

2015 D-40EZ SUB Income Tax Return for Single and Joint Filers with No Dependents



Tax period ending MMY

Personal information

Filing Status: Mark if X Single, X Married filing jointly, X Registered domestic partners filing jointly,

Your telephone number 1234567890

X Dependent claimed by someone else Mark if: X Amended return

Your social security number (SSN) and Date of Birth (MMDDYYYY)

Spouse's/registered domestic partner's SSN and Date of Birth (MMDDYYYY)

123456789

00000000

123456789

00000000

Your first name

M.I.

Last name

ABCDEFGHIJKLMN

A

ABCDEFGHIJKLMN

Spouse's/registered domestic partner's first name

M.I.

Last name

ABCDEFGHIJKLMN

A

ABCDEFGHIJKLMN

SOFTWARE DEVELOPER USE ONLY

VENDOR ID # 1234

Home address(number, street and suite/apartment number if applicable)

1234567890ABCDEFGHIJKLMN

ABCDEFGHIJKLMN

City

State

Zip code + 4

ABCDEFGHIJKLMN

AB

123456789

1 Total wages, salaries, tips, unemployment compensation, etc. 1 \$ 123456.00

2 Taxable interest and ordinary dividends (If more than \$1500, you must file form D-40.) 2 \$ 123456.00

3 DC adjusted gross income Add Lines 1 and 2. 3 \$ 123456.00

4 Standard deduction plus exemption. If single, enter \$6,975. If filing jointly, enter \$11,900, or if claimed as a dependent on another's tax return, enter \$5,200 4 \$ 123456.00

5 DC taxable income Line 3 minus Line 4. If Line 4 is equal to or more than Line 3, make no entry. If more than \$100,000 file form D-40. 5 \$ 123456.00

6 Tax. Use the tax tables to find the tax on the Line 5 amount. 6 \$ 12345.00

7 DC Low Income Credit Use Calc. LIC/EITC to see if LIC or EITC is a greater benefit. See instructions. 7 \$ 12345.00

7a Enter number of exemptions claimed on your federal return. 7a 01

8 Net tax Subtract Line 7 from Line 6. If Line 7 is equal to or more than Line 6, make no entry. 8 \$ 12345.00

9a Contribution to Public Fund for Drug Prevention and Children at Risk. 9a \$ 12345.00

9b Contribution to the DC Statehood Delegation Fund. 9b \$ 12345.00

9c Contribution to Anacostia River Cleanup and Protection Fund. 9c \$ 12345.00

9d RESERVED 9d \$ 12345.00

10 Tax and/or contribution(s) Add Lines 8, 9a, 9b, 9c and 9d. 10 \$ 12345.00

11 Total DC income tax withheld, shown on Forms W-2 and 1099 - attach these forms. 11 \$ 12345.00

12 Tax paid with extension of time to file or with original return if this is an amended return. 12 \$ 12345.00

13 DC Earned Income Tax Credit. Leave blank if you took Line 7 DC Low Income Credit (LIC)

13a Enter number of qualified EITC children. 01 13b Enter your earned income amount 13b \$ 12345.00

13c For filers with qualifying children. Enter federal EIC \$ 1234.00 x .40 Enter result > 13d \$ 12345.00

13e For filers without qualifying children. See instructions for special calculations. Enter result > 13e \$ 12345.00

14 Total tax payments and credits. Add lines 11, 12, and 13d or 13e. 14 \$ 12345.00

15 Refund. If Line 14 is the larger, subtract Line 10 from Line 14. 15 \$ 12345.00

16 Amount owed. If Line 10 is the larger, subtract Line 14 from Line 10. See payment options in instructions. 16 \$ 12345.00

17 Penalty \$ 1234.00 Interest \$ 1234.00 See instructions. Enter result > 17 \$ 12345.00

18 TOTAL AMOUNT DUE. Add lines 16 and 17. 18 \$ 12345.00

Will this payment come from an account outside of the US? X Yes X No See instructions

19 TOTAL REFUND Subtract Lines 17 (results) from Line 15 and enter here. 19 12345.00

Will this refund go to an account outside of the US? X Yes X No See instructions

Refund Options: For information on the tax refund card and program limitations, visit our website otr.dc.gov/refundprepaidcards.

Make one refund choice: X Direct deposit X Tax refund card X Paper check

Direct Deposit To have your refund deposited to your X checking OR X savings account, mark X and enter bank routing and account numbers.

Routing Number XXXXXXXXXX

Account Number XXXXXXXXXXXXXXXXXXXX

Third Party Designee To authorize another person to discuss this return with OTR, mark here X and enter the name and phone number of that person.

Designee's name Phone number 1234567890

Signature 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 preparer is based on information available to the preparer.

Your signature Date Preparer's signature Date

Spouse's/registered domestic partner's signature if filing jointly Date Preparer's Tax Identification Number (PTIN) PTIN telephone number 123456789 1234567890