Government of the District of Columbia		
DC 9270	0 0 8 3 7 9 5 1 0	
DC-8379 Injured Spouse	Allocation SOFTWARE DEVELOPER USE ONLY VENDO	R 9999
Information about DC-8379 and its separate instructions is at MyTa	ax.DC.gov	
Information About the Tax Return for Which T	This Form is Filed	
Enter the following information exactly as it is shown on the tax return		
The spouse's name and taxpayer identification number shown first c		
First name, initial, and last name shown first on the return	Taxpayer identification number shown first	If Injured Spouse, mark here
First name, initial, and last name shown second on the return	Taxpayer identification number shown second	If Injured Spouse,
xxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxx		mark here
Mailing address (number, street and suite/apartment number if applic	cable)	
City State	ZIP Code+4	
XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	999999999	
Part I Should You File This Form? You m	ust complete this part.	
1 Enter the tax year for which you are filing this form. 9999	Answer the following questions for that year.	
2 Did you (or will you) file a joint return or married/registered dome	estic partners filing separately on the same return?	
X Yes. Go to Line 3.		
X No. Stop here. Do not file this form. You are not an injur	ed spouse.	
3 Did (or will) DC use the joint overpayment to pay any of the foll	lowing legally enforceable past-due debt(s) owed only by	y your spouse?
* DC income tax * DC unemployment compensation * Child	I support * DC tickets and traffic penalties * federal in	come tax
* federal student loans		
X Yes. Go to Line 4.		
X No. Stop here. Do not file this form. You are not an injur	ed spouse.	
4 Are you legally obligated to pay this past-due amount?		
X Yes. Stop here. Do not file this form. You are not an injure	d spouse.	
X No.		
5 Did you make and report payments, such as DC income tax with	hholding or estimated tax payments?	
X Yes. Skip Line 6 and go to Part II and complete the res	t of this form.	
X No. Go to Line 6.		
6 Did you have earned income, such as wages, salaries, or self-em	ployment income?	
X Yes. Go to part II and complete the rest of the form.		
X No. Stop Here. Do not file this form. You are not an injure	ed spouse.	

	C-8379, Page 2															
				73737373			373737									
	i ter your last nai i ter your TIN			XXXXX 99999		XXXX	XXX		0 0	8 3 7	9 8	5 2	0 0	0 1		
Pa				ouses			e Tax Return									
	Al (Column (a) mu	located		(b) +(c)	Mark) if loss		Amount shown on joint return	Mark if loss) Allocated to jured spouse		Mark if loss		Allocat her spo		
7	Federal adjusted				X		999999.C			9999999		X	9999			00
8	Total additions to income) federal a	djusted gro	oss		999	999999.0	0	9999	999999	.00		9999	999	99.(00
9	Add Line 7 and	Line 8			X	999	999999.0	0 X	9999	999999	.00	Х	9999	999	99.(00
