

Office of the Chief Financial Officer Office of Tax and Revenue



INDIVIDUAL INCOME TAX FORMS AND INSTRUCTIONS INCLUDING SCHEDULES AND WORKSHEETS

D-40/D-40EZ D-4, D-4A D-40B, D-2440, D-2441, FR-147 D-41

BUSINESS AND ESTATE TAX FORMS AND INSTRUCTIONS INCLUDING SCHEDULES AND WORKSHEETS

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MISCELLANEOUS FORMS

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Alternative Fuel Vehicle Infrastructure and Conversion Residential and Commercial Forms

Request for Certified Copy

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Tax Forms Order Sheet

2015 PACKAGE X

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2015 District of Columbia (DC) Individual Income Tax **Forms and Instructions**

D-40EZ Single and Joint Filers with No Dependents D-40 All other Individual Income Tax Filers

Secure - Accurate - Faster Refunds ...









File Electronically Today! www.taxpayerservicecenter.com

- · You may use eTSC to file and pay online for Forms D-40ES (estimated tax) and FR-127 (extension of time to file).
- · Payments can be made by e-check, credit card, check or money order (US dollars). Direct deposit, tax refund card or paper check refund options are available.

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GOVERNMENT OF THE DISTRICT OF COLUMBIA

OFFICE OF THE CHIEF FINANCIAL OFFICER



Message from CFO Jeffrey DeWitt

Dear Taxpayer:

In my letter to you last year, I told you about our intention to implement a new state-of-the-art tax system.

The first phase of this multi-year project, which includes individual income tax, has been implemented for this tax season. This Modernized Integrated Tax System (MITS) will provide improved and timelier notifications of changes to a taxpayer's return and better fraud detection to protect against identity theft, refund fraud and other tax crimes.

In October 2016, the second phase will allow taxpayers to obtain account information through a Taxpayer Access Portal; design their own payment plans; and file corporate and unincorporated business franchise tax returns electronically.

Also this filing season, the Office of Tax and Revenue is expanding its prepaid Visa card program to include refunds up to \$4,000. You can use the card to make purchases and cash withdrawals at most banks, and pay bills conveniently and securely.

To learn more about what's new this filing season or to request assistance, visit OTR's walk-in center at 1101 4th Street, SW, Suite W270, from 8:15 am to 5:30 pm Monday through Friday, call (202) 727-4TAX (4829), or visit OTR's Web site at www.taxpayerservicecenter.com.

Sincerely,

De With

Jeffrey S. DeWitt

New for 2015 Income Tax Returns:

Filing Deadline

The filing deadline for the Tax Year 2015 income tax return is April 18, 2016. The District of Columbia observes Emancipation Day on Friday, April 15 when April 16 is a Saturday. This makes Monday, April 18, 2016 the deadline for filing income tax returns for Tax Year 2015.

Direct Deposit

All new direct deposit requests (taxpayers requesting a direct deposit for the first time) will receive a paper check. Refer to "Paper Check" section on page 15 for additional information.

Standard Deduction and Exemption

Single individuals, dependents, and married/registered domestic partners filing separately are allowed a standard deduction amount of \$5,200. Head of household filers are allowed a standard deduction of \$6,500. Married/registered domestic partners filing jointly, qualifying widow(ers) with dependent child, and married/registered domestic partners filing separately on the same return are allowed a standard deduction of \$8,350. The exemption amount has increased to \$1,775.

Phase out of the Personal Exemption Amount

The amount of the personal exemption otherwise allowable for the taxable year in the case of an individual whose adjusted gross income exceeds \$150,000 shall be reduced by 2% for every \$2,500 (or fraction thereof) by which the taxpayer's adjusted gross income for the taxable year exceeds \$150,000. No amount of the personal exemption shall be available for an adjusted gross income in excess of \$275,000.

• New tax rates. The tax rates for individuals for tax years beginning after 12/31/2014 are:

- New option to file the D-40 and D-40EZ on a fiscal year basis.
- New filing status added Qualifying widow(er) with dependent child.

· Pension Exclusion Repealed

The up to \$3,000 exclusion from federal adjusted gross income of military, DC, or federal retirement payments of retirees 62 years or older, has been repealed.

DC Earned Income Tax Credit

The formula for determining the DC Earned Income Tax Credit for childless workers has changed. A DC Earned Income Tax Credit Worksheet for Filers Without A Qualifying Child has been added to the 2015 D-40EZ D-40 Booklet.

Low Income Credit

The credit is not allowable if your net federal adjusted gross income exceeds the federal minimum filing requirements. Also, part-year residents must prorate the credit attributable to the time residing in DC.

• Underpayment Interest - The Underpayment penalty has been changed to underpayment interest, Lines 37 and 44; D-40.

Schedule H

Section A, Line 2 has been changed to allow taxpayers to list the source and amount of other money not included in federal adjusted gross income of the tax filing unit that is used to pay rent. Money reported on this line is not used to calculate the amount of the credit, but to assist OTR in determining the reasonableness of the claim.

Schedule I

Line 6, Calculation B has changed. The DC income exclusion for long-term care insurance premiums is no longer a subtraction from federal adjusted gross income. Based on the taxpayer's age, certain amounts of tax qualified long-term care insurance premiums are deductible as itemized deduction medical expenses.

Reminder

Alternative Fuel Vehicle Conversion and Infrastructure

There are two non-refundable credits for alternative fuel vehicle conversion and infrastructure. A credit up to 50% of the costs for purchase and installation of qualified alternative fuel storage and dispensing or charging equipment per qualified alternative fuel vehicle refueling property or private residence. The credit shall not exceed \$1,000 per vehicle charging station for a private residence and \$10,000 per qualified alternative fuel vehicle refueling property or vehicle charging station. The cost of the purchase of the land on which the refueling or charging station will be located or the construction or purchase of any structure is not included in the equipment or labor costs. Any unused credit for infrastructure can be carried over for two future years.

A credit, not to exceed \$19,000 per vehicle, up to the tax liability, for 50% of the cost of equipment and labor per vehicle for vehicle owners who modify their existing petroleum derived gasoline or diesel fuel vehicle into a vehicle capable of operating on one of the following acceptable operating fuels: (a) at least 85% ethanol; (b) natural gas; (c) compressed natural gas; (d) liquefied natural gas; (e) liquefied petroleum gas; (f) biodiesel (excluding kerosene); (g) electricity from a vehicle charging station; or (h) hydrogen.

Any unused credit for vehicle conversion cannot be carried forward.

The District of Columbia Tax Refund Visa® Prepaid Card

The DC Office of Tax and Revenue (OTR) has implemented a significant addition to the way individual income tax refunds are issued, and we want to make sure you have the information you need to choose the best way to receive your 2015 refund.

There will be three options on 2015 returns for receiving individual income tax refunds – direct deposit, a tax refund card, or paper check. All individual income tax returns will require that an option be selected. **If you do not select an option, you will receive a paper check.** Refunds under \$2 or greater than \$4,000 do not qualify for the tax refund card and will be issued by check. The following information will help you understand the refund card.

The DC OTR issues over 50% of income tax refunds via paper checks each year. The addition of the tax refund cards saves the District money by reducing check printing and mailing costs. The District Office of Finance and Treasury has partnered with Citi® Prepaid Services to administer the tax refund card program at no cost to the taxpayer.

What are the benefits of each option for District of Columbia taxpayers? Direct deposit is still the fastest and recommended method for receiving a refund, provided accurate bank account information is entered on the return. So be sure to check your bank information carefully before filing your return. In addition to entering your bank information, you must also select the direct deposit option. For individuals who prefer not to use direct deposit, the tax refund card offers a more secure and convenient alternative to paper checks that also eliminates check-cashing fees.

How can I be sure the DC Tax Refund Visa® Prepaid Card is secure? The DC Tax Refund Visa® Prepaid Card is covered by Visa's Zero Liability protection; cardholders are not responsible for fraudulent or unauthorized transactions (terms and conditions apply). The card itself can be activated only by using the recipient's identifying information, including social security number. For additional security, many transactions require a personal identification number (PIN) chosen by the recipient.

How and where can the tax refund card be used? The card can be used to withdraw cash at any Visa® member bank, or it can be used at retail stores and ATMs or to make transactions online wherever Visa® debit cards are accepted. The DC Tax Refund Visa® Prepaid Card is valid only until the refund amount has been exhausted. The card cannot be reloaded.

Are there fees associated with using the tax refund card? Many transactions are free, including retail purchases, in-network ATM withdrawals, "cash back" at participating merchants and one-time withdrawal of funds at a Visa® member bank, but there may be fees for some transactions. A complete fee schedule is available on our website, www.taxpayerservicecenter.com.

How will tax refund cards work for a joint refund? In the case of a joint return, a single tax refund card will be issued in the name of both spouses/registered domestic partners. The refund itself cannot be divided into separate cards between the spouses/registered domestic partners.

Where can I get more information about the DC Tax Refund Visa® Prepaid Card? On the OTR website, www.taxpayerservicecenter.com.

Cards are issued by Citibank, N.A. pursuant to a license from Visa® U.S.A. Inc. and managed by Citi Prepaid Services. This card can be used everywhere Visa® debit cards are accepted.

General Instructions for D-40EZ/D-40

Who must file a DC Income tax return?

You must file a 2015 DC Individual Income tax return if -

- You were a District of Columbia (DC) resident in 2015 and were required to file a federal income tax return. (A resident is an individual whose permanent legal residence is within the District during the taxable year); or
- You maintained a place of residence in DC for a total of 183 days or more during 2015 even if your permanent residence was outside DC (see instructions for part-year residents, page 25); or
- You were a member of the United States (US) armed forces and DC was your legal residence for tax purposes for all or part of 2015.

Note that even if you are the spouse/registered domestic partner of someone not required to file, such as a non-resident Congressional appointee, and you meet any of the above requirements, you yourself must file.

You do not need to file a 2015 DC Individual Income tax return if:

- You were not required to file a 2015 federal income tax return.
- You were not considered a resident of DC during 2015.
- You were an elected member of the US government who was not domiciled in DC.
- You were an employee on the personal staff of an elected member of the US Congress and you and the elected member were bona fide residents of the same state.
- You were a member of the US Executive Branch appointed by the President, subject to US Senate confirmation, whose tenure of office is at the pleasure of the President and you were not domiciled in DC during any part of 2015.
- You were a justice of the US Supreme Court and were not domiciled in DC during any part of 2015.

Which form should you file?

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

You may use this simpler form if you meet $\underline{\mathsf{all}}$ of the following:

- Your filing status is single, married/registered domestic partners filing jointly, or a dependent claimed by someone else. (Domestic partners are registered with the Vital Records Division of the DC Department of Health);
- You were a DC resident from January 1 through December 31, 2015;
- Your taxable income is \$100,000 or less and consists only of wages, salaries and tips; taxable scholarships or fellowship grants; unemployment compensation; and/or interest and dividends (\$1500 maximum):
- You did not make estimated income tax payments;
- You do not claim dependents;
- You do not claim an exemption for being age 65 or older or legally blind;
- You have no federal adjustments to income;
- You do not itemize deductions;
- You do not file DC Schedules S, H, U, I or N; and
- You do not claim a deduction for a payment to the DC college savings plan.

D-40 Individual Tax Return

Use this form if you cannot use the D-40EZ.

D-41 Fiduciary Income Tax Return

Use the D-41 if you are the fiduciary of a DC estate or trust and:

- The gross income for the **estate** is \$1,775 or more for the year; or
- The gross income for the **trust** is \$100 or more for the year.

Effective January 1, 2016, a fiduciary must have a Federal Employer Identification Number (FEIN).

D-40B Nonresident Request for Refund

If you are not a DC resident and you had DC taxes withheld, file Form D-40B, Nonresident Request for Refund.

FR-329 Consumer Use Tax on Purchases and Rentals

You should file this form if during the tax year you paid a total of more than \$400 for merchandise, services, or rentals on which you did not pay sales tax. Typically you do not pay sales tax on (a) merchandise you ordered through catalogs; (b) merchandise shipped to DC that you bought or rented outside of DC; and (c) merchandise taxed in DC but not in the state where purchased.

When are your taxes due?

April 18, 2016, is the deadline for filing your return and paying any taxes due. If the due date falls on a Saturday, Sunday, or legal holiday, the return is timely if filed on the next business day.

FR-127 Extension of Time to File Income Tax Return

An extension of time to file of six months may be granted if a valid extension of time to file is requested. In order to be valid, a FR-127 Extension of Time to File form is due by April 18, 2016. If the due date falls on a Saturday, Sunday, or legal holiday, the request for extension of time is timely if filed on the next business day. The submission of the extension of time to file is subject to the following considerations:

- 1. If you expect to have a balance due when you file your D-40, you must pay with your timely filed extension.
- 2. If you do not expect to have a balance due when you file your D-40, you would not be required to file a Form FR-127, if you have:
 - a. Reasonably estimated your D-40 tax liability and paid the estimated amount of DC income taxes through withholding or estimated tax payment; and
 - b. Filed a request to extend the time to file your federal individual income tax return with the IRS. The timely filed federal extension to file form will satisfy the requirement for filing a Form FR-127 with DC.
- 3. If you do not expect to have a balance due and you have not filed an extension of time to file for your federal individual income tax return and wish to request an extension for your DC income tax return, you should submit a Form FR-127.

Penalty and interest charges are imposed on any tax found owing and not paid on time with the extension request.

Filing your return

This booklet has all the forms and instructions you will need. You are responsible for filing and paying taxes on time whether or not you receive the printed forms.

Substitute forms

You may file your DC tax return using a computer-prepared or computer-generated substitute form, provided the form is approved in advance by the Office of Tax and Revenue (OTR). The fact that a software package is available for retail purchase does not mean that the substitute form has been approved for use. Call or check with the software developer to determine if their form is a DC OTR approved form.

By mail

- If mailing a return with a payment, send it to:
 Office of Tax and Revenue
 PO Box 96169
 Washington, DC 20090-6169
- If mailing a refund request return or a 'no money due'

return, send it to: Office of Tax and Revenue PO Box 96145 Washington, DC 20090-6145

There are two adhesive mailing labels on the back flap of your return envelope. If you are sending a <u>payment</u> with your return, use the PO Box 96169 mailing label on your return envelope.

If you are filing a <u>no money due</u> or a <u>refund request</u> return, use the PO Box 96145 mail label on your return envelope.

Do not include more than one return per envelope.

By DC electronic filing (e-File)

e-File offers most DC individual income taxpayers a full federal/ state electronic filing program. There are three ways in which taxpayers can file their federal and District returns together electronically:

- 1. Through an authorized software provider listed on the Internal Revenue Service (IRS) website;
- Through a tax practitioner who is an authorized e-File provider; or
- 3. Through a commercial online filing service. This allows taxpayers to transmit their DC and federal returns from their PC for a fee.



The DCfreefile fillable forms e-File program provides an online version of the D-40/D-40EZ and related schedules. The DCfreefile fillable forms program allows the taxpayer to complete the return online by entering the DC state tax information as if the taxpayer were filling out a paper return. The DCfreefile fillable forms option is available only to DC residents, but there are no income or age restrictions. Once the return is completed, it can be e-Filed at no charge or printed for mailing. The DCfreefile fillable forms program also performs basic calculations. If you usually file on paper forms, the DCfreefile fillable forms e-File program may be a good choice for you.

DCfreefile

DCfreefile is a free federal and state income tax preparation and electronic filing program for eligible taxpayers, based on the IRS Free File Alliance program. Eligible taxpayers may prepare and e-File their federal and state income tax returns for free using commercial online software provided by specific Free File vendors. Each participating vendor sets its own eligibility requirements and not all taxpayers will qualify for all companies. Please select a product from our Free File page to assure yourself the opportunity to e-File both your federal and District returns.

DCfreefile fillable forms and DCfreefile will be available at the same time as the IRS.

If you use one of the e-File options to file your DC return, you also have three options to receive your refund:

- 1. Direct Deposit:
- 2. DC Tax Refund Visa® Prepaid Card; or
- 3. Paper Check.

Be sure to make a selection on the return for the refund option that you want. If no choice is made, and your refund is within the threshold of a refund card, you will receive a refund card. However, refund cards will not be mailed to a foreign address. Please review the information about the refund card at the front of the book. Instructions for direct deposit can be found on page 15. Note: All new direct deposit requests (taxpayers requesting a direct deposit for the first time) will receive a paper check.

Electronic Filing Instructions

The instructions in this booklet are specifically for filers of paper returns. When you file electronically, note that the instructions may differ. Follow the "on screen" instructions. If you need further explanations, review the instructions in this booklet.

Payment Options

Check or money order (US dollars)

Include a check or money order (US dollars), payable to the DC Treasurer, with your completed return. Write your social security number, daytime telephone number, tax year "2015" and the type of form filed ("D-40" or "D-40EZ") on your payment. Attach your payment to the Form D-40P voucher provided in this booklet. Do not attach either to your return.

Form D-40P, Payment Voucher

Use this form when sending a check or money order. Do not staple the voucher to the D-40 or D-40EZ. Include the D-40P with your D-40 or D-40EZ in the return envelope provided. Use the PO Box 96169 mail label from the back flap of the return envelope.

By Phone

- 1. Dial 1-800-272-9829 (available 7 days a week, 24 hours a day)
- 2. Enter code 6000 (District of Columbia's Jurisdiction Code)
- Complete the telephone transaction directly with the credit card processing vendor or electronic check processing vendor. You will be given a confirmation number, please keep it with your records.

Electronic Check (e-check)

e-check is similar to ACH debit, but it is a one-time transaction where the taxpayer provides the banking information at the time of payment instead of storing the information. There is no fee for e-check payments.

Credit/Debit Card

The taxpayer may pay the amount owed using Visa®, MasterCard®, Discover® or American Express®. You will be charged a fee that is paid directly to the District's credit card service provider. Payment is effective on the day it is charged.

Direct Debit

Electronic filers have the ability to pay their tax due or estimated payment by direct debit. Enter your banking information, including the routing and account numbers, checking or savings account and the date of withdrawal. The date of withdrawal cannot be greater than thirty (30) days from the due date of the return.

Visit the website http://www.taxpayerservicecenter.com for Credit/Debit Card Payment or Electronic Check (e-check) Payment Information.

Note: International ACH Transaction (IAT). Your payment cannot be drawn on a foreign account. You must pay by money order (US dollars) or credit card instead.

Penalties and Interest

OTR will charge -

- A penalty of 5% per month if you fail to file a return or pay any tax due on time. It is computed on the unpaid tax for each month, or fraction of a month, that the return is not filed or the tax is not paid. It may not exceed an additional amount equal to 25% of the tax due;
- A 20% penalty on the portion of an underpayment of taxes if attributable to negligence. Negligence is a failure to make a reasonable attempt to comply with the law or to exercise ordinary and reasonable care in preparing tax returns without the intent to defraud. One indication of negligence is failure to keep adequate books and records;
- Interest of 10% per year, compounded daily, on a late payment;
- A one-time fee to cover internal collection efforts on any unpaid balance. The collection fee assessed is 10% of the tax balance due after 90 days. Payments received by OTR on accounts subject to the collection fee are first applied to the collection fee, then to the penalty, interest and tax owed;
- A civil fraud penalty of 75% of the underpayment which is attributable to fraud (see DC Code §47-4212).

Penalties and interest accrued may be reported on Line 17 of the D-40EZ or Lines 36, 43a and/or 43b of the D-40. For Estimated Tax Underpayment Interest, Form D-2210, use Line 37 or Line 44. The form can also be located at www.taxpayerservicecenter.com. File the Form D-2210 with your return.

Criminal Penalties

You will be penalized under the criminal provisions of the DC Code, Title 47, if you are required to file a return or report, or to perform any act, and you:

- Fail to file the return or report timely. If convicted, you will be fined not more than \$1,000 or imprisoned for not more than 180 days, or both, for each failure or neglect;
- Willfully fail to file the return or report timely. If convicted, you
 will be fined not more than \$5,000 or imprisoned for not more
 than 180 days, or both;
- Willfully attempt to evade or defeat a tax; willfully fail to collect, account for, or pay a tax; or willfully make fraudulent and false statements or fail to provide information. See DC Official Code §47-4101 through 4107.

These penalties are in addition to penalties under DC Code §22-2405 for false statements (and any other applicable penalties).

Enforcement Actions

OTR may use lien, levy, seizure, collection agencies, and liability offset if the taxpayer fails to pay the District within 20 days after receiving a Notice of Tax Due and a demand for payment. Visit www.taxpayerservicecenter.com.

Special filing circumstances

Amended return

File an amended DC return if your DC tax liability for a prior open tax year (usually 3 years from date of filing) has changed on the D-40 or D-40EZ return **for the tax year** you are amending. To file an amended return for the current year, complete another 2015 DC individual income return and fill in the "amended return" oval on the form. Attach a list with explanations of the changes covered by your amended return.

If you are filing an amended return for a prior year, attach a copy of the original and any amended returns filed for that tax year. You can download forms from www.taxpayerservicecenter.com or call 202-442-6546 to request forms by mail.

If the IRS adjusts your individual federal tax return, you must file an amended DC return within 90 days of receiving notice of the federal adjustment. Attach a copy of the adjusted federal return and/or determination letter.

Joint Returns After Separate Returns

You can change your filing status from a separate return to a joint return by filing an amended return. You generally can change a joint return anytime within three (3) years from the due date of the separate return or returns. This does not include any extensions. A separate return includes a return filed by you or your spouse/registered domestic partner claiming married filing separately, registered domestic partners filing separately, single, or head of household filing status.

Separate Returns After Joint Return

Once you file a joint return, you cannot choose to file separate returns for that year after the due date of the return. **Exception**. A personal representative for a decedent can change from a joint return elected by the surviving spouse to a separate return for the decedent. The personal representative has one (1) year from the due date of the return (including extensions) to make this change.

Getting Started

To complete the paper Forms D-40 or D-40EZ, in general you will need:

- A copy of your completed 2015 federal return, as applicable (Form 1040, 1040A, 1040EZ, 1040NR, or 1040NR-EZ) and any additional forms or worksheets related to the return. You can copy many entries directly from federal forms 1040, 1040A, 1040EZ, 1040NR, or 1040NR-EZ. Please be careful since the line numbers may differ from the District Forms D-40 or D-40EZ line numbers;
- A copy of your completed state returns if you filed an income tax return with another state;
- Your W-2 and applicable 1099 forms with DC withholding tax or taxable income;
- A pen with black ink;
- A calculator.

Not all items will apply. Fill in only those that do. If an amount is zero, make no entry, leave the line blank.

Do not enter cents. Round to the nearest dollar. Examples:

\$10,500.50 rounds to \$10,501

\$10,500.49 rounds to \$10,500

Taxpayer Identification Number(s) (TIN)

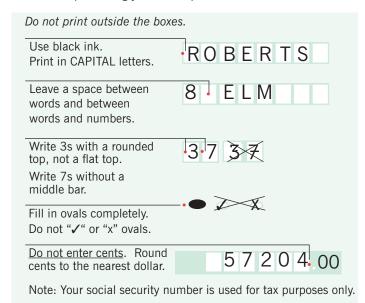
You must have a TIN, whether it is a SSN or ITIN.

- A SSN is a valid number issued by the Social Security Administration (SSA) of the United States Government. To apply for a SSN, get Form SS-5, Application for a Social Security Card, from your local SSA office or online at www.ssa.gov. You may also get this form by calling 1-800-772-1213;
- An ITIN is a valid number issued by the Internal Revenue Service (IRS). To apply for an ITIN, get Form W-7, Application for IRS Individual Taxpayer Identification Number online at www.irs.gov. You may also get this form by calling 1-800-TAX-FORM (1-800-829-3676).

You must wait until you receive either number before you file a DC return. Your return may be rejected if your TIN is missing, incorrect or invalid. You could be subject to a balance due or disallowance of credits or exemptions, if your dependents or other qualifying person TIN's are missing, incorrect or invalid.

Filling out the form

To aid us in processing your return please follow these rules.



Personal information

Complete the personal information as instructed using CAPITAL letters and black ink. Use one block per letter, including using a space between address fields. Please write clearly, as this can delay processing your return.

Wages, tips and salaries

Enter the amount from your federal 1040, 1040A, or 1040EZ, or 1040NR, or 1040NR-EZ, <u>plus</u> any unemployment compensation received on Line 1 of the D-40EZ or Line a, Income Information on the D-40.

DC income tax withheld

Add the DC income tax withheld as shown on your 2015 federal Forms W-2 and applicable Forms 1099. Attach all copies of your Forms W-2 and 1099 that show DC tax withheld to the Forms D-40 or D-40EZ.

Filing Status

More than one filing status may apply to you. Use the one that will give you the lowest tax. Please ensure the oval to the left of the filing status is filled in.

Generally, you will use the same filing status on your DC return as that used on your federal return. However, if you used married filing jointly on your federal return, it may be better for you to file your DC return using either married filing separately or filing separately on the same return. If both have income, figure the tax both ways.

Single (D-40 and D-40EZ)

You were unmarried, divorced or legally separated as of December 31, 2015, or were widowed prior to January 1, 2015, and did not remarry before January 1, 2016.

Filing Jointly (D-40 and D-40EZ)

You were married or have a registered domestic partner and both spouses/registered domestic partners were DC residents as of December 31, 2015, or your spouse/registered domestic partner died in 2015 and you did not remarry/register in 2015. If legally separated, do not file jointly. If your spouse died during the year, you are considered married for the whole year for filing status purposes. If you did not remarry before the end of the tax year, you can file a joint return for yourself and your deceased spouse.

If you are filing a joint return or filing separately on the same return, enter the name and SSN shown first on your previous year return, then enter the name and SSN shown second on your previous year return.

Registered domestic partners (D-40 and D-40EZ)

To be considered as a registered domestic partner for DC tax purposes, the parties must be registered with the Vital Record Division of the DC Department of Health. If you have registered your relationship you may either file a joint return (D-40 or D-40EZ) or file separately on the same return (D-40). You may also file separately using the single filing status.

Domestic partners or other similar relationship registered in other jurisdictions. If you have registered your relationship in another jurisdiction, you may file a joint return, or file separately on the same return, or file a separate return using the single status.

If you are visiting the DC OTR for assistance in preparing your DC Income Tax Return, registered domestic partners must first prepare a "not to be filed" (mock) joint federal return.

- If filing jointly is chosen, enter the total federal adjusted gross income of both registered domestic partners on Line 1 of the Form D-40EZ or Line 3 of the Form D-40.
- If you are married or registered domestic partners, you may file either a joint return or file separately on the same return. If filing jointly is chosen, enter the total federal adjusted gross income of both spouses/partners on Line 3, Form D-40.
- If filing separately on the same return is chosen, follow the instructions under Married or Registered Domestic Partners filing separately on the same return.

Married filing separately or registered domestic partner filing separately on separate returns (D-40)

If you are married or have a registered domestic partner and both spouses/partners had income, you can use this filing status. Include your spouse/registered domestic partner's name and social security number in the <u>Personal Information</u> section.

You will each report only your own income, exemptions, deductions, and credits. You will each report one-half of the income from any securities, bank accounts, real estate, etc., that are registered or titled in both names.

Registered domestic partners who choose to file as married and married individuals must use this filing status if:

 You and/or your spouse/registered domestic partner were partyear residents of DC during different periods of 2015;

- You were a DC resident and your spouse/registered domestic partner was one of the following:
 - A member of the US armed forces and not considered a DC resident, but you are required to report income in DC;
 - A member of the US Congress or an employee on the personal staff of a member of Congress who is considered a resident of the member's state of residency;
 - An officer of the US Executive Branch whose primary residence was not in DC, who is appointed by the President, confirmed by the US Senate and serves at the pleasure of the President; or
 - A justice of the US Supreme Court whose primary residence was not in DC.

Dependent claimed by someone else

If you are claimed as a dependent on someone else's return, fill in the 'dependent claimed' oval on the D-40 or D-40EZ return.

Married or registered domestic partners filing separately on the same return (D-40)

If you claim either status, you and your spouse/registered domestic partner must combine your separate amounts using Calculation J on Schedule S so that you will either receive one refund or make one tax payment. You may also claim a credit for child and dependent care expenses, which you are not allowed to claim if you file separate returns. Using this filing status may reduce the amount of tax you owe by allowing each spouse/registered domestic partner to take advantage of lower tax brackets.

Before completing Calculation J, and the Form D-40, you will need to figure the following for you and your spouse/registered domestic partner:

- Each person's federal adjusted gross income;
- Each person's additions to federal income;
- Each person's subtractions from federal income;
- Each person's deductions; and
- · Each person's exemptions.

NOTE: If you and your spouse/registered domestic partner were partyear residents of DC during different periods of 2015, you cannot file separately on the same return. You must file separate returns.

Injured Spouse Protection

If either spouse/registered domestic partner has an outstanding liability for prior DC taxes, DC unemployment compensation debt, or child support, the non-liable party may request that his/her portion of the refund, if any, not be offset to satisfy the other spouse's/registered domestic partner's debt by requesting "injured spouse" protection. To request injured spouse protection, please attach DC Schedule S, Calculation J and IRS form 8379 (Injured Spouse Allocation) to your return and mail to:

Office of Tax and Revenue PO Box 96145 Washington, DC 20090-6145

Head of Household (D-40)

You may claim this status if you were unmarried or legally separated as of December 31, 2015, and paid over half of the costs of maintaining a home for a qualifying person, such as a child or parent. Certain individuals who lived apart from the spouse/domestic partner for the last six (6) months of 2015 may also be able to use this filling status. Use the appropriate section of Schedule S to enter the full name, SSN, relationship and Date of Birth (DOB) of the qualifying person whether that person is a dependent or the non-qualifying dependent. Failure to provide a Schedule S can delay processing and exclude any exemptions claimed for dependents. All the information must be complete, i.e., name, SSN, relationship and DOB.

Qualifying Widow(er) with Dependent Child

If your spouse/registered domestic partner died in 2015, you can use married filing jointly as your filing status for 2015 if you otherwise qualify to use this status. The year of death is the last year for which you can file jointly with your deceased spouse. You may be eligible to use qualifying widow(er) with dependent child as your filing status for 2 years following the year your spouse/registered domestic partner died. For example, if your spouse/registered domestic partner died in 2013, and you have not remarried, you may be able to use this filling status for 2015.

This filing status entitles you to use joint return tax rates and the highest standard deduction amount (if you do not itemize deductions) but it does not entitle you to file a joint return.

Eligibility rules. You are eligible to file your 2015 return as a qualifying widow(er) with dependent child if you meet all of the following tests:

- You were entitled to file a joint return with your spouse/registered domestic partner for the year your spouse/registered domestic partner died. It does not matter whether you actually filed a joint return.
- Your spouse/registered domestic partner died in 2013 or 2014 and you did not remarry by the end of 2015.
- You have a child or stepchild for whom you can claim an exemption. This does not include a foster child.
- Your child lived in your home all year, except for temporary absences. There are exceptions for a child who was born or died during the year and for a kidnapped child.
- You paid more than half the cost of keeping up your home for the year.

Standard Deduction and Exemption Amounts (D-40 and D-40EZ)

You are not entitled to the standard deduction if you itemize on your federal return. You are entitled to the itemized deductions excluding the state and local taxes and subject to the DC 5 percent limitation.

District Code §47-1803.03 (c) states "Every individual who claims the standard deduction on his or her federal income tax return shall claim the applicable standard deduction specified in District Code §47-1801.04 (44). Every individual who itemizes the deductions on his or her federal income tax return shall itemize the deductions permissible under this chapter. If a husband and wife or registered domestic partners file separate returns, the applicable standard deduction shall not be allowed to either spouse or registered domestic partner if the net income of one of the spouses/registered domestic partners is determined by itemizing deductions." Each spouse/registered domestic partner can claim only his/her own itemized deduction.

Standard Deduction

Single individuals, dependents, and married/registered domestic partners filing separately are allowed a standard deduction amount of \$5,200. Head of household filers are allowed a standard deduction of \$6,500. Married/registered domestic partners filing jointly, qualifying widow(ers) with dependent children, and married/registered domestic partners filing separately on the same return are allowed a standard deduction of \$8,350.

Number of Exemptions

If you are a 'dependent claimed by someone else', **do not claim any exemptions.** Leave Lines 17 and 18 blank on the D-40. If you are filing:

- · single and claiming more than one exemption;
- married or registered domestic partners filing jointly, and claiming more than two exemptions; or
- Head of household and claiming more than one exemption; or
- Qualifying widow(er) with dependent child.

Complete Calculation G on page 2 of the Schedule S and attach the schedule to the return, Form D-40.

Exemption Amount

Multiply \$1,775 by Line 17 of the D-40 number of exemptions. If you do not have exemptions, leave Line 18 blank on the D-40.

See D-40EZ form for standard deduction and exemption amounts.

Taxpayers with adjusted gross income greater than \$150,000 must reduce the Line 18 exemption amount by 2% for every \$2,500 (or fraction thereof) by which the taxpayer's adjusted gross income for the taxable year exceeds \$150,000. No amount of the personal exemption shall be available for an adjusted gross income in excess of \$275,000.

DC Low Income Credit (LIC) and DC Earned Income Tax Credit

The LIC is a non-refundable credit, which means it can reduce the DC tax you owe, but it will not directly result in a tax refund. The EITC is a refundable credit. If you have a qualifying child, calculate your federal EITC according to the federal 1040, 1040A, or 1040EZ, before you determine your DC EITC.

If you do not have a qualifying child, you must use the DC Earned Income Tax Credit (EITC) Worksheet For Filers Without A Qualifying Child on page 12, to determine your DC EITC.

If you take the federal earned income credit, it may be better for you to take the DC Earned Income Tax Credit instead of the DC Low Income Credit. **You cannot take both DC credits.**

DC Low Income Credit (LIC)

To qualify for this credit:

- You cannot have computed your federal income tax using the Alternative Minimum Tax (AMT) calculation;
- You cannot have net federal adjusted gross income in excess of the minimum federal income tax filing requirements;
- The amount of DC taxable income on Line 20 of your D-40 or Line 5 of the D-40EZ is more than zero; and
- Your DC Adjusted Gross Income (AGI) D-40, Line 14 or D-40EZ, Line 3; is greater than the sum of DC personal exemptions and DC standard deduction and is less than or equal to the sum of your federal personal exemptions and your federal standard deduction.

The LIC for part-year residents must be prorated to the time of residency.

Calculation of Eligibility

If your DC taxable income is greater than zero, complete this chart to determine if you are eligible for the low income credit.

	if you are eligible for the low fried	mic cicuit.					
Line 1	Net federal AGI	\$					
Line 2	Federal personal exemptions Amount	\$					
("D	ependents claimed by someone else",	enter 0)					
Line 3	Federal standard deduction Amount	\$					
Line 4	Sum of Line 2 and Line 3	\$					
Line 5	If Line 1 is greater than Line 4 You do not qualify	STOP					
Line 6	DC AGI	\$					
Line 7	DC personal exemption Amount	\$					
Line 8	DC standard deduction Amount	\$					
Line 9	Sum of Line 7 and Line 8	\$					
Line 10) If Line 6 is greater than Line 9 c	continue.					
	To determine the low income credit, see the Low Income Credit Table on page 17.						
tion at	Dependents claimed by someone else should use the calculation at the bottom of page 17 to determine the low income credit available.						

Complete Calculation LIC/EITC for D-40EZ or Calculation L on page 27 for D-40 taxpayers to determine which DC credit is better for you.

You must enter the number of federal exemptions to claim the LIC, Forms D-40EZ, Line 7a, or D-40, Line 24a.

The LIC shall not be allowed to a resident:

- who has computed their federal income tax using the Alternative Minimum Tax (AMT) calculation;
- who has net federal adjusted gross income in excess of the minimum federal income tax filing requirements. Net federal adjusted gross income means federal adjusted gross income less:

 (i) taxable refunds, credits, or offsets of state and local income tax;
 (ii) tax-exempt municipal bond interest income; and
 (iii) federal taxable amount of social security or tier 1 railroad retirement income;
- who has elected to claim the earned income tax credit

DC Earned Income Tax Credit (EITC)

If your filing status is "Married or registered domestic partner filing separately" or "Dependent claimed by someone else", you cannot claim the DC EITC.

Taxpayers who claim the DC LIC credit may not claim the EITC. You may take only one of these DC credits. Complete the calculation on the back of the D-40EZ or Calculation L on page 27 of the D-40.

Taxpayers with a Qualifying Child

Taxpayers with a qualifying child who are eligible for and who claim the federal EITC may also claim a DC EITC of 40% of the federal credit.

DC Law also allows the same 40% of federal EITC to those who are not allowed to claim the EITC at the federal level but who meet other DC requirements, such as a non-custodial parent who is a District resident between the ages of 18 and 30, and paying child support under a court order for a minor child. The taxpayer must have paid the child support of at least the amount due for the year through a government sponsored support collection unit and the order must have been in effect for at least one-half of the year. You must file a D-40 form to use this exception. Complete Schedule N, DC Non- Custodial Parent EITC Claim, and attach to the D-40. Also enter the amount to be claimed on the Schedule U, Part 1B, Line 1. Please enter the number of qualified EITC dependents on Line 13a of the D-40EZ, or Line 27a of the D-40.

Qualifying Child for EITC Purposes

A qualifying child as defined by the IRS for the EITC is a child who is your son, daughter, stepchild, foster child, brother, sister, stepbrother, stepsister, or a descendant of any of them (for example, your grandchild, niece or nephew) and was:

- Under age 19 at the end of 2015; or
- Under age 24 at the end of 2015 and a full-time student; or
- Any age and permanently and totally disabled.

In addition, they must have lived with you in the US for more than half of 2015, unless you are claiming the EITC as a non-custodial parent (see D-40 instructions for Schedule N).

If your child was married at the end of the year, the child is not a qualifying child <u>unless</u> you can claim the child's exemption or you have been given the right to claim the exemption in an agreement signed by the child's custodial parent releasing the dependency exemption.

Taxpayers Without A Qualifying Child

Taxpayers without a qualifying child must use the DC Earned Income Tax Credit (EITC) Worksheet For Filers Without a Qualifying Child on page 12 to determine the DC EITC. You may need information from the federal instruction booklet concerning the Earned Income Credit to determine your eligibility for the DC Earned Income Tax Credit. If you do not have a qualifying child for the EITC and did not qualify for the federal credit due to your income, you may still qualify for the DC EITC.

District of Columbia Earned Income Tax Credit (EITC) Worksheet For Filers Without A Qualifying Child

This worksheet is for taxpayers who do not have a qualifying child for the Earned Income Credit. If you have a qualifying child DO NOT USE THIS WORKSHEET.

If your earned income or federal adjusted gross income (fed AGI) is greater than \$24,040



YOU CANNOT CLAIM THIS CREDIT

Section A: General Eligibility for the DC Childless Worker EITC.

If you qualified for the federal Earned Income Credit, go directly to Section B, below. If you did not qualify for the federal Earned Income Credit, answer these questions:

- 1. Were you, or your spouse/registered domestic partner if married filing jointly, or married filing separately on the same return, at least age 25, but not age 65 at the end of 2015? (born after December 31, 1950, and before January 2, 1991). If your spouse died in 2015 or if you are preparing a return for someone who died in 2015, see IRS Pub. 596 before you answer. If YES continue. If NO, STOP, you cannot claim the EITC.
- 2. Do you, and your spouse/registered domestic partner (if filing on the same tax return) have a social security number that allows you to work, or is valid for EITC purposes? (See the federal tax return instruction booklet for more information.) If YES, continue.
- 3. If you answer YES to any of the following questions, STOP, you are not eligible for the EITC. If you can answer NO to all the questions, go to step 4.
 - a. Is the filing status on your DC return "Married Filing separately"?
 - b. If you are unmarried, can you be claimed as a dependent on someone else's 2015 tax return, or are you someone else's qualifying child?
 - c. If you are married, and you are not filing with your spouse, can you be claimed as a dependent on someone else's 2015 tax return, or are you someone else's qualifying child?
 - d. On your federal return are you filing form 2555, or 2555EZ?
 - e. Is your investment income more than \$3400? (Investment income includes: taxable interest, tax-exempt interest, ordinary dividends and capital gains more than \$0)
 - f. Did you file form 4797 with your federal return?
 - g. Did you file Schedule E with your federal return?
 - h. Did you have income from the rental of personal property not used in trade or business on your federal return?
 - i. Did you elect to report child's interest and dividends on your federal return?
 - j. Are you a qualifying child of another person for the Earned Income Credit?

- 4. Were you or your spouse a nonresident alien for any part of 2015? If NO, continue. If YES, see the special rule. Special Rule for nonresident Aliens. If you are not married, and were a non-resident alien for any part of the year, STOP, you do not qualify for the EITC. If you were married, and both spouses were nonresident aliens for any part of the tax year, STOP, you do not qualify for the EITC. If only one spouse was a nonresident alien for any part of the year, you cannot claim the EITC unless your federal filing status is married filing jointly.
- 5. If you had income or loss from a passive activity, see IRS Pub. 596 to see if you can claim the EITC.

SECTION B: Calculating Your Earned Income

(For Individuals without federal Schedule SE, Schedule C, Schedule C-EZ, and who were not members of the clergy or statutory employees)

If you were self-employed at any time in 2015, or are filing federal Schedule SE because you were a member of the clergy or had church employee income, or are filing federal Schedule C or C-EZ as a statutory employee, <u>DO</u> NOT USE THIS WORKSHEET to figure out your earned income. See special instructions below.

This worksheet is for taxpayers without a qualifying child only. If you claimed the federal EITC on a 1040, 1040A, or 1040EZ, DO NOT USE THIS WORKSHEET to figure out your earned income. Report the earned income amount derived from the federal worksheet used to make your federal EITC claim on your 1040, 1040A, or 1040EZ.

1.	Enter the amount of your wages, salaries, tips, etc., (from federal Form 1040, 1040A, or 1040EZ)	1	
	TOTHI 1040, 1040A, 01 1040LZ)	1.	
2.	Enter any amount included on Line 1, that is a taxable scholarship or		
	fellowship grant not reported on a Form W-2	2.	
3.	Enter any amount included on Line 1, for work performed while an inmate in a penal institution	3.	
4.	Enter any amount included on Line 1 that you received as a pension or annuity from a nonqualified deferred compensation plan or nongovernmental section 457 plan. This amount may be shown in box 11 of Form W-2. If you received such an amount but box 11 is blank, contact your employer for the amount received	4.	
5.	Enter any amount included on Line 1, that is a Medicaid waiver payment you exclude from income	5.	
6.	Add Lines 2, 3, 4, and 5		
7.	Subtract Line 6 from Line 1	7.	
8.	Enter all of your nontaxable combat pay if you elect to include it in earned income	8.	
9	Add Lines 7 and 8. This is your earned income	9.	

Special instructions for Members of the Clergy, Statutory employees and those filing Schedule SE, Schedule C, or Schedule C-EZ. See IRS 1040 instruction, Worksheet B. Use the amount on line 4b as your earned income. (Ignore line 5). Clergy and Church employees take note of special instructions.

SECTION C: Figuring your DC Earned Income Credit

Note: This Earned Income Credit Worksheet is for filers without a qualifying child only. If you are a filer with a qualifying child , DO NOT USE THIS WORKSHEET.

If your earned income or federal adjusted gross income (fed AGI) is greater than \$24,040, STOP, you cannot claim this credit.

1.	Enter your earned income from the Earned Income Worksheet	
2.	If earned income is less than \$6,580, multiply the amount by .0765, otherwise enter \$503. \$503 is the maximum amount that can be claimed.	
	This is your tentative EITC amount based on your earned income. Complete the Lines below to determine the actual EITC amount	
3.	Enter your federal adjusted gross income (from Form 1040, 1040A or 1040EZ) 3.	
4.	Enter the higher of Line 1 or Line 34.	
E	If Line A is less than \$10.111 and the array the array they are line 2. This is	
Э.	If Line 4 is less than \$18,111, enter the amount from Line 2. This is your actual EITC. If you are a part-year resident, you must prorate the	
	credit attributable to the time of your DC residency. Enter this amount on Form D-40EZ, Line 13e or Form D-40, Line 27e	
6	If Line 4 is between \$18,111 and \$24,040 subtract \$18,111 from the	
0.	amount on Line 4, enter result	
7	Multiply the amount on Line 6 by 0.0848, enter result	
, .	manip, the amount on time of street is, once i social minimum.	
8.	Subtract line 7 from Line 2, enter result here. If less than zero, enter zero. If you are a part-year resident, you must prorate the credit	
	attributable to the time of your DC residency. This is your actual EITC. Enter this amount on Form D-40EZ, Line 13e, or Form D-40, Line 27e	

Contributions

There are three (3) DC contributions. Contributions will be deducted from the refund due or added to the tax due. You can contribute as much as you would like, however the smallest contribution you can make to any one fund is \$1.00.

DC Statehood Delegation Fund

Enter in Line 9B of the D-40EZ, or Part II Contribution, Line 1 of the Schedule U, and attach to the D-40.

Public Fund for Drug Prevention and Children at Risk

Enter in Line 9a of the D40EZ, or Part II Contribution, Line 2 of the Schedule U, and attach to the D-40.

Anacostia River Cleanup and Protection Fund

Enter in Line 9c of the D-40EZ, or Part II Contribution, Line 3 of the Schedule U, and attach to the D-40.

Tax tables

If your taxable income is \$100,000 or less, use the tax tables on pages 59 - 68 to find the tax on the Line 6 amount of the Form D-40EZ or Line 21 of the D-40.

If your taxable income is greater than \$100,000, for D-40EZ filers, use the Form D-40. D-40 filers use Calculation I on page 27 to determine your tax.

Tax paid with extensions

Report tax paid with extension of time to file or with original return if this is an amended return on Line 12 of the D-40EZ or Line 32 of the D-40.

Refund Options

There are three refund options offered for individual income tax returns. All individual income tax returns require that one of three refund options be selected.

1. Direct deposit of refund

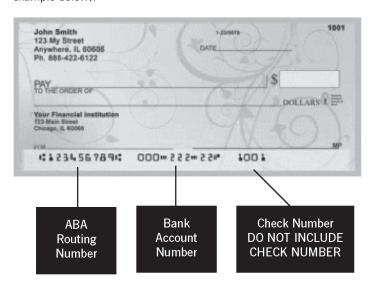
Direct Deposit Facts:

- 1. It's simple. You don't have to go to the bank to cash your check.
- 2. It's safe. No more lost, stolen or misplaced checks.
- 3. It's fast. Your money will be available the morning of the payment.

All new direct deposit requests (taxpayers requesting a direct deposit for the first time) will receive a paper check.

If you want your refund deposited directly in your bank account, complete the Direct Deposit Information above the signature line on the D-40 or D-40EZ. If the routing or account number begins with zeros, include the zeros.

Fill in the bank routing and account number information. You can obtain this information from the lower left portion of your check (see example below).



NOTE: Refer to your own check or financial institution for your numbers. The routing and account numbers may be in different places on your check.

Your routing number is the left-most number located on your check, identified as the American Banking Association (ABA) routing number. The ABA number identifies your bank uniquely within the direct deposit system. It must be:

- Nine (9) digits in length, including zeros;
- A current valid bank routing number.

Your account number:

- Is usually just to the right of your ABA routing number including zeros;
- Can be up to 17 digits long; and
- Can be both letters and numbers.

You may want to verify your account and routing numbers with your financial institution before filling in the information.

Fill in the oval to show the type of bank account. If you want the refund to go to a savings account instead of your checking account, you may need to contact your financial institution for the account and routing number information.

Check the ABA routing number and account number carefully. If your bank account information is incorrect or missing digits, the money can be deposited in someone else's account. Please double check your routing and account number. OTR is not liable for any ABA routing and account numbers reported on the return in error.

If you do not select the checking or savings oval, we will assume the refund will be deposited in your checking account. If the funds are returned to OTR, a paper check will be issued.

In the event of a rejection of direct deposit, refunds will be re-issued on a paper check.

Note: Identify theft and fraud using direct deposit has grown significantly nationally and locally in recent years. To minimize direct deposit/identity theft refund fraud, OTR is converting new direct deposit refund requests to paper checks mailed to the taxpayer's address of record. Also see number 3, Paper Check section below for when paper checks will be issued.

Refund direct deposit to a foreign account – International ACH Transaction (IAT)

If you request your refund to be direct deposited to an account outside of the United States, you will receive a paper check.

2. DC Tax Refund Visa® Prepaid Card

If you want your refund on a **Visa® Prepaid Card**, choose Tax Refund Card under the Refund Options on the D-40 or D-40EZ form. However, refunds under \$2 or greater than \$4,000 do not qualify for the refund card. Non-qualified refunds will receive a paper check if direct deposit is not selected. If taxpayer is a first time filer, they can receive a refund card if it is within the threshold.

3. Paper Check

A paper check will be issued if:

- no refund option is selected;
- the taxpayer selects this option, or direct deposit is not selected or if the taxpayer selects "Tax Refund Card" and the tax refund card is beyond the threshold for a refund card;
- taxpayer is a first time filer, even if they select direct deposit;
- there is a gap between filing i.e., filed in 2012 and 2013, but did not file in 2014; or
- the bank account changes from one year to the next.

Refund status inquiry

To check the status of your refund visit www.taxpayerservicecenter.com. You will need to enter your SSN and the refund amount you requested on your return.

Third Party Designee

If you want to authorize another person to discuss your 2015 tax return with the OTR, check the oval in the Third Party Designee block on page 2 of the D-40, or page 1 of the D-40EZ, and enter the designee's name and phone number. If you want to authorize your paid preparer, enter 'preparer' in the 'third party designee' block. If you are filing a joint return, checking the third party designee block oval constitutes authorization by both filers.

Checking the oval also gives the designee authorization to:

- Give OTR any information missing from your return;
- Contact OTR for information about processing your return and the status of any refund or payment; and
- Request, receive and/or respond to OTR notices related to your return.

The authorization does not:

- Give the designee the right to receive your refund;
- Bind you to any additional tax liability related to your return; or
- Otherwise represent you before OTR.

This authorization automatically ends on April 18, 2016 (without regard to extensions).

Signature

Sign and date your return. If your filing status is married filing jointly or married filing separately on the same return, both spouses/registered domestic partners must sign. If the return is not signed, it will be sent back to you. If the return was prepared by a paid tax preparer, the tax preparer must also sign the return and provide his or her identification (PTIN) and telephone number. You, the taxpayer(s) is/are responsible for the information prepared and submitted by a paid preparer.

Send in your original return and attachments, if applicable; <u>please</u> keep a copy for your records.

Do not understate your taxes

There may be a penalty if an understatement of the tax required to be shown on your return exceeds the greater of:

- 10% of the tax required to be shown on the return; or
- \$2,000

The penalty is 20% of the excess of the amount required to be shown on the return over the tax shown on the return.

Preparer Tax Identification Number (PTIN)

If you are a paid tax preparer, you are required to have an IRS PTIN issued by the IRS. If you use a paid preparer, they are required to have an IRS PTIN issued by the IRS. Although you may use a paid preparer, **you** the taxpayer(s) are responsible for the filing and payment of your tax return. A PTIN is a number issued and authorized by the IRS to file a return on your behalf. Please review the tax return before you allow a paid preparer to issue a return on your behalf.

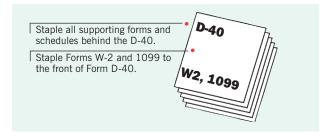
Paid preparers must pay a penalty for understating taxes where:

- The refund or amount due is based on unrealistic information; or
- The preparer should have been aware of a relevant law or regulation; or
- Relevant facts about the return are not adequately disclosed.

Penalties range from \$250 to \$10,000.

Assembling your D-40EZ or D-40 return

- Do not staple or otherwise damage the Bar Code located in the upper right hand corner of the form or schedule being attached;
- Do not cross out the tax year on the 2015 return. If you are not filing a 2015 individual income tax return, do not use this booklet. Request a booklet for the specific year you are filing by calling our Forms Center at (202) 442-6546, or visit our Customer Service Administration (CSA) at 1101 4th Street, SW, Washington, DC 20024. You may also visit our website at http://www.taxpayerservicecenter.com for prior year(s) individual income tax booklets/returns;
- Staple check or money order to the D-40P, Payment Voucher;
- Staple Forms W-2 and applicable 1099 to the front of your return;
- Staple any of the other required documents listed on this page in the upper left corner behind the return;



- Send in an original, signed DC return with attachments, if applicable, not a copy. Please fold your return once and use the return envelope provided;
- There are two adhesive mail labels on the back flap of the return envelope. If you are sending a <u>payment</u> with your return, use the PO Box 96169 label on the return envelope. If you are filing a return with <u>no payment due or refund return</u>, use the PO Box 96145 label.
- Copies of the federal return and schedules are not required to be filed with DC and should not be attached.

List of other required documents for D-40 filers.

Staple these behind the D-40 return in file order. (File order numbers can be found at the bottom of the forms)

- DC Schedule S (if claiming exemptions other than yourself);
- DC Schedule H;
- DC Schedule U;
- DC Schedule I;
- DC Schedule N;
- DC Form D-2210, Underpayment of Estimated Income Tax by Individuals;
- DC Form FR-147, Refund Claim for Deceased Taxpayer, with letters of administration and a copy of the death certificate;
- DC Form D-2440, Disability Income Exclusion (and any certification);
- DC Form D-2441, Child and Dependent Care Credit for <u>Part-Year</u> Residents.

If any of the above-referenced forms are needed, visit www.taxpayerservicecenter.com. Click "Tax Forms and Publications", "Individual Income Forms", and select form needed.

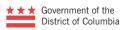
You may also contact our Forms Center at (202) 442-6546.

Low Income Credit Table

(This is not a tax table)

Use this table to determine the DC low income credit amount that you can claim. This is a non-refundable credit, which means it can reduce the DC tax you owe, but it will not directly result in a tax refund.

	Personal	exemptio	ons claime	ed on you	r federal re	eturn				
	1	2	3	4	5	6	7	8	9	10
Single										
Under 65 and not blind	133	223	311	402	534	669	801	936	1068	1203
Under 65 and blind	125	213	303	391	522	654	789	921	1056	1188
65 or over and not blind	125	213	303	391	522	654	789	921	1056	1188
65 or over and blind	115	205	293	383	507	642	774	909	1041	1176
Married or registered domestic partners filing	jointly (or filing s	eparate	ly on the	e same re	eturn				
Both spouses/partners are under 65 and not blind		349	456	591	723	858	990	1125	1257	1392
Both spouses/partners are under 65 and one is bli	nd	327	426	558	693	825	960	1092	1227	1359
Both spouses/partners are under 65 and both are	blind	307	395	528	660	795	927	1062	1194	1329
One spouse/partner is 65 or over and neither is bli	nd	327	426	558	693	825	960	1092	1227	1359
One spouse/partner is 65 or over and one is blind		307	395	528	660	795	927	1062	1194	1329
One spouse/partner is 65 or over and both are blir	nd	285	375	495	630	762	897	1029	1164	1296
Both spouses/partners are 65 or over and not bline	d	307	395	528	660	795	927	1062	1194	1329
Both spouses/partners are 65 or over and one is b	lind	285	375	495	630	762	897	1029	1164	1296
Both spouses/partners are 65 or over and both are	blind	265	353	465	597	732	864	996	1131	1266
Married or registered domestic partners filing	separat	ely								
Under 65 and not blind	133	223	311	402	534	669	801	936	1068	1203
Under 65 and blind	113	201	291	379	504	636	771	903	1038	1170
65 or over and not blind	113	201	291	379	504	636	771	903	1038	1170
65 or over and blind	91	181	269	359	471	606	738	873	1005	1140
Head of household										
Under 65 and not blind	129	217	307	395	528	660	795	927	1062	1194
Under 65 and blind	119	209	297	387	513	648	780	915	1047	1182
65 or over and not blind	119	209	297	387	513	648	780	915	1047	1182
65 or over and blind	111	199	289	377	501	633	768	900	1035	1167
Qualifying Widow(er) with Dependent Child										
Under 65 and not blind		349	456	591	723	858	990	1125	1257	1392
Under 65 and blind		327	426	558	693	825	960	1092	1227	1359
65 or over and not blind		327	426	558	693	825	960	1092	1227	1359
65 or over and blind		307	395	528	660	795	927	1062	1194	1329
Low Income credit for dependent claimed by s										
a Your federal standard deduction from 1040, Li	ne 40; 10	040A, Lir	ne 24; or	1040EZ	, Line 5.		a \$			
b DC standard deduction							b \$		- 5,2	200
c Subtract Line b from Line a							c \$			
d Low Income Credit Using line c, refer to the tax tab tax amount. Enter it here and or			o find the o	correspond	ing		d \$			



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

1 5	 1 0	 2 1	0 0	0 0

Tax	period	ending	(MMYY
	P		,

Revised 04/15

Personal inform	nation			Filing statu	Is: Singl	le, 🔘	Married f	ling joint	ly, R	egister	ed domestic p	artners filing jo
Your telephone n		and Data of Birth (MMDDV)	·///	Chausal	a/vagiatavad	damast	Depende		-			if amended ref
Tour Social Secur	ity number (SSN)	and Date of Birth (MMDDY	111)	Spouse	s/registereu	domest	ic partner	S 33IN &	ina Date	OI DITU	ı (MMDDYYYY	
Your first name		M.I. Last	name									
Spouse's/register	ed domestic partner's first	name M.I. Last	name									
Home address (n	umber, street and suite/ap	artment number if applicable)								OFFICIAL	USE ONLY
											Vendor	ID#0000
City					State		Zip Code	+4				
1 Total wa	iges, salaries, tips,	unemployment compe	nsation	. etc.					1 \$.00
	-	ry dividends. (If more th			D-40)				2 \$			00
	sted gross income.	•	απ φ του ι	o, 1110 101111	2 10.)				3 \$			00
•	•		00.075	15 511		011.00	•				-	
or if clain	ned as a dependent on	temption. <i>If single, enter</i> another's tax return, enter	\$5,200						4 5			.00
	ible income. Line 3 n nan \$100,000 file form i	ninus Line 4. If Line 4 is eq D-40.	ual to or	more than	n Line 3, m	ake no	entry.		5 \$.00
Tax. Us	e the tax tables to find	the tax on the Line 5 amοι	ınt.						6			.00
DC Low	Income Credit. Use	Calc. LIC/EITC to see if L	.IC <u>or</u> EI	TC is a gre	eater bene	fit. See	e instruct	ions.	7			.00
'a Enter ni	umber of exemption	s claimed on your fed	eral retu	urn.			7a					
Net tax.	Subtract Line 7 from I	ine 6. If Line 7 is equal to	or more	than Line	6, make n	o entry	<u>′</u> .		8			.00
a Contrib	ution to Public Fund	for Drug Prevention a	nd Chil	dren at F	Risk.				9a			.00
b Contrib	ution to DC Stateho	od Delegation Fund.							9b			.00
		tiver Cleanup and Prot		Fund.					9c			.00
)d		RESERVE)						9d			.00
10 Tax and	/or contribution(s).	Add Lines 8, 9a, 9b, 9c ar	nd 9d.						10			.00
11 Total Do	c income tax withher	eld, shown on Forms W-2	and 1099	9 – attach	these form	ıs.			11			.00
12 Tax paid	d with extension of t	ime to file or with origi	nal retu	ırn if this	is an am	ende	d returr		12			.00
3 DC Ear	ned Income Tax Cre	<u>dit.</u> Leave blank if you took L	ine 7 DC	Low Incom	e Credit (LIC	C)						
3a Enter no	umber of qualified E	ITC children.	13	b Enter	your earn	ned in	come a	mount	13b			.00
3c For filer	s with qualifying ch	ildren. Enter federal E	IC \$		00	x.40	Enter re	esult >	13d			.00
3e For filer	s without qualifying	children. See instruction	s for spec	cial calculat	ions. Enter	r result	>		13e			.00
4 Total tax	c payments and cre	dits. Add lines 11, 12 and	1 13d or 1	13e.					14			.00
I5 Refund.	If Line 14 is the larger,	subtract Line 10 from Line	14.						15			.00
l6 Amount	owed. If Line 10 is the	e larger, subtract Line 14 fro	om Line 1	0. See pa	yment optic	ons in i	nstructio	1S.	16			.00
7 Penalty	\$.00 Interest \$.0	00 See insti	ructions	s. Enter r	esult >	17			.00
8 TOTAL	AMOUNT DUE. Add	l lines 16 and 17.							18			.00
	nt come from an accou			Yes	No S	See ins	struction	S.				00
		ine 17 (results) from Line			notruotion	_			19			.00
	go to an account outsi		O No		nstructions					! .!	ual a	
<u>etuna Optioi</u> Iark one refu		the tax refund card and pect deposit Tax re	orogram efund ca		s, visit our Paper cl		ile <u>otr.do</u>	.gov/ref	unaprep	<u>Jaiucai</u>	ius.	
	. To have your refund dep				· ·		d ontor he	nk routin	a and as	oount :	numbors Sca	instructions
•		posited to your checking		<i>avings</i> acco ccount Nu		уат апс	i enter Da	rik routiñ	g and ac	count f	numbers. See	IIISU UCUONS.
	g Number	was to dia this				tor t	nor:-	1 mk = :		£ 41 '	0 moon C :	two atteres
hird party design esignee's name	ee 10 autnorize another pe	erson to discuss this return wi	th UIR, fil	II In here (and en		name and ne numbe		iumber o	ı that p	erson. See ins	structions.
ignature Under p our signature	penalties of law, I declare that	I have examined this return and, to Date	the best o	f my knowled Preparer's s		ct. Decla	ration of pa	id prepare	r is based	on inforr	mation available Date	to the preparer.
ouse's/registered d	omestic partner's signature if f	iling jointly Date		Preparer's Ta	ax Identification	on Numb	er (PTIN)	PTII	N telephon	e numbe	er	

Instructions for the D-40EZ

Personal information (SSN, name, address, telephone number)

Refer to page 8 of the General Instructions to prepare personal information.

Filing status

Refer to page 8 of the General Instructions regarding filing status, and fill in the appropriate filing status.

Line 1 Total wages, salaries, tips, unemployment compensation, etc. Enter amount from 1040, 1040A, 1040EZ, 1040NR, or 1040NR-EZ.

Line 2 Taxable interest and ordinary dividends. If more than \$1,500, file the Form D-40.

Taxable interest should be shown on your Forms 1099-INT, 1099-OID, or substitute statements. Include interest from series EE, HH and I US savings bonds. Do not report any tax-exempt interest from box 8 or 9 of Form 1099-INT. Report on Line 2:

- If you have any interest received from a seller-financed mortgage and the buyer used the property as a personal residence;
- If you have accrued interest from a bond;
- If you are reporting original issue discount (OID) in an amount less than the amount shown on the IRS Form 1099-OID;
- If you are reducing your interest income on a bond by the amount of the amortized bond premium;
- · If you received interest or ordinary dividends as a nominee; or
- If you had a foreign account or you received a distribution from, or were a grantor of, or transferor to, a foreign trust.

<u>Foreign accounts.</u> If you own more than 50% of the stock in any corporation that owns one or more foreign bank accounts; or if any time during 2015 you had an interest in or signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account) unless:

- The combined value of the accounts was \$10,000 or less during the whole year:
- The accounts were with a US military banking facility operated by a US financial institution;
- You were an officer or employee of a commercial bank that is supervised by the Comptroller of the Federal Reserve System, or the Federal Deposit Insurance Corporation; the account was in your employer's name; and you did not have a personal financial interest in the account;
- You were an officer or employee of a domestic corporation with securities listed on a national securities exchange or with assets of more than \$10 million and 500 or more shareholders of record; the account was in your

employer's name; you did not have a personal financial interest in the account; and the corporation's chief financial officer has given you written notice that the corporation has filed a current report that includes the account.

Report any income shown in Box 1a of the Forms 1099-DIV or substitute statements. You may refer to the General Instructions for Schedule B – Interest and Ordinary Dividends from http://www.irs.gov.

Line 3 DC Adjusted Gross Income. Add Lines 1 and 2.

Line 4 Standard deduction plus exemption. Refer to page 9 of the General Instructions regarding standard deduction and personal exemptions.

Line 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 the Form D-40. Refer to page 15 of the General Instructions.

Line 6 Tax. Refer to page 15 of the General Instructions.

Line 7 DC Low Income Credit. Refer to page 10 of the General Instructions.

Line 7a Number of exemptions claimed on federal return. Enter the number of federal exemptions.

Line 8 Net Tax. Subtract Line 7 from Line 6. If Line 7 is equal to or more than Line 6, make no entry.

Lines 9a, 9b and 9c Refer to page 15 of the General Instructions.

Line 9d RESERVED

Line 10 Tax and/or contributions. Add Lines 8, 9a, 9b, 9c, and 9d (if applicable)

 $\mbox{\bf Line}~\mbox{\bf 11}$ Total DC income tax withheld. Refer to page 8 of the General Instructions.

Line 12 Tax paid with extension of time to file or with original return if this is an amended return. Refer to page 15 of the General Instructions.

 $\mbox{\bf Line~13}$ DC Earned Income Tax Credit. Refer to page 11 of the General Instructions.

Line 13a Number of Qualified EITC Children. Enter the number of qualified children as defined on page 11 of the General Instructions.

Line 13b Enter your earned income amount.

Line 13c Enter your federal earned income credit (for taxpayers with qualifying children only).

Line 13d Multiply federal EIC x .40 and enter result (for taxpayers with qualifying children only).

Line 13e For filers without qualifying children, use the DC Earned Income Tax Credit Worksheet For Filers Without A Qualifying Child on page 12 to determine DC EITC credit. Enter result.

Line 14 Total tax payments and credits. Add lines 11-13.

Line 15 Refund. If Line 14 is the larger, subtract Line 10 from Line 14. Include contributions. Answer the IAT question; refer to page 15 of the General Instructions.

Line 16 Amount Owed. If Line 10 is the larger, subtract Line 14 from Line 10. Refer to payment options on page 6 of the General Instructions.

Line 17 Penalty and interest. Enter any underestimated penalty and interest owed in the appropriate boxes. Refer to page 7 of the General Instructions.

DC Low Income Credit or DC Earned Income Tax Credit

Calculation LIC/EITC <u>Take only one</u> of these credits. (Use this calculation to determine which is better for you to claim. Both credits must be prorated to the time of residency for part-year residents.)

a Tax from D-40EZ, Line 6 a
b Low income credit b
c Enter the lesser of Line a or Line b c

d

е

d Federal Earned Income Credit (claimed on 1040, 1040A, or 1040EZ)

e DC Earned Income Tax Credit rate for filers with qualifying children. Multiply Line d x .40

f DC Earned Income Tax Credit for filers without qualifying children. From DC Earned Income Tax Credit Worksheet For Filers Without a Qualifying Child

Compare Line c to Line e or Line f

If Line c amount is greater or equal to Line e or Line f, enter it on D-40EZ, Line 7. If Line e or Line f amount is greater than line c, enter the Line e or Line f amount on D-40EZ, Line 13d or Line 13e, as applicable.

Line 18 Total amount due. Add lines 16 and 17.

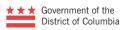
Line 19 Total refund. Subtract Line 17 (results) from Line 15.

Refund Options. Refer to page 15 of the General Instructions.

Third Party Designee. Refer to page 16 of the General Instructions.

Signature. Refer to page 16 of the General Instructions.

PTIN. Refer to page 16 of the General Instructions.



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

1 5	 1 0	 2 1	0 0	0 0

Tax	period	ending	(MMYY
	P		,

Revised 04/15

Personal inform	nation			Filing statu	Is: Singl	le, 🔘	Married f	ling joint	ly, R	egister	ed domestic p	artners filing jo
Your telephone n		and Data of Birth (MMDDV)	·///	Chausal	a/vagiatavad	damast	Depende		-			if amended ref
Tour Social Secur	ity number (SSN)	and Date of Birth (MMDDY	111)	Spouse	s/registereu	domest	ic partner	S 33IN &	ina Date	OI DITU	ı (MMDDYYYY	
Your first name		M.I. Last	name									
Spouse's/register	ed domestic partner's first	name M.I. Last	name									
Home address (n	umber, street and suite/ap	artment number if applicable)								OFFICIAL	USE ONLY
											Vendor	ID#0000
City					State		Zip Code	+4				
1 Total wa	iges, salaries, tips,	unemployment compe	nsation	. etc.					1 \$.00
	-	ry dividends. (If more th			D-40)				2 \$			00
	sted gross income.	•	απ φ του ι	o, 1110 101111	2 10.)				3 \$			00
•	•		00.075	15 511		011.00	•				-	
or if clain	ned as a dependent on	temption. <i>If single, enter</i> another's tax return, enter	\$5,200						4 5			.00
	ible income. Line 3 n nan \$100,000 file form i	ninus Line 4. If Line 4 is eq D-40.	ual to or	more than	n Line 3, m	ake no	entry.		5 \$.00
Tax. Us	e the tax tables to find	the tax on the Line 5 amοι	ınt.						6			.00
DC Low	Income Credit. Use	Calc. LIC/EITC to see if L	.IC <u>or</u> EI	TC is a gre	eater bene	fit. See	e instruct	ions.	7			.00
'a Enter ni	umber of exemption	s claimed on your fed	eral retu	urn.			7a					
Net tax.	Subtract Line 7 from I	ine 6. If Line 7 is equal to	or more	than Line	6, make n	o entry	<u>′</u> .		8			.00
a Contrib	ution to Public Fund	for Drug Prevention a	nd Chil	dren at F	Risk.				9a			.00
b Contrib	ution to DC Stateho	od Delegation Fund.							9b			.00
		tiver Cleanup and Prot		Fund.					9c			.00
)d		RESERVE)						9d			.00
10 Tax and	/or contribution(s).	Add Lines 8, 9a, 9b, 9c ar	nd 9d.						10			.00
11 Total Do	c income tax withher	eld, shown on Forms W-2	and 1099	9 – attach	these form	ıs.			11			.00
12 Tax paid	d with extension of t	ime to file or with origi	nal retu	ırn if this	is an am	ende	d returr		12			.00
3 DC Ear	ned Income Tax Cre	<u>dit.</u> Leave blank if you took L	ine 7 DC	Low Incom	e Credit (LIC	C)						
3a Enter no	umber of qualified E	ITC children.	13	b Enter	your earn	ned in	come a	mount	13b			.00
3c For filer	s with qualifying ch	ildren. Enter federal E	IC \$		00	x.40	Enter re	esult >	13d			.00
3e For filer	s without qualifying	children. See instruction	s for spec	cial calculat	ions. Enter	r result	>		13e			.00
4 Total tax	c payments and cre	dits. Add lines 11, 12 and	1 13d or 1	13e.					14			.00
I5 Refund.	If Line 14 is the larger,	subtract Line 10 from Line	14.						15			.00
l6 Amount	owed. If Line 10 is the	e larger, subtract Line 14 fro	om Line 1	0. See pa	yment optic	ons in i	nstructio	1S.	16			.00
7 Penalty	\$.00 Interest \$.0	00 See insti	ructions	s. Enter r	esult >	17			.00
8 TOTAL	AMOUNT DUE. Add	l lines 16 and 17.							18			.00
	nt come from an accou			Yes	No S	See ins	struction	S.				00
		ine 17 (results) from Line			notruotion	_			19			.00
	go to an account outsi		O No		nstructions					! .!	ual a	
<u>etuna Optioi</u> Iark one refu		the tax refund card and pect deposit Tax re	orogram efund ca		s, visit our Paper cl		ile <u>otr.do</u>	.gov/ref	unaprep	<u>Jaiucai</u>	ius.	
	. To have your refund dep				· ·		d ontor he	nk routin	a and as	oount :	numbors Sca	instructions
•		posited to your checking		<i>avings</i> acco ccount Nu		уат апс	i enter Da	rik routiñ	g and ac	count f	numbers. See	IIISU UCUONS.
	g Number	was to dia this				tor t	nor:-	1 mk = :		£ 41 '	0 moon C :	two atteres
hird party design esignee's name	ee 10 autnorize another pe	erson to discuss this return wi	th UIR, fil	II In here (and en		name and ne numbe		iumber o	ı that p	erson. See ins	structions.
ignature Under p our signature	penalties of law, I declare that	I have examined this return and, to Date	the best o	f my knowled Preparer's s		ct. Decla	ration of pa	id prepare	r is based	on inforr	mation available Date	to the preparer.
ouse's/registered d	omestic partner's signature if f	iling jointly Date		Preparer's Ta	ax Identification	on Numb	er (PTIN)	PTII	N telephon	e numbe	er	

Instructions for the D-40EZ

Personal information (SSN, name, address, telephone number)

Refer to page 8 of the General Instructions to prepare personal information.

Filing status

Refer to page 8 of the General Instructions regarding filing status, and fill in the appropriate filing status.

Line 1 Total wages, salaries, tips, unemployment compensation, etc. Enter amount from 1040, 1040A, 1040EZ, 1040NR, or 1040NR-EZ.

Line 2 Taxable interest and ordinary dividends. If more than \$1,500, file the Form D-40.

Taxable interest should be shown on your Forms 1099-INT, 1099-OID, or substitute statements. Include interest from series EE, HH and I US savings bonds. Do not report any tax-exempt interest from box 8 or 9 of Form 1099-INT. Report on Line 2:

- If you have any interest received from a seller-financed mortgage and the buyer used the property as a personal residence;
- · If you have accrued interest from a bond;
- If you are reporting original issue discount (OID) in an amount less than the amount shown on the IRS Form 1099-OID;
- If you are reducing your interest income on a bond by the amount of the amortized bond premium;
- · If you received interest or ordinary dividends as a nominee; or
- If you had a foreign account or you received a distribution from, or were a grantor of, or transferor to, a foreign trust.

