123456789.00
5	Alimony received	5	123456789.00	123456789.00	123456789.00
6	Business Income	Mark if loss <input checked="" type="checkbox"/>	123456789.00	<input checked="" type="checkbox"/> 123456789.00	<input checked="" type="checkbox"/> 123456789.00
7	Capital gain	Mark if loss <input checked="" type="checkbox"/>	123456789.00	<input checked="" type="checkbox"/> 123456789.00	<input checked="" type="checkbox"/> 123456789.00
8	Other gains	Mark if loss <input checked="" type="checkbox"/>	123456789.00	<input checked="" type="checkbox"/> 123456789.00	<input checked="" type="checkbox"/> 123456789.00
9	IRA distributions: Taxable amount	9	123456789.00	123456789.00	123456789.00
10	Pensions and annuities: Taxable amount	10	123456789.00	123456789.00	123456789.00
11	Rental real estate, royalties, partnerships, S Corporations, trusts, etc.	Mark if loss <input checked="" type="checkbox"/>	123456789.00	<input checked="" type="checkbox"/> 123456789.00	<input checked="" type="checkbox"/> 123456789.00
12	Farm Income	Mark if loss <input checked="" type="checkbox"/>	123456789.00	<input checked="" type="checkbox"/> 123456789.00	<input checked="" type="checkbox"/> 123456789.00
13	Unemployment compensation	13	123456789.00	123456789.00	123456789.00
14	Social security benefits: Taxable amount	14	123456789.00	123456789.00	123456789.00
15	Other income:	Mark if loss <input checked="" type="checkbox"/>	123456789.00	<input checked="" type="checkbox"/> 123456789.00	<input checked="" type="checkbox"/> 123456789.00
(Attach separate sheet(s))					
16	Add Lines 1 through 15 in each column.	Mark if loss <input checked="" type="checkbox"/>	123456789.00	<input checked="" type="checkbox"/> 123456789.00	<input checked="" type="checkbox"/> 123456789.00
17	Educator expenses	17	123456789.00	123456789.00	123456789.00
18	Certain business expenses of reservists, performing artist, and fee-basis government officials	18	123456789.00	123456789.00	123456789.00
19	Health savings account deduction	19	123456789.00	123456789.00	123456789.00
20	Moving expenses	20	123456789.00	123456789.00	123456789.00
21	Deductible part of self-employment tax	21	123456789.00	123456789.00	123456789.00
22	Self-employed SEP, SIMPLE, and qualified plans	22	123456789.00	123456789.00	123456789.00
23	Self-employed health insurance deduction	23	123456789.00	123456789.00	123456789.00
24	Penalty on early withdrawal of savings	24	123456789.00	123456789.00	123456789.00
25	Alimony paid	25	123456789.00	123456789.00	123456789.00
26	IRA deduction	26	123456789.00	123456789.00	123456789.00
27	Student loan interest deduction	27	123456789.00	123456789.00	123456789.00
28	Tuition and fees per Federal form 8917	28	123456789.00	123456789.00	123456789.00
29	Domestic production activities deduction	29	123456789.00	123456789.00	123456789.00
30	Add Lines 17 through 29 in each column	30	123456789.00	123456789.00	123456789.00
31	Subtract Line 30 from Line 16	Mark if loss <input checked="" type="checkbox"/>	123456789.00	<input checked="" type="checkbox"/> 123456789.00	<input checked="" type="checkbox"/> 123456789.00
32	Total federal adjusted gross income. Add amounts entered on Line 31, Columns A-I and enter total here on Line 32 and on Section A, Line 1 or Section B, Line 7.	Mark if loss <input checked="" type="checkbox"/>			\$123456789.00

For STANDALONE FILERS only, please complete the following "Refund Options" information. Will the refund go to an account outside of the U.S.? Yes No
 Refund Options: For information on the tax refund card and program limitations, see instructions or visit our website otr.dc.gov/refundprepaidcards.
 Mark one refund choice: Direct deposit Tax refund card Paper check
 Direct Deposit To have your refund deposited into your checking OR savings account, mark X and enter bank routing and account number
 Routing Number 123456789 Account Number 000000012345678

Your signature _____ Date _____ Preparer's signature _____ Date _____
 Spouse's/domestic partner's signature if filing jointly or separately on same return _____ Date _____ Preparer's Tax Identification Number (PTIN) 123456789 PTIN telephone number 123456789

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Your last name **ABCDEFGHIJKLMN**
 Your SSN. **123456789**



Federal Adjusted Gross Income of the tax filing unit (see instructions) - Report the AGI of every member of your tax filing unit, including income subject to federal but not DC income tax. See following pages to add additional dependents.