10	Total subtractions gross income	s from fed	eral adjust	ted		999	999999.0	U	9999	9999999	•00		9999	999	99.(00
11	DC adjusted gros				X	999	999999.0	0 X	9999	999999	.00	Х	9999	999	99.(00
	(subtract Line 10		e 9)							000000			0000			
12	Deduction amou	nt				999	999999.0	U	9999	9999999	• 00	++	9999	999	yy.(JU
13	DC taxable incom	ie. Subtra	ct Line 12	from Line	11. X	999	999999.0	0 X	9999	999999	.00	Х	9999	999	99.(00
1 /		a ¢100 c	20			900	999999.0	0	999	999999			9999	900	90 0	
14	Tax. If Line 20 i use Calculation I	5 \$100,00	JU or more							222222	• • • •		9999	222	ッッ。(
15	Total refundable excluding earned		n-refundat	ole credits		999	999999.0	0	9999	9999999	.00		9999	999	99.(00
16	DC estimated tax		;			999	999999.0	0	9999	999999	.00		9999	999	99.(00
-																
17	DC withholding ta	ax paid				999	999999.0	0	9999	999999	.00		9999	999	99.(00
	rt III Signatu															
Line		الماما يارين	lare that I				any accompanying						wledge an	d belief,	they ar	e
			laration of	brenarer (taxnaver) is based on all int	ormation 4	of which pro	eparer nas an	v knowl	edge				
true	, correct, and comp	olete. Dec	laration of spouse's s			taxpayer) is based on all inf	ormation (of which pro	eparer nas an		edge. e numbe	er			
true Kee this rec	e, correct, and comp ep a copy of formfor your ords.	olete. Dec	spouse's s	ignature					Date	9999999	Phon 99	e numbe 9999	99999			
true Kee this rec P a	e, correct, and comp p a copy of form for your ords.	olete. Dec		ignature) is based on all inf eparer's signature		Date 99999 Date	999999	Phon 99	e numbe 9999 if self-	999999 PTIN	١		
true Kee this rec Pa Pa	, correct, and comp pa copy of formfor your ords. aid eparer	Injured	spouse's s vpe prepare	ignature					Date 99999 Date	999999	Phon 99 Mark	e numbe 9999 if self-	999999 PTIN	١	9999	9
true Kee this rec Pa Pa	e, correct, and comp p a copy of form for your ords.	Polete. Dec Injured Print/Ty Firm's r	spouse's s pe prepare name	ignature er's name		P			Date 99999 Date 99999	999999	Phon 99 Mark empto	e numbe 99999 if self- oyed	999999 PTIN	١	9999	9
true Kee this rec Pa Pa	, correct, and comp pa copy of formfor your ords. aid eparer	Polete. Dec Injured Print/Ty Firm's r	spouse's s 'pe prepare name XXXXX	ignature er's name XXXXX	XXXXX	P	eparer's signature	xxxx	Date 99999 Date 99999	9 9 9 9 9 9 9 9 9 9 9 Firm's EIN 9 9 9 9 9 9 Phone numb	Phon 99 Mark emplo 9999	e numbe 99999 if self- oyed	999999 PTIN	١	9999	9
true Kee this rec Pa Pa	, correct, and comp pa copy of formfor your ords. aid eparer	Plete. Dec Injured Print/Ty Firm's r XXXX Firm's a	spouse's s 'pe prepare name XXXXX ddress	ignature er's name XXXXX 9 9 9 9 X	XXXX XXXX	Pi XXXX XXXX	eparer's signature XXXXXXXXX	XXXX	Date 99999 Date 99999 XXXX	999999 999999 Firm's EIN 999999	Phon 99 Mark emplo 9999	e numbe 99999 if self- oyed	999999 PTIN	١	9999	9