<u>Foreign accounts.</u> If you own more than 50% of the stock in any corporation that owns one or more foreign bank accounts; or if any time during 2015 you had an interest in or signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account) unless:

- The combined value of the accounts was \$10,000 or less during the whole year:
- The accounts were with a US military banking facility operated by a US financial institution;
- You were an officer or employee of a commercial bank that is supervised by the Comptroller of the Federal Reserve System, or the Federal Deposit Insurance Corporation; the account was in your employer's name; and you did not have a personal financial interest in the account;
- You were an officer or employee of a domestic corporation with securities listed on a national securities exchange or with assets of more than \$10 million and 500 or more shareholders of record; the account was in your

employer's name; you did not have a personal financial interest in the account; and the corporation's chief financial officer has given you written notice that the corporation has filed a current report that includes the account.

Report any income shown in Box 1a of the Forms 1099-DIV or substitute statements. You may refer to the General Instructions for Schedule B – Interest and Ordinary Dividends from http://www.irs.gov.

Line 3 DC Adjusted Gross Income. Add Lines 1 and 2.

Line 4 Standard deduction plus exemption. Refer to page 9 of the General Instructions regarding standard deduction and personal exemptions.

Line 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 the Form D-40. Refer to page 15 of the General Instructions.

Line 6 Tax. Refer to page 15 of the General Instructions.

Line 7 DC Low Income Credit. Refer to page 10 of the General Instructions.

Line 7a Number of exemptions claimed on federal return. Enter the number of federal exemptions.

Line 8 Net Tax. Subtract Line 7 from Line 6. If Line 7 is equal to or more than Line 6, make no entry.

Lines 9a, 9b and 9c Refer to page 15 of the General Instructions.

Line 9d RESERVED

Line 10 Tax and/or contributions. Add Lines 8, 9a, 9b, 9c, and 9d (if applicable)

 $\mbox{\bf Line 11}$ Total DC income tax withheld. Refer to page 8 of the General Instructions.

Line 12 Tax paid with extension of time to file or with original return if this is an amended return. Refer to page 15 of the General Instructions.

 $\mbox{\bf Line~13}$ DC Earned Income Tax Credit. Refer to page 11 of the General Instructions.

Line 13a Number of Qualified EITC Children. Enter the number of qualified children as defined on page 11 of the General Instructions.

Line 13b Enter your earned income amount.

Line 13c Enter your federal earned income credit (for taxpayers with qualifying children only).

Line 13d Multiply federal EIC x .40 and enter result (for taxpayers with qualifying children only).

Line 13e For filers without qualifying children, use the DC Earned Income Tax Credit Worksheet For Filers Without A Qualifying Child on page 12 to determine DC EITC credit. Enter result.

Line 14 Total tax payments and credits. Add lines 11-13.

Line 15 Refund. If Line 14 is the larger, subtract Line 10 from Line 14. Include contributions. Answer the IAT question; refer to page 15 of the General Instructions.

Line 16 Amount Owed. If Line 10 is the larger, subtract Line 14 from Line 10. Refer to payment options on page 6 of the General Instructions.

Line 17 Penalty and interest. Enter any underestimated penalty and interest owed in the appropriate boxes. Refer to page 7 of the General Instructions.

DC Low Income Credit or DC Earned Income Tax Credit

Calculation LIC/EITC <u>Take only one</u> of these credits. (Use this calculation to determine which is better for you to claim. Both credits must be prorated to the time of residency for part-year residents.)

a Tax from D-40EZ, Line 6	а	
b Low income credit	b	
c Enter the lesser of Line a or Line b	С	

d

е

d Federal Earned Income Credit (claimed on 1040, 1040A, or 1040EZ)

e DC Earned Income Tax Credit rate for filers with qualifying children. Multiply Line d x .40

f DC Earned Income Tax Credit for filers without qualifying children. From DC Earned Income Tax Credit Worksheet For Filers Without a Qualifying Child

Compare Line c to Line e or Line f

If Line c amount is greater or equal to Line e or Line f, enter it on D-40EZ, Line 7. If Line e or Line f amount is greater than line c, enter the Line e or Line f amount on D-40EZ, Line 13d or Line 13e, as applicable.

Line 18 Total amount due. Add lines 16 and 17.

Line 19 Total refund. Subtract Line 17 (results) from Line 15.

Refund Options. Refer to page 15 of the General Instructions.

Third Party Designee. Refer to page 16 of the General Instructions.

Signature. Refer to page 16 of the General Instructions.

PTIN. Refer to page 16 of the General Instructions.

Instructions for the D-40

To complete your D-40 return, you will need to do a series of calculations contained in these instructions and copy many of the line items and totals on your D-40. You may also need to attach DC schedules, forms and worksheets to your D-40 if you complete any of the DC forms. Unless instructed otherwise, if you complete any part of any Schedules H, I, N, S, or U, attach it to your return, in the order defined in General Instructions, page 16.

Schedule H, Homeowners and Renter Property Tax Credit.

This schedule allows eligible residents to claim a property tax credit against their DC income tax liability. The total 2015 federal adjusted gross income (AGI) of your "tax filing unit" cannot exceed \$40,000 (under age 70) or \$60,000 (age 70 or older). Do not claim this credit for an exempt property owned by a government, a house of worship or a non-profit organization. See Schedule H in this booklet.

Note: If you are filing a D-40, you must file DC Schedule H with it. If you are not required to file a D-40 (or D-40EZ), the DC Schedule H can be filed by itself.

Schedule I, Additions to and Subtractions from Federal AGI.

This schedule contains two calculations, one for additions and another for subtractions from federal AGI. See Schedule I in this booklet.

If you took the 30% or 50% federal bonus depreciation and/or the additional Internal Revenue Code (IRC) Section 179 expenses on your federal return, enter the total on Schedule I, Calculation A, Line 3.

Schedule N. DC Non-Custodial Parent EITC Claim.

Use this schedule to determine whether a non-custodial parent making court-ordered child support payments may claim the DC EITC. See Schedule N in this booklet.

Schedule S, Supplemental Information and Dependents.

If claiming dependents, use Schedule S to list each dependent's name, social security number (SSN), relationship and date of birth (DOB). If filing head of household use Schedule S to report dependents or other qualifying non-dependent person. Do not include an exemption for the qualifying non-dependent person. Calculation G is used to determine the number of exemptions you may claim. Calculation J is used to determine the DC tax amount for married or registered domestic partners filing separately on the same return. You may also use Schedule S to claim an exemption for yourself or your spouse/registered domestic partner for being blind and/or over 65.

Schedule U, Additional Miscellaneous Credits and Contributions.

This schedule lists certain additional non-refundable and refundable credits you may be able to claim. It also lists several contributions funds to which you may wish to contribute. See Schedule U in this booklet.

Schedule U includes the amount DC domiciliary taxpayers may claim as a credit for individual income tax paid to other state(s) if the income taxed by that state is derived from that state and that income would be taxable in DC is of a kind taxed by DC. The tax paid to a state is the total state tax liability shown on the state tax return. (It is not the state withholding shown on your Form W-2.) The credit is limited to the rate of tax charged in the District. If you are a statutory resident, the state in which you are domiciled gives you a credit for the taxes paid to DC.

Complete Calculation K on page 23, to determine your out of state credit. Enter the credit amount on Schedule U, Part 1a, Line 2. If you paid tax to more than one state, enter the respective amounts and other state codes in the spaces provided.

Credit for certain DC Government employees who are DC residents and first-time DC homebuyers. This \$2,000 credit is available to all DC government employees, employees of a DC public charter school, and any person who has accepted an offer to be a DC police officer, firefighter, emergency medical technician, public school teacher or a teacher at a DC public charter school. Except for DC police officers, the tax credit is limited to those employees who purchased their first principal residence in DC on or after October 1, 2007, and who are enrolled in the **Employer Assisted Housing Program (EAHP)** offered by the DC Department of Housing and Community Development. The credit is available for a 5-year period. This credit is being phased out and shall not apply to a home purchase with a settlement date after March 30, 2015. Enter \$2,000 on Schedule U, Part 1a, Line 5.

No DC credit is allowed for any other tax imposed by a state, including the following:

- Corporate franchise tax;
- License tax;
- Excise tax;
- Unincorporated business franchise tax; and
- Occupation tax.

Non-refundable Credits - There are two non-refundable credits, which took effect in 2014, for alternative fuel vehicle conversion and infrastructure. See D.C. Code Sections 47-1806.12 and 47-1806.13. A credit up to 50% of the costs for purchase and installation of qualified alternative fuel storage and dispensing or charging equipment per qualified alternative fuel vehicle refueling property or private residence. The credit shall not exceed \$1,000 per vehicle charging station for a private residence and \$10,000 per qualified alternative fuel vehicle refueling property or vehicle charging station. The cost of the purchase of the land on which the refueling or charging station will be located or the construction or purchase of any structure is not included in the equipment or labor costs. The unused credit can be carried over for two future years.

Calculation K Out-of-state income tax credit							
a Amount of income tax paid to other state(s), enter from the other state(s) return(s).	а						
b Income subject to income tax in other states and received while a resident of DC.	b						
c DC adjusted gross income from D-40, Line 14.	С						
d Divide Line b by Line c. (Enter the percent.)	d						
e DC Tax from D-40, Line 21.	е						
f Maximum out-of-state credit. Multiply Line e by Line d.	f						
g Enter the lesser of Line a or Line f. Also enter on Schedule U, Part 1a Line 2.	g						

A credit, not to exceed \$19,000 per vehicle, up to the tax liability, for 50% of the cost of equipment and labor per vehicle for vehicle owners who modify their existing petroleum derived gasoline or diesel fuel vehicle into a vehicle capable of operating on one of a list of the listed acceptable operating fuels:

- a. At least 85% Ethanol,
- b. Natural gas,
- c. Compressed natural gas,
- d. Liquefied natural gas,
- e. Liquefied petroleum gas,
- f. Biodiesel (excluding kerosene),
- g. Electricity from a vehicle charging station, or
- h. Hydrogen.

Any unused credit for vehicle conversion cannot be carried forward.

If you are claiming one of these credits, complete the residential form, Alternative Fuel Vehicle Conversion and Infrastructure Credits available online only. Retrieve this form at www.taxpayerservicecenter.com, by clicking on 'Forms', 'Alternative Fuel Vehicle Infrastructure and Conversion Residential Form' under Individual Income and Fiduciary Tax Forms and Publications; attach it to the D-40, Schedule U.

If gross income derived from the operation of an alternative fuel dispensing or charging station exceeds \$12,000, you must file a DC Form D-30, Unincorporated Franchise Tax Return.

Personal Information. Refer to General Instructions page 8.

Filing for a deceased taxpayer. Fill in the oval for a deceased taxpayer at the top of the page of the D-40.

If a taxpayer died in 2015 or 2016 before filing a return, a return must be filed for that person. Complete a D-40 on the correct year's tax return and provide the deceased person's information, not your own. Do not adjust the deceased's income, exemptions or deductions to reflect the date of death, unless a D-41 is being filed for the remainder of the year after the date of death. Tax preparers, other than the surviving spouse/registered domestic partner, such as executors, attorneys, or other personal representatives, must attach letters of administration. If a refund is due, all tax preparers must attach a completed FR-147, Statement of Persons Claiming Refund Due a Deceased Taxpayer, found on www.taxpayerservicecenter.com and a copy of the death certificate. Do not use the federal form to request a DC refund.

Filing Status

Refer to General Instructions, page 8.

(Note: Calculations A and B are on Schedule I)

Cá	Iculation C Standard deduction for part-year DC residents		
а	Your standard deduction. See instructions, page 9.	а	
b	Number of months you lived in DC from D-40, Line 2.	b	
С	Divide Line a by the number 12.	С	
d	Part-year DC standard deduction. <i>Multiply Line c by Line b, enter here and on D-40, Line 16.</i>	d	
Ca	Iculation D DC Itemized deductions for part-year DC residents.		
a	Total Itemized Deductions from Schedule A, Forms 1040 or 1040NR.	а	
b	Portion of Line a that applies to the time you were a DC resident.	b	
С	Portion of your state and local tax or state and local sales tax deduction from Schedule A, Line 5; or 1040NR, Schedule A, Line 1, that was paid to DC.	С	
d	DC itemized deductions Subtract Line c from Line b. If your District AGI is equal to or less than \$200,000 (\$100,000 if Married filing separately) stop here and enter this amount on Line 16 of the D-40.	d	

Note: If your District AGI is greater than \$200,000 (\$100,000 if Married filing separately) continue below to determine the allowable itemized deductions

e Enter the sum of Form 1040 Schedule A Lines 4, 15 & 20 allocable to the time you were a DC resident.	u e
f Subtract amount on Line e from the amount on Line d.	f
g Enter the amount of DC AGI.	g
h Enter \$200,000 (or \$100,000 if MFS).	h
i Subtract Line h entry from Line g entry.	i
j Multiply Line i entry by 5%.	j
k Subtract amount on Line j from amount on Line f ($If < 0$, enter 0).	k
I Add the amounts on Lines e and k (enter this on Line 16 of the D-40).	1

Part-Year Residents

NOTE: A temporary absence (even a lengthy one) from your permanent home does not make you a part-year resident. If filing as a part-year resident, you will be given guidance for completing your D-40 throughout these instructions.

You are a part-year DC resident if, during the year, you moved out of DC with the intent to permanently leave or moved into DC with the intent to permanently stay.

A DC taxpayer domiciled in DC during the tax year, is a full-time DC resident unless he or she changes domicile during the tax year. In such case, he or she will be a part-year resident for the period not domiciled in DC.

A DC taxpayer present in DC for 183 days or more and not domiciled in DC during the tax year is a part-time resident for the period present in DC. Number of months of DC residency. Divide the number of days lived in DC by 30 to determine the number of months of residency. Any remainder over 15 days counts as a full month.

Example: 196 days of residency in DC divided by 30 = 7 months (6 months plus one month due to the 16 day remainder).

"Domicile" is where a person has his or her permanent home. To change domicile, you have to abandon the previous domicile and establish a new one in another state with the intent to remain. If you resided in DC for only part of 2015, allocate your DC income and deductions attributable to the time of your DC residency. Also prorate your exemptions and credits.

If DC was your home or permanent residence for less than a year, fill in the oval on Line 2 of the D-40, complete the applicable months in the "from" and "to" boxes, and enter the number of months in DC. Complete Calculation C for standard deduction and Calculation D for DC itemized deductions showing the type and amount of income received:

- During the time you resided in DC;
- During the time you were a non-resident; and
- The total income reported on your federal return.

Before completing the D-40, calculate the following:

- Income received when you were a resident of DC, and when you resided outside of DC; and
- Deductible expenses paid when you resided in DC and when you resided outside of DC. The same allocation is required for exemptions, credits, and other deductions.

If you received a state income tax refund while not a resident of DC; do not include it in DC income.

If you claimed itemized deductions on your federal income tax return, include, for DC purposes, only those relating to the time you were a DC resident. Your federal worksheet will assist you in completing Schedule I (Calculations A and B) and Calculation D (if applicable). Keep a copy of your worksheet, a copy of your tax return and all calculations.

If you resided in DC for only part of 2015, allocate your DC income and deductions attributable to the time of your DC residency. Also prorate your exemptions and credits.

Standard deduction for part-year DC residents. Adjust your standard deduction to reflect the number of months you were a DC resident. Complete Calculation C on page 24.

Itemized deductions for part-year DC residents. If your DC AGI is \$200,000 or less and you were a part-year resident, complete Calculation D on page 24.

Calculation E DC exemption amount	t for part-year DC residents
a Number of exemptions from D-40 Line 17.	
b Exemption amount per month (\$1,775 divided by 12).	x \$147.92
C Multiply Line b by Line a.	
d Number of months you lived in DC from D-40, Line 2.	
e Exemption amount Multiply Line c by Line d. Enter here and on D-40, Line 18.	

Effective January 1, 2011, DC Official Code \$47-1803.03 (b-4) provides that certain DC itemized deductions of DC taxpayers with over \$200,000 of DC AGI (\$100,000 for a separate return filed by a married individual) will be limited. Reduce the DC itemized deduction amount by 5% of DC AGI in excess of \$200,000 (\$100,000 for a separate return filed by a married individual). The itemized deductions that are not subject to the 5% limitation are medical and dental expenses, expenses incurred in the production of investment interest and casualty or theft loss deduction.

If your DC deductions are limited and you were a part-year DC resident, complete Calculation D on page 24.

Number of exemptions for part-year DC residents. Reduce the full exemption amount to reflect the number of months you were a DC resident. Complete Calculation E on page 25.

NOTE: Calculation G - Number of exemptions is on Schedule S - Supplemental Information and Dependents.

Credit for child and dependent care expenses for part-year DC residents. Complete the DC Form D-2441 and enter the amount from Line 5 on Line 22 of the D-40. Attach a copy of your DC Form D-2441.

Do not include income tax withheld for other states in the DC tax withheld, Line 30, D-40.

Income Information Section

- Copy Line a through d from the appropriate lines on the federal return. Do not recalculate any amounts or totals.
- Not all items will apply to you. Fill in only those that do. If the amount is zero, leave the line blank.
- If you had a loss for Lines b, c, d, 3, 6, 14 or 20, fill in the "Fill in if loss" oval to indicate that the figure entered is a negative one. Do not enter a minus sign or brackets in the boxes.

Line a Wages, salaries, unemployment compensation, and/or tips Enter the amount from your federal 1040,1040a, 1040EZ, 1040NR, or 1040NREZ, plus any unemployment compensation received.

All unemployment compensation received in 2015 is taxable.

Line b Business income or loss

Enter the amount from your 1040 or 1040NR. If you had gross income from DC sources, of more than \$12,000 from a non-incorporated business or business activity, do not include on the D-40. You are required to file a D-30 return.

Line c Capital gains or losses

Enter the amount from your 1040 or 1040NR. The maximum allowable annual capital loss claim is \$3000 (\$1500 if married or registered domestic partner filing separately).

Calculation F DC Itemized deductions for full-year DC residents		
a Total itemized deductions from Form 1040, 1040NR, 1040NR-EZ.	а	
b State and local income tax or state and local general sales tax deduction from 1040, or 1040NR.	b	
c DC itemized deductions. Subtract Line b from Line a, If your District AGI is equal to or less than \$200	0,000	
(\$100,000 if Married filing separately), stop here and enter this amount on Line 17 of the D-40.	С	
Note: If your District AGI is greater than \$200,000 (\$100,000 if Married filing separately) continue below to determine the allowable itemized deductions		
d Enter the sum of Form 1040 Schedule A Lines 4, 14 & 20.	d	
e Subtract amount on Line d from the amount on Line c.	е	
Enter the amount of DC AGI.	f	
g Enter \$200,000 (or \$100,000 if MFS).	g	
h Subtract Line g entry from Line f entry.	h	
i Multiply Line h entry by 5%.	i	
Subtract amount on Line i from amount on Line e (if < 0 , enter 0).	i	

Note: Calculation G - Number of exemptions is on Schedule S - Supplemental Information and Dependents.

If you had farm income or loss, enter on Line c the amount on Line 18 of your 1040 or Line 19 of your 1040NR in the amount entered on Line c. If a loss, fill in the oval.

k Add the amounts on Lines d and j (enter this on Line 16 of the D-40).

For DC tax purposes, upon disposing of an asset not fully depreciated, compute the capital gain/loss reported on your federal return for the year of disposition excluding any bonus depreciation.

Line d Rental real estate, royalties, S corporations, trusts, etc Enter the amount from your 1040 or 1040NR.

If you had gross income, from DC sources, of more than \$12,000 from a non-incorporated business or business activity, including rents and royalties, do not include on D-40. You are required to file a D-30 return. File a DC Form D-30, Unincorporated Franchise Tax Return if capital is a material income producing factor. An S Corporation must file a D-20, Corporate Franchise Tax Return.

Computation of DC Gross and Adjusted Gross Income

Line 3 Federal adjusted gross income

Enter the amount from 1040, 1040A, 1040EZ, 1040NR, or 1040NR. Include your taxable portion of pension/annuity in your federal adjusted gross income.

NOTE: Any grants and stipends received by certain DC public or charter school teachers under the Housing Support for Teachers Act of 2007 are subject to both federal and DC income tax.

Additions to DC Income

Line 4 Franchise Tax

Enter any franchise tax deducted on a federal business tax return, from federal Forms 1065 or 1120S.

Line 5 Other additions from DC Schedule I

Enter the amount from Line 8 of Calculation A, Schedule I.

Line 6 Add Lines 3, 4 and 5

Add federal adjusted gross income, franchise tax deducted and additions to DC income. Fill in oval if loss.

Subtractions from DC Income

Line 7 Income received during period of non-residence

For each type of income reported on your federal 1040, determine the amount you received when you resided in DC. Subtract that amount from your total income and enter the results on Line 7.

Line 8 Taxable refunds, credits or offset of state and local income tax Enter the amount from your 1040 or 1040 NR.

Line 9 Taxable amount of social security and tier 1 railroad retirementEnter the amount from 1040 or 1040A.

Line 10 Income reported and taxed this year on a DC franchise or fiduciary return (D-20, D-30 or D-41)

If the income reported on your 1040 included income reported and taxed on a DC franchise or DC fiduciary return, enter that amount here. Provide

Calculation I/Tax Rate Schedule

If your taxable income from D-40, Line 20 is:

Not over \$10,000 4% of the taxable income

Over \$10,000 but not over \$40,000 \$400, plus 6% of the excess over \$10,000 Over \$40,000 but not over \$60,000 \$2,200, plus 7% of the excess over

\$40,000

Over \$60,000 but not over \$350,000 \$3,600, plus 8.5% of the excess over \$60,000 Over \$350,000 \$28,250, plus 8.95% of the excess above

\$350,000

the ITIN or SSN, and your share of the income reported. Refer to General Instructions, page 8 regarding TINs. Include the ITIN/SSN on page 2 of the Schedule S.

Line 11 DC and federal government survivor benefits

If you are an annuitant's survivor and 62 years of age or older as of December 31, 2015, enter the total survivor benefits (do not include Social Security survivor benefits).

Line 12 Other subtractions from DC Schedule I

Line 13 Total subtractions from DC Income

Add Lines 7-12

DC Adjusted Gross Income

Line 14 DC adjusted gross income

Line 6 minus Line 13.

DC Taxable Income

Line 15 Deduction type

Indicate which type of deduction (itemized or standard) you are taking by filling in the appropriate oval. You must take the same type of deduction on your DC return as you took on your federal return.

Line 16 DC deduction amount

Do not copy the amount from your federal return. DC amounts are different from those allowed on your federal return.

<u>Standard deduction.</u> Reference page 9 of the General Instructions. Partyear DC residents, reference page 25.

<u>Itemized deductions.</u> Do not copy the amount from your federal return. DC amounts are different from those allowed on your federal return.

Clarification: To the extent that a taxpayer's itemized deductions are limited at the federal level because IRS Form 1040 Line 38 is greater than \$150,000, only the pro rata amount of the state and local tax deduction that was actually allowed after the limitation, should be subtracted from the federal Schedule A Line 29 amount. The only time 100% of the state and local taxes should be subtracted from the federal itemized deductions allowed is when the amount on Line 38 of the Form 1040 is equal to or less than \$150,000.

If your DC AGI is \$200,000 or less, complete Calculation F on page 26. DC income taxes paid are not deductible on your DC return. Therefore, reduce your federal itemized deductions amount by those taxes before entering the total on your DC return.

Effective January 1, 2011, DC Official Code §47-1803.03 (b-4) provides that certain DC itemized deductions of DC taxpayers with over \$200,000 of DC AGI (\$100,000 for a separate return filed by a married individual) will be limited. Reduce the DC itemized deduction amount by 5% of DC AGI in excess of \$200,000 (\$100,000 for a separate return filed by a married individual). The itemized deductions that are not subject to the 5% limitation are medical and dental expenses, expenses incurred in the production of investment interest and casualty or theft loss deduction.

If your DC deductions are limited, complete Calculation F on page 26.

Line 17 Number of exemptions

Reference page 10 of the General Instructions.

Line 18 Exemption amount

Reference page 10 of the General Instructions. The amount of the personal exemption otherwise allowable for the taxable year in the case of an individual whose adjusted gross income exceeds \$150,000 shall be reduced 2% for every \$2,500 (or fraction thereof) by which the taxpayer's adjusted gross income for the taxable year exceeds \$150,000. No amount of the personal exemption shall be available for an adjusted gross income in excess of \$275,000.

Calculation L - Comparison of DC Low Income Credit and the DC Earned Income Tax Credit	. DO NOT TAKE	BOTH
a Child and dependent care credit from D-40, Line 22.	а	
b DC Schedule U, Line 7 (nonrefundable credits).	b	
C Add Line a and Line b.	С	
d Tax from D-40, Line 21.	d	
e Subtract Line c amount from Line d amount.	е	
f DC Low Income Credit from table on page 17.	f	
g Enter the lesser of Line e or Line f amounts.	g	
h Federal Earned Income Credit from Federal Form 1040, 1040A, or 1040EZ.	h	
i DC Earned Income Tax Credit for filers with qualifying children. Multiply Line H X .40	i	
j DC Earned Income Tax Credit for filers without qualifying children. From DC Earned Income Tax Credit Worksheet for Filers Without a Qualifying Child.	j	
The Line f Low Income Credit and the Line i and Line j Earned Income Tax Credit have to be prorated to the time of residency for part-year residents.		
If Line g amount exceeds Line i or Line j amount, enter it on D-40, Line 24.		
If Line i or Line j amount exceeds Line g amount, enter it on D-40, Line 27d or Line 27e.		

Line 19

Add Lines 16 and 18.

Line 20 DC taxable income

Subtract Line 19 from Line 14. Enter the result, if it is a minus, fill in the oval.

Line 21 Tax

If Line 20 is \$100,000 or less, use the tax tables on pages 59-68 to determine your tax. If Line 20 is more than \$100,000, use Calculation I on page 27 to determine your tax.

Married or registered domestic partners filing separately on the same return Before completing Calculation J, the tax computation, on Schedule S, you must determine each person's separate federal AGI, additions to income, subtractions from income, deductions and exemptions. You must combine the separate amounts for each person before making entries on Lines 22-32 of the D-40.

DC tax, credits, and payments

The credits claimed on Lines 22, 23 and 24 are non-refundable, which means they can reduce the taxes you owe, but they will not result in a tax refund. The credits you claim on Lines 27d or 27e, 28 and 29 are refundable credits, which means if these credits plus any tax payments are greater than your total tax due, you may receive a refund.

Line 22 Credit for child and dependent care expenses

Do not claim this credit if your filing status is married filing separately. If your status is married or registered domestic partner filing separately on the same return, you may claim the credit and divide it between spouses/registered domestic partners any way you wish.

If you were a full-year DC resident, to figure your DC credit, multiply by .32, the amount from federal Form 2441, Line 9. Enter the result on Line 22 of the D-40. (Do not use the DC Form D-2441.)

If you were eligible for the Child and Dependent Care Credit but did not claim it for federal purposes, complete the federal Form 2441, multiply the result by .32 and claim the DC credit for child and dependent care expenses.

Line 23 Non-refundable credits from DC Schedule U

This entry is the total of non-refundable amounts from DC Schedule U, Part 1a, Line 7.

Line 24 DC Low Income Credit

Refer to General Instructions, page 10.

Line 25 Total non-refundable credits

Add Lines 22, 23 and 24.

Line 26 Total tax

Subtract Line 25 from Line 21. If Line 21 is less than Line 25, leave Line 26 blank.

Line 27 DC EITC

Refer to General Instructions, page 11.

Line 27a Qualified EITC children

Refer to General Instructions, page 11.

Line 27b Enter your earned income amount

Line 27c Enter your federal earned income credit (for taxpayers with qualifying children only)

Line 27d Multiply federal EIC x.40 and enter result (for taxpayers with qualifying children only).

Line 27e For filers without qualifying children, use the DC Earned Income Tax Credit Worksheet For Filer Without a Qualifying Child to determine your DC EITC and enter result.

Line 28 Property tax credit

If you filed a DC Schedule H, Homeowner and Renter Property Tax Credit, enter the amount from the appropriate Line (6 or 10). See the instructions in this booklet for assistance in completing Schedule H. If you are filing a D-40 and Schedule H, attach Schedule H to your D-40.

Line 29 Refundable credits from DC Schedule U

Complete Schedule U, Part 1b. Attach Schedule U to your D-40. See Schedule N, DC Non-Custodial Parent EITC Claim, to determine if you are eligible to claim this credit. If you complete a Schedule N, attach it to your D-40.

Line 30 DC income tax withheld

Add the amount of DC income tax withheld as shown on your 2015 federal Forms W-2 and applicable 1099 that show DC tax withheld.

Line 31 2015 Estimated income tax payments and amount applied from 2014 return

Enter the total of your 2015 DC estimated income tax payments and any amount applied from your 2014 return as a carry forward. If you are filing separate returns and paid estimated income tax payments, you and your spouse/registered domestic partner must divide the payments according to which spouse/registered domestic partner paid them. You cannot arbitrarily allocate the estimated payments between you.

Line 32 Payment made with an extension of time to file or with original return

If you filed Form FR-127, Extension of Time to file a DC Income Tax Return, enter the amount you paid with the FR-127 or with the original return, if filing an amended return.

Line 33 Total payments and refundable credits

Add Lines 27d or 27e, and Lines 28-32. If Line 33 is more than Line 26, go to Line 34 in the *Refund* section. If Line 33 is equal to or less than Line 26, go to Line 41 in the *Amount owed* section.

Refund

Line 34 Amount you overpaid

Subtract Line 26 from Line 33.

Line 35 Amount to be applied to your 2016 estimated tax

Enter the amount of overpayment, if any, you want credited to your 2016 estimated tax. This amount will not be refunded.

Line 36 Penalty

Enter penalty for non-payment.

D-2210: Underpayment of Estimated Income Tax By Individuals

You may use this form to calculate your underpayment interest when submitting your D-40 form. If you do, fill in the oval, attach it to your tax return and add the interest to the amount you calculate for Line 37 or 44 of the D-40. If you do not wish to calculate the interest, the Office of Tax and Revenue (OTR) will do it when your return is processed and will notify you of the amount due. You may also complete this form if you believe the interest assessed by OTR for underpayment of estimated income tax is incorrect.

Line 39 Contribution amount from Schedule U, Part II

Reference General Instructions, page 15.

Line 40 Net Refund

Subtract Line 39 from Line 38.

Be sure to use the PO Box 96145 mail label from the back flap of the return envelope when mailing your return.

If you answer yes to the question, "will the refund you requested go to an account outside of the US", you will be issued a paper check in lieu of direct deposit. See page 15 of the General Instructions.

Amount owed

Line 41 Tax due

Subtract Line 34 from Line 26.

Line 42 Contribution amount from Schedule U, Part II

Reference General Instructions, page 15.

Line 43a Penalty

Enter penalty for non-payment.

Line 43b Interest

Enter interest amount due.

Line 43 Enter total penalty and interest

D-2210: Underpayment of Estimated Income Tax By Individuals

You may use this form to calculate your underpayment interest when submitting your D-40 form. If you do, fill in the oval, attach it to your tax return and add the interest to the amount you calculate for Line 37 or 44 of the D-40. If you do not wish to calculate the interest, the Office of Tax and Revenue (OTR) will do it when your return is processed and will notify you of the amount due. You may also complete this form if you believe the interest assessed by OTR for underpayment of estimated income tax is incorrect.

Line 44 Underpayment Interest

Line 45 Total Amount Due

Add Lines 41 - 44.

You must pay this amount in full with your return. See page 6 for payment options under General Instructions.

If you wish to contribute and you are not due a refund or do not owe additional tax, please enter the total contribution amount on Line 42. Make your payment payable to the DC Treasurer and include it with your return.

Key website resources

Designate the specific contributions on Schedule U. Attach Schedule U to your return.

DC Official Code

www.lexisnexis.com/hottopics/dccode/

DC Regulations

www.dcregs.dc.gov/

US Department of State Tax Exemption Cards

www.state.gov/ofm/tax/

DC Tax Forms/Publications

www.otr.cfo.dc.gov/page/tax-forms-and-publications

Mailing Address for Returns

www.otr.cfo.dc.gov/node/392882

Electronic Funds Transfer (EFT) Guide

www.otr.cfo.dc.gov/publication/electronic-funds-transfer-payment-guide-eft

NACHA Guidelines

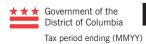
www.nacha.org/

Social Security Administration

www.ssa.gov/

Internal Revenue Service

www.irs.gov



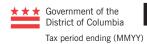


D-40 Individual Income Tax Return



Do	ersonal information Fill in if: Filing an								
You	ur telephone number Fill in if: Filing an	amended return. See instructions. r a deceased taxpayer See instructions	official use only Vendor ID#0000						
N BAC		estic partner's SSN and Date of Birth							
PER L	ur first name M.I. Last name								
N Sp	ouse's/registered domestic partner's first name M.I. Last name								
STAPLE OTHER DOCUMENTS IN UPPER LEFT IN BACK									
COM OH	me address (number, street and suite/apartment number if applicable)								
H D0									
J Cit	y State	Zip Code +4							
S									
	Ing status Single, Married filing jointly, Married filing separately,		neone else						
1	Fill in only one: Married filing separately on same return Enter combined amounts for								
	Registered domestic partners filing jointly or filing separately Head of household Enter qualifying dependent and/or non-depender								
2	Qualifying widow(er) with dependent child Enter qualifying dependent								
2	Fill in if you are: Part-year resident in DC from (month) to	onth); number of months in DC	See instructions.						
	 Complete your federal return first – Enter your dependents' information on DC Schedule S ● 								
7	<u></u>	r. If zero, <u>leave the line blank</u> .							
i a	Wages, salaries, unemployment compensation and/or tips, see instructions.	.00							
\$ b	Business income or loss, see instructions. Fill in if loss	.00							
C	Capital gain (or loss).	.00							
d Co S AIND AIN 3	Rental real estate, royalties, partnerships, etc. Fill in if loss O d 5	.00)						
<u>Co</u>	mputation of DC Gross and Adjusted Gross Income								
3	Federal adjusted gross income. From adjusted gross income lines on federal Forms 1040, 1040A, 1040EZ, 1040NR, or 1040NR-EZ	3 \$	00						
	ditions to DC Income	A C	00						
4	Franchise tax deducted on federal forms, see instructions.	4 \$.00						
5	Other additions from DC Schedule I, Calculation A, Line 8. Add Lines 3, 4 and 5. Fill in if loss	5 \$							
6	Add Lilies 5, 4 alid 5.	6 \$.00						
	btractions from DC Income								
7	Part year residents, enter income received during period of nonresidence, see instructions.	7 \$							
8	Taxable refunds, credits or offsets of state and local income tax.	8 \$.00						
9	Taxable amount of social security and tier 1 railroad retirement	9 \$.00						
10	Income reported and taxed this year on a DC franchise or fiduciary return.	10 \$.00						
11	DC and federal government survivor benefits, see instructions.	11 \$.00						
12	Other subtractions from DC Schedule I, Calculation B, Line 16.	12 \$.00						
13	Total subtractions from DC income, Lines 7-12.	13 \$							
14	DC adjusted gross income, Line 6 minus Line 13.	14 \$.00						

D-40 PAGE 2									
Enter your last name.									
Enter your SSN.					1 5 0 4	0	0 1 2 0	0 0 0	
15 Deduction typ Standar		e same type as you to Itemized See in							
16 DC deduction		Do not copy from fee	deral return. For am	ount to enter, s	ee instructions.	16			.00
		If more than 1 (more							
		partner are over 65 of				10			00
		ultiply \$1,775 by nur 000, see instructions		rt-year DC resid	ents see Calculation E in instructions.				
19 Add Lines 16		,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			19			00
20 DC taxable inc	come. Sui	btract Line 19 from L	ine 14. Enter result	•	Fill in if loss	20			00
DC tax, credits an	id payme	<u>nts</u>				0.1	ф П		00
		O or less, use tax table ately on same ret			ulation I in instructions. chedule S	21			.00
		endent care expe		\$.00 X .32 Enter result >	22			00
		art-year DC resident,				00			00
23 Non-refundab						23	Φ		.00
24 DC Low Incon					nefit. See instructions.	24			.00
24a Enter the num			-	I return.		0.5			00
25 Total non-refu						25	Φ		.00
26 Total tax. Sub						26			00
		Credit Leave blan				27b			.00
27a Enter the nur 27c For filers with				2/D Elite	r earned income amount .00 X .40 Enter result >				00
27e For filers with		_		enecial calculati		27e			00
28 Property Tax C	-			special calculati	ons. Enter result >	28			00
		n DC Schedule U		3. Attach Sche	dule U.	29	\$		00
		shown on Forms W				30			00
31 2015 estimate					14 return.	31			00
		· ·			s an amended return.	32			00
33 Total payment			_			33			00
Refund - Complete	if Line 33 is	more than Line 26			Amount owed - Complete	if Line :	33 is <u>equal to or</u>	less than Line 26	
34 Amount you	overpaid	34 \$		00	41 Tax due Subtract Line		41 \$		00
Subtract Line 26 from Li	ine 33	010			33 from Line 26				
35 Amount to be a to your 2016 estimate		35 \$.00	42 Contribution amount from Sched. U, Part II, Line 6		42 \$		00
36 Penalty See instru		36 \$.00	43a Penalty \$		00		
Fill in the oval if F					43b Interest \$		00		
37 Underpayment		0,		.00	Enter total P	& 1 ,	43 \$		00
38 Refund Subtract 35,36 and 37 from	sum of Lines	38 \$		00					00
39 Contribution an	nount	39 \$		00	Fill in the oval if Form D-				0.0
from Sched. U, Part II, Lir Can not exceed refund amt.					44 Underpayment Interes	st 4	44 \$		00
Put additional amt. on Line		40 \$		00	45 Total amount due Add Lines 41–44	4	45 \$.00
40 Net refund Subt Line 39 from Line 38		40 S this refund request	or amount owed		from an account outside the U	U.S.?	Yes O	No See	e instructions.
	or informat	· ·		ram limitatior	ns, see instructions or visit ou Paper check				
Direct Deposit. To his	ave your ref	und deposited to your	checking OR	savings acco	unt, fill in oval and enter bank rou	uting an	d account numbe	ers. See instructions.	
Routing Nur	mber				nt Number				
Third party designee <i>To a</i> Designee's name	authorize an	other person to discus	s this return with O	TR, fill in here	and enter the name and pho	one num	ber of that person	n. See instructions.	
	s of law, I dec	lare that I have examined			edge, it is correct. Declaration of paid pr	eparer is	based on informatio		er.
Your signature			D	ate	Preparer's signature			Date	
Spouse's/registered domestic p	partner's signat	ture if filing jointly or separ	ately on same return Da	ate	Preparer's Tax Identification Number ((PTIN)	PTIN telepho	ne number	





D-40 Individual Income Tax Return

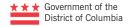


Do	ersonal information Fill in if: Filing an								
You	ur telephone number Fill in if: Filing an	amended return. See instructions. r a deceased taxpayer See instructions	official use only Vendor ID#0000						
N BAC		estic partner's SSN and Date of Birth							
PER L	ur first name M.I. Last name								
N Sp	ouse's/registered domestic partner's first name M.I. Last name								
STAPLE OTHER DOCUMENTS IN UPPER LEFT IN BACK									
COM OH	me address (number, street and suite/apartment number if applicable)								
H D0									
J Cit	y State	Zip Code +4							
S									
	Ing status Single, Married filing jointly, Married filing separately,		neone else						
1	Fill in only one: Married filing separately on same return Enter combined amounts for								
	Registered domestic partners filing jointly or filing separately Head of household Enter qualifying dependent and/or non-depender								
2	Qualifying widow(er) with dependent child Enter qualifying dependent								
2	Fill in if you are: Part-year resident in DC from (month) to	onth); number of months in DC	See instructions.						
	 Complete your federal return first – Enter your dependents' information on DC Schedule S ● 								
7	<u></u>	r. If zero, <u>leave the line blank</u> .							
i a	Wages, salaries, unemployment compensation and/or tips, see instructions.	.00							
\$ b	Business income or loss, see instructions. Fill in if loss	.00							
C	Capital gain (or loss).	.00							
d Co S AIND AIN 3	Rental real estate, royalties, partnerships, etc. Fill in if loss O d 5	.00)						
<u>Co</u>	mputation of DC Gross and Adjusted Gross Income								
3	Federal adjusted gross income. From adjusted gross income lines on federal Forms 1040, 1040A, 1040EZ, 1040NR, or 1040NR-EZ	3 \$	00						
	ditions to DC Income	A C	00						
4	Franchise tax deducted on federal forms, see instructions.	4 \$.00						
5	Other additions from DC Schedule I, Calculation A, Line 8. Add Lines 3, 4 and 5. Fill in if loss	5 \$							
6	Add Lilies 5, 4 alid 5.	6 \$.00						
	btractions from DC Income								
7	Part year residents, enter income received during period of nonresidence, see instructions.	7 \$							
8	Taxable refunds, credits or offsets of state and local income tax.	8 \$.00						
9	Taxable amount of social security and tier 1 railroad retirement	9 \$.00						
10	Income reported and taxed this year on a DC franchise or fiduciary return.	10 \$.00						
11	DC and federal government survivor benefits, see instructions.	11 \$.00						
12	Other subtractions from DC Schedule I, Calculation B, Line 16.	12 \$.00						
13	Total subtractions from DC income, Lines 7-12.	13 \$							
14	DC adjusted gross income, Line 6 minus Line 13.	14 \$.00						

Revised 04/15

2015 D-40 P1

D-4	10 PAGE 2										
Ente	er your last name.										
Ente	er your SSN.					1 5 0 4	0	0 1 2	0 0 0 0		
15	Deduction type Standard		e same type as you to Itemized See ii	ok on your federal re							
16			Do not copy from fee				16				00
17			If more than 1 (mor								
1.0			oartner are over 65 o				10				00
18			ultiply \$1,775 by nun 000, see instructions		t-year DC resid	ents see Calculation E in instructions					00
19	Add Lines 16		700, 000 mon detrone	on page 27.			19				00
20	DC taxable inc	come. Sui	btract Line 19 from L	ine 14. Enter result.		Fill in if loss	20	5			00
DC ·	tax, credits an	d payme	<u>nts</u>				0.1	↑			
21			O or less, use tax table ately on same ret			ulation I in instructions. chedule S.	21				00
22	Credit for child	d and dep	endent care expe	enses		.00 X .32 Enter result >	22				00
00			art-year DC resident,				23				00
23			from DC Schedul				24				00
24			emptions claimed			nefit. See instructions.	24				00
25 25			edits. Add Lines 22	•	i return.		25				00
26			5 from Line 21. If Lin		ina 25 laava Lir	na 26 hlank	26				00
27			Credit Leave blan				20				00
			ualified EITC ch			earned income amount	27b				00
			ng children. Ent		\$.00 X .40 Enter result >					00
			ifying children.		special calculati		27e				00
28		•	om your DC Schedule				28				00
29			n DC Schedule U		3. Attach Sched	dule U.	29				00
30	DC income tax	x withheld	d shown on Forms W	-2 and 1099. Attack	h these forms.		30				00
31	2015 estimate	ed incom	e tax payments a	nd amount appl	ied from 20	14 return.	31				00
32	Tax paid with	extension	of time to file or	with original ref	turn if this is	an amended return.	32				00
33	Total payment	s and refu	undable credits.	Add Lines 27d or 27	7e and 28–32.		33	\$			00
Refu	<u>und</u> – Complete	if Line 33 is	more than Line 26			Amount owed - Complete	if Line	33 is <u>equal to</u>	or less than Line 2	26	
	Amount you of act Line 26 from Line	•	34 \$.00	41 Tax due Subtract Line 33 from Line 26		41 \$			00
	Amount to be a ur 2016 estimate		35 \$.00	42 Contribution amount from Sched. U, Part II, Line 6		42 \$			00
	Penalty See instru		36 \$.00	43a Penalty \$		00			
			210 is attached			43b Interest \$		00			
	Underpayment		0,		.00	Enter total P	& 1	13 \$			00
38	Refund Subtract s 35,36 and 37 from	sum of Lines Line 34	38 \$.00						00
39	Contribution am Sched. U, Part II, Lin	nount	39 \$		00	Fill in the oval if Form D-			a		00
Can no	ot exceed refund amt.	on Line 38				44 Underpayment Interes	st '	14 \$			00
	Iditional amt. on Line 4	-	40 0		00	45 Total amount due Add Lines 41–44	4	45 \$			00
	Net refund Subt. 39 from Line 38		40 Sthis refund request	or amount owed a		from an account outside the	U.S.?	Yes	No O	See instruction	ons.
Refu		or informat	·		ram limitatior	s, see instructions or visit ou Paper check		te <u>otr.dc.go</u> v	v/refundprepaido		
Dire	ct Deposit. <i>To ha</i>	ave your ref	und deposited to your	checking OR	savings acco	unt, fill in oval and enter bank ro	uting an	d account nur	nbers. See instruct	tions.	
	Routing Nun	mber			Accou	nt Number					
	party designee <i>To a</i> nee's name	authorize an	other person to discus	s this return with Oi	TR, fill in here	and enter the name and pho	one num	ber of that pe	rson. See instruction	ons.	
	ature Under penalties gnature	s of law, I dec	are that I have examined		best of my knowle	dge, it is correct. Declaration of paid pr Preparer's signature	reparer is	based on inform	ation available to the p		
Spouse	e's/registered domestic p	oartner's signat	ture if filing jointly or separa	ately on same return Da	ite	Preparer's Tax Identification Number ((PIIN)	PTIN tele	phone number		



2015 SCHEDULE S Supplemental Information and Dependents

Unless instructed otherwise – If you fill in <u>any part</u> of this schedule, attach it to your D-40. Print in CAPITAL letters using black ink.

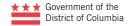
OFFICIAL USE ONLY
Vendor ID#0000

Enter your last name.		Ent	ter your social security number.
Dependents <u>If you have more than 8 dep</u>	endents, list them on an	attac	<u>chment.</u>
First name		M.I.	Last Name
Social security number	Relationship		Date of Birth (MMDDYYYY)
First name		M.I.	Last Name
Social security number	Relationship		Date of Birth (MMDDYYYY)
First name		M.I.	Last Name
Social security number	Relationship		Date of Birth (MMDDYYYY)
First name		M.I.	Last Name
	Buil II		
Social security number	Relationship		Date of Birth (MMDDYYYY)
First name		M.I.	Last Name
Social security number	Relationship		Date of Birth (MMDDYYYY)
Social security number	Relationship		Date of Birth (WINDSTITT)
First name		MI	Last Name
riist name		M.I.	Last Name
Social security number	Relationship		Date of Birth (MMDDYYYY)
First name		M.I.	Last Name
Social security number	Relationship		Date of Birth (MMDDYYYY)
First name		M.I.	Last Name
Social security number	Relationship		Date of Birth (MMDDYYYY)
	fying non-dependent person		Date of Birth of qualifying non-dependent person (MMDDYYYY)
Do not enter your information			
First name of qualifying non-dependent person		M.I.	Last Name

Last name and SSN



	1 5 0 4	0 0 1 4 0 0 0 0	1				
Calculation G Number of exemptions. Do not attach Schedule S to your D-40 if you only filled in Lines a and i and i	have not filled in any other see	tion of Schedule S					
a Enter 1 for yourself and	nave not inied in any other sec	tion of Schedule 3.	а				
5 Enter 1 if you are filing as a head of household and							
c Enter 1 if you are age 65 or over and							
d Enter 1 if you are blind			d				
e Enter number of dependents			е				
f Enter 1 for your spouse or registered domestic partner filing jointly of	or filing senarately on same i	return	f				
g Enter 1 if married or registered domestic partner filing jointly or filing domestic partner is 65 or over	separately on same return an	id your spouse or registered	g				
h Enter 1 if married or registered domestic partner filing jointly or filing	separately on same return an	nd your spouse or registered	h				
domestic partner is blind Total number of exemptions Add Lines a—h, enter here and on D-40,	Line 17.		i				
Calculation J Tax computation for married or registered domestic	partners filing separately	on the same DC return.					
Enter separate amounts in each column. Combine amounts on line k.	You	Your spouse/registered of	domestic partner				
a Federal adjusted gross income.	a \$.00 \$.00				
If you and your spouse filed a joint federal return, enter each person's portion of federal adjusted gross income. Registered domestic partners							
should enter the federal AGI reported on their separate federal returns.							
b Total additions to federal adjusted gross income. Enter each person's portion of additions entered on D-40, Lines 4 and 5.	b \$.00 \$.00				
c Add Lines a and b.	c \$.00 \$	00				
d Total subtractions from federal adjusted gross income. Enter each person's portion of subtractions entered on D-40, Line 13.	d \$.00 \$	00				
e DC adjusted gross income. Subtract Line d from Line c.	e \$.00 \$.00				
f Deduction amount.	f s	.00 \$	00				
Enter each person's portion of the amount entered on D-40, Line 16. (You may allocate this amount as you wish.)							
g Exemption amount. * Enter each person's portion of exemption amount entered on D-40, Line 18	g	.00 \$	00				
*If combined AGI exceeds \$150,000, see instructions page 27.							
h Add Lines f and g.	h \$.00 \$.00				
i Taxable income. Subtract Line h from Line e. Fill in if loss j Tax. If Line i is \$100,000 or less, use tax tables.) \$.00 0\$.00				
If more than \$100,000, use Calculation I in instructions.	1 \$.00 \$.00				
k Add the amounts on Line j, enter here and on D-40, Line 21.	k \$	_(OO Total tax				
EINs associated with Income reported and taxed on Franchise and Fi	duciary Returns for the amo	ount listed on D-40, Line 10).				
a b	С						
d e e	f						
g							



2015 SCHEDULE S Supplemental Information and Dependents

Unless instructed otherwise – If you fill in <u>any part</u> of this schedule, attach it to your D-40. Print in CAPITAL letters using black ink.

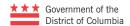
OFFICIAL USE ONLY Vendor ID#0000

Enter your last name.		Ent	er your social security number.	
Dependents If you have more than 8	dependents, list them o	<u>n an attac</u>	<u>hment.</u>	
First name		M.I.	Last Name	
Social security number	Relationship			Date of Birth (MMDDYYYY)
First name		M.I.	Last Name	
Social security number	Relationship			Date of Birth (MMDDYYYY)
First name		M.I.	Last Name	
Social security number	Relationship			Date of Birth (MMDDYYYY)
First name		M.I.	Last Name	
Social security number	Relationship			Date of Birth (MMDDYYYY)
First name		M.I.	Last Name	
Social security number	Relationship			Date of Birth (MMDDYYYY)
First name		M.I.	Last Name	
Social security number	Relationship			Date of Birth (MMDDYYYY)
First name		M.I.	Last Name	
Social security number	Relationship			Date of Birth (MMDDYYYY)
First name		M.I.	Last Name	
Social security number	Relationship			Date of Birth (MMDDYYYY)
Head of household filers SSN of C	qualifying non-dependent pe	erson	Date of Birth of qualifying non-de	enendent nerson (MMDDYYYV)
Do not enter your information	quamying non-uepenuent pe	13011	Date of Diffit of qualifying non-de	יוסטוו (אוואיט) אין די
First name of qualifying non-dependent pers	son	M.I.	Last Name	

Last name and SSN



	1 5 0 4	0 0 1 4 0 0 0 0	1				
Calculation G Number of exemptions. Do not attach Schedule S to your D-40 if you only filled in Lines a and i and i	have not filled in any other see	tion of Schedule S					
a Enter 1 for yourself and	nave not inied in any other sec	tion of Schedule 3.	а				
5 Enter 1 if you are filing as a head of household and							
c Enter 1 if you are age 65 or over and							
d Enter 1 if you are blind			d				
e Enter number of dependents			е				
f Enter 1 for your spouse or registered domestic partner filing jointly of	or filing senarately on same i	return	f				
g Enter 1 if married or registered domestic partner filing jointly or filing domestic partner is 65 or over	separately on same return an	id your spouse or registered	g				
h Enter 1 if married or registered domestic partner filing jointly or filing	separately on same return an	nd your spouse or registered	h				
domestic partner is blind Total number of exemptions Add Lines a—h, enter here and on D-40,	Line 17.		i				
Calculation J Tax computation for married or registered domestic	partners filing separately	on the same DC return.					
Enter separate amounts in each column. Combine amounts on line k.	You	Your spouse/registered of	domestic partner				
a Federal adjusted gross income.	a \$.00 \$.00				
If you and your spouse filed a joint federal return, enter each person's portion of federal adjusted gross income. Registered domestic partners							
should enter the federal AGI reported on their separate federal returns.							
b Total additions to federal adjusted gross income. Enter each person's portion of additions entered on D-40, Lines 4 and 5.	b \$.00 \$.00				
c Add Lines a and b.	c \$.00 \$	00				
d Total subtractions from federal adjusted gross income. Enter each person's portion of subtractions entered on D-40, Line 13.	d \$.00 \$	00				
e DC adjusted gross income. Subtract Line d from Line c.	e \$.00 \$.00				
f Deduction amount.	f s	.00 \$	00				
Enter each person's portion of the amount entered on D-40, Line 16. (You may allocate this amount as you wish.)							
g Exemption amount. * Enter each person's portion of exemption amount entered on D-40, Line 18	g	.00 \$	00				
*If combined AGI exceeds \$150,000, see instructions page 27.							
h Add Lines f and g.	h \$.00 \$.00				
i Taxable income. Subtract Line h from Line e. Fill in if loss j Tax. If Line i is \$100,000 or less, use tax tables.) \$.00 0\$.00				
If more than \$100,000, use Calculation I in instructions.	1 \$.00 \$.00				
k Add the amounts on Line j, enter here and on D-40, Line 21.	k \$	_(OO Total tax				
EINs associated with Income reported and taxed on Franchise and Fi	duciary Returns for the amo	ount listed on D-40, Line 10).				
a b	С						
d e e	f						
g							



2015 SCHEDULE H Homeowner and Renter Property Tax Credit



Important: Read eligibility requirements before completing.

Personal information			OFFICIAL	use only Vendor ID	#0000
Your daytime telephone number Your social security number (SSN)	Spouse's/registered d	omestic partner's SSI	1		
Your first name	M.I. Las	t name			
Spouse's/registered domestic partner's first name	M.I. Last	t name			
Mailing address (number, street and suite/apartm	ent number if applicable)				
City			State	Zip Code +4	
Address of DC property (number, street and suite	e/apartment number if app	licable) for which you	are claiming the c	redit if different from above	
Type of property for which you are claiming the c	redit. Fill in only one:	House A	partment	Rooming house Co	ondominium
 Complete Section A or Section B, w a house of worship or a non-profit org 		Do not claim this	credit for an e		
Section A Credit claim based on ren					o the nearest dollar. or less, <u>leave the line blank</u> .
1 Federal adjusted gross income of the ta		32, on page 2 (see	instructions)	1 \$.00
2 Money from other sources used to page	ay rent not included i	in AGI:			
a. Source	-		.00		
b. Source	¢		00		
	φ			- A	00
3 Rent paid on the property in 2015			.00 x.20 =	3 \$	
4 Property tax credit. Use the "Computing				4 \$	00
5 Rent supplements received in 2015				5 \$	00
6 Property tax credit. Subtract Line 5 from	Line 4, D-40 filers enter he	ere and on Line 28 of	the D-40.	6 \$.00
7 Landlord's name					
Landlord's address (number and street)					Apartment number
		Landlord's	telephone numb	er	
City			State	Zip Code +4	
			_		
Section B Credit claim based on rea					the nearest dollar. r less, leave the line blank.
8 Federal adjusted gross income of th From Line 32 on page 2.	e tax filing unit (see i	nstructions).		8 \$	00
9 DC real property tax paid by you or	the property in 201	15			
				9 \$	
10 Property tax credit Use the "Computing You	ur Property Tax Credit" worksh	eet. Enter here and on L	ne 28 of the D-40. 1	.0 \$.00
11 Enter information from your real property	y tax bill or assessment.	If a section is blan	k on your propert	y tax bill, <u>leave it blank h</u>	ere.
Square number	Suffix number	Lot	number		



Federal Adjusted Gross Income of the tax filing unit (see instructions) - Report the AGI of every member of your tax filing unit, including

IIICC	me subject to federal but not DC income tax. See following	pages	·	UMN B (SPOUSE/DP) COLUMN C (DEPENDENT #1)
	Name (Last, First)		<u>0020MIT/T(100)</u> <u>0020</u>	SWIT B (OF GOOL) GOLOWING (BEI ENDENT #1)
	Social Security Number (SSN)			
	Date of Birth (MMDDYYYY)			
			•	•
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	6	<u> </u>	0
7	Capital gain Fill in if minus	7	0	0
8	Other gains Fill in if minus	8	<u> </u>	0
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	11	0	0
12	Farm income Fill in if minus	12		
13	Unemployment compensation	13		
14	Social security benefits: Taxable amount	14		
15	Other income. Attach separate sheet(s) Fill in if minus	15		
16	Add Lines 1 through 15 in each column. Fill in if minus	16		
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	31		
32	Total federal adjusted gross income. Add amounts entered on Line 3 and enter total here on Line 32 and on Section A, Line 1 or Section	-		us 🔘 💲
	TANDALONE FILERS only, please complete the following "Re		•	nd go to an account outside of the US? Yes No
	Refund Options: For information on the tax refund card an			r visit our website otr.dc.gov/refundprepaidcards.
	•		d card Paper check	
L		ng OR		ter bank routing and account numbers. See instructions.
				on of naid preparer is based on information available to the preparer
	Routing Number Signature Under penalties of law, I declare that I have examined this return an	Acc	unt Number	

Your signature

Spouse's/domestic partner's signature if filing jointly or separately on same return.

Date

Date

Preparer's Tax Identification Number (PTIN)

PTIN telephone number

Date



Preparer's signature



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.

ĺ	,,,,,	me subject to rederal but not DC Income tax. See following	pago	COLUMN D (DEPENDENT #2)	<u>COLUMN E</u> (DEPENDENT #3)	<u>COLUMN F</u> (DEPENDENT #4)
		Name (Last, First)				
		Social Security Number (SSN)				
		Date of Birth (MMDDYYYY)				
	1	Wages, salaries, tips, etc.	1 \$	\$	Ç	5
	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	6			
	7	Capital gain Fill in if minus	7			
1	8	Other gains Fill in if minus	8			
	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	11			
	12	Farm income Fill in if minus	12			
	13	Unemployment compensation	13			
	14	Social security benefits: Taxable amount	14			
	15	Other income. Attach separate sheet(s) Fill in if minus	15			
	16	Add Lines 1 through 15 in each column. Fill in if minus	16			
	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	31			

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. If you have more than 7 dependents, list them on an attachment.

	·		COLUMN G (DEPENDENT #5)	<u>COLUMN H</u> (DEPENDENT #6)	<u>COLUMN I</u> (DEPENDENT #7)
	Name (Last, First)				
	Social Security Number (SSN)				
	Date of Birth (MMDDYYYY)				
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	6			
7	Capital gain Fill in if minus	7			
8	Other gains Fill in if minus	8			
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	11			0
12	Farm income Fill in if minus	12			0
13	Unemployment compensation	13			
14	Social security benefits: Taxable amount	14			
15	Other income. Attach separate sheet(s) Fill in if minus	15			
	Add Lines 1 through 15 in each column. Fill in if minus	16			
	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			
	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			
	Domestic production activities deduction	29			
	Add Lines 17 through 29 in each column	30			
31	Subtract Line 30 from Line 16 Fill in if minus	31			

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:	Percentage -						
\$0 - \$24,999	The amount of property tax that ex	exceeds 3.0% of the adjusted gross income of the tax filing un					
\$25,000 - \$40,000	The amount of property tax that e	ceeds 4.0% of the a	djusted gross income of	the tax filing unit			
If you are age 70 or older and the							
Federal AGI of your tax filing unit is:	Percentage -						
\$0 - \$60,000	The amount of property tax that ex	ceeds 3.0% of the a	djusted gross income of	the tax filing unit			
 Enter federal AGI of tax filing unit (Line 1, Section A, Schedule H or Line 8, Section B, Schedule H). Enter property taxes paid in 2015 or 20% of rent paid in 2015. Multiply Line 1 by the applicable percentage (.03 or .04). 		2					
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 4 of Schedule H, Section A for credit based on rent paid, or Line 10 of Schedule H, Section B for credit based on property tax paid. Round to the nearest whole dollar.		6					

Instructions for Schedule H

(Note: These instructions are for tax year 2015 only.)

Homeowner and Renter Property Tax Credit

Home Defined

The term "home" refers to houses, apartments, rooming houses, and condominiums.

Eligibility

You must meet the following requirements to claim this credit:

- You were a District of Columbia (DC) resident from Jan 1. through Dec. 31, 2015;
- Your residence is not part of a public housing dwelling;
- You rented or owned and lived in your home, apartment, rooming house, or condominium in DC during all of 2015;
- The total 2015 federal adjusted gross income (AGI) of your "tax filing unit" was \$40,000 or less (\$60,000 or less if you are age 70 or older);
- You did not rent from a landlord whose property was either exempt from real property taxes or who paid a percentage of rental income to DC instead of paying a real estate tax;
- You must not be claimed as a dependent on someone else's federal, state, or DC income tax return unless you reached age 65 on or before December 31, 2015.

Additional Information:

- Only one claimant per "tax filing unit"
 can claim the property tax credit and the
 claimant must have lived in the property
 during all of 2015, unless the claimant
 moved to a new address within the
 District of Columbia during 2015.
 (See instructions for "Line 3: Rent
 paid on property").
- A Homeowner and Renter Property Tax Credit cannot be claimed on behalf of a taxpayer who died on or before December 31, 2015.

Tax Filing Unit Defined

A tax filing unit is defined as an individual or married couple that would –were their income above the federal filing threshold—file one individual income tax return. The tax filing unit also includes any persons who would be claimed as dependents on that tax return. Refer to the federal Forms 1040, 1040A or

1040EZ and use the Schedule H pages 2, 3 and 4 to determine the federal adjusted gross income of each person included in your tax filing unit. If any individual did not file a federal income tax return, enter amounts based on the federal instructions. Combine the federal adjusted gross incomes of all persons in the tax filing unit to determine the total federal adjusted gross income of the tax filing unit. If you are required to file a DC individual income tax return attach Schedule H to your D-40 return. If you are not required to file an individual income tax return because you are below the income tax filing threshold, you can file Schedule H as a standalone return.

A tax filing unit can consist of the following combinations:

- An individual, including a registered domestic partner, who files an individual income tax return using the single status, (or would file if their income was above the federal filing threshold). Also included would be all other persons who are claimed as dependents on the individual tax return, or who would be claimed as dependents on an individual tax return if that claimant had income above the filing threshold to file an income tax return;
- 2. A married couple, whether filing jointly, separately on the same return, or who lived together and file separately on separate returns, who files (or would file if their income was above the federal filing threshold). Also included would be all other persons who are claimed as dependents on the individual income tax return, or who would be claimed as dependents on an individual income tax return if that claimant had income above the filing threshold to file an income tax return;
- 3. Registered domestic partners filing jointly or separately on the same return, who file (or would file if their income was above the federal filing threshold). Also included would be all other persons who are claimed as dependents on the individual income tax return, or who would be claimed as dependents on an individual income tax return if that claimant had income above the filing threshold to file an income tax return.

In the case of spouses or domestic partners who, during the entire calendar year for which this claim is filed, maintain separate homes, apartments, rooming houses or condominiums, each spouse or registered domestic partner is considered to be in a separate tax filing unit for the purpose of claiming the credit on each respective home that spouse or partner lived in and maintained. In such cases, if each claimant has income above the filing threshold, each spouse or registered domestic partner must file a separate income tax return to claim the credit for their respective tax filing unit. Any claimant below the filing threshold can file a Standalone Schedule H.

An individual who is claimed as a dependent on someone else's individual income tax return is eligible to file the claim for his/her tax filing unit only if the individual is 65 years of age or older.

There can be more than one tax filing unit in a home, apartment, rooming house or condominium.

When is Schedule H due?

The Schedule H is due by April 18, 2016.

Where to Mail Schedule H

If you are required to file a DC income tax return, attach Schedule H to your DC income tax return. Whether mailing a DC income tax return with Schedule H attached, or mailing Schedule H as a standalone return only, send it to:

Office of Tax and Revenue PO Box 96145 Washington, DC 20090-6145

Do I Use Section A or Section B?

If you **rent** your home, apartment, rooming house or condominium, use Section A.

If you **own** your home, apartment, rooming house or condominium, use Section B.

Section A—Credit claim based on rent paid

Line 1 Total federal AGI of the tax filing unit

Report the federal AGI of every member of your tax filing unit including income subject to federal but not DC income tax. Use pages 2, 3 and 4 to determine the federal AGI of the tax filing unit. To help you complete the page, refer to the federal Forms 1040, 1040A or 1040EZ. If the federal AGI of the tax filing unit is more than \$40,000, (\$60,000 if you are age 70 or older) do not claim the property tax credit, you are not eligible.

On the Schedule H pages 2, 3 and 4, list the name, social security number, and date of birth of all persons whose income is included in the federal AGI of the tax filing unit.

Line 2 Money from other sources used to pay rent

If you are claiming the property tax credit based upon rent paid, report the source of money or income not included in AGI that is used to pay rent. Money reported on this line is not used to calculate the amount of the credit, but to assist OTR in determining the reasonableness of the claim. Examples of money or income that is not included in AGI are: money in a bank account; money acquired by bequest, devise, inheritance or gift; veteran and disability payments not subject to federal tax; TANF; money received as damages on account of physical injuries or sickness; life insurance proceeds paid on death of the insured; social security and railroad retirement benefits that are excluded from federal AGI; Supplemental Security (SSI) payments and other sources of non-taxable income.

Line 3 Rent paid on the property in 2015

Enter the total rent you paid for the property during the year and multiply it by .20. If you sublet part of your home to another person, the rent that you received is gross income and must be

reported on your D-40, or D-30 if gross rental income is greater than \$12,000.

Note: If a claimant rents more than one home in the District in the same calendar year, rent paid by the claimant during the year is determined by dividing the rent paid pursuant to the last rental agreement in force during the year by the number of months during the year for which this rent was paid and by multiplying the result by 12. Multiply the rent entered by .20.

Line 4 Property tax credit

Using the amounts entered on Lines 1 and 2, calculate your property tax credit amount using the "Computing Your Property Tax Credit Worksheet".

Line 5 Rent supplements received in 2015 by you or your landlord on your behalf

Enter the amount of any federal or state rental housing subsidies you received, or any received on your behalf by your landlord during the year. If the rental housing subsidy is \$1,000 or more, do not claim the property tax credit. If no subsidies were received, leave the line blank.

Section B—Credit claim based on real property tax paid

Line 8 Total federal AGI of the tax filing unit

Report the federal AGI of every member of your tax filing unit including income subject to federal but not subject to DC income tax. Use pages 2, 3 and 4 to determine the federal AGI of the tax filing unit. To help you complete those pages, refer to the federal Forms 1040, 1040A or 1040EZ.

If the federal AGI of the tax filing unit is more than \$40,000, (\$60,000 for a claimant age 70 or older) do not claim the property tax credit.

Line 9 DC real property tax paid by you in 2015

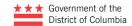
Enter the amount of DC real property tax you paid on the property in 2015 (refer to your real property tax bills). Do not include interest or penalties paid and do not include taxes paid for earlier tax periods. In determining your property tax credit, you may include any deferred portion of your real property tax as part of the real property tax paid. If a home is an integral part of a larger unit such as a multi-purpose building or a multi-dwelling building, property taxes accrued shall be that percentage of the total property taxes accrued as the value of the home bears to the total value of the property.

REMINDER: If you rent out part of your residence to another person, the rent you receive is gross income and needs to be reported on your federal and DC tax returns. If gross rental income is greater than \$12,000, you will need to file a DC Form D-30.

Line 10 Property tax credit

Using the amounts entered on Lines 8 and 9, find your property tax credit amount using the "Computing Your Property Tax Credit Worksheet".

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District of Columbia 2015 SCHEDULE U Additional Miscellaneous Credits and Contributions



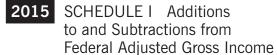
Important: Print in CAPITAL letters using black ink. Attach to D-40. **NOTE:** Contribution(s) will either decrease a refund or increase the tax owed by the amount of the contribution(s).

OFFICIAL USE ONLY Vendor ID#0000

Enter your last name	Social Security Number
Part I Credits a. Nonrefundable Credits 1 Enter state income tax credit. List additional states on a separate sheet, attach i (Enter total of all state tax credits on Line 2 below.	
State (a) \$.00 (b) \$	00
2 Total of Line 1 state tax credits and any additional tax credits from the atta	achments. 2 \$.00
3 Enter alternative fuel credits, see instructions. 3(a) Alternative fuel infrastructure - private residence. # of stations 3(b) Alternative fuel infrastructure - public use. # of stations 3(c) Alternative fuel vehicle conversion. # of yehicles	00
4 Total of Line 3 alternative fuel credits. Add Lines 3(a) - 3(c) only and enter	r here. 4 \$ 00
5 DC Government Employee first-time homebuyer credit, see instructions. Dependents cannot claim this credit.	5 \$ 00
6 RESERVED	6 \$ 00
7 Total your nonrefundable credits, enter here and on Form D-40, Line 23.	. 7 \$ 00
b. Refundable Credits	
1 DC Non-custodial parent EITC (see Schedule N).	1 \$
2 RESERVED	2 \$ 00
3 Total your refundable credits, enter here and on Form D-40, Line 29.	3 \$
Part II Contributions (The minimum contribution is \$1.00.)	
1 DC Statehood Delegation Fund.	1 \$
2 Public Fund for Drug Prevention and Children at Risk.	2 \$ 00
3 Anacostia River Cleanup and Protection Fund.	3 \$
4 RESERVED	4 \$ 00
5 If due a refund, total your contribution(s), enter here and on Form D-40, Line	e 39. 5 \$ 00
6 If you owe tax, total your contribution(s), enter here and on Form D-40, Line	42. 6 \$ 00
If you are not due a refund and do not owe additional tax, total your contribution(s) If you owe tax, make the payment plus any contribution(s), payable to the DC Tre	

Attach this schedule to your D-40 Return.







Make entries using black ink. Attach to your D-40.

Last name		ocial Security Number	official use only Vendor ID#0000						
			VEHIOU ID#OOOO						
Cal	culation A Additions to federal adjusted gross incom	e. Fill in only those that apply.		Dollar	s only, do	not e	nter ce	nts	
1	Part-year DC resident – enter the portion of adjustm 1040A; or 1040NR) that relate to the time you <u>resided</u> For Lines 2 – 7 below include only the amounts related to the	outside DC.	1 \$.00	
2	Income distributions eligible for income averaging or (from federal Form 4972).	n your federal tax return	2 \$					00	
3	30% or 50% federal bonus depreciation and/or extra on <i>federal return</i> .	IRC §179 expenses claimed	3 \$					00	
4	Any part of a discrimination award subject to incom-	e averaging.	4 \$					00	
5	Deductions for S Corporations from Schedule K-I, Fo	orm 1120 S.	5 \$.00	
6	Other pass through losses from DC unincorporated by threshold (reported as a loss on federal 1040 return		6 \$					00	
7	Other. See instructions on other side.		7 \$.00	
8	Total additions. Add entries on Lines 1–7. Enter the total	here and on D-40, Line 5.	8 \$					00	
Cal	culation B Subtractions from federal adjusted gross	income. Fill in only those that apply.							
1	Taxable interest from US Treasury bonds and other o	bligations. See instructions on other side.	1 \$					00	
2	Disability income exclusion from DC Form D-2440, Line	10. See instructions on other side.	2 \$					00	
3	Interest and dividend income of a child from Federal	Form 8814*.	3 \$					00	
4	Awards, other than front and back pay, received due employment discrimination.	to unlawful	4 \$					00	
5	Excess of DC allowable depreciation over federal allo	wable depreciation. See instructions.	5 \$					00	
6	Amount paid (or carried over) to DC College Savings person, \$8,000 for joint filers if each is an account over	· · · · · · · · · · · · · · · · · · ·	6 \$					00	
7a	Exclusion of up to \$10,000 for DC residents (certified as disabled) with adjusted annual household income	by the Social Security Adm.	7a \$		П			00	
7b	Annual household adjusted gross income.	.00							
8	Expenditures by DC teachers for necessary classroom per person. See instructions on other side.	teaching materials, \$500 annual limit	8 \$					00	
9	Expenditures by DC teachers for certain tuition and fe See instructions on other side.	es, \$1500 annual limit per person.	9 \$					00	
10	Loan repayment awards received by health-care profe See instructions on other side.	ssionals from DC government.	10 \$					00	
11	Health-care insurance premiums paid by an employe domestic partner or same sex spouse. Make no entry if the premium was deducted on your federal re-		11 \$.00	
12	DC Poverty Lawyer Loan Assistance. See instructions of	n other side.	12 \$					00	
13	Other. See instructions on other side.		13 \$				\vdash	00	
14	Military Spouse Residency Relief Act. See instructions of	on other side.	14 \$	\Box		T		00	
15	RESERV	ED	15 \$					00	
16	Total subtractions. Add entries on Lines 1–7a and 8-15. Ed	nter the total here and on D-40, Line 12.	16 \$					00	

^{*}Note: Since income reported on Federal Form 8814, Parents' Election to Report Child's Interest and Dividends, and included in the parents' federal return income is subtracted above on Line 3 of Calculation B, the child must file a separate DC return reporting this income.

SCHEDULE I Additions to and Subtractions from Federal Adjusted Gross Income

Calculation A Instructions

Additions to federal adjusted gross income

Line 6 Other is for pass through losses from DC unincorporated businesses that exceed the \$12,000 threshold (reported as a loss on federal 1040 return).

Line 7 Other is for those items not subject to federal tax but subject to DC tax. Please attach a list.

Calculation B Instructions

Subtractions from federal adjusted gross income

Line 1 Taxable interest from US Treasury bonds and other obligations. This interest is included on your federal Forms 1040 or 1040A, Line 8a or 1040EZ, Line 2. It may be all or part of that amount, or it may be 0. Also see your federal Form 1099-INT, Line 3.

Line 2 Disability income exclusion from DC Form D-2440. Enter the amount from Form D-2440, Line 10. Attach a completed D-2440. If disability payments were included in your federal gross income, you may be able to claim an exclusion for them on your DC return.

