



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

For STANDALONE FILERS only, please complete the following "Refund Options" information Will the refund go to an account outside of the US? 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 to your checking OR savings account, fill in oval and enter bank routing and account numbers. See instructions.

Routing Number

Account Number

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) _____ PTIN telephone number _____



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 page to add additional dependents.

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



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		COLUMN G (DEPENDENT #5)	COLUMN H (DEPENDENT #6)	COLUMN I (DEPENDENT #7)
Name (Last, First)				
Social Security Number (SSN)				
Date of Birth (MMDDYYYY)				
INCOME	1 Wages, salaries, tips, etc.	1 \$	\$	\$
	2 Taxable interest	2		
	3 Ordinary Dividends	3		
	4 Taxable refunds, credits, or offsets of state and local income taxes	4		
	5 Alimony received	5		
	6 Business Income Fill in if minus <input type="radio"/>	6	<input type="radio"/>	<input type="radio"/>
	7 Capital gain Fill in if minus <input type="radio"/>	7	<input type="radio"/>	<input type="radio"/>
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	12 Farm income Fill in if minus <input type="radio"/>	12	<input type="radio"/>	<input type="radio"/>
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ADJUSTMENTS	17 Educator expenses	17		
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COMPUTING YOUR PROPERTY TAX CREDIT WORKSHEET

This credit may not be claimed if you live in a property owned by a government, a house of worship or a nonprofit organization.

The credit equals a percentage of the property taxes paid or the portion of the rent paid that is equivalent to property taxes (20% of rent paid) *in excess* of the applicable percentage of the total federal adjusted gross income of the tax filing unit. The maximum credit amount is \$1000.

If you are under age 70 and the

Federal AGI of your tax filing unit is:

\$0 - \$24,999

\$25,000 - \$40,000

Percentage -

The amount of property tax that exceeds 3.0% of the adjusted gross income of the tax filing unit

The amount of property tax that exceeds 4.0% of the adjusted gross income of the tax filing unit

If you are age 70 or older and the

Federal AGI of your tax filing unit is:

\$0 - \$60,000

Percentage -

The amount of property tax that exceeds 3.0% of the adjusted gross income of the tax filing unit

1. Enter federal AGI of tax filing unit (Line 1, Section A, Schedule H or Line 7, Section B, Schedule H).

1. _____

2. Enter property taxes paid in 2014 or 20% of rent paid in 2014.

2. _____

3. Multiply Line 1 by the applicable percentage (.03 or .04).

3. _____

4. Balance (Subtract Line 3 from Line 2).

4. _____

5. Property Tax Credit Limit.

5. \$1000.00

6. **Enter** the smaller of Line 4 or Line 5 here on Line 6 **and** on Line 3 of Schedule H, Section A for credit based on rent paid, or Line 9 of Schedule H, Section B for credit based on property tax paid. Round to the nearest whole dollar.

6. _____