true Kee this rec Pa Pa	, correct, and comp pa copy of formfor your ords. aid eparer	Plete. Dec Injured Print/Ty Firm's r XXXX Firm's a	spouse's s 'pe prepare name XXXXX ddress	ignature er's name XXXXX 9 9 9 9 X	XXXX XXXX	Pi XXXX XXXX	eparer's signature XXXXXXXXX XXXXXXXXX	XXXX	Date 99999 Date 99999 XXXX	9 9 9 9 9 9 9 9 9 9 9 Firm's EIN 9 9 9 9 9 9 Phone numb	Phon 99 Mark emplo 9999	e numbe 99999 if self- oyed	999999 PTIN	١	9999	9
true Kee this rec Pa Pa	, correct, and comp pa copy of formfor your ords. aid eparer	Plete. Dec Injured Print/Ty Firm's r XXXX Firm's a	spouse's s 'pe prepare name XXXXX ddress	ignature er's name XXXXX 9 9 9 9 X	XXXX XXXX	Pi XXXX XXXX	eparer's signature XXXXXXXXX XXXXXXXXX	XXXX	Date 99999 Date 99999 XXXX	9 9 9 9 9 9 9 9 9 9 9 Firm's EIN 9 9 9 9 9 9 Phone numb	Phon 99 Mark emplo 9999	e numbe 99999 if self- oyed	999999 PTIN	١	9999	9
true Kee this rec Pa Pa	, correct, and comp pa copy of formfor your ords. aid eparer	Plete. Dec Injured Print/Ty Firm's r XXXX Firm's a	spouse's s 'pe prepare name XXXXX ddress	ignature er's name XXXXX 9 9 9 9 X	XXXX XXXX	Pi XXXX XXXX	eparer's signature XXXXXXXXX XXXXXXXXX	XXXX	Date 99999 Date 99999 XXXX	9 9 9 9 9 9 9 9 9 9 9 Firm's EIN 9 9 9 9 9 9 Phone numb	Phon 99 Mark emplo 9999	e numbe 99999 if self- oyed	999999 PTIN	١	99999	9
true Kee this rec Pa Pa	, correct, and comp pa copy of formfor your ords. aid eparer	Plete. Dec Injured Print/Ty Firm's r XXXX Firm's a	spouse's s 'pe prepare name XXXXX ddress	ignature er's name XXXXX 9 9 9 9 X	XXXX XXXX	Pi XXXX XXXX	eparer's signature XXXXXXXXX XXXXXXXXX	XXXX	Date 99999 Date 99999 XXXX	9 9 9 9 9 9 9 9 9 9 9 Firm's EIN 9 9 9 9 9 9 Phone numb	Phon 99 Mark emplo 9999	e numbe 99999 if self- oyed	999999 PTIN	١	9999	9
true Kee this rec Pa Pa	, correct, and comp pa copy of formfor your ords. aid eparer	Plete. Dec Injured Print/Ty Firm's r XXXX Firm's a	spouse's s 'pe prepare name XXXXX ddress	ignature er's name XXXXX 9 9 9 9 X	XXXX XXXX	Pi XXXX XXXX	eparer's signature XXXXXXXXX XXXXXXXXX	XXXX	Date 99999 Date 99999 XXXX	9 9 9 9 9 9 9 9 9 9 9 Firm's EIN 9 9 9 9 9 9 Phone numb	Phon 99 Mark emplo 9999	e numbe 99999 if self- oyed	999999 PTIN	١	9999	9
true Kee this rec Pa Pa	, correct, and comp pa copy of formfor your ords. aid eparer	Plete. Dec Injured Print/Ty Firm's r XXXX Firm's a	spouse's s 'pe prepare name XXXXX ddress	ignature er's name XXXXX 9 9 9 9 X	XXXX XXXX	Pi XXXX XXXX	eparer's signature XXXXXXXXX XXXXXXXXX	XXXX	Date 99999 Date 99999 XXXX	9 9 9 9 9 9 9 9 9 9 9 Firm's EIN 9 9 9 9 9 9 Phone numb	Phon 99 Mark emplo 9999	e numbe 99999 if self- oyed	999999 PTIN	١		9