Line 5 Excess of DC allowable depreciation over federal allowable depreciation. If you claimed the federal bonus depreciation (30% or 50%) on your federal return, the DC basis for the depreciated property will be more than the federal basis. Use this line to subtract the excess depreciation from the federal AGI to show the proper DC depreciation allowable.

Line 6 DC College Savings Plan payments. Enter the amount contributed to a qualified DC "529" College Savings Plan. You may deduct up to \$4,000 annually for contributions you made to all qualified college savings accounts of which you are the owner. If you are married and file a joint or combined separate return, each spouse/domestic partner may deduct up to \$4,000 for contributions made to all accounts for which that spouse/domestic partner is the sole owner. A rollover distribution is not a contribution for purposes of this deduction. Contributions made to one or more accounts in excess of the allowable \$4,000 (\$8,000 for eligible joint filers) annual deduction may be carried forward as a deduction (subject to the annual limitation) for up to five years. If you were a part-year DC resident during the tax year, you may deduct only the amount contributed when you resided in DC.

Line 7a Exclusions for DC residents. Income not to exceed \$10,000 is excludable in computing DC gross income for persons determined by the Social Security Administration to be totally and permanently disabled and who are receiving: Supplemental Security Income or Social Security Disability; or railroad retirement disability benefits; or federal or DC government disability benefits; and whose annual household adjusted gross income is less than \$100,000.

Line 7b Household income includes income received by all household members in the year, even income excluded from federal adjusted gross income. Adjusted gross income is that of all persons residing in a household, excluding the adjusted gross income of any person who is a tenant under a written lease for fair market value. Do not add Line 7b as a subtraction under Calculation B.

Lines 8 and 9 Expenditures by DC teachers. An individual who:

- 1) has been approved by the DC public schools; and
- has been a classroom teacher in a DC public school or public charter school for this entire tax year or the entire prior tax year may deduct:
 - the amount the teacher paid during the year for basic and necessary classroom teaching materials and supplies up to \$500 per person whether filing individually or jointly.

the tuition and fees paid during the year for postgraduate education, professional development, or state licensing examination and testing for improving teaching credentials or maintaining professional certification – up to \$1,500 per person whether filing individually or jointly.

Interaction between DC deductions and similar federal deductions. To prevent a "double deduction" situation – if a DC classroom teacher claims a deduction on his/her federal return for personal expenses, the federal tax deduction claimed reduces the amount that may be claimed for those same expenses on the DC return. For example: a DC classroom teacher who claims \$1,500 or more for tuition and fees on the federal return (Form 1040, Line 34) may not take any deduction for these same expenses on the DC return.

Line 10 Loan repayment awards. "Loan repayment awards" of up to \$120,000 paid over four years by DC to healthcare professionals to reduce their medical education debt are not taxed by DC. (This program is administered by the DC Department of Health.)

Line 11 Healthcare insurance premiums. Any healthcare insurance premium paid by an employer for an employee's domestic partner registered with the Vital Records Division of the DC Department of Health (see DC Code §32-701 (3) and 702) or same sex spouse is deductible, unless on your federal return the employee's registered domestic partner or same sex spouse is considered a dependent pursuant to IRC §152 and a deduction from income was taken for the premium on the employee's federal tax return.

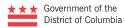
Line 12 DC Poverty Lawyer Loan Assistance. Attach a copy of your Form 1099C (Cancellation of Debt) issued by the DC Office of the Attorney General (OAG). Lawyers eligible for this award are those whose legal practice has been certified by the DC OAG as serving the public interest.

Line 13 Other is for those items not subject to DC tax but subject to federal tax. Please list.

Line 14 Military Spouse Residency Relief Act

If you have determined that you are required to file a District of Columbia tax return and you are in one of the U.S. military services, one of the following may apply:

- (1) If a servicemember's legal residence for taxes is not in DC but the servicemember and spouse reside in DC due to military orders, the military compensation and the non-military spouse's compensation should be deducted on Schedule I, Line 14. If this applies to you, a copy of the Department of Defense form providing the servicemember's legal residence for taxes and a copy of the non-military spouse's legal residence for taxes driver's license should be kept with your tax records in case it is subsequently needed.
- (2) If a servicemember's legal residence for taxes is not in DC but the servicemember resides in DC due to military orders and subsequently marries a DC resident, the servicemember's military compensation should be deducted on Schedule I, Line 14. The non-military spouse's income is not exempt in this case since the non-military spouse is a DC resident and has not moved to DC to be with a transferred servicemember. If this applies to you, a copy of the Department of Defense form providing the servicemember's legal residence for taxes should be kept with your tax records in case it is subsequently needed.
- (3) If a servicemember's legal residence for taxes is in DC and the servicemember and spouse reside in DC in compliance with the servicemember's military orders, they will file Form D-40 and will report all their income in DC, as either married filing jointly or married filing separately.







Important: Print in CAPITAL letters using black ink.
Attach to Schedule U. File Schedules N and U with your D-40.

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First name of non-custodial parent	M.I. Last name		
Address (number, street and suite/apartment number if a	pplicable)		
City	State Zip Code + 4		
0 : 10 : 1 N 1 (00N)	L'IL (AMADDYAAA)		
Social Security Number (SSN) Date of	birth (MMDDYYYY)		
Even if you are not eligible to claim the Federal Earned I	ncome Credit you may be able to claim the DC Earne	ed Income T	ax Credit.
DC Non-Custodial Parent EITC Eligibility – Please compl You may claim the DC Non-Custodial Parent EITC only if		Schedule N.	
		YES	NO
1 Is your Federal Adjusted Gross Income for 2015 less to one qualifying child is \$39,131 (\$44,651 married filing two qualifying children is \$44,454 (\$49,974 married two quali	ng jointly) filing jointly)		
three or more qualifying children is \$47,747 (\$53,26	/ married filing jointly)		
2 Were you a DC resident taxpayer during the year?			
3 Were you between the ages of 18 and 30 as of Decem	nber 31, 2015?		
4 Are you a parent of a minor child(ren) with whom you	do not reside?		
5 Are you under a court order requiring you to make chil	d support payments?		
6 Was the effective date of the child support payment or	der on or before 6/30/2015?		
7 Did you make child support payment(s) through a gove	ernment sponsored support collection unit?		
8 Did you pay all of the court ordered child support due	for 2015 by December 31, 2015?		
If you answered "Yes" to the above questions, you may cl Complete Schedule N and attach it, and Schedule U, to y			



Qualifying Child Informat	ion First Name	M.I. Last Name	
1. Child's name, #1	Hot Hallo	IIIII Edot I Vallio	
Child's name, #2			
Child's name, #3			
If you have more than thre	ee qualifying children, you only need to list th	rree to get the maximum credit.	
2. Child's SSN	#1	#2	#3
3. Child's date of birth	#1	#2	#3
4. Custodian's name	First Name	M.I. Last Name	
	Number, street and suite/apartment number	er	
5. Custodian's address			
	City	State Zip Code	+ 4
6. Custodian's SSN			
7. Location of the court that ordered support payments for	#1 r: #2	#3	
8. Case or Docket numb	per for:	9. Name of government agency	to which you make payments for:
#1		#1	
#2		#2	
#3		#3	
10. Address of the government	#1		
a mana si s fa si	#2		
#	#3		
	, 9		
11. Amount of court ordered	#1 \$ 00 per month	#3 \$	00 per month
payment	#2 \$ 00 per month		
12. Date payments were	#1 (MMDDYYYY)	#2 (MMDDYYYY)	#3 (MMDDYYYY)
ordered to start			
	#1	#2	#3
13. Total payments made	e during 2015 \$ 00	\$.00	\$ 00

Revised 04/15

2015 SCHEDULE N P2

DC Non-Custodial Parent EITC Claim

^{14.} Computation: Using the amount on Line 3 of Form D-40, find the correct Earned Income Credit (EIC) amount from the EIC table in the Federal 1040 tax return booklet. Multiply that amount by .40 to determine the DC Non-Custodial Parent EITC amount to claim on Schedule U, Part 1b, Line 1. If you are a part-year filer, see part-year resident instructions in the D-40 booklet on prorating the credit to be claimed.



D-2210 Underpayment of Estimated Income Tax By Individuals

IMPORTANT: Please read the instructions on the reverse before completing this form.

Your First name, M.I., Last name	SSN
Spouse's/domestic partner's First name, M.I., Last name	Spouse's/domestic partner's SSN
	Daytime telephone number

No underpayment interest is due and this form should not be filed if:

A. Your tax liability on taxable income after deducting your District of Columbia withholding tax and applicable credits is less than \$100, or

	applicable credits is less than \$100, or B. You made periodic estimated tax payments a is equal to or more than 110% of your last y taxes. Note: You must have been a 12-mont 110% exception.	year	's taxes or is	at least 90% o	of your current	year's					
	Computation of Underp	ayr	nent Intere	est							
1	2015 DC Tax Liability "total tax" from your DC Individual Inc	come	: Tax Return.	\$							
2	Multiply the amount on Line 1 by 90% (.90)			\$							
3	2014 DC Tax Liability "total tax" from your DC Individual Inc	ome	Tax Return x	110%. \$							
4	Minimum withholding and estimated tax payment required for (lesser of Line 2 and 3).	or tax	x year 2015	\$							
5	Multiply Line 4 amount by 25% (.25) for amount required fo	r ead	ch periodic pa	yment \$							
	Note: If your income was not evenly divided over 4 periods, see instructions on the reverse of this form on the "Annualized Income" method. Due date of Payments										
			1st Period	2nd Period	3rd Period	4th Period					
6	Enter Line 5 amount or the annualized income amount in each period (The 2^{nd} period includes the 1^{st} period amount, 3^{rd} period includes to 1^{st} and 2^{nd} period amounts, the 4^{th} period includes all period amounts).		04/15/15	06/15/15	09/15/15	01/15/16					
Che	eck here if you are using the "Annualized Income" method.										
7	DC withholding and estimated tax paid each period (The 2^{nd} period includes the 1^{st} period amount, 3^{rd} period includes the 1^{st} and 2^{nd} period amounts, the 4^{th} period includes all period amounts).										
8	Underpayment each period (Line 6 minus Line 7)										
9	Underpayment interest factors		.0175	.0265	.0351	.0259					
10	Line 8 multiplied by Line 9										
11	Underpayment interest – Total of amounts from Line 10. (See <i>instructions on reverse</i>)		Pay	this amount	\$						
	Make check or money orde	er pa	yable to: DC Tre	asurer							

Revised 7/2015 D-2210 page 1

Instructions for Underpayment of Estimated Income Tax by Individuals

Estimated Tax Interest

DC law requires every individual or couple filing jointly, to pay estimated tax if they:

- receive taxable income which is not subject to DC withholding;
 or
- · receive wages with insufficient withholding; or
- the tax on this taxable income is expected to be more than \$100. The law states that anyone required to file and pay estimated tax who fails to pay the amount required by the periodic payment due date is subject to interest on the underpayment of estimated income tax.

When is interest assessed for underpayment of estimated income tax?

Underpayment interest is assessed if your total DC estimated income tax payments (and withheld amounts) compared to your DC tax liability do not equal at least the smaller of:

- 90% of the tax due shown on your 2015 DC return; or
- 110% of the tax due shown on your 2014 DC tax return. You must have been a DC resident during all of 2014 to use the 110% exception.

Are there any exceptions to imposition of interest?

You are not subject to interest for underpayment of estimated tax if:

- You had no DC income tax liability for the tax year 2014 and in that year, you lived in DC the entire 12 months;
- The tax due for 2015 minus income tax withheld and/or estimated tax payments is less than \$100;
- Your DC estimated tax payments plus any DC income tax withheld equals at least 110% of your 2014 DC income tax liability; or
- Your remaining tax due after totaling all credits, estimated tax payments and withholding, is less than 10% of your total DC tax liability for the year.

When may you use this form?

- You may use this form to calculate your underpayment interest, when submitting your D-40 form. If you do, fill in the oval, attach it to your tax return and add the underpayment interest to the amount you calculate for Line 37 or 44 on the D-40. If you do not wish to calculate the interest, the Office of Tax and Revenue (OTR) will do it when your return is processed and will notify you of the amount due.
- You may also complete this form if you believe the underpayment interest assessed by OTR for an underpayment of estimated income tax is incorrect.

How do you file this form?

Attach this form D-2210 to your return D-40, if you complete it <u>before</u> filing your D-40 return. If you complete this form <u>after</u> filing and/or receiving a notice of an underpayment interest assessment, send it to:

Office of Tax and Revenue Attn: Customer Service Administration 1101 4th St SW, 2nd Floor Washington DC 20024

Completing this form

Line 1

Enter the amount from your D-40, Line 26.

Line 2

Multiply the amount on Line 1 by 90% (.90). Your withheld taxes and/or estimated tax payments must be equal to or greater than this amount.

Line 3

Enter 110% of the amount from your 2014 DC Form D-40, Line 27. If your 2014 return was amended or corrected, multiply 110% times the corrected amount. You must have been a DC resident during all of 2014 to use this exception.

Line 4

Enter the lesser of the amounts on Line 2 and Line 3. If you did not file a DC return for 2014, use only the Line 2 amount.

Line 5

Multiply the amount on Line 4 by 25% (.25). This gives you an even distribution of your liability, payable over four periods.

Line 6

Enter the amount required from Line 5 under each of the payment columns. For example, if Line 5 is \$2000, you would enter \$2000 for the 1st period, \$4000 for the 2nd period, \$6000 for the 3rd period and \$8000 for the 4th period.

Annualized Income method: If your income was different for each period, you may want to determine the percentage for each period (divide the period income by the full year's income). Multiply Line 4 by each period's percentage and enter the amounts as shown above. Check the "Annualized Income" method box.

Line 7

Enter the amounts withheld and estimated tax payments made for each period. Include the amounts from the previous period in with the 2nd, 3rd and 4th periods. For example, if your withheld and estimated tax payment amount is \$1000 in each period, you would enter \$1000 in the 1st Period, \$2000 in the 2nd Period, \$3000 in the 3rd Period and \$4000 in the 4th Period.

Line 8 Underpayment each period

For each column, subtract Line 7 from Line 6. If Line 7 exceeds Line 6, you have no underpayment interest. If there is an amount remaining, this is your periodic underpayment amount.

Line 9 Underpayment interest factors These are the underpayment interest factors by period.

Line 10

For each column, multiply the amount on Line 8 by the penalty factor on Line 9. This is your underpayment interest amount by period.

Line 11 Underpayment interest

Add the amounts from each period on Line 10. This is your total underpayment interest for your estimated income tax underpayment.

- If you are filing the D-2210 with your D-40 return, include the underpayment interest on Lines 37 and 44 on page 2 of the D-40 in the amount you owe and pay it with the return.
- If you are filing the D-2210 separately, pay the amount you owe. Attach payment to Form D-40P, Payment Voucher.

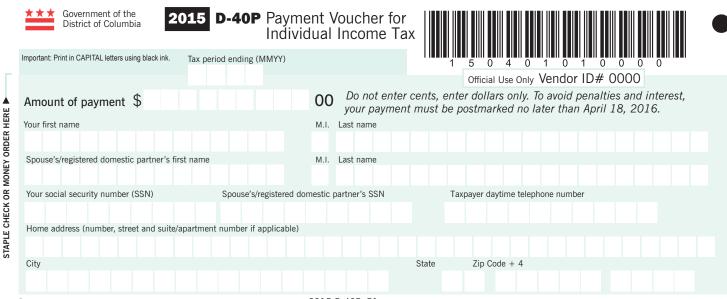
Make the check or money order payable to the **DC Treasurer** and mail the D-2210 and D-40P with payment to:

Office of Tax and Revenue PO Box 96169 Washington DC 20090-6169

D-40P PAYMENT VOUCHER See instructions on back

Detach at perforation and mail the voucher, with payment attached, to the Office of Tax and Revenue, PO Box 96169, Washington DC 20090-6169.

	Government of the District of Columbia 2015 D-40P Payme Individ	ent Voucher for Iual Income Tax
	Important: Print in CAPITAL letters using black ink. Tax period ending (MMYY)	
Γ		Official Use Only Vendor ID# 0000
A. H	Amount of payment \$	Do not enter cents, enter dollars only. To avoid penalties and interest, your payment must be postmarked no later than April 18, 2016.
STAPLE CHECK OR MONEY ORDER HERE	Your first name	M.I. Last name
RDE		
ΕYΟ	Spouse's/registered domestic partner's first name	M.I. Last name
MOM		
OR	Your social security number (SSN) Spouse's/registered dom	nestic partner's SSN Taxpayer daytime telephone number
ĒČĶ		
LE CI	Home address (number, street and suite/apartment number if applicable)	
TAPI		
0,	City	State Zip Code + 4
		2015 D-40P P1
	Revised 02/15	Payment Voucher for Individual Income Tax



Instructions for D-40P PAYMENT VOUCHER - Please print clearly.

Use the D-40P Payment Voucher to make any payment due on your **D-40/D-40EZ** return.

- Do not use this voucher to make estimated tax payments.
- Enter your name, social security number (SSN) and address. If you are filing a joint return or filing separately on the same return, enter the name and SSN shown first on your return, then enter the name and SSN shown second on your return.
- Enter the amount of your payment.
- Make check or money order (US dollars) payable to the DC Treasurer.
- Make sure your name and address appear on your payment (check or money order).
- Enter your SSN, the tax period and the form filed D-40 or D-40EZ on your payment.
- To avoid penalties and interest, pay in full by April 18, 2016.
- Staple your payment to the D-40P voucher. Do not attach your payment to your D-40 or D-40EZ return.
- Mail the D-40P **with**, but not attached to, your D-40 or D-40EZ tax return in the envelope provided in this tax booklet. If you do not have the return envelope, make sure to address your envelope to: Office of Tax and Revenue, PO Box 96169, Washington DC 20090-6169.

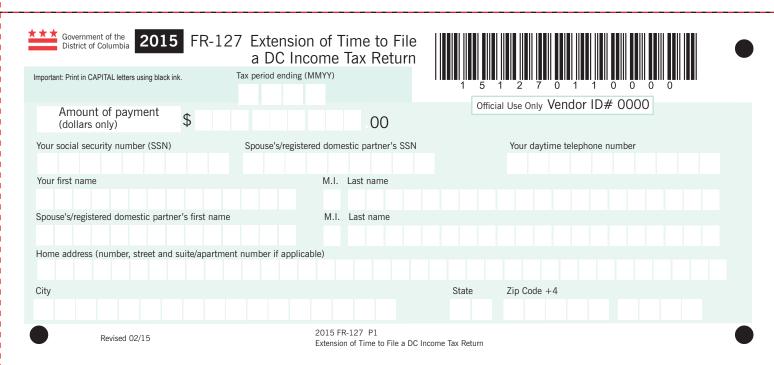
FR-127 Extension of Time to File a DC Income Tax Return Worksheet

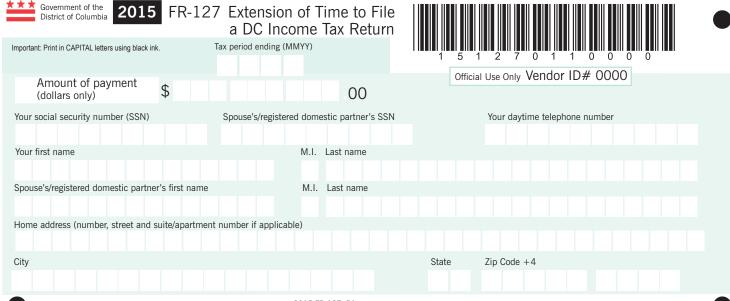
	Wolkshoot					
E	tension of time to file until October 18, 2016. Leave lines blank that do not apply.	Round cents to the nearest dollar. If the amount is zero, <u>leave</u> the line blank.				
1	Total estimated income tax liability for 2015.	1 \$	00			
2	DC Income tax withheld.	2 \$	00			
3	2015 estimated tax payments.	3 \$	00			
4	Total payments Add Lines 2 and 3.	4 \$	00			
5	Amount due with this request. If Line 1 is more than Line 4, subtract Line 4 from Line 1. Pay this amount and send it with the voucher below. See instructions on back.	5 \$.00			

Payment and mailing Instructions. Make check or money order (do not send cash) payable to: DC Treasurer. Write your SSN and "2015 FR-127" on your payment. Detach and mail the voucher portion of this form with full payment of any tax due by April 18, 2016, to the Office of Tax and Revenue, PO Box 96018, Washington, DC 20090-6018.

NOTE: You may also file and pay electronically. Visit www.taxpayerservicecenter.com.

Detach at perforation and mail the voucher, with payment attached, to the Office of Tax and Revenue, PO Box 96018, Washington, DC 20090-6018.





Instructions for Form FR-127

Why file Form FR-127?

Use this form if you cannot file your DC individual income tax return by the April 18, 2016 deadline. By filing this form, you can receive an extension of time to file until October 18, 2016.

You must use Form FR-127 to request an extension of time to file a DC individual income tax return.

A filing extension is <u>not an extension</u> of the due date <u>for paying</u> any tax you may owe. Before filing for an extension, estimate the taxes you will owe and pay any part of that amount, not covered by DC withheld tax amounts and/or estimated tax payments. Include your payment with the FR-127 voucher and file it by April 18, 2016.

If filing jointly, or filing separately on same the return, enter the social security number (SSN) and name shown first on your D-40/D-40EZ return, then enter the SSN and name shown second on your return.

Additional extension.

In addition to the 6-month extension, you may receive another 6-month extension if you are living or traveling outside the U.S. You must file for the first 6-month extension by the April 18, 2016 deadline before applying for the additional extension of time to file.

When to file.

You must submit your request for an extension along with full payment of any tax due by April 18, 2016.

How to avoid penalties and interest.

You will be charged $\underline{\text{interest}}$ of 10% per year, compounded daily, for any tax not paid on time. Interest is calculated from the due date of the return to the date the tax is paid.

You will be charged a 5% per-month <u>penalty</u> for failure to file a return or pay any tax due on time. The penalty is calculated on the unpaid tax for each month or part of a month that the return is not filed or the tax is not paid. The maximum penalty is an additional amount due, equal to 25% of the tax due.

Tax tables for income of \$100,000 or less

	Taxable income \$0 - 2,499	Am	nount of tax	Taxable income \$2,500 - 4,999	А	mount of tax	Taxable income \$5,000 - 7,499	An	nount of tax	Taxable income \$7,500 - 9,999	A	Amount of tax
ı	\$0 -	49	\$0	\$2,500 -	2,549	\$101	\$5,000 -	5,049	\$201	\$7,500 -	7,549	\$301
	50 -	99	3	2.550 -	2,599	103	5,050 -	5,099	203	7,550 -	7,599	303
	100 -	149	5	2,600 -	2,649	105	5,100 -	5,149	205	7,600 -	7,649	305
	150 -	199	7	2,650 -	2,699	107	5,150 -	5,199	207	7,650 -	7,699	307
	200 -	249	9	2,700 -	2,749	109	5,200 -	5,249	209	7,700 -	7,749	309
	250 -	299	11	2,750 -	2,799	111	5,250 -	5,299	211	7,750 -	7,799	311
	300 -	349	13	2,800 -	2,849	113	5,300 -	5,349	213	7,800 -	7,849	313
	350 -	399	15	2,850 -	2,899	115	5,350 -	5,399	215	7,850 -	7,899	315
	400 -	449	17	2,900 -	2,949	117	5,400 -	5,449	217	7,900 -	7,949	317
	450 -	499	19	2,950 -	2,999	119	5,450 -	5,499	219	7,950 -	7,999	319
	500 -	549	21	\$3,000 -	3,049	\$121	5,500 -	5,549	221	\$8,000 -	8,049	\$321
	550 -	599	23	3,050 -	3,099	123	5,550 -	5,599	223	8,050 -	8,099	323
	600 -	649	25	3,100 -	3,149	125	5,600 -	5,649	225	8,100 -	8,149	325
	650 -	699	27	3,150 -	3,199	127	5,650 -	5,699	227	8,150 -	8,199	327
	700 -	749	29	3,200 -	3,249	129	5,700 -	5,749	229	8,200 -	8,249	329
	750 -	799	31	3,250 -	3,299	131	5,750 -	5,799	231	8,250 -	8,299	331
	800 -	849	33	3,300 -	3,349	133	5,800 -	5,849	233	8,300 -	8,349	333
	850 -	899	35	3,350 -	3,399	135	5,850 -	5,899	235	8,350 -	8,399	335
	900 -	949	37	3,400 -	3,449	137	5,900 -	5,949	237	8,400 -	8,449	337
	950 -	999	39	3,450 -	3,499	139	5,950 -	5,999	239	8,450 -	8,499	339
i	\$1,000 -	1,049	\$41	3,500 -	3,549	141	\$6,000 -	6,049	\$241	8,500 -	8,549	341
	1,050 -	1,099	43	3,550 -	3,599	143	6,050 -	6,099	243	8,550 -	8,599	343
	1,100 -	1,149	45	3,600 -	3,649	145	6,100 -	6,149	245	8,600 -	8,649	345
	1,150 -	1,199	47	3,650 -	3,699	147	6,150 -	6,199	247	8,650 -	8,699	347
	1,200 -	1,249	49	3,700 -	3,749	149	6,200 -	6,249	249	8,700 -	8,749	349
	1,250 -	1,299	51	3,750 -	3,799	151	6,250 -	6,299	251	8,750 -	8,799	351
	1,300 -	1,349	53	3,800 -	3,849	153	6,300 -	6,349	253	8,800 -	8,849	353
	1,350 -	1,399	55	3,850 -	3,899	155	6,350 -	6,399	255	8,850 -	8,899	355
	1,400 -	1,449	57	3,900 -	3,949	157	6,400 -	6,449	257	8,900 -	8,949	357
	1,450 -	1,499	59	3,950 -	3,999	159	6,450 -	6,499	259	8,950 -	8,999	359
	1,500 -	1,549	61	\$4,000 -	4,049	\$161	6,500 -	6,549	261	\$9,000 -	9,049	\$361
	1,550 -	1,599	63	4,050 -	4,099	163	6,550 -	6,599	263	9,050 -	9,099	363
	1,600 -	1,649	65	4,100 -	4,149	165	6,600 -	6,649	265	9,100 -	9,149	365
	1,650 -	1,699	67	4,150 -	4,199	167	6,650 -	6,699	267	9,150 -	9,199	367
	1,700 -	1,749	69	4,200 -	4,249	169	6,700 -	6,749	269	9,200 -	9,249	369
	1,750 -	1,799	71	4,250 -	4,299	171	6,750 -	6,799	271	9,250 -	9,299	371
	1,800 -	1,849	73	4,300 -	4,349	173	6,800 -	6,849	273	9,300 -	9,349	373
	1,850 -	1,899	75	4,350 -	4,399	175	6,850 -	6,899	275	9,350 -	9,399	375
	1,900 -	1,949	77	4,400 -	4,449	177	6,900 -	6,949	277	9,400 -	9,449	377
	1,950 -	1,999	79	4,450 -	4,499	179	6,950 -	6,999	279	9,450 -	9,499	379
i	\$2,000 -	2,049	\$81	4,500 -	4,549	181	\$7,000 -	7,049	\$281	9,500 -	9,549	381
	2,050 -	2,099	83	4,550 -	4,599	183	7,050 -	7,099	283	9,550 -	9,599	383
	2,100 -	2,149	85	4,600 -	4,649	185	7,100 -	7,149	285	9,600 -	9,649	385
	2,150 -	2,199	87	4,650 -	4,699	187	7,150 -	7,199	287	9,650 -	9,699	387
	2,200 -	2,249	89	4,700 -	4,749	189	7,200 -	7,249	289	9,700 -	9,749	389
	2,250 -	2,299	91	4,750 -	4,799	191	7,250 -	7,299	291	9,750 -	9,799	391
	2,300 -	2,349	93	4,800 -	4,849	193	7,300 -	7,349	293	9,800 -	9,849	393
	2,350 -	2,399	95	4,850 -	4,899	195	7,350 -	7,399	295	9,850 -	9,899	395
	2,400 -	2,449	97	4,900 -	4,949	197	7,400 -	7,449	297	9,900 -	9,949	397
	2,450 -	2,499	99	4,950 -	4,999	199	7,450 -	7,499	299	9,950 -	9,999	399

Tax tables for income of \$100,000 or less continued

\$10,000			mount of tax	Taxable income \$12,500 - 14,9		Amount of tax	Taxable income \$15,000 - 17,49		mount of tax	Taxable income \$17,500 - 19,9		mount of tax
\$10,000		10,049	\$402	\$12,500 - 14,9	12,549	\$552	\$15,000 - 17,48 \$15,000 -	15,049	\$702	\$17,500 - 19,5 \$17,500 -	17,549	\$852
10,0		10,049	405	12,550 -	12,549	φ552 555	15,050 -	15,049	705	17,550 -	17,549	φο <u>υ</u> 2
*	00 - 50 -	10,149	408	12,600 -	12,649	558	15,100 -	15,149	708	17,600 -	17,649	858
- ,		10,199	411	12,650 -	12,699	561	15,150 -	15,199	711	17,650 -	17,699	861
	200 -	10,249	414	12,700 -	12,749	564	15,200 -	15,249	714	17,700 -	17,749	864
	250 -	10,299	417	12,750 -	12,799	567	15,250 -	15,299	717	17,750 -	17,799	867
,	00 -	10,349	420	12,800 -	12,849	570	15,300 -	15,349	720	17,800 -	17,849	870
*	50 -	10,399	423	12,850 -	12,899	573	15,350 -	15,399	723	17,850 -	17,899	873
	- 00	10,449	426	12,900 -	12,949	576	15,400 -	15,449	726	17,900 -	17,949	876
10,4		10,499	429	12,950 -	12,999	579	15,450 -	15,499	729	17,950 -	17,999	879
	00 -	10,549	432	\$13,000 -	13,049	\$582	15,500 -	15,549	732	\$18,000 -	18,049	\$882
	50 -	10,599	435	13,050 -	13,099	585	15,550 -	15,599	735	18,050 -	18,099	885
10,6		10,649	438	13,100 -	13,149	588	15,600 -	15,649	738	18,100 -	18,149	888
	50 -	10,699	441	13,150 -	13,199	591	15,650 -	15,699	741	18,150 -	18,199	891
*	00 -	10,749	444	13,200 -	13,249	594	15,700 -	15,749	744	18,200 -	18,249	894
10,7		10,799	447	13,250 -	13,299	597	15,750 -	15,799	747	18,250 -	18,299	897
	00 -	10,849	450	13,300 -	13,349	600	15,800 -	15,849	750	18,300 -	18,349	900
	50 -	10,899	453	13,350 -	13,399	603	15,850 -	15,899	753	18,350 -	18,399	903
	00 -	10,949	456	13,400 -	13,449	606	15,900 -	15,949	756	18,400 -	18,449	906
	50 -	10,999	459	13,450 -	13,499	609	15,950 -	15,999	759	18,450 -	18,499	909
\$11,0		11,049	\$462	13,500 -	13,549	612	\$16,000 -	16,049	\$762	18,500 -	18,549	912
11,0		11,099	465	13,550 -	13,599	615	16,050 -	16,099	765	18,550 -	18,599	915
11,1		11,149	468	13,600 -	13,649	618	16,100 -	16,149	768	18,600 -	18,649	918
11,1		11,199	471	13,650 -	13,699	621	16,150 -	16,199	771	18,650 -	18,699	921
	.00 -	11,249	474	13,700 -	13,749	624	16,200 -	16,249	774	18,700 -	18,749	924
11,2		11,299	477	13,750 -	13,799	627	16,250 -	16,299	777	18,750 -	18,799	927
11,3		11,349	480	13,800 -	13,849	630	16,300 -	16,349	780	18,800 -	18,849	930
	50 -	11,399	483	13,850 -	13,899	633	16,350 -	16,399	783	18,850 -	18,899	933
	- 00	11,449	486	13,900 -	13,949	636	16,400 -	16,449	786	18,900 -	18,949	936
	50 -	11,499	489	13,950 -	13,999	639	16,450 -	16,499	789	18,950 -	18,999	939
	00 -	11,549	492	\$14,000 -	14,049	\$642	16,500 -	16,549	792	\$19,000 -	19,049	\$942
11,5		11,599	495	14,050 -	14,099	645	16,550 -	16,599	795	19,050 -	19,099	945
	00 -	11,649	498	14,100 -	14,149	648	16,600 -	16,649	798	19,100 -	19,149	948
11,6		11,699	501	14,150 -	14,199	651	16,650 -	16,699	801	19,150 -	19,199	951
,	00 -	11,749	504	14,200 -	14,249	654	16,700 -	16,749	804	19,200 -	19,249	954
	50 -	11,799	507	14,250 -	14,299	657	16,750 -	16,799	807	19,250 -	19,299	957
	00 -	11,849	510	14,300 -	14,349	660	16,800 -	16,849	810	19,300 -	19,349	960
11,8		11,899	513	14,350 -	14,399	663	16,850 -	16,899	813	19,350 -	19,399	963
11,9		11,949	516	14,400 -	14,449	666	16,900 -	16,949	816	19,400 -	19,449	966
11,9		11,999	519	14,450 -	14,499	669	16,950 -	16,999	819	19,450 -	19,499	969
\$12,0		12,049	\$522	14,500 -	14,549	672	\$17,000 -	17,049	\$822	19,500 -	19,549	972
	50 -	12,099	525	14,550 -	14,599	675	17,050 -	17,099	825	19,550 -	19,599	975
	00 -	12,149	528	14,600 -	14,649	678	17,100 -	17,149	828	19,600 -	19,649	978
	50 -	12,199	531	14,650 -	14,699	681	17,150 -	17,199	831	19,650 -	19,699	981
	.00 -	12,249	534	14,700 -	14,749	684	17,200 -	17,249	834	19,700 -	19,749	984
	250 -	12,299	537	14,750 -	14,799	687	17,250 -	17,299	837	19,750 -	19,799	987
	00 -	12,349	540	14,800 -	14,849	690	17,300 -	17,349	840	19,800 -	19,849	990
*	50 -	12,399	543	14,850 -	14,899	693	17,350 -	17,399	843	19,850 -	19,899	993
	- 00	12,449	546	14,900 -	14,949	696	17,400 -	17,449	846	19,900 -	19,949	996
12,4	50 -	12,499	549	14,950 -	14,999	699	17,450 -	17,499	849	19,950 -	19,999	999

axable income		mount of tax	Taxable income		Amount of tax	Taxable income		Amount of tax	Taxable income		Amount of tax
\$ 20,000 - 22,499			\$22,500 - 24,9			\$25,000 - 27,49			\$27,500 - 29,9		
\$20,000 -	20,049	\$1,002	\$22,500 -	22,549	\$1,152	\$25,000 -	25,049	\$1,302	\$27,500 -	27,549	\$1,452
20,050 -	20,099	1,005	22,550 -	22,599	1,155	25,050 -	25,099	1,305	27,550 -	27,599	1,455
20,100 -	20,149	1,008	22,600 -	22,649	1,158	25,100 -	25,149	1,308	27,600 -	27,649	1,458
20,150 -	20,199	1,011	22,650 -	22,699	1,161	25,150 -	25,199	1,311	27,650 -	27,699	1,461
20,200 -	20,249	1,014	22,700 -	22,749	1,164	25,200 -	25,249	1,314	27,700 -	27,749	1,464
20,250 -	20,299	1,017	22,750 -	22,799	1,167	25,250 -	25,299	1,317	27,750 -	27,799	1,467
20,300 -	20,349	1,020	22,800 -	22,849	1,170	25,300 -	25,349	1,320	27,800 -	27,849	1,470
20,350 -	20,399	1,023	22,850 -	22,899	1,173	25,350 -	25,399	1,323	27,850 -	27,899	1,473
20,400 -	20,449	1,026	22,900 -	22,949	1,176	25,400 -	25,449	1,326	27,900 -	27,949	1,476
20,450 -	20,499	1,029	22,950 -	22,999	1,179	25,450 -	25,499	1,329	27,950 -	27,999	1,479
20,500 -	20,549	1,032	\$23,000 -	23,049	\$1,182	25,500 -	25,549	1,332	\$28,000 -	28,049	\$1,482
20,550 -	20,599	1,035	23,050 -	23,099	1,185	25,550 -	25,599	1,335	28,050 -	28,099	1,485
20,600 -	20,649	1,038	23,100 -	23,149	1,188	25,600 -	25,649	1,338	28,100 -	28,149	1,488
20,650 -	20,699	1,041	23,150 -	23,199	1,191	25,650 -	25,699	1,341	28,150 -	28,199	1,491
20,700 -	20,749	1,044	23,200 -	23,249	1,194	25,700 -	25,749	1,344	28,200 -	28,249	1,494
20,750 -	20,799	1,047	23,250 -	23,299	1,197	25,750 -	25,799	1,347	28,250 -	28,299	1,497
20,800 -	20,849	1,050	23,300 -	23,349	1,200	25,800 -	25,849	1,350	28,300 -	28,349	1,500
20,850 -	20,899	1,053	23,350 -	23,399	1,203	25,850 -	25,899	1,353	28,350 -	28,399	1,503
20,900 -	20,949	1,056	23,400 -	23,449	1,206	25,900 -	25,949	1,356	28,400 -	28,449	1,506
20,950 -	20,999	1,059	23,450 -	23,499	1,209	25,950 -	25,999	1,359	28,450 -	28,499	1,509
\$21,000 -	21,049	\$1,062	23,500 -	23,549	1,212	\$26,000 -	26,049	\$1,362	28,500 -	28,549	1,512
21,050 -	21,099	1,065	23,550 -	23,599	1,215	26,050 -	26,099	1,365	28,550 -	28,599	1,515
21,100 -	21,149	1,068	23,600 -	23,649	1,218	26,100 -	26,149	1,368	28,600 -	28,649	1,518
21,150 -	21,199	1,071	23,650 -	23,699	1,221	26,150 -	26,199	1,371	28,650 -	28,699	1,521
21,200 -	21,249	1,074	23,700 -	23,749	1,224	26,200 -	26,249	1,374	28,700 -	28,749	1,524
21,250 -	21,299	1,077	23,750 -	23,799	1,227	26,250 -	26,299	1,377	28,750 -	28,799	1,527
21,300 -	21,349	1,080	23,800 -	23,849	1,230	26,300 -	26,349	1,380	28,800 -	28,849	1,530
21,350 -	21,399	1,083	23,850 -	23,899	1,233	26,350 -	26,399	1,383	28,850 -	28,899	1,533
21,400 -	21,449	1,086	23,900 -	23,949	1,236	26,400 -	26,449	1,386	28,900 -	28,949	1,536
21,450 -	21,499	1,089	23,950 -	23,999	1,239	26,450 -	26,499	1,389	28,950 -	28,999	1,539
21,500 -	21,549	1,092	\$24,000 -	24,049	\$1,242	26,500 -	26,549	1,392	\$29,000 -	29,049	\$1,542
21,550 -	21,599	1,095	24,050 -	24,099	1,245	26,550 -	26,599	1,395	29,050 -	29,099	1,545
21,600 -	21,649	1,098	24,100 -	24,149	1,248	26,600 -	26,649	1,398	29,100 -	29,149	1,548
21,650 -	21,699	1,101	24,150 -	24,199	1,251	26,650 -	26,699	1,401	29,150 -	29,199	1,551
21,700 -	21,749	1,104	24,200 -	24,249	1,254	26,700 -	26,749	1,404	29,200 -	29,249	1,554
21,750 -	21,799	1,107	24,250 -	24,299	1,257	26,750 -	26,799	1,407	29,250 -	29,299	1,557
21,800 -	21,849	1,110	24,300 -	24,349	1,260	26,800 -	26,849	1,410	29,300 -	29,349	1,560
21,850 -	21,899	1,113	24,350 -	24,399	1,263	26,850 -	26,899	1,413	29,350 -	29,399	1,563
21,900 -	21,949	1,116	24,400 -	24,449	1,266	26,900 -	26,949	1,416	29,400 -	29,449	1,566
21,950 -	21,999	1,119		24,499	1,269	26,950 -	26,999	1,419	29,450 -	29,499	1,569
\$22,000 -	22,049	\$1,122		24,549	1,272	\$27,000 -	27,049	\$1,422		29,549	1,572
22,050 -	22,099	1,125		24,599	1,275		27,099	1,425		29,599	1,575
22,100 -	22,149	1,128		24,649	1,278	27,100 -	27,149	1,428	29,600 -	29,649	1,578
22,150 -	22,199	1,131		24,699	1,281	27,150 -	27,199	1,431	29,650 -	29,699	1,581
22,200 -	22,249	1,134		24,749	1,284		27,249	1,434	29,700 -	29,749	1,584
22,250 -	22,299	1,137		24,799	1,287		27,299	1,437	29,750 -	29,799	1,587
22,300 -	22,349	1,140	24,800 -	24,849	1,290	27,300 -	27,349	1,440	29,800 -	29,849	1,590
22,350 -	22,399	1,143		24,899	1,293		27,399	1,443		29,899	1,593
22,400 -	22,449	1,146		24,949	1,296		27,449	1,446		29,949	1,596
22,450 -	22,499	1,149	24,950 -	24,999	1,299	27,450 -	27,499	1,449	29,950 -	29,999	1,599

Tax tables for income of \$100,000 or less continued

Taxable income \$30,000 - 32,49		mount of tax	Taxable income \$32,500 - 34,99		Amount of tax	Taxable income \$35,000 - 37,49		mount of tax	Taxable income \$37,500 - 39,9		Amount of tax
\$30,000 -	30,049	\$1,602	\$32,500 -	32,549	\$1,752	\$35,000 -	35,049	\$1,902	\$37,500 -	37,549	\$2,052
30,050 -	30,099	1,605	32,550 -	32,599	1,755	35,050 -	35,099	1,905	37,550 -	37,599	2,055
30,100 -	30,149	1,608	32,600 -	32,649	1,758	35,100 -	35,149	1,908	37,600 -	37,649	2,058
30,150 -	30,199	1,611	32,650 -	32,699	1,761	35,150 -	35,199	1,911	37,650 -	37,699	2,061
30,200 -	30,249	1,614	32,700 -	32,749	1,764	35,200 -	35,249	1,914	37,700 -	37,749	2,064
30,250 -	30,299	1,617	32,750 -	32,799	1,767	35,250 -	35,299	1,917	37,750 -	37,799	2,067
30,300 -	30,349	1,620	32,800 -	32,849	1,770	35,300 -	35,349	1,920	37,800 -	37,849	2,070
30,350 -	30,399	1,623	32,850 -	32,899	1,773	35,350 -	35,399	1,923	37,850 -	37,899	2,073
30,400 -	30,449	1,626	32,900 -	32,949	1,776	35,400 -	35,449	1,926	37,900 -	37,949	2,076
30,450 -	30,499	1,629	32,950 -	32,999	1,779	35,450 -	35,499	1,929	37,950 -	37,999	2,079
30,500 -	30,549	1,632	\$33,000 -	33,049	\$1,782	35,500 -	35,549	1,932	\$38,000 -	38,049	\$2,082
30,550 -	30,599	1,635	33,050 -	33,099	1,785	35,550 -	35,599	1,935	38,050 -	38,099	2,085
30,600 -	30,649	1,638	33,100 -	33,149	1,788	35,600 -	35,649	1,938	38,100 -	38,149	2,088
30,650 -	30,699	1,641	33,150 -	33,199	1,791	35,650 -	35,699	1,941	38,150 -	38,199	2,091
30,700 -	30,749	1,644	33,200 -	33,249	1,794	35,700 -	35,749	1,944	38,200 -	38,249	2,094
30,750 -	30,799	1,647	33,250 -	33,299	1,797	35,750 -	35,799	1,947	38,250 -	38,299	2,097
30,800 -	30,849	1,650	33,300 -	33,349	1,800	35,800 -	35,849	1,950	38,300 -	38,349	2,100
30,850 -	30,899	1,653	33,350 -	33,399	1,803	35,850 -	35,899	1,953	38,350 -	38,399	2,103
30,900 -	30,949	1,656	33,400 -	33,449	1,806	35,900 -	35,949	1,956	38,400 -	38,449	2,106
30,950 -	30,999	1,659	33,450 -	33,499	1,809	35,950 -	35,999	1,959	38,450 -	38,499	2,109
\$31,000 -	31,049	\$1,662	33,500 -	33,549	1,812	\$36,000 -	36,049	\$1,962	38,500 -	38,549	2,112
31,050 -	31,099	1,665	33,550 -	33,599	1,815	36,050 -	36,099	1,965	38,550 -	38,599	2,115
31,100 -	31,149	1,668	33,600 -	33,649	1,818	36,100 -	36,149	1,968	38,600 -	38,649	2,118
31,150 -	31,199	1,671	33,650 -	33,699	1,821	36,150 -	36,199	1,971	38,650 -	38,699	2,121
31,200 -	31,249	1,674	33,700 -	33,749	1,824	36,200 -	36,249	1,974	38,700 -	38,749	2,124
31,250 -	31,299	1,677	33,750 -	33,799	1,827	36,250 -	36,299	1,977	38,750 -	38,799	2,127
31,300 -	31,349	1,680	33,800 -	33,849	1,830	36,300 -	36,349	1,980	38,800 -	38,849	2,130
31,350 -	31,399	1,683	33,850 -	33,899	1,833	36,350 -	36,399	1,983	38,850 -	38,899	2,133
31,400 -	31,449	1,686	33,900 -	33,949	1,836	36,400 -	36,449	1,986	38,900 -	38,949	2,136
31,450 -	31,499	1,689	33,950 -	33,999	1,839	36,450 -	36,499	1,989	38,950 -	38,999	2,139
31,500 -	31,549	1,692	\$34,000 -	34,049	\$1,842	36,500 -	36,549	1,992	\$39,000 -	39,049	\$2,142
31,550 -	31,599	1,695	34,050 -	34,099	1,845	36,550 -	36,599	1,995	39,050 -	39,099	2,145
31,600 -	31,649	1,698	34,100 -	34,149	1,848	36,600 -	36,649	1,998	39,100 -	39,149	2,148
31,650 -	31,699	1,701	34,150 -	34,199	1,851	36,650 -	36,699	2,001	39,150 -	39,199	2,151
31,700 -	31,749	1,704	34,200 -	34,249	1,854	36,700 -	36,749	2,004	39,200 -	39,249	2,154
31,750 -	31,799	1,707	34,250 -	34,299	1,857	36,750 -	36,799	2,007	39,250 -	39,299	2,157
31,800 -	31,849	1,710	34,300 -	34,349	1,860	36,800 -	36,849	2,010	39,300 -	39,349	2,160
31,850 -	31,899	1,713	34,350 -	34,399	1,863	36,850 -	36,899	2,013	39,350 -	39,399	2,163
31,900 -	31,949	1,716	34,400 -	34,449	1,866	36,900 -	36,949	2,016	39,400 -	39,449	2,166
31,950 -	31,999	1,719	34,450 -	34,499	1,869	36,950 -	36,999	2,019	39,450 -	39,499	2,169
\$32,000 -	32,049	\$1,722	34,500 -	34,549	1,872	\$37,000 -	37,049	\$2,022	39,500 -	39,549	2,172
32,050 -	32,099	1,725	34,550 -	34,599	1,875	37,050 -	37,099	2,025	39,550 -	39,599	2,175
32,100 -	32,149	1,728	34,600 -	34,649	1,878	37,100 -	37,149	2,028	39,600 -	39,649	2,178
32,150 -	32,199	1,731	34,650 -	34,699	1,881	37,150 -	37,199	2,031	39,650 -	39,699	2,181
32,200 -	32,249	1,734	34,700 -	34,749	1,884	37,200 -	37,249	2,034	39,700 -	39,749	2,184
32,250 -	32,299	1,737		34,799	1,887	37,250 -	37,299	2,037	39,750 -	39,799	2,187
32,300 -	32,349	1,740	34,800 -	34,849	1,890	37,300 -	37,349	2,040	39,800 -	39,849	2,190
32,350 -	32,399	1,743	34,850 -	34,899	1,893	37,350 -	37,399	2,043	39,850 -	39,899	2,193
32,400 -	32,449	1,746	34,900 -	34,949	1,896	37,400 -	37,449	2,046	39,900 -	39,949	2,196
32,450 -	32,499	1,749	34,950 -	34,999	1,899	37,450 -	37,499	2,049	39,950 -	39,999	2,199

Taxable income		mount of tax			Amount of tax	Taxable income		mount of tax			Amount of tax
\$40,000 - 42,499			\$42,500 - 44,9			\$45,000 - 47,49			\$47,500 - 49,99		
\$40,000 -	40,049	\$2,202	\$42,500 -	42,549	\$2,377	\$45,000 -	45,049	\$2,552	\$47,500 -	47,549	\$2,727
40,050 -	40,099	2,205	42,550 -	42,599	2,380	45,050 -	45,099	2,555	47,550 -	47,599	2,730
40,100 -	40,149	2,209	42,600 -	42,649	2,384	45,100 -	45,149	2,559	47,600 -	47,649	2,734
40,150 -	40,199	2,212	42,650 -	42,699	2,387	45,150 -	45,199	2,562	47,650 -	47,699	2,737
40,200 -	40,249	2,216	42,700 -	42,749	2,391	45,200 -	45,249	2,566	47,700 -	47,749	2,741
40,250 -	40,299	2,219	42,750 -	42,799	2,394	45,250 -	45,299	2,569	47,750 -	47,799	2,744
40,300 -	40,349	2,223	42,800 -	42,849	2,398	45,300 -	45,349	2,573	47,800 -	47,849	2,748
40,350 -	40,399	2,226	42,850 -	42,899	2,401	45,350 -	45,399	2,576	47,850 -	47,899	2,751
40,400 -	40,449	2,230	42,900 -	42,949	2,405	45,400 -	45,449	2,580	47,900 -	47,949	2,755
40,450 -	40,499	2,233	42,950 -	42,999	2,408	45,450 -	45,499	2,583	47,950 -	47,999	2,758
40,500 -	40,549	2,237	\$43,000 -	43,049	\$2,412	45,500 -	45,549	2,587	\$48,000 -	48,049	\$2,762
40,550 -	40,599	2,240	43,050 -	43,099	2,415	45,550 -	45,599	2,590	48,050 -	48,099	2,765
40,600 -	40,649	2,244	43,100 -	43,149	2,419	45,600 -	45,649	2,594	48,100 -	48,149	2,769
40,650 -	40,699	2,247	43,150 -	43,199	2,422	45,650 -	45,699	2,597	48,150 -	48,199	2,772
40,700 -	40,749	2,251	43,200 -	43,249	2,426	45,700 -	45,749	2,601	48,200 -	48,249	2,776
40,750 -	40,799	2,254	43,250 -	43,299	2,429	45,750 -	45,799	2,604	48,250 -	48,299	2,779
40,800 -	40,849	2,258	43,300 -	43,349	2,433	45,800 -	45,849	2,608	48,300 -	48,349	2,783
40,850 -	40,899	2,261	43,350 -	43,399	2,436	45,850 -	45,899	2,611	48,350 -	48,399	2,786
40,900 -	40,949	2,265	43,400 -	43,449	2,440	45,900 -	45,949	2,615	48,400 -	48,449	2,790
40,950 -	40,999	2,268	43,450 -	43,499	2,443	45,950 -	45,999	2,618	48,450 -	48,499	2,793
\$41,000 -	41,049	\$2,272	43,500 -	43,549	2,447	\$46,000 -	46,049	\$2,622	48,500 -	48,549	2,797
41,050 -	41,099	2,275	43,550 -	43,599	2,450	46,050 -	46,099	2,625	48,550 -	48,599	2,800
41,100 -	41,149	2,279	43,600 -	43,649	2,454	46,100 -	46,149	2,629	48,600 -	48,649	2,804
41,150 -	41,199	2,282	43,650 -	43,699	2,457	46,150 -	46,199	2,632	48,650 -	48,699	2,807
41,200 -	41,249	2,286	43,700 -	43,749	2,461	46,200 -	46,249	2,636	48,700 -	48,749	2,811
41,250 -	41,299	2,289	43,750 -	43,799	2,464	46,250 -	46,299	2,639	48,750 -	48,799	2,814
41,300 -	41,349	2,293	43,800 -	43,849	2,468	46,300 -	46,349	2,643	48,800 -	48,849	2,818
41,350 -	41,399	2,296	43,850 -	43,899	2,471	46,350 -	46,399	2,646	48,850 -	48,899	2,821
41,400 -	41,449	2,300	43,900 -	43,949	2,475	46,400 -	46,449	2,650	48,900 -	48,949	2,825
41,450 -	41,499	2,303	43,950 -	43,999	2,478	46,450 -	46,499	2,653	48,950 -	48,999	2,828
41,500 -	41,549	2,307	\$44,000 -	44,049	\$2,482	46,500 -	46,549	2,657	\$49,000 -	49,049	\$2,832
41,550 -	41,599	2,310	44,050 -	44,099	2,485	46,550 -	46,599	2,660	49,050 -	49,099	2,835
41,600 -	41,649	2,314	44,100 -	44,149	2,489	46,600 -	46,649	2,664	49,100 -	49,149	2,839
41,650 -	41,699	2,317	44,150 -	44,199	2,492	46,650 -	46,699	2,667	49,150 -	49,199	2,842
41,700 -	41,749	2,321	44,200 -	44,249	2,496	46,700 -	46,749	2,671	49,200 -	49,249	2,846
41,750 -	41,799	2,324	44,250 -	44,299	2,499	46,750 -	46,799	2,674	49,250 -	49,299	2,849
41,800 -	41,849	2,328	44,300 -	44,349	2,503	46,800 -	46,849	2,678	49,300 -	49,349	2,853
41,850 -	41,899	2,331	44,350 -	44,399	2,506	46,850 -	46,899	2,681	49,350 -	49,399	2,856
41,900 -	41,949	2,335	44,400 -	44,449	2,510	46,900 -	46,949	2,685	49,400 -	49,449	2,860
41,950 -	41,999	2,338	44,450 -	44,499	2,513	46,950 -	46,999	2,688	49,450 -	49,499	2,863
\$42,000 -	42,049	\$2,342	44,500 -	44,549	2,517	\$47,000 -	47,049	\$2,692	49,500 -	49,549	2,867
42,050 -	42,099	2,345	44,550 -	44,599	2,520	47,050 -	47,099	2,695	49,550 -	49,599	2,870
42,100 -	42,149	2,349	44,600 -	44,649	2,524	47,100 -	47,149	2,699	49,600 -	49,649	2,874
42,150 -	42,199	2,352	44,650 -	44,699	2,527	47,150 -	47,199	2,702	49,650 -	49,699	2,877
42,200 -	42,249	2,356	44,700 -	44,749	2,531	47,200 -	47,249	2,706	49,700 -	49,749	2,881
42,250 -	42,299	2,359	44,750 -	44,799	2,534	47,250 -	47,299	2,709	49,750 -	49,799	2,884
42,300 -	42,349	2,363	44,800 -	44,849	2,538	47,300 -	47,349	2,713	49,800 -	49,849	2,888
42,350 -	42,399	2,366	44,850 -	44,899	2,541	47,350 -	47,399	2,716	49,850 -	49,899	2,891
42,400 -	42,449	2,370	44,900 -	44,949	2,545	47,400 -	47,449	2,720	49,900 -	49,949	2,895
42,450 -	42,499	2,373	44,950 -	44,999	2,548	47,450 -	47,499	2,723		49,999	2,898

Tax tables for income of \$100,000 or less continued

	axable income		mount of tax	Taxable income		Amount of tax	Taxable income		mount of tax	Taxable income		Amount of tax
ф	50,000 - 52,49		\$0,000	\$52,500 - 54,99		00.077	\$55,000 - 57,49		\$0.050	\$57,500 - 59,9		00.407
	\$50,000 -	50,049	\$2,902	\$52,500 -	52,549	\$3,077	\$55,000 -	55,049	\$3,252	\$57,500 -	57,549	\$3,427
	50,050 -	50,099	2,905	52,550 -	52,599	3,080	55,050 -	55,099	3,255	57,550 -	57,599	3,430
	50,100 -	50,149	2,909	52,600 -	52,649	3,084	55,100 -	55,149	3,259	57,600 -	57,649	3,434
	50,150 -	50,199	2,912	52,650 -	52,699	3,087	55,150 -	55,199	3,262	57,650 -	57,699	3,437
	50,200 -	50,249	2,916	52,700 -	52,749	3,091	55,200 -	55,249	3,266	57,700 -	57,749	3,441
	50,250 -	50,299	2,919	52,750 -	52,799	3,094	55,250 -	55,299	3,269	57,750 -	57,799	3,444
	50,300 -	50,349	2,923	52,800 -	52,849	3,098	55,300 -	55,349	3,273	57,800 -	57,849	3,448
	50,350 -	50,399	2,926	52,850 -	52,899	3,101	55,350 -	55,399	3,276	57,850 -	57,899	3,451
	50,400 -	50,449	2,930	52,900 -	52,949	3,105	55,400 -	55,449	3,280	57,900 -	57,949	3,455
	50,450 -	50,499	2,933	52,950 -	52,999	3,108	55,450 -	55,499	3,283	57,950 -	57,999	3,458
	50,500 -	50,549	2,937	\$53,000 -	53,049	\$3,112	55,500 -	55,549	3,287	\$58,000 -	58,049	\$3,462
	50,550 -	50,599	2,940	53,050 -	53,099	3,115	55,550 -	55,599	3,290	58,050 -	58,099	3,465
	50,600 -	50,649	2,944	53,100 -	53,149	3,119	55,600 -	55,649	3,294	58,100 -	58,149	3,469
	50,650 -	50,699	2,947	53,150 -	53,199	3,122	55,650 -	55,699	3,297	58,150 -	58,199	3,472
	50,700 -	50,749	2,951	53,200 -	53,249	3,126	55,700 -	55,749	3,301	58,200 -	58,249	3,476
	50,750 -	50,799	2,954	53,250 -	53,299	3,129	55,750 -	55,799	3,304	58,250 -	58,299	3,479
	50,800 -	50,849	2,958	53,300 -	53,349	3,133	55,800 -	55,849	3,308	58,300 -	58,349	3,483
	50,850 -	50,899	2,961	53,350 -	53,399	3,136	55,850 -	55,899	3,311	58,350 -	58,399	3,486
	50,900 -	50,949	2,965	53,400 -	53,449	3,140	55,900 -	55,949	3,315	58,400 -	58,449	3,490
	50,950 -	50,999	2,968	53,450 -	53,499	3,143	55,950 -	55,999	3,318	58,450 -	58,499	3,493
	\$51,000 -	51,049	\$2,972	53,500 -	53,549	3,147	\$56,000 -	56,049	\$3,322	58,500 -	58,549	3,497
	51,050 -	51,099	2,975	53,550 -	53,599	3,150	56,050 -	56,099	3,325	58,550 -	58,599	3,500
	51,100 -	51,149	2,979	53,600 -	53,649	3,154	56,100 -	56,149	3,329	58,600 -	58,649	3,504
	51,150 -	51,199	2,982	53,650 -	53,699	3,157	56,150 -	56,199	3,332	58,650 -	58,699	3,507
	51,200 -	51,249	2,986	53,700 -	53,749	3,161	56,200 -	56,249	3,336	58,700 -	58,749	3,511
	51,250 -	51,299	2,989	53,750 -	53,799	3,164	56,250 -	56,299	3,339	58,750 -	58,799	3,514
	51,300 -	51,349	2,993	53,800 -	53,849	3,168	56,300 -	56,349	3,343	58,800 -	58,849	3,518
	51,350 -	51,399	2,996	53,850 -	53,899	3,171	56,350 -	56,399	3,346	58,850 -	58,899	3,521
	51,400 -	51,449	3,000	53,900 -	53,949	3,175	56,400 -	56,449	3,350	58,900 -	58,949	3,525
	51,450 -	51,499	3,003	53,950 -	53,999	3,178	56,450 -	56,499	3,353	58,950 -	58,999	3,528
	51,500 -	51,549	3,007	\$54,000 -	54,049	\$3,182	56,500 -	56,549	3,357	\$59,000 -	59,049	\$3,532
	51,550 -	51,599	3,010	54,050 -	54,099	3,185	56,550 -	56,599	3,360	59,050 -	59,099	3,535
	51,600 -	51,649	3,014	54,100 -	54,149	3,189	56,600 -	56,649	3,364	59,100 -	59,149	3,539
	51,650 -	51,699	3,017	54,150 -	54,199	3,192	56,650 -	56,699	3,367	59,150 -	59,199	3,542
	51,700 -	51,749	3,021	54,200 -	54,249	3,196	56,700 -	56,749	3,371	59,200 -	59,249	3,546
	51,750 -	51,799	3,024	54,250 -	54,299	3,199	56,750 -	56,799	3,374	59,250 -	59,299	3,549
	51,800 -	51,849	3,028	54,300 -	54,349	3,203	56,800 -	56,849	3,378	59,300 -	59,349	3,553
	51,850 -	51,899	3,031	54,350 -	54,399	3,206	56,850 -	56,899	3,381	59,350 -	59,399	3,556
	51,900 -	51,949	3,035	54,400 -	54,449	3,210	56,900 -	56,949	3,385	59,400 -	59,449	3,560
	51,950 -	51,999	3,038	54,450 -	54,499	3,213	56,950 -	56,999	3,388	59,450 -	59,499	3,563
	\$52,000 -	52,049	\$3,042		54,549	3,217	\$57,000 -	57,049	\$3,392	59,500 -	59,549	3,567
	52,050 -	52,099	3,045	54,550 -	54,599	3,220	57,050 -	57,099	3,395	59,550 -	59,599	3,570
	52,100 -	52,149	3,049	54,600 -	54,649	3,224	57,100 -	57,149	3,399	59,600 -	59,649	3,574
	52,150 -	52,199	3,052	54,650 -	54,699	3,227	57,150 -	57,199	3,402	59,650 -	59,699	3,577
	52,200 -	52,249	3,056	54,700 -	54,749	3,231	57,200 -	57,249	3,406	59,700 -	59,749	3,581
	52,250 -	52,299	3,059	54,750 -	54,799	3,234	57,250 -	57,299	3,409	59,750 -	59,799	3,584
	52,300 -	52,349	3,063	54,800 -	54,849	3,238	57,300 -	57,349	3,413	59,800 -	59,849	3,588
	52,350 -	52,399	3,066	54,850 -	54,899	3,241	57,350 -	57,399	3,416	59,850 -	59,899	3,591
	52,400 -	52,449	3,070	54,900 -	54,949	3,245	57,400 -	57,449	3,420	59,900 -	59,949	3,595
	52,450 -	52,499	3,073	54,950 -	54,999	3,248	57,450 -	57,499	3,423	59,950 -	59,999	3,598

Taxable in			mount of tax	Taxable income		Amount of tax	Taxable income		mount of tax	Taxable income		Amount of tax
	0 - 62,499			\$62,500 - 64,9			\$65,000 - 67,49			\$67,500 - 69,9		
	,000 -	60,049	\$3,602	\$62,500 -	62,549	\$3,815	\$65,000 -	65,049	\$4,027	\$67,500 -	67,549	\$4,240
	,050 -	60,099	3,606	62,550 -	62,599	3,819	65,050 -	65,099	4,031	67,550 -	67,599	4,244
),100 -	60,149	3,611	62,600 -	62,649	3,823	65,100 -	65,149	4,036	67,600 -	67,649	4,248
),150 -	60,199	3,615	62,650 -	62,699	3,827	65,150 -	65,199	4,040	67,650 -	67,699	4,252
),200 -	60,249	3,619	62,700 -	62,749	3,832	65,200 -	65,249	4,044	67,700 -	67,749	4,257
),250 -	60,299	3,623	62,750 -	62,799	3,836	65,250 -	65,299	4,048	67,750 -	67,799	4,261
	,300 -	60,349	3,628	62,800 -	62,849	3,840	65,300 -	65,349	4,053	67,800 -	67,849	4,265
),350 -	60,399	3,632	62,850 -	62,899	3,844	65,350 -	65,399	4,057	67,850 -	67,899	4,269
	,400 -	60,449	3,636	62,900 -	62,949	3,849	65,400 -	65,449	4,061	67,900 -	67,949	4,274
),450 -	60,499	3,640	62,950 -	62,999	3,853	65,450 -	65,499	4,065	67,950 -	67,999	4,278
	,500 -	60,549	3,645	\$63,000 -	63,049	\$3,857	65,500 -	65,549	4,070	\$68,000 -	68,049	\$4,282
),550 -	60,599	3,649	63,050 -	63,099	3,861	65,550 -	65,599	4,074	68,050 -	68,099	4,286
	,600 -	60,649	3,653	63,100 -	63,149	3,866	65,600 -	65,649	4,078	68,100 -	68,149	4,291
),650 -	60,699	3,657	63,150 -	63,199	3,870	65,650 -	65,699	4,082	68,150 -	68,199	4,295
),700 -	60,749	3,662	63,200 -	63,249	3,874	65,700 -	65,749	4,087	68,200 -	68,249	4,299
),750 -	60,799	3,666	63,250 -	63,299	3,878	65,750 -	65,799	4,091	68,250 -	68,299	4,303
	,800 -	60,849	3,670	63,300 -	63,349	3,883	65,800 -	65,849	4,095	68,300 -	68,349	4,308
	,850 -	60,899	3,674	63,350 -	63,399	3,887	65,850 -	65,899	4,099	68,350 -	68,399	4,312
	,900 -	60,949	3,679	63,400 -	63,449	3,891	65,900 -	65,949	4,104	68,400 -	68,449	4,316
	,950 -	60,999	3,683	63,450 -	63,499	3,895	65,950 -	65,999	4,108	68,450 -	68,499	4,320
	,000 -	61,049	\$3,687	63,500 -	63,549	3,900	\$66,000 -	66,049	\$4,112	68,500 -	68,549	4,325
	,050 -	61,099	3,691	63,550 -	63,599	3,904	66,050 -	66,099	4,116	68,550 -	68,599	4,329
	,100 -	61,149	3,696	63,600 -	63,649	3,908	66,100 -	66,149	4,121	68,600 -	68,649	4,333
	,150 -	61,199	3,700	63,650 -	63,699	3,912	66,150 -	66,199	4,125	68,650 -	68,699	4,337
	,200 -	61,249	3,704	63,700 -	63,749	3,917	66,200 -	66,249	4,129	68,700 -	68,749	4,342
	,250 -	61,299	3,708	63,750 -	63,799	3,921	66,250 -	66,299	4,133	68,750 -	68,799	4,346
	,300 -	61,349	3,713	63,800 -	63,849	3,925	66,300 -	66,349	4,138	68,800 -	68,849	4,350
	,350 -	61,399	3,717	63,850 -	63,899	3,929	66,350 -	66,399	4,142	68,850 -	68,899	4,354
	,400 -	61,449	3,721	63,900 -	63,949	3,934	66,400 -	66,449	4,146	68,900 -	68,949	4,359
	,450 -	61,499	3,725	63,950 -	63,999	3,938	66,450 -	66,499	4,150	68,950 -	68,999	4,363
	,500 -	61,549	3,730	\$64,000 -	64,049	\$3,942	66,500 -	66,549	4,155	\$69,000 -	69,049	\$4,367
	,550 -	61,599	3,734	64,050 -	64,099	3,946	66,550 -	66,599	4,159	69,050 -	69,099	4,371
	,600 -	61,649	3,738	64,100 -	64,149	3,951	66,600 -	66,649	4,163	69,100 -	69,149	4,376
	,650 -	61,699	3,742	64,150 -	64,199	3,955	66,650 -	66,699	4,167	69,150 -	69,199	4,380
	,700 -	61,749	3,747	64,200 -	64,249	3,959	66,700 -	66,749	4,172	69,200 -	69,249	4,384
	,750 -	61,799	3,751	64,250 -	64,299	3,963	66,750 -	66,799	4,176	69,250 -	69,299	4,388
	,800 -	61,849	3,755	64,300 -	64,349	3,968	66,800 -	66,849	4,180	69,300 -	69,349	4,393
	,850 -	61,899	3,759	64,350 -	64,399	3,972	66,850 -	66,899	4,184	69,350 -	69,399	4,397
	,900 -	61,949	3,764	64,400 -	64,449	3,976	66,900 -	66,949	4,189	69,400 -	69,449	4,401
	,950 -	61,999	3,768	64,450 -	64,499	3,980	66,950 -	66,999	4,193	69,450 -	69,499	4,405
	2,000 -	62,049	\$3,772	64,500 -	64,549	3,985	\$67,000 -	67,049	\$4,197	69,500 -	69,549	4,410
	2,050 -	62,099	3,776	64,550 -	64,599	3,989	67,050 -	67,099	4,201	69,550 -	69,599	4,414
	2,100 -	62,149	3,781	64,600 -	64,649	3,993	67,100 -	67,149	4,206	69,600 -	69,649	4,418
	2,150 -	62,199	3,785	64,650 -	64,699	3,997	67,150 -	67,199	4,210	69,650 -	69,699	4,422
	2,200 -	62,249	3,789	64,700 -	64,749	4,002	67,200 -	67,249	4,214	69,700 -	69,749	4,427
	2,250 -	62,299	3,793	64,750 -	64,799	4,006	67,250 -	67,299	4,218	69,750 -	69,799	4,431
	2,300 -	62,349	3,798	64,800 -	64,849	4,010	67,300 - 67,350 -	67,349	4,223	69,800 - 69,850 -	69,849	4,435
	2,350 - 2,400 -	62,399	3,802	64,850 -	64,899	4,014	*	67,399	4,227	69,850 -	69,899	4,439
		62,449	3,806		64,949	4,019	67,400 -	67,449	4,231		69,949	4,444
62	2,450 -	62,499	3,810	64,950 -	64,999	4,023	67,450 -	67,499	4,235	69,950 -	69,999	4,448

Tax tables for income of \$100,000 or less continued

 70,000 - 72,499	А	mount of tax	Taxable income \$72,500 - 74,99		Amount of tax	Taxable income \$75,000 - 77,49		mount of tax	Taxable income \$77,500 - 79,9		Amount of tax
\$70,000 -	70,049	\$4,452	\$72,500 -	72,549	\$4,665	\$75,000 -	75,049	\$4,877	\$77,500 -	77,549	\$5,090
70,050 -	70,099	4,456	72,550 -	72,599	4,669	75,050 -	75,099	4,881	77,550 -	77,599	5,094
70,100 -	70,149	4,461	72,600 -	72,649	4,673	75,100 -	75,149	4,886	77,600 -	77,649	5,098
70,150 -	70,199	4,465	72,650 -	72,699	4,677	75,150 -	75,199	4,890	77,650 -	77,699	5,102
70,200 -	70,249	4,469	72,700 -	72,749	4,682	75,200 -	75,249	4,894	77,700 -	77,749	5,107
70,250 -	70,299	4,473	72,750 -	72,799	4,686	75,250 -	75,299	4,898	77,750 -	77,799	5,111
70,300 -	70,349	4,478	72,800 -	72,849	4,690	75,300 -	75,349	4,903	77,800 -	77,849	5,115
70,350 -	70,399	4,482	72,850 -	72,899	4,694	75,350 -	75,399	4,907	77,850 -	77,899	5,119
70,400 -	70,449	4,486	72,900 -	72,949	4,699	75,400 -	75,449	4,911	77,900 -	77,949	5,124
70,450 -	70,499	4,490	72,950 -	72,999	4,703	75,450 -	75,499	4,915	77,950 -	77,999	5,128
70,500 -	70,549	4,495	\$73,000 -	73,049	\$4,707	75,500 -	75,549	4,920	\$78,000 -	78,049	\$5,132
70,550 -	70,599	4,499	73,050 -	73,099	4,711	75,550 -	75,599	4,924	78,050 -	78,099	5,136
70,600 -	70,649	4,503	73,100 -	73,149	4,716	75,600 -	75,649	4,928	78,100 -	78,149	5,141
70,650 -	70,699	4,507	73,150 -	73,199	4,720	75,650 -	75,699	4,932	78,150 -	78,199	5,145
70,700 -	70,749	4,512	73,200 -	73,249	4,724	75,700 -	75,749	4,937	78,200 -	78,249	5,149
70,750 -	70,799	4,516	73,250 -	73,299	4,728	75,750 -	75,799	4,941	78,250 -	78,299	5,153
70,800 -	70,849	4,520	73,300 -	73,349	4,733	75,800 -	75,849	4,945	78,300 -	78,349	5,158
70,850 -	70,899	4,524	73,350 -	73,399	4,737	75,850 -	75,899	4,949	78,350 -	78,399	5,162
70,900 -	70,949	4,529	73,400 -	73,449	4,741	75,900 -	75,949	4,954	78,400 -	78,449	5,166
70,950 -	70,999	4,533	73,450 -	73,499	4,745	75,950 -	75,999	4,958	78,450 -	78,499	5,170
\$71,000 -	71,049	\$4,537	73,500 -	73,549	4,750	\$76,000 -	76,049	4,962	78,500 -	78,549	5,175
71,050 -	71,099	4,541	73,550 -	73,599	4,754	76,050 -	76,099	4,966	78,550 -	78,599	5,179
71,100 -	71,149	4,546	73,600 -	73,649	4,758	76,100 -	76,149	4,971	78,600 -	78,649	5,183
71,150 -	71,199	4,550	73,650 -	73,699	4,762	76,150 -	76,199	4,975	78,650 -	78,699	5,187
71,200 -	71,249	4,554	73,700 -	73,749	4,767	76,200 -	76,249	4,979	78,700 -	78,749	5,192
71,250 -	71,299	4,558	73,750 -	73,799	4,771	76,250 -	76,299	4,983	78,750 -	78,799	5,196
71,300 -	71,349	4,563	73,800 -	73,849	4,775	76,300 -	76,349	4,988	78,800 -	78,849	5,200
71,350 -	71,399	4,567	73,850 -	73,899	4,779	76,350 -	76,399	4,992	78,850 -	78,899	5,204
71,400 -	71,449	4,571	73,900 -	73,949	4,784	76,400 -	76,449	4,996	78,900 -	78,949	5,209
71,450 -	71,499	4,575	73,950 -	73,999	4,788	76,450 -	76,499	5,000	78,950 -	78,999	5,213
71,500 -	71,549	4,580	\$74,000 -	74,049	\$4,792	76,500 -	76,549	5,005	\$79,000 -	79,049	\$5,217
71,550 -	71,599	4,584	74,050 -	74,099	4,796	76,550 -	76,599	5,009	79,050 -	79,099	5,221
71,600 -	71,649	4,588	74,100 -	74,149	4,801	76,600 -	76,649	5,013	79,100 -	79,149	5,226
71,650 -	71,699	4,592	74,150 -	74,199	4,805	76,650 -	76,699	5,017	79,150 -	79,199	5,230
71,700 -	71,749	4,597	74,200 -	74,249	4,809	76,700 -	76,749	5,022	79,200 -	79,249	5,234
71,750 -	71,799	4,601	74,250 -	74,299	4,813	76,750 -	76,799	5,026	79,250 -	79,299	5,238
71,800 -	71,849	4,605	74,300 -	74,349	4,818	76,800 -	76,849	5,030	79,300 -	79,349	5,243
71,850 -	71,899	4,609	74,350 -	74,399	4,822	76,850 -	76,899	5,034	79,350 -	79,399	5,247
71,900 -	71,949	4,614	74,400 -	74,449	4,826	76,900 -	76,949	5,039	79,400 -	79,449	5,251
71,950 -	71,999	4,618	74,450 -	74,499	4,830	76,950 -	76,999	5,043	79,450 -	79,499	5,255
\$72,000 -	72,049	\$4,622	74,500 -	74,549	4,835	\$77,000 -	77,049	5,047	79,500 -	79,549	5,260
72,050 -	72,099	4,626	74,550 -	74,599	4,839	77,050 -	77,099	5,051	79,550 -	79,599	5,264
72,100 -	72,149	4,631	74,600 -	74,649	4,843	77,100 -	77,149	5,056	79,600 -	79,649	5,268
	72,199	4,635	74,650 -	74,699	4,847	77,150 -	77,199	5,060	79,650 -	79,699	5,272
	72,249	4,639	74,700 -	74,749	4,852	77,200 -	77,249	5,064	79,700 -	79,749	5,277
72,250 -	72,299	4,643	74,750 -	74,799	4,856	77,250 -	77,299	5,068	79,750 -	79,799	5,281
	72,349	4,648	74,800 -	74,849	4,860	77,300 -	77,349	5,073	79,800 -	79,849	5,285
	72,399	4,652	74,850 -	74,899	4,864	77,350 -	77,399	5,077	79,850 -	79,899	5,289
	72,449	4,656	74,900 -	74,949	4,869	77,400 -	77,449	5,081	79,900 -	79,949	5,294
72,450 -	72,499	4,660	74,950 -	74,999	4,873	77,450 -	77,499	5,085	79,950 -	79,999	5,298