			COLUMN D (DEPENDENT #2)	COLUMN E (DEPENDENT #3)	COLUMN F (DEPENDENT #4)
Name (Last, First)			ABCDEFGHIJ	KLMNOP	QRSTU
Social Security Number (SSN)			123456789	123456789	123456789
Date of Birth (MMDDYYYY)			MMDDYYYY	MMDDYYYY	MMDDYYYY
1	Wages, salaries, tips, etc.	\$1	123456789.00	123456789.00	123456789.00
2	Taxable interest	2	123456789.00	123456789.00	123456789.00
3	Ordinary Dividends	3	123456789.00	123456789.00	123456789.00
4	Taxable refunds, credits, or offsets of state and local income taxes	4	123456789.00	123456789.00	123456789.00
5	Alimony received	5	123456789.00	123456789.00	123456789.00
6	Business Income	Mark if loss <input checked="" type="checkbox"/>	123456789.00	<input checked="" type="checkbox"/> 123456789.00	<input checked="" type="checkbox"/> 123456789.00
7	Capital gain	Mark if loss <input checked="" type="checkbox"/>	123456789.00	<input checked="" type="checkbox"/> 123456789.00	<input checked="" type="checkbox"/> 123456789.00
8	Other gains	Mark if loss <input checked="" type="checkbox"/>	123456789.00	<input checked="" type="checkbox"/> 123456789.00	<input checked="" type="checkbox"/> 123456789.00
9	IRA distributions: Taxable amount	9	123456789.00	123456789.00	123456789.00
10	Pensions and annuities: Taxable amount	10	123456789.00	123456789.00	123456789.00
11	Rental real estate, royalties, partnerships, S Corporations, trusts, etc.	Mark if loss <input checked="" type="checkbox"/>	123456789.00	<input checked="" type="checkbox"/> 123456789.00	<input checked="" type="checkbox"/> 123456789.00
12	Farm Income	Mark if loss <input checked="" type="checkbox"/>	123456789.00	<input checked="" type="checkbox"/> 123456789.00	<input checked="" type="checkbox"/> 123456789.00
13	Unemployment compensation	13	123456789.00	123456789.00	123456789.00
14	Social security benefits: Taxable amount	14	123456789.00	123456789.00	123456789.00
15	Other income:	Mark if loss <input checked="" type="checkbox"/>	123456789.00	<input checked="" type="checkbox"/> 123456789.00	<input checked="" type="checkbox"/> 123456789.00
(Attach separate sheet(s))					
16	Add Lines 1 through 15 in each column.	Mark if loss <input checked="" type="checkbox"/>	123456789.00	<input checked="" type="checkbox"/> 123456789.00	<input checked="" type="checkbox"/> 123456789.00
17	Educator expenses	17	123456789.00	123456789.00	123456789.00
18	Certain business expenses of reservists, performing artist, and fee-basis government officials	18	123456789.00	123456789.00	123456789.00
19	Health savings account deduction	19	123456789.00	123456789.00	123456789.00
20	Moving expenses	20	123456789.00	123456789.00	123456789.00
21	Deductible part of self-employment tax	21	123456789.00	123456789.00	123456789.00
22	Self-employed SEP, SIMPLE, and qualified plans	22	123456789.00	123456789.00	123456789.00
23	Self-employed health insurance deduction	23	123456789.00	123456789.00	123456789.00
24	Penalty on early withdrawal of savings	24	123456789.00	123456789.00	123456789.00
25	Alimony paid	25	123456789.00	123456789.00	123456789.00
26	IRA deduction	26	123456789.00	123456789.00	123456789.00
27	Student loan interest deduction	27	123456789.00	123456789.00	123456789.00
28	Tuition and fees per Federal form 8917	28	123456789.00	123456789.00	123456789.00
29	Domestic production activities deduction	29	123456789.00	123456789.00	123456789.00
30	Add Lines 17 through 29 in each column	30	123456789.00	123456789.00	123456789.00
31	Subtract Line 30 from Line 16	Mark if loss <input checked="" type="checkbox"/>	123456789.00	<input checked="" type="checkbox"/> 123456789.00	<input checked="" type="checkbox"/> 123456789.00

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Your last name **ABCDEFGHIJKLMN**
 Your SSN. **123456789**



Federal Adjusted Gross Income of the tax filing unit (see instructions) - Report the AGI of every member of your tax filing unit, including income subject to federal but not DC income tax. See following pages to add additional dependents.