true Kee this rec Pa Pa	, correct, and comp pa copy of formfor your ords. aid eparer	Plete. Dec Injured Print/Ty Firm's r XXXX Firm's a	spouse's s 'pe prepare name XXXXX ddress	ignature er's name XXXXX 9 9 9 9 X	XXXX XXXX	Pi XXXX XXXX	eparer's signature XXXXXXXXX XXXXXXXXX	XXXX	Date 99999 Date 99999 XXXX	9 9 9 9 9 9 9 9 9 9 9 Firm's EIN 9 9 9 9 9 9 Phone numb	Phon 99 Mark emplo 9999	e numbe 99999 if self- oyed	999999 PTIN	١		9
true Kee this rec Pa Pa	, correct, and comp pa copy of formfor your ords. aid eparer	Plete. Dec Injured Print/Ty Firm's r XXXX Firm's a	spouse's s 'pe prepare name XXXXX ddress	ignature er's name XXXXX 9 9 9 9 X	XXXX XXXX	Pi XXXX XXXX	eparer's signature XXXXXXXXX XXXXXXXXX	XXXX	Date 99999 Date 99999 XXXX	9 9 9 9 9 9 9 9 9 9 9 Firm's EIN 9 9 9 9 9 9 Phone numb	Phon 99 Mark emplo 9999	e numbe 99999 if self- oyed	999999 PTIN	١		9
true Kee this rec Pa Pa	, correct, and comp pa copy of formfor your ords. aid eparer	Plete. Dec Injured Print/Ty Firm's r XXXX Firm's a	spouse's s 'pe prepare name XXXXX ddress	ignature er's name XXXXX 9 9 9 9 X	XXXX XXXX	Pi XXXX XXXX	eparer's signature XXXXXXXX XXXXXXXX	XXXX	Date 99999 Date 99999 XXXX	9 9 9 9 9 9 9 9 9 9 9 Firm's EIN 9 9 9 9 9 9 Phone numb	Phon 99 Mark emplo 9999	e numbe 99999 if self- oyed	999999 PTIN	١		9
true Kee this rec Pa Pa	, correct, and comp pa copy of formfor your ords. aid eparer	Plete. Dec Injured Print/Ty Firm's r XXXX Firm's a	spouse's s 'pe prepare name XXXXX ddress	ignature er's name XXXXX 9 9 9 9 X	XXXX XXXX	Pi XXXX XXXX	eparer's signature XXXXXXXX XXXXXXXX	XXXX	Date 99999 Date 99999 XXXX	9 9 9 9 9 9 9 9 9 9 9 Firm's EIN 9 9 9 9 9 9 Phone numb	Phon 99 Mark emplo 9999	e numbe 99999 if self- oyed	999999 PTIN	١		9
true Kee this rec Pa Pa	, correct, and comp pa copy of formfor your ords. aid eparer	Plete. Dec Injured Print/Ty Firm's r XXXX Firm's a	spouse's s 'pe prepare name XXXXX ddress	ignature er's name XXXXX 9 9 9 9 X	XXXX XXXX	Pi XXXX XXXX	eparer's signature XXXXXXXX XXXXXXXX	XXXX	Date 99999 Date 99999 XXXX	9 9 9 9 9 9 9 9 9 9 9 Firm's EIN 9 9 9 9 9 9 Phone numb	Phon 99 Mark emplo 9999	e numbe 99999 if self- oyed	999999 PTIN	١		9
true Kee this rec Pa Pa	, correct, and comp pa copy of formfor your ords. aid eparer	Plete. Dec Injured Print/Ty Firm's r XXXX Firm's a	spouse's s 'pe prepare name XXXXX ddress	ignature er's name XXXXX 9 9 9 9 X	XXXX XXXX	Pi XXXX XXXX	eparer's signature XXXXXXXX XXXXXXXX	XXXX	Date 99999 Date 99999 XXXX	9 9 9 9 9 9 9 9 9 9 9 Firm's EIN 9 9 9 9 9 9 Phone numb	Phon 99 Mark emplo 9999	e numbe 99999 if self- oyed	999999 PTIN	١		9
true Kee this rec Pa Pa	, correct, and comp pa copy of formfor your ords. aid eparer	Plete. Dec Injured Print/Ty Firm's r XXXX Firm's a	spouse's s 'pe prepare name XXXXX ddress	ignature er's name XXXXX 9 9 9 9 X	XXXX XXXX	Pi XXXX XXXX	eparer's signature XXXXXXXX XXXXXXXX	XXXX	Date 99999 Date 99999 XXXX	9 9 9 9 9 9 9 9 9 9 9 Firm's EIN 9 9 9 9 9 9 Phone numb	Phon 99 Mark emplo 9999	e numbe 99999 if self- oyed	999999 PTIN	١		9