_	Taxable income	А	mount of tax	Taxable income	,	Amount of tax	Taxable income	А	mount of tax	Taxable income	A	mount of tax
	\$80,000 - 82,49	99		\$82,500 - 84,9	99		\$85,000 - 87,49	99		\$87,500 - 89,9	99	
	\$80,000 -	80,049	\$5,302	\$82,500 -	82,549	\$5,515	\$85,000 -	85,049	\$5,727	\$87,500 -	87,549	\$5,940
	80,050 -	80,099	5,306	82,550 -	82,599	5,519	85,050 -	85,099	5,731	87,550 -	87,599	5,944
	80,100 -	80,149	5,311	82,600 -	82,649	5,523	85,100 -	85,149	5,736	87,600 -	87,649	5,948
	80,150 -	80,199	5,315	82,650 -	82,699	5,527	85,150 -	85,199	5,740	87,650 -	87,699	5,952
	80,200 -	80,249	5,319	82,700 -	82,749	5,532	85,200 -	85,249	5,744	87,700 -	87,749	5,957
	80,250 -	80,299	5,323	82,750 -	82,799	5,536	85,250 -	85,299	5,748	87,750 -	87,799	5,961
	80,300 -	80,349	5,328	82,800 -	82,849	5,540	85,300 -	85,349	5,753	87,800 -	87,849	5,965
	80,350 -	80,399	5,332	82,850 -	82,899	5,544	85,350 -	85,399	5,757	87,850 -	87,899	5,969
	80,400 -	80,449	5,336	82,900 -	82,949	5,549	85,400 -	85,449	5,761	87,900 -	87,949	5,974
	80,450 -	80,499	5,340	82,950 -	82,999	5,553	85,450 -	85,499	5,765	87,950 -	87,999	5,978
	80,500 -	80,549	5,345	\$83,000 -	83,049	\$5,557	85,500 -	85,549	5,770	\$88,000 -	88,049	\$5,982
	80,550 -	80,599	5,349	83,050 -	83,099	5,561	85,550 -	85,599	5,774	88,050 -	88,099	5,986
	80,600 -	80,649	5,353	83,100 -	83,149	5,566	85,600 -	85,649	5,778	88,100 -	88,149	5,991
	80,650 -	80,699	5,357	83,150 -	83,199	5,570	85,650 -	85,699	5,782	88,150 -	88,199	5,995
	80,700 -	80,749	5,362	83,200 -	83,249	5,574	85,700 -	85,749	5,787	88,200 -	88,249	5,999
	80,750 -	80,799	5,366	83,250 -	83,299	5,578	85,750 -	85,799	5,791	88,250 -	88,299	6,003
	80,800 -	80,849	5,370	83,300 -	83,349	5,583	85,800 -	85,849	5,795	88,300 -	88,349	6,008
	80,850 -	80,899	5,374	83,350 -	83,399	5,587	85,850 -	85,899	5,799	88,350 -	88,399	6,012
	80,900 -	80,949	5,379	83,400 -	83,449	5,591	85,900 -	85,949	5,804	88,400 -	88,449	6,016
	80,950 -	80,999	5,383	83,450 -	83,499	5,595	85,950 -	85,999	5,808	88,450 -	88,499	6,020
٠	\$81,000 -	81,049	\$5,387	83,500 -	83,549	5,600	86,000 -	86,049	\$5,812	88,500 -	88,549	6,025
	81,050 -	81,099	5,391	83,550 -	83,599	5,604	86,050 -	86,099	5,816	88,550 -	88,599	6,029
	81,100 -	81,149	5,396	83,600 -	83,649	5,608	86,100 -	86,149	5,821	88,600 -	88,649	6,033
	81,150 -	81,199	5,400	83,650 -	83,699	5,612	86,150 -	86,199	5,825	88,650 -	88,699	6,037
	81,200 -	81,249	5,404	83,700 -	83,749	5,617	86,200 -	86,249	5,829	88,700 -	88,749	6,042
	81,250 -	81,299	5,408	83,750 -	83,799	5,621	86,250 -	86,299	5,833	88,750 -	88,799	6,046
	81,300 -	81,349	5,413	83,800 -	83,849	5,625	86,300 -	86,349	5,838	88,800 -	88,849	6,050
	81,350 -	81,399	5,417	83,850 -	83,899	5,629	86,350 -	86,399	5,842	88,850 -	88,899	6,054
	81,400 -	81,449	5,421	83,900 -	83,949	5,634	86,400 -	86,449	5,846	88,900 -	88,949	6,059
	81,450 -	81,499	5,425	83,950 -	83,999	5,638	86,450 -	86,499	5,850	88,950 -	88,999	6,063
	81,500 -	81,549	5,430	\$84,000 -	84,049	\$5,642	86,500 -	86,549	5,855	\$89,000 -	89,049	\$6,067
	81,550 -	81,599	5,434	84,050 -	84,099	5,646	86,550 -	86,599	5,859	89,050 -	89,099	6,071
	81,600 -	81,649	5,438	84,100 -	84,149	5,651	86,600 -	86,649	5,863	89,100 -	89,149	6,076
	81,650 -	81,699	5,442	84,150 -	84,199	5,655	86,650 -	86,699	5,867	89,150 -	89,199	6,080
	81,700 -	81,749	5,447	84,200 -	84,249	5,659	86,700 -	86,749	5,872	89,200 -	89,249	6,084
	81,750 -	81,799	5,451	84,250 -	84,299	5,663	86,750 -	86,799	5,876	89,250 -	89,299	6,088
	81,800 -	81,849	5,455	84,300 -	84,349	5,668	86,800 -	86,849	5,880	89,300 -	89,349	6,093
	81,850 -	81,899	5,459	84,350 -	84,399	5,672	86,850 -	86,899	5,884	89,350 -	89,399	6,097
	81,900 -	81,949	5,464	84,400 -	84,449	5,676	86,900 -	86,949	5,889	89,400 -	89,449	6,101
	81,950 -	81,999	5,468	84,450 -	84,499	5,680	86,950 -	86,999	5,893	89,450 -	89,499	6,105
-	\$82,000 -	82,049	\$5,472	84,500 -	84,549	5,685	\$87,000 -	87,049	\$5,897	89,500 -	89,549	6,110
	82,050 -	82,099	5,472	84,550 -	84,599	5,689	87,050 -	87,099	5,901	89,550 -	89,599	6,114
	82,100 -	82,149	5,481	84,600 -	84,649	5,693	87,100 -	87,149	5,906	89,600 -	89,649	6,118
	82,150 -	82,199	5,485	84,650 -	84,699	5,693	87,150 -	87,149	5,900	89,650 -	89,699	6,112
	82,200 -	82,249	5,489	84,700 -	84,749	5,702	87,200 -	87,249	5,914	89,700 -	89,749	6,127
	82,250 -	82,299	5,469	84,750 -	84,799	5,702	87,250 -	87,299	5,914	89,750 -	89,799	6,131
	82,300 -	82,349	5,493	84,800 -	84,849	5,700	87,300 -	87,349	5,923	89,800 -	89,849	6,135
	82,350 -	82,399	5,502	84,850 -	84,899	5,710	87,350 -	87,349	5,923	89,850 -	89,899	6,139
	82,400 -	82,449	5,502	84,900 -	84,949	5,714	87,400 -	87,449	5,927	89,900 -	89,949	6,144
						5,719	87,450 -	87,449	5,935		89,999	
	82,450 -	82,499	5,510	84,950 -	84,999	3,723	07,400 -	01, 4 99	5,955	09,900 -	09,999	6,148

Tax tables for income of \$100,000 or less continued

Taxable income		mount of tax	Taxable income \$92,500 - 94,99		Amount of tax	Taxable income \$95,000 - 97,499		mount of tax	Taxable income \$97,500 - \$10		mount of tax
\$90,000 - 92,499		PC 150			PC 2CE	\$95,000 - 97,49		¢6 577			¢6.700
	90,049	\$6,152	\$92,500 -	92,549	\$6,365		95,049 95,099	\$6,577	\$97,500 -	97,549	\$6,790
	90,099 90,149	6,156 6,161	92,550 - 92,600 -	92,599	6,369 6,373	95,050 - 95,100 -	95,099	6,581 6,586	97,550 - 97,600 -	97,599 97,649	6,794 6,798
				92,649							
	90,199	6,165	92,650 -	92,699	6,377	95,150 -	95,199	6,590	97,650 -	97,699	6,802
	90,249	6,169	92,700 -	92,749	6,382	95,200 -	95,249	6,594	97,700 -	97,749	6,807
	90,299	6,173	92,750 -	92,799	6,386	95,250 -	95,299	6,598	97,750 -	97,799	6,811
	90,349	6,178	92,800 -	92,849	6,390	95,300 -	95,349	6,603	97,800 -	97,849	6,815
	90,399	6,182	92,850 -	92,899	6,394	95,350 -	95,399	6,607	97,850 -	97,899	6,819
	90,449	6,186	92,900 -	92,949	6,399	95,400 -	95,449	6,611	97,900 -	97,949	6,824
	90,499	6,190	92,950 -	92,999	6,403	95,450 -	95,499	6,615	97,950 -	97,999	6,828
	90,549	6,195	\$93,000 -	93,049	\$6,407	95,500 -	95,549	6,620	\$98,000 -	98,049	\$6,832
	90,599	6,199	93,050 -	93,099	6,411	95,550 -	95,599	6,624	98,050 -	98,099	6,836
	90,649	6,203	93,100 -	93,149	6,416	95,600 -	95,649	6,628	98,100 -	98,149	6,841
	90,699	6,207	93,150 -	93,199	6,420	95,650 -	95,699	6,632	98,150 -	98,199	6,845
	90,749	6,212	93,200 -	93,249	6,424	95,700 -	95,749	6,637	98,200 -	98,249	6,849
	90,799	6,216	93,250 -	93,299	6,428	95,750 -	95,799	6,641	98,250 -	98,299	6,853
	90,849	6,220	93,300 -	93,349	6,433	95,800 -	95,849	6,645	98,300 -	98,349	6,858
	90,899	6,224	93,350 -	93,399	6,437	95,850 -	95,899	6,649	98,350 -	98,399	6,862
	90,949	6,229	93,400 -	93,449	6,441	95,900 -	95,949	6,654	98,400 -	98,449	6,866
•	90,999	6,233	93,450 -	93,499	6,445	95,950 -	95,999	6,658	98,450 -	98,499	6,870
	91,049	\$6,237	93,500 -	93,549	6,450	\$96,000 -	96,049	\$6,662	98,500 -	98,549	6,875
	91,099	6,241	93,550 -	93,599	6,454	96,050 -	96,099	6,666	98,550 -	98,599	6,879
	91,149	6,246	93,600 -	93,649	6,458	96,100 -	96,149	6,671	98,600 -	98,649	6,883
	91,199	6,250	93,650 -	93,699	6,462	96,150 -	96,199	6,675	98,650 -	98,699	6,887
	91,249	6,254	93,700 -	93,749	6,467	96,200 -	96,249	6,679	98,700 -	98,749	6,892
	91,299	6,258	93,750 -	93,799	6,471	96,250 -	96,299	6,683	98,750 -	98,799	6,896
	91,349	6,263	93,800 -	93,849	6,475	96,300 -	96,349	6,688	98,800 -	98,849	6,900
	91,399	6,267	93,850 -	93,899	6,479	96,350 -	96,399	6,692	98,850 -	98,899	6,904
	91,449	6,271	93,900 -	93,949	6,484	96,400 -	96,449	6,696	98,900 -	98,949	6,909
	91,499	6,275	93,950 -	93,999	6,488	96,450 -	96,499	6,700	98,950 -	98,999	6,913
	91,549	6,280	\$94,000 -	94,049	\$6,492	96,500 -	96,549	6,705	\$99,000 -	99,049	\$6,917
	91,599	6,284	94,050 -	94,099	6,496	96,550 -	96,599	6,709	99,050 -	99,099	6,921
	91,649	6,288	94,100 -	94,149	6,501	96,600 -	96,649	6,713	99,100 -	99,149	6,926
	91,699	6,292	94,150 -	94,199	6,505	96,650 -	96,699	6,717	99,150 -	99,199	6,930
	91,749	6,297	94,200 -	94,249	6,509	96,700 -	96,749	6,722	99,200 -	99,249	6,934
	91,799	6,301	94,250 -	94,299	6,513	96,750 -	96,799	6,726	99,250 -	99,299	6,938
	91,849	6,305	94,300 -	94,349	6,518	96,800 -	96,849	6,730	99,300 -	99,349	6,943
	91,899	6,309	94,350 -	94,399	6,522	96,850 -	96,899	6,734	99,350 -	99,399	6,947
	91,949	6,314	94,400 -	94,449	6,526	96,900 -	96,949	6,739	99,400 -	99,449	6,951
	91,999	6,318	94,450 -	94,499	6,530	96,950 -	96,999	6,743	99,450 -	99,499	6,955
	92,049	\$6,322	94,500 -	94,549	6,535	\$97,000 -	97,049	\$6,747	99,500 -	99,549	6,960
	92,099	6,326	94,550 -	94,599	6,539	97,050 -	97,099	6,751	99,550 -	99,599	6,964
	92,149	6,331	94,600 -	94,649	6,543	97,100 -	97,149	6,756	99,600 -	99,649	6,968
	92,199	6,335	94,650 -	94,699	6,547	97,150 -	97,199	6,760	99,650 -	99,699	6,972
	92,249	6,339	94,700 -	94,749	6,552	97,200 -	97,249	6,764	99,700 -	99,749	6,977
	92,299	6,343	94,750 -	94,799	6,556	97,250 -	97,299	6,768	99,750 -	99,799	6,981
	92,349	6,348	94,800 -	94,849	6,560	97,300 -	97,349	6,773	99,800 -	99,849	6,985
	92,399	6,352	94,850 -	94,899	6,564	97,350 -	97,399	6,777	99,850 -	99,899	6,989
	92,449	6,356	94,900 -	94,949	6,569	97,400 -	97,449	6,781	99,900 -	99,949	6,994
92,450 -	92,499	6,360	94,950 -	94,999	6,573	97,450 -	97,499	6,785	99,950 -	99,999	6,998
									\$100,000 -		\$7,000

Raising Kids is Complicated. Saving for College is Not.

The DC College Savings Plan is a great way to save for a child's education, or even your own. *And*, it's a great way to save on taxes.

- The earnings potential on every penny you contribute is enhanced by federal and District¹ tax-free growth.
- Deduct up to \$4,000 annually in plan contributions from your federal adjusted gross income on your D.C. tax return (up to \$8,000 for married couples filing jointly if both own accounts).² (If you contributed in 2013, don't forget to claim your current deduction.)³
- Earnings won't be subject to federal or D.C. income tax when withdrawn for qualifying higher education expenses: tuition, room and board, and supplies.
- Amounts greater than \$4,000 contributed to accounts in any one tax year may be carried forward, subject to the annual limit, as a deduction in subsequent tax years, up to five years from the contribution date.
- A change of the designated beneficiary is not a taxable event if the new beneficiary is a member of the family of the former beneficiary.
- Once the account has been in existence for two years, the account owner may roll over any part of the account balance to another state-sponsored college savings plan, with no tax consequences.⁴



To enroll or learn more, please visit **www.dccollegesavings.com** or call **800.987.4859**.

^{1.} For D.C. taxpayers. ^{2.} Rollovers are not considered contributions for D.C. tax purposes. ^{3.} To be eligible for the 2013 tax-year deduction, contributions must have been postmarked by December 31, 2013. ^{4.} The tax deduction is subject to recapture if, within two years of establishing the account, the account is rolled over into another state's qualified tuition program.

A Program Disclosure Booklet that describes specific terms and conditions will be mailed to you on request. The Government of the District of Columbia does not guarantee investments in the program. Investment involves risk, including possible loss of principal.

For more information on the DC College Savings Plan, please visit **www.dccollegesavings.com**, call **800.987.4859** (800.368.2745 for non-District residents, or 800.541.1524 for Telecommunications Device for the Deaf), or contact your financial advisor. An investor should consider the investment objectives, risks, charges, and expenses of an investment carefully before investing. The District of Columbia College Savings Trust Program Disclosure Booklet contains this and other information. Read it carefully before you invest or send money.

The DC College Savings Plan is underwritten and distributed by Calvert Investment Distributors, Inc., member FINRA/SIPC, a subsidiary of Calvert Investments, Inc. AD10032-201309



Sponsored by **The Government of the District of Columbia**Office of the Chief Financial Officer

Office of Finance and Treasury

© 2013 Government of the District of Columbia



DC College Savings Plan



Help Clean Up The Anacostia River

Contribute On Your Tax Return Today!

				TO	w
40)EZ	the efficiency of the second o			
7	- 1	DC Low Income Credit. Use CoJEL. C on page 11, ic see if LIC or Eli'C is greater. Enter number of exemptions claimed on your Federal return Enter number of exemptions claimed on your for more than Line 6, make no entry.	8 \$		00
7	a	Enter number of exemptions claimed on your Federal Personal Line 6, make no entry. Net tax. Subtract Line 7 from Line 6. If Line 7 is equal to or more than Line 6, make no entry. Net tax. Subtract Line 7 from Line 6. If Line 7 revention and Children at Risk.	9a		00
8		Net tax. Subtract Line 7 from Line 6. If Line Prevention and Children at Risk.	9b S	四 题 题	00
9	a	Net tax. Subtract Line 7 from Line 6. If Line 7 is equal to Contribution to Public Fund for Drug Prevention and Children at Risk. Contribution to Public Fund Polegation Fund.	9c		00
ç	9b	Contribution to P Statehood Delegation Fund. Contribution to DC Statehood Delegation Fund.	9d		00
1	9c	Contribution to DC Statehood Delegation Contribution to Anacostia River Cleanup and Protection Fund.			.00
-	9d		10		00
	10	Tax and/or contribution(s). Add Lines 8, 9a, 9b, 9c and 9d. Tax and/or contribution(s). Add Lines 8, 9a, 9b, 9c and 9d. Tax and/or contribution(s). Add Lines 8, 9a, 9b, 9c and 9d.	11		00
		Tax and/or contribution(s). Add Lines 8, 94, 95, 56 and 1099 – attach these forms. Total DC income tax withheld, shown on Forms W-2 and 1099 – attach these forms. Total DC income tax withheld, shown on Forms with original return if this is an amended return.	12		00
	11				The property of the same
2	12	Tax paid with extension of time to me vour fedoral earned income credit DC Earned Income Tax C			
7 7: 8 9 9	13	DC Eamed III.O.I.			
40)				
		abilition is \$1,00.)			0
Da	et II	Contributions (The minimum contribution is \$1.00.)			
ro		a Lastion Fund		Mar Mile B	0
		1. DC Statehood Delegation Fund.	5		
		Proportion and Children at Risk.			0
		2. Public Fund for Drug Prevention and	· 154		
	,	3 Anacostia River Cleanup and Protection Fund.	. \$		



doee.dc.gov/bags

Simply fill out Line 9c (D-40EZ) or Schedule U, Part II, Line 3 (D-40) to contribute to a cleaner Anacostia River!

The Anacostia River Clean Up and Protection Fund provides funding for the restoration of the Anacostia River and other waterways in the District of Columbia.

Revenues from disposable bag fees and Anacostia River commemorative license plates also contribute to this fund.



1200 First Street NE, Washington DC 20002

(202) 535-2600

doee.dc.gov



f DOEE.DC





Need assistance?

File or pay online: www.taxpayerservicecenter.com

Get tax forms

Download forms at www.taxpayerservicecenter.com

Request forms by mail: 202-442-6546

Pick up forms:

Office of Tax and Revenue 1101 4th St SW 2nd Floor 8:15 am-5:30 pm

One Judiciary Square 441 4th St NW Lobby 7 am-7 pm Reeves Center 2000 14th St NW Lobby 7 am-7 pm

Wilson Building 1350 Pennsylvania Av NW Lobby 7 am–7pm **Municipal Center** 300 Indiana Av NW Lobby 6:30 am-8 pm

MLK Jr Memorial Library 901 G St NW Business Information Center during regular library hours

Ask tax questions; get tax forms preparation help free

Contact our Customer Service Administration: 202-727-4TAX (4829)

Visit our Walk-In Center, 1101 4th St SW, 2nd Floor

Regular hours: 8:15 am–5:30 pm, Monday–Friday

Are you unable to hear or speak? Call the DC Relay Service, 202-727-3363.

[Spanish] Si necesita ayuda en Español, por favor llame al <u>(202) 727-4829</u> para proporcionarle un intérprete <u>de manera gratuita</u>.

[Vietnamese] Nếu quý vị cần giúp đỡ về tiếng Việt, xin gọi (202) 727-4829 để chúng tôi thu xếp có thông dịch viên đến giúp quý vị miễn phí.

[French] Si vous avez besoin d'aide en Français appelez-le (202) 727-4829 et l'assistance d'un interprète vous sera fournie gratuitement.

[Amharic] በአጣርኛ አርዳታ ከፊለጉ በ <u>(202) 727-4829</u> ይደውሉ። የ<u>ነፃ</u> አስተርጓጣ ይመደብልዎታል።

[Korean] 한국어로 언어 지원이 필요하신 경우 <u>(202) 727-4829</u> 로 연락을 주시면 <u>무료로</u> 통역이 제공됩니다.

[Chinese] 如果您需要用(中文)接受幫助,請電治 (202) 727-4829 將**免費**向您提供口譯員服務。







Important: Read the instructions before completing this schedule. Print in CAPITAL letters, using black ink.

OFFICIAL USE ONLY Vendor ID# 0000

Property Owner's Information					
Eligible resident owner social security number	Eligible resident co-own	er social security number	Daytime phone n	umber	
Eligible resident owner first name	M.I. Last n	name			
Eligible resident co-owner first name	M.I. Last n	uamo.			
Liigible resident co-owner hist hame	Wi.i. Last ii	latifie			
Mailing address (number, street and suite/apartment	nt number if applicable)				
Maning address (number, street and suite/apartine	п пипрег п аррпсаріе)				
City			State Zip	Code +4	
Square Suffix	Lot			ty tax bill or assessment.	
		If a section is blank	on your bill or asses	ssment, leave it blank her	2.
Property address, fill in if different from above (nun	nber, street and suite/apart	ment number if applicable	e)		
City			State Zip (Code +4	
 Do you own the property? Ye Is your property receiving the DC h Have you lived in the property as y immediately prior to the last day of If you answered no to 1, 2, or 3, you 	omestead deduction our principal place the tax year?	n? Yes of residence for at Yes	No least seven cor No	nsecutive years	
	are not eligible for t	ine credit. Contine	ic only if you ar	nowered yes to 1, 2	-, and 5.
Section B Credit Calculation Number of Household Members					
5 Household income limit, enter the	amount from Section	on D (page 2)	5 \$.00
Total Household Federal Adjusted			6 \$.00
If Line 6 is greater than Line 5, sto	•				
Continue only if Line 6 is equal to	or less than Line 5.		- A		00
7 DC real property tax for Tax Year 2	015		7 \$.00
B DC real property tax for Tax Year 2	014		8 \$ _		.00
9 Multiply the amount on Line 8 by	1.05 and enter the	result here	9 \$.00
10 Allowable credit (Line 7 minus Line	e 9)		10 \$		00
Signature Under penalties of law, I d				y knowledge, it is corr	ect.
Eligible resident owner signature	Date		nt co-owner signature		Date
	Duto	Z.igibie residei	or orginature		
Conductive size of and and an arranged to the size of	le te Prenaror's To	x Identification Number (PTIN) Proporo	r's Phone Number	
Send your signed and completed original schedul Office of Tax and Revenue 1101 4th Street, SW FL4 Washington DC 20024	e to: Freparet S Ta	A Identification Number (ттім) гтераге	1 3 1 HOHE INUITIDE	



	gross income) of each member o	•	•	
First name, middle initial, last name		Social security number	Household federal adjusted gross inc	come
				.00
				.00
				00
				.00
				.00
				00
T				
		and the state of t		Ω
lotal Household Federal Adju	sted Gross Income enter her	re and on Line 6		.00
Section D Household Incom		re and on Line 6	\$.00
		re and on Line 6 Number of household mem	bers Household income limit	.00
Section D Household Incom	e Limit Table ¹		bers Household income limit \$59,000	.00
Section D Household Incom	e Limit Table ¹ Household income limit	Number of household mem		00
Section D Household Incom Number of household members	e Limit Table ¹ Household income limit \$38,250	Number of household mem	\$59,000	00
Section D Household Incom Number of household members 1 2	e Limit Table ¹ Household income limit \$38,250 \$43,700	Number of household mem 5 6	\$59,000 \$63,350 \$67,750	00
Section D Household Incom Number of household members 1 2 3	e Limit Table ¹ Household income limit \$38,250 \$43,700 \$49,150 \$54,600	Number of household mem 5 6 7 8 or more	\$59,000 \$63,350 \$67,750	00
Section D Household Incom Number of household members 1 2 3 4 Source: U.S. Department of HUD, "HUD	e Limit Table ¹ Household income limit \$38,250 \$43,700 \$49,150 \$54,600 Program Income Limits," available a	Number of household mem 5 6 7 8 or more	\$59,000 \$63,350 \$67,750	
Section D Household Incom Number of household members 1 2 3 4 Source: U.S. Department of HUD, "HUD	e Limit Table ¹ Household income limit \$38,250 \$43,700 \$49,150 \$54,600 Program Income Limits," available a	Number of household mem 5 6 7 8 or more at www.huduser.org.	\$59,000 \$63,350 \$67,750 \$72,100	
Section D Household Incom Number of household members 1 2 3 4 Source: U.S. Department of HUD, "HUD Refund Options: For information	e Limit Table ¹ Household income limit \$38,250 \$43,700 \$49,150 \$54,600 Program Income Limits," available a conthe tax refund card and program Direct deposit Tax	Number of household mem 5 6 7 8 or more at www.huduser.org. can limitations, see instructions of the card Paper	\$59,000 \$63,350 \$67,750 \$72,100 or visit our website <u>otr.dc.gov/refundprepai</u>	idcards.

Lower Income Long-Term Homeowner Credit

What is the Lower Income Long-Term Homeowner Credit?

This credit gives you a refund (if you have no outstanding DC government liabilities) from DC individual income tax for certain DC real property taxes imposed. Subtract the amount that equals 1.05 of the real property tax imposed for tax year 2014 from the real property tax imposed for tax year 2015. The difference is your potential refund.

Who is eligible?

A person claiming the credit must own, and have had real property taxes imposed on, a DC residence in which he/she has lived as a principal residence for at least seven consecutive years immediately prior to the last day of the tax year. Do not file Schedule L if your household income is more than the limit shown in the Section D Household Income table for the number of members of your household.

- Note: The credit is available only for real property or a unit in a cooperative housing association receiving the homestead deduction. There is only one credit allowed per household.
- If you are a member of or a shareholder in a housing cooperative which is receiving the homestead deduction for your unit fill in the "Yes" ovals on Lines 1 and 2, Section A. If your answer is "Yes" to Line 3 in Section A, contact your housing cooperative's manager to determine the correct entries for Section B, Lines 7 and 8 based on your portion of the real property tax imposed on the entire housing

cooperative property. Keep in your records any documentation given to you by your housing cooperative's manager.

What is total household federal adjusted gross income?

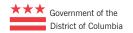
In Section B, you must report the federal adjusted gross income of every member of your household, including any income not subject to DC income tax. To help you complete this calculation, obtain the federal adjusted gross income figure from all members of the household and total it in Section C. Household members are all the people you live with whether or not they are related to you. For example, if you live in a house where you share the kitchen and bathroom with one or more persons, they are household members. If you rent out part of your house and share the kitchen and bath with a tenant, you must report the tenant's federal adjusted gross income as part of the total household income.

When is Schedule L due?

• The 2015 Schedule L must be filed by December 31, 2016.

How do you claim the credit?

- Complete the property owner's information and Sections A, B and C.
- Report the federal adjusted gross income of every member of your household.
- Mail this schedule to the Office of Tax and Revenue, 1101
 4th Street, SW FL4, Washington, DC 20024.



2016 D-4 DC Withholding Allowance Certificate

Soc	ial security number		
Fine			
FIFS	t name M.I. Last name		
Hor	ne address (number, street and suite/apartment number if applicable)		
City	State Zip code +4		
L	Tax filing status (Fill in only one) Single Married/domestic partners filing jointly/qualifying widow(er)	with dependen	t child
	 Head of household Married filing separately Married/domestic partners filing separately 	rately on same	return
2	Total number of withholding allowances from worksheet below.		
	nter total from Sec. A, Line i Enter total from Sec. B, Line m Total number of withholding allowa	ances , Line n	
}	Additional amount, if any, you want withheld from each paycheck		
ŀ	Before claiming exemption from withholding, read below. If qualified, write "EXEMPT" in this box.		
5	My domicile is a state other than the District of Columbia Yes No If yes, give name of state of domicile		
	I am exempt because: last year I did not owe any DC income tax and had a right to a full refund of all DC income tax withheld from not expect to owe any DC income tax and expect a full refund of all DC income tax withheld from me; and I qualify for exempt status	-	
	If claiming exemption from withholding, are you a full-time student? Yes No		
_	Inature Under penalties of law, I declare that the information provided on this certificate is, to the best of my knowledge, correct. Date		
Ξn	nployer Keep this certificate with your records. If 10 or more exemptions are claimed or if you suspect this certificate contains false in	nformation	
le	ase send a copy to: Office of Tax and Revenue, 1101 4th St., SW, Washington, DC 20024 Attn: Compliance Administration		
	Detach and give the top portion to your employer. Keep the bottom portion for your records.		
*	Government of the District of Columbia D-4 DC Withholding Allowance Worksheet		
ct	ion A Number of withholding allowances		
Er	ter 1 for yourself		а
En	ter 1 if you are filing as a head of household		b
Ξn	ter 1 if you are 65 or over		С
	ter 1 if you are blind		d
	ter number of dependents		
	·		e
	ter 1 for your spouse or registered domestic partner filing jointly or filing separately on same return or if you are a qualifying u	vidow(er)	f
	ter 1 if married or registered domestic partner filing jointly or filing separately on same return and your spouse or registered drtner is 65 or over	lomestic	g
	ter 1 if married or registered domestic partner filing jointly or filing separately on same return and your spouse or registered drtner is blind	omestic	h
	imber of allowances Add Lines a through h, enter here and on Line 2 above, next to "Enter total from Sec. A, Line i".		i
· C+	If you want to claim additional withholding allowances, complete Section B below. ion B Additional withholding allowances		
_	ter estimate of your itemized deductions	j	
	ter \$5,200 if single, married/registered domestic partners filing separately or a dependent. Enter \$6,500 if	,	
	ad of household. Enter \$8,350 if married/registered domestic partner filing jointly, married filing separately		
	the same return, or qualifying widow(er) with dependent child.	k	
Su	btract Line k from Line j	1	
کiر	ride Line I by \$1,775. Round to the nearest whole number, enter here and on Line 2 above, next to "Enter total from Sec.B, Line	: m".	m
Δd	Lines m and i, enter here and on Line 2 above, next to "Total number of withholding allowances, Line n".		n

Detach and give the top portion to your employer. Keep the bottom portion for your records.

Who must file a Form D-4?

Every new employee who resides in DC and is required to have DC income taxes withheld, must fill out Form D-4 and file it with his/her employer.

If you are not liable for DC income taxes because you are a nonresident or military spouse, you must file Form D-4A, Certificate of Nonresidence in the District of Columbia, with your employer.

When should you file?

File Form D-4 whenever you start new employment. Once filed with your employer, it will remain in effect until you file a new certificate. You may file a new withholding allowance certificate any time the number of withholding allowances you are entitled to increases. You must file a new certificate within 10 days if the number of withholding allowances you claimed decreases.

How many withholding allowances should you claim?

Use the worksheet on the front of this form to figure the number of withholding allowances you should claim. If you want less money withheld from your paycheck, you may claim additional allowances by completing Section B of the worksheet, Lines j through n. However, if you claim too many allowances, you may owe additional taxes at the end of the year.

Should I have an additional amount deducted from my paycheck?

In some instances, even if you claim zero withholding allowances, you may not have enough tax withheld. You may, upon agreement with your employer, have more tax withheld by entering on Line 3, a dollar amount of your choosing.

What to file

After completing Form D-4, detach the top portion and file it with your employer. Keep the bottom portion for your records.

*** Government of the	Form D-4	A Certificate of	Nonres	idence in the Dist	rict of Columbia
District of Columbia —	Enter Year	71 Oct tilloate of	14011103	idence in the bist	Hier or Columbia
First name		M.I. Last name			
Temporary DC address (number and str	reet)			Social security n	umber
Permanent address (number and street	:)				Apartment number
City			State	Zip code + 4	
Country or U.S. commonwealth					
Signature Under penalties of Signature	law, I certify that my permanent	t residence is not in DC ar Date	nd that I will	not be residing in DC for 18.	3 days or more in the tax year. Revised 02/2015

Instructions

Who must file a Form D-4A?

If you are not a resident of DC you must file a Form D-4A with your employer to establish that you are not subject to DC income tax withholding. You qualify as a nonresident if:

- our permanent residence is outside DC during all of the tax year and you do not reside in DC for 183 days or more in the tax year.
- ou are a service member's spouse.

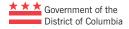
Employees <u>who are residents</u> of DC should file a Form D-4, DC Withholding Allowance Certificate.

What if your resident status changes?

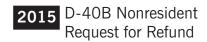
If you become a DC resident any time after you have filed a Form D-4A with your employer, you must file a Form D-4 promptly so that the proper amount of DC income tax can be withheld from your wages.

How do you file the Form D-4?

After completing this form, give it to your employer to keep on file.



STAPLE W-2s and OTHER WITHHOLDING STATEMENTS HERE ► STAPLE OTHER REQUESTED DOCUMENTS IN UPPER LEFT BEHIND THIS FORM





Important: Print in CAPITAL letters using black ink. Leave lines blank that do not apply.

Personal information			official use only Vendor ID#0000
Your first name	M.I. Last name		VEHICO ID#0000
Your social security number	Your date of birth (MMDDYYYY)	Daytime phone number	
Current mailing address (number, street and suite/apart	tment number if applicable)		
City		State Zip Code + 4	
Country or U.S. commonwealth/U.S. territory			
Review categories 1 - 2 below and attach	your withholding statements.		
none satisfies 1 2 polon and attach	Tyour Withholam's statements.		
Commuter/Domiciliary State Exemption from my place of residence to work in			
and my only income from sources with			
state abbreviation for your domiciliary than 183 days. (see instructions). DC	or legal state of residency) I did	not maintain a place of about	de in DC for a total of more
·	·	, ,	
Military spouse exemption: If your no resident, enter the state of domicile de		n the armed services during	2015, and you are not a DC
3. List the type and location of any DC re	al property you own.		
Type of property			
Address (number, street and suite/apart	ment number if applicable)		
Type of property			
Address (number, street and suite/apart	ment number if applicable)		
radios (name), choc and cars, apare	поленания призавления		
Refund request		Round cent	s to nearest dollar. If amount is zero, leave line blank.
1. DC income tax withheld Attach copies of you	r withholding statements.	1 \$.00
2. 2015 DC estimated income tax paymen		2 \$.00
. ,		3 \$	00
3. Refund request Add Lines 1 and 2.	102		
Will the refund go to an account outside the U		instructions.	
Refund Options: For information on the tax re Mark one refund choice: Direct Depos		ee instructions or visit our webs Paper Check	ite <u>otr.dc.gov/refundprepaidcards</u> .
Direct Denosit /s	dia anno bankana di Cili i di	and about the	
Direct Deposit If you want your refund deposited number below.	in your pank account, fill in type of ac	count checking saving	gs and enter the routing number and account
Routing Number	Account Number		
Signature Under penalties of law, I declare the	nat I have examined this request and a	any attached statements, and, to	the best of my knowledge, they are correct.
Your signature	Date	Preparer's signature	
	D	renarer's Tax Identification Number (F	PTIN)
	P	reparer's Tax Identification Number (F	PTIN)

Who must file a Form D-40B?

Any nonresident of DC claiming a refund of DC income tax withheld or paid by estimated tax payments must file a D-40B. A nonresident is anyone whose permanent home was outside DC during all of 2015 and who did not live in DC for a total of 183 days or more during 2015. A joint request for refund is not permitted. Attach all statements showing DC withholding to the front of page 1. Be sure to include your date of birth on page 1.

NOTE: If you moved into DC with the intent of residing, you are considered a DC resident and the 183 days does not apply.

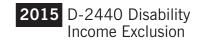
How will we respond to your request?

- We will send you a refund for the amount you request if we determine you were not a resident of DC during 2015; or
- Based on the information you provide, we may determine that you qualify as a DC resident. If so, we will require that you file either a DC Form D-40 or DC Form D-40EZ tax return.

Notice: In order to comply with banking rules, we will not issue a refund to or through a foreign financial institution. Instead, we will issue a tax refund card if the refund is greater than or equal to \$2.00 but less than or equal to \$4,000. If the refund is outside the threshold, a paper check will be issued.

In the event of a rejection of direct deposit, refunds will be re-issued on a paper check.







Important: Print in CAPITAL letters using black ink. Leave lines blank that do not apply.

1	5	2	4	Ω	Ω	1	1	Ω	0	Ω	Ω	

OFFICIAL USE ONLY Vendor ID#0000

Suite number

Date

Name as	shown on Form D-40	Your social security number
Person	al information	
Date of yo	our birth (MMDDYY) Date you retired (MMDDYY) Name of your employer	Payor, if other than employer
partner's I	birth(MMDDYY) Date retired (MMDDYY) Name of employer u filed a physician's certification for this disability in previous years? y o not file another certification. If no, you must file the physician's certification	Payor, if other than employer Yes No on provided below.
Income	e If married or registered domestic partners, use both columns.	ound cents to the nearest dollar. If amount is zero, leave the line blank.
	You	Your spouse/registered domestic partner
1 Tota	al amount of disability payments received in 2015	.00 \$.00
disa	Itiply \$100 by the number of weeks you received ability payments in 2015. If you received pay for part a week, see Line 2 instructions on the back.	.00 \$
3 Ent	er Line 1 or Line 2 amount, whichever is less.	.00
		Total income
4 Add	d the amounts for you and your spouse/registered domestic partner from Lin	ne 3. 4 \$ 00
Limitat	ion on exclusion	
5 Fed	leral adjusted gross income from Form D-40, Line 3.	5 \$
6 Tax	able social security income from Form D-40, Line 9.	6 \$
7 Sub	otract Line 6 from Line 5.	7_\$
8 Am	ount used to reduce the excludable disability income.	- 1 5 0 0 0 .00
9 Sub	otract Line 8 from Line 7. If zero or a negative number, stop here. Do not file	e this form. 9 \$
	ability income payment excludable. Subtract Line 9 from Line 4.	10 \$.00
	er on D-40 Schedule I, Calculation B, Line 2 (see D-40 instructions). <u>The ex</u>	cclusion may not exceed \$5200 per disabled person.
	Government of the District of Columbia 2015 Physician's Certification	of Permanent and Total Disability
Name of	disabled taxpayer	Social security number
		MM DD YY
-	that the above taxpayer was permanently and totally disabled when the tax	xpayer retired. (Enter retirement date.)

State

Zip Code + 4

Attach to Form D-40. See instructions on back.

Physician's signature

Physician's address (number and street)

Physician's phone number

City

What is the purpose of Form D-2440?

Form D-2440 is used to determine the amount of disability income you may exclude from the federal adjusted gross income you report on DC Form D-40. Enter the amount from Line 10 of this form on Line 2 of Calculation B of Schedule I. The maximum annual exclusion per disabled person is \$5,200.

Who may file a Form D-2440?

You must meet all of the following requirements:

- You are not filing a Form D-40EZ;
- If you are married or registered domestic partners, you are filing a joint return;
- · You received disability payments during 2015;
- You were under the age of 65 on December 31, 2015:
- You retired on disability and were permanently and totally disabled when you retired;
- On January 1, 2015, you had not reached the age required to retire under your employer's retirement program; and
- You have not notified the Office of Tax and Revenue that you have chosen to treat the disability income as a pension.

Personal information

If you are filing a joint return, please provide the information requested for you and your spouse/registered domestic partner, even if your spouse/registered domestic partner is not disabled and is not claiming a disability exclusion.

Income and Limitation on Exclusion

Line 1 Total amount of disability payments received in 2015. Enter the total amount of disability payments you received in 2015. Do not include any lump-sum payment received for accrued annual leave when you retired on disability. (The annual leave payment is included in your gross income for the year of receipt.) Payments from a retirement plan or profit-sharing plan that does not have a provision for disability retirement do not qualify for the exclusion.

Line 2

If you received disability payments for part of a week, follow the example below to determine the exclusion for that portion:

Divide \$100 by the number of days in a week you normally worked before you retired and multiply the result by the number of days you were paid for the partial week.

Example: \$100 divided by 5 days (number of days in typical work week) = \$20. \$20 x 3 (number of days you were paid for partial week) = \$60. Add this amount to the total amount you were paid for the full weeks.

Line 8 Amount used to reduce disability income

\$15,000 is the amount DC uses to reduce the disability income you can exclude.

Line 10 Disability income exclusion

This is the amount you may use to reduce your DC taxable income. \$5,200 is the maximum annual amount per disabled person that may be excluded.

Physician's certification

To claim an exclusion, your physician must certify that you are, according to the definition below, permanently disabled. If both you and your spouse/registered domestic partner are claiming the exclusion, each must file a certification. You do not have to file another certification if you have filed one in a previous year. Attach the certification(s) to your Form D-40.

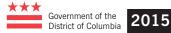
Instructions for the Physician

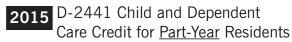
Date taxpayer retired

Please certify that the taxpayer ceased active employment because of his or her permanent disability and retired on the date that he or she became disabled.

Definition of permanent and total disability

Permanent and total disability means that the taxpayer is unable to engage in any substantial gainful activity because of a physical or mental condition **and** this condition has lasted continuously for at least a year, will last continuously for at least a year, or is fatal.







Important: First calculate your federal return child and dependent care credit. Print in CAPITAL letters using black ink. Leave lines blank that do not apply.

	OFFICIAL USE (ONLY Vendor ID# 0000
Name as shown on Form D-40	Your social security numb	ber
Before you begin –		
You must meet the following requirements to use this for	m:	
You are a part-year resident of DC;		
You are filing a part-year DC D-40 return; and		
You were eligible to claim the child and dependent can	e credit on your federal return.	
Qualifying dependents Complete for all qualifying individuals	for whom you claimed expenses on your federal Fe	rm 2441
		1111 2441.
First name	M.I. Last name	
Social security number Relationship to you		Date of birth (MMDDYYYY)
Social security number		Date of Billi (MIMBB1111)
Lived in your household from MMDDYY to MMDDYY		
First name	M.I. Last name	
Social security number Relationship to you		Date of birth (MMDDYYYY)
Lived in your household from MMDDYY to MMDDYY		
Education	M. Laterna	
First name	M.I. Last name	
Social security number Relationship to you		Date of birth (MMDDYYYY)
Social security number Relationship to you		Date of Birth (MMDB1111)
Lived in your household from MMDDYY to MMDDYY		
First name	M.I. Last name	
Social security number Relationship to you		Date of birth (MMDDYYYY)
Social security number Relationship to you		Date of birth (MIMDD1111)
Lived in your household from MMDDYY to MMDDYY		
Eved in your household from minipply to minipply		
If you need to list additional dependents, attach as	statement with the same information fo	r them
DC credit		Round cents to the nearest dollar. f the amount is zero, leave the line blank.
Enter dates you were a DC resident in 2015. Total 2015 employment-related dependent care export total expenses paid (page 2, Line 6 of this form).	10111	1 \$.00
 Employment-related dependent care expenses paid 	in 2015 while you were a DC resident	2 \$.00
3 Divide Line 2 amount by Line 1 amount. (The result will be a c	·	
4 DC full-year dependent care credit Multiply your allow	· ·	o.
Line 9 x .32)		4 \$.00
5 DC part-year dependent care credit Multiply Line 4 an Enter the amount on Line 22 of Form D-40.	nount by the Line 3 decimal.	5 \$.00

ATTACH THIS FORM TO YOUR FORM D-40.



Enter your last name.	Enter your social security number.			
Dependent care expenses Complete for all people or organizations v	who provided care during 2015 so	that you could work		
			Round cents to the nearest doll	lar.
Name	From (MMDD)	To (MMDD)	Amount paid	.00
Address	Social security or Fe	ederal employer ID	Φ	.00
If an individual, identify their relationship to you				
News	From (MMDD)	T- (MANDD)	A	
Name	From (MMDD)	To (MMDD)	Amount paid	.00
Address	Social security or Fe	ederal employer ID		
If an individual, identify their relationship to you				
Name	From (MMDD)	To (MMDD)	Amount paid	
			\$.00
Address	Social security or Fe	ederal employer ID		
If an individual, identify their relationship to you				
Name	From (MMDD)	To (MMDD)	Amount paid	.00
Address	Social security or Fe	ederal employer ID	_	
		\perp		
If an individual, identify their relationship to you				
Name	From (MMDD)	To (MMDD)	Amount paid	
			\$.00
Address	Social security or Fe	ederal employer ID		
If an individual, identify their relationship to you				
6 Total expenses paid			\$.00





FR-147 Statement of Person Claiming Refund Due a Deceased Taxpayer



Important: Print in CAPITAL letters using black ink.

Tax period ending (MMYY)	OFFICIAL USE ONLY Vendor ID# 0000
Personal information	
Deceased's First name M.I. Last name	
Deceased's social security number Date of death (MMDDYYYY)	
Name of person claiming refund (First name) M.I. Last name	
Home address (number, street and suite/apartment number if applicable)	
City State	Zip code +4
Statement of Claimant	
Your relationship to the deceased	
Fill in only one: Spouse/registered domestic partner Administrator	Executor
Other • Specify	
Did the deceased leave a will? Yes No	
Has an executor or administrator been appointed for the estate? Yes No	
If no , will one be appointed? Yes No	
Will you pay out the refund to beneficiaries according to the laws of the state where the deceased v	vas a legal resident? Yes No
If no , a refund cannot be made until you submit a court certificate showing your appointment as per or other evidence that you are entitled, under DC law, to receive the refund.	
If other than the deceased, who paid deceased's 2015 DC income tax?	
Name	Claimant's SSN
Relationship to deceased	
Signature I request a refund of DC income tax overpaid by or on behalf of the de I have examined this claim and, to the best of my knowledge, it is con	
Signature of person claiming refund Date	
Attach this form to the deceased's D-40 along with a copy of the death cert If you are filing as an administrator or executor, attach a copy of the court	

2015 D-41

District of Columbia (DC) Fiduciary Income Tax Forms and Instructions

The following forms are provided in this booklet:

- D-41 Fiduciary income tax return
- D-41P Payment voucher
- FR-127F Extension of time to file a fiduciary tax return
- D-41ES Estimated payment voucher for fiduciary tax return



- Every estate or trust that is required to file a D-41 must have a Federal Employer Identification Number (FEIN).
- Refund options available are direct deposit or paper check.
- You can now file your D-41 return electronically via Modernized e-File (MeF). Contact a software developer who supports DC Fiduciary MeF.
- If you are a business statutory trust, you must be registered with the Department of Consumer and Regulatory Affairs (DCRA) Corporations Division.

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D-41ES Estimated Payment for Fiduciary Income Tax 21

Need assistance? Back cover

Note: At the time this tax package was printed, line references to federal tax forms were correct.

General Instructions for D-41

Who must file the Form D-41?

You must file a 2015 DC Fiduciary Income tax return if you are the fiduciary of a DC estate or trust and:

- The gross income for the estate is \$1,775 or more for the taxable year; or
- The gross income for the trust is \$100 or more for the taxable year.

Do not file a D-41 if you were appointed by a judge to receive a trust or estate and represent only a part of the property of an individual.

Which other DC tax forms may fiduciaries need to file?

D-40 or D-40EZ (Individual Income Tax Return) for a living person

In addition to the Form D-41, a fiduciary who is responsible for the income of a DC resident, such as a minor or someone else unable to administer his or her own assets, must file an individual income tax return for that person if that person meets the income limits.

D-40 for a deceased person

A fiduciary must file a D-40 for the tax year in which the person died unless a spouse/registered domestic partner has filed a joint return for the tax year.

D-41ES Estimated Payments for Fiduciary Income Tax

If you wish to make estimated fiduciary income tax payments, use the D-41ES forms included in this booklet. Send the D-41ES to:

Office of Tax and Revenue PO Box 96150 Washington, DC 20090-6150

D-41P Payment Voucher

If you are sending a payment to the Office of Tax and Revenue (OTR), please staple the payment to the D-41P. Use the D-41P forms in this booklet. Send the D-41P to:

Office of Tax and Revenue PO Box 96153 Washington, DC 20090-6153

FR-127F Extension of Time to File Fiduciary Income Tax Return

An extension of time to file of six months may be granted if a valid extension of time to file is requested. In order to be valid, an FR-127F Extension of Time to File Fiduciary form is due by April 18, 2016 for a calendar year filer. If the due date falls on a Saturday, Sunday, or legal holiday, the return is due the next business day. A request for an extension of time to file is subject to the following considerations:

a. If you expect to have a balance due when you file your D-41, you must pay with your timely filed extension request. If you do not expect to have a balance due when you file your D-41, you are not required to file a Form FR-127F if you have reasonably estimated your D-41 tax liability and paid the estimated amount of DC income taxes through withholding or estimated tax payment; and

b. You should submit a Form FR-127F if you do not expect to have a balance due and you have not filed a request for an extension of time to file for your federal individual income return but wish to request an extension for your DC income tax return.

Penalty and interest charges are imposed on any tax found owing and not paid on time with the extension request. An extension of time to file does not extend the due date for paying any tax you may owe. Before you file for an extension, estimate the tax owed and pay it in full with the FR-127F by the due date of the D-41 return. FR-127F forms are in this booklet. Send FR-127F to:

Office of Tax and Revenue PO Box 96161 Washington, DC 20090-6161

D-30 Unincorporated Business Franchise Tax Return

A D-30 must be filed by a trust located outside of DC which has gross income in excess of \$12,000 from DC rental property and/or from a taxable DC trade or business.

D-76 (D-76EZ) DC Estate Tax Return

A fiduciary must file a DC estate tax return if the gross estate is \$1,000,000 or more, even if the federal Estate Tax Return, Form 706 is not required to be filed.

Federal Forms 1099 and 1096 for payees with DC addresses

Fiduciaries representing estates or trusts must file copies of Forms 1099 and 1096 for payees with DC addresses, if such payments are not covered by DC withholding tax statements. This includes estates or trusts that:

- Are engaged in business and making payments to another person for rent, salaries, wages, premiums, annuities, compensation, or other profits; and
- Have earned income of \$600 or more in the taxable year.

What income must grantors and beneficiaries report on their DC tax returns?

Grantors of a trust must report:

- Income distributed to the grantor;
- Income held or accumulated for future distributions;
- Income applied to the payment of premiums on insurance policies on the grantor; and
- Income received from a revocable trust when:
 - The title to any part of the trust is vested in the grantor; or
 - The power to revest in the grantor is vested. (The grantor takes back from his/her designated beneficiaries ownership of trust funds or property for himself/herself).

Beneficiaries who are DC residents must report income paid or payable from a resident or non-resident trust.

What period should the D-41 cover?

Your filing period may be a calendar year or a fiscal year. If you file a federal Form 1041, the income you report on the D-41 must be based on the same calendar or fiscal year as your Form 1041. A fiduciary may not change from reporting on a calendar year basis to a fiscal year basis or vice versa without written permission from the OTR. To request a period change, write to:

Office of Tax and Revenue, Audit Division PO Box 556 Washington, DC 20024-0556

When are your taxes due?

April 18, 2016, is the due date for filing your return and paying any taxes due if you are a calendar filer. Fiscal year filers must file by the 15th day of the fourth month after the end of the fiscal year. If the due date falls on a Saturday, Sunday, or legal holiday, the return is due the next business day.

Filing your return

This booklet has all the forms and instructions you will need. You are responsible for filing and paying taxes on time whether or not you receive the printed forms.

Substitute forms

You may file your DC tax return using a computer-prepared or computer-generated substitute form, provided the form is approved in advance by the Office of Tax and Revenue (OTR). The fact that a software package is available for retail purchase does not mean that the substitute form has been approved for use. Call or check with the software developer to determine if its form is approved by DC OTR.

· By mail

If mailing a return, send it to:

Office of Tax and Revenue PO Box 96153 Washington, DC 20090-6153

Do not include more than one return per envelope.

• By DC electronic filing (e-File)

e-File offers most DC fiduciary income taxpayers a full federal/state electronic filing program. There are three ways in which taxpayers can file their federal and District returns together electronically:

1. Through an authorized software provider listed on the Internal Revenue Service (IRS) website;

- 2. Through a tax practitioner who is an authorized e-File provider; or
- 3. Through a commercial online filing service. This allows taxpayers to transmit their DC and federal returns from their PC for a fee.

Assembling your D-41

- <u>Do not staple or otherwise damage the Bar Code</u> <u>located</u> in the upper right hand corner of the form or schedule being attached;
- Do not cross out the tax year on the 2015 return. If you are not filing a 2015 fiduciary income tax return, do not use this booklet. Request a booklet for the specific year you are filing by calling our Forms Center at (202) 442-6546, or visit our Customer Service Administration at 1101 4th Street, SW, Washington, DC 20024. You may also visit our website at http://www.taxpayerservicecenter.com for prior year(s) fiduciary income tax booklets/returns;
- Do not staple check, money order or D-41P to the D-41;
- Do staple check or money order to the D-41P, Payment Voucher:
- Do staple Forms W-2 and applicable 1099 to the front of your return;
- Do staple any of the other required documents listed on this page above behind the return;
- Do send in an original, signed DC return with attachments, if applicable, not a copy. Please fold your return only once.

Refund Options

There will be two refund options offered for fiduciary income tax returns. All fiduciary income tax returns require that one of two refund options be selected.

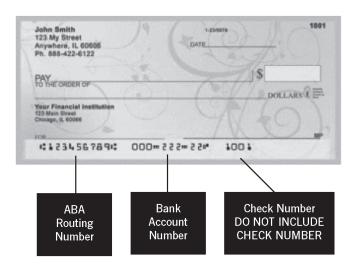
1. Direct deposit of refund

Direct Deposit Facts:

- It's simple. You don't have to go to the bank to cash your check.
- 2. It's safe. No more lost, stolen or misplaced checks.
- 3. It's fast. Your money will be available the morning of the payment.

If you want your refund deposited directly in your bank account, complete the Direct Deposit Information above the signature line on the D-41. If the routing or account number begins with zeros, include the zeros.

Fill in the bank routing and account number information. You can obtain this information from the lower left portion of your check (see example below).



NOTE: Refer to your own check or financial institution for your numbers. The routing and account numbers may be in different places on your check.

Your routing number is the left-most number located on your check, identified as the American Banking Association (ABA) routing number. The ABA number identifies your bank uniquely within the direct deposit system. It must be:

- Nine (9) digits in length, including zeros;
- A current valid bank routing number.

Your account number:

- Is usually just to the right of your ABA routing number including zeros;
- Can be up to 17 digits long; and
- · Can be both letters and numbers.

You may want to verify your account and routing numbers with your financial institution before filling in the information.

Fill in the oval to show the type of bank account. If you want the refund to go to a savings account instead of your checking account, you may need to contact your financial institution for the account and routing number information.

Check the ABA routing number and account number carefully. If your bank account information is incorrect or missing digits, the money can be deposited in someone else's account. Please double check your routing and account number. OTR is not liable for any ABA routing and account numbers reported on the return in error.

If you do not select the checking or savings oval, we will assume the refund will be deposited in your checking account. If the funds are returned to OTR, a paper check will be issued.

Refund direct deposit to a foreign account – International ACH Transaction (IAT)

If you request your refund to be direct deposited to an account outside of the United States, you will receive a paper check.

2. Paper Check

A paper check will be issued if the taxpayer selects this option, or direct deposit is not selected.

Payment Options

Check or money order

Include a check or money order (US dollars), payable to "DC Treasurer", with your completed return. Write the Federal Employer Identification Number (FEIN), daytime telephone number, "2015" and the type of form filed ("D-41") on your payment. Attach your payment to the Form D-41P voucher provided in this booklet. Do not attach either to your return.

Form D-41P, Payment Voucher

Use this form when sending a check or money order (US dollars). Do not staple the voucher to the D-41. Include the D-41P with your D-41.

Electronic Payment Options

By accessing the DC Electronic Taxpayer Service Center (eTSC)

Refer to the Electronic Funds Transfer (EFT)
Payment Guide available on the DC website at
www.taxpayerservicecenter.com for instructions for electronic payments by ACH Credit.

Payment options are as follows:

ACH Credit. ACH credit is for business taxpayers only.
 There is no fee charged by the OTR, but the taxpayer's bank may charge a fee. The taxpayer directly credits OTR's bank account. A taxpayer does not need to be eTSC registered to use this payment type, and does not need access to the website. Note: When making ACH credit payments through your bank, please use the correct tax type code (00150) and tax period ending date (YYMMDD).

Note: International ACH Transaction (IAT). Your payment cannot be drawn on a foreign account. You must pay by money order (US dollars) or credit card instead. You will also have the option of direct debit if you choose to file using MeF.

Penalties and Interest

OTR will charge:

- A penalty of 5% per month if you fail to file a return or pay any tax due on time. It is computed on the unpaid tax for each month, or fraction of a month, that the return is not filed or the tax is not paid. It may not exceed an additional amount equal to 25% of the tax due;
- A 20% penalty on the portion of an underpayment of taxes if attributable to negligence. Negligence is a failure to make a reasonable attempt to comply with the law or to exercise ordinary and reasonable care in preparing tax returns without the intent to defraud. One indication of negligence is failure to keep adequate books and records;
- Interest of 10% per year, compounded daily, on a late payment;
- A one-time fee to cover internal collection efforts on any unpaid balance. The collection fee assessed is 10% of the tax balance due after 90 days. Payments received by the OTR on accounts subject to the fee are first applied to the fee, then to the penalty, interest and tax owed;
- A civil fraud penalty of 75% of the underpayment which is attributable to fraud (see DC Code §47-4212).

Criminal Penalties

You will be penalized under the criminal provisions of the DC Code, Title 47, if you are required to file a return or report, or to perform any act, and you:

- Fail to file the return or report timely. If convicted, you
 will be fined not more than \$1,000 or imprisoned for
 not more than 180 days, or both, for each failure or
 neglect;
- Willfully fail to file the return or report timely. If convicted, you will be fined not more than \$5,000 or imprisoned for not more than 180 days, or both;
- Willfully attempt to evade or defeat a tax; willfully fail to collect, account for, or pay a tax; willfully make fraudulent or false statements; or fail to provide information. See DC Official Code §47-4101 through 4107.

These penalties are in addition to penalties under DC Code §22-2405 for false statements (and any other applicable penalties). Corporate officers may be held personally liable for the payment of taxes.

Enforcement Actions

The OTR may use lien, levy, seizure, collection agencies, and liability offset if the taxpayer fails to pay the District within 20 days after receiving a Notice of Tax Due and a demand for payment. Visit www.taxpayerservicecenter.com.

Special filing circumstances

Amended return

File an amended DC return if your DC tax liability for a prior open tax year (usually 3 years) has changed on the D-41 for the year you are amending. To file an amended return for the current year, complete another 2015 DC fiduciary individual income return and fill in the "amended return" oval on the form. Attach a list with explanations of the changes covered by your amended return.

If you are filing an amended return for a prior year, attach a copy of the return filed for that year. You can download forms from www.taxpayerservicecenter.com or call 202-442-6546 to request forms by mail.

If the Internal Revenue Service (IRS) adjusts your fiduciary federal tax return, you must file an amended DC return within 90 days of receiving notice of the federal adjustment. Attach a copy of the adjusted federal return.

Final return

If you are not required to continue filing a return for an entity, fill in the "final return" oval on the return. We will then cancel your filing requirement.

Getting Started

To complete the paper Form D-41, in general you will need:

- A copy of your completed 2015 federal return, as applicable (Form 1041 and any additional forms or worksheets related to the return). You can copy many entries directly from federal Form 1041. Please be careful since the line numbers may differ from the District Form D-41:
- Your applicable 1099 form(s) with DC withholding tax or taxable income:
- · A pen with black ink;
- A calculator.

Not all items will apply. Fill in only those that do. If an amount is zero, make no entry, leave the line blank.

Do not enter cents. Round to the nearest dollar.

Examples:

\$10,500.50 rounds to \$10,501 \$10,500.49 rounds to \$10,500

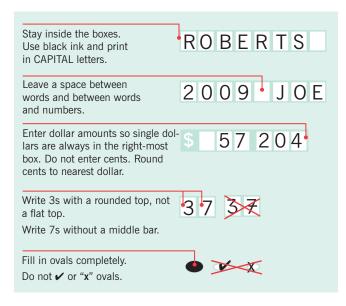
Federal Employer Identification Number (FEIN)

Every estate or trust that is required to file a D-41 must have a Federal Employer Identification Number (FEIN).

 A FEIN is a valid number issued by the Internal Revenue Service (IRS). To apply for an FEIN, get Form SS-4, Application for Employer Identification Number online at <u>www.irs.gov</u>. You may also get this form by calling 1-800-TAX-FORM (1-800-829-3676).

You must wait until you receive the FEIN before you file a DC return. Your return may be rejected if your FEIN is missing, incorrect or invalid. You could be subject to a balance due or disallowance of credits or exemptions, if your FEIN is missing, incorrect or invalid.

Filling out the form



Personal information

Complete the personal information as instructed using CAPITAL letters and black ink. Use one block per letter, including a space between address fields. Please write clearly, as lack of clarity can delay processing of your return.

Entity type

Fill in the oval that describes the entity for which you are filing.

Trust type

Fill in the oval that describes the trust type as applicable.

Signature

The fiduciary or the person authorized to represent the organization controlling the income of the estate or trust must sign the return. If the return was prepared by a paid preparer, he or she must sign the return and provide their identification number.

Attachments

Attach a copy of the will or trust agreement to this return in PDF format on a CD. Also, if you have not already done so, attach a statement listing the amounts of income of the estate or trust taxable to:

- The estate or trust;
- · Its beneficiaries; and
- The grantor of the trust.

If you filed these documents before, do not file them again unless they have been amended. If the documents are amended after being filed, a copy of the amendment must be filed with the return for the taxable year in which the amendment is made. A statement must also be filed explaining the effect of the change(s).

Send in your original return and attachments, if applicable; please keep a copy of the filed return for your records.

Do not understate your taxes

There may be a penalty if an understatement of the tax required to be shown on the D-41 return you file exceeds the greater of:

- 10% of the tax required to be shown on the return; or
- \$2.000.

The penalty is 20% of the excess of the amount required to be shown on the return over the tax shown on the return.

Preparer Tax Identification Number (PTIN)

If you are a paid tax preparer, you are required to have an IRS PTIN issued by the IRS. If you use a paid preparer, they are required to have an IRS PTIN issued by the IRS. Although you may use a paid preparer, you the taxpayer(s) are responsible for the filing and payment of your tax return. A PTIN is a number issued and authorized by the IRS to someone who can prepare or submit a return on your behalf. Please review the tax return before you allow a paid preparer to issue a return on your behalf.

Paid preparers must pay a penalty for understating taxes where:

- The refund or amount due is based on unrealistic information; or
- The preparer should have been aware of a relevant law or regulation; or
- Relevant facts about the return are not adequately disclosed.

Penalties range from \$250 to \$10,000.

Explanation of terms

Beneficiary: Any person who is to receive profits or distributions from an estate or trust. A beneficiary includes an heir, a legatee, or a devisee.

Estate: All the property and assets of one who has died. An estate comes into existence at the time of an individual's death and continues until the final distribution of its assets to the beneficiaries.

Fiduciary: A person or business with the power to act for another and the responsibility for managing the assets and income of an estate or trust. A fiduciary may be a trustee, an administrator of an estate, a business adviser, attorney, guardian, real estate agent, banker, stockbroker, or title company.

Grantor: The person who creates a trust and transfers the title of the property and assets to another. That person may also be called "trustor," "settlor," or "donor."

Resident Estate: If the deceased was a DC resident at the time of death, then his or her estate is a DC resident estate.

Testamentary (created by will): Created by a will and comes into existence at the time of the creator's death.

Inter Vivos (living): Comes into existence during the lifetime of the person who created it. Often the trust is for a minor or someone else who is unable to administer his or her own assets.

Trust: An entity created to hold assets for the benefit of certain people or entities.

Simple Trust: One which requires that all income be distributed each year rather than being accumulated.

Complex Trust: One that does not qualify as a simple trust.

Resident Trust: A trust is a resident trust if:

- The person who created the testamentary trust was a DC resident at the time of death; or
- The creator of an inter vivos trust was a DC resident at the time the trust was created; or
- The trust consists of property of a DC resident; or
- The trust results from the dissolution of a corporation organized under DC laws.

The residence of the fiduciary does not determine whether the trust is a resident or non-resident of DC.

Specific Line Instructions

Income

Line 1 Federal total income. Enter the amount from your federal Form 1041.

Line 2 Additions to federal total income. This is income, if any, that is taxed by DC but not by the federal government. It also includes deductions taken on the federal return but not allowed by DC. You must add these items back to your federal total income to compute your DC tax. Complete Calculation A on page 6.

Note: Unlike the federal government, DC does not allow the additional bonus depreciation under Internal Revenue Code (IRC) Section 168(K), nor the additional IRC Section 179 expenses. Therefore, any such amounts claimed on the federal return cannot be claimed on the DC return. Also, the Net Operating Loss Carry back allowed for federal tax purposes is not allowed for DC tax purposes.

Line 4 Subtractions from federal total income. This is income, if any, that DC does not tax. Subtract it from your federal total income to determine your DC fiduciary income. Complete **Calculation B** on page 6.

Deductions and Exemptions

Line 9 Other deductions. Add amounts on Lines 12, 13, 14, 15a, 15b, 15c and 19 of your federal Form 1041. These include deductions for fiduciary fees; charitable contributions; attorney, accountant, and tax preparer fees; estate tax deductions and other miscellaneous deductions.

Calculation A Additions to federal total income	
a Franchise tax deduction used to calculate business income or loss	а
The amount included on federal Form 1040 Schedule C, or Form 1040 Schedule C-EZ.	
b Franchise tax deduction used to calculate income from rental real estate, royalties, partnerships, trusts etc. <i>The amount included on federal Form 1065, or on federal Form 1041.</i>	b
c Deductions for an S corporation from federal Form 1120S Includes amounts entered on Lines 8–11 and 14 of Form 1120S. NOTE: IRC Sec. 179 expenses are, for DC purposes, deductible up to \$25,000. A QHTC may deduct up to \$40,000 of such expenses.	С
d Income distributions eligible for income averaging on your federal tax return from federal Form 4972, Lines 6 and 8 Add Lines 6 and 8, enter here.	d
e Any bonus depreciation claimed on the federal return See "NOTE" below Line C.	е
f Total additions Add Lines a—e, enter here and on D-41, Line 2.	f
Calculation B Subtractions from federal total income	
a Taxable interest from U.S. Treasury bonds and other U.S. obligations The amount included in your federal Form 1040, 1040A, or 1040EZ. Also see your federal Form 1099INT.	а
b Taxable amount of social security and tier 1 railroad retirement income from federal Form 1040 or 1040A.	b
c Income reported and taxed on a DC franchise return If the income reported on your federal Form 1040 included any income reported and taxed on a Form D-20 or D-30 (DC Franchise Tax Returns), enter it here.	С
d Total subtractions Add Lines a-c; enter here and on D-41, Line 4.	d

Line 10 Exemption. Enter \$1,775 for estates and \$100 for trusts.

If you are filing an estate return and it covers less than a year, you must prorate the exemption amount. Multiply the number of months the estate was active by \$147.92.

To calculate the number of months the estate was active, divide the number of days the estate was active by 30. Any remainder over 15 days counts as a full month.

Example: 196 days divided by 30 = 7 months (6 months plus a remainder of 16 days).

Line 11 Total deductions and exemptions. Add Lines 6-10.

Line 12 Taxable fiduciary income. Subtract Line $11\ \mathrm{from}$ Line 5.

Line 13 Tax on fiduciary income. Use Calculation C on page 8 to determine your tax.

Line 14 Credit for taxes paid to other states. Add all tax amounts paid to other states that would be deductible for DC tax purposes. To be deductible, taxes paid to other states must be fiduciary income tax paid to another state while a DC resident. In addition, the tax paid must be on income that is of a kind taxable by DC.

Line 15 Net tax on fiduciary income. Line 13 minus Line 14.

Line 16a Income tax withheld. Income tax withheld from the W-2 or 1099 forms.

Line 16b 2015 estimated fiduciary income tax payments.

Line 17 Payments made with extension of time to file from FR-127F calculation, Line 3.

Line 18 If this D-41 is an amended 2015 return, enter payments made with original D-41.

Line 19 Total payments. Add Lines 16a-18.

Line 20 Amount of overpayment. If Line 19 is more than Line 15, subtract Line 15 from Line 19.

Line 21 Amount, if any, to be applied to 2016 estimated tax.

Line 22 Refund. Subtract Line 21 from Line 20.

Line 23 Amount owed. If Line 19 is less than Line 15, subtract Line 19 from Line 15.

Key website resources

• DC Official Code

http://www.lexisnexis.com/hottopics/dccode/

DC Regulations

http://www.dcregs.dc.gov/

• US Department of State Tax Exemption Cards

www.state.gov/ofm/tax/

• DC Tax Forms/Publications

http://otr.cfo.dc.gov/page/tax-forms-and-publications

Mailing Address for Returns

http://otr.cfo.dc.gov/node/392882

Electronic Funds Transfer (EFT) Guide

http://otr.cfo.dc.gov/publication/electronic-funds-transfer-payment-guide-eft

NACHA Guidelines

http://www.nacha.org/

Social Security Administration

http://ssa.gov/

Internal Revenue Service

http://www.irs.gov

Calculation C/Tax Rate Schedule

Tax calculation if Line 12 is a loss, go directly to Line 16a, leave Lines 13-15 blank

If your taxable fiduciary income from D-41, Line 12 is:

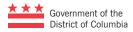
Not over \$10,000 4% of the taxable income

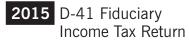
 Over \$10,000 but not over \$40,000
 \$400, plus 6% of the excess over \$10,000

 Over \$40,000 but not over \$60,000
 \$2,200, plus 7% of the excess over \$40,000

 Over \$60,000 but not over \$350,000
 \$3,600, plus 8.5% of the excess over \$60,000

 Over \$350,000
 \$28,250, plus 8.95% of the excess above \$350,000







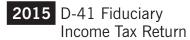
Print in CAPITAL letters using black ink. Leave lines blank that do not apply.

