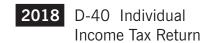
Revised 09/18



2D BARCODE TEST #1.1

▲		rsonal information r telephone number	Fill in if: Filing an	amended return. See instructions.	OFFICIAL USE ONLY Vendor ID#0000
STAPLE OTHER DOCUMENTS IN UPPER LEFT IN BACK	You	r taxpayer identification number (TIN) and Date of Birth (MMDDYYYY)	Spouse's/registered dome	stic partner's TIN and Date of Birth ((MMDDYYYY)
ER LE	You	ır first name			Fill in if Deceased
I UPPI	Spo	use's/registered domestic partner's first name			
NTS II	Ė				
CUME	Hon	ne address (number, street and suite/apartment number if applicable)			
ER DO					
OTHE					
TAPLE	City		State	Zip Code +4	
S.	<u></u>				
	<u>Filir</u> 1	ng status Single, Married filing jointly, Fill in only one: Married filing separately on same return E	Married filing separately,		neone else
님	-	Registered domestic partners filing jointly			
S HE		Head of household Enter qualifying depen	dent and/or non-dependen	t information on Schedule S.	
MENT	2	Qualifying widow(er) with dependent child			Considerations
STATE		Part-year resident in DC from (MMDDYYY) Complete your federal return first – Enter you			See instructions.
DING	Inco	ome Information	Round cents to nearest	t dollar. If amount is zero, leave line blank; enter amount and fill in oval.	
HHOL	а	Wages, salaries, unemployment compensation and/or tips,	a \$.00)
WIT	b	see instructions. Business income or loss, see instructions. Fill in if loss	b \$.00)
STAPLE W-2s AND ANY OTHER WITHHOLDING STATEMENTS HERE	С	Capital gain (or loss).	oc\$.00)
	d	Rental real estate, royalties, partnerships, etc. Fill in if loss	od \$	000)
s AND	Con	nputation of DC Gross and Adjusted Gross Income			
E W-2		Federal adjusted gross income. From adjusted gross income lines on fe	deral Fill in if loss	3 \$	00
TAPLE	ı	Forms 1040, 1040A, 1040EZ, or 1040NR			
0)	Add	litions to DC Income			00
	4	Franchise tax deducted on federal forms, see instructions.		4 \$.00
	5	Other additions from DC Schedule I, Calculation A, Line 8.		5 \$	00
	6	Add Lines 3, 4 and 5.	Fill in if loss	6 \$.00
	Sub	stractions from DC Income			
	7	Part year residents, enter income received during period of no	onresidence, see instructions.	7 \$.00
	8	Taxable refunds, credits or offsets of state and local income to	ax.	8 \$.00
	9	Taxable amount of social security and tier 1 railroad retirement	nt	9 \$.00
	10	Income reported and taxed this year on a DC franchise or fide	uciary return.	10 \$.00
	11	DC and federal government survivor benefits, see instructions.		11 \$.00
	12	Other subtractions from DC Schedule I, Calculation B, Line 1	6.	12 \$	00
	13	Total subtractions from DC income, Lines 7-12.		13 \$	
	14	DC adjusted gross income, Line 6 minus Line 13.	Fill in if loss	14 \$.00

File order 1

D-	40 PAGE 2							
En	ter your last name.							
Fn	ter your TIN							
		Itomizad Oo : , , , ;						
15 16	Deduction type. Take the same type as you took on your federal return. Fill in which type: Standard or DC deduction amount. Do not copy from federal return. For amount to enter, see instructions.	Itemized See instructions for a	amount to enter on Line 16.					
17	DC taxable income. Subtract Line 16 from Line 14 Fill in if loss							
18	Tax. If Line 17 is \$100,000 or less, use tax tables to find the tax, if more, use Calculation I in instructions.	17 \$	00					
10	Fill in if filing separately on same return. Complete Calculation J on Schedule S.	18 \$.00					
19		19 \$	00					
20	Non-refundable credits from DC Schedule U, Part 1a, Line 7. Attach Schedule U.	20 \$	00					
21	Total non-refundable credits. Add Line 19 and Line 20.	21 \$	00					
22	Total tax. Subtract Line 21 from Line 18. If Line 18 is less than Line 21 leave Line 22 blank.	22 \$	00					
23	DC Earned Income Tax Credit	23 \$	00					
	a Enter the number of qualified EITC children. 23b Enter earned income amount		00					
	7	23d \$	00					
st 23	e For filers without qualifying children. See <i>instructions for special calculations</i> . Enter result >	23e \$	00					
payments 5 7 7 7 7 7 7 7 7 7 7 7 7	Property Tax Credit. From your DC Schedule H; attach a copy.	24 \$	00					
<u>8</u> 25	Refundable credits from DC Schedule U, Part 1b, Line 3. Attach Schedule U.	25 \$.00					
credit and 27	DC income tax withheld shown on Forms W-2 and 1099. Attach these forms.	26 \$.00					
<u>j</u> 27	2018 estimated income tax payments and amount applied from 2017 return.	27 \$	00					
82 <u>x</u>	Tax paid with Form FR-127 Extension of Time to File.	28 \$	00					
29	If this is an amended 2018 return, enter payments made with original 2018 D-40 return.	29 \$	00					
30	If this is an amended 2018 return, enter refunds requested with original 2018 D-40 return.	30 \$	00					
31	Total payments and refundable credits. Add Line 23d or 23e through Line 29. (Do not include Line 30).	31 \$	00					
32	Tax Due. Subtract Line 31 from Line 22.	32 \$.00					
33	Amount to be overpaid. Subtract Line 22 from Line 31. Amount applied to your 2019 estimated tax.	33 \$	00					
34 35	Underpayment Interest. Fill in the oval and attach Form D-2210.	34 \$ 35 \$	00					
36	Contribution amount from Schedule U, Part II, Line 5 or 6. (Cannot exceed refund amount on Line 38)	36 \$	00					
37	Total Amount Due. Add Lines 32, 35 and 36.	37 \$	00					
38	Net Refund. Subtract total of Lines 34, 35 and 36 from Line 33.	38 \$	00					
	Will this refund go to an account outside the U.S.? Yes No See instructions.							
39	39 Fill in if either spouse is claiming injured spouse protection. You must attach Form DC-8379.							
	Refund Options: For information on the tax refund card and program limitations, see instructions or visit our website MyTax.DC.gov.							
	Mark <u>one</u> refund choice: Direct deposit or 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							
	d party designee To authorize another person to discuss this return with OTR, fill in here and enter the name and pho gnee's name Phone number	one number of that person. See ins	tructions.					
_	nature 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 principles of law, I declare that I have examined this return and, to the best of my knowledge, it is correct. Declaration of paid principles of law, I declare that I have examined this return and, to the best of my knowledge, it is correct. Declaration of paid principles of law, I declare that I have examined this return and, to the best of my knowledge, it is correct. Declaration of paid principles of law, I declare that I have examined this return and, to the best of my knowledge, it is correct. Declaration of paid principles of law, I declare that I have examined this return and, to the best of my knowledge, it is correct. Declaration of paid principles of law, I declare that I have examined this return and, to the best of my knowledge, it is correct.	reparer is based on information available t	to the preparer. Date					
Spou	se's/registered domestic partner's signature if filing jointly or separately on same return Date Preparer's Tax Identification Number	(PTIN) PTIN telephone number						