			COLUMN G (DEPENDENT #5)	COLUMN H (DEPENDENT #6)	COLUMN I (DEPENDENT #7)
Name (Last, First)			ABCDEFGHIJABCDEFGHI	ABCDEFGHIJABCDEFGHI	ABCDEFGHIJABCDEFGHI
Social Security Number (SSN)			123456789	123456789	123456789
Date of Birth (MMDDYYYY)			MMDDYYYY	MMDDYYYY	MMDDYYYY
1	Wages, salaries, tips, etc.	\$1	123456789.00	123456789.00	123456789.00
2	Taxable interest	2	123456789.00	123456789.00	123456789.00
3	Ordinary Dividends	3	123456789.00	123456789.00	123456789.00
4	Taxable refunds, credits, or offsets of state and local income taxes	4	123456789.00	123456789.00	123456789.00
5	Alimony received	5	123456789.00	123456789.00	123456789.00
6	Business Income	Mark if loss <input checked="" type="checkbox"/>	123456789.00	<input checked="" type="checkbox"/> 123456789.00	<input checked="" type="checkbox"/> 123456789.00
7	Capital gain	Mark if loss <input checked="" type="checkbox"/>	123456789.00	<input checked="" type="checkbox"/> 123456789.00	<input checked="" type="checkbox"/> 123456789.00
8	Other gains	Mark if loss <input checked="" type="checkbox"/>	123456789.00	<input checked="" type="checkbox"/> 123456789.00	<input checked="" type="checkbox"/> 123456789.00
9	IRA distributions: Taxable amount	9	123456789.00	123456789.00	123456789.00
10	Pensions and annuities: Taxable amount	10	123456789.00	123456789.00	123456789.00
11	Rental real estate, royalties, partnerships, S Corporations, trusts, etc.	Mark if loss <input checked="" type="checkbox"/>	123456789.00	<input checked="" type="checkbox"/> 123456789.00	<input checked="" type="checkbox"/> 123456789.00
12	Farm Income	Mark if loss <input checked="" type="checkbox"/>	123456789.00	<input checked="" type="checkbox"/> 123456789.00	<input checked="" type="checkbox"/> 123456789.00
13	Unemployment compensation	13	123456789.00	123456789.00	123456789.00
14	Social security benefits: Taxable amount	14	123456789.00	123456789.00	123456789.00
15	Other income:	Mark if loss <input checked="" type="checkbox"/>	123456789.00	<input checked="" type="checkbox"/> 123456789.00	<input checked="" type="checkbox"/> 123456789.00
(Attach separate sheet(s))					
16	Add Lines 1 through 15 in each column.	Mark if loss <input checked="" type="checkbox"/>	123456789.00	<input checked="" type="checkbox"/> 123456789.00	<input checked="" type="checkbox"/> 123456789.00
17	Educator expenses	17	123456789.00	123456789.00	123456789.00
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19	Health savings account deduction	19	123456789.00	123456789.00	123456789.00
20	Moving expenses	20	123456789.00	123456789.00	123456789.00
21	Deductible part of self-employment tax	21	123456789.00	123456789.00	123456789.00
22	Self-employed SEP, SIMPLE, and qualified plans	22	123456789.00	123456789.00	123456789.00
23	Self-employed health insurance deduction	23	123456789.00	123456789.00	123456789.00
24	Penalty on early withdrawal of savings	24	123456789.00	123456789.00	123456789.00
25	Alimony paid	25	123456789.00	123456789.00	123456789.00
26	IRA deduction	26	123456789.00	123456789.00	123456789.00
27	Student loan interest deduction	27	123456789.00	123456789.00	123456789.00
28	Tuition and fees per Federal form 8917	28	123456789.00	123456789.00	123456789.00
29	Domestic production activities deduction	29	123456789.00	123456789.00	123456789.00
30	Add Lines 17 through 29 in each column	30	123456789.00	123456789.00	123456789.00
31	Subtract Line 30 from Line 16	Mark if loss <input checked="" type="checkbox"/>	123456789.00	<input checked="" type="checkbox"/> 123456789.00	<input checked="" type="checkbox"/> 123456789.00