OFFICIAL USE ONLY Vendor ID#0000

Information Fill in: if amended return See instructions Fill in		
Tax period ending (MMYY) Fill in type of entity: Estate	•	mplex trust
Fill in type of trust: Testament	ry (created by a will) Daytime telephore	Inter vivos (living)
	Dayame telepher	
Estate or trust name		
Fiduciary's name and title		
Fiduciary's address (number, street and suite/apartment number if applicable)		
City	State Zip Co	de +4
Complete if entity (MMDDYYYY) is a trust	Complete if entity s an estate	(MMDDYYYY)
Date created	Date of deceased's deat	h
(MMDD)	lf	(MMDD)
If trust ended in 2015, enter date	If estate ended in 2015	, enter date
Name of grantor	Has a DC D-76 or D-76EZ estate	e tax return been filed? Yes No
Address of grantor (number, street and suite/apartment number if applicable)	If no, will one be filed? Yes	No
City State Zip Code		
State Etp sode		
Income	Round cents	to nearest dollar. If amount is zero, leave line blank.
1 Federal total income from federal Form 1041.	Fill in if loss 1 \$.00
2 Additions to federal total income from Calculation A, line f, page 6 of inst	ructions. 2 \$.00
3 Add Lines 1 and 2.	Fill in if loss 3 \$.00
4 Subtractions from federal total income from Calculation B, line d, page 6	of instructions. 4 \$.00
5 Total DC fiduciary income Subtract Line 4 from Line 3. If zero or a loss,	Fill in if loss 5 \$.00
stop here; do not fill in rest of form. Deductions and exemptions		
6 Interest from federal Form 1041.	6 \$	00
7 Taxes Subtract the state, local and DC franchise tax entered on federal Form	041. 7 \$	00
8 Deduction for distributions to beneficiaries from federal Form 1041.	8 \$	00
9 Other deductions Enter total of Lines 12, 13, 14, 15a, 15b, 15c and 19 from	ederal Form 1041. 9 \$	00
10 Exemption Enter \$1,775 for estates and \$100 for trusts. If the estate ended		
prorate the exemption. See page 7 for instructions.	during 2015, 10 \$	00
	10 \$.00
prorate the exemption. See page 7 for instructions.		

13 \$.00
14 \$.00
15 \$.00
16a \$.00
16b \$.00
17 \$.00
18 \$.00
19 \$.00
ess than Line 15 subtract Line 19 from Line 15. owed \$.00
t come from an account outside the U.S.? Yes No See instructions
eck or money order (US dollars) to the D-41P voucher only; syable to: DC Treasurer. Write the estate or trust's FEIN 5 D-41" on your payment.
5 D 11 on your paymona
See instructions
See instructions
see instructions al and enter bank routing and account numbers. See instructions.
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al and enter bank routing and account numbers. See instructions. of my knowledge, it is correct.
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al and enter bank routing and account numbers. See instructions. of my knowledge, it is correct.
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Print in CAPITAL letters using black ink. Leave lines blank that do not apply.

OFFICIAL USE ONLY Vendor ID#0000

Information Fill in: if amended return See instructions Fill in: if thi	s is your final return
Tax period ending (MMYY) Fill in type of entity: Estate Simple t	rust Complex trust
Fill in type of trust: Testamentary (created	by a will) Inter vivos (living)
Estate or trust's federal employer ID number	Daytime telephone number
Estate or trust name	
Fiduciary's name and title	
riduciary smalle and title	
Fiduciary's address (number, street and suite/apartment number if applicable)	
City	ate Zip Code +4
Complete if entity (MMDDYYYY) Complete if ent	ity (MMDDYYYY)
is a trust is an estate	
	ceased's death
(MMDD) If setate or	ided in 2015, enter date
	ided iii 2015, eiitei date
Name of grantor Has a DC D-76	6 or D-76EZ estate tax return been filed? Yes No
Address of grantor (number, street and suite/apartment number if applicable) If no, will one to	pe filed? Yes No
City State Zip Code	
Income	Round cents to nearest dollar. If amount is zero, leave line blank.
1 Federal total income from federal Form 1041. Fill in if loss	1 \$.00
2 Additions to federal total income from Calculation A, line f, page 6 of instructions.	2 \$.00
3 Add Lines 1 and 2. Fill in if loss	3 \$.00
4 Subtractions from federal total income from Calculation B, line d, page 6 of instruction	s. 4 \$ 00
5 Total DC fiduciary income Subtract Line 4 from Line 3. If zero or a loss, Fill in if loss	5 \$.00
stop here; do not fill in rest of form.	
Deductions and exemptions	
6 Interest from federal Form 1041.	6 \$.00
7 Taxes Subtract the state, local and DC franchise tax entered on federal Form 1041.	7 \$.00
8 Deduction for distributions to beneficiaries from federal Form 1041.	8 \$.00
9 Other deductions Enter total of Lines 12, 13, 14, 15a, 15b, 15c and 19 from federal Form 1	041. 9 \$
10 Exemption Enter \$1,775 for estates and \$100 for trusts. If the estate ended during 2015,	
prorate the exemption. See page 7 for instructions.	10 \$.00
prorate the exemption. See page 7 for instructions.	

D-41 PAGE 2	
Name	
FEIN	
Tax and payments	
13 Tax on fiduciary income.	13 \$.00
14 Credit for taxes paid to other states Credit may not exceed amount on Line 13. See instructions, page 7. Attach copy of state return.	14 \$.00
15 Net tax on fiduciary income Line 13 minus Line 14.	15 \$.00
16a Income tax withheld.	16a \$.00
16b 2015 estimated fiduciary income tax payments.	16b \$.00
17 Payments made with extension of time to file from FR-127F calculation, Line 3.	17 \$.00
18 If this is an amended 2015 return, payments made with original 2015 D-41.	18 \$.00
19 Total payments Add Lines 16a–18.	19 \$.00
20 Amount of overpayment \$ 00 23 Amount	ess than Line 15 subtract Line 19 from Line 15. owed \$
21 Amount, if any, to be applied to 2016 estimated tax	
22 Refund Subtract On make it parts and a subtract	eck or money order (US dollars) to the D-41P voucher only; ayable to: DC Treasurer. Write the estate or trust's FEIN 5 D-41" on your payment.
Will this refund you requested go to an account outside the U.S.? Yes No	See instructions
Refund Options: Mark one refund choice: Direct deposit Paper check	
Direct Deposit. To have your refund deposited to yourchecking ORsavings account, fill in ov	ral and enter bank routing and account numbers. See instructions.
Routing Number Account Number	
Signature Under penalties of law, I declare that I have examined this return and, to the best Declaration of paid preparer is based on the information available to the preparer.	
Signature of fiduciary or officer representing the fiduciary Date	
Signature of paid preparer Preparer's Tax Id	Jantification Number (PTIN)
Signature of participater integrated in teprated state of	lentification Number (PTIN)
Preparer's address (number and street) City	State Zip Code
Send your signed and completed original return to: Office of Tax and Revenue PO Box 96153 Washington DC 20090-6153	

2015 D-41 P2

D-41P Payment Voucher

See instructions on back.

Detach at perforation and mail the voucher, with check or money order (made payable to DC Treasurer) attached to: Office of Tax and Revenue, PO Box 96153, Washington, DC 20090-6153.

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2015 D-41P P1

City

State

Zip Code +4

Instructions for D-41P - please print clearly

Use the D-41 Payment Voucher to make any payment due on your D-41 return.

- Do not use this voucher to make estimated tax payments;
- Enter your payment amount;
- Enter your estate or trust FEIN;
- Enter name(s) and address(es) exactly as they are on your D-41 return;
- Make your check or money order (US dollars) payable to: DC Treasurer;
- Write the estate or trust FEIN, tax period and D-41 on your payment;
- Staple the payment to the D-41P Payment Voucher do not attach your payment to your return;
- Mail the D-41P with payment attached and D-41 return to the Office of Tax and Revenue, PO Box 96153, Washington, DC 20090-6153.

D-41P Payment Voucher

See instructions on back.

Detach at perforation and mail the voucher, with check or money order (made payable to DC Treasurer) attached to: Office of Tax and Revenue, PO Box 96153, Washington, DC 20090-6153.

	nt \$			00	ble to: DC Tre			OFFICIAL LIC	E ONLY
(dollars only) Estate or trust's federa		per						Vendor ID#	
Estate or trust name									Tax period ending (MMY)
						П			
Fiduciary's name and	title								
						Ш			
Fiduciary's address (n	umber, street and su	uite/apartment nu	mber if applical	ble)					
City					State	Ziı	Code +4		
						7 Г			
Revised 02/15				2015 D-41P Payment Vouc	P P1 cher for Fiducial	ry Income	Tax		
Government of the District of Column		D-41P	Fiducia	Payment Vouch ary Incon	her for Fiducian ner for ne Tax		Tax 1 5	0 4 1	
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Government of the District of Column	PITAL letters using	_	Fiducia	Payment Vouch ary Incon	her for Fiducian ner for ne Tax		Tax	OFFICIAL US	
Government of the District of Column portant: Print in CAF Amount of payme	PITAL letters using	black ink. Make	Fiducia	Payment Vouch ary Incon	her for Fiducian ner for ne Tax		Tax	OFFICIAL US Vendor ID	
Government of the District of Column portant: Print in CAF Amount of payme (dollars only) Estate or trust's federal	PITAL letters using	black ink. Make	Fiducia	Payment Vouch ary Incon	her for Fiducian ner for ne Tax		Tax		#0000
Government of the District of Column portant: Print in CAF Amount of payme (dollars only)	PITAL letters using	black ink. Make	Fiducia	Payment Vouch ary Incon	her for Fiducian ner for ne Tax		Tax 1 5		

2015 D-41P P1

Instructions for D-41P - please print clearly

Use the D-41 Payment Voucher to make any payment due on your D-41 return.

- Do not use this voucher to make estimated tax payments;
- Enter your payment amount;
- Enter your estate or trust FEIN;
- Enter name(s) and address(es) exactly as they are on your D-41 return;
- Make your check or money order (US dollars) payable to: DC Treasurer;
- Write the estate or trust FEIN, tax period and D-41 on your payment;
- Staple the payment to the D-41P Payment Voucher do not attach your payment to your return;
- Mail the D-41P with payment attached and D-41 return to the Office of Tax and Revenue, PO Box 96153, Washington, DC 20090-6153.

FR-127F - Extension of Time to File a Fiduciary Income Tax Return

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

00

Important: Leave lines blank that do not apply. Fill this out to determine the amount due.

1 Total estimated income tax liability for 2015.

Revised 02/15

14 estimated tax payments.		2 \$
	e 1 is more than Line 2, subtract Line 2 from Line 1 the amount here and on the voucher below.	1. 3 \$
asurer and attach it to the FR-12	7F voucher. Write the Estate FEIN and "2015	your check or money order (US dollars) payable FR-127F" on your payment. You may not pay by (not the filing extension date) of the D-41 return
ach at perforation, mail voucher	and any payment due to the Office of Tax an	nd Revenue, PO Box 96161, Washington DC 20
Government of the District of Columbia 2015 FR-1 Important: Print in CAPITAL letters using	27F Extension of Time to File a Fiduciary Income Tax Return	
Amount of payment	\$.00
(dollars only) Estate or trust's federal employer ID num		OFFICIAL USE ONLY
		Vendor ID#0000
Estate or trust name		
Fiduciary's name and title		
Fiducion / and down (according to the standard	with the section and records as if a section black	
Fiduciary's address (number, street and s	uite/apartment number if applicable)	
City		State Zip Code + 4
Revised 02/15	2015 FR-127F P1 Extension of Time to File Fiduciary Income	Tay Return
	27F Extension of Time to File a Fiduciary Income Tax Return	
Important: Print in CAPITAL letters using Amount of payment		1 5 1 2 7 0 3 1 0 0 0 0
(dollars only)	\$.00
Estate or trust's federal employer ID num	ber Tax period ending (MMYY)	official use only Vendor ID#0000
Estate or trust name		
Fiduciary's name and title		
Fiduciary's address (number, street and s	suite/apartment number if applicable)	
and s		
City		State Zip Code + 4

Extension of Time to File Fiduciary Income Tax Return

Instructions for Form FR-127F

Why file the FR-127F?

You should file this form if you cannot file the fiduciary income tax return by the due date. By filing this form, you can receive a 6-month extension of time to file. A filing extension is not an extension of the due date for paying any tax you may owe. Before filing for an extension, you should estimate the taxes you owe and pay that amount with the FR-127F by the due date of the D-41 return.

Additional extension for DC residents living or traveling outside the United States.

In addition to the 6-month extension, you may receive an additional 6-month extension. You must file for the first 6-month extension by the due date before applying for the additional extension of time to file. You must use Form FR-127F to request an extension of time to file a DC fiduciary return.

When is the Form FR-127F due?

- Calendar year filers: you must submit your request along with payment in full of any tax due by April 18, 2016.
- Fiscal year filers: you must submit your request along with payment in full of any tax due by the 15th day of the fourth month after the end of your fiscal year.

If you have an extension, when is your fiduciary income tax return due?

You may file your tax return any time before the extension expires.

Extension of time to file the D-41

- October 15, 2016 for calendar year filers; or
- Six (6) months after the due date for fiscal year filers.

FR-127F - Extension of Time to File a Fiduciary Income Tax Return

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

00

Important: Leave lines blank that do not apply. Fill this out to determine the amount due.

1 Total estimated income tax liability for 2015.

Revised 02/15

014 estimated tax payments.		2 \$.0
	e 1 is more than Line 2, subtract Line 2 from Line the amount here and on the voucher below.	1. 3 \$
Litter	the unionic here and on the vodener below.	
easurer and attach it to the FR-12	7F voucher. Write the Estate FEIN and "2015	e your check or money order (US dollars) payable to the FR-127F" on your payment. You may not pay by credit (not the filing extension date) of the D-41 return.
tach at perforation, mail voucher	and any payment due to the Office of Tax ar	nd Revenue, PO Box 96161, Washington DC 20090-61
Government of the	OTE Extension of Time to File a	
District of Columbia 2013 FR-1 Important: Print in CAPITAL letters using	27F Extension of Time to File a Fiduciary Income Tax Return	
Amount of payment (dollars only)	\$.00
Estate or trust's federal employer ID num	ber Tax period ending (MMYY)	official use only Vendor ID#0000
Estate or trust name		
Fiduciary's name and title		
Fiduciary's address (number, street and s	uite/apartment number if applicable)	
City		State Zip Code + 4
City		State Zip Code + 4
Revised 02/15	2015 FR-127F P1 Extension of Time to File Fiduciary Income	e Tax Return
* Consumment of the		
District of Columbia 2015 FR-1 Important: Print in CAPITAL letters using	27F Extension of Time to File a Fiduciary Income Tax Return	
Amount of payment	\$	00
(dollars only) Estate or trust's federal employer ID num		OFFICIAL USE ONLY Vendor ID#0000
Estate or trust name		
Fiduciary's name and title		
Fiduciary's address (number, street and s	suite/apartment number if applicable)	
Tradelary 5 address (number, street and s	and applicable)	
City		State Zip Code + 4

2015 FR-127F P1

Extension of Time to File Fiduciary Income Tax Return

Instructions for Form FR-127F

Why file the FR-127F?

You should file this form if you cannot file the fiduciary income tax return by the due date. By filing this form, you can receive a 6-month extension of time to file. A filing extension is not an extension of the due date for paying any tax you may owe. Before filing for an extension, you should estimate the taxes you owe and pay that amount with the FR-127F by the due date of the D-41 return.

Additional extension for DC residents living or traveling outside the United States.

In addition to the 6-month extension, you may receive an additional 6-month extension. You must file for the first 6-month extension by the due date before applying for the additional extension of time to file. You must use Form FR-127F to request an extension of time to file a DC fiduciary return.

When is the Form FR-127F due?

- Calendar year filers: you must submit your request along with payment in full of any tax due by April 18, 2016.
- Fiscal year filers: you must submit your request along with payment in full of any tax due by the 15th day of the fourth month after the end of your fiscal year.

If you have an extension, when is your fiduciary income tax return due?

You may file your tax return any time before the extension expires.

Extension of time to file the D-41

- October 15, 2016 for calendar year filers; or
- Six (6) months after the due date for fiscal year filers.

D-41ES Estimated Payment for Fiduciary Income Tax

Instructions:

Government of the District of Columbia

Quarterly payment

Important: Print in CAPITAL letters using black ink.

- Use the D-41ES Estimated Payment Return to make any estimated tax payments for your D-41 return.
- Enter your payment amount.
- Enter your estate or trust FEIN.
- Enter name(s) and address exactly as they are on your return.
- Make your check or money order (US dollars) payable to the DC Treasurer.

2016 D-41ES Estimated Payment for

• Write the estate or trust FEIN, tax period and D-41 on your payment (check or money order).

Fiduciary Income Tax

00

• Mail the D-41ES with payment to the Office of Tax and Revenue, PO Box 96150, Washington, DC 20090-6150.

dollars only)	00	OFFICIAL USE ONLY
Estate or trust's federal employer ID number		Vendor ID#0000
Estate or trust name		Tax period ending (MMYY)
Fiduciary's name and title		
Fiduciary's address (number, street and suite/apartme	ent number if applicable)	
City	State	Zip Code + 4
Rev. 02/15	2016 D-41ES Estimated Payment for Fiduciary Income Tax	Voucher number: Due date:
Government of the District of Columbia 2016 D-41 ortant: Print in CAPITAL letters using black ink.	ES Estimated Payment for Fiduciary Income Tax	
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D-41ES Estimated Payment for Fiduciary Income Tax

Instructions:

Government of the District of Columbia

Quarterly payment

(dollars only)

Important: Print in CAPITAL letters using black ink.

- Use the D-41ES Estimated Payment Return to make any estimated tax payments for your D-41 return.
- Enter your payment amount.
- Enter your estate or trust FEIN.
- Enter name(s) and address exactly as they are on your return.
- Make your check or money order (US dollars) payable to the DC Treasurer.

2016 D-41ES Estimated Payment for

• Write the estate or trust FEIN, tax period and D-41 on your payment (check or money order).

Fiduciary Income Tax

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• Mail the D-41ES with payment to the Office of Tax and Revenue, PO Box 96150, Washington, DC 20090-6150.

OFFICIAL USE ONLY

		Vendor ID#0000
Estate or trust name		Tax period ending (MMYY)
Fiduciary's name and title		
laudiary e manie una titue		
Fiduciary's address (number, street and suite/apar	rtment number if applicable)	
City	State	Zip Code + 4
		Voucher number: Due date:
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Need assistance?

File or pay online: www.taxpayerservicecenter.com

Get tax forms

Download forms at www.taxpayerservicecenter.com

Request forms by mail: 202-442-6546

Pick up forms:

Office of Tax and Revenue

1101 4th St SW 2nd Floor 8:15 am–5:30 pm

One Judiciary Square

441 4th St NW Lobby 7 am-7 pm

Reeves Center

2000 14th St NW Lobby 7 am-7 pm

Wilson Building

1350 Pennsylvania Av NW Lobby 7 am-7pm

Municipal Center

300 Indiana Av NW Lobby 6:30 am-8 pm

MLK Jr Memorial Library

901 G St NW Business Information Center during regular library hours

Ask tax questions; get tax forms preparation help free

Contact our Customer Service Administration: 202-727-4TAX (4829)

Visit our Walk-In Center, 1101 4th St SW, 2nd Floor

Regular hours: 8:15 am–5:30 pm, Monday–Friday

Are you unable to hear or speak? Call the DC Relay Service, 202-727-3363.

[Spanish] Si necesita ayuda en Español, por favor llame al <u>(202) 727-4829</u> para proporcionarle un intérprete <u>de manera gratuita</u>.

[Vietnamese] Nếu quý vị cần giúp đỡ về tiếng Việt, xin gọi (202) 727-4829 để chúng tôi thu xếp có thông dịch viên đến giúp quý vị miễn phí.

[French] Si vous avez besoin d'aide en Français appelez-le (202) 727-4829 et l'assistance d'un interprète vous sera fournie gratuitement.

[Amharic] በአጣርኛ እርዳታ ከፊለጉ በ (202) 727-4829 ይደውሉ። የነፃ አስተርዓጧ ይመደብልዎታል።

[Korean] 한국어로 언어 지원이 필요하신 경우 <u>(202) 727-4829</u> 로 연락을 주시면 <u>무료로</u> 통역이 제공됩니다.

[Chinese] 如果您需要用(中文)接受幫助,請電治 (202) 727-4829 將 **免費** 向您提供口譯員服務。

2015 D-20 District of Columbia (DC)
Corporate Franchise Tax **Forms and Instructions**

Secure - Accurate - Convenient ...

DISTRICT OF COLUMBIA



- Any payment that exceeds \$5,000 per period must be paid electronically.
- Make tax payments electronically with e-check, ACH Credit, ACH Debit and Credit Card. Visit www.taxpayerservicecenter.com
- When making a payment with your D-20 please use the voucher (D-2030P) provided.

What's New:

- **New Tax Rate** For taxable years beginning after December 31, 2014, the tax rate for corporations and financial institutions is 9.4% of taxable income.
- Schedule F DC Apportionment Factor For taxable years beginning after December 31, 2014, corporations will apportion business income using a single sales factor only. Financial institutions will continue to use a two-factor formula comprised of the sales factor and the payroll factor. See D-20 page 4, Schedule F.
- **Estimated Tax Interest** For taxable years beginning after December 31, 2014, the penalty for underpayment of estimated tax has been changed to interest for underpayment of estimated tax, Line 47, D-20.

Reminder:

- Alternative Fuel Infrastructure Installation and Alternative Fuel Vehicle Conversion Credits
 There are two non-refundable business credits added to the Schedule UB for alternative
 infrastructure installation and alternative fuel vehicle conversion. See instructions page 13,
 and DC Code §47-1807.10 and §47-1807.11 for details.
- Supplemental Information "Did you file an annual ballpark fee return?" question has been added to the Supplemental Information section of the D-20 form. (Page 6)

Clarification:

• Line 33 Clarification - If you are a partner in a partnership that filed an unincorporated business franchise tax return and claimed a deduction for the salary allowance, you must add the post-apportioned distributive share of the unincorporated business salary allowance attributable to the partner under DC Code §47-1803.03(a)(11), and the unincorporated business exemption amount attributable to the partner under DC Code §47-1808.04, on Line 33 of the D-20. If filing a combined report, this amount will be reflected as an addition under the partner's column on Line 33 of Schedule 1 of the combined report.

Also you must include a statement to reflect the specific amounts for each of the items listed below:

- Portion of Line 29(c) attributable to DC
- Portion of UB salary allowance attributable to DC
- Portion of UB exemption attributable to DC

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Note: At the time this tax package went to print, line references to federal tax forms were correct.

General Instructions for the D-20

Who must file a Form D-20?

Generally, every corporation or financial institution must file a Form D-20 (including small businesses, professional and S corporations) if it is carrying on or engaging in any trade, business, or commercial activity in the District of Columbia (DC) and receiving income from DC sources including activities in DC that benefit an affiliated entity of the taxpayer.

If you perform services in DC for subsidiary corporations, you are carrying on a trade or business.

A corporation that engages an independent agent or a representative who solicits orders in DC for more than one principal and who holds himself/herself out as such must file a DC Form D-20.

Treat income from sales of tangible personal property or services to the United States Government as income from a DC source unless the:

- Corporation's principal place of business is outside DC;
- Property is delivered from outside DC; and
- Property is for use outside DC.

For District tax purposes, an S corporation is a C corporation. Therefore, it must file Form D-20 and prepare all the schedules on the D-20. The fact that an S corporation does not have similar schedules on the federal form should not be considered as a relief for an S corporation from completing the schedules on the D-20.

You might not have to file a Form D-20 if the corporation has been granted an exemption by the DC Office of Tax and Revenue (OTR). If you are an exempt organization with unrelated business income, as defined in the Internal Revenue Code (IRC) §512, you must file a Form D-20, by the 15th day of the fifth month after the end of your tax year. You are required to pay at least the minimum tax even if your tax is less than the minimum tax.

Minimum Tax

The minimum tax is \$250 if DC gross receipts are \$1M or less. Minimum tax is \$1,000 if DC gross receipts are greater than \$1M. DC Gross receipts for purposes of minimum tax includes District gross receipts that are derived from any activity such as sales, rents, services, commissions, etc., from any source within the District. Gross receipts are determined without deduction of any expenses.

Note: Each member of a combined group must use the Minimum Tax Liability Gross Receipts (MTLGR) worksheet for the purposes of determining a minimum tax liability of a member whose computed tax is less than the minimum tax.

See Minimum Tax Liability Gross Receipts Worksheet (MTLGR) below. You must complete Schedule F even if your operation is 100% in the District.

	Minimum Tax Liability Gross Receipts (MTLGR) Worksheet						
	DC gross receipts for minimum tax due an	d only for minimum tax due is computed as follows:					
1	Amount from numerator of DC sales apportionment factor from Schedule F, Line 1, Column 2 of D-20 or D-30. Financial institutions must use amount on Schedule F, Line 2, Column 2 of D-20.	1 \$					
2	Add the adjusted basis of any property sold for which the gain is included in Line 1	2 \$					
3	Add Non-Business income allocated to DC reported per D-20 Line 33 or D-30, Line 30	3 \$					
4	Total DC Gross Receipts (Add Lines 1, 2 and 3)	4 \$					

Minimum Tax

The minimum tax is \$250.00 if the amount on Line 4 above is \$1,000,000 or less

The minimum tax is \$1,000.00 if the amount on Line 4 above is greater than \$1,000,000

Which other DC forms or Schedules may corporations need to file?

<u>To download DC tax forms, visit www.taxpayerservicecenter.com and click on Tax Forms/Publications.</u>

Business Non-Refundable and Refundable Credits, Schedule UB

The various non-refundable and refundable credits available to businesses have been consolidated on Schedule UB. The total non-refundable credits from Schedule UB, Line 8 are reported on Line 38 of the D-20. The total refundable credits from Schedule UB, Line 11 are reported on Line 41(c).

FR-128, Extension of Time to File a DC Franchise or Partnership Return

You may request an extension of time to file your return by filing DC Form FR-128 (copy included in this booklet) no later than the return due date. An extension of time to file is not an extension of time to pay. You must pay any tax liability with the extension request, otherwise the request will be denied and you may be subject to penalties for failure to file or failure to pay. Do not use the federal extension form for DC tax purposes. For combined report filers, the designated agent shall file.

D-20ES, Declaration of Estimated Franchise Tax for Corporations

A corporation must file a declaration of estimated franchise tax if it expects its DC franchise tax liability to exceed \$1000 for the taxable year. See the Form D-20ES booklet, Declaration of Estimated Franchise Tax for Corporations, for payment vouchers and details. You will automatically be assessed interest for any underpayment of DC estimated tax.

Note: Electronic payment required. If the amount of the payment due for a period exceeds \$5,000, you must pay electronically. Visit www.taxpayerservicecenter.com.

D-2220 Underpayment of Estimated Franchise Tax By Businesses

You will be charged interest of 10 percent per year, compounded daily, on underpayments of estimated franchise tax installment payments. The charge is computed from the installment payment due date to the date the tax is paid. It is in addition to the penalty imposed for false statements. Interest will be assessed automatically by OTR's integrated tax system. For additional information, see Form D-2220, Underpayment of Estimated Franchise Tax by Businesses. Attach a completed Form D-2220 with your D-20.

FR-399 Qualified High Technology Companies (QHTC)

If you are a QHTC, you may be eligible for certain tax credits. You must file certain forms to claim these credits. For forms and details, see Publication FR-399, QHTC. The FR-399 is available online at www.taxpayerservicecenter.com and at 1101 4th Street, SW, Suite W270, Washington, DC 20024. If you are a QHTC, fill in the QHTC oval on page 1 of the D-20 and attach the QHTC-CERT form from the FR-399 to the D-20.

FR-1500 Ballpark Fee

If you have \$5 million or more in annual DC Gross Receipts, you must file and pay the ballpark fee, with Form FR-1500, electronically. For details, visit www.taxpayerservicenter.com, click on 'Business Tax Service Center', and then click on 'Ballpark-Related Fees and Taxes'. Note: Each member of a combined group is responsible for filing and paying its own ballpark fee.

Combined Reporting

The District of Columbia no longer permits consolidated filing for tax years beginning on and after January 1, 2011. For tax years beginning on and after January 1, 2011, a corporation or unincorporated business entity subject to tax in the District of Columbia, engaged in a unitary business with one or more corporations or unincorporated business entities, is required to file a combined report pursuant to D.C. Official Code §47-1805.02a.

Combined reporting is a tax reporting method where all of the members of a unitary group are required to determine their net income based on the activities of the unitary group as a whole. Unitary group members will calculate their taxable net income derived from the unitary business as its apportioned share of the income or loss of the combined group engaged in the unitary business.

A "Unitary business" means a single economic enterprise that is made up either of separate parts of a single business entity or of a commonly owned or controlled group of business entities that are sufficiently interdependent, integrated, and interrelated through their activities so as to provide synergy and mutual benefit that produces a sharing or exchange of value among them and a significant flow of value to the separate parts.

The combined reporting regulations are contained in DC Municipal Regulations (DCMR) Title 9, Taxation and Assessments, §§156 through 176. Examples and Schedules for combined reporting are located on our website at www.taxpayerservicecenter.com under the "Combined Reporting for Business Entities" tab.

When are your taxes due?

Non-exempt organizations must file their return and pay any tax due by:

- Calendar year filer March 15th; or
- Fiscal year filer the 15th day of the third month after the tax year closes.

Exempt organizations must file their return by the $15 \mathrm{th}$ day of the fifth month after the end of their tax year.

If the due date falls on a Saturday, Sunday or legal holiday, the return is due the next business day.

Taxable year

Enter the taxable year ending date on page 1 of the D-20. It can be either a calendar year or a fiscal year. You must receive OTR approval to change your taxable year. Combined report filers shall use the designated agent's tax year.

Filing your return By mail

If mailing a return with a <u>payment</u>, make the check or money order payable to the DC Treasurer. Write your FEIN, D-20, and the tax year on the payment. Staple your payment to the voucher Form D-2030P and fill in the oval for D-20 return. Do not attach the D-2030P and payment to the D-20 return. Send your return and payment to:

Office of Tax and Revenue PO Box 96166 Washington, DC 20090-6166 • If mailing a <u>no payment due or refund</u> return, send the return to:

Office of Tax and Revenue

PO Box 96148

Washington, DC 20090-6148

Mail labels for these two post office boxes are on the back flap of the return envelope included in this booklet.

Send in your original DC return with any schedules, not a copy. Fold your return once. Be sure to keep a copy for your records.

By accessing the DC Electronic Taxpayer Service Center (eTSC)

Corporate taxpayers may file the D-20ES, Declaration of Estimated Franchise Tax for Corporations, or the FR-128, Extension of Time to File a DC Franchise or Partnership Return by accessing the DC eTSC website. There is pre-registration required. Allow 5 - 7 business days for processing. Visit www.taxpayerservicecenter.com for information on completing an eTSC application.

Payment options

Refer to the Electronic Funds Transfer (EFT) Payment Guide available on the DC website at www.taxpayerservicecenter.com for instructions for electronic payments.

Payment options are as follows:

- Electronic check (e-check). E-check is similar to ACH debit, but it is a one-time transaction where the taxpayer provides the banking information at the time of payment instead of storing the information. There is no fee for business e-check payments. eTSC does not allow the use of foreign bank accounts for business e-check.
- ACH Credit. ACH credit is for business taxpayers only. There is no fee charged by OTR, but the taxpayer's bank may charge a fee. The taxpayer directly credits OTR's bank account. A taxpayer does not need to be eTSC registered to use this payment type, and does not need access to the website.

Note: When making ACH Credit payments through your bank, please use the correct tax type code (00250) and tax period ending date (YYMMDD).

- ACH Debit. ACH debit is for registered eTSC business taxpayers only. There is no fee. Taxpayers' bank routing and account numbers are stored within their online eTSC account. This account can be used to pay any existing liability. The taxpayer gives OTR the right to debit the money from their bank account. eTSC does not allow use of foreign bank accounts for business ACH Debit.
- Credit/Debit Card. The taxpayer may pay the amount owed using Visa®, MasterCard®, Discover® or American Express®. You will be charged a fee equal to 2.5% of the tax payment. The fee is paid directly to the District's credit card service provider. Payment is effective on the day it is charged.
- Check or money order. Include a check or money order, payable to the DC Treasurer, with your completed return. Write your Federal Identification Number (FEIN), daytime telephone number, '2015', and 'D-20' on the check or money order. Attach your payment to the Form D-2030P Payment Voucher provided in this booklet. Mail the D-2030P with, but not attached to the D-20 tax return, to:

Office of Tax and Revenue PO Box 96166 Washington, DC 20090-6166 **Note:** International ACH Transaction (IAT). Your payment cannot be drawn on a foreign account. Pay by money order (US dollars) or credit card instead.

Penalties and interest

OTR will charge -

- A penalty of 5% per month if you fail to file a return or pay any tax due on time. It is computed on the unpaid tax for each month or fraction of a month, that the return is not filed or the tax is not paid. It may not exceed an additional amount equal to 25% of the tax due;
- A 20% penalty on the portion of an underpayment of taxes
 if attributable to negligence. Negligence is failure to make a
 reasonable attempt to comply with the law or to exercise
 ordinary and reasonable care in preparing tax returns without the
 intent to defraud. One indication of negligence is failure to
 keep adequate books and records;
- Interest of 10% per year, compounded daily, on a late payment;
- A one-time fee to cover internal collection efforts on any unpaid balance. The collection fee assessed is 10% of the tax balance due after 90 days. Payment received by OTR on accounts subject to a collection fee are applied first to the collection fee, then to penalty, interest and tax owed;
- A civil fraud penalty of 75% of the underpayment which is attributable to fraud (see DC Code §47-4212).

Special circumstances

Office of Tax and Revenue (OTR) rulings

All rulings issued prior to December 31, 2002 were revoked. Taxpayers cannot rely on these rulings unless they were resubmitted to the OTR for review, and if approved, reissued. Direct any ruling questions to OTR, General Counsel at (202) 442-6500.

Special rules on depreciation and business expenses

For federal tax purposes, businesses may deduct additional bonus depreciation and additional IRC §179 expenses. DC does not allow the additional bonus depreciation deduction nor any additional IRC §179 expenses. Do not claim the 30 or 50 percent federal bonus depreciation deduction or the additional IRC §179 expenses on your DC return. DC limits the IRC §179 expense deductions to \$25,000 (\$40,000 for a Qualified High Technology Company (QHTC)).

Net operating loss (NOL) carry backs

For federal tax purposes, businesses are allowed to carry back a NOL.

DC does not allow NOL carry backs. Therefore, you may not claim a NOL carry back for DC tax purposes.

Discharge of indebtedness

The District has decoupled from the section of the American Recovery and Reinvestment Act of 2009 which allows exclusion and deferral from gross income of a discharge of indebtedness. For District tax purposes, a discharge of indebtedness results in income that is includible in gross income.

Amended returns

You must use the D-20 tax form of the year you are amending. Fill in the 'Amended Return' oval on Page 1 of the D-20 and complete the 'Tax Year Ending' box. Attach a detailed statement of the adjustment(s) and the amount of any refund received.

If the Internal Revenue Service (IRS) adjusts your federal return or if you file an amended federal return, you must file an amended DC return within 90 days of the IRS notice. If the federal adjustment makes you eligible for a DC tax refund, you must file for the DC refund within 180 days of the adjustment or filing the amended return.

Mail the amended return and any additional attachments to the:

Office of Tax and Revenue

PO Box 96166

Washington, DC 20090-6166

Final return

If you are not required to continue filing a return due to the ending of business operations, shade the 'fill in if final return' oval on the return. We will then cancel your filing requirement. Do not use this oval to indicate the return is the final for the period being reported.

Getting started

To complete the paper Form D-20, in general you will need:

- Copies of your completed 2015 federal forms, as applicable (1120, 1120s, 4797, 4562, etc.)
- A pen with black ink
- A calculator

Not all items will apply. Fill in only those that do apply. If an amount is zero, make no entry, leave the line blank.

All entries on the return and attachments are whole dollars only. Do not enter cents. Round cents to the nearest dollar. *Examples:*

\$10,500.50 rounds to \$10,501 \$10,500.49 rounds to \$10,500

Taxpayer Identification Number (TIN)

You must have a Federal Identification Number (FEIN).

A FEIN is a valid number issued by the IRS. To apply for a FEIN, get Form SS-4, Application for Employer Identification Number, or get this form online at www.irs.gov/businesses and clicking on 'Employer Identification Number' (EIN) under 'Starting a Business'. You may also get this form by calling 1-800-TAX-FORM (1-800-829-3676).

Corporate tax rate and minimum tax

The tax rate is 9.4 percent on your "Total District taxable income" on Line 36. The minimum tax is \$250 if your DC gross receipts are \$1 million or less. It is \$1,000 if your DC gross receipts are greater than \$1 million, even if you have a loss.

Incomplete forms will delay processing

Complete all items on the D-20 and all applicable schedules including combined schedules, otherwise OTR will send the return back to you for completion and resubmission.

Help us identify your forms and attachments

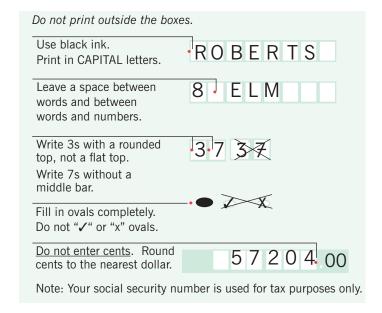
Write your FEIN, tax form number, tax period, business name and address on any statements submitted with the return or filed separately. The FEIN is used for tax administration purposes only.

For members filing under combined reporting, please ensure you place your EIN in the 'Federal Employer I.D. Number' field and the designated agent's FEIN in the 'Designated Agent FEIN' field. Fill in the oval for "Combined Report."

Note: The District will allow submission of the D-20 return using a CD. D-20 filers must print and submit pages 1-6, Schedule UB, Worldwide Combined Reporting Election Form and D-2220 if applicable. All other attachments must be on the CD. The CD should include a copy of the entire return and indicate on the CD the FEIN/EIN, tax year and tax type. Images on the CD should be submitted in PDF format.

Filling out the form

To aid us in processing your return, please follow these rules:



Personal information

Complete the personal information as instructed using CAPITAL letters and black ink. Use one block per letter, including using a space between address fields. Please write clearly; otherwise this can delay processing your return.

Assembling your D-20 return

- Do not staple or otherwise damage the Bar Code located in the upper right hand corner of this form and schedule(s) being attached;
- Do not cross out the tax year on the 2015 return. If you are not filing a 2015 D-20 Corporate Franchise Tax Return, do not use this booklet. Request a booklet for the specific year you are filing by calling our Forms Center at (202) 442-6546, or visit the Customer Service Center at 1101 4th Street, SW, 2nd floor, Washington, DC 20024. You also may visit our website at www.taxpayerservicecenter.com for prior year corporate franchise tax returns.
- Attach any other supporting forms or schedules as applicable:
 - o Worldwide Combined Reporting Election Form
 - o Other Combined Reporting Schedules as required
 - o Federal Schedule M-3
 - o Federal UTP
 - o Any other forms or schedules necessary to process the return.

- Staple check or money order to the D-2030P, Payment Voucher, completing the oval for the D-20.
- Use the appropriate mailing label on the back flap of the return envelope.

Signature and verification

An authorized officer or designated agent of the corporation must sign and date the return. A receiver, trustee, or assignee must sign any return that he/she is required to file for the corporation. Any person who prepared the return for compensation must also sign, date and provide the necessary identification number. If a firm or corporation prepares a return, it should be signed in the name of the entity. The signature requirement does not apply when a taxpayer's regular employee prepares the return. Please review the tax return before you allow a paid preparer to issue a return on your behalf.

Preparer Tax Identification Number (PTIN)

If you are a paid preparer, you are required to have a PTIN issued by the IRS. A PTIN is a number issued and authorized by the IRS to file a return on the taxpayers' behalf.

Explanation of terms

Business income

This is income from transactions and activities occurring in the regular course of the trade or business. It includes income from tangible and intangible property if the acquisition, management and disposition of the property are part of the taxpayer's regular trade or business operations. Income of any type — manufacturing income, compensation for services, sales income, interest, dividends, rents, royalties, gains, operating and non-operating income from any class or from any source — is business income if it is from transactions and activities occurring in the regular course of a trade or business. Whether income is business or non-business depends on the underlying transactions and activities — the elements of a particular trade or business. In general, transactions and activities that depend on or contribute to the operation of your enterprise constitute your trade or business.

Commercial domicile

The principal place from which you direct or manage your trade or business.

Compensation

Wages, salaries, commissions and other forms of remuneration paid or accrued to employees for personal services.

Non-business income

All income except business income.

Transportation company

Any business engaged in transporting persons, goods, or property of others for hire.

Sales

All gross receipts which are not required to be allocated.

Taxable in another state

For purposes of allocating and apportioning income among DC and another jurisdiction, you must be subject in that jurisdiction to:

- a net income tax,
- a franchise tax measured by net income,
- · a franchise tax for the privilege of doing business, or
- a corporate stock tax, or
- that state has the jurisdiction to subject the taxpayer to a net income tax regardless of whether in fact, the state does or does not.

Specific Instructions

Negative amounts

If you enter a negative amount on a line, fill in the oval to the left of the entry where it states: "Fill in if minus", do not enter a minus sign or parenthesis.

Allocation and apportionment required

You must complete Schedule F even if your operation is 100% in the District. Any corporation carrying on a trade or business in DC and other jurisdiction(s) must apportion its business income among DC and the other jurisdiction(s).

Apportion DC net income from trade or business activities using the appropriate apportionment factor. See D-20, page 4, Schedule F.

Non-business income

All non-business income must be allocated.

Allocating to DC

Allocate to DC items of non-business income from sources in DC. The following gains and losses from sales or other dispositions are allocated to DC:

- Real property located in DC (other than realty used in the trade or business whether held for sale or otherwise);
- Tangible personal property (other than any tangible personal property used in the trade or business whether held for sale or otherwise) if:
 - The property had a situs in DC at the time of sale; or
 - Your principal place of business is in DC and you are not taxable in the situs state; and
- Intangible personal property (other than intangible personal property of any kind used in the trade or business whether held for sale or otherwise) is allocable to DC if the taxpayer's principal place of business is in DC.

Allocate to DC net rents and royalties from real property located in DC.

Allocate to DC any non-business interest and dividends from sources in DC unless specifically excluded from tax and/or subject to apportionment as business income.

Allocate to DC, non-business rents and royalties from patents, copyrights, trademarks, service marks, secret processes and formulas, franchises and other like property (if not used in the trade or business). These royalties are allocated according to the patent's location or use, or where the copyrighted material is published or used. If DC is the principal place of business of a corporate entity, not subject to tax anywhere else, then the rent or royalty income is allocable to DC. Income from the sale of tangible personal property to the United States Government by a corporation that has its principal place of business outside DC is income from DC sources if the property is delivered from outside DC for use in DC.

All other non-business income derived from sources in DC is allocable to DC.

Where income is allocable among DC <u>and other jurisdictions</u> allocate all expenses, losses and other deductions incurred in the production of the income in the same way. Losses incurred in the production of non-business income are allowable only if profits from the transaction would be taxable.

Gross Income

NOTE: When OTR requests that a statement be attached, the statement should show the source of the items making up the entry.

D-20, page 1, line-by-line

Line 1 Gross receipts, minus returns and allowances

Enter the total gross receipts from sales and operations, minus returns and allowances.

Line 2 Cost of goods sold and/or operations

Enter the figure from D-20, Schedule A, Line 7. If the production, manufacture, purchase, or sale of merchandise is an incomedetermining factor in the trade or business, you must take inventories of merchandise at the start and end of the tax year. You may value them at cost or market value, whichever is lower; or by another IRS-approved method. You must continue to use the method you choose until you get permission from the Office of Tax and Revenue to change. If the inventories do not agree with the balance sheet figures, attach a statement explaining any differences.

Cost of operations (where inventories are not an income–determining factor): If the amount entered on Line 2 includes an amount associated with the cost of operations, attach a detailed statement showing: (1) salaries and wages; and (2) other costs.

Line 3 Gross profit from sales and/or operations

Enter the result of Line 1 minus Line 2.

Line 4 Dividends

Enter the total of all dividends reported on D-20, page 3, Schedule B. Do not include Subpart F income (as defined in IRC §952); and dividends from wholly-owned subsidiaries.

Include on Line 29(a) all dividends from sources outside DC that are not trade or business income. Dividends received by corporations, financial institutions, or investment firms are business income not subject to allocation. Do not include dividends paid on securities issued by the United States or its instrumentalities, if it is non-business income.

Dividends received from the following corporations with their principal place of business in DC are non-business income:

- Corporations subject to this franchise tax;
- Insurance corporations, including bonding companies and real estate title insurance companies; and
- Banks, if the bank dividends were paid to a bank-holding company.

Line 5 Interest

Enter all the interest which the corporation received or is credited with during the tax year, including interest paid on obligations of a State, Territory of the United States, or any of their political subdivisions, except those of DC.

Exclude any interest income on obligations or securities issued by the United States or its instrumentalities which is included in income for federal tax purposes.

Interest received by a corporation not engaged in a trade or business in DC is not considered income from DC sources if it is from one of the following organizations with a principal place of business in DC:

Corporations subject to this franchise tax;

- Insurance corporations, including bonding companies and real estate title insurance companies: and
- Banks, if the bank interest was paid to a bank-holding company.

Report this non-business interest income on Line 29(a). When interest income is related to trade or business activity, carried on or engaged in, in DC enter it on Line 5, do not enter it on Line 29(a). Attach a statement providing the detailed description and amount.

Line 6 Gross rental income

Enter from D-20, page 5, Schedule I the gross rental income you received from real or personal property rental. Enter expenses such as repairs, interest, taxes and depreciation on the Schedule I.

Enter rental income related to a trade or business on Line 6, do not enter it on line 29(a).

Note: DC does not allow the additional bonus depreciation allowed under federal law and limits the additional IRC §179 expenses. If you claimed bonus depreciation on your federal return, adjust the depreciation you claim on the D-20 by that amount. Attach a computation showing that your DC claimed depreciation does not include the federal bonus depreciation and that the basis of the depreciated property for DC tax purposes has not been reduced by the additional federal bonus depreciation amount. DC allows a maximum of \$25,000 in IRC §179 expenses (\$40,000 for a QHTC). If you claimed these additional expenses on your federal return, reduce such expenses taken on your D-20 by that additional amount.

Line 7 Gross royalties

Report royalty income and related expenses on the D-20 in the same manner and detail as rental income and rental expenses. Royalties from patents you developed from the licensing of processes or a trade name and sales of know-how are business income.

Line 8(a) Net capital gain

Capital gains or losses are treated by DC in the same manner as they are for federal corporation income tax purposes. (See detailed instructions on federal Schedule D, Form 1120, U.S. Corporation Income Tax Return.) IRC §1231 gains are business income.

Note: Since the additional federal bonus depreciation is not allowed for DC tax purposes, recalculate the capital gain/loss you reported on your federal return without taking into account the additional federal bonus depreciation. Attach a statement showing the adjustment.

Note: Depreciation recapture is considered ordinary income and is to be reported on the D-20.

Line 8(b) Ordinary gain (loss) from Part II, Federal Form 4797 Enter the total ordinary gain (or loss) from federal Form 4797 Sales of Business Property. Attach a copy of your Form 4797 to the D-20.

Line 9 Other Income (loss)

Enter the total income not reported elsewhere on the return; attach a detailed statement. Enter any International Banking Facility income on Lines 9 and 29(a); attach a detailed statement listing the source of this income. Do not enter other income related to a trade or business on Line 29(a); enter it on line 9. Attach a statement.

Line 10 Total gross income

Enter the total of Lines 3 - 9.

Deductions

Line 11 Compensation of officers

Enter the total compensation for all officers shown on D-20, page 3, Schedule C. Include compensation for services rendered in any capacity, other than salaries connected with the production of income from U.S. Treasury securities included on Line 29(b).

Line 12 Salaries and wages

Enter all salaries and wages not deducted elsewhere on the return, except salaries connected with the production of income from U.S. Treasury securities. Also, do not include wages connected with computing the Economic Development Zone incentives credit, QHTC wage credit, and Bone Marrow Credit.

Line 13 Repairs

Enter the cost of incidental repairs, including labor, supplies and other items that do not add to the value of, or appreciably prolong, the property's life. You may charge a capital account for new buildings, machinery, equipment and/or permanent improvements or betterments that increase the value or appreciably prolong the life of the property.

Line 14 Bad debts

Report bad debts in the same manner as you report them for federal tax purposes. Attach a copy of any information you submitted with your federal return.

Line 15 Rent

Enter rent paid or accrued for business property in which you have no equity. If property is leased from an affiliated corporation, or from one of the stockholders, attach a statement giving the lessor's name and address, rent paid and a description of the property.

Line 16 Taxes

Enter taxes reported on D-20, page 3, Schedule D. Note: Taxes reported on your federal Form 1120 must be reported on Schedule D. Do not deduct these taxes:

- Income and excess profit taxes;
- · DC franchise tax; and
- Taxes assessed for local benefits of a kind tending to increase the value of the property assessed.

Payments to related parties

(Lines 17 and 22). DC legislation allows the deduction of certain interest and intangible expenses, including royalty expenses paid directly or indirectly to related parties if:

- the principal purpose of the payment was not the avoidance of tax;
- the payments were made at arm's length; and
- the related party paid income tax equal to or greater than 4.5 percent of the amount of interest or intangible expense in another jurisdiction.

You are allowed ordinary and necessary deductions if the income they are related to is subject to the DC corporation franchise tax and subject to IRC limitations either directly or through the inclusion of this income in the determination of the DC apportionment factor.

Line 17(a) Interest

Enter interest paid or accrued on business debt. If any interest income is not taxable, then the related interest expense is not deductible.

Line 17(b) Minus nondeductible payments to related entities

Subtract the nondeductible payments made to related parties. Refer to **Payments to Related Parties** instructions.

Line 18 Contributions and/or gifts

Enter contributions and/or gifts made in the tax year if no portion benefits any private stockholder or individual. The total amount claimed cannot be more than 15% of net income (Line 26) computed without regard to any deduction for contributions. Attach a statement with detailed information about contributions and gifts. Contribution and gift carry-overs are not allowed.

Note: a charitable expense incurred by a member of a combined group shall, to the extent allowable as a deduction pursuant to section 170 of the Internal Revenue Code of 1986, be subtracted first from the business income of the combined group, subject to the income limitations of that section applied to the entire business income of the group, and any remaining amount shall then be treated as a nonbusiness expense allocable to the member that incurred the expense, subject to the income limitations of that section applied to the nonbusiness income of that specific member.

Line 19 Amortization

Enter the amortization amount from your federal Form 4562 (or 4562FY), Depreciation and Amortization and attach a copy.

Line 20 Depreciation

Enter the depreciation amount from your federal Form 4562 subject to limits described herein on page 6 and in the note below.* The depreciation allowance does not apply to inventories, stock-intrade, or land. Use the same depreciation method on your DC return as that used on your federal return. Attach a copy of your Form 4562.

*Note: If you claimed the additional federal bonus depreciation amount and/or the additional IRC §179 expenses above \$25,000 on your federal return, do not claim them on your D-20. In addition, do not reduce the basis of the depreciable property for DC tax purposes by the additional write off and/or federal bonus depreciation. Attach a statement showing your write off and/or of the depreciation amount.

A QHTC may deduct the lesser of \$40,000 \underline{or} the actual cost of personal property, as described in IRC §179(d)(1).

Line 21 Depletion

Enter the depletion amount shown on your federal form. Attach an explanation of how you determined the depletion allowance.

Line 22(a) Royalty payments

Royalty payments are deductible only if paid to unrelated entities. See DC Code 47-1803.03(d)(7)(D)(v) for the definition of <u>related entity</u>. See DC Code 47-1803.03(d)(7)(B) for the <u>limited exceptions</u> to the general disallowance of such payments.

Line 22(b) Minus nondeductible payments to related entities

If you are the recipient of a related entity's royalty payments and you are filing a return and paying tax on these payments in the District, see the instructions for Line 24 to determine whether you can deduct any of the payment amount from your income.

D-20 page 2, line-by-line

Line 23 Pension, profit-sharing plans

Enter the contributions made to employees' pension, profit-sharing, stock bonus and annuity plans. These are deductible to the same extent as they are on your federal return.

Line 24 Other deductions

Enter advertising and other allowable deductions connected with the business of income production, subject to the DC corporation franchise tax. Enter deductions connected directly and indirectly with non-business income production, as well as International Banking Facility deductions, on Line 29(b). If you are the recipient of royalty, interest or other intangible payments from a related entity that has not deducted the payment amounts on their return and you are filing a return and paying tax on these payments in the District, enter expenses related to this income on Line 24.

Note: Relocation costs incurred by a QHTC are not deductible if the QHTC credits for relocation are taken.

Line 25 Total deductions

Enter the total of Lines 11-24.

Line 26 Net income

Subtract Line 25 from Line 10; enter the amount on Line 26.

Line 27 Net operating loss deduction (before year 2000)

Enter any DC net operating loss carried <u>forward</u> from a year before 2000. (DC does not allow net operating loss (NOL) carrybacks.) A form for claiming the NOL, D-20 NOL, is provided in this booklet. Complete NOL deduction form and attach with the return.

Line 28 Net income after net operating loss deduction

Subtract Line 27 from Line 26 and enter the result on Line 28. Also enter the amount on Line 35, if it is entirely from a DC trade or business.

Line 29(a) Non-business income

Enter non-business income on Line 29(a).

Line 29(b) Expense related to non-business income

Enter expenses related to non-business income. Include expenses related to the purchase or production of income from U.S. Treasury securities. Attach a detailed explanation of income and expense allocation.

Line 30 Net income subject to apportionment

Subtract Line 29(c) from Line 28

Line 31 DC apportionment factor

Enter the apportionment factor from Form D-20, Schedule F, column 3, Line 5

Line 32 Net income from trade or business apportioned to DC

Multiply Line 30 amount by Line 31 apportionment factor.

Line 33 Other income/deductions attributable to DC

Enter the Line 29(c) income/deduction attributable to the District.

Note: If you are a partner in a partnership that filed an unincorporated business franchise tax return and claimed a deduction for the salary allowance, you must add the post-apportioned distributive share of the unincorporated business salary allowance attributable to the partner under DC Code §47-1803.03(a)(11), and the unincorporated business exemption amount attributable to the partner under DC Code §47-1808.04, on Line 33 of the D-20. If filing a combined report, this amount will be reflected as an addition under the partner's column on Line 33 of Schedule 1 of the combined report.

Also you must include a statement to reflect the specific amounts for each of following items:

- portion of Line 29(c) attributable to DC;
- portion of unincorporated business salary allowance attributable to DC
- portion of unincorporated business exemption attributable to DC.

Line 34 - Total taxable income before apportioned NOL deduction

Line 32 plus or minus Line 33.

Line 35 Apportioned NOL deduction (for year 2000 and later)

Enter any DC apportioned net operating loss carry-forward occurring in the year 2000 or later. A form, D-20 NOL, for claiming the NOL is provided in this booklet. Complete the NOL deduction form and submit with this return.

Line 36 Total District taxable income

Enter the result of subtracting Line 35 from Line 34.

Line 37 Tax

Calculate the tax by multiplying any positive amount on Line 36 (Total District taxable income) by .0940. Enter the result on Line 37.

Line 38 Minus nonrefundable credits

Subtract the nonrefundable credits entered from Schedule UB, Line 8. Employers who hire at least 10 DC residents after January 1, 2010, and continue to employ such DC employees for at least one year for any business project that encourages, promotes and stimulates economic development in key economic sectors, may qualify for an annual job growth tax credit. See instructions for Schedule UB Business Credits on page 13.

Line 39 Total DC gross receipts

From Line 4 of (MTLGR) worksheet.

Line 40 Net tax

Line 37 minus Line 38. Enter the result on Line 40, except:

- 1. If Line 39 is less than or equal to \$1M and Line 40 is less than \$250, enter \$250
- 2. If Line 39 is greater than \$1M and Line 40 is less than \$1,000, enter \$1.000

Line 41 Payments and refundable credits

Enter on Line 41(b) the total amount of estimated franchise tax payments made in 2015, including any credit carry forward brought forward from a prior year. Attach an explanation of detailed payments to the return.

Note: The credits cannot be shared among combined group members.

Lines 42-45

Follow the instructions on the form.

Line 46 Amount to be refunded

Subtract Line 45 amount from Line 44 amount and enter the result on Line 46.

Line 47 Estimated Tax Interest

If you are filing Form D-2220, Underpayment of Estimated Franchise Tax By Businesses, with your D-20 return, include the underpayment interest in the amount you owe, enter the amount on Line 43, and pay the total amount with the return. Fill in the oval on Line 47, enter the amount due for underpayment of estimated franchise tax on Line 47, and attach the D-2220 to the return.

Form D-20 schedules

Schedule E – Reconciliation of the net income reported on Federal and DC Returns

Complete this schedule, and attach statement(s) to provide details and explain any differences between the net income reported on your federal return and that reported on your D-20.

Schedule F - DC apportionment Factor

All businesses other than financial institutions engaging in a trade or business both in and outside DC must use the single sales factor formula to apportion their business income. Businesses domiciled in DC and not subject to tax elsewhere must report 100% of their net business income as DC income and allocate 100% of their non-business income to DC. Businesses carrying on a trade or business in DC and in other jurisdictions must apportion trade or business income to DC. Multiply the total income by a fraction. The numerator is the taxpayer's total sales in DC during the tax year. The denominator is the taxpayer's total sales everywhere during the tax year. Sales other than sales of tangible personal property shall be apportioned to the District by using the market-based sourcing rules.

Financial institutions must use a two-factor formula, determined by multiplying the financial institution's base (net income for the tax year) by an apportionment fraction. The numerator is the sum of the payroll factor plus the gross income factor; the denominator is 2.

Sales factor

- The sales factor for all businesses except financial institutions and transportation companies is a fraction: the numerator is the taxpayer's total sales in DC during the tax year. The denominator is the taxpayer's total sales everywhere during the tax year.
- Financial institutions the sales factor is a fraction: the numerator is the financial institution's gross income in DC during the tax year. The denominator is the financial institution's total gross income during the tax year.
 - A financial institution whose commercial domicile is in DC and which is subject to tax in another jurisdiction, includes in the numerator of the DC income factor, any income which the other jurisdiction does not require to be included in the numerator of its income factor.
 - If the predominant part of the secured property is or will be located in DC, treat all interest, loan placement fees, discount, net gain and other forms of gross income from each loan, secured primarily by real estate, as located in DC.
 - If the loan originated in DC, treat all interest, loan placement fees, discount and net gain from unsecured loans and loans secured primarily by tangible or intangible personal property, or any resulting interest, as located in DC.
 - For any financial institution whose commercial domicile is in DC, treat income from securities, investments, money market instruments, or any other source not required to be apportioned to outside DC, as located in DC. This income includes, but is not limited to, interest, dividends and net gains.
 - Treat all fees, commissions, service charges and other forms
 of gross income from sales of depository or financial services
 as located in DC if the service is performed in DC. Include
 sales or services performed in two or more tax jurisdictions
 in the numerator of the jurisdiction where the most incomeproducing activity is performed, based on performance cost.

- If the property is located in DC, treat gross income from leases of tangible property as located in DC.
- If the financial institution's principal office is located in DC, then treat all income (previously described) that is located in a jurisdiction where the financial institution is not subject to tax as being located in DC.
- Transportation companies the sales factor is a fraction: the numerator is the total revenue units the company first received as originating or connecting traffic at a point in DC. Add to this the total of revenue units the company discharged or unloaded at a point in DC, upon termination of the transportation movement or upon transfer to a connecting carrier. The denominator is twice the total revenue units originated everywhere during the tax year. One ton of freight equals one revenue unit; ten passengers equal one revenue unit. If the company's revenue is predominantly from transporting passengers, you may use the number of passengers loaded and discharged, in place of the originating and terminating tonnage.
- Tangible personal property sales, including sales to the U.S. Government, are considered as taking place in DC, regardless of where title is transferred, F.O.B. point, or other sales conditions, if the property:
 - · Is delivered or shipped to a purchaser in DC; or
 - Has an ultimate destination in DC, after all transportation (including that of the purchaser's) is complete; or
 - Is delivered or shipped from an office, store, factory, warehouse or other storage place in DC to a purchaser in a jurisdiction outside DC — and you are not taxable in that jurisdiction.

Except for transportation companies, non-tangible personal property sales are considered to take place in DC if the income-producing activity or service is performed:

- · In DC; or
- The proportion of the income-producing activity or service performed in DC is greater than that performed in any other jurisdiction, based on performance cost.

Payroll factor

 Financial institutions — financial institutions must use a two-factor formula, determined by multiplying the financial institution's base (net income for the tax year) by an apportionment fraction. The numerator is the sum of the payroll factor plus the gross income factor; the denominator is 2.

The payroll factor is a fraction: the numerator is the total compensation the financial institution paid to or accrued for persons performing services in DC during the tax year. The denominator is the total compensation the financial institution paid or accrued elsewhere during the tax year. Compensation is paid in DC if it is paid to an employee located or having a regular presence in DC. Any compensation paid to an employee located in a state where the financial institution is not taxable is treated as paid in DC, if the institution's principle office is in DC.

The value of compensation paid or accrued other than cash is its fair market value on the date of the payment or accrual. Do not include in either the numerator or denominator any compensation paid or accrued to employees for personal services rendered in the production of non-business income. Also, do not include payments to independent contractors.

General

If your use of the income allocation and apportionment rules results in a tax that does not fairly represent your tax liability on income from your trade or business or from non-business sources in DC, you may petition for, or OTR may require, if reasonable:

- a separate accounting, unless the entity is conducting a unitary business;
- exclusion of one or more factors;
- inclusion of one or more factors that reflect the extent of your trade or business in DC; or
- use of any other method to effect a fair allocation and apportionment of income.

Schedule G - Balance sheets (page 4 of Form D-20)

Submit balance sheets for the start and end of the tax year. Conform them to the corporation's books and records and your federal return. Attach an explanation of any variation. For combined reporting you may submit a separate balance sheet for each member.

Schedule H-1 Reconciliation of income (Loss) per Books with income (Loss) per Return and H-2 Analysis of Unappropriated Retained Earnings per Books (page 5 of Form D-20)

Generally, these schedules must conform to the corresponding schedules on the federal form filed for the corporation. Use Schedule H-1 to reconcile the difference between the income (loss) per books with income (loss) per Federal return. Attach statement(s) to provide details.

NOTE: If you filed a federal Schedule M-3, Net Income (Loss) Reconciliation for Corporations with Total Assets of \$10 Million or More, with your Form 1120, attach a copy of it to your D-20.

Remember, attach all requested statements to your D-20 return.

Supplemental Information (page 6 of Form D-20)

Provide all the information requested in this schedule.

Worldwide Combined Reporting Election Form

If the Worldwide Combined Reporting Election Form is completed and submitted, ensure the "Fill in if Worldwide" oval is shaded on D-20, page 1. Submit this form with the initial year of election.

Schedule UB, Business Credits

Use this schedule to claim: the Economic Development Zone Incentives Credit (see instructions); QHTC credit (see instructions); the Organ and Bone Marrow donor credit (see below); the Job Growth Incentive Act credit (see below); the Alternative Fuel Infrastructure Installation Credit; and the Alternative Fuel Vehicle Conversion Credit (see below). The Organ and Bone Marrow Donor Act of 2006 provides a credit to an employer who allows an employee up to 30 days paid leave to donate an organ and up to 7 days paid leave to donate bone marrow. This is a non-refundable credit equal to 25% of the regular salary paid to the donor-employee during the leave period. This credit may not be used to reduce the required \$250 or \$1,000 minimum tax payment. An employer claiming this credit may not also deduct the salary paid the employee for the same leave period. This credit is not available if the employee is eligible for leave under the Family and Medical Leave Act of 1993.

The 2011 Budget Support Act of 2010 authorized funds for the Job Growth Incentive Act tax credits. The credit must be approved by the Mayor in advance of starting the project. The process for applying for the credit is found in DC Official Code §47-1807.54. The approval will provide the amount of the allowable credit and the periods for which the credit can be claimed if the employer continues to qualify. The

allowable approved amount of the credit can be claimed on Schedule UB. Business Credits. Line 4 for D-20 filers or Line 14 for D-30 filers.

In order to apply for the credit, the employer must be planning a project that:

- Will bring a net job growth to DC of at least 10 new jobs with an average yearly wage of at least 120% of the average yearly wage of DC residents;
- Will increase income tax and payroll revenue for DC;
- Will result in a retention of any new positions for at least one year; and
- Would not have occurred but for the job growth tax credit.

Beginning in 2014,through the taxable year ending December 31, 2026, there are 2 non-refundable credits allowed against DC Corporate Franchise Tax for: (1) alternative fuel infrastructure installation; and, (2) alternative fuel vehicle conversion. (See DC Code §47-1807.10 and §47-1807.11)

The alternative fuel infrastructure credit is a credit in the amount of 50% of the equipment and labor costs attributable to the purchase and installation of alternative fuel storage and dispensing or charging equipment on a qualified alternative fuel vehicle refueling property. The equipment and labor costs for which this tax credit may be claimed may not include costs associated with the purchase of land, access to land, the purchase of an existing qualified alternative fuel vehicle refueling property, or construction or purchase of any structure.

If the amount of the tax credit exceeds the tax otherwise due, the amount of the credit not used may be carried forward for up to 2 tax years. If the alternative fuel storage and dispensing equipment or charging equipment on a qualified alternative fuel vehicle refueling property is no longer used to dispense or sell alternative fuel to the public, any unused tax credit is forfeited and the taxpayer may not claim a tax credit for the portion of the tax year after the date on which the alternative fuel storage and dispensing equipment was no longer used to dispense or sell alternative fuel to the public.

The alternative fuel vehicle conversion credit is a credit in the amount of 50% of the equipment and labor costs attributable to the cost of converting a motor vehicle licensed in the District that operates on petroleum diesel or petroleum derived gasoline to a motor vehicle that operates on an alternative fuel. This credit is limited to \$19,000 per vehicle.

The term "Alternative fuel" means a fuel used to power a motor vehicle that consists of one or more of the following:

- a. At least 85% ethanol;
- b. Natural gas;
- c. Compressed natural gas;
- d. Liquefied natural gas;
- e. Liquefied petroleum gas;
- f. Biodiesel, excluding kerosene;
- g. Electricity provided by a vehicle-charging station; or
- h. Hydrogen.

The term "Qualified alternative fuel vehicle refueling property" means a property in the District that contains equipment available for use by the public for storing and dispensing alternative fuel, including charging electrically.

If you are claiming one of these credits complete the Commercial Form, Alternative Fuel Vehicle Conversion and Infrastructure Credits, available online at www.taxpayerservicecenter.com by clicking on 'Forms', '2015 Business Tax Forms and Publications'. Attach it to the D-20, Schedule UB.

Economic Development Zone Incentives Credit

Supporting Documentation Required If you are claiming an Economic Development Zone Incentives (EDZI) credit against your DC franchise tax liability, you MUST attach to your return:

- 1. A copy of the DC Council resolution approving the qualification for any credits claimed;
- 2. A certification of eligible employees issued by the DC Department of Employment Services; and
- 3. A completed EDZI Credit Worksheet.

If you do not have items 1 and 2, you do not qualify for this credit.

The EDZI Amendment Act allows a qualified business, under certain circumstances, to take various credits against its franchise tax liability. (The maximum annual credit is \$7500.) A qualified business is one that is approved as qualified under Section 5 of EDZI by the DC Office of Economic Development. You MUST complete the worksheet below and include it with the other attachments to your return. The following credits are allowed under EDZI to qualified businesses:

- A credit against the franchise tax in an amount equal to 50 percent of the wages of all certified employees who meet the requirements of Section 10(b) of EDZI;
- A credit against the franchise tax in an amount equal to 50 percent of the insurance premiums attributable to all employees for whom it obtains employer liability insurance under the District of Columbia Workers Compensation Act of 1979; and
- 3. A rent credit for lessors against the franchise tax. The credit allowed is the difference between the rental market value of the space leased to a licensed non-profit child care center and the actual rent stated in the lease agreement as indicated in the DC Council resolution approving the qualification of the business. A non-profit child care center is a child development center as defined in Section 10 of EDZI.

A credit carry forward for five years is available for any EDZI credit not used in a previous year. The maximum amount that may be claimed in any year is \$7500, including any carry forward.

Economic Development Zone	Incentives Credit Worksheet	(maximum an	nual credit allo	wable is \$7,500)
Column 1 - Credit Category	Column 2	Col	umn 3	Column 4
A. Certified employees wages	Total Wages \$	50% of Wages	Col. 2 x .50 =	\$
B. Certified (eligible employees) workers compensation liability insurance premiums	Total Premiums \$	50% of Premiums	Col. 2 x .50 =	\$
C. Child care center rent (lessor)	Rental market value Minus rent shown on lease agreement Total child care center credit			\$
	Total of Column 4 (if more than \$7,500), enter \$7,500)		\$
	Add any EDZI credit carry forward from	a previous year		\$
	Total EDZI credit (enter on Line 1, Sche	edule UB - maximu	m \$7500)	\$

Key Website Resources

DC Official Code

http://www.lexisnexis.com/hottopics/dccode/

DC Regulations

http://www.dcregs.dc.gov/

US Department of State Tax Exemption Cards

www.state.gov/ofm/tax/

DC Tax Forms/Publications

http://otr.cfo.dc.gov/page/tax-forms-and-publications

Mailing Address for Returns

http://otr.cfo.dc.gov/node/392882

Electronic Funds Transfer (EFT) Guide

http://otr.cfo.dc.gov/publication/electronic-funds-transfer-payment-guide-eft

NACHA Guidelines

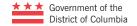
http://www.nacha.org/

Social Security Administration

http://ssa.gov/

Internal Revenue Service

http://www.irs.gov



2015 D-20 Corporation Franchise Tax Return

Important: Print in CAPITAL letters using black ink.

	Fede	eral Employer I.D. Number Nu	mber of business locations		OFFICIA	L USE ONLY Vendor ID# 0000
		In DC:	Outside DC:			
	Nam	ne of corporation			Tax period ending (MMYY)	Fill in if Amended Return
						Fill in if Final Return
	Busir	ness mailing address #1				Fill in if Certified QHTC
					You	Fill in if Combined Report u must fill in the Designated Agent info below
	Busi	ness mailing address #2				Fill in if Worldwide**
	City			C+	**W ate Zip Code + 4	orldwide form must be filed with this return
	City			31	ate Zip Code + 4	
	Desig	gnated Agent Name			Designated Agent	t FEIN
	• RE	AD INSTRUCTIONS BEFORE PREPARING RETURN • (To a	allocate non-business Items, see instruction	ions)		nter dollar amounts only. ine blank; if minus, enter amount and fill in oval.
	1	Gross receipts, minus returns and allowances			1 \$	00
	2	Cost of goods sold (from D-20 Schedule A) are (attach statement)	nd/or operations		2 \$	00
GROSS INCOME	3	Gross profit from sales and/or operations Line 1 minus Line 2	Fill in if minus:		3 \$	00
NC	4	Dividends from Form D-20, Schedule B			4 \$.00
SS	5	Interest (attach statement)		5 \$	00	
GRC	6	Gross rental income from D-20, Schedule I, Colum	nn 3		6 \$	00
	7	Gross royalties (attach statement)			7 \$	00
	8(a	Net capital gain (attach copy of federal Form 1120), Schedule D)		8(a)\$	00
		Ordinary gain (loss) from Part II, fed. Form 4797,			8(b)\$	00
	9	Other income (loss) (attach statement)	Fill in if minus:		9 \$	00
	10	Total gross income. Add Lines 3–9.	Fill in if minus:		10 \$	00
	11	Compensation of officers from Form D-20, Schee	dule C		11 \$	00
	12	Salaries and wages			12 \$	00
	13	Repairs		13 \$	00	
	14	Bad debts			14 \$	00
	15	Rent			15 \$	00
EDUCTIONS	16	Taxes from Form D-20, Schedule D			16 \$	00
CTIC	17(a) Interest payments	\$ 00)		
		b) Minus nondeductible payments to related entities) =	17c\$	00
	18	Contributions and/or gifts (attach statement)		18 \$	00	
	19	Amortization (attach a copy of your federal Form	4562)		19 \$	00
	20	Depreciation (attach a copy of your federal Form any additional federal sec. 179 expenses or bonus			20 \$	00
	21	Depletion (attach statement)			21 \$.00
	22(a) Enter royalty payments made	\$ 00)		
	(b) Minus nondeductible payments to related entities	s \$ 00) =	22c\$.00

Taxpayer Name: Federal Employer I.D. Number: DEDUCTIONS 24 25 ENTER DOLLAR AMOUNTS ONLY Pension, profit-sharing plans 23 00 Fill in if minus: 24 00 Other deductions (attach statement) 00 25 Total deductions. Add Lines 11-24 00 26 Net income Line 10 minus Line 25. Fill in if minus 26 00 27 27 Net operating loss deduction for years before 2000 00 28 Net income after net operating loss deduction 28 Fill in if minus: Line 26 minus Line 27 00 29 (a) Non-business income/state adjustment (attach statement) Fill in if minus: 29a 00 (b) Expense related to non-business income (attach statement) 29b (c) 29(a) minus 29(b)

Net income subject to apportionment Line 28 minus Line 29(c)

31 DC apportionment factor from Form D-20, Schedule F, col. 3, Line 5

Net income from trade or business Fill apportioned to DC Line 30 amount multiplied by Line 31 factor.

33 Other income/deductions attributable to DC Fill 00 (c) 29(a) minus 29(b) Fill in if minus: 29c 00 Fill in if minus: 30 31 32 00 Fill in if minus: 00 Other income/deductions attributable to DC 33 Fill in if minus: (attach statement - see instructions) 00 34 34 Total taxable income before apportioned NOL Fill in if minus: deduction Line 32 plus or minus Line 33. 00 35 35 Apportioned NOL deduction (Losses occurring in year 2000 and later) 36 Total DC taxable income. Line 34 minus Line 35. 00 Fill in if minus: 36 37 Tax 9.4% of Line 36 00 37 00 38 Minus nonrefundable credits from Schedule UB, Line 8 38 00 CREDI 00 40 Net tax. Line 37 minus Line 38. The minimum tax is \$250 if DC gross receipts 40 are \$1M or less or \$1,000 if DC gross receipts are greater than \$1M. Payments and refundable credits:

(a) Tax paid, if any, with request for paid with original return if this

(b) 2015 estimated franchise tax payments and refundable credits from Schedule Add lines 41(a), 41(b) and 41(c). 00 41a (a) Tax paid, if any, with request for an extension of time to file or paid with original return if this is an amended return 00 41b (b) 2015 estimated franchise tax payments 00 (c) Refundable credits from Schedule UB. Line 11 41c 00 42 00 Tax due. If Line 40 amount is larger, subtract Line 42 from Line 40. 43 Will this payment come from an account outside the U.S.? Yes No See instructions. 00 44 44 Overpayment. If Line 42 amount is larger, subtract Line 40 from Line 42. 00 45 Amount you want to apply to your 2016 estimated franchise tax 45 Amount to be refunded. Line 44 minus Line 45. 00 Will this refund go to an account outside of the U.S.? 46 00 47 Estimated tax interest (Fill in oval if D-2220 attached) 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 the information available to the preparer. PLEASE SIGN **HFRF** Title Date Telephone number of person to contact Officer's signature PAID PREPARER Preparer's signature (if other than taxpayer)

Date

Preparer's PTIN

Firm name

of Tax and Revenue fill in the oval.

Firm address

If you want to allow the preparer to discuss this return with the Office

Round cents to the nearest dollar. If an amount is zero, make no entry.

Noutid Certis to the hearest dollar. If all allount									
Schedule A - Cost of Goods Sold (See specific instru	ctions f	or Line 2.)		Sched	dule B - Dividend				
Inventory at beginning of year	. \$				NAME AND ADDR	ESS OF DECLARING C	ORPORATION	Α	MOUNT
Merchandise bought for manufacture or sale	- 1							\$	
Salaries and wages Other costs per books (attach statement)									
(Additional federal bonus depreciation is not allowable.)				\vdash					
5. Total	\$			<u> </u>					
6. Minus: Inventory at end of tax year	-			_					
7. Cost of goods sold (Enter here and on D-20 Line 2.)	\$								
Method of inventory valuation:									
				Total	Dividends			\$	
				Minu	ıs deduction for Su	bpart F Income.			
					us deduction for div		rom		
					AL (Enter here and)	\$	
Schedule C - Compensation of officers (See spec	cific in	struction	s for Lir	<u> </u>	·	,		<u> </u>	
				ol. 3		Corporation	Col. 6	\top	Col. 7
Col. 1 Name and Address of Officer		ol. 2 ial Title	Percent	t of Time			Amount		Expense
Name and Address of Officer				oted to siness	Col. 4 Common	Col.5 Preferred	of Compensation		Account Allowances
				%	%	%	\$	\$	
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				%	s %	%			
					1				
				0/		0/			
				%	%	%			
					1			+	
				%	%	%			
								\perp	
TOTAL COMPENSATION OF OFFICERS (Enter here a	nd on	D-20, L	ne 11.)			\$		
Schedule D - Taxes (See specific instructions fo	r Line	16.)							
EXPLANATION			OUNT			EXPLANATION		_	MOUNT
		\$		-				\$	
								+	
				-	TOTAL (Enter here	and on D-20, Lin	e 16.)	\$	
Schedule E - Reconciliation of the net income r		ed on F	ederal	and D	C returns			Ļ	
 Taxable income before net operating loss deduction and sp deductions (page 1 of your Federal corporate return). 	ecial	\$		7.	Total DC taxable in	come reported (fr	om D-20, Line 36). \$	
UNALLOWABLE DEDUCTIONS AND ADDITIONAL INCOME									
2. Income taxes (see specific instructions for line 16).				NC	ON-TAXABLE INCO	ME AND ADDITIO	NAL DEDUCTION	S	
3. DC income taxes and franchise taxes imposed by DC Revenue Act of 1947, as amended.			8. Net income apportioned or allocated to outside DC.						
4. Interest on obligations of states, territories of the U.S. or any Political Subdivision thereof.					Other non-taxable including NOL (ite		ional deductions		
5. Other unallowable deductions and additional income (item include additional federal bonus depreciation and additional					(a)			L	
IRC § 179 expenses).	u 1								
(a)(b)				\dashv	(b)			\vdash	
6. TOTAL of Lines 1–5.		Φ.		 17	D. TOTAL of Lines 7	7 & and 0		_	
O. TO THE OF EIROS I J.		\$		1 1	J. TOTAL OF LINES	, o and J.		\$	



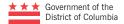
				<u> </u>	
Schedule F - DC apportionment factor (See instructions)					
Round cents to the nearest dollar. If an amount is zero, leave the lin	e blank.			Carry all	factors to six decimal places
For all businesses other than financial institutions:	Column 1 TOTAL		Column 2 in DC		Column 3 Factor (Column 2 divided by Column 1)
SALES FACTOR: All gross receipts of the business other than gross receipts from non-business income.	\$	00 \$		00	• (Column 2 divided by Column 1)
For Financial Institutions:					
2. SALES FACTOR: All gross income of the financial institution other than gross income from non-business income.	\$.00 \$		00	
PAYROLL FACTOR: Total compensation paid or accrued by the financial institution.	\$	00 \$.00	
4. SUM OF FACTORS: (For Financial Institutions add Lines 2 and 3	of Column 3)				
 DC APPORTIONMENT FACTOR: For businesses other than fi Line 31. For financial institutions divide Line 4, Column 3 by 2. If 					

Schedule 1 - Combined Report Tax Due									
Tax Due Combined Group Report	Tax Due Tax Due Total Before Eliminations		Tax Due Designated Agent	Tax Due Member 1					
Tax Due Member 2	Tax Due Member 3	Tax Due Member 4	Tax Due Member 5						

edule G - Balance Sheets	Beginning of	Taxable Year	End of Tax	kable Year
	(A) Amount	(B) Total	(A) Amount	(B) Total
1. Cash				
2. Trade notes and accounts receivable				
(a) MINUS: Allowance for bad debts				
3. Inventories				
4. Gov't obligations: (a) U.S. and its instrumentalities				
(b) States, subdivisions thereof, etc				
5. Other current assets (attach statement)				
6. Loans to stockholders				
7. Mortgage and real estate loans				
8. Other investments (attach statement)				
9. Buildings and other fixed depreciable assets				
(a) MINUS: Accumulated depreciation		1		
10. Depletable assets				
(a) MINUS: Accumulated depletion		1		
11. Land (net of any amortization)				
12. Intangible assets (amortizable only)				
(a) MINUS: Accumulated amortization		1		
13. Other assets (attach statement)]		
14. TOTAL ASSETS				
15. Accounts payable				
16. Mortgages, notes, bonds payable in less than 1 year.				
17. Other current liabilities (attach statement)				
18. Loans from stockholders				
19. Mortgages, notes, bonds payable in 1 year or more				
20. Other liabilities (attach statement)				
21. Capital stock: (a) Preferred stock				
(b) Common stock		1 1		
22. Paid-in or capital surplus (attach statement)				
23. Retained earnings - Appropriated (attach statement)				
24. Retained earnings - Unappropriated				
25. MINUS: Cost of treasury stock		()		(
26. TOTAL LIABILITIES AND CAPITAL				

1. Net income per books		1 – Reconciliation of In			OURS WILL HICO			oks this year and not	\$	
3. Excess of capital losses over capital gains		Net income per books			included in	n this return (itemize).	Ψ		
5. Expenses recorded on books this year and not deducted on this return (itemize). (a) Depreciation \$	Excess of capital losses over capital gains A. Taxable income not recorded on books this				Tax-exemp	ot interest \$_				
10. Tarable Income (tederal Form 1120, page 1, line 28 should equal Line 6 minus Line 9 of this Schedule) Schedule H-2 – Analysis of Unappropriated Retained Earnings per Books 1. Balance at beginning of year . \$ 5. Distributions: (a) Cash (b) Stock . (c) Property	deducted o	deducted on this return (itemize).				against bo (a) Dep (b) Dep	ok income the reciation	is year (itemize)\$		
Schedule H-2 – Analysis of Unappropriated Retained Earnings per Books 1. Balance at beginning of year	(b) Depi	etion\$							\$	
1. Balance at beginning of year \$ 2. Net income per books	6. TOTAL of L	ines 1 through 5		\$					\$	
2. Net income per books	Schedule H-	2 – Analysis of Unappro	opriated R	etained	Earnings per B	ooks				
3. Other increases (itemize)	1. Balance at	beginning of year		\$		5. Distribution	ns: (a) Ca	sh	\$	
3. Other increases (itemize)	2. Net income	per books					(b) Sto	ock		
6. Other decreases (itemize). 7. TOTAL of Lines 5 and 6							(c) Pro	operty		
Schedule I – Income from Rent Col. 1 Address of Property Col. 2 Kind of Property Col. 3 Gross Amount of Rent \$ \$ Col. 4 Depreciation* or Amortization (Per Federal Form 4562) \$ \$ \$ Col. 5 Repairs (Explain in Sch. I-1) \$ \$ \$ \$ \$ \$ \$ The property or Amount of Rent (Explain in Sch. I-1) \$ \$ \$ \$ \$ Col. 5 Repairs (Explain in Sch. I-1) \$ \$ \$ \$ \$ \$ The property or Amortization (Per Federal Form 4562) \$ \$ \$ \$ \$ \$ Col. 5 Repairs (Explain in Sch. I-1) \$ \$ \$ \$ \$ \$ The property or Amount of Rent (Explain in Sch. I-1) \$ \$ \$ \$ \$ \$ Col. 5 Repairs (Explain in Sch. I-1) \$ \$ \$ \$ \$ The property or Amount of Rent (Explain in Sch. I-1) \$ \$ \$ \$ \$ \$ \$ Col. 5 Repairs (Explain in Sch. I-1) \$ \$ \$ \$ The property or Amount of Rent (Explain in Sch. I-1) \$ \$ \$ \$ \$ \$ \$ \$ Col. 5 Repairs (Explain in Sch. I-1) \$ \$ \$ \$ \$ The property or Amount of Rent (Explain in Sch. I-1) \$ \$ \$ \$ \$ \$ \$ Col. 5 Repairs (Explain in Sch. I-1) \$ \$ \$ \$ \$ \$ \$ \$ The property or Amount of Rent (Explain in Sch. I-1) \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$						6. Other decr	eases (itemize	e)		
Schedule I – Income from Rent Col. 1 Address of Property Col. 2 Kind of Property Col. 3 Gross Amount of Rent \$ \$ Col. 4 Depreciation* or Amortization (Per Federal Form 4562) \$ \$ \$ Col. 5 Repairs (Explain in Sch. I-1) \$ \$ \$ \$ \$ \$ \$ The property or Amount of Rent (Explain in Sch. I-1) \$ \$ \$ \$ \$ Col. 5 Repairs (Explain in Sch. I-1) \$ \$ \$ \$ \$ \$ The property or Amortization (Per Federal Form 4562) \$ \$ \$ \$ \$ \$ Col. 5 Repairs (Explain in Sch. I-1) \$ \$ \$ \$ \$ \$ The property or Amount of Rent (Explain in Sch. I-1) \$ \$ \$ \$ \$ \$ Col. 5 Repairs (Explain in Sch. I-1) \$ \$ \$ \$ \$ The property or Amount of Rent (Explain in Sch. I-1) \$ \$ \$ \$ \$ \$ \$ Col. 5 Repairs (Explain in Sch. I-1) \$ \$ \$ \$ The property or Amount of Rent (Explain in Sch. I-1) \$ \$ \$ \$ \$ \$ \$ \$ Col. 5 Repairs (Explain in Sch. I-1) \$ \$ \$ \$ \$ The property or Amount of Rent (Explain in Sch. I-1) \$ \$ \$ \$ \$ \$ \$ Col. 5 Repairs (Explain in Sch. I-1) \$ \$ \$ \$ \$ \$ \$ \$ The property or Amount of Rent (Explain in Sch. I-1) \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$									-	
Schedule I – Income from Rent Col. 2 Kind of Property Col. 3 Gross Amount of Rent \$ \$ \$ \$ Col. 5 Repairs (Explain in Sch. I-1) 1. \$ \$ \$ \$ \$ \$ \$ 2						7. TOTAL of L	ines 5 and 6		\$	
Col. 1 Address of Property Col. 2 Kind of Property Col. 3 Gross Amount of Rent Col. 4 Depreciation* or Amortization (Per Federal Form 4562) Col. 5 Repairs (Explain in Sch. I-1) S S S S Col. 6 Taxes, Interest and other Expenses* (Explain in Sch. I-1) S S S S S S S Col. 5 Repairs (Explain in Sch. I-1) S S S S S S S S S S Col. 6 Taxes, Interest and other Expenses* (Explain in Sch. I-1) S S S S S S S S S S S S Col. 6 Taxes, Interest and other Expenses* (Explain in Sch. I-1) S S S S S S S S S S S S S	4. TOTAL of L	ines 1, 2 and 3.		\$		8. Balance at end of year (Line 4 minus Line 7)		\$		
Col. 1 Address of Property Col. 2 Kind of Property Col. 3 Gross Amount of Rent Col. 4 Depreciation* or Amortization (Per Federal Form 4562) Col. 5 Repairs (Explain in Sch. I-1) S S S S Col. 6 Taxes, Interest and other Expenses* (Explain in Sch. I-1) S S S S S S S Col. 5 Repairs (Explain in Sch. I-1) S S S S S S S S S S Col. 6 Taxes, Interest and other Expenses* (Explain in Sch. I-1) S S S S S S S S S S S S Col. 6 Taxes, Interest and other Expenses* (Explain in Sch. I-1) S S S S S S S S S S S S S										
Col. 1 Address of Property Col. 2 Kind of Property Col. 3 Gross Amount of Rent Federal Form 4562) \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	Schedule I -	- Income from Rent								
2. 3. 4. 5. 6. 7. TOTAL (Enter the total of Column 3 on D-20, \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	Col. 1	Address of Property				or Amort	ization (Per		and oth	er Expenses*
2	1.			Ş	\$	\$		\$	\$	
3										
4				-						
5										
6	4									
7. TOTAL (Enter the total of Column 3 on D-20, \$ \$ \$ \$ \$ \$ \$ \$ \$ Line 6. Enter total of Column 4, 5, and 6 on appropriate deduction lines.) *excludes federal 30% and 50% bonus depreciation and additional IRC §179 expenses deductions. Schedule I-1 — Explanation of deductions claimed in Columns 5 and 6 of Schedule I. Column No. Explanation Amount No. Explanation Amount	5									
Line 6. Enter total of Column 4, 5, and 6 on appropriate deduction lines.) *excludes federal 30% and 50% bonus depreciation and additional IRC §179 expenses deductions. Schedule I-1 – Explanation of deductions claimed in Columns 5 and 6 of Schedule I. Column No. Explanation Amount No. Explanation Amount	6.									
Column No. Explanation Amount No. Explanation Amount	Line 6. Enter	total of Column 4, 5, and	6 on appro	priate de	duction lines.)	•	ductions.	\$	\$	
No. Explanation Amount No. Explanation Amount	Schedule I-1	l – Explanation of deduc	ctions clain	ned in C	columns 5 and 6	of Schedule	e I.			
\$ \$ \$ \$		Explanati	ion		Amount			Explanation		Amount
					\$					\$
					ļ*					ļ -
							ļ			ļ

Supplemental Information					
STATE OR COUNTRY OF INCORPORATION	2.(a) DATE OF INCORPORATION	2.(b) D	ATE BUSINESS BEGAN IN DC		R WHERE FEDERAL RETURN IOD COVERED BY THIS RETURN
4. THE CORPORATION'S BOOKS ARE IN THE CARE OF –		5. LOC	ATED AT –		
6. During 2015, has the Internal Revenue Service adjustments to your federal income tax return, returns with the IRS? YES NO If "YES", please submit separately a detailed strought submitted, to the address shown on page 7 und	or did you file any amende atement, unless previously	d	If you have already pro a detailed statement, o it was sent.		MM/DD/YYYY
7. Is this corporation unitary with a partnership or another corporation?	YES	O NO	If yes, explain:		
8. Is this return made on the accrual basis?	YES	NO	If no, indicate basis	used: Cash Bas	ois Other (specify)
9. Did you file a franchise tax return with DC for the year 2014?	YES	○ NO	If no, state reason		
10. Did you withhold DC income tax from wages pa DC resident employees during 2015?	id to your YES	NO	If no, state reason:		
11. Did you file annual information returns, federal f and 1099, relating to payment of dividends and 2015?		NO			
12. (a) Has the business been terminated?	YES	NO	If yes, explain and g	ive date:	
(b) Have you moved out of DC?	YES	○ NO			
13. Did you file an annual ballpark fee return?	YES	NO			

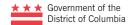


Worldwide Combined Reporting Election Form



FEIN/SSN of Designated Agent Fill in if FEIN Fill in if SSN	Taxable Year YYYY	Worldwide
Name of Designated Agent		Telephone number
Business address line #1		
Business address line #2		
City	State Zi	p code +4
In accordance with the provisions of DC Official Co hereby made to report on a worldwide unitary com		combined reporting regulations, election is
A worldwide unitary combined reporting election is thereafter for a period of ten years.	is binding for and applicab	le to the tax year it is made and all years
It may be withdrawn or reinstituted after withdraw request for reasonable cause based on extraordina policy and only with the written permission from t	ary hardship due to unfore	seen changes in DC tax statutes, law or
Upon the expiration of the ten-year period, a taxpa election.	ayer may withdraw from th	ne worldwide unitary combined reporting
Withdrawal must be made in writing within one ye years, subject to the same conditions as applied to		election and is binding for a period of ten
Date Beginning Tax Period: MMDDYYYY	Date Ending	g Tax Period: MMDDYYYY
Authorized Signature		
Printed Name	Date	
Jnder penalties of law, I declare that the designated agent has authori	ized me to sign on behalf of all m	embers of the combined group, and that I have examine

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Important: Print in CAPITAL letters using black ink. Attach to your Form D-20 or D-30.



OFFICIAL USE ONLY Vendor ID# 0000

Tax	payer Identification Number Fill in if FEIN Fill in if filing a D-20			
	Fill in if SSN Fill in if filing a D-30	Return		
Ent	er your business name			
D-2	20 Return			
No	nrefundable Credits			0.0
1	Economic Development Zone Incentives Credit (see worksheet).	1	\$	00
2	Qualified High Technology Company Credit from Part F, DC Form D-20CR, from pub. 399.	2	\$	00
3	Organ and Bone Marrow Donor Credit (see computation on reverse side). This credit may not be applied against the required minimum tax.	3		.00
4	Job Growth Incentive Act	4		00
5	Enter alternative fuel credits. See instructions			
	5(a) Alternative fuel infrastructure. # of stations	.00		
	5(b) Alternative fuel vehicle conversion. # of vehicles	00		
6	Total alternative fuel credits. Add Lines 5(a) and 5(b) only and enter here.	6		00
7	RESERVED	7		00
8	Total the nonrefundable D-20 credits, enter here and on Form D-20, Line 38.	8	\$	00
	fundable Credits	Ü		
9	Qualified High Technology Company Retraining Costs Credit from Part G, DC Form D-20CR, from pub. 399.	9		.00
10	RESERVED	10	o \$	00
11	Total the refundable D-20 credits, enter here and on Form D-20, Line 41(c).	11	1 \$	00
D-3	30 Return			
_	nrefundable Credits			00
	Economic Development Zone Incentives Credit (see worksheet).	12		00
13	Organ and Bone Marrow Donor Credit (see computation on reverse side). This credit may not be applied against the required minimum tax.	13	3 \$.00
14	Job Growth Incentive Act	14	4 \$	00
15	Enter alternative fuel credits. See instructions			
	15(a) Alternative fuel infrastructure. \$ # of stations	.00		
	15(b) Alternative fuel vehicle conversion # of vehicles	00		
16	Total alternative fuel credits. Add Lines 15(a) and 15(b) only and enter here.	16	6 \$	00
17	RESERVED	17		00
	Total the nonrefundable D-30 credits, enter here and on Form D-30, Line 38.	18		00
_				

Schedule UB Instructions

Qualified High Technology Companies

If you claim credits on Lines 2 or 9 above, attach a copy of your DC Form D-20CR to the D-20.

Organ and Bone Marrow Donor Credit

An employer who provides an employee with paid leave to donate an organ (up to 30 days leave) or to donate bone marrow (up to 7 days leave) is eligible to claim a credit against the franchise tax. The credit is equal to 25% of the salary paid to the employee during the leave period. If you take the credit, you may not also deduct the salary paid to the donor employee for that period. This credit is not available if the employee is eligible for leave under the Family and Medical Leave Act of 1993.

Organ and Bone Marrow Donor Credit — Computation —								
Column 1 Credit Category	Column 2 Total Paid Leave	Column 3 Leave Credit Calculation	Column 4 Total Credit					
Organ Donor(s)	Total Paid Leave Wages \$	Col 2 amt. × 25% \$	\$					
Bone Marrow Donor(s)	Total Paid Leave Wages \$	Col 2 amt. × 25% \$	\$					
		Total of Col. 4. Enter here and on Schedule UB.*						

^{*}Line 3 of Schedule UB for D-20 filers Line 13 of Schedule UB for D-30 filers



2015 D-20 Corporation

Franchise Tax Return



Important: Print in CAPITAL letters using black ink.

	Fed	eral Employer I.D. Number	Number of bus	siness locations	OFFIC	IAL USE ONLY Vendor ID# 0000
			In DC:	Outside DC:		
	Nan	ne of corporation			Tax period ending (MMYY)	Fill in if Amended Return
						Fill in if Final Return
	Busir	ness mailing address #1				Fill in if Certified QHTC
					**	Fill in if Combined Report* 'ou must fill in the Designated Agent info below
	Busi	ness mailing address #2				Fill in if Worldwide**
	City					Worldwide form must be filed with this return
	City				State Zip Code + 4	
	Desi	gnated Agent Name			Designated Age	ent FEIN
	•RE	AD INSTRUCTIONS BEFORE PREPARING RET	TURN• (To allocate non-	business Items, see instructions)	If amount is zero, leave	Enter dollar amounts only. e line blank; if minus, enter amount and fill in oval.
	1	Gross receipts, minus returns and al	llowances		1 \$.00
	2	Cost of goods sold (from D-20 Sche (attach statement)	dule A) and/or ope	rations	2 \$	00
GROSS INCOME	3	Gross profit from sales and/or operations 1 minus Line 2	tions	Fill in if minus:	3 \$	00
<u>N</u>	4	Dividends from Form D-20, Schedule B			4 \$.00
SSC	5	Interest (attach statement)			5 \$.00
GRO	6	Gross rental income from D-20, Sched	ule I, Column 3		6 \$	00
	7	Gross royalties (attach statement)			7 \$.00
	8 (a	Net capital gain (attach copy of federal	Form 1120, Schedule	e D)	8(a)\$.00
	(b	Ordinary gain (loss) from Part II, fed. Fo	orm 4797, (attach co _l	py) Fill in if minus:	8(b)\$.00
	9	Other income (loss) (attach statemen	t)	Fill in if minus:	9 \$.00
	10	Total gross income. Add Lines 3–9.		Fill in if minus:	10 \$.00
	11	Compensation of officers from Form D	0-20, Schedule C		11 \$.00
	12	Salaries and wages			12 \$.00
	13	Repairs			13 \$.00
	14	Bad debts			14 \$.00
	15	Rent			15 \$.00
DEDUCTIONS	16	Taxes from Form D-20, Schedule D			16 \$	00
CT	17(a) Interest payments	\$	00		
EDC	(b) Minus nondeductible payments to rela	ated entities \$	00 =	17c\$.00
	18	Contributions and/or gifts (attach sta	itement)		18 \$.00
	19	Amortization (attach a copy of your fe	deral Form 4562)		19 \$	00
	20	Depreciation (attach a copy of your fed any additional federal sec. 179 expenses			20 \$	00
	21	Depletion (attach statement)			21 \$	00
	22(a) Enter royalty payments made	\$	00		
	(b) Minus nondeductible payments to rela	ated entities \$	00 =	22c\$	00

Taxpayer Name: Federal Employer I.D. Number: DEDUCTIONS 24 25 ENTER DOLLAR AMOUNTS ONLY Pension, profit-sharing plans 23 00 Fill in if minus: 24 00 Other deductions (attach statement) 00 25 Total deductions. Add Lines 11-24 00 26 Net income Line 10 minus Line 25. Fill in if minus 26 00 27 27 Net operating loss deduction for years before 2000 00 28 Net income after net operating loss deduction 28 Fill in if minus: Line 26 minus Line 27 00 29 (a) Non-business income/state adjustment (attach statement) Fill in if minus: 29a 00 (b) Expense related to non-business income (attach statement) 29b (c) 29(a) minus 29(b)

Net income subject to apportionment Line 28 minus Line 29(c)

31 DC apportionment factor from Form D-20, Schedule F, col. 3, Line 5

Net income from trade or business Fill apportioned to DC Line 30 amount multiplied by Line 31 factor.

33 Other income/deductions attributable to DC Fill 00 (c) 29(a) minus 29(b) Fill in if minus: 29c 00 Fill in if minus: 30 31 32 00 Fill in if minus: 00 Other income/deductions attributable to DC 33 Fill in if minus: (attach statement - see instructions) 00 34 34 Total taxable income before apportioned NOL Fill in if minus: deduction Line 32 plus or minus Line 33. 00 35 35 Apportioned NOL deduction (Losses occurring in year 2000 and later) 36 Total DC taxable income. Line 34 minus Line 35. 00 Fill in if minus: 36 37 Tax 9.4% of Line 36 00 37 00 38 Minus nonrefundable credits from Schedule UB, Line 8 38 00 CREDI 00 40 Net tax. Line 37 minus Line 38. The minimum tax is \$250 if DC gross receipts 40 are \$1M or less or \$1,000 if DC gross receipts are greater than \$1M. Payments and refundable credits:

(a) Tax paid, if any, with request for paid with original return if this

(b) 2015 estimated franchise tax payments and refundable credits from Schedule Add lines 41(a), 41(b) and 41(c). 00 41a (a) Tax paid, if any, with request for an extension of time to file or paid with original return if this is an amended return 00 41b (b) 2015 estimated franchise tax payments 00 (c) Refundable credits from Schedule UB. Line 11 41c 00 42 00 Tax due. If Line 40 amount is larger, subtract Line 42 from Line 40. 43 Will this payment come from an account outside the U.S.? Yes No See instructions. 00 44 44 Overpayment. If Line 42 amount is larger, subtract Line 40 from Line 42. 00 45 Amount you want to apply to your 2016 estimated franchise tax 45 Amount to be refunded. Line 44 minus Line 45. 00 Will this refund go to an account outside of the U.S.? 46 00 47 Estimated tax interest (Fill in oval if D-2220 attached) 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 the information available to the preparer. PLEASE SIGN **HFRF** Title Date Telephone number of person to contact Officer's signature PAID PREPARER Preparer's signature (if other than taxpayer)

Date

Preparer's PTIN

Firm address

If you want to allow the preparer to discuss this return with the Office

Firm name

of Tax and Revenue fill in the oval.

Round cents to the nearest dollar. If an amount is zero, make no entry.

Schedule A - Cost of Goods Sold (See specific instr	uctions f	or Line 2.)		Sched	ule B - Dividend	s (See specific instri	uctions for Line 4.)		
Inventory at beginning of year	T \$				NAME AND ADDR	ESS OF DECLARING C	ORPORATION	Αſ	MOUNT
								\$	
Merchandise bought for manufacture or sale									
3. Salaries and wages									
4. Other costs per books (attach statement) (Additional federal bonus depreciation is not allowable.)	··			 					
5. Total	. \$			_					
6. Minus: Inventory at end of tax year	·			<u> </u>					
7. Cost of goods sold (Enter here and on D-20 Line 2.)	\$								
Method of inventory valuation:									
				Total	Dividends			\$	
				Minus	s deduction for Su	bpart F Income.			
					s deduction for div y-owned subsidary		rom		
				ТОТА	L (Enter here and	on D-20, Line 4.)	\$	
Schedule C - Compensation of officers (See spe	cific in:	structions	s for Lir	ne 11.)					
			$\overline{}$	ol. 3	Percent of (Col. 6	\top	Col. 7
Col. 1 Name and Address of Officer		ol. 2 ial Title		t of Time oted to	Stock (Owned Col.5	Amount		Expense Account
				siness	Common	Preferred	Compensation	\bot	Allowances
				%	%	%	\$	\$	
				%	%	%			
								+	
				%	%	%			
				%	%	%			
TOTAL COMPENSATION OF OFFICERS (Enter here a	and on	D-20. Li	ine 11.)			\$		
Schedule D - Taxes (See specific instructions for				,			*		
EXPLANATION			OUNT	Т		EXPLANATION		A	MOUNT
		\$						\$	
				+				+	
				Т	OTAL (Enter here	and on D-20, Lin	e 16.)	\$	
Schedule E - Reconciliation of the net income		ed on F	ederal	and D	C returns				
 Taxable income before net operating loss deduction and sideductions (page 1 of your Federal corporate return). 	ресіаі	\$		7.1	Total DC taxable in	come reported (fr	om D-20, Line 36	5). \$	
UNALLOWABLE DEDUCTIONS AND ADDITIONAL INCOME									
2. Income taxes (see specific instructions for line 16).				NO	N-TAXABLE INCO	ME AND ADDITIO	NAL DEDUCTION	IS	
DC income taxes and franchise taxes imposed by DC Revenue Act of 1947, as amended.				1.8	Net income apport	ioned or allocated	I to outside DC.		
4. Interest on obligations of states, territories of the U.S. or any Political Subdivision thereof.					Other non-taxable ncluding NOL (ite		ional deductions		
 Other unallowable deductions and additional income (iten include additional federal bonus depreciation and addition IRC § 179 expenses). 	nal			((a)			-	
(a)					(b)			<u> </u>	
(b)				Н.	TOTAL 1::			\$	
6. TOTAL of Lines 1–5.	6. TOTAL of Lines 1–5.				10. TOTAL of Lines 7, 8 and 9.				



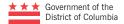
e blank.				Carry all	factors to six decimal places
C	Column 1 TOTAL		Column 2 in DC		Column 3 Factor (Column 2 divided by Column 1)
\$		00 \$		00	(Column 2 divided by Column 1)
\$		00 \$		00	
\$		00 \$.00	
of Column 3	3)				
	\$ \$ sof Column 3	\$ \$ \$ of Column 3) nancial institutions enter the num	\$ 00 \$ \$ 00 \$ \$ 00 \$ Inancial institutions enter the number from Li	Column 1 TOTAL Column 2 in DC Column 2 in DC Column 3 on S Column 4 on S Column 4 on S Column 5 on S Column 5 on S Column 5 on S Column 6 on S Column 6 on S Column 6 on S Column 7 on S Column 6 on S Column 7 on S Column 7 on S Column 7 on S Column 8 on S Column 8 on S Column 8 on S Column 8 on S Column 9 on S Col	Column 1 TOTAL Column 2 in DC \$ 00 \$ 00 \$ 00 \$ 00 \$ \$ 00 \$

Schedule 1 - Combined Report Tax Due									
Tax Due Combined Group Report	Tax Due Tax Due Total Before Eliminations		Tax Due Designated Agent	Tax Due Member 1					
Tax Due Member 2	Tax Due Member 3	Tax Due Member 4	Tax Due Member 5						

nedule G - Balance Sheets	Beginning of Taxable Year		End of Taxable Year	
	(A) Amount	(B) Total	(A) Amount	(B) Total
1. Cash				
2. Trade notes and accounts receivable				
(a) MINUS: Allowance for bad debts				
3. Inventories				
4. Gov't obligations: (a) U.S. and its instrumentalities				
(b) States, subdivisions thereof, etc				
5. Other current assets (attach statement)				
6. Loans to stockholders				
7. Mortgage and real estate loans				
8. Other investments (attach statement)				
9. Buildings and other fixed depreciable assets				
(a) MINUS: Accumulated depreciation		-		
10. Depletable assets				
(a) MINUS: Accumulated depletion				
11. Land (net of any amortization)				
12. Intangible assets (amortizable only)				
(a) MINUS: Accumulated amortization		-		
13. Other assets (attach statement)		1		
14. TOTAL ASSETS				
15. Accounts payable				
16. Mortgages, notes, bonds payable in less than 1 year.				
17. Other current liabilities (attach statement)				
18. Loans from stockholders				
19. Mortgages, notes, bonds payable in 1 year or more				
20. Other liabilities (attach statement)				
21. Capital stock: (a) Preferred stock				
(b) Common stock		1		
22. Paid-in or capital surplus (attach statement)				
23. Retained earnings - Appropriated (attach statement)				
24. Retained earnings - Unappropriated				
25. MINUS: Cost of treasury stock		()		(
26. TOTAL LIABILITIES AND CAPITAL				

2. Federal income tax		per books			OURS WILL HICO			oks this year and not	\$		
3. Excess of capital losses over capital gains				Ψ		included in	n this return (itemize).	Ψ		
5. Expenses recorded on books this year and not deducted on this return (itemize). (a) Depreciation \$	3. Excess of ca 4. Taxable inc	apital losses over capital ga ome not recorded on books	ins this		Tax-exempt interest \$						
10. Tarable Income (tederal Form 1120, page 1, line 28 should equal Line 6 minus Line 9 of this Schedule) Schedule H-2 – Analysis of Unappropriated Retained Earnings per Books 1. Balance at beginning of year . \$ 5. Distributions: (a) Cash (b) Stock . (c) Property	(a) Depreciation \$					against book income this year (itemize). (a) Depreciation\$					
Schedule H-2 – Analysis of Unappropriated Retained Earnings per Books 1. Balance at beginning of year	(b) Depi	etion\$							\$		
1. Balance at beginning of year \$ 2. Net income per books	6. TOTAL of Lines 1 through 5			\$					\$		
2. Net income per books	Schedule H-	2 – Analysis of Unappro	opriated R	etained	Earnings per B	ooks					
3. Other increases (itemize)	1. Balance at	beginning of year		\$		5. Distribution	ns: (a) Ca	sh	\$		
3. Other increases (itemize)	2. Net income	per books					(b) Sto	ock			
6. Other decreases (itemize). 7. TOTAL of Lines 5 and 6							(c) Pro	operty			
Schedule I – Income from Rent Col. 1 Address of Property Col. 2 Kind of Property Col. 3 Gross Amount of Rent \$ \$ Col. 4 Depreciation* or Amortization (Per Federal Form 4562) \$ \$ \$ Col. 5 Repairs (Explain in Sch. I-1) \$ \$ \$ \$ \$ \$ \$ The property or Amount of Rent (Explain in Sch. I-1) \$ \$ \$ \$ \$ Col. 5 Repairs (Explain in Sch. I-1) \$ \$ \$ \$ \$ \$ The property or Amount of Rent (Explain in Sch. I-1) \$ \$ \$ \$ \$ \$ Col. 6 Taxes, Interest and other Expenses* (Explain in Sch. I-1) \$ \$ \$ \$ \$ \$ \$ \$ The property or Amount of Rent (Explain in Sch. I-1) \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$						6. Other decr	eases (itemize	e)			
Schedule I – Income from Rent Col. 1 Address of Property Col. 2 Kind of Property Col. 3 Gross Amount of Rent \$ \$ Col. 4 Depreciation* or Amortization (Per Federal Form 4562) \$ \$ \$ Col. 5 Repairs (Explain in Sch. I-1) \$ \$ \$ \$ \$ \$ \$ The property or Amount of Rent (Explain in Sch. I-1) \$ \$ \$ \$ \$ Col. 5 Repairs (Explain in Sch. I-1) \$ \$ \$ \$ \$ \$ The property or Amount of Rent (Explain in Sch. I-1) \$ \$ \$ \$ \$ \$ Col. 6 Taxes, Interest and other Expenses* (Explain in Sch. I-1) \$ \$ \$ \$ \$ \$ \$ \$ The property or Amount of Rent (Explain in Sch. I-1) \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$									-		
Schedule I – Income from Rent Col. 2 Kind of Property Col. 3 Gross Amount of Rent \$ \$ \$ \$ Col. 5 Repairs (Explain in Sch. I-1) 1. \$ \$ \$ \$ \$ \$ \$ 2						7. TOTAL of L	ines 5 and 6		\$		
Col. 1 Address of Property Col. 2 Kind of Property Col. 3 Gross Amount of Rent Col. 4 Depreciation* or Amortization (Per Federal Form 4562) Col. 5 Repairs (Explain in Sch. I-1) S S S S Col. 6 Taxes, Interest and other Expenses* (Explain in Sch. I-1) S S S S S S S Col. 5 Repairs (Explain in Sch. I-1) S S S S S S S S S S Col. 6 Taxes, Interest and other Expenses* (Explain in Sch. I-1) S S S S S S S S S S S S Col. 6 Taxes, Interest and other Expenses* (Explain in Sch. I-1) S S S S S S S S S S S S S	4. TOTAL of L	ines 1, 2 and 3.		\$		8. Balance at end of year (Line 4 minus Line 7)			\$		
Col. 1 Address of Property Col. 2 Kind of Property Col. 3 Gross Amount of Rent Col. 4 Depreciation* or Amortization (Per Federal Form 4562) Col. 5 Repairs (Explain in Sch. I-1) S S S S Col. 6 Taxes, Interest and other Expenses* (Explain in Sch. I-1) S S S S S S S Col. 5 Repairs (Explain in Sch. I-1) S S S S S S S S S S Col. 6 Taxes, Interest and other Expenses* (Explain in Sch. I-1) S S S S S S S S S S S S Col. 6 Taxes, Interest and other Expenses* (Explain in Sch. I-1) S S S S S S S S S S S S S											
Col. 1 Address of Property Col. 2 Kind of Property Col. 3 Gross Amount of Rent Federal Form 4562) \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	Schedule I -	- Income from Rent									
2. 3. 4. 5. 6. 7. TOTAL (Enter the total of Column 3 on D-20, \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	Col. 1	Address of Property				or Amort	ization (Per		and oth	er Expenses*	
2	1.			Ş	\$	\$		\$	\$		
3											
4				-							
5											
6	4										
7. TOTAL (Enter the total of Column 3 on D-20, \$ \$ \$ \$ \$ \$ \$ \$ \$ Line 6. Enter total of Column 4, 5, and 6 on appropriate deduction lines.) *excludes federal 30% and 50% bonus depreciation and additional IRC §179 expenses deductions. Schedule I-1 — Explanation of deductions claimed in Columns 5 and 6 of Schedule I. Column No. Explanation Amount No. Explanation Amount	5										
Line 6. Enter total of Column 4, 5, and 6 on appropriate deduction lines.) *excludes federal 30% and 50% bonus depreciation and additional IRC §179 expenses deductions. Schedule I-1 – Explanation of deductions claimed in Columns 5 and 6 of Schedule I. Column No. Explanation Amount No. Explanation Amount	6.										
Column No. Explanation Amount No. Explanation Amount	Line 6. Enter	total of Column 4, 5, and	6 on appro	priate de	duction lines.)	•	ductions.	\$	\$		
No. Explanation Amount No. Explanation Amount	Schedule I-1	l – Explanation of deduc	ctions clain	ned in C	columns 5 and 6	of Schedule	e I.				
\$ \$ \$ \$		Explanati	ion		Amount			Explanation		Amount	
					\$					\$	
					ļ*					ļ -	
							ļ			ļ	

Supplemental Information					
STATE OR COUNTRY OF INCORPORATION	2.(a) DATE OF INCORPORATION	2.(b) D	ATE BUSINESS BEGAN IN DC	3. IRS SERVICE CENTER W WAS FILED FOR PERIOD	HERE FEDERAL RETURN COVERED BY THIS RETURN
4. THE CORPORATION'S BOOKS ARE IN THE CARE OF –		5. LOC	ATED AT –		
6. During 2015, has the Internal Revenue Service adjustments to your federal income tax return, returns with the IRS? YES NO If "YES", please submit separately a detailed st submitted, to the address shown on page 7 un	or did you file any amended atement, unless previously	i	If you have already pro a detailed statement, on it was sent.		MM/DD/YYYY
7. Is this corporation unitary with a partnership or another corporation?	YES	○ NO	If yes, explain:		
8. Is this return made on the accrual basis?	YES	NO	If no, indicate basis	used: Cash Basis	Other (specify)
9. Did you file a franchise tax return with DC for the year 2014?	YES	O NO	If no, state reason		
10. Did you withhold DC income tax from wages pa DC resident employees during 2015?	oid to your YES	NO	If no, state reason:		
11. Did you file annual information returns, federal and 1099, relating to payment of dividends and 2015?		○ NO			
12. (a) Has the business been terminated?	YES	○ NO	If yes, explain and g	ve date:	
(b) Have you moved out of DC?	YES	○ NO			
13. Did you file an annual ballpark fee return?	YES	○ NO			



Worldwide Combined Reporting Election Form



FEIN/SSN of Designated Agent Fill in if FEIN Fill in if SSN	Taxable Year YYYY	Worldwide
Name of Designated Agent		Telephone number
Business address line #1		
Business address line #2		
City	State Zi	p code +4
In accordance with the provisions of DC Official Co hereby made to report on a worldwide unitary com		combined reporting regulations, election is
A worldwide unitary combined reporting election is thereafter for a period of ten years.	is binding for and applicab	le to the tax year it is made and all years
It may be withdrawn or reinstituted after withdraw request for reasonable cause based on extraordina policy and only with the written permission from t	ary hardship due to unfore	seen changes in DC tax statutes, law or
Upon the expiration of the ten-year period, a taxpa election.	ayer may withdraw from th	ne worldwide unitary combined reporting
Withdrawal must be made in writing within one ye years, subject to the same conditions as applied to		election and is binding for a period of ten
Date Beginning Tax Period: MMDDYYYY	Date Ending	g Tax Period: MMDDYYYY
Authorized Signature		
Printed Name	Date	
Jnder penalties of law, I declare that the designated agent has authori	ized me to sign on behalf of all m	embers of the combined group, and that I have examine

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Important: Print in CAPITAL letters using black ink. Attach to your Form D-20 or D-30.



OFFICIAL USE ONLY Vendor ID# 0000

Tax	payer Identification Number Fill in if FEIN Fill in if filing a D-20			
	Fill in if SSN Fill in if filing a D-30	Return		
Ent	er your business name			
D-2	20 Return			
No	nrefundable Credits			0.0
1	Economic Development Zone Incentives Credit (see worksheet).	1	\$	00
2	Qualified High Technology Company Credit from Part F, DC Form D-20CR, from pub. 399.	2	\$	00
3	Organ and Bone Marrow Donor Credit (see computation on reverse side). This credit may not be applied against the required minimum tax.	3		.00
4	Job Growth Incentive Act	4		00
5	Enter alternative fuel credits. See instructions			
	5(a) Alternative fuel infrastructure. # of stations	.00		
	5(b) Alternative fuel vehicle conversion. # of vehicles	00		
6	Total alternative fuel credits. Add Lines 5(a) and 5(b) only and enter here.	6		00
7	RESERVED	7		00
8	Total the nonrefundable D-20 credits, enter here and on Form D-20, Line 38.	8	\$	00
	fundable Credits	Ü		
9	Qualified High Technology Company Retraining Costs Credit from Part G, DC Form D-20CR, from pub. 399.	9		.00
10	RESERVED	10	o \$	00
11	Total the refundable D-20 credits, enter here and on Form D-20, Line 41(c).	11	1 \$	00
D-3	30 Return			
_	nrefundable Credits			00
	Economic Development Zone Incentives Credit (see worksheet).	12		00
13	Organ and Bone Marrow Donor Credit (see computation on reverse side). This credit may not be applied against the required minimum tax.	13	3 \$.00
14	Job Growth Incentive Act	14	4 \$	00
15	Enter alternative fuel credits. See instructions			
	15(a) Alternative fuel infrastructure. \$ # of stations	.00		
	15(b) Alternative fuel vehicle conversion # of vehicles	00		
16	Total alternative fuel credits. Add Lines 15(a) and 15(b) only and enter here.	16	6 \$	00
17	RESERVED	17		00
	Total the nonrefundable D-30 credits, enter here and on Form D-30, Line 38.	18		00
_				

Schedule UB Instructions

Qualified High Technology Companies

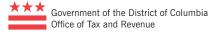
If you claim credits on Lines 2 or 9 above, attach a copy of your DC Form D-20CR to the D-20.

Organ and Bone Marrow Donor Credit

An employer who provides an employee with paid leave to donate an organ (up to 30 days leave) or to donate bone marrow (up to 7 days leave) is eligible to claim a credit against the franchise tax. The credit is equal to 25% of the salary paid to the employee during the leave period. If you take the credit, you may not also deduct the salary paid to the donor employee for that period. This credit is not available if the employee is eligible for leave under the Family and Medical Leave Act of 1993.

Organ and Bone Marrow Donor Credit — Computation —							
Column 1 Credit Category	Column 2 Total Paid Leave	Column 3 Leave Credit Calculation	Column 4 Total Credit				
Organ Donor(s)	Total Paid Leave Wages \$	Col 2 amt. × 25% \$	\$				
Bone Marrow Donor(s)	Total Paid Leave Wages \$	Col 2 amt. × 25% \$	\$				
		Total of Col. 4. Enter here and on Schedule UB.*					

^{*}Line 3 of Schedule UB for D-20 filers Line 13 of Schedule UB for D-30 filers



Check here



IMPORTANT: Please read the instructions on the reverse before completing this form

Business Name (from your D-20 or D-30 return) Person to contact if there are questions		ver Identification N Number (SSN) none number	lumber (FEIN)	or				
No underpayment interest is due and this form should not be filed if: A. Your tax liability on taxable income after deducting DC applicable credits and estimated tax payments is less than \$1001, or B. You have made the required periodic DC estimated franchise tax payments and the total is equal to or more than 110% of last year's taxes or 90% of the current year's taxes. Note: In order to use the prior year 110% exception, you must have filed a DC franchise tax return last year and you must have been in business in DC for the entire year.								
Computation of Underpaym	ent Interest							
1 2015 DC franchise tax liability from Forms D-20, or D-30.		\$						
2 Multiply the amount on Line 1 by 90% (.90).		\$						
3 2014 DC franchise tax liability from Forms D-20, or D-30 X 110°	%.	\$						
4 Minimum estimated tax requirement for tax year 2015 (lesser of l	ines 2 and 3). \$						
Multiply the amount on Line 4 by 25% (.25). Note: If your income was not evenly received over 4 periods, see instructions on the reverse of this form on the "Annualized Income" method.								
Due date of Payments								
Due dates shown are for calendar year; for fiscal year, use the 15^{th} day of the 4^{th} , 6^{th} , 9^{th} and 12^{th} months after the end of the fiscal year.	1 st Period 04/15/15	2 nd Period 06/15/15	3 rd Period 09/15/15	4 th Period 12/15/15				
6 Enter the amount from Line 5 or the annualized amount in each								
period (the 2^{nd} period includes the 1^{st} period amount, 3^{rd} period includes the 1^{st} and 2^{nd} period amounts, the 4^{th} period includes all period amounts).								

(See D-2220 instructions).

.0265

.0175

.0262

\$

.0348

Revised 11/15 D-2220 page 1

if you are using the "Annualized Income" method.

11 Underpayment Interest - Total of amounts from Line 10. Pay this amount.

7 DC estimated taxes paid each period (the 2nd period includes the 1st period amount, 3rd period includes 1st and 2nd period amounts, the 4th period includes all period amounts).

8 Underpayment each period (Line 6 minus Line 7).

9 Underpayment Interest Factors.

10 Line 8 multiplied by Line 9.

Instructions for Underpayment of Estimated Tax by D-20 or D-30 Filers

Estimated Tax Interest

DC law requires any business that expects its DC franchise tax liability to exceed \$1000 for the tax year to file a declaration of estimated franchise tax using the payment vouchers in:

- D-20ES Declaration of Estimated Franchise Tax for Corporations; or
- D-30ES Declaration of Estimated Franchise Tax for Unincorporated Businesses.

The law states that any business required to file and pay estimated tax that fails to pay the amount required by the due date is subject to interest on the underpayment of estimated franchise tax.

When is interest assessed for Underpayment of Estimated Franchise Tax?

A 10% interest, compounded daily, is assessed if your total DC estimated franchise tax payments compared to your DC franchise tax liability do not equal at least the smaller of:

- 90% of the tax due (Line 37) on your 2015 DC franchise tax return;
 or
- 110% of the tax due (Line 37) on your 2014 DC franchise tax return (consisting of 12 months).

You must have filed a 2014 DC franchise tax return to use the 110% exception.

A penalty will be assessed if any statement made on an estimated tax payment voucher is not true and accurate to the best of the signatory's knowledge.

Are there any exceptions?

You are not subject to interest for underpayment of estimated franchise tax if:

- You had no DC franchise tax liability for the tax year 2014 and in that year, you did business in DC for the entire 12 months;
- The franchise tax due for 2015, minus any estimated tax payments, is less than \$1001;
- Your total DC estimated franchise tax payments are equal to or greater than 110% of your 2014 DC franchise tax liability for the entire year; or
- Your remaining tax due after totaling all credits and estimated tax payments is less than 10% of your total DC franchise tax liability (Line 43 of the D-20 and D-30) for the year.

When do you use this form?

- You may use this form to calculate your underpayment interest. If you
 do, attach it to your tax return and enter the underpayment interest
 on Line 47 of Forms D-20 or D-30. Fill-in the oval if the D-2220 is
 attached. If you do not wish to calculate the interest, OTR will do it
 when your return is processed and will notify you of the amount due.
- You may also complete this form if you believe the interest amount assessed by OTR for underpayment of estimated franchise tax is incorrect.

How do you file this form?

Attach it to your return if you complete the form <u>before</u> filing your tax return. If you complete the D-2220 <u>after</u> filing and receiving a notice of interest assessment, send it to:

Office of Tax and Revenue 1101 4th St SW, 2nd Floor Washington DC 20024

Completing this form

Line 1

Enter the amount from your 2015 D-20 or D-30 (Line 37).

Line 2

Multiply the amount on Line 1 by 90% (.90). Your estimated franchise tax payments must be equal to or greater than this amount.

Line 3

Enter 110% of the amount from your 2014 DC Forms D-20 or D-30, Line 37. If your 2014 return was amended or corrected, multiply 110% times the corrected amount.

Line 4

Enter the lesser of the amounts on Line 2 and Line 3. If you did not file a DC franchise tax return for 2014, you may only use Line 2. This is your minimum estimated franchise tax payment for 2015.

Line 5

Multiply the amount on Line 4 by 25% (.25). This gives you an even distribution of your tax liability over the four periods of the tax year.

Line 6

Enter the amount required from Line 5 under each of the payment columns. For example, if Line 5 is \$2000, you would enter \$2000 for the 1st period, \$4000 for the 2nd period, \$6,000 for the 3rd period and \$8,000 for the 4th period.

Annualized income method: If your income was different for each period, determine the percentage for each period (divide the period income by the full year's income). Multiply Line 4 by each period's percentage and enter the amounts earned by period on Line 6. Accumulate the periodic amounts as shown above. Check the "Annualized Income" box.

Line 7

Enter the amount of estimated franchise tax payments made in each period. Include the amounts from the previous period with the 2nd, 3rd and 4th periods. For example, if your estimated payment amount is \$1,000 in each period, you would enter \$1,000 in the 1st period, \$2,000 in the 2nd period, \$3,000 in the 3rd period and \$4,000 in the 4th period.

Line 8 Underpayment each period

For each column, subtract Line 7 from Line 6. If Line 7 exceeds Line 6, you have no underpayment interest. If there is an amount remaining, this is your periodic underpayment amount.

Line 9 Underpayment Interest Factors

These are the underpayment interest factors by period.

Line 10

For each period, multiply the amount on Line 8 by the factor on Line 9. This is your underpayment interest amount by period.

Line 11 Underpayment Interest

Add the amounts on Line 10 for each period. This is your total underpayment of estimated franchise tax penalty.

- If you are filing the D-2220 with your D-20 or D-30 return, include the underpayment interest in the amount you owe, enter the amount on Line 43 and pay the total amount with the return. Fill in the oval on Line 47 and attach the D-2220 to the return.
- If you are filing the D-2220 form separately, pay the amount you owe and attach to the D-2030P Payment Voucher, using the applicable mailing address.

Make the check or money order payable to the **DC Treasurer.**

D-2030P PAYMENT VOUCHER See instructions on back

Detach at perforation and mail the voucher, with payment attached. See mailing address on back.

Government of the District of Columbia 2015 D-2030P Payment Voucher for Franchise Tax Important: Print in CAPITAL letters using black ink. 1 5 2 3 0 0 1 1 0 0 0 0	
Amount of payment Taxpayer Identification Number Fill in if FEIN Fill in if for a D-30 Return Business name or Designated Agent name Official Use Only Vendor ID# 0000 Do not enter cents, enter dollars only. To avoid penalties and interest, your payment must be postmarked no later than the due date of your return. Fill in if for a D-30 Return Tax period ending (MMYY)	
Taxpayer Identification Number Fill in if FEIN Fill in if for a D-20 Return Fill in if SSN Fill in if for a D-30 Return Business name or Designated Agent name Business mailing address (number, street and suite/apartment number if applicable) Business mailing address (number, street and suite/apartment number if applicable)	
Business mailing address (number, street and suite/apartment number if applicable) City State Zip Code + 4	
Revised 02/15 2015 D-2030P P1 Payment Voucher for Franchise Tax	
Government of the District of Columbia 2015 D-2030P Payment Voucher for Franchise Tax Important: Print in CAPITAL letters using black ink.	
Amount of payment Official Use Only Vendor ID# 0000 Do not enter cents, enter dollars only. To avoid penalties and interest, your	
Business mailing address (number, street and suite/apartment number if applicable) Fill in if SSN Fill in if for a D-30 Return Tax period ending (MMYY)	
Taxpayer Identification Number Fill in if FEIN Fill in if for a D-20 Return Business name or Designated Agent name Business mailing address (number, street and suite/apartment number if applicable) Business mailing address (number, street and suite/apartment number if applicable)	
City State Zip Code + 4	
Revised 02/15 2015 D-2030P P1	

Instructions for D-2030P PAYMENT VOUCHER – please print clearly

Use the D-2030P Payment Voucher to make any payment due on your D-20 or D-30 return.

- Do not use this voucher to make estimated tax payments.
- Enter your Taxpayer Identification Number. Fill in the oval indicating if this is your FEIN or SSN.
- Enter name and address exactly as they appear on your return.
- Enter the amount of your payment.
- Make the check or money order payable to the DC Treasurer.
- Write your FEIN/SSN, tax period and type of return filed (D-20 or D-30) on the payment.
- Staple your check or money order to the D-2030P voucher only. Do not attach your payment to your D-20 or D-30 return.
- Mail the D-2030P with, but not attached to, your D-20 or D-30 tax return in the envelope provided in this tax booklet. If you do not have the return envelope, make sure to address your envelope to: for D-20, Office of Tax and Revenue PO Box 96166, Washington DC 20090-6166, for the D-30 to: Office of Tax and Revenue PO Box 96165 Washington, DC 20090-6165.

Notes:

- If your payment exceeds \$5,000 in any period, you must pay electronically. Visit www.taxpayerservicecenter.com.
- For electronic filers, in order to comply with banking rules, you will be asked the question "Will the funds for this payment come from an account outside of the United States". If the answer is yes, you will be required to pay by money order (US dollars) or credit card. Please notify this agency if your response changes in the future. If your payment is rejected, you may be subject to the District's dishonored check fee and additional penalties and interest.

FR-128 Extension of Time to File a DC Franchise or Partnership Return Worksheet

	Worksheet			E	NTER [OOLLA	R AMC	UNTS (ONLY	
1	Total estimated franchise tax liability for the tax period.	1					I			00
2	Estimated franchise tax payments (include any tax overpayment credit).	2								00
3	Other payments.	3					Т			00
4	Total payments and credits (add Lines 2 and 3).	4					I			00
5	Balance due (Line 1 minus Line 4). Payment in full must be submitted with this form or your request will be denied. (Note: you will be subject to the failure-to-pay penalty and interest on any tax due and not paid with this form.)	5								00

Detach at perforation and mail the voucher, with payment attached, to the Office of Tax and Revenue. (See addresses on back)

Government of the District of Columbia		Extension of Time to File a DC Franchise or Partnership Return		
Amount of payment (dollars only) Taxpayer I.D. Number	\$ Fill in	if FEIN	00	OFFICIAL USE ONLY Vendor ID# 0000
Business Name or Designated Age		if SSN	T:	ax period ending (MMYY)
Business mailing address (numbe	r, street and suite/apartmer	nt number if applicable)		
City			State	Zip Code +4
		15, 2016, for calendar year 201 fill in one): D-20 D-30		
Revised 02/15		2015 FR-128 P1 Extension of Time to File a D	C Franchise o	or Partnership Return
Government of the District of Columbia		Extension of Time to File a DC Franchise or Partnership Return		
Amount of payment (dollars only) Taxpayer I.D. Number	\$ Fill in	if FEIN	00	official use only Vendor ID# 0000
Business Name or Designated Age		if SSN	T:	ax period ending (MMYY)
Business mailing address (numbe	r, street and suite/apartmer	nt number if applicable)		
City			State	Zip Code +4

___ 15, 2016, for calendar year 2015, or until

, is requested for the following return: (fill in one): D-20 D-30 D-65

___, for fiscal year ending

A 6 or 7 month extension of time to file until _____

Instructions for Form FR-128

Purpose

Use Form FR-128 to request a 6-month extension of time to file a Corporation Franchise Tax Return (Form D-20), an Unincorporated Business Franchise Tax Return (Form D-30), a Partnership Return of Income (Form D-65), or a 7-month extension of time to file if you are a Combined Reporting filer.

When to file

The request for an extension of time to file must be submitted no later than the due date of the return.

Where to submit your request

Mail the completed FR-128 with your payment in full of any tax due for D-20 to: Office of Tax and Revenue, PO Box 96019 Washington, DC 20090-6019. For D-30 to: Office of Tax and Revenue, PO Box 96020 Washington, DC 20090-6020. For D-65 to: Office of Tax and Revenue, 1101 4th Street, SW, FL4, Washington, DC 20024. Make your payment out to the DC Treasurer. Include your FEIN or SSN, FR-128 and the tax year on the payment.

Note: If you are a Qualified High Technology Company please submit a completed DC Form QHTC-CERT with your extension request.

Extension of time to file

A 6-month extension of time to file (7-month extension for Combined Reporting filers) will be allowed if you complete this form properly, file it on time and PAY the full amount of any tax due shown on Line 5 of the Worksheet. When you file your return (D-20/D-30/D-65), attach a copy of the FR-128 which you filed. A separate extension request must be filed for each return. Blanket requests for extensions will not be accepted.

Federal extension forms

The Office of Tax and Revenue does not accept the federal application for an extension of time to file. **You must use DC Form FR-128.**

Additional extension of time

No additional extension of time to file will be granted beyond the 6-month extension unless the taxpayer is outside the continental limits of the United States. In that case, an additional extension up to 6 months may be granted, but in no case shall such extension be granted for more than one year.

Notes:

- If your payment exceeds \$5,000 in any period, you must pay electronically. Visit www.taxpayerservicecenter.com
- For electronic filers, in order to comply with new banking rules, you will be asked the question "Will the funds for this payment come from an account outside of the United States". If the answer is yes, you will be required to pay by money order (US dollars) or credit card. Please notify this agency if your response changes in the future. If your payment is rejected, you may be subject to the District's dishonored check fee and additional penalties and interest.



D-20 NOL Net Operating Loss Deduction for Tax Years <u>Before</u> 2000

Complete a separate D-20 NOL for each business carrying forward a NOL. Please attach this form to your D-20.

Name of corporation			FEIN
			-
Year	DC net income/loss	Losses claimed	Losses remaining
Oldest loss year	\$	\$	\$
Subsequent year 1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			
15			
	Summary:	Total losses claimed.	Total losses remaining (to be carried forward).

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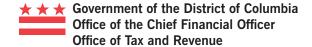


D-20 NOL Net Operating Loss Deduction for Tax Year 2000 and Later Complete a separate D-20 NOL for each business carrying forward a NOL. Please attach this form to your D-20.

Name of corporation		FE	N					
Year	DC net income/loss	Losses claimed	Losses remaining					
Oldest loss year	\$	\$	\$					
Subsequent year 1								
2								
3								
4								
5								
6								
7								
8								
9								
10								
11								
12								
13								
14								
15								
	Summary:	Total losses claimed.	Total losses remaining (to be carried forward).					

[•] Enter loss on D-20, Line 35.

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Need assistance?

File or pay online: www.taxpayerservicecenter.com

Get tax forms Download forms at www.taxpayerservicecenter.com Request forms by mail: 202-442-6546

Pick up forms:

Office of Tax and Revenue 1101 4th St SW 2nd Floor 8:15 am–5:30 pm

Wilson Building 1350 Pennsylvania Av NW Lobby 7 am–7 pm **Reeves Center** 2000 14th St NW Lobby 7 am–7 pm

One Judiciary Square 441 4th St NW Lobby 7 am-7 pm

Ask tax questions; get tax forms preparation help free Visit our Walk-In Center, 1101 4th St SW 2nd Floor; or Contact our Customer Service Administration: 202-727-4TAX(4829)

Regular hours 8:15 am–5:30 pm Monday–Friday

Do you need help with this form?

Visit our Walk-In Center, at 1101 4th St SW 2nd Floor.

Are you unable to hear or speak?

Call the DC Relay Service, 202-727-3363.

[Spanish] Si necesita ayuda en Español, por favor llame al <u>(202) 727-4829</u> para proporcionarle un intérprete <u>de manera gratuita</u>.

[Vietnamese] Nếu quý vị cần giúp đỡ về tiếng Việt, xin gọi (202) 727-4829 để chúng tôi thu xếp có thông dịch viên đến giúp quý vị **miễn phí**.

Municipal Center

6:30 am-8 pm

300 Indiana Av NW Lobby

[French] Si vous avez besoin d'aide en Français appelez-le (202) 727-4829 et l'assistance d'un interprète vous sera fournie gratuitement.

[Amharic] በአማርኛ አርዳታ ከፊለጉ በ (202) 727-4829 ይደውሉ። የ<u>ነፃ</u> አስተርንሚ ይመደብልዎታል።

[Korean] 한국어로 언어 지원이 필요하신 경우 (202) 727-4829 로 연락을 주시면 **무료로** 통역이 제공됩니다.

[Chinese] 如果您需要用(中文)接受幫助,請電洽 (202) 727-4829 將**免費**向您提供口譯員服務。

District of Columbia (DC) 2015 D-30 Unincorporated Business Franchise **Tax Forms and Instructions**

Secure - Accurate - Convenient ...

DISTRICT OF COLUMBIA



- Any payment that exceeds \$5,000 per period must be paid electronically.
- Make tax payments electronically with e-check, ACH Credit, ACH Debit and Credit Card. Visit www.taxpayerservicecenter.com
- When making a payment with your D-30 please use the voucher (D-2030P) provided.

What's New:

- **New Tax Rate** For taxable years beginning after December 31, 2014, the tax rate for unincorporated businesses is 9.4% of taxable income.
- Schedule F DC Apportionment Factor For taxable years beginning after December 31, 2014, unincorporated businesses will apportion business income using a single sales factor only. See D-30 page 4, Schedule F.
- **Estimated Tax Interest** For taxable years beginning after December 31, 2014, the penalty for underpayment of estimated tax has been changed to interest for underpayment of estimated tax, Line 47, D-30.

Reminder:

- Alternative Fuel Infrastructure Installation and Alternative Fuel Vehicle Conversion Credits
 There are two non-refundable business credits added to the Schedule UB for alternative
 infrastructure installation and alternative fuel vehicle conversion. See instructions page 13,
 and DC Code §47-1808.10 and §47-1808.11 for details.
- The "Fill in oval if Certified QHTC" has been removed from page 1 of the D-30 form because Unincorporated Businesses that are Qualified High Technology Companies (QHTCs) are no longer required to file a D-30 Unincorporated Business Franchise Tax Return. Unincorporated QHTCs are now required to file a D-65 Partnership Return, or a D-40 Individual Income Tax Return with a copy of Federal Schedule C attached.
- Line 41(c) "refundable credits" has been removed from the D-30 form because refundable credits are only available to QHTCs and unincorporated businesses that are QHTCs are no longer required to file the D-30 return.
- Supplemental Information "Did you file an annual ballpark fee return?" question has been added to the Supplemental Information section of the D-30 form. (Page 6)

Clarification:

• Line 30 Clarification - If you are a partner in another partnership that filed an unincorporated business franchise tax return and claimed a deduction for the salary allowance and/or exemption amount, you must add the post-apportioned distributive share of the unincorporated business salary allowance attributable to the partner under DC Code §47-1803.03(a)(11), and/or the unincorporated business exemption amount attributable to the partner under DC Code §47-1808.04, on Line 30 of the D-30. If filing a combined report, this amount will be reflected as an addition under the partner's column on Line 33 of Schedule 1 of the combined report.

Also you must include a statement to reflect the specific amounts for each of the items listed below:

- Portion of line 26(c) attributable to DC
- Portion of UB salary allowance attributable to DC
- Portion of UB exemption attributable to DC

Contents Who must file Form D-30? Who does not have to file Form D-30? Which other DC forms or schedules may unincorporated businesses need to file? When are your taxes due? Filing your return Payment options Penalties and interest Explanation of terms Specific instructions for the 2015 Form D-30 Form D-30 Unincorporated Business Franchise Tax Return **17** Worldwide Combined Reporting Election Form 23 Schedule UB Business Credits 25 D-2220 Underpayment of Estimated Franchise Tax by Businesses 37 Form D-2030P Payment Voucher 39 Form FR-128 Extension of Time to File a DC Franchise or Partnership Return 41 Form D-30 NOL Net Operating Loss Deduction for Tax Years Before 2000 43 Form D-30 NOL Net Operating Loss Deduction for Tax Year 2000 and Later 45 Need assistance? **Back Cover**

Note: At the time this tax package went to print, line references to federal tax forms were correct.

General Instructions for the D-30

Who must file Form D-30?

Generally, an unincorporated business, with gross income (Line 10) more than \$12,000 from District sources, must file a D-30 (whether or not it has net income). This includes any business carrying on and/or engaging in any trade, business, or commercial activity in DC with income from DC sources.

- To determine if you need to file, please note that gross income includes revenue from all DC sources after deducting the cost of goods sold, but before taking expenses and other deductions allowed when calculating net income.
- The act of carrying on or engaging in a trade or business in DC is determined by the nature and extent of the unincorporated business' activities in DC conducted by: its owners; members; or through employees, consultants, agents or other representatives.

An unincorporated business with gross income in DC of over \$12,000 from any of (but not limited to) the activities listed below, must also file a D-30 return.

- · Rental of real or tangible personal property; or
- Leasing of real or tangible personal property; or
- Any other similar arrangement.

If a business is terminated as the result of the sale of its assets, even if there is no tax due, the business is required to file a final D-30.

If the sale of a business' assets results in termination of the business – the owner(s) must report gain/loss on their individual return. (There may also be depreciation recapture to report on a D-30.)

NOTE: The term "unincorporated business" does not include a trade or business that arises solely by reason of the purchase, holding, or sale of, or the entering, maintaining, or terminating of positions in, stocks, securities, or commodities for the taxpayer's own account.

An unincorporated business with gross income of \$12,000 or less is not required to file a D-30 return nor pay the \$250 minimum franchise tax.

You may have to file other DC returns if you have other business activities with gross income of \$12,000 or less and you operated as:

- A partnership, you must file a Form D-65;
- A DC resident sole proprietor, you must file a Form D-40; or
- A DC resident trust, you must file a Form D-41.

Multiple businesses

If an individual or group of individuals carries on two or more distinct unincorporated businesses in DC (none of which are exempt), they must be reported on one return. Include all income and expenses on that one return. You may provide separate computations to show the net income or loss of each business.

Taxicab/Limo Drivers

Any non-resident taxicab/limo driver who operates a motor vehicle for hire in the District must file a Form D-30. The filing of the D-30 is a requirement for operating or continuing to operate a motor vehicle for hire in the District by a non-resident.

Minimum Tax

The minimum tax is \$250 if DC gross receipts are \$1M or less. Minimum tax is \$1,000 if DC gross receipts are greater than \$1M. DC Gross receipts for purposes of minimum tax includes District gross receipts that are derived from any activity such as sales, rents, services, commissions, etc., from any source within the District. Gross receipts are determined without deduction of any expenses.

NOTE: Each member of a combined group must use the Minimum Tax Liability Gross Receipts (MTLGR) worksheet for the purposes of determining a minimum tax liability of a member whose computed tax is less than the minimum tax.

See Minimum Tax Liability Gross Receipts Worksheet (MTLGR) below. You must complete Schedule F even if your operation is 100% in the District.

	Minimum Tax Liability Gross Receipts (MTLGR) Worksheet							
DC gross receipts for minimum tax due and only for minimum tax due is computed as foll								
1	Amount from numerator of DC sales apportionment							
	factor from Schedule F, Line 1, Column 2 of D-20 or D-30 Financial institutions must use amount on Schedule F, Line 2, Column 2 of D-20.	1\$						
2	Add the adjusted basis of any property sold for which the gain is included in Line 1	2 \$						
3	Add Non-Business income allocated to DC reported per D-20 Line 33 or D-30, Line 30	3 \$						
4	Total DC Gross Receipts (Add Lines 1, 2 and 3)	4 \$						

Minimum Tax

The minimum tax is \$250.00 if the amount on Line 4 above is \$1,000,000 or less

The minimum tax is \$1,000.00 if the amount on Line 4 above is greater than \$1,000,000

Who does not have to file Form D-30?

You do not have to file if -

- Total gross income (Line 10) is \$12,000 or less; or
- The trade or business is by law, custom or ethics, unable to incorporate; or
- The trade or business is licensed by DC to a blind person, for operating a stand in a federal building; or
- It is a trade, business or professional organization where:
 - more than 80 percent of its gross income is derived from personal services actually rendered by owners or members of the business; and
 - Capital is not a material income-producing factor; or
- You are:
 - An organization recognized as exempt from DC taxes and has unrelated business taxable income, as defined in Internal Revenue Code (IRC) §512, is subject to the DC franchise tax and a Form D-20, Corporation Franchise Tax Return, must be filed; or
 - A professional corporation, incorporated under the DC Professional Corporation Act and, therefore, file a Form D-20.
 - A Qualified High Technology Company (QHTC) business that is not incorporated. A QHTC business that is not a corporation is exempt from the unincorporated business franchise tax. However, you must file a D-65 Partnership Return, or a D-40 Individual Income Tax Return with a copy of Federal Schedule C attached.

NOTE: If an individual or group of individuals is engaged in two or more separate and distinct businesses during the tax year, each business is separate when determining tax-exempt status.

Which other DC forms or schedules may unincorporated businesses need to file?

To download DC tax forms, visit <u>www.taxpayerservicecenter.com</u> and click on Tax Forms/Publications.

Business Non-Refundable Credits,

Schedule UB

The various non-refundable credits available to unincorporated businesses have been consolidated on Schedule UB. The total non-refundable credits from Schedule UB, Line 18 are reported on Line 38 of the D-30.

FR-128, Extension of Time to File a DC Franchise or Partnership Return

You may request an extension of time to file your return by filing DC Form FR-128 (copy included in this booklet) no later than the return due date. An extension of time to file is not an extension of time to pay. You must pay any tax liability with the extension request, otherwise the request will be denied. Do not use the federal extension form for DC tax purposes. For combined report filers, the designated agent shall file.

<u>D-30ES, Declaration of Estimated Franchise Tax for Unincorporated Business</u>

An unincorporated business must file a declaration of estimated franchise tax if it expects its DC unincorporated business franchise tax liability to exceed \$1000 for the taxable year. See the Form D-30ES, Declaration of Estimated Franchise Tax for Unincorporated Businesses

booklet for payment vouchers and details. You will automatically be assessed a penalty for any underpayment of DC estimated tax.

Note: Electronic payment required. If the amount of the payment due for a period exceeds \$5,000, you must pay electronically. Visit www.taxpayerservicecenter.com.

D-2220, Underpayment of Estimated Tax Installments

You will be charged a penalty of 10 percent per year, compounded daily, on underpayments of estimated franchise tax installment payments. The charge is computed from the installment payment due date to the date the tax is paid. It is in addition to the penalty imposed for false statements. The 10 percent penalty will be assessed automatically by OTR's integrated tax system. For additional information, see Form D-2220, Underpayment of Estimated Franchise Tax by Businesses. Attach a completed Form D-2220 with your D-30.

FR-1500 Ballpark Fee

If you have \$5 million or more in annual DC Gross Receipts, you must file and pay the ballpark fee, with Form FR-1500, electronically. For details, visit www.taxpayerservicecenter.com, click on 'Business Tax Service Center', and then click on 'Ballpark-Related Fees and Taxes'. Note: Each member of a combined group is responsible for filing and paying its own ballpark fee.

Combined Reporting

The District of Columbia no longer permits consolidated filing for tax years beginning on and after January 1, 2011. For tax years beginning on and after January 1, 2011, a corporation or unincorporated business entity subject to tax in the District of Columbia, engaged in a unitary business with one or more corporations or unincorporated business entities, is required to file a combined report pursuant to D.C. Official Code §47-1805.02a.

Combined reporting is a tax reporting method where all of the members of unitary group are required to determine their net income based on the activities of the unitary group as a whole. Unitary group members will calculate their taxable net income derived from the unitary business as its apportioned share of the income or loss of the combined group engaged in the unitary business.

A "Unitary business" means a single economic enterprise that is made up either of separate parts of a single business entity or of a commonly owned or controlled group of business entities that are sufficiently interdependent, integrated, and interrelated through their activities so as to provide synergy and mutual benefit that produces a sharing or exchange of value among them and significant flow of value to the separate parts.

The combined reporting regulations are contained in DC Municipal Regulations (DCMR) Title 9, Taxation and Assessments, §§156 through 176. Examples and Schedules for combined reporting are located on our website at www.taxpayerservicecenter.com under the "Combined Reporting for Business Entities" tab.

When are your taxes due?

If you are a calendar year filer, file your return and pay any tax due by April 18th. If you are a fiscal year filer, file your return and pay by the fifteenth day of the fourth month after your tax year closes. If the due date falls on a Saturday, Sunday, or legal holiday, the return is due the next business day.

Taxable year

Enter your taxable year ending date on page 1 of the D-30. It may be either a calendar year or fiscal year. You must receive OTR approval to change your taxable year. Combined report filers shall use the designated agent's tax year.

NOTE: The District has decoupled from the section of the American Recovery and Reinvestment Act of 2009 which allows an exclusion and deferral from gross income of a discharge of indebtedness. For District tax purposes, a discharge of indebtedness results in income that is includible in gross income.

Filing your return

By mail

 If mailing a return with a <u>payment</u>, make the check or money order payable to the DC Treasurer. Write your FEIN, D-30, and the tax year on the payment. Staple your payment to the voucher Form D-2030P and fill in the oval for D-30 return. Do not attach the D-2030P and payment to the D-30 return. Send your return and payment to:

> Office of Tax and Revenue PO Box 96165 Washington, DC 20090-6165

 If mailing a <u>no payment due or refund</u> return, send the return to:

> Office of Tax and Revenue PO Box 96193 Washington, DC 20090-6193

Mail labels for these two post office boxes are on the back flap of the return envelopes included in this booklet.

Send in your original DC return with any schedules, not a copy. Fold your return once. Be sure to keep a copy for your records.

By accessing the DC Electronic Taxpayer Service Center (eTSC)

Unincorporated business taxpayers may file the D-30ES, Declaration of Estimated Franchise Tax for Unincorporated Businesses, or the FR-128, Extension of Time to File a DC Franchise or Partnership Return by accessing the DC eTSC website. There is pre-registration required. Allow 5-7 days for processing. Visit www.taxpayerservicecenter.com for information on completing an eTSC application.

Payment Options

Refer to the Electronic Funds Transfer (EFT) Payment Guide available on the DC website at $\underline{www.taxpayerservicecenter.com}$ for instructions for electronic payments.

Payment options are as follows:

 Electronic check (e-check). E-check is similar to ACH debit, but it is a one-time transaction where the taxpayer provides the banking information at the time of payment instead of storing the information. There is no fee for business e-check payments. eTSC does not allow the use of foreign bank accounts for business e-check.

ACH Credit. ACH credit is for business taxpayers only. There
is no fee charged by OTR, but the taxpayer's bank may charge
a fee. The taxpayer directly credits OTR's bank account. A
taxpayer does not need to be eTSC registered to use this payment type, and does not need access to the website.

Note: When making ACH Credit payments through your bank, please use the correct tax type code (00260) and tax period ending date (YYMMDD).

- ACH Debit. ACH debit is for registered eTSC business taxpayers only. There is no fee. Taxpayers' bank routing and account numbers are stored within their online eTSC account. This account can be used to pay any existing liability. The taxpayer gives OTR the right to debit the money from their bank account. eTSC does not allow use of foreign bank accounts for business ACH Debit.
- Credit/Debit Card. The taxpayer may pay the amount owed using Visa®, MasterCard®, Discover® or American Express®. You will be charged a fee equal to 2.5% of the tax payment. The fee is paid directly to the District's credit card service provider. Payment is effective on the day it is charged.
- Check or money order. Include a check or money order, payable to the DC Treasurer, with your completed return. Write your Federal Identification Number (FEIN), daytime telephone number, '2014', and 'D-30' on the check or money order. Attach your payment to the Form D-2030P Payment Voucher provided in this booklet. Mail the D-2030P with, but not attached to the D-30 tax return to:

Office of Tax and Revenue PO Box 96165 Washington, DC 20090-6165

Note: <u>International ACH Transaction (IAT)</u>. Your payment cannot be drawn on a foreign account. Pay by money order (US dollars) or credit card instead.

Penalties and interest

OTR will charge -

- A penalty of 5% per month if you fail to file a return or pay any tax due on time. It is computed on the unpaid tax for each month, or fraction of a month, that the return is not filed or the tax is not paid. It may not exceed an additional amount equal to 25% of the tax due;
- A 20% penalty on the portion of an underpayment of taxes if attributable to negligence. Negligence is a failure to make a reasonable attempt to comply with the law or to exercise ordinary and reasonable care in preparing tax returns without the intent to defraud. One indication of negligence is failure to keep adequate books and records;
- Interest of 10% per year, compounded daily, on a late payment;
- A one-time fee to cover internal collection efforts on any unpaid balance. The collection fee assessed is 10% of the tax balance due after 90 days. Payments received by OTR on accounts subject to the collection fee are first applied to the collection fee, then to penalty, interest and tax owed;
- A civil fraud penalty of 75% of the underpayment which is attributable to fraud (see DC Code §47-4212).

Special circumstances

Special rules on depreciation and §179 property

For federal tax purposes, businesses are allowed to deduct additional bonus depreciation and additional Internal Revenue Code (IRC) §179 expenses. However, for DC tax purposes, you may not claim the 30 or 50 percent federal bonus depreciation or additional expenses allowed under IRC §179. Similarly, DC does not allow the acceleration of depreciation deductions currently allowed under the 2008 Economic Stimulus Act.

Office of Tax and Revenue (OTR) rulings

All rulings issued prior to December 31, 2002 were revoked. Tax-payers cannot rely on these rulings unless they were re-submitted to the *OTR for review, and if approved, reissued. Direct any ruling questions to OTR, General Counsel at (202) 442-6500.*

Amended returns

You must use the D-30 tax form of the year you are amending. Fill in the "Amended Return" oval on Page 1 of the D-30 and complete the "Tax Year Ending" box. Attach a detailed statement of the adjustment(s) and the amount of any refund received.

If the Internal Revenue Service (IRS) adjusts your federal return or if you file an amended federal return, you must file an amended DC return within 90 days of the date of the IRS notice. If the federal adjustment makes you eligible for a DC tax refund, you must file for the DC refund within 180 days of notice of the adjustment.

Mail the amended return with payment and any additional attachments to the

Office of Tax and Revenue PO Box 96165 Washington, DC 20090-6165

Mail the amended return if no payment due or refund and any additional attachments to the

Office of Tax and Revenue PO Box 96193 Washington, DC 20090-6193

Final return

If you are not required to continue filing a return due to the ending of business operations, shade the 'fill in if final return' oval on the return. We will then cancel your filing requirement. Do not use this oval to indicate the return is the final for the period being reported.

Getting started

To complete the paper Form D-30, in general you will need:

- · A pen with black ink
- A calculator

Not all items will apply. Fill in only those that do apply. If an amount is zero, make no entry, leave the line blank.

All entries on the return, combined schedules, and attachments are whole dollars only. Do not enter cents. Round cents to the nearest dollar. Examples:

\$10,500.50 rounds to \$10,501 \$10,500.49 rounds to \$10,500

Taxpayer Identification Number (TIN)

You must have a TIN, whether it is a Federal Employer Identification Number (FEIN), Social Security Number (SSN) or Preparer Tax Identification Number (PTIN).

- A FEIN is a number issued by the IRS. To apply for a FEIN, get Form SS-4, Application for Employer Identification Number, or get this form online at www.irs.gov/businesses and click on Employer Identification Number (EIN) under Starting a Business. You may also get this form by calling 1-800-TAX-FORM (1-800-829-3676);
- A SSN is a valid number issued by the Social Security Administration (SSA) of the United States Government. To apply for a SSN, get form SS-5, Application for a Social Security Card, from your local SSA office or get this form online at www.ssa.gov. You may also get this form by calling 1-800-772-1213;

Franchise tax rate and minimum tax

The tax rate is 9.4 percent on your "Total District taxable income" on Line 36. The minimum tax is \$250, even if you have a loss. If your DC gross receipts are more than \$1,000,000, the minimum tax is \$1,000.

Incomplete forms will delay processing

Complete all items on the D-30 and all applicable schedules including combined schedules, otherwise OTR will send the return back to you for completion and resubmission.

Help us identify your forms and attachments

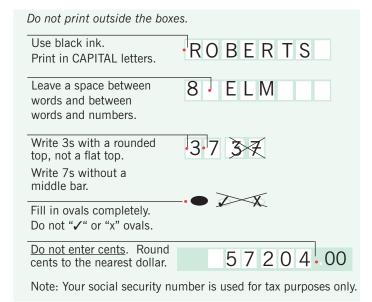
Write your FEIN/SSN, tax period, business name and address on any statements submitted with the return or filed separately. Your identification number is used for tax administration purposes only.

For members filing under combined reporting, please ensure you place your EIN in the 'Federal Employer I.D. Number' field and the designated agent's FEIN in the 'Designated Agent FEIN' field. Members must also complete the "Fill in if Combined Return" and the "Fill in if Final Return" ovals.

Note: The District will allow submission of the D-30 return using a CD. D-30 filers must print and submit pages 1-6, Schedule UB, Worldwide Combined Reporting Election Form and combined schedules, if applicable. All other attachments must be on the CD. The CD should include a copy of the entire return and indicate on the CD the FEIN/SSN. Images on the CD should be submitted in PDF format.

Filling out the form

To aid us in processing your return, please follow these rules:



Personal Information

Complete the personal information as instructed, using CAPITAL letters and black ink. Use one block per letter, including a space between address fields. Please write clearly, otherwise, processing may be delayed.

Assembling your D-30 return

- Do not staple or otherwise damage the Bar Code located in the upper right hand corner of this form or schedule(s) being attached:
- Do not cross out the tax year on the 2015 return. If you are not filing a 2015 D-30 Unincorporated Business Franchise Tax Return, do not use this booklet. Request a booklet for the specific year you are filing by calling our Forms Center at (202) 442-6546, or visit the Customer Service Administration at 1101 4th Street, SW, 2nd Floor, Washington, DC 20024. You also may visit our website at www.taxpayerservicecenter.com for prior year unincorporated business franchise tax returns.
- Attach any other supporting forms or schedules as applicable:
 - o Worldwide Combined Reporting Election form
 - o Other Combined Reporting Schedules as required
 - o Federal Schedule M-3
 - o Federal UTP
 - o Any other forms or schedules
- Staple your check or money order to the D-2030P, Payment Voucher, completing the oval for the D-30.
- Use the appropriate mailing label on the back flap of the return envelope.

Signature and verification

An authorized officer or designated agent of the corporation must sign and date the return. A receiver, trustee, or assignee must sign any return that he/she is required to file for the corporation. Any person who prepared the return for compensation must also sign, date and provide the necessary identification number. If a firm or corporation prepares a return, it should be signed in the name of the entity. The signature requirement does not apply when a taxpayer's regular employee prepares the return. Please review the tax return before you allow a paid preparer to issue a return on your behalf.

Preparer Tax Identification Number (PTIN)

If you are a paid preparer, you are required to have a PTIN issued by the IRS. A PTIN is a number issued and authorized by the IRS to file a return on the taxpayers' behalf.

Explanation of terms

Business income

Income from transactions and activities in the regular course of the taxpayer's trade or business is business income. This includes income from tangible and intangible property if the acquisition, management and disposition of the property are part of the taxpayer's regular trade or business operations. Income of any type — manufacturing income, compensation for services, sales income, interest, dividends, rents, royalties, gains, operating and non-operating income from any class or from any source — is business income if it arises from transactions and activities occurring in the regular course of a trade or business. Whether income is business or non-business depends on the underlying transactions and activities which are the elements of a particular trade or business. In general, transactions and activities that depend on or contribute to the operation of your enterprise constitute your trade or business.

Commercial domicile

The principal place from which you direct or manage your trade or business.

Compensation

Wages, salaries, commissions and other forms of remuneration paid or accrued to employees for personal services.

Non-business income

All income except business income.

Transportation company

Any business engaged in transporting persons, goods or property of others for hire.

Sales

All gross receipts, including dividends, interest and royalties, considered to be business income which are not required to be allocated.

Taxable in another state

For purposes of allocating and apportioning income among DC and another jurisdiction, you must be subject in that jurisdiction to:

- a net income tax,
- a franchise tax measured by net income,
- a franchise tax for the privilege of doing business,
- a corporate stock tax in that state, or
- that state has the jurisdiction to subject the taxpayer to an income tax regardless of whether, in fact, the state does or does not.

Specific Instructions

Negative amounts

If you enter a negative amount on a line, fill in the oval to the left of the entry where it states "Fill in if minus". **Do not enter a minus sign or parenthesis.**

Allocation and apportionment of income

You must complete Schedule F even if your operation is 100% in the District. Any unincorporated business carrying on a trade or business in DC and other jurisdictions must apportion its business income among DC and the other jurisdictions. Apportion the net income from trade or business activities using the appropriate apportionment factor. See Schedule F, page 4 of the D-30. You must allocate your non-business income.

Non-business income allocation

Allocate items of non-business income to DC. The following gains and losses from sales or other dispositions of property are allocated to DC:

- Real property located in DC (other than realty used in the trade or business whether held for sale or otherwise);
- Tangible personal property (other than any tangible personal property used in the trade or business whether held for sale or otherwise) if:
 - The property had a situs in DC at the time of sale or other disposition; or
 - Your principal place of business is in DC and you are not taxable in the situs state.
- Intangible personal property (other than intangible personal property of any kind used in the trade or business whether held for sale or otherwise) is allocable to DC if your principal place of business is in DC.

Allocate to DC net rents and royalties from real properly located in DC.

Allocate to DC interest and dividends from sources in DC unless specifically excluded from taxation and/or subject to apportionment as business income.

Allocate to DC income from rents and royalties, patents, copyrights, trademarks, service marks, secret processes and formulas, franchises and similar property (if not used in the trade or business). These royalties are allocated according to the patent's location or place of use, or where the copyrighted material is published or used. If DC is the principal place of business of a business entity, not subject to tax anywhere else, then the rent or royalty income is allocable to DC.

Income from the sale of tangible personal property to the United States Government by a business that has its principal place of business outside DC is income from DC sources if the property is delivered from outside DC for use in DC.

All other non-business income from DC sources is allocable to DC.

Where income is allocable among DC and other jurisdictions, you must allocate all expenses, losses and other deductions incurred in the production of the income in the same way. Losses incurred in the production of non-business income are allowable if any profit from the transaction would have been taxable.

Gross Income

Note: When OTR requests that a statement be attached, the statement should show the source of the items making up the entries.

D-30, page 1, line-by-line

Line 1 Gross receipts, minus returns and allowances

Enter the total gross receipts from sales and operations, minus returns and allowances.

Line 2 Cost of goods sold and/or operations

Enter the figure from D-30, Schedule A, Line 8. If the production, manufacture, purchase, or sale of merchandise is an incomedetermining factor in the trade or business, you must inventory merchandise at the start and end of the tax year. You may value it at cost or market value, whichever is lower; or by another IRS-approved

method. You must continue to use the method chosen until you get permission from the Office of Tax and Revenue to change. If the inventories do not agree with the balance sheet figures, attach an explanation.

Cost of Operations (where inventories are not an income-determining factor). If the amount entered on Line 2, page 1, includes an amount applicable to the cost of operations, attach a statement showing in detail: (1) salaries and wages; and (2) other costs.

Line 3 Gross profit

Line 1 minus Line 2. Enter the result on Line 3.

Line 4 Dividends

Enter the total of all taxable dividends. You may deduct Subpart F income (as defined in IRC §952). Attach a detailed statement showing the calculation of the taxable amount.

Line 5 Interest

Enter interest the business received or is credited with during the tax year, including that paid on obligations of a State, Territory of the United States, or any of their political subdivisions, except those of DC.

Exclude interest income on obligations or securities issued by the United States or its instrumentalities which is included in federal gross income.

Expenses incurred in the purchase or production of income from U.S. Treasury securities are included on Line 26(b). (Attach a detailed statement.)

Line 6 Gross rental income

Enter the amount received from the rental of real or personal property.

NOTE: DC does not allow the additional federal bonus depreciation. If you claimed this additional depreciation on your federal return, you must adjust depreciation for DC tax purposes without claiming the bonus depreciation. Attach a computation showing that your DC claimed depreciation does not include the federal bonus depreciation and that the basis of the property, for DC tax purposes, has not been reduced by any bonus depreciation amount claimed on your federal return. DC also does not allow the additional IRC §179 expenses above \$25,000. If you claimed these additional expenses on your federal return, reduce such expenses claimed on your D-30 by that amount.

Line 7 Gross royalties

Report royalty income in the same manner and detail as rental income. Royalties from patents you developed, from the licensing of processes or a trade name and sales of know-how are business income. Enter royalty income from line 4 of federal Form 1040, Schedule E, Supplemental Income and Loss. Please attach Schedule E.

Line 8(a) Net capital gain

Capital gains or losses are treated in the same manner as they are for federal corporation income tax purposes. (See detailed instructions on Federal Schedule D, Form 1120, Corporation Income Tax Return.) Report IRC §1231, Property Used in the Trade or Business and Involuntary Conversions, gains as business income on Line 8(a).

NOTE: Since the 30 and 50 percent federal bonus depreciation are not allowed for DC tax purposes, recalculate the capital gain/loss reported on your federal return without taking into account the federal bonus depreciation amount. Attach a statement showing the adjustments.

Line 8(b) Ordinary gain (loss)

From Part II, Federal Form 4797. Enter the total ordinary gain (or loss) from your federal Form 4797, Sales of Business Property. Attach a copy of your Form 4797.

Line 9 Other income

Enter the total income (loss) not reported elsewhere on the return; attach a detailed statement. Do not enter on Line 26(a) other income related to a trade or business. Enter it on line 9. Attach a statement.

Line 10 Total gross income

Enter the total of lines 3 through 9.

Deductions

Deductions are allowed if they are ordinary and necessary and directly related to business income as explained in these instructions. Do not take deductions on this return for interest, taxes, contributions and other itemized deductions normally deductible on individual income tax returns filed by the owners or members of the business.

Line 11 Salaries and wages

Enter all salaries and wages not deducted elsewhere on the return.

- Do not include compensation of the owners/members of the unincorporated business.
- Do not include wages incurred in computing the Economic Development Zone Incentives credit, QHTC wage credits, and Bone Marrow Credit.

Line 12 Repairs

Enter the cost of incidental repairs, including labor, supplies and other items that do not add to the value or appreciably prolong the property's life. You may charge to a capital account, expenditures for new buildings, machinery, equipment and/or permanent improvements or betterments that increase the value or appreciably prolong the life of the property.

Line 13 Bad debts

Report bad debts in the same manner as you report them for federal tax purposes. Attach a copy of the information you submitted with your federal return.

Payments to related parties

(Lines 14 and 17). Recent DC legislation allows the deduction of certain interest and intangible expenses, including royalty expenses paid directly or indirectly to related parties if:

- the principal purpose of the payment was not the avoidance of tax:
- the payments were made at arm's length; and
- the related party paid income tax equal to or greater than 4.5 percent of the amount of interest or intangible expense in another jurisdiction.

Line 14 (a) Royalty payments

Royalty payments to related entities are not an allowable deduction. Exceptions to the disallowance of such payments may be found in DC Code 47-1803.03(d)(7)(B). If you are the recipient of a related entity's royalty payments and you are filing a return and paying tax on these payments in the District, see the instructions for Schedule G to determine whether you can deduct any of the payment amount from your income.

Line 14 (b) Minus nondeductible payments to related entities

Subtract the nondeductible payments to related entities.

Line 15 Rent

Enter the amount of rent paid or accrued for business property in which the unincorporated business has no equity.

Line 16 Taxes

Enter taxes imposed on taxpayers as reported in Schedule C, page 3, Form D-30. Do not deduct these taxes:

- Income and excess profit taxes;
- DC franchise tax: or
- Taxes assessed against the property for local benefits of a kind tending to increase the value of the property assessed.

Line 17 (a) Interest expense

Enter interest paid or accrued on business debt (Form D-30 Schedule E, page 3). Interest payments to related entities are not an allowable deduction. Exceptions to the disallowance of such payments may be found in DC Code §47-1803.03(d)(7)(B). If any interest income is not subject to the DC unincorporated business franchise tax, then the related expense is not deductible. If you are the recipient of a related entity's interest or other intangible payments and you are filling a return and paying tax on these payments in the District, see the instructions for Schedule G to determine whether you can deduct any of the payment amount from your income.

Line 17 (b) Minus nondeductible payments to related entities Subtract the non deductible payments made to related parties. Refer to **Payments to Related Parties** instructions.

Line 18 Contributions and/or gifts

Enter from Schedule B, page 3, Form D-30, contributions and/or gifts made to qualified organizations in the tax year. This deduction may not exceed 15 percent of the net income, (Line 23), of the business before the contributions and gifts are deducted. Attach a separate statement with detailed information about the contributions and gifts. Contribution and gift carry-overs are not allowed.

Note: a charitable expense incurred by a member of a combined group shall, to the extent allowable as a deduction pursuant to section 170 of the Internal Revenue Code of 1986, be subtracted first from the business income of the combined group, subject to the income limitations of that section applied to the entire business income of the group, and any remaining amount shall then be treated as a nonbusiness expense allocable to the member that incurred the expense, subject to the income limitations of that section applied to the nonbusiness income of that specific member.

Line 19 Amortization

Enter the amortization amount from your federal Form 4562 (or 4562FY), Depreciation and Amortization. Attach a completed copy of Form 4562 (or Form 4562FY) to your D-30 return.

Line 20 Depreciation

Enter the depreciation amount claimed on your federal Form 4562 subject to limits described. Do not include amounts deducted elsewhere on the D-30. Use on your DC return, the same depreciation method used on your federal return. Attach a copy of your Form 4562.

You must recapture depreciation on your D-30 from the sale of an asset.

***NOTE:** If you claimed the federal bonus depreciation amount or additional IRC §179 expenses above \$25,000 on your federal return, do not claim these amounts on your D-30. Recompute the depreciation taken for DC tax purposes without the federal bonus depreciation. Attach a statement showing the recomputation.

D-30 page 2, line-by-line

Line 21 Other allowable deductions

Enter the amount from Schedule G, page 4, Form D-30.

Line 22 Total deductions

Add Lines 11-21 and enter on Line 22.

Line 23 Net income

Subtract Line 22 from Line 10; enter the amount on Line 23

Line 24 Net operating loss deduction

Enter any DC net operating loss carried <u>forward</u> from a year <u>before</u> 2000. DC does not allow a net operating loss <u>carryback</u>. A form, D-30 NOL, for claiming the NOL is provided. Complete D-30 NOL and attach with this return.

Line 25 Net income after NOL deduction

Line 23 minus Line 24. Enter this amount on Line 31 if the income is entirely business income from a DC trade or business and, therefore, not subject to apportionment. Fill in the oval if the amount entered is a minus.

Line 26(a), (b) and (c)

Report on Lines 26(a) and 26(b) non-business income and related expenses. Include expenses connected with the production of income from U.S. Treasury securities on line 26(b). Enter the net difference on Line 26(c). Submit a detailed statement explaining the allocation of income and expenses. Do not enter rental income related to a trade or business.

Line 27 Net Income from trade or business subject to apportionment

Subtract Line 26(c) from Line 25. Enter the amount on Line 27.

Line 28 DC apportionment factor

Enter the factor from Line 6 of Schedule F, page 4, Form D-30.

Line 29 Net income from trade or business apportioned to DC

Multiply the amount on Line 27 by the DC apportionment factor on Line 28. Enter the result on Line 29.

Line 30 Other Income/deductions attributable to DC

Enter the Line 26(c) income/deduction attributable to the District.

Note: If you are a partner in another partnership that filed an unincorporated business franchise tax return and claimed a deduction for the salary allowance and/or exemption amount, you must add the post-apportioned distributive share of the unincorporated business salary allowance attributable to the partner under DC Code §47-1803.03(a)(11), and/or the unincorporated business exemption amount attributable to the partner under DC Code §47-1808.04, on Line 30 of the D-30. If filing a combined report, this amount will be reflected as an addition under the partner's column on Line 33 of Schedule 1 of the combined report.

Also you must include a statement to reflect the specific amounts for each of the items listed below:

- portion of Line 26(c);
- portion of unincorporated business salary allowance attributable to DC;
- portion of unincorporated business exemption attributable to DC.

Line 31 Total District net income (loss)

Add Lines 29 and 30. Enter the result on Line 31.

Line 32 Salary for owner(s)/member(s) services

See Schedule J, column 4, page 5, Form D-30. You may deduct a reasonable amount for salaries or other compensation for personal services actually rendered by the owner(s) or member(s) of the business in the active conduct of the business.

- The reasonable amount of compensation for owner(s) and members(s) is reduced by any fees paid to an independent management or collection entity for management services performed for the business.
- Do not claim an amount accrued to an owner(s) or member(s) as a drawing account unless it is for services actually rendered.
- The aggregate deduction allowed for salaries or other compensation may not exceed 30 percent of the Line 31 amount of District total net income.

Line 33 Exemption

An exemption of up to \$5000 is allowed. This exemption is not allowable if Line 29 is a minus which results in a net operating loss.

- Enter in the boxes on Line 33(a), the number of days this return covers. If it is a full year enter 365 days and enter \$5000 on Line 33.
- Prorate the exemption if the return is for less than a full year because either the business started after the beginning of the tax year or it ceased before the end of the year. Prorate the exemption by dividing the number of days entered on line 33(a) by 365 to arrive at a percent. Multiply \$5000 by that percent. Include a statement showing your calculation of the exemption amount. Also enter for each member a portion of this amount in Schedule J, column 5, page 5, Form D-30.

Line 34 Total taxable income before apportioned NOL deduction

Add Lines 32 and 33 and subtract the result from Line 31. Enter the result on Line 34.

Line 35 Apportioned NOL deduction

Enter on this line the amount of any DC apportioned net operating loss carry forward for year 2000 and later. A form for claiming the NOL is provided. Complete the NOL deductions form and submit with this return.

Line 36 Total District taxable income

Enter the result of subtracting Line 35 from Line 34.

Line 37 Tax

Calculate the tax by multiplying any positive amount on Line 36 (Total District taxable income) by .0940. Enter the result on Line 37.

Line 38 Minus nonrefundable Credits

Subtract the nonrefundable credits entered from Schedule UB, Line 18. Employers who hired at least 10 DC residents after January 1, 2010, and continue to employ such DC employees for at least one year for any business project that encourages, promotes and stimulates economic development in key economic sectors, may qualify for an annual job growth tax credit.

Note: The credits cannot be shared among combined group members.

Line 39 Total DC gross receipts

From Line 4 of (MTLGR) worksheet.

Line 40 Net tax

Subtract Line 38 from Line 37. Enter the result on Line 40, except:

- 1. If Line 39 is less than or equal to \$1M and Line 40 is less than \$250, enter \$250
- 2. If Line 39 is greater than \$1M and Line 40 is less than \$1,000, enter \$1,000

Line 41 Payments:

Enter the amount paid with:

- Your request for an extension of time to file or with your original return if filing an amended return;
- Your estimated franchise tax payments (Form D-30ES);

Lines 42 to 45

Follow the instructions on the form.

Line 46 Amount to be refunded

Subtract the Line 45 amount from the Line 44 amount and enter the result on Line 46.

Lines 47 Underestimated penalty

If you are filing Form D-2220, Underpayment of Estimated Franchise Tax by Businesses, with your D-30 return, include the underpayment interest in the amount you owe, enter the amount on Line 43, and pay the total amount with the return. Fill in the oval on Line 47, enter the amount due for underpayment of estimated franchise tax on Line 47, and attach the D-2220 to the return.

Other Form D-30 schedules

Schedule F - DC apportionment factor

All unincorporated businesses engaging in a trade or business both in and outside DC must use the single sales factor formula to apportion its business income. Unincorporated businesses domiciled in DC and not subject to tax elsewhere must report 100 percent of their net business income and allocate 100 percent of their non-business income to DC. Unincorporated businesses carrying on a trade or business in DC and in other jurisdictions must apportion trade or business income to DC. Multiply the total income by a fraction. The numerator is the taxpayer's total sales in DC during the tax year. The denominator is the taxpayer's total sales everywhere during the tax year. Sales other than sales of tangible personal property shall be apportioned to the District by using the market-based sourcing rules.

Sales factor

The sales factor, except for transportation companies, is a fraction; the numerator is the taxpayer's total sales in DC during the tax year. The denominator is the taxpayer's total sales everywhere during the tax year.

Transportation companies – the sales factor is a fraction; the numerator is the total revenue units the company first received as originating or connecting traffic at a point in DC. Add to this the total revenue units the company discharged or unloaded at a point in DC, at the termination of the transportation movement or for transfer to a connecting carrier. The denominator is twice the total revenue units originated everywhere during the tax year. One ton of freight equals one revenue unit; ten passengers equal one revenue unit. If the company's revenue is predominantly from transportation of passengers, you may use the number of passengers loaded and discharged, in place of originating and terminating tonnage.

Tangible personal property sales, including sales to the United States Government, are considered to occur in DC, no matter where title is transferred, F.O.B. point, or other sales conditions, if the property:

- Is delivered or shipped to a purchaser in DC; or
- Has an ultimate destination in DC, after all transportation (including any by the purchaser) is completed; or
- Is delivered or shipped from an office, store, warehouse, factory, or other storage place in DC to a destination outside DC – and is not taxable in the state to which the property is shipped or delivered.

Except for transportation companies – non-tangible personal property sales are considered as occurring in DC if the income-producing activity or service is performed:

- In DC: or
- The proportion of the income-producing activity or service performed in DC is greater than that performed in any other jurisdiction, based on performance cost.

General

If using the income allocation and apportionment rules results in a tax that does not fairly represent the tax liability arising from your trade or business in DC or from non-business sources in DC, you may petition for, or OTR may require, if reasonable:

- a separate accounting, unless the entity is conducting a unitary business;
- exclusion of one or more of the factors;
- inclusion of one or more additional factors that fairly reflect the extent of your trade or business in DC; or
- use of any other method to effect a fair allocation and apportionment of your income.

New Markets Tax Credit

DC taxable income does not include the gross income of a qualified community development entity as defined in IRC section 45D(c)(1) that has received an allocation or suballocation of new markets tax credits from the federal government under IRC section 45D(f). This exclusion applies to the extent the gross income is derived from one or more qualified low-income community investments as defined in IRC section 45D(d)(1). Complete Schedule G and enter on line 21, Other allowable deductions.

Schedule G - Other allowable deductions

If you are the recipient of royalty, interest or other intangible payments from a related entity that has not deducted the payment amounts on their return and you are filing a return and paying tax on these payments in the District, enter, on Schedule G, the amount of income you are reporting on this return to the extent it was included: on lines 14(b) and 17(b) of the related entity's District of Columbia D-30 tax return; on lines 17(b) and 22(b) of the related entity's District of Columbia D-20 tax return; or on a related entity's return filed in another state where a similar adjustment was made.

Schedule H – Income not reported (claimed as nontaxable) –(page 4 of Form D-30)

List all income of the unincorporated business that you consider not subject to the DC unincorporated business franchise tax. State why the income should be considered nontaxable.

Schedule I - Balance sheets (page 5 of Form D-30)

Submit balance sheets for the start and end of the tax year. Conform them to the unincorporated business' books and records and your federal return. Attach to your D-30 an explanation of any variation.

Schedule J – Distribution and reconciliation of net income (or loss) (Page 5 of Form D-30)

Under provisions of DC Code §47-1805.01(a), you must enter the SSN of each of the owners. The SSN is necessary for the proper identification of an owner's tax account with DC and will be used only for tax administration purposes. Any additional names, SSNs, etc. may be listed on an attachment filed with the return.

Note: If you filed a federal Schedule M-3, net income (loss) reconciliation with total assets of \$10M or more, attach a copy of it with your DC return.

Supplemental information (page 6 of Form D-30)

Please provide all the information requested in this schedule.

Worldwide Combined Reporting Election Form

If the Worldwide Combined Reporting Election Form is completed and submitted, ensure the "Fill in if Worldwide" oval is shaded. Submit this form with the initial year of election.

Schedule UB, Business credits

Use this schedule to claim: the Economic Development Zone Incentives Credit (see instructions); QHTC credits (see instructions); the Organ and Bone Marrow donor credit (see below); the Job Growth Incentive Act credit (see below); the Alternative Fuel Infrastructure Installation Credit; and the Alternative Fuel Vehicle Conversion Credit (see below).

The Organ and Bone Marrow Donor Act of 2006 provides a credit to an employer who allows up to 30 days paid leave to an employee who donates an organ and up to 7 days paid leave for donating bone marrow.

This is a non-refundable credit equal to 25% of the regular salary paid to the donor-employee during the leave period. This credit may not be used to reduce the \$250 or \$1,000 minimum tax. An employer claiming this credit may not also deduct the salary paid the donor-employee for the same leave period.

This credit is not available if the employee is eligible for leave under the Family and Medical Leave Act of 1993.

The 2011 Budget Support Act of 2010 authorized funds for the **Job Growth Incentive Act** tax credits. The credit must be approved by the Mayor in advance of starting the project. The process for applying for the credit is found in DC Official Code §47-1807.54. The approval will provide the amount of the allowable credit and the periods for which the credit can be claimed if the employer continues to qualify. The allowable approved amount of the credit can be claimed on Schedule UB, Business Credits, Line 4 for D-20 filers or Line 14 for D-30 filers.

In order to apply for the credit, the employer must be planning a project that will:

- Will bring a net job growth to DC of at least 10 new jobs with an average yearly wage of at least 120% of the average yearly wage of DC residents;
- Will increase income tax and payroll revenue for the DC;
- Will result in a retention of any new positions for at least one year; and
- Would not have occurred but for the job growth tax credit.

Beginning in 2014, through the taxable year ending December 31, 2026, there are 2 non-refundable credits allowed against DC Unincorporated Business Franchise Tax for: (1) alternative fuel infrastructure installation; and, (2) alternative fuel vehicle conversion. (See DC Code §47-1808.10 and §47-1808.11)

The alternative fuel infrastructure credit is a credit in the amount of 50% of the equipment and labor costs attributable to the purchase and installation of alternative fuel storage and dispensing or charging equipment on a qualified alternative fuel vehicle refueling property. The credit is limited to \$10,000 per qualified alternative fuel vehicle refueling property or per vehicle-charging station. The equipment and labor costs for which this tax credit may be claimed may not include costs associated with the purchase of land, access to land, the purchase of an existing qualified alternative fuel vehicle refueling property, or construction or purchase of any structure.

If the amount of this tax credit exceeds the tax otherwise due, the amount of the credit not used may be carried forward for up to 2 tax years. If the alternative fuel storage and dispensing equipment or charging equipment on a qualified alternative fuel vehicle refueling property is no longer used to dispense or sell alternative fuel to the public, any unused tax credit is forfeited and the taxpayer may not claim a tax credit for the portion of the tax year after the date on which the alternative fuel storage and dispensing equipment was no longer used to dispense or sell alternative fuel to the public.

The alternative fuel vehicle conversion credit is a credit in the amount of 50% of the equipment and labor costs attributable to the cost of converting a motor vehicle licensed in the District that operates on petroleum diesel or petroleum derived gasoline to a motor vehicle that operates on an alternative fuel.

The term "Alternative fuel" means a fuel used to power a motor vehicle that consists of one or more of the following:

- a. At least 85% ethanol;
- b. Natural gas;
- c. Compressed natural gas;
- d. Liquefied natural gas;
- e. Liquefied petroleum gas;
- f. Biodiesel, excluding kerosene;
- g. Electricity provided by a vehicle-charging station; or
- h. Hydrogen.

The term "Qualified alternative fuel vehicle refueling property" means a property in the District that contains equipment available for use by the public for storing and dispensing alternative fuel, including charging electrically.

If you are claiming one of these credits complete the Commercial Form, Alternative Fuel Vehicle Conversion and Infrastructure Credits, available online at www.taxpayerservicecenter.com by clicking on 'Forms', '2015 Business Tax Forms and Publications'. Attach it to the D-30, Schedule UB.

Economic Development Zone Incentives Credit

Supporting Documentation Required If you are claiming an Economic Development Zone Incentives (EDZI) credit against your DC franchise tax liability, you MUST attach to your return:

- a copy of the DC Council resolution approving the qualification for any credits claimed;
- a certification of eligible employees issued by the DC Department of Employment Services; and
- 3. a completed EDZI Credit Worksheet.

If you do not have items 1 and 2, you do not qualify for this credit.

The EDZI Amendment Act allows a qualified business, under certain circumstances, to take various credits against its franchise tax liability. (The maximum annual credit is \$7500.) A qualified business is one that is approved as being qualified under Section 5 of EDZI by the DC Office of Economic Development. You MUST complete the worksheet below and include the necessary attachments with your return. The following credits are available under EDZI to qualified businesses:

- a credit against the franchise tax in an amount equal to 50 percent of the wages of all certified employees who meet the requirements of Section 10(b) of EDZI;
- a credit against the franchise tax in an amount equal to 50 percent of the insurance premiums attributable to all employees for whom it obtains employer liability insurance under the District of Columbia Workers Compensation Act of 1979; and
- 3. a rent credit for lessors against the franchise tax. The credit allowed is the difference between the rental market value of the space leased to a licensed non-profit child care center and the actual rent stated in the lease agreement as indicated in the DC Council resolution approving the qualification of the business. A non-profit child care center is a child development center as defined in Section 10 of EDZI.

A credit carry forward for five years is available for any EDZI credit not used in a previous year. The maximum amount that may be claimed in any year is \$7500, including any carry forward.

Column 1 - Credit Category	Incentives Credit Worksheet (maximum annual credit allo			Column 4
Column 1 - Credit Category	Column 2	_	olullii 3	Column 4
A. Certified employees wages	Total Wages \$	50% of Wages	Col. 2 x .50 =	\$
B. Certified (eligible employees) workers'	Total	50% of		
compensation liability insurance premiums	Premiums \$	Premiums	Col. 2 x $.50 =$	\$
C. Child care center rent (lessor)	Rental market value			¢.
	Total child care center credit	\$		
	Total of Column 4 (if more than \$7,50)	0, enter \$7,500)		\$
	Add any EDZI credit carry forward from	\$		
	Total EDZI credit (enter on Schedule UE	\$		

Key Website Resources

DC Official Code

www.lexisnexis.com/hottopics/dccode/

DC Regulations

www.dcregs.dc.gov/

US Department of State Tax Exemption Cards

www.state.gov/ofm/tax/

DC Tax Forms/Publications

www.otr.cfo.dc.gov/page/tax-forms-and-publications

Mailing Address for Returns

www.otr.cfo.dc.gov/node/392882

Electronic Funds Transfer (EFT) Guide

www.otr.cfo.dc.gov/publication/electronic-funds-transfer-payment-guide-eft

NACHA Guidelines

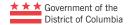
www.nacha.org/

Social Security Administration

www.ssa.gov/

Internal Revenue Service

www.irs.gov



2015 D-30 Unincorporated Business Franchise Tax Return



Important: Print in CAPITAL letters using black ink.

Та	храу	er Identification Number	1S	official use only Vendor ID# 0000				
		Fill in O if FEIN	OC: Outside DC:		OFFICIAL USE ONLY VEHICOF ID# 0000			
		Till III III III III III						
Е	Susine	ess name		Tax period	d ending (MMYY) Fill in if Amended Return			
					Fill in if Final Return			
E	Busine	ess Mailing Address line #1			Fill in if Combined Report*			
					*You must fill in the Designated Agent info below Fill in if Worldwide**			
E	Busine	ess Mailing Address line #2			**WorldWide form must be filed with this return			
	.,			2	0.1 4.4			
C	ity			State Zip	Code + 4			
	!	and a district Name		Doo	ignated Agent FEIN			
	esigi	nated Agent Name		Des	ignated Agent FEIN			
Ш	4							
					ENTER DOLLAR AMOUNTS ONLY			
	1	Gross receipts, minus returns and allowances		1 \$	00			
	2	Cost of goods sold (from D-30, Schedule A) and/or o		2 \$	00			
l i l	3	Gross profit Line 1 minus Line 2	Fill in if minus:	3 \$	00			
ME	4	Dividends. Minus Subpart F income (attach statement)		4 \$.00			
GROSS INCOME	5	Interest (attach statement showing calculations)		5 \$.00			
S	6	6 Gross rental income (attach statement)			00			
SOS	7	7 Gross royalties (attach statement)			.00			
GF		8(a) Net capital gain (attach a copy of your federal Schedule D)			.00			
	9	 Ordinary gain (loss) from Part II, fed. Form 4797, (attach of the rincome (loss) (attach a detailed statement) 	ch copy) Fill in if minus: Fill in if minus:	8b \$	00			
		Total gross income. Add Lines 3–9.	Fill in if minus:					
		-	10 \$.00				
		LINE 10 IS \$12,000 OR LESS, STOP HERE, DO NOT FILE Salaries and wages (Do not include owner(s)/member(s))	11 \$	00				
		Repairs	12 \$	00				
		·	13 \$	00				
		Bad debts (attach a copy of any statement filed with your fo	oo oo oo oo oo oo oo oo oo oo oo oo oo	15 🕠	00			
		(a) Royalty payments made		140	00			
		(b) Minus nondeductible payments to related entities \$ Rent	00 =	15 \$	00			
\sim		Taxes from D-30, Schedule C		16 \$	00			
0		(a) Interest payments \$	00	10 ψ	00			
DEDUCTIONS		(b) Minus nondeductible payments to related entities \$	00 =	- 170\$	00			
50			00 =	18 \$	00			
		18 Contributions and/or gifts from D-30, Schedule B			00			
		19 Amortization (attach a copy of your federal Form 4562, Part VI)						
		Depreciation (attach a copy of your federal Form 4562. Do additional federal bonus depreciation.)	not include the	20 \$.00			
	21	Other allowable deductions from D-30, Schedule G.		21 \$.00			
	22	Total deductions. Add Lines 11–21.		22 \$	00			
	23	Net income Line 10 minus Line 22.	Fill in if minus:	23 \$	00			

Taxpayer Name:



Ft	IIN or	SSN:		1 5	0 3	0	0 1	2 (0 0	0	0	
	24	Net operating loss deduction for years before 2000		24 \$								00
	25	Net income after NOL deduction Line 23 minus Line 24									00	
		(a) Non-business income/state adjustment (attach statement)	Fill in if minus:	25 \$								00
	20	•	Fill in if minus:	26a								
		(b) Minus: Related expenses (attach an allocation statement)		26b								00
		(c) Subtract Line 26(b) from Line 26(a)	Fill in if minus:	26c								00
		Net income from trade or business subject to apportionment Line 25 minus Line 26(c)	Fill in if minus:	27 \$								00
$\overline{\mathbb{Z}}$	28	DC apportionment factor from D-30, Schedule F, Col 3, Line 2		28								
NC NC	29	Net income from trade or business apportioned to DC Multiply Line 27 by the factor on Line 28	Fill in if minus:	29 \$								00
ABLE	28 29 30 31	Other income/deductions attributable to DC (attach statement)	Fill in if minus:	30 \$								00
TAX	31	Total DC net income (loss) Combine Lines 29 and 30	Fill in if minus:	31 \$								00
	32	Salary for owner(s) / member(s) services from D-30, Schedule	e J, Column 4.	32 \$								00
	33	Exemption Maximum is \$5000. Enter days in DC. → 33a If fewer than 365 days in DC, see page instructions for amount to claim.		33 \$								00
	34	Total taxable income before apportioned NOL deduction Line 31 minus total of Lines 32 and 33	Fill in if minus:	34 \$								00
	35	Apportioned NOL deduction Losses occurring for year 2000 and la	ter.	35 \$								00
	36	Total DC taxable income. Line 34 minus Line 35	Fill in if minus:	36 \$								00
	37	Tax 9.4% of Line 36		37 \$								00
S	38	Minus nonrefundable credits from Schedule UB, Line 18		38 \$								00
1	39	Total DC gross receipts from Line '4' from MTLGR worksheet					. (00				
5	40	Net tax. Line 37 minus Line 38. The minimum tax is \$250 if DC groare \$1M or less or \$1,000 if DC gross receipts are greater than \$1M.		40 \$								00
TS AND	41	Payments: (a) Tax paid, if any, with request for an extension of time to paid with original return if this is an amended return	file or	41a\$								00
ENTS		(b) 2015 estimated franchise tax payments		41b\$								00
M	42	Add lines 41(a), 41(b)		42 \$								00
TAX, PAYM	43	Tax due. If Line 40 amount is larger, subtract Line 42 from Line 40. Will this payment come from an account outside the U.S.? Yes No See instructions		43 \$								00
1	44	Overpayment. If Line 42 amount is larger, subtract Line 40 from Line 4	12.	44 \$								00
	45	Amount you want to apply to your 2016 estimated franchi		45 \$								00
	46	Amount to be refunded. Line 44 minus Line 45. Will this refund go to an account outside of the U.S.? Yes No See instructions.										00
	47	7 Estimated tax interest (Fill in oval if D-2220 attached)						.00)			
	PLEAS SIGN HERE	IGN		ct. Declarati	ion of pa	aid prepa	erer is bas	sed on the	informati	on ava	ailable to the	preparer.
		Officer's signature Title		Date				Telephone	number o	of pers	son to contact	t
	PAID											
Р	REPAR	RER Preparer's signature (if other than taxpayer) Date	Firm	n name				Firm a	ddress			
ONLY	Preparer's PTIN		f you want t vith the Offic									

chedule A - COST OF GOODS SOLD (S	See specific instructions for	Line 2.)				
Inventory at beginning of year (if different fro				\$		
Purchases						
2. Purchases						
Cost of Labor.						
Material and supplies.						
Other costs (attach statement) - (Additional 30	0% and 50% federal bonus deprec	iation and additional IRC §179 exp	enses are not allowed.)			
Total of lines 1 through 5.				\$		
Inventory at end of year.				\$		
Cost of goods sold (Line 6 minus Line 7). En Method of inventory valuation used				\$		
chedule B - CONTRIBUTIONS AND/OR						
	\$			\$		
		1				
chedule C - TAXES (See specific instruc	ctions for Line 16.)	TOTAL (Limited to 15% of net incom	ne – also enter on D-30, Line 1	18.) \$		
	1					
hedule C - TAXES (See specific instruc	ctions for Line 16.) Amount	TOTAL (Limited to 15% of net incom		Amount		
	Amount					
	Amount			Amount		
	Amount			Amount		
	Amount			Amount		
	Amount			Amount		
	Amount			Amount		
Type of Tax	Amount			Amount		
Type of Tax TAL	Amount			Amount \$		
TALES (See specific instructions)	Amount			Amount \$		
Type of Tax TAL	Amount \$	Type of		Amount \$		
Type of Tax TAL	Amount \$	Type of	Tax	Amount \$		
Type of Tax TAL hedule E - INTEREST EXPENSE (See s	Amount \$ pecific instructions for Line	Type of	Tax	Amount \$		
TAL hedule E - INTEREST EXPENSE (See s	Amount \$ pecific instructions for Line Amount	Type of	Tax	Amount \$		
TAL :hedule E - INTEREST EXPENSE (See s	Amount \$ pecific instructions for Line Amount	Type of	Tax	Amount \$		
TAL chedule E - INTEREST EXPENSE (See s	Amount \$ pecific instructions for Line Amount	Type of	Tax	Amount \$		
TAL chedule E - INTEREST EXPENSE (See s	Amount \$ pecific instructions for Line Amount	Type of	Tax	Amount \$		
TAL chedule E - INTEREST EXPENSE (See s	Amount \$ pecific instructions for Line Amount	Type of	Tax	Amount \$		



Schedule F - DC apportionment factor (See instructions)							
Round cents to the nearest dollar. If an amount is zero, leave the line	e blank.				Carry all factors to six decimal places		
		Column 1 TOTAL		Column 2 in DC		DC Apportionment Factor	
SALES FACTOR: All gross receipts of the unincorporated business other than gross receipts from items of non-business income.	\$		00 \$.00	(Column 2 divided by Column 1)	
2. DC APPORTIONMENT FACTOR: Column 2 divided by Column 1. Enter on D-30, Line 28							

Schedule 1 - Combined Report Tax Due								
Tax Due Combined Group Report	Tax Due Intercompany Eliminations	Tax Due Total Before Eliminations	Tax Due Designated Agent	Tax Due Member 1				
Tax Due Member 2	Tax Due Member 3	Tax Due Member 4	Tax Due Member 5					

Nature of Deduction	Amount
	\$
TAL (Also enter on D-30, Line 21.)	\$

Schedule H - Income not reported (claimed as nontaxable) (See instructions.)					
Nature of Income	Amount				
	\$				
TOTAL	\$				

Sc	hedule I - BALANCE SHEETS (See Instructions.)	Beginning of Taxable Year	End o	f Taxable Year	·
		(A) Amount	(B) Total	(A) Amount	(B) Total
	1. Cash				
	2. Trade notes and accounts receivable		1		
	(a) MINUS: Allowance for bad debts				
	3. Inventories				
	4. Gov't obligations: (a) U.S. and its instrumentalities		-		
	(b) States, subdivisions thereof, etc.				
	5. Other current assets (attach statement)				
	6. Mortgage and real estate loans				
SETS	7. Other investments (attach statement)				
SSE	8. Buildings and other fixed depreciable assets				
Ä	(a) MINUS: Accumulated depreciation				
	9. Depletable assets		_		
	(a) MINUS: Accumulated depletion				
	10. Land (net of any amortization)				
	11. Intangible assets (amortizable only)				
7	(a) MINUS: Accumulated amortization				
ᅼ	12. Other assets (attach statement)		-		
CAPITAL	13. TOTAL ASSETS				
	14. Accounts payable				
AND	15. Mortgages, notes, bonds payable in less than 1 year.				
ES	16. Other current liabilities (attach statement)				
BILITIE	17. Mortgages, notes, bonds payable in 1 year or more.				
뭂	18. Other liabilities (attach statement)				
E	19. Capital stock				
_	20. TOTAL LIABILITIES AND CAPITAL				

Col. 1		Percentage Percen	Col. 3 Percentage of	Col. 4 Salary Claimed	Col. 5 Exemption Claimed	Col. 6 Net Loss DC Sources	Col. 7 Net Income (or Loss)	Col. 8 Total Income (or Loss) Not Taxable to
Name and Address of Owner(s)/ Member(s)	Devote		Ownership		Oldimed	DO GOUICES	from Outside DC	the Unincorporated Business (Add Cols. 4 thru 7)
		%	%	\$	\$	\$	\$	\$
TOTAL				\$	\$	\$	\$	\$
Col. 4 - See Instructions. Col. 5 - See Instructions. Col. 6 - Any loss amount from Line 31 of D-30. Col. 7 - Enter the difference between Line 25 and Line 31 of D-30.				Enter total taxable income as shown on Line 34 of D-30.				\$
				Net income of Unincorporated Business from both within and outside DC (from Line 25 of D-30)				\$

SUPPLEMENTAL INFORMATION							
During 2015, has the Internal Revenue Service made or proposed any adjustments to your federal income tax returns, or did				USINESS ACTIVITY			DATE BUSINESS BEGAN
you file any amended returns with the Internal Revenue Service? Yes No	4. IF	BUSIN	IESS	HAS TERMINATED. STATE	REASON	5.	TERMINATION DATE
If "Yes", submit separately an amended Form D-30 and a detailed statement, concerning adjustments, to the Office of Tax and Revenue, See instructions for address.	6. TY	PE OF	1WO	NERSHIP (sole proprietor, p	artnership, etc.)		
7. Place where federal income tax return for period covered by this	return w	as filed	l:				
8. Name(s) under which federal return for period covered by this re	turn was	filed:					
9. Have you filed annual Federal Information Returns, (forms 1096 and 1099) pertaining to compensation payments for 2015		es	No	If no, please state r	eason:		
10. Is this return reported on the accrual basis?	Yes	No	If no	o, fill in the method used:	Cash basis Other (spe		
11. Did you withhold DC income tax from the wages of your DC employees during 2015?	Yes	No	If no	o, state reason:			
12. Did you file a franchise tax return for the business with the District of Columbia for the year 2014?	Yes	No	If no	o, state reason:			
If yes, enter name under which return was filed:							
13. Does this return include income from more than one business conducted by the taxpayer?	Yes	No					
(If yes, list businesses and net income (loss) of each.)							
14. Is income from any other business or business interest owned by the proprietors of this business being reported	Yes	No					
in a separate return? (If yes, list names and addresses of the other businesses.)							
15. (a) Is this business unitary with a partnership or another corporation?	Yes	No	lf y	yes, explain:			
corporation:							
(b) Is this business unitary with a combined group?	Yes	No	lf y	yes, explain:			
16. Did you file an annual ballpark fee return?	Yes	No					

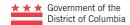


Worldwide Combined Reporting Election Form



FEIN/SSN of Designated Agent Fill in if FEIN Fill in if SSN Name of Designated Agent	Taxable Year YYYY	Worldwide Telephone number
Business address line #1 Business address line #2		
City	State	Zip code +4
 In accordance with the provisions of DC Official Code hereby made to report on a worldwide unitary combine A worldwide unitary combined reporting election is be thereafter for a period of ten years. It may be withdrawn or reinstituted after withdrawal, request for reasonable cause based on extraordinary policy and only with the written permission from the Upon the expiration of the ten-year period, a taxpaye election. Withdrawal must be made in writing within one year years, subject to the same conditions as applied to the 	prior to the expiration and application for and application for a prior to the expiration and the prior to the expiration of the expiration applications and the expiration applications are the expiration applications and the expiration applications are the expiration applications and the expiration applications are the	cable to the tax year it is made and all years on of the ten-year period, only upon written preseen changes in DC tax statutes, law or venue. In the worldwide unitary combined reporting
Date Beginning Tax Period: MMDDYYYY	Date Endi	ng Tax Period: MMDDYYYY
Authorized Signature		
Printed Name	Date	

Under penalties of law, I declare that the designated agent has authorized me to sign on behalf of all members of the combined group, and that I have examined this form and the information contained herein is, to the best of my knowledge and belief, correct and complete.





Important: Print in CAPITAL letters using black ink. Attach to your Form D-20 or D-30.



OFFICIAL USE ONLY Vendor ID# 0000

Tax	payer Identification Number Fill in	if FEIN	Fill in if filing a D-20				
	Fill in	if SSN	Fill in if filing a D-30	Return			
Ent	er your business name						
D-2	20 Return						
No	nrefundable Credits						
1	Economic Development Zone Incentives		·		1 \$		00
2	Qualified High Technology Company Cred				2 5		00
3	Organ and Bone Marrow Donor Credit (see This credit may not be applied against the				3 \$		00
4	Job Growth Incentive Act				4 \$		00
5	Enter alternative fuel credits. See instruction	ns					
	5(a) Alternative fuel infrastructure.	# of stations		00			
	5(b) Alternative fuel vehicle conversion.	# of vehicles		00			
6	Total alternative fuel credits. Add Lines 5	(a) and 5(b) onl	y and enter here.		6 \$		00
7					7 \$		00
8	Total the nonrefundable D-20 credits, en		Form D-20, Line 38.		8 \$		00
Re	fundable Credits		,				
9	Qualified High Technology Company Retrain from Part G, DC Form D-20CR, from pub. 399.	ning Costs Credit			9 \$		00
10					10 \$		00
11	Total the refundable D-20 credits, enter I	here and on Forr	m D-20, Line 41(c).		11 \$		00
	30 Return						
	nrefundable Credits						00
	Economic Development Zone Incentives				12 5		00
13	Organ and Bone Marrow Donor Credit (see This credit may not be applied against to				13 \$.00
14	Job Growth Incentive Act				14 \$		00
15	Enter alternative fuel credits. See instruction	ns					
	15(a) Alternative fuel infrastructure.	# of stations		00			
	15(b) Alternative fuel vehicle conversion	# of vehicles		00			
16	Total alternative fuel credits. Add Lines 1	.5(a) and 15(b)	only and enter here.		16 \$		00
17					17 \$		00
			D 20 1 : 20				
18	Total the nonrefundable D-30 credits, enter	er nere and on Fo	טרווו ט-טט, Line טא.		18 \$		00

Schedule UB Instructions

Qualified High Technology Companies

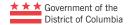
If you claim credits on Lines 2 or 9 above, attach a copy of your DC Form D-20CR to the D-20.

Organ and Bone Marrow Donor Credit

An employer who provides an employee with paid leave to donate an organ (up to 30 days leave) or to donate bone marrow (up to 7 days leave) is eligible to claim a credit against the franchise tax. The credit is equal to 25% of the salary paid to the employee during the leave period. If you take the credit, you may not also deduct the salary paid to the donor employee for that period. This credit is not available if the employee is eligible for leave under the Family and Medical Leave Act of 1993.

Organ and Bone Marrow Donor Credit — Computation —							
Column 1 Credit Category	Column 2 Total Paid Leave	Column 3 Leave Credit Calculation	Column 4 Total Credit				
Organ Donor(s)	Total Paid Leave Wages \$	Col 2 amt. × 25% \$	\$				
Bone Marrow Donor(s)	Total Paid Leave Wages \$	Col 2 amt. × 25% \$	\$				
		Total of Col. 4. Enter here and on Schedule UB.*					

^{*}Line 3 of Schedule UB for D-20 filers Line 13 of Schedule UB for D-30 filers



2015 D-30 Unincorporated Business Franchise Tax Return



Important: Print in CAPITAL letters using black ink.

Тахра	yer Identification Number	Fill in C if FFIN	Number of business locatio	ns	OFFICIAL USE ONLY Vendor ID# 0000
		Fill in if FEIN Fill in if SSN In DC	: Outside DC:		OFFICIAL USE ONLY VEHICUT ID# 0000
Busii	ness name	TIII III III SSIV		Tax peri	od ending (MMYY) Fill in if Amended Return
					Fill in if Final Return
Busi	ness Mailing Address line #1				Fill in if Combined Report*
					*You must fill in the Designated Agent info below
Busii	ness Mailing Address line #2				Fill in if Worldwide** **WorldWide form must be filed with this return
0				0	
City				State Zip	p Code + 4
Danie	runted Arout Name			D	orignated Agent FEIN
Desig	gnated Agent Name				esignated Agent FEIN
1	Gross receipts, minus retu	rne and allowances		1 0	ENTER DOLLAR AMOUNTS ONLY
2		-30, Schedule A) and/or op	erations	1 \$	00
3	Gross profit Line 1 minus Line		Fill in if minus:	2 \$	00
	Dividends. Minus Subpart F		Till ill il illilius:	3 \$	00
5 5	Interest (attach statement she			4 \$	00
4 5 6 7 8(Gross rental income (attacl	_		5 \$	00
2 7	Gross royalties (attach state			6 \$	00
) ' = 8(a) Net capital gain (attach a c			7 \$	00
	(b) Ordinary gain (loss) from I		copy) Fill in if minus:	8a \$	00
9	Other income (loss) (attach		Fill in if minus:	9 \$	00
10	O Total gross income. Add Li	nes 3-9.	Fill in if minus:	10 \$	00
IF	LINE 10 IS \$12,000 OR LESS	, STOP HERE, DO NOT FILE T	HIS RETURN.		
13	Salaries and wages (Do not	include owner(s)/member(s))		11 \$.00
12	2 Repairs			12 \$.00
13	Bad debts (attach a copy of	any statement filed with your fed	eral return)	13 \$.00
14	1(a) Royalty payments made	\$.00		
	(b) Minus nondeductible payn	nents to related entities \$.00 :	= 14c \$	00
_	5 Rent			15 \$	00
16	5 Taxes from D-30, Schedule C			16 \$.00
	7(a) Interest payments	\$	00		
Š	(b) Minus nondeductible payn	nents to related entities \$	00 :	= 17c \$.00
18	3 Contributions and/or gifts f	from D-30, Schedule B		18 \$	00
19	Amortization (attach a copy	of your federal Form 4562, Part	VI)	19 \$	00
20	Depreciation (attach a copy additional federal bonus deprec		ot include the	20 \$.00
2	Other allowable deductions	s from D-30, Schedule G.		21 \$	00
22	2 Total deductions. Add Lines	s 11–21.		22 \$.00
23	Net income Line 10 minus Li	no 22	Fill in if minus:	23 \$	00

Taxpayer Name:



Ft	IIN or	SSN:		1 5	0 3	0	0 1	2 (0 0	0	0	
	24	Net operating loss deduction for years before 2000		24 \$								00
	25	Net income after NOL deduction Line 23 minus Line 24	Fill in if minus:									00
		(a) Non-business income/state adjustment (attach statement)		25 5								00
	20	•	Fill in if minus:	26a								
		(b) Minus: Related expenses (attach an allocation statement)		26b								00
		(c) Subtract Line 26(b) from Line 26(a)	Fill in if minus:	26c								00
1.1		Net income from trade or business subject to apportionment Line 25 minus Line 26(c)	Fill in if minus:	27								00
$\overline{\mathbb{Z}}$	28	DC apportionment factor from D-30, Schedule F, Col 3, Line 2		28								
NC NC	29	Net income from trade or business apportioned to DC Multiply Line 27 by the factor on Line 28	Fill in if minus:	29 \$								00
ABLE	28 29 30 31	Other income/deductions attributable to DC (attach statement)	Fill in if minus:	30 \$								00
TAX	31	Total DC net income (loss) Combine Lines 29 and 30	Fill in if minus:	31 \$								00
	32	Salary for owner(s) / member(s) services from D-30, Schedule	32 \$								00	
	33	Exemption Maximum is \$5000. Enter days in DC. → 33a If fewer than 365 days in DC, see page instructions for amount to claim.		33 \$								00
	34	Total taxable income before apportioned NOL deduction Line 31 minus total of Lines 32 and 33	Fill in if minus:	34 \$								00
	35	Apportioned NOL deduction Losses occurring for year 2000 and la	ter.	35 \$								00
	36	Total DC taxable income. Line 34 minus Line 35	Fill in if minus:	36 \$								00
	37	Tax 9.4% of Line 36		37 \$								00
S	38	Minus nonrefundable credits from Schedule UB, Line 18		38 \$								00
1	39	Total DC gross receipts from Line '4' from MTLGR worksheet					. (00				
5	40	Net tax. Line 37 minus Line 38. The minimum tax is \$250 if DC groare \$1M or less or \$1,000 if DC gross receipts are greater than \$1M.		40 \$								00
TS AND	41	Payments: (a) Tax paid, if any, with request for an extension of time to paid with original return if this is an amended return	file or	41a\$								00
ENTS		(b) 2015 estimated franchise tax payments		41b\$								00
\mathbb{Z}	42	Add lines 41(a), 41(b)		42 \$								00
TAX, PAYM	43	Tax due. If Line 40 amount is larger, subtract Line 42 from Line 40. Will this payment come from an account outside the U.S.? Yes No	See instructions	43 \$								00
1	44	Overpayment. If Line 42 amount is larger, subtract Line 40 from Line 4	12.	44 \$								00
	45	Amount you want to apply to your 2016 estimated franchi	se tax	45 \$								00
	46	Amount to be refunded. Line 44 minus Line 45. Will this refund go to an account outside of the U.S.? Yes No	See instructions.	46 \$								00
	47							.00)			
	PLEAS SIGN HERE		my knowledge, it is corre	ct. Declarat	ion of pa	aid prepa	rer is bas	sed on the	informati	on av	ailable to the	preparer.
		Officer's signature Title		Date				Telephone	number o	of pers	son to contac	t
	PAID											
Р	REPAR	RER Preparer's signature (if other than taxpayer) Date	Firm	n name				Firm a	ddress			
ONLY		Preparer's PTIN		f you want t vith the Offi								

Schedule A - COST OF GOODS SOLD (See spe	ecific instructions fo	r Line 2.)						
1. Inventory at beginning of year (if different from last y			\$					
2. Purchases								
Minus cost of items withdrawn for personal use	\$	Enter result here						
3. Cost of Labor.								
4. Material and supplies.								
5. Other costs (attach statement) – (Additional 30% and								
6. Total of lines 1 through 5.								
7. Inventory at end of year.								
8. Cost of goods sold (Line 6 minus Line 7). Enter her	re and on D-30, Line	2.	\$					
Method of inventory valuation used								
Schedule B - CONTRIBUTIONS AND/OR GIFTS	•	ructions for Line 18.)						
	\$		\$					
		TOTAL (Limited to 15% of net income – also enter on D-30, Line 18.)	\$					
Schedule C - TAXES (See specific instructions	for Line 16.)							
Type of Tax	Amount	Type of Tax	Amount					
	\$		\$					
TOTAL			\$					
*								
Schedule E - INTEREST EXPENSE (See specific	instructions for Lin	e 17.)						
Name and Address of Payee	Amount	Name and Address of Payee	Amount					
	\$							
TOTAL			\$					
*Schedule D has been deleted								



Schedule F - DC apportionment factor (See instructions)									
Round cents to the nearest dollar. If an amount is zero, leave the lin				Carry all	factors to six decimal places				
		Column 1 TOTAL		Column 2 in DC		DC Apportionment Factor			
SALES FACTOR: All gross receipts of the unincorporated business other than gross receipts from items of non-business income.	\$		00 \$		00	(Column 2 divided by Column 1)			
2. DC APPORTIONMENT FACTOR: Column 2 divided by Column 1. Enter on D-30, Line 28									

Schedule 1 - Combined Report Tax Due										
Tax Due Tax Due Combined Group Report Intercompany Eliminations		Tax Due	Tax Due	Tax Due						
		Total Before Eliminations	Designated Agent	Member 1						
Tax Due	Tax Due	Tax Due	Tax Due							
Member 2	Member 3	Member 4	Member 5							

Schedule G - Other allowable deductions							
Nature of Deduction							
	\$						
TOTAL (Also enter on D-30, Line 21.)	\$						

Schedule H - Income not reported (claimed as nontaxable) (See instructions.)					
Nature of Income	Amount				
	\$				
TOTAL	\$				

Sc	hedule I - BALANCE SHEETS (See Instructions.)	Beginning of Taxable Year	End o	f Taxable Year	·
		(A) Amount	(B) Total	(A) Amount	(B) Total
	1. Cash				
	2. Trade notes and accounts receivable		1		
	(a) MINUS: Allowance for bad debts				
	3. Inventories				
	4. Gov't obligations: (a) U.S. and its instrumentalities		-		
	(b) States, subdivisions thereof, etc.				
	5. Other current assets (attach statement)				
	6. Mortgage and real estate loans				
SETS	7. Other investments (attach statement)				
SSE	8. Buildings and other fixed depreciable assets				
Ä	(a) MINUS: Accumulated depreciation				
	9. Depletable assets		_		
	(a) MINUS: Accumulated depletion				
	10. Land (net of any amortization)				
	11. Intangible assets (amortizable only)				
7	(a) MINUS: Accumulated amortization				
ᅼ	12. Other assets (attach statement)		-		
CAPITAL	13. TOTAL ASSETS				
	14. Accounts payable				
AND	15. Mortgages, notes, bonds payable in less than 1 year.				
ES	16. Other current liabilities (attach statement)				
BILITIE	17. Mortgages, notes, bonds payable in 1 year or more.				
뭂	18. Other liabilities (attach statement)				
E	19. Capital stock				
_	20. TOTAL LIABILITIES AND CAPITAL				

Col. 1		Percentage Pe of Time a	Col. 3 Percentage of	ent- Salary Claimed	Col. 5 Exemption Claimed	Col. 6 Net Loss DC Sources	Col. 7 Net Income (or Loss)	Col. 8 Total Income (or Loss) Not Taxable to
Name and Address of Owner(s)/ Member(s)	Social Security Number		Ownership		Oldimed	DO GOUICES	from Outside DC	the Unincorporated Business (Add Cols. 4 thru 7
		%	%	\$	\$	\$	\$	\$
TOTAL				\$	\$	\$	\$	\$
Col. 4 - See Instructions. Col. 5 - See Instructions. Col. 6 - Any loss amount from Line 31 of D-30. Col. 7 - Enter the difference between Line 25 and Line 31 of D-30.				Enter total taxable income as shown on Line 34 of D-30.				\$
				Net income of Unincorporated Business from both within and outside DC (from Line 25 of D-30)				\$

SUPPLEMENTAL INFORMATION							
During 2015, has the Internal Revenue Service made or proposed any adjustments to your federal income tax returns, or did	2. P	RINCIF	AL BU	JSINESS ACTIVITY		3.	DATE BUSINESS BEGAN
you file any amended returns with the Internal Revenue Service? Yes No		BUSII	NESS	HAS TERMINATED, STATE	REASON	5.	TERMINATION DATE
If "Yes", submit separately an amended Form D-30 and a detailed statement, concerning adjustments, to the Office of Tax and Revenue, See instructions for address.	6. T	YPE OF	OWN	IERSHIP (sole proprietor, p	partnership, etc.)		
7. Place where federal income tax return for period covered by this	return w	vas file	d:				
8. Name(s) under which federal return for period covered by this re	turn was	s filed:					
Have you filed annual Federal Information Returns, (forms 1096 and 1099) pertaining to compensation payments for 2015		'es	No	If no, please state	reason:		
10. Is this return reported on the accrual basis?	Yes	No	If no	o, fill in the method used:	Cash basis Other (spe		
11. Did you withhold DC income tax from the wages of your DC employees during 2015?	Yes	No	If no	o, state reason:			
12. Did you file a franchise tax return for the business with the District of Columbia for the year 2014?	Yes	No	If no	, state reason:			
If yes, enter name under which return was filed:							
13. Does this return include income from more than one business conducted by the taxpayer?	Yes	No					
(If yes, list businesses and net income (loss) of each.)							
14. Is income from any other business or business interest	Yes	No					
owned by the proprietors of this business being reported in a separate return? (If yes, list names and addresses of the other businesses.)							
(ii yes, list harnes and addresses of the other businesses.)							
15. (a) Is this business unitary with a partnership or another	Yes	No	If v	res, explain:			<u>'</u>
corporation?	les	NO	II y	еѕ, ехріані:			
(b) Is this business unitary with a combined group?	Yes	No	If y	res, explain:			
16 80 60 10 10 10 10 10							
16. Did you file an annual ballpark fee return?	Yes	No					

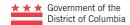


Worldwide Combined Reporting Election Form



FEIN/SSN of Designated Agent Fill in if FEIN Fill in if SSN Name of Designated Agent	Taxable Year YYYY	Worldwide Telephone number
Business address line #1 Business address line #2		
City	State	Zip code +4
 In accordance with the provisions of DC Official Code hereby made to report on a worldwide unitary combine A worldwide unitary combined reporting election is bit thereafter for a period of ten years. It may be withdrawn or reinstituted after withdrawal, 	ed basis. inding for and applic prior to the expiratio	eable to the tax year it is made and all years
 request for reasonable cause based on extraordinary has policy and only with the written permission from the 0 Upon the expiration of the ten-year period, a taxpayer election. Withdrawal must be made in writing within one year 	Office of Tax and Rev r may withdraw from of the expiration of t	venue. I the worldwide unitary combined reporting
years, subject to the same conditions as applied to the Date Beginning Tax Period: MMDDYYYY		ng Tax Period: MMDDYYYY
Authorized Signature		
Printed Name	Date	

Under penalties of law, I declare that the designated agent has authorized me to sign on behalf of all members of the combined group, and that I have examined this form and the information contained herein is, to the best of my knowledge and belief, correct and complete.





Important: Print in CAPITAL letters using black ink. Attach to your Form D-20 or D-30.



OFFICIAL USE ONLY Vendor ID# 0000

Tax	payer Identification Number Fill in	if FEIN	Fill in if filing a D-20				
	Fill in	if SSN	Fill in if filing a D-30	Return			
Ent	er your business name						
D-2	20 Return						
No	nrefundable Credits						
1	Economic Development Zone Incentives		·		1 \$		00
2	Qualified High Technology Company Cred				2 5		00
3	Organ and Bone Marrow Donor Credit (see This credit may not be applied against the				3 \$		00
4	Job Growth Incentive Act				4 \$		00
5	Enter alternative fuel credits. See instruction	ns					
	5(a) Alternative fuel infrastructure.	# of stations		00			
	5(b) Alternative fuel vehicle conversion.	# of vehicles		00			
6	Total alternative fuel credits. Add Lines 5	(a) and 5(b) onl	y and enter here.		6 \$		00
7					7 \$		00
8	Total the nonrefundable D-20 credits, en		Form D-20, Line 38.		8 \$		00
Re	fundable Credits		,				
9	Qualified High Technology Company Retrain from Part G, DC Form D-20CR, from pub. 399.	ning Costs Credit			9 \$		00
10					10 \$		00
11	Total the refundable D-20 credits, enter I	here and on Forr	m D-20, Line 41(c).		11 \$		00
	30 Return						
	nrefundable Credits						00
	Economic Development Zone Incentives				12 5		00
13	Organ and Bone Marrow Donor Credit (see This credit may not be applied against to				13 \$.00
14	Job Growth Incentive Act				14 \$		00
15	Enter alternative fuel credits. See instruction	ns					
	15(a) Alternative fuel infrastructure.	# of stations		00			
	15(b) Alternative fuel vehicle conversion	# of vehicles		00			
16	Total alternative fuel credits. Add Lines 1	.5(a) and 15(b)	only and enter here.		16 \$		00
17					17 \$		00
			D 20 1 : 20				
18	Total the nonrefundable D-30 credits, enter	er nere and on Fo	טרווו ט-טט, Line טא.		18 \$		00

Schedule UB Instructions

Qualified High Technology Companies

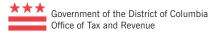
If you claim credits on Lines 2 or 9 above, attach a copy of your DC Form D-20CR to the D-20.

Organ and Bone Marrow Donor Credit

An employer who provides an employee with paid leave to donate an organ (up to 30 days leave) or to donate bone marrow (up to 7 days leave) is eligible to claim a credit against the franchise tax. The credit is equal to 25% of the salary paid to the employee during the leave period. If you take the credit, you may not also deduct the salary paid to the donor employee for that period. This credit is not available if the employee is eligible for leave under the Family and Medical Leave Act of 1993.

Organ and Bone Marrow Donor Credit — Computation —					
Column 1 Credit Category	Column 2 Total Paid Leave	Column 3 Leave Credit Calculation	Column 4 Total Credit		
Organ Donor(s)	Total Paid Leave Wages \$	Col 2 amt. × 25% \$	\$		
Bone Marrow Donor(s)	Total Paid Leave Wages \$	Col 2 amt. × 25% \$	\$		
		Total of Col. 4. Enter here and on Schedule UB.*			

^{*}Line 3 of Schedule UB for D-20 filers Line 13 of Schedule UB for D-30 filers





IMPORTANT: Please read the instructions on the reverse before completing this form

Business Name (from your D-20 or D-30 return) Person to contact if there are questions		yer Identification N Number (SSN) none number	lumber (FEIN)	or
No underpayment interest is due and this Your tax liability on taxable income after deducting DC applicable credit You have made the required periodic DC estimated franchise tax payments are staxed or 90% of the current year's taxes. Note: In order to us	es and estimat nents and the ne the prior ye	ed tax payme total is equa ar 110% exc	ents is less th I to or more	nan \$1001, or than 110% of
a DC franchise tax return last year and you must have been in business	s in DC for the	e entire year.		
a DC franchise tax return last year and you must have been in business	ent Interest			
Computation of Underpaym 1 2015 DC franchise tax liability from Forms D-20, or D-30. 2 Multiply the amount on Line 1 by 90% (.90).	ent Interest %. Lines 2 and 3	\$ \$ \$		

6 Enter the amount from Line 5 or the annualized amount in each period (the 2nd period includes the 1st period amount, 3rd period includes the 1^{st} and 2^{nd} period amounts, the 4^{th} period includes all period amounts). Check here if you are using the "Annualized Income" method. DC estimated taxes paid each period (the 2nd period includes the 1^{st} period amount, 3^{rd} period includes 1^{st} and 2^{nd} period amounts, the 4^{th} period includes all period amounts). 8 Underpayment each period (Line 6 minus Line 7). 9 Underpayment Interest Factors. .0265 .0262 .0175 .0348 10 Line 8 multiplied by Line 9. \$ 11 Underpayment Interest - Total of amounts from Line 10. Pay this amount. (See D-2220 instructions).

Revised 11/15 D-2220 page 1

Instructions for Underpayment of Estimated Tax by D-20 or D-30 Filers

Estimated Tax Interest

DC law requires any business that expects its DC franchise tax liability to exceed \$1000 for the tax year to file a declaration of estimated franchise tax using the payment vouchers in:

- D-20ES Declaration of Estimated Franchise Tax for Corporations; or
- D-30ES Declaration of Estimated Franchise Tax for Unincorporated Businesses.

The law states that any business required to file and pay estimated tax that fails to pay the amount required by the due date is subject to interest on the underpayment of estimated franchise tax.

When is interest assessed for Underpayment of Estimated Franchise Tax?

A 10% interest, compounded daily, is assessed if your total DC estimated franchise tax payments compared to your DC franchise tax liability do not equal at least the smaller of:

- 90% of the tax due (Line 37) on your 2015 DC franchise tax return;
 or
- 110% of the tax due (Line 37) on your 2014 DC franchise tax return (consisting of 12 months).

You must have filed a 2014 DC franchise tax return to use the 110% exception.

A penalty will be assessed if any statement made on an estimated tax payment voucher is not true and accurate to the best of the signatory's knowledge.

Are there any exceptions?

You are not subject to interest for underpayment of estimated franchise tax if:

- You had no DC franchise tax liability for the tax year 2014 and in that year, you did business in DC for the entire 12 months;
- The franchise tax due for 2015, minus any estimated tax payments, is less than \$1001;
- Your total DC estimated franchise tax payments are equal to or greater than 110% of your 2014 DC franchise tax liability for the entire year; or
- Your remaining tax due after totaling all credits and estimated tax payments is less than 10% of your total DC franchise tax liability (Line 43 of the D-20 and D-30) for the year.

When do you use this form?

- You may use this form to calculate your underpayment interest. If you do, attach it to your tax return and enter the underpayment interest on Line 47 of Forms D-20 or D-30. Fill-in the oval if the D-2220 is attached. If you do not wish to calculate the interest, OTR will do it when your return is processed and will notify you of the amount due.
- You may also complete this form if you believe the interest amount assessed by OTR for underpayment of estimated franchise tax is incorrect.

How do you file this form?

Attach it to your return if you complete the form <u>before</u> filing your tax return. If you complete the D-2220 <u>after</u> filing and receiving a notice of interest assessment, send it to:

Office of Tax and Revenue 1101 4th St SW, 2nd Floor Washington DC 20024

Completing this form

Line 1

Enter the amount from your 2015 D-20 or D-30 (Line 37).

Line 2

Multiply the amount on Line 1 by 90% (.90). Your estimated franchise tax payments must be equal to or greater than this amount.

Line 3

Enter 110% of the amount from your 2014 DC Forms D-20 or D-30, Line 37. If your 2014 return was amended or corrected, multiply 110% times the corrected amount.

Line 4

Enter the lesser of the amounts on Line 2 and Line 3. If you did not file a DC franchise tax return for 2014, you may only use Line 2. This is your minimum estimated franchise tax payment for 2015.

Line 5

Multiply the amount on Line 4 by 25% (.25). This gives you an even distribution of your tax liability over the four periods of the tax year.

Line 6

Enter the amount required from Line 5 under each of the payment columns. For example, if Line 5 is \$2000, you would enter \$2000 for the 1st period, \$4000 for the 2nd period, \$6,000 for the 3rd period and \$8,000 for the 4th period.

Annualized income method: If your income was different for each period, determine the percentage for each period (divide the period income by the full year's income). Multiply Line 4 by each period's percentage and enter the amounts earned by period on Line 6. Accumulate the periodic amounts as shown above. Check the "Annualized Income" box.

Line 7

Enter the amount of estimated franchise tax payments made in each period. Include the amounts from the previous period with the 2nd, 3rd and 4th periods. For example, if your estimated payment amount is \$1,000 in each period, you would enter \$1,000 in the 1st period, \$2,000 in the 2nd period, \$3,000 in the 3rd period and \$4,000 in the 4th period.

Line 8 Underpayment each period

For each column, subtract Line 7 from Line 6. If Line 7 exceeds Line 6, you have no underpayment interest. If there is an amount remaining, this is your periodic underpayment amount.

Line 9 Underpayment Interest Factors

These are the underpayment interest factors by period.

Line 10

For each period, multiply the amount on Line 8 by the factor on Line 9. This is your underpayment interest amount by period.

Line 11 Underpayment Interest

Add the amounts on Line 10 for each period. This is your total underpayment of estimated franchise tax penalty.

- If you are filing the D-2220 with your D-20 or D-30 return, include the underpayment interest in the amount you owe, enter the amount on Line 43 and pay the total amount with the return. Fill in the oval on Line 47 and attach the D-2220 to the return.
- If you are filing the D-2220 form separately, pay the amount you owe and attach to the D-2030P Payment Voucher, using the applicable mailing address.

Make the check or money order payable to the **DC Treasurer.**

D-2030P PAYMENT VOUCHER See instructions on back

Detach at perforation and mail the voucher, with payment attached. See mailing address on back.

	Fra	yment Voucher for Inchise Tax	
Important: Print in CAPITAL letters	using black ink.	11	1 5 2 3 0 0 1 1 0 0 0 0
Amount of payment \$		00 Do not enter cents,	Official Use Only Vendor ID# 0000 enter dollars only. To avoid penalties and interest, your ostmarked no later than the due date of your return.
Taxpayer Identification Number	Fill in if FEIN	Fill in if for a D-20 Retu	
	Fill in if SSN		
Business name or Designated Agent name	1111111 11 3311	Fill in if for a D-30 Retu	Tax period ending (MMYY)
Business mailing address (number, street a	nd suite/apartment numbe	er if applicable)	
	ia carto, aparement mambe	и и аррисавісу	
Business mailing address (number, street ar	nd suite/apartment number	r if applicable)	
City			State Zip Code + 4
	Fra	2015 D-2030P P1 Payment Voucher for Franchi- yment Voucher for nchise Tax	
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Instructions for D-2030P PAYMENT VOUCHER - please print clearly

Use the D-2030P Payment Voucher to make any payment due on your **D-20** or **D-30** return.

- Do not use this voucher to make estimated tax payments.
- Enter your Taxpayer Identification Number. Fill in the oval indicating if this is your FEIN or SSN.
- Enter name and address exactly as they appear on your return.
- Enter the amount of your payment.
- Make the check or money order payable to the DC Treasurer.
- Write your FEIN/SSN, tax period and type of return filed (D-20 or D-30) on the payment.
- Staple your check or money order to the D-2030P voucher only. Do not attach your payment to your D-20 or D-30 return.
- Mail the D-2030P with, but not attached to, your D-20 or D-30 tax return in the envelope provided in this tax booklet. If you do not have the return envelope, make sure to address your envelope to: for D-20, Office of Tax and Revenue PO Box 96166, Washington DC 20090-6166, for the D-30 to: Office of Tax and Revenue PO Box 96165 Washington, DC 20090-6165.

Notes:

- If your payment exceeds \$5,000 in any period, you must pay electronically. Visit www.taxpayerservicecenter.com.
- For electronic filers, in order to comply with banking rules, you will be asked the question "Will the funds for this payment come from an account outside of the United States". If the answer is yes, you will be required to pay by money order (US dollars) or credit card. Please notify this agency if your response changes in the future. If your payment is rejected, you may be subject to the District's dishonored check fee and additional penalties and interest.

FR-128 Extension of Time to File a DC Franchise or Partnership Return Worksheet

	Worksheet	ENTER DOLLAR AMOUNTS ONLY	
1 2 3 4 5	Total estimated franchise tax liability for the tax period. Estimated franchise tax payments (include any tax overpayment credit). Other payments. Total payments and credits (add Lines 2 and 3). Balance due (Line 1 minus Line 4). Payment in full must be submitted with this form or your request will be denied. (Note: you will be subject to the failure-to-pay penalty and interest on any tax due and not paid with this form.)	1 \$	0
	Detach at perferation and mail the very box with perment attached, to the	Office of Toy and Payanua (See addresses on back)	

Detach at perforation and mail the voucher, with payment attached, to the Office of Tax and Revenue. (See addresses on back)

Government of the District of Columbia 2015 FR-1 apportant: Print in CAPITAL letters using black ink.	28 Extension of Time to File a DC Franchise or Partnership Return	
Amount of payment (dollars only) Taxpayer I.D. Number Fill in Business Name or Designated Agent name	oo if FEIN if SSN	OFFICIAL USE ONLY Vendor ID# 0000
Business mailing address (number, street and suite/apar City	tment number if applicable) State	Zip Code +4
A 6 or 7 month extension of time to file until, is requested for the following return	15, 2016, for calendar year 2015, or unti : (fill in one): D-20 D-30 D-	il,, for fiscal year ending 65
Government of the District of Columbia 2015 FR-1 apportant: Print in CAPITAL letters using black ink.	28 Extension of Time to File a DC Franchise of to File a DC Franchise to File a DC Franchise or Partnership Return	1 5 1 2 8 0 1 1 0 0 0 0
Amount of payment (dollars only) Taxpayer I.D. Number Fill in	o0 if FEIN	OFFICIAL USE ONLY Vendor ID# 0000
Business Name or Designated Agent name	if SSN T	Fax period ending (MMYY)
Business mailing address (number, street and suite/apar	tment number if applicable)	
City	State	Zip Code +4
A 6 or 7 month extension of time to file until	15, 2016, for calendar year 2015, or unti	il , , for fiscal year ending

_, is requested for the following return: (fill in one): D-20 D-30 D-65

Instructions for Form FR-128

Purpose

Use Form FR-128 to request a 6-month extension of time to file a Corporation Franchise Tax Return (Form D-20), an Unincorporated Business Franchise Tax Return (Form D-30), a Partnership Return of Income (Form D-65), or a 7-month extension of time to file if you are a Combined Reporting filer.

When to file

The request for an extension of time to file must be submitted no later than the due date of the return.

Where to submit your request

Mail the completed FR-128 with your payment in full of any tax due for D-20 to: Office of Tax and Revenue, PO Box 96019 Washington, DC 20090-6019. For D-30 to: Office of Tax and Revenue, PO Box 96020 Washington, DC 20090-6020. For D-65 to: Office of Tax and Revenue, 1101 4th Street, SW, FL4, Washington, DC 20024. Make your payment out to the DC Treasurer. Include your FEIN or SSN, FR-128 and the tax year on the payment.

Note: If you are a Qualified High Technology Company please submit a completed DC Form QHTC-CERT with your extension request.

Extension of time to file

A 6-month extension of time to file (7-month extension for Combined Reporting filers) will be allowed if you complete this form properly, file it on time and PAY the full amount of any tax due shown on Line 5 of the Worksheet. When you file your return (D-20/D-30/D-65), attach a copy of the FR-128 which you filed. A separate extension request must be filed for each return. Blanket requests for extensions will not be accepted.

Federal extension forms

The Office of Tax and Revenue does not accept the federal application for an extension of time to file. **You must use DC Form FR-128.**

Additional extension of time

No additional extension of time to file will be granted beyond the 6-month extension unless the taxpayer is outside the continental limits of the United States. In that case, an additional extension up to 6 months may be granted, but in no case shall such extension be granted for more than one year.

Notes:

- If your payment exceeds \$5,000 in any period, you must pay electronically. Visit www.taxpayerservicecenter.com
- For electronic filers, in order to comply with new banking rules, you will be asked the question "Will the funds for this payment come from an account outside of the United States". If the answer is yes, you will be required to pay by money order (US dollars) or credit card. Please notify this agency if your response changes in the future. If your payment is rejected, you may be subject to the District's dishonored check fee and additional penalties and interest.



D-30 NOL Net Operating Loss Deduction for Tax Years <u>Before 2000</u>

Complete a separate D-30 NOL for each business carrying forward a NOL. Please attach this form to your D-30.

Name of business	FEIN/SSN		
Year	District net income/loss	Losses claimed	Losses remaining
Oldest loss year	\$	\$	\$
1			
2			
3			
4			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			
15			
	Summary:	Total losses claimed.	Total losses (to be carried forward).



D-30 NOL Net Operating Loss Deduction for Tax Year 2000 and Later

Complete a separate D-30 NOL for each business carrying forward a NOL. Please attach this form to your D-30.

Name of business	FEIN/SSN		
Year	District net income/loss	Losses claimed	Losses remaining
Oldest loss year	\$	\$	\$
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			
15			
	Summary:	Total losses claimed.	Total losses (to be carried forward). \$

Need assistance?

File or pay online: www.taxpayerservicecenter.com

Get tax forms Download forms at www.taxpayerservicecenter.com Request forms by mail: 202-442-6546 by email: taxhelp@dc.gov

Pick up forms:

Office of Tax and Revenue **Reeves Center** 1101 4th St SW 2nd Floor 2000 14th St NW Lobby 8:15 am-5:30 pm 7 am-7 pm

Wilson Building 1350 Pennsylvania Av NW Lobby 7 am-7 pm

One Judiciary Square 441 4th St NW Lobby

7 am-7 pm

Ask tax questions; get tax forms preparation help free Visit our Walk-In Center, 1101 4th St SW 2nd Floor; or

Contact our Customer Service Administration: 202-727-4TAX(4829)

Regular hours 8:15 am-5:30 pm Monday-Friday

Do you need help with this form?

Visit our Walk-In Center, at 1101 4th St SW 2nd Floor.

Are you unable to hear or speak?

Call the DC Relay Service, 202-727-3363.

[Spanish] Si necesita ayuda en Español, por favor llame al (202) 727-4829 para proporcionarle un intérprete de manera gratuita.

[Vietnamese] Nếu quý vị cần giúp đỡ về tiếng Việt, xin gọi (202) 727-4829 để chúng tôi thu xếp có thông dịch viên đến giúp quý vị miễn phí.

Municipal Center

6:30 am-8 pm

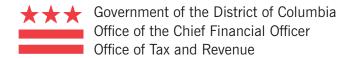
300 Indiana Av NW Lobby

[French] Si vous avez besoin d'aide en Français appelez-le (202) 727-4829 et l'assistance d'un interprète vous sera fournie gratuitement.

[Amharic] በአማርኛ አርዳታ ክሌለት በ (202) 727-4829 ይደውሉ። የነፃ አስተርጓሚ ይመደብልዎታል።

[Korean] 한국어로 언어 지원이 필요하신 경우 (202) 727-4829 로 연락을 주시면 무료로 통역이 제공됩니다.

[Chinese] 如果您需要用(中文)接受幫助,請電治 (202) 727-4829 將**免費**向您提供口譯員服務。



2015 D-65 Partnership Return of Income

The District allows Franchise (D-20), Unincorporated Franchise (D-30), Partnership (D-65), and Fiduciary (D-41) taxpayers to file returns with attachments using a CD. Include the following on a CD:

- · A signed and dated return;
- Any DC schedules you are submitting;
- Any federal forms that must accompany the return;
- · Indicate on the CD label, form number, FEIN and tax year being filed; and
- Images on the CD should be in PDF format



2015 D-65 Partnership Return of Income



Print in CAPITAL letters using black ink. Federal Employer Identification Number OFFICIAL USE ONLY Vendor ID # 0000 Tax period ending (MMYY) Business name Address line #1 if amended return Fill in (Fill in if final return Address line #2 if Certified QHTC if unitary with a combined group* Zip Code + 4 *You must fill in the Designated Agent info below City State Designated Agent FEIN Designated Agent Name WHOLE DOLLAR AMOUNTS ONLY 1 Gross receipts or sales, minus returns and allowances 2 Cost of goods sold and/or operations 2 3 Gross profit Line 1 minus Line 2. 3 Fill in if minus: 4 Ordinary income (loss) from other partnerships, Fill in if minus: 4 NCOME estates and trusts, etc. 5 Net farm profit (loss) Fill in if minus: 5 Net gain (loss) 6 Fill in if minus: 6 Other income (loss) 7 Fill in if minus: Total income Add Lines 3-7 Fill in if minus: 8 9 9 Salaries and wages paid to non partners 10 10 Payments to partners Repairs and maintenance 11 12 Bad debts 12 13 Rent 13 DEDUCTIONS 14 Taxes and licenses 14 15 15 Interest 16 16 Depreciation, minus depreciation deducted elsewhere on this return 17 17 Depletion 18 18 Retirement plans 19 19 Employee benefit programs 20 20 Other deductions 21 21 Total deductions Add Lines 9-20

Fill in if minus:

22

22 Ordinary income (loss) Line 8 minus Line 21



Federal Employer Identification No.: Schedule F - DC apportionment factor (See instructions.) Round cents to the nearest dollar. If an amount is zero, leave the line blank. Carry all factors to six decimal places Column 1 TOTAL Column 2 in DC DC Apportionment Factor 1. **SALES FACTOR:** All gross receipts of the partnership other than gross receipts from items of non-business income. 00 \$ 00 (Column 2 divided by Column 1) 2. DC APPORTIONMENT FACTOR: Column 2 divided by Column 1. Date entity was organized Fill in your accounting method other (specify) cash accrual C. Number of partners in this partnership YES NO D. Is this a limited partnership? Is this a limited liability company? YES NO F. Are any partners in this partnership also partnerships or corporate entities? YES NO YES NO G. Is this partnership a partner in another partnership? Was there a distribution or transfer of property that caused an adjustment of the basis of the partnership's assets under IRC Section 754? YES NO Ι. Was a D-65 filed for the preceding year? YES NO Was a 2015 DC unincorporated business franchise tax return (Form D-30) filed for this business? If "YES," enter the name under which the return was filed. YES NO Did you file and pay an annual ballpark fee return? YES NO Have you filed annual federal income tax information return Forms 1099 and 1096? YES NO Did you withhold DC income tax from the wages of your DC employees during 2015? YES NO If "NO," state reason: N. During 2015, has the IRS made or proposed any adjustments to your federal partnership NO Form 1065, or did you file amended returns with the IRS? YES If "YES," submit a separate, detailed explanation and an amended D-65 return reflecting the adjustments to: Office of Tax and Revenue, 1101 4th Street, SW, FL4, Washington DC 20024. • Attach a copy of the Form 1065 with the K-1 and any other schedules you filed. · Attach a schedule showing the pass-through distribution of income to all members of the partnership. • If you are filing Form D-65, instead of Form D-30, attach an explanation. Under penalties of law, I declare that I have examined this return and, to the best of my knowledge, it is correct. PLFASE Declaration of paid preparer is based on all information available to the preparer. SIGN HERE Partner or member's signature Date Telephone number of person to contact Date Preparer's signature (if other than taxpayer) PAID PREPARER Paid Preparer's Tax Identification Number (PTIN) ONLY Firm name If you want to allow the paid preparer to discuss this return with the Office of Tax and Revenue fill in the oval.

Mail return to: Office of Tax and Revenue, 1101 4th Street, SW, FL4, Washington DC 20024 Make no payment with this return.

Firm address

GENERAL INSTRUCTIONS FOR THE D-65 PARTNERSHIP RETURN

Who must file a DC Form D-65?

Except for partnerships required to file an unincorporated business franchise tax return, DC Form D-30, or corporate franchise tax return, DC Form D-20, or an LLC, or publicly traded partnership that filed a federal corporation return, all partnerships engaged in any trade or business in DC or which received income from sources in DC, must file a Form D-65.

The term "partnership" includes a limited partner, group, syndicate, pool and joint venture through or by means of which any business, financial operation, or venture is carried on. The following are excluded by law: 1) a corporation; 2) a trust or estate; or 3) an unincorporated business. The term "partner" includes a member of a syndicate, pool or joint venture.

If the return is filed on behalf of a syndicate, pool, joint venture or similar group, attach to the D-65 a copy of the agreement and all amendments to the agreement.

A limited liability company is classified as a partnership. The only exception is if IRS has classified it differently. Use the same classification on your DC return as that used on your federal return.

Who must file DC Form D-30 instead of Form D-65?

Every partnership which, during the taxable year, engaged in an "unincorporated business" as defined in paragraph (1) below, and which met the gross income threshold as stated in paragraph (2) below, must file a Form D-30, rather than Form D-65. If Form D-65 is filed instead of Form D-30, attach an explanation to the D-65.

- (1)(a) A partnership with gross income of more than \$12,000 which leases real or personal property in DC, regardless of whether services are performed, (including professional partnerships) must file a Form D-30 instead of Form D-65.
- (b) "Unincorporated Business". An unincorporated business is any trade or business, conducted or engaged in by any individual, whether resident or nonresident, statutory or common-law trust, estate, partnership, or limited or special partnership, society, association, executor, administrator, receiver, trustee, liquidator, conservator, committee, assignee, or by any other entity or fiduciary, other than a trade or business conducted or engaged in by any corporation, S corporation, Q-sub, publicly traded partnership or any other form of entity treated as a corporation for District tax purposes. This includes any trade or business which, if conducted or engaged in by a corporation, would be taxable.
- (c) Excluded is any trade or business which by law, custom, or ethics, cannot be incorporated or any trade or business deriving more than 80% of its gross income from personal services rendered by owners or members of the partnership or other entity in conducting or carrying on any trade or business in which capital is not a material income-producing factor.
- (2) Gross income requirement for filing DC Form D-30. A return must be filed by an unincorporated business if its gross income from engaging in or carrying on any trade or business in DC plus any other gross income received from DC sources amounts to more than \$12,000 during the year, regardless of whether it had net income. For filing purposes, the words "gross income" mean gross revenue before deduction of cost of goods, expenses and other deductions allowable in the determination of net income.

NOTE: For District tax purposes, taxpayers are not permitted to claim the additional federal 30 or 50 percent bonus depreciation per Internal Revenue Code (IRC) 168(k), nor the additional Internal Revenue Code (IRC) Section 179 expenses. Taxpayers should keep a separate depreciation schedule for DC tax purposes.

When is your return due?

You must file your return by:

- Calendar year filer April 18, 2016; or
- Fiscal year filer the fifteenth day of the fourth month following the ending of the taxable year you entered at the top of the DC Form D-65.

If the due date falls on a Saturday, Sunday or legal holiday, the return is due the next business day.

If you are requesting an extension of time to file, submit DC Form FR-128, Extension of Time to File DC Franchise or Partnership Return, by the due date of your return. Do not use the federal extension of time to file form to request a DC extension. Ensure you have filled in the D-65 oval on the bottom left hand side of the Form FR-128.

How to file your return

File your DC Form D-65 with the Office of Tax and Revenue, 1101 4th Street, SW, FL4, Washington, DC 20024.

Print, sign and date the return. Make a copy for yourself. If submitting the return with attachments, you must submit using a CD.

Include the following on the CD:

- The signed D-65 return;
- Any attachments and/or schedules (federal Form 1065, and Schedule K-1). Include copies of all the schedules and statements accompanying the Form 1065. Also attach a schedule showing the pass-through distribution of income for all members of the partnership, and copies of the completed federal K-1 schedule; and
- Write on the CD label, "D-65", your FEIN, tax year being filed, and statements accompanying the Form D-65 on the CD.

Assembling your D-65 return

Do not staple or otherwise damage the Bar Code located in the upper right hand corner of this form or schedule(s) being attached.

Substitute forms

You may file your DC tax return using a computer-prepared or computer-generated substitute form, provided the form is approved in advance by the Office of Tax and Revenue (OTR). The fact that a software package is available for retail purchase does not mean that the substitute form has been approved for use. Call or check with the software developer to determine if its form is approved by the DC OTR.

Special filing circumstances

Combined Reporting

If the partnership is unitary with a combined group, fill in the "if unitary" oval on page 1 of Form D-65. In addition, provide the designated agent's name and Federal Employer Identification Number (FEIN) on page 1 of the form.

DC Apportionment Factor

All businesses other than financial institutions engaging in a trade or business both in and outside of DC must use the single sales factor formula to apportion its business income. Businesses domiciled in DC and not

subject to tax elsewhere must report 100 percent of their non-business income to DC. Businesses carrying on a trade or business in DC and other jurisdictions must apportion trade or business income to DC. Multiply the total income by a fraction. The numerator is the partnership's total sales in DC during the tax year. The denominator is the partnership's total sales everywhere during the tax year. Sales other than sales of tangible personal property shall be apportioned to the District by using the market-based sourcing rules.

Report the DC apportionment factor on Schedule F, Line 2, page 2 of Form D-65.

Amended returns

You must use the Form D-65 of the year you are amending. Prior year forms can be obtained from www.taxpayerservicecenter.com. If the IRS adjusts your federal return or if you file an amended federal return, you must file an amended DC return within 90 days.

Mail the amended return and any attachments to the Office of Tax and Revenue, 1101 4th Street, SW, FI4, Washington, DC 20024.

Final return

If you are not required to continue filing a return for an entity, fill in the "final return" oval on the return. We will then cancel your filing requirement.

Items exempt from tax

All items of income received and claimed as exempt from tax must be explained in a copy of the Schedule K of the federal Form 1065. Attach the copy to your DC Form D-65. Some items of this type are:

- (1) Tax-Free Interest. Attach a statement reporting interest on:
 - (a) obligations of a state, territory of the United States or any political subdivision thereof, or DC; and
 - (b) obligations of the United States, its agencies, or instrumentalities.
- (2) Proceeds from life insurance policies. In general, the proceeds of life insurance policies paid to the partnership due to the death of a partner are exempt. However, if any part of the proceeds is held by the insurer under an agreement to pay interest, the interest is taxable.

Information at source

Every partnership which in the course of its trade or business, during calendar year 2015, pays (1) interest, rents, commissions, or other fixed or determinable income of \$600 or more, or (2) salaries and wages of \$600 or more, must submit copies of federal Forms 1095 and 1099 unless the payment is specifically exempted by District of Columbia Municipal Regulations (DCMR) Rule 9-111.

Getting started

Do not cross out the tax year on the 2015 return. If you are not filing a 2015 D-65 Partnership Return, do not use this booklet. Request a booklet for the specific year you are filing by calling our Forms Center at (202) 442-6546, or visit the Customer Service Administration at 1101 4th Street, SW, FL2, Washington, DC 20024. You may also visit our website at www.taxpayerservicecenter.com for prior year partnership returns.

Use the same method of accounting on your DC Form D-65 as that used on your federal tax return.

To complete the paper Form D-65, in general you will need:

- Copies of your completed 2015 federal forms as applicable (1065, Schedule K, Schedule K-1, etc.)
- A pen with black ink
- A calculator

Not all items will apply. If an amount is zero, make no entry, leave the line blank.

The return must be filed for calendar year 2015, or other taxable year beginning in 2015, covering the same tax period reported on the return filed with the IRS. Fill in the tax period ending on page 1 as MMYY.

All entries on the return and attachments are whole dollars only. Do not enter cents. Round cents to the nearest dollar. Examples:

\$10,500.50 rounds to \$10,501 \$10,500.49 rounds to \$10,500

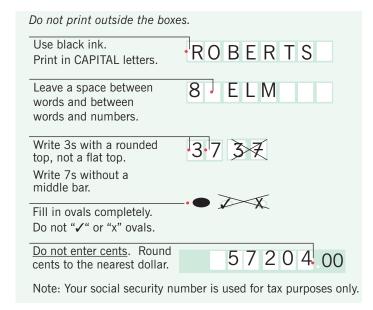
Taxpayer Identification Number (TIN)

You must have a TIN.

A Federal Employer Identification Number (FEIN) is a number issued by the IRS. To apply for a FEIN, get Form SS-4, Application for Employer Identification Number at www.irs.gov. You may also get this form by calling 1-800-TAX-FORM (1-800-829-3676).

Filling out the form

To aid us in processing your return, please follow these rules:



Personal information

Complete the personal information as instructed using CAPITAL letters and black ink. Use one block per letter, including using a space between address fields. Please write clearly, otherwise this can delay processing your return.

Signature

The return must be signed by a partner or member. If receivers, trustees in bankruptcy, or assignees are in control of the property or business organization, they must sign the return.

When the return is prepared by someone (for compensation) other than a member or an employee of the partnership, they must sign as the preparer at the bottom of page 2 of the DC Form D-65.

Preparer Tax Identification Number (PTIN)

If you are a paid preparer, you are required to have an IRS PTIN issued by the IRS. A PTIN is a number issued and authorized by the IRS to file a return on the taxpayer's behalf

Key Website Resources

DC Official Code

www.lexisnexis.com/hottopics/dccode/

DC Regulations

www.dcregs.dc.gov/

US Department of State Tax Exemption Cards

www.state.gov/ofm/tax/

DC Tax Forms/Publications

www.otr.cfo.dc.gov/page/tax-forms-and-publications

Mailing Address for Returns

www.otr.cfo.dc.gov/node/392882

Electronic Funds Transfer (EFT) Guide

www.otr.cfo.dc.gov/publication/electronic-funds-transfer-payment-guide-eft

NACHA Guidelines

www.nacha.org/

Social Security Administration

www.ssa.gov/

Internal Revenue Service

www.irs.gov

Need assistance?

File or pay online: www.taxpayerservicecenter.com

Get tax forms Download forms at www.taxpayerservicecenter.com Request forms by mail: 202-442-6546

Pick up forms:

Office of Tax and Revenue 1101 4th St SW 2nd Floor 8:15 am-5:30 pm

Wilson Building 1350 Pennsylvania Av NW Lobby 7 am–7 pm **Reeves Center** 2000 14th St NW Lobby 7 am–7 pm

One Judiciary Square 441 4th St NW Lobby 7 am-7 pm

Ask tax questions; get tax forms preparation help free

Visit our Walk-In Center, 1101 4th St SW 2nd Floor; or Contact our Customer Service Administration: 202-727-4TAX(4829)

Regular hours 8:15 am–5:30 pm Monday–Friday

Do you need help with this form?

Visit our Walk-In Center, at 1101 4th St SW 2nd Floor.

Are you unable to hear or speak?

Call the DC Relay Service, 202-727-3363.

[Spanish] Si necesita ayuda en Español, por favor llame al <u>(202) 727-4829</u> para proporcionarle un intérprete <u>de manera gratuita</u>.

[Vietnamese] Nếu quý vị cần giúp đỡ về tiếng Việt, xin gọi (202) 727-4829 để chúng tôi thu xếp có thông dịch viên đến giúp quý vị **miễn phí**.

Municipal Center

6:30 am-8 pm

300 Indiana Av NW Lobby

[French] Si vous avez besoin d'aide en Français appelez-le (202) 727-4829 et l'assistance d'un interprète vous sera fournie gratuitement.

[Amharic] በአጣርኛ እርዳታ ከፊለት በ (202) 727-4829 ይደውሉ። የነባ አስተርጓሚ ይመደብልዎታል።

[Korean] 한국어로 언어 지원이 필요하신 경우 (202) 727-4829 로 연락을 주시면 무료로 통역이 제공됩니다.

[Chinese] 如果您需要用(中文)接受幫助,請電洽 (202) 727-4829 將**預費**向您提供口譯員服務。

D-76 District of Columbia (DC) Estate Tax Forms and Instructions

For Estates of Individuals Who Died on January 1, 2016 or After

D-76 DC Estate Tax Return

D-76EZ DC Estate Tax Return

D-77 Application for Extension of Time

to File DC Estate Tax Return

D-76P Payment Voucher for DC Estate Tax

INSTRUCTION CLARIFICATION

DC recognizes same sex marriage. Any gender specific terms in DC law relating to the sex and/or marital or filing status of the decedent and/or any surviving spouse shall be considered gender neutral.

WHAT'S NEW

* For all *D-76 District of Columbia (DC) Estate Tax Computation Worksheets* visit our website at: www.taxpayerservicecenter.com then

Click on Forms

Select <u>Business Tax Forms and Publications</u> Select <u>DC Inheritance and Estate Tax Forms</u>

Select Form # D-76

Select the <u>D-76 Estate Tax Computation Worksheets</u>

DC ESTATE TAX RETURN FORM D-76 AND FORM D-76 EZ

GENERAL INSTRUCTIONS

1. WHEN IT MUST BE FILED: A District of Columbia (DC) Estate Tax Return (Form D-76 or Form D-76 EZ) must be filed when the gross estate is \$1,000,000 or more, even if a federal Estate Tax Return (IRS Form 706, for individuals dying in 2002 and thereafter) is not required to be filed. Note: Certain schedules from the current IRS Form 706 will need to be prepared prior to completing Form D-76 or Form D-76 EZ, regardless of whether a Form 706 is filed.

For a decedent whose death occurs on or after January 1, 2003, the unified credit is \$345,800 and an estate tax return is not required to be filed if the decedent's gross estate does not exceed \$1,000,000.

- 2. WHO MUST FILE: The DC estate tax return must be filed by the Personal Representative responsible for administering the estate.
- 3. EXTENSION OF TIME TO FILE: Generally, the DC estate tax return must be filed and the tax paid within 10 months after the death of the decedent. However, a 6-month extension of time to file may be requested by filing an Application for Extension of Time to File DC Estate Tax Return (Form D-77). The Office of Tax and Revenue (OTR) does not accept the federal Form 4768, Application for Extension of Time to File a Return and/or Pay U.S. Estate (and Generation-Skipping Transfer) Taxes. YOU MUST USE ONLY FORM D-77.
- 4. INTEREST: Beginning January 1, 2003, interest is charged at the rate of 10% per year, compounded daily (without regard to any extension).
- 5. PENALTIES: A penalty of 5% per month or any fraction of a month up to a maximum of 25% of the unpaid portion of the tax due will be imposed upon the failure to timely file a return and/or upon the failure to timely pay the tax. This penalty applies without regard to any extension of time in filing the return.
- 6. PLACE FOR FILING: Mail returns and payments to the Office of Tax and Revenue, Audit Division, Estate Tax Unit, P.O. Box 556 Washington, DC 20044-0556. Make the check or money order (US Dollars) payable to the DC Treasurer.
- 7. SUPPLEMENTAL DOCUMENTS: Attach copies of the following to the tax return:
 - (a) Application for Extension of Time to File DC Estate Tax Return (Form D-77), if filed;
 - (b) Pages 1, 2 and 3 from the current IRS Form 706; and
 - (c) Current Schedules A through O from IRS Form 706, including all attachments (provided on a CD in PDF format).
- 8. AMENDED RETURNS AND FEDERAL CHANGES: If an amended federal Estate Tax Return is filed, or a federal adjustment is made, an amended DC Estate Tax Return must be filed within 30 days after filing the amended federal Estate Tax Return to report the changes. A copy of the amended federal Estate Tax Return or federal adjustment report must be attached. Also, if additional assets are discovered, a DC amended Estate Tax Return must be filed within 30 days of this determination. Do not file an amended return to provide additional information that has already been requested by OTR about a return which you have already filed. Indicate 'amended return' by completing the oval on the D-76 or D-76EZ.
- 9. Beginning October 1, 2013, all married couples are eligible for estate tax deductions and exclusions, including the spousal exclusion of bequests, whether direct or though trusts, to a surviving spouse, regardless of whether such marriage is recognized under federal law.
- 10. SIGNATURE: The Personal Representative(s) must sign the tax return.

DC ESTATE TAX RETURN FORM D-76 & FORM D-76 EZ

SPECIFIC INSTRUCTIONS

1. TAXABLE SITUS

Assets reported on schedules A through H of the federal Estate Tax Return generally have a taxable situs determined in accordance with the following:

- (a) Real Property The place where the property is situated. If property was rental property during decedent's lifetime, a D-30 (Unincorporated Business Franchise Tax Return) should have been filed and taxes paid, if applicable.
- (b) Tangible Personal Property The place where the property is customarily located at the time of death.
- (c) Intangible Personal Property The domicile of the decedent at the time of death, except that intangible personal property used in a trade or business in DC has a taxable situs in the District. Examples of intangible personal property include bank accounts, certificates of deposit, notes, securities and bonds. The physical location of these assets, unless used in a trade or business in the District, is not controlling. They are taxable at the domicile of the decedent.

2. ADDITIONAL INFORMATION

- (a) Partnership Property Treated as intangible personal property regardless of the character of the property; for example, real estate held by a partnership is intangible personal property and is taxable at the decedent's domicile.
- (b) Business Situs Intangible personal property used in a trade or business in the District has a taxable situs in the District regardless of the domicile of the owner.
- (c) Personal Trusts Assets held in a personal trust have a taxable situs in accordance with the generally accepted situs rules. The trust entity is disregarded for purposes of determining taxability.
- (d) Trustee The residence or location of the trustee of a trust does not determine questions of the situs of the assets in the trust.

DC ESTATE TAX RETURN FORM D-76

LINE-BY-LINE INSTRUCTIONS

- **LINE 1 Gross value of property located in the District of Columbia**: If this line is left blank, the Total Gross Estate will be the default value.
- **LINE 2 Total Gross Estate:** Enter amount from Line 13 of the Recapitulation (Form D-76, page 2). The value of the property of the estate must be based upon fair market value appraisals from Certified Appraisers. Attach a copy of the appraisal to the tax return.
- **LINE 3 Total Allowable Deductions:** Enter total allowable deductions from Line 24, Form D-76, page 2.
- **LINE 4 Tentative Taxable Estate:** Subtract total allowable deductions (Line 3) from total gross estate (Line 2).
- **LINE 5 DC Estate Tax Due:** Calculate the DC Estate Tax due by using the Tax Table on the Estate Tax Computation Worksheet after you computed the exempted amounts (if applicable).
- **LINE 6 Payment with Extension of Time to File:** Enter the amount and date of payment made with Form D-77, if any.
- **LINE 7 Overpayment:** If Line 6 is greater than Line 5, enter overpayment on Line 7.
- **LINE 8 Balance Due:** If Line 5 is greater than Line 6, enter balance due on Line 8.
- **LINE 9 Penalty:** A penalty is imposed at 5 percent per month or fraction of a month (maximum 25%) on any estate taxes not paid by the due date of the return, without regard to any extension of time for filing the return.
- **LINE 10 Interest:** Any portion of the tax which is not paid by the time the return is required to be filed, determined without regard to any extension of time for filing the return, is subject to interest from the original due date to the date of payment. Effective January 1, 2003, interest began to be charged at the rate of 10% per year, compounded daily (without regard to any extension).
- **LINE 11** Total Tax, Penalty, and Interest: Add Lines 8, 9 and 10. Enter the total on Line 11.



D-76 DC Estate Tax Return

FOR ESTATES OF INDIVIDUALS WHO DIED ON JANUARY 1, 2016 OR AFTER



OFFICIAL USE ONLY VENDOR ID#0000

Attach a copy of the last will and Letters of Administration and dea		Resident Nonresident probated? Did decedent	
Estate's Federal Employer ID Number	Date of Death (MMDDYYYY)	Social Security Number (SSN)	Date of Birth of Decedent (MMDDYYYY)
Estate of (First)	M.I. (Last)		
Address of Decedent at date of death (num	nber, street and suite/apartment number if appl	icable)	
City		State Zip Code	+4
Location of Probate Court		Case Number	
Name of Personal Representative		SSN	N of Personal Representative
Address of Personal Representative (number	er, street and suite/apartment number if applica	ble)	Telephone Number of Personal Representative
City		State Zip Code -	+4
Estate		Round cents to n	nearest dollar. If amount is zero, leave line blank.
1 Gross value of property located i	n the District of Columbia	1 \$	00
2 Total gross estate (from page 2,	Line 13)	2 \$	00
3 Total allowable deduction (from	page 2, Line 24)	3 \$.00
4 Tentative taxable estate (Line 2	minus Line 3)	4 \$	00
5 DC estate tax due		5 \$.00
6 Payment with extension. Enter of	date paid (MMDDYYYY)	6 \$.00
7 Overpayment (if Line 6 is greate Will this refund request go to an according to the control of	er than Line 5) count outside of the US? See instruction	7 \$ Yes No	.00
8 Balance due (if Line 5 is greater Will this payment come from an acc	r than Line 6) count outside of the US? See instructions	s Yes No 8 \$	00
9 Penalty: 5% per month or a frac	tion thereof (maximum 25%)	9 \$.00
10 Interest: From	to	10 \$.00
11 Total tax, penalty and interest (a	add Lines 8, 9 and 10)	11 \$.00
Refund Options Fill in one refund choice:	Direct Deposit Paper C	heck	
	posited into your bank account, fill in type of a		and enter the routing number and account
Routing Number	Account Numbe	er	
	w, that I (we) have examined all assets and nformation and belief, all statements made h		
Attorney's Name		Signature of Personal Representative	
Attorney's Address		Attorney's Telephone Number	Date



Estate of:	Estate FEIN:	

Recapitulation. Note: If estimating the value of one or more assets pursuant to the special rule of Reg. section 20.2010-2T(a)(7)(ii), enter on both lines 10 and 23 the amount noted in the instructions for the corresponding range of values. (See IRS instructions for details.)

Item no. Gross estate	Check box if Value at date of death Alternate value	
1 Schedule A—Real Estate	1 \$	00
2 Schedule B—Stocks and Bonds	2 \$.00
3 Schedule C—Mortgages, Notes, and Cash	3 \$.00
4 Schedule D—Insurance on the Decedent's Life (attach federal Fo	rm(s) 712) 4 \$.00
5 Schedule E—Jointly Owned Property (attach fed Form(s) 712 for life	e insurance) 5 \$	00
6 Schedule F—Other Miscellaneous Property (att. fed Form(s) 712 for	r life insurance) 6 \$	00
7 Schedule G—Transfers During Decedent's Life (att. fed Form(s) 712	2 for life insurance) 7 \$	00
8 Schedule H—Powers of Appointment	8 \$.00
9 Schedule I—Annuities	9\$	00
10 Estimated value of assets subject to the special rule of Reg. section 20.2010-2T(a)(7)(ii)	10 \$	00
11 Total gross estate (add items 1 through 10)	11 \$.00
12 Schedule U—Qualified Conservation Easement Exclusion	12 \$	00
13 Total gross estate less exclusion (subtract item 12 from item 11). on Line 2 of the D-76 - Tax Computation	. Enter here and 13 \$.00
Item no. Deductions	Amount	
14 Schedule J—Funeral Expenses and Expenses Incurred in Adminis Subject to Claims		00
15 Schedule K—Debts of the Decedent	15 \$.00
16 Schedule K—Mortgages and Liens	16 \$.00
17 Total of items 14 through 16	17 \$.00
18 Allowable amount of deductions from item 17 (see the instructions for item 18 of the Recapitulation)	18 \$.00
19 Schedule L—Net Losses During Administration	19 \$.00
20 Schedule L—Expenses Incurred in Administering Property Not Su	ubject to Claims 20 \$	00
21 Schedule M—Bequests, etc., to Surviving Spouse	21 \$	00
22 Schedule O—Charitable, Public, and Similar Gifts and Bequests.	22 \$	00
23 Estimated value of deductible assets subject to the special rule of Reg. section 20.2010-2T(a)(7)(ii)		.00
24 Tentative total allowable deductions (add items 18 through 23). Enter here and on Line 3 of the D-76 - Tax Computation	24 \$	00



D-76EZ DC Estate Tax Return

FOR ESTATES OF INDIVIDUALS WHO DIED ON JANUARY 1, 2016 OR AFTER



OFFICIAL USE ONLY VENDOR ID#0000

Attach a copy of the last will and testament, Letters of Administration and death certificate	Fill in type of return: Was the estate	Resident probated?	Nonresident Did decedent die	Alien testate?	Amended return
Estate's Federal Employer ID Number Date of Deat	h (MMDDYYYY)	Social Security Nu	umber (SSN)	Date of Birth	of Decedent (MMDDYYYY)
Estate of (First name)	M.I. (Last name)				
Address of Decedent at date of death (number, street and su	te/apartment number if app	olicable)			
			71.04.4		
City		State	Zip Code +4		
Location of Probate Court		Case	Number		
Location of Frobate Court		Case	Number		
Name of Personal Representative			SSN of P	ersonal Repres	sentative
Address of Personal Representative (number, street and suite/	apartment number if applic	able)	Teleph	one Number o	f Personal Representative
City		State	Zip Code +4		
Estate					ount is zero, leave line blank.
Signature I swear under penalty of law, that I (we) ha and to the best of my (our) knowledge, information and by				npanying sche	edules and statements,
Attauna da Nama		Cignotus of Do	al Dangacant-ti		
Attorney's Name		Signature of Person	ai Representative		
Attorney's Address		Attorney's Telephor	ne Number	Date	



DC ESTATE TAX RETURN FORM D-76 EZ

FOR ESTATES OF INDIVIDUALS WHO DIED ON JANUARY 1, 2016 OR AFTER

You may only use this form if:

- (1) The Estate will pass to the surviving spouse;
- (2) The Estate is donated to a charitable, public or tax-exempt organization under Section 501(c) of the IRC; or
- (3) Some combination of (1) and (2) resulting in "0" Taxable Estate

If you use this form, attach the following:

- (1) Pages 1, 2 and 3 of the current IRS Form 706;
- (2) Schedule M of the current IRS Form 706 where part or all of the estate will pass to the surviving spouse; and
- (3) Schedule O of the current IRS Form 706 where part or all of the estate is donated to a charitable, public or tax-exempt organization under Section 501(c) of the IRC.



D-77 Extension of Time to File a DC Estate Tax Return

FOR ESTATES OF INDIVIDUALS WHO DIED ON JANUARY 1, 2016 OR AFTER

OFFICIAL USE ONLY VENDOR ID#0000

PART I IDENTIFICATION				
Estate's Federal Employer ID Number	Date of Death (MMDDYYYY)	Social Security Number	(SSN)	Date of Birth of Decedent (MMDDYYYY
Estate of (First name)	M.I. (Last name)			
Address of Decedent at date of death (number	r, street and suite/apartment number if applic	cable)		
City		State	Zip Code +4	
Name of Personal Representative			SSN of Pe	rsonal Representative
Address of Personal Representative (number, s	treet and suite/apartment number if applicab	ole)	Telepl	none Number of Personal Representative
City		State	Zip Code +4	
			2.6 6640 1 1	
Name of Application Filer (if other than Person	al Representative)		SSN of Apr	olication Filer
Address of Application Filer (number, street an	d suite/apartment number if applicable)		Telep	hone Number of Application Filer
City		State	Zip Code +4	
PART II EXTENSION OF TIME TO	D FILE FORM D-76			
Automatic extension. Please	check if you are applying for an au	tomatic 6-month ext	ension of time	to file Form D-76. See instruction
Additional extension Please	check if you are an executor out of	the United States a	ad applying for	an extension of time to file in
excess of 6 months.	ineck if you are all executor out of	the Officed States at	ій арріўнів ій	all extension of time to me in
Vou must attach a unitton statemen	t avalaining in datail why it is imp	assible or imprestice	l to file o vecco	nably assemblate vature by the
You must attach a written statemen due date of the return.	t explaining in detail why it is impo	ossible of illipractica	i to lile a reaso	nably complete return by the
Exten	sion date requested			
PART III PAYMENT TO ACCOMP	ANY EXTENSION REQUEST			
Estimated amount of Estate Tax du	e			00
Under penalties of law, I declare that to the		tements made herein are	true, correct and	complete and that I am authorized by
the Personal Representative to file this appl	icatioff.			
Signature		Title		
		Date		

DC ESTATE TAX RETURN FORM D-77

APPLICATION FOR EXTENSION OF TIME TO FILE

INSTRUCTIONS

PURPOSE — Form D-77 must be filed to request a 6-month extension of time in which to file a DC Estate Tax Return, Form D-76 or D-76EZ.

WHEN TO FILE—The request for an extension of time to file must be submitted on or before the original due date for Form D-76 or D-76EZ.

WHERE TO SUBMIT REQUEST—Mail the completed Form D-77 with your payment of any tax due to the Office of Tax and Revenue, Audit Division, Estate Tax Unit, PO Box 556, Washington, DC 20044. Be sure to sign and date the D-77. The payment should be made payable to the **DC Treasurer** and include the decedent's social security number and the notation "D-77".

REQUEST FOR EXTENSION OF TIME TO FILE. – A 6-month extension of time to file will be granted if you complete this form properly, file and pay with it the amount of tax due as shown on Part III, Line 1. A copy of the D-77 which you filed must be attached to Form D-76 or D-76EZ when it is filed.

FEDERAL EXTENSION FORM—The Office of Tax and Revenue does not accept federal Form 4768, Application for Extension of Time to File a Return and/or Pay U.S. Estate Taxes.

USE ONLY THE DISTRICT OF COLUMBIA FORM D-77.

ADDITIONAL EXTENSION OF TIME—An additional extension of time to file is available only if the executor is out of the United States, or in case(s) of extreme emergency(ies). In this instance an additional extension of 6 months may be granted.

PENALTY—The penalty for failure to file a return on time or failure to pay any tax when due is an amount equal to 5% of the unpaid portion of the tax due without regard to any extension of time for filing the return. The penalty is computed for each month or fraction thereof, that the failure to file or pay continues. The penalty may not exceed an amount equal to 25% of the tax due.

INTEREST— Interest is computed from the due date of the return until the tax is paid even if a request for extension to file is granted. Effective January 1, 2003, interest began to be charged at the rate of 10% per year, compounded daily (without regard to any extension).

SIGNATURE—The application must be signed by the Personal Representative of the estate or by someone appointed by the Personal Representative to file the application.

D-76P Payment Voucher for DC Estate Tax

See instructions on back.

Detach at perforation and mail the voucher, with payment to the: Office of Tax and Revenue, Audit Division, Estate Tax Unit, PO Box 556, Washington, DC 20044-0556.

	Government of the District of Columbia		ment Voucher for Estate Tax			
Impo	ortant: Print in CAPITAL letters using	g black ink. Make check	or money order payable to: DC	reasurer	0 0 0 7 6	0 4 1 0 0 0 0
į	Amount of payment (dollars only)		00			OFFICIAL USE ONLY Vendor ID#0000
	Taxpayer Identification Number		FEIN Date of Death (MMDDYYYY))	Due Date (MMDDYYYY)	veridor 1D#0000
	Estate of (First name)	M	.l. (Last name)			
	Name of Personal Representativ	re				
	Address of Personal Representa	tive (number, street and s	uite/apartment number if applicable	ı)		
i	City			State	Zip Code +4	
* *	Revised 12/15 Government of the	Pa <u>j</u>	76P P1 yment Voucher for DC Estate Tax ment Voucher for			
	District of Columbia		Estate Tax			
- l	start Drietia CADITAL latters value	a black tale Make about			0 0 0 7 6	0 4 1 0 0 0 0
Aı	ortant: Print in CAPITAL letters using amount of payment stollars only)	g black ink. Make check	or money order payable to: DC 1	reasurer	0 0 0 7 6	0 4 1 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
Aı		g black ink. Make check Fill in if FEIN if SSN		reasurer	0 0 0 7 6 Due Date (MMDDYYYY)	0 4 1 0 0 0 0 0 OFFICIAL USE ONLY Vendor ID#0000
Aı	mount of payment stollars only)	Fill in if FEIN if SSN	. 00	reasurer	0 0 0 7 6 Due Date (MMDDYYYY)	
Aı	mount of payment dollars only) Taxpayer Identification Number	Fill in if FEIN	OO Date of Death (MMDDYYYY)	reasurer	0 0 0 7 6 Due Date (MMDDYYYY)	
Aı	mount of payment dollars only) Taxpayer Identification Number Estate of (First name)	Fill in if FEIN if SSN M.I.	Date of Death (MMDDYYYY) (Last name)	Treasurer	0 0 0 7 6 Due Date (MMDDYYYY)	
Al (d	Imount of payment dollars only) Taxpayer Identification Number Estate of (First name) Name of Personal Representative	Fill in if FEIN if SSN M.I.	Date of Death (MMDDYYYY) (Last name)		Due Date (MMDDYYYY)	

D-76P P1 Payment Voucher for DC Estate Tax

Instructions for D-76P - please print clearly

Use the D-76P Payment Voucher to make any payment due on your D-76, D-76EZ or D-77 return.

- Enter your payment amount;
- Enter your Taxpayer Identification Number (fill in the oval indicating if this is your FEIN or SSN), date of death and due date;
- Enter name(s) and address(es) exactly as they are on your D-76, D-76EZ or D-77 return;
- Make your check or money order payable to: DC Treasurer;
- Write the Estate FEIN, tax period and D-76, D-76EZ or D-77 on your payment;
- Staple the payment to the D-76P Payment Voucher do not attach your payment to your return;
- Mail the D-76P with payment attached and D-76, D-76EZ or D-77 return to the:

Office of Tax and Revenue Audit Division,
Estate Tax Unit
PO Box 556
Washington, DC 20044-0556



Commercial Form Alternative Fuel Vehicle Conversion and Infrastructure Credits

This is a FILL-IN format. Please do not handwrite any data on this form other than your signature.

Please complete this form and return with the form D-20 or D-30 if claiming the credit.

A. Business information					
Taxpayer ID		Business name			
Claimant first name			M.I.	Last name	Social Security Number (SSN)
Telephone number		Email			
Mailing address					Suite/Apt/Bldg
City			State		Zip code + 4
B. Alternative fuel vehic	le (AFV) char	ging or fuel sto	orage dispe	ensing station	
Equipment manufacturer			Invoic	e number	
(B1) Equipment cost	(B2) Labor cost	(B3) Total cos	st (B1+B2)	(B4) Multiply B3 by 0.50	(B5) Credit amount not to exceed \$10,000 per station or B4 . (See <i>instructions for limitations</i>)
Installation address (no PO Boxes)					Suite/Apt/Bldg
City			State		Zip code +4
Access (Select one) Public of	r Private		Hours	of operation	Accepted payment methods
CLAIM 2					
Equipment manufacturer			Invoic	e number	
(B1) Equipment cost	(B2) Labor cost	(B3) Total cos	st (B1+B2)	(B4) Multiply B3 by 0.50	(B5) Credit amount not to exceed \$10,000 per station or B4 . (See <i>instructions for limitations</i>)
Installation address (no PO Boxes)					Suite/Apt/Bldg
City			State		Zip code +4
Access (Select one) Public or	Private		Hours	of operation	Accepted payment methods



Commercial Form Alternative Fuel Vehicle Conversion and Infrastructure Credits

Page 2

C. Alternative fuel ve	hicle (AFV) conve	rsion				
CLAIM 1						
AFV Manufacturer		AFV m	el			
(C1) Equipment cost	(C2) Labor cost	(C3) Total cost (C1+C2)	(C4) Multiply C3 by 0.50	(C5) Credit amount not to exceed \$19,000 per vehicle or C4. (See instructions for limitations)		
Conversion site address (no P	O Boxes)			Suite/Apt/Bldg		
City		State		Zip code +4		
CLAIM 2						
AFV Manufacturer AFV model						
(C1) Equipment cost	(C2) Labor cost	(C3) Total cost (C1+C2)	(C4) Multiply C3 by 0.50	(C5) Credit amount not to exceed \$19,000 per vehicle or C4. (See instructions for limitations)		
Conversion site address (no F	PO Boxes)			Suite/Apt/Bldg		
City		State		Zip code +4		
	l result in any c	ttach photocopies of redit claim denials. 1		nent(s) to this form. any one tax year cannot exceed		
1. A paid invoice, receipt	or equivalent proof of	payment for alternative fuel	vehicle.			
in accordance with all a	applicable laws, reg rials submitted to t	gulations and permitting r he District of Columbia ([equirements and is opera	e information that is the subject of this form is tional, that there are no false statements on venue, and that no false statements have been		
Print name			Date signed			
Signature						



Residential Form Alternative Fuel Vehicle Conversion and Infrastructure Credits

This is a FILL-IN format. Please do not handwrite any data on this form other than your signature.

Please complete this form and return with the form D-40 if claiming the credit.

A. Personal informat	tion			
First name	M.I.	Last name		Social Security Number (SSN)
Telephone number		Email		
B. Alternative fuel v	ehicle (AFV) chargin	g or fuel storage dispensing st	ation - Private residence	:
Equipment Manufacturer		Invoice Number		
(B1) Equipment cost	(B2) Labor cost	(B3) Total cost (B1+B2)	(B4) Multiply B3 by 0.50	(B5) Credit amount (not to exceed \$1,000 per station or B4)
Private residence address				Suite/Apt/Bldg
City		State		Zip code + 4
C. Alternative fuel v	ehicle (AFV) charging	g or fuel storage dispensing st	ation - Public use	
Equipment Manufacturer		Invoice Number		
(C1) Equipment cost	(C2) Labor cost	(C3) Total cost (C1+C2)	(C4) Multiply C3 by 0.50	(C5) Credit amount (not to exceed \$10,000 per station or C4)
Installation address (no PO	Boxes)			Suite/Apt/Bldg
City		State		Zip code +4
Access		Hours of operation	Accepted pa	yment methods
D. Alternative fuel v	ehicle (AFV) - Conve	rsion		
AFV Manufacturer		AFV Model		
(D1) Equipment cost	(D2) Labor cost	(D3) Total cost (D1+D2)	(D4) Multiply D3 by 0.50	(D5) Credit amount (not to exceed \$19,000 per vehicle or D4)
_			-	

Retain your original documents. Attach photocopies of the following document(s) to this form. Failure to do so will result in any credit claim denials. The credit claimed in any one tax year cannot exceed the income tax liability.

- 1. A paid invoice, receipt or equivalent proof of payment for modifying the existing petroleum derived gasoline or diesel fuel vehicle
- 2. A paid invoice, receipt or equivalent proof of payment for purchases and installation of qualified alternative fuel storage and dispensing or charging equipment
- 3. An electrical permit

Signature I solemnly affirm under penalties of law, that to the best of my knowledge, the information that is the subject of this form is in accordance with all applicable laws, regulations and permitting requirements and is operational, that there are no false statements on this form or other materials submitted to the District of Columbia (DC), Office of Tax and Revenue, and that no false statements have been made in order to influence any action by DC on this form.

Print name	Date sig	ned

Signature

GOVERNMENT OF THE DISTRICT OF COLUMBIA OFFICE OF TAX AND REVENUE

APPLICATION FOR EXEMPTION, FR-164 (Check Appropriate Boxes)

P.O. BOX 556 WASHINGTON, DC 20044-0556	☐ INCOME AND FRANCHISE TAX
FAX # (202) 442-6883 www.cfo.dc.gov	SALES AND USE TAX (SEMIPUBLIC INSTITUTION ONLY)
	PERSONAL PROPERTY TAX (SEMIPUBLIC INSTITUTION ONLY)
1. Full name of organization	H2101#
2 Complete address (number, city/town and Postal Zip Code of the	organization: P.O. Box is not acceptable.) including Website
3. Federal Exemption Status:	
☐ IRS Determination Letter effective date	Internal Revenue Code Section
Application filed (if not recognized) Date	Internal Revenue Code Section
4. Form of Organization: □ Corporation Date of incorporation	State
Other-Describe	
5. Purpose of Organization:	
☐ Religious ☐ Library ☐ Othe ☐ Charitable ☐ Educational ☐ Scientific ☐ Hospital	er: Explain:
☐ Grants ☐ Initiation Rees ☐ Div	rest
7. End of Annual Accounting Period:	
8 Date activities began in the District:	
9a. Physical Location(s) of Personal Property in the District:	
9b. Type of Personal Property Owned by Organization: (Also list tot	al cost of property owned and located in the District)
Person Authorized to Discuss Application for Exemption:	
Vame:Title:	Telephone:
Address:	FAX:Email:
SIGNATURE	AND VERIFICATION
	tion, including accompanying statements, and to the best of my knowledge and belief it is

Signature of Officer	Title	Date

10a. Does the organization control or is it controlled by any other organization?	Yes	No	If 'Yes', attach an explanation.
h Is the organization the outgrowth of (or successor to) another organization, or does it have a special relationship with another organization by reason of interlocking directorates or other factors?	Yes	No	If Yes', attach an explanation.
c. Other than a statutory office, do you maintain regular places of business outside the District?	Yes	No	If "Yes", attach a statement indicating the locations.
d. Does the organization report any unrelated business income on Form 990T to the IRS?	Yes	No	If "Yes", attach an explanation of the nature of the organization's unre- lated business activities or provide a copy of the latest filed Form 990T.
e. Does the organization file a Form 1120 POL U.S. Income Tax Return for Certain Political Organizations with the IRS?	Yes	No	If Yes', attach an explanation of the nature of the organization's political activities and provide a copy of the latest filed Form 1120POL.
f. Did the organization establish a political action committee described in section 527(f)(3) of the Internal Revenue Code?	Yes	No	If "Yes", attach an explanation of the nature of the organization's political activities and provide a copy of the latest filed Form 1120 POL.
g. Does the organization sell any tangible personal property or provide personal services to persons or organizations located within the District?	Yes	No	If "Yes", attach an explanation of the nature of the organization's activities.
h. Did the organization purchase any tangible personal property outside the District for use in the District?	Yes	No	If "Yes", did the organization file an appropriate sales & use tax return with the District? If no please attach an explanation.

General Information

This application is for use by organizations who wish to apply for an exemption from the District of Columbia Income and Franchise Tax, Sales and Use Tax and Personal Property Tax. All questions on the application must be answered completely. Mail the completed application, with the various documents requested in the specific instructions, to the Office of Tax and Revenue, P.O. Box 556, Washington, DC 20044-0556, Attn: Exempt Organizations.

If you have questions, please call (202) 442-6586 between the hours of 7:30 a.m. and 5:30 p.m. Tuesday through Thursday.

Applicants for Income and Franchise Tax Exemption under Sec. 47-1802.1 of the DC Code:

Most organizations recognized by the Internal Revenue Service will qualify for exemption under the District of Columbia Income and Franchise Tax Act. The effective date for all income and franchise tax exemptions will be the effective date of the IRS Determination Letter.

Applicants for Sales and Use Tax Exemption under Sec. 47-2005 of the DC Code:

Under the District of Columbia Sales and Use Tax Act sales made to any organization which qualifies as a "semipublic institution" are exempt from the tax. A "semipublic" institution is defined under Sec. 47-2001(r) of the Act as "any comporation, and any community chest, fund, or foundation, organized exclusively for religious, scientific, charitable, or educational purposes, including hospitals, no part of the net earnings of which inures to the benefit of any private shareholder or individual." This exemption is limited to those organizations, which have been recognized as tax exempt under Section 501(c)(3) of the Internal Revenue Code of 1986 (or comparable sections under prior codes).

SEMIPUBLIC INSTITUTIONS ARE RECOGNIZED AS DC SALES TAX EXEMPT IF PHYSICALLY LOCATED IN THE DISTRICT.

The exemption applies only to those transactions, which occur on or after the date of the issuance of a Certificate of Exemption by the Office of Tax and Revenue.

Personal Property Tax Exemption under Sec. 47-1508 of the DC Code:

Organizations requesting an exemption from DC Personal Property Tax must own the personal property for which the request is being made, and qualify under Title 47, Section 1508 of the DC Code. Organizations that may qualify for exemption are any corporation, and community chest, fund or foundation, organized exclusively for religious, scientific, charitable, or educational purposes, including hospitals, no part of the net earnings of which inure to the benefit of any private shareholder or individual. The effective date for personal property tax exemptions will be the July 1 following the date of the initial application request.

Specific Instructions

FILE THE FOLLOWING DOCUMENTS WITH THIS APPLICATION: (If not currently available, state when they will be furnished).

- a A copy of the latest determination or ruling letter you have received from the Internal Revenue Service, which approves your organization's exemption from Federal income tax.
- b. If incorporated in DC, a copy of your Certificate of Incorporation issued by the DC Department of Consumer and Regulatory Affairs, Corporate Division, or if not incorporated, a copy of your constitution, articles of association, declaration of trust, or other documents whereby you were created setting forth your aims and purposes, a copy of all amendments thereto, and any changes presently proposed.
- c. If not incorporated in DC a photocopy of a Certificate of Authority or Certificate of Registration issued by the DC Department of Regulatory Affairs, Corporate Division, must be submitted to the Office of Tax and Revenue with the Application for Exemption.
- d. If your organization has ever been recognized as tax exempt by the District, based on a previous application, please provide a copy of your DC letter of exemption or certificate of exemption.
- e. A copy of a lease, District of Columbia Occupancy Permit issued to organization or other documentation should accompany a request by a semi-public institution (501(c)(3) organization) for sales tax exemption to satisfy the physically located requirement.
- f. An organization should file Form FR-500 Combined Business Tax Registration Application with Form FR-164 Application for Exemption if not previously registered with the Office of Tax and Revenue.

GOVERNMENT OF THE DISTRICT OF COLUMBIA Office of the Chief Financial Officer Office of Tax and Revenue



OTR TAX NOTICE 2011-7

November 17, 2011

GUIDANCE ON APPLICATION FOR EXEMPTION FROM DISTRICT OF COLUMBIA FRANCHISE, SALES AND USE, AND PERSONAL PROPERTY TAXES

Nonprofit organizations intending to conduct activities in the District of Columbia that may subject them to liability for franchise, sales and use, or personal property taxes are advised to submit an application for exemption from these taxes no later than the time that those activities commence.¹

An Application Is Required to Obtain an Exemption

Under District law, a determination of exempt status by the Internal Revenue Service ("IRS") does not by itself confer exemption from these taxes. Applicable exemptions from District of Columbia taxes must be secured from the Office of Tax and Revenue ("OTR"). The statutes governing each of these taxes provide that an organization cannot claim the available exemptions from these taxes unless the organization first obtains a letter (in the case of the franchise and personal property taxes) or a certificate (in the case of the sales and use taxes) from OTR stating that it is entitled to an exemption. D.C. Code secs. 47-1508 (personal property tax); 47-1802.01 (franchise taxes); 47-2005(3) (sales and use taxes). It should be noted that the tax exemptions conferred by these statutes generally apply only with respect to activities in furtherance of an organization's exempt purposes, and no exemption is provided with respect to business activities that are not related to an organization's exempt purposes. Such unrelated business activities remain subject to tax.

Application Procedures

In order to apply for exemption from these taxes, an organization must submit Form FR-164 to OTR. Filing instructions are provided with the form, which is available through OTR's Taxpayer Service Center. If an application is hand-delivered to an OTR unit authorized to receive the filing, it is considered filed on the date shown by the OTR date

¹ This notice does not address the process of securing exemption from real property or other District taxes.

stamp placed on the filing. If a properly addressed application is delivered to OTR by mail or private delivery service, it is considered filed on the postmark date shown on the envelope or wrapper. If a properly addressed application is received by OTR via facsimile, it is considered filed on the date that the facsimile is received by OTR.

Effective Date of Exemption

For franchise tax purposes, the exemption, if granted, is effective on the effective date of the exemption determination letter issued for the organization by the Internal Revenue Service.

The sales and use tax exemption, if granted, becomes effective when the exemption certificate is issued.

The personal property tax exemption, if granted, becomes effective on the July 1 following the date of the filing of Form FR-164.

Procedure for Organizations That Do Not Promptly File an Application

OTR encourages any organization that has commenced activities in the District, or that has become liable for franchise, sales and use, or personal property tax prior to filing an application for exemption, to promptly file Form FR-164 so as to help forestall the accumulation of additional tax liability. OTR has instituted a Voluntary Disclosure Program under which noncompliant taxpayers are permitted to pay certain tax liabilities and interest without imposition of civil penalties or fees. An organization that has delayed filing an application for exemption, but that has not been contacted by OTR or its representatives, should consider entering this program to clear outstanding liabilities.

DC CODE § 47-1508 <u>DISTRICT OF COLUMBIA OFFICIAL CODE 2001 EDITION</u> <u>DIVISION VIII. GENERAL LAWS.</u> TITLE 47. TAXATION, LICENSING, PERMITS, ASSESSMENTS, AND FEES. CHAPTER 20. GROSS SALES TAX.

Current through October 2, 2001

§ 47-2005. Exemptions.

Gross receipts from the following sales shall be exempt from the tax imposed by this chapter:

- (1) Sales to the United States or the District or any instrumentality thereof except sales to national banks and federal savings and loan associations;
- (2) Sales to a state or any of its political subdivisions if such state grants a similar exemption to the District. As used in this paragraph, the term "state" means the several states, territories, and possessions of the United States:
- (3) Sales to semipublic institutions; provided, however, that such sales shall not be exempt unless:
- (A) Such institution shall have first obtained a certificate from the Mayor stating that such institution is entitled to such exemption;
- (B) The vendor keeps a record of the sale, the name of the purchaser, the date of each separate sale, and the number of such certificate;
- (C) Such institution is located within the District; and
- (D) The property or services purchased are for use or consumption, or both, in maintaining, operating, and conducting the institution for the purpose for which it was organized or for honoring the institution or its members;

DISTRICT OF COLUMBIA MUNICIPAL REGULATIONS

417.12. The location requirement of § 128(c) of the Act is not satisfied by a mere statutory office of a registered agent, but refers to a physical location where the activities of the organization are regularly carried on.





2015 FR-329 Consumer Use Tax on Purchases and Rentals



Important: Print in CAPITAL letters using black ink.
Leave lines blank that do not apply. File this form separately from your D-40 return.

OFFICIAL USE ONLY Vendor ID# 0000

Personal information										
Your first name	M.I.	Last name								
Your social security number	Your daytime ph	none number								
Home address (number, street and suite/apartment	number if applicat	ble)								
City					State	Zip Code	+ 4			
				Ш				ш		
Sales and use tax calculation					Dete				nearest dollaro, leave the	
	А	mount purchased	d		Rate			Т	ax	
1 Merchandise, services and rentals	\$.00	X .057!	5 =	1\$.00
Include purchases of clothing, jewelry, furniture, and electronic equipment and rentals of furniture and electronic equipment. See other side for an expanded list.										
2 Alcoholic beverages	\$.00	X .10	=	2\$.00
3 Purchases of catered food or drink or rentals of non- commercial vehicles	\$.00	X .10	=	3\$.00
4 Reserved	\$.00	x	=	4 \$.00
5 Total tax due Add Lines 1, 2, 3 and 4.							5\$.00
					DC	Treasu	rer. Wri		cial security	rs) payable to: number and
Signature Under penalties of law, I declar Declaration of paid preparer is						nowled	ge, it is	correct.		
Your signature	Date	:	Pr	eparer's s	signature				Date	
		Preparer's Tax Id	entifica	ation Num	nber (PTIN)	Prepar	er's phoi	ne number		
Do not mail this form with your individual	income tax retu	urn. Please us	e a <u>se</u>	<u>parate</u> e	nvelope.					
Complete and sign this form: Mail it by Ap Office of Tax and Revenue 1101 4th Street, SW FL4 Washington, DC 20024	oril 18, 2016 to):								

Instructions for Form FR-329

Who should file Form FR-329?

File Form FR-329 if during tax year 2015 you paid a total of more than \$400 for merchandise, services, or rentals on which you did not pay sales tax. Typically, you do not pay sales tax on:

- Merchandise you ordered through catalogs;
- Merchandise shipped to DC that you bought or rented outside DC; and
- Merchandise taxed in DC but not in the state where purchased.

Do not file Form FR-329 for a business. Businesses should file a Form FR-800A (annual return), Form FR-800Q (quarterly return), or a Form FR-800M (monthly return) to report sales tax (in the "use tax" section) on such purchases and rentals.

Taxpayer Identification Number(s) (TIN)

You must have a valid TIN.

A SSN is a valid number issued by the Social Security Administration (SSA) of the United States Government. To apply for a SSN, get Form SS-5, Application for a Social Security Card, from your local SSA office or online at www.ssa.gov. You may also get this form by calling 1-800-772-1213.

You must wait until you receive your SSN before you file a DC return. Your return may be rejected if your SSN is missing, incorrect or invalid.

International ACH Transaction (IAT)

International ACH Transaction (IAT). Your payment cannot be drawn on a foreign account. You must pay by money order (US dollars) or credit card instead.

Penalty and interest charges

OTR will charge -

- A penalty of 5% per month if you fail to file a return or pay any tax due on time. It is computed on the unpaid tax for each month, or fraction of a month, that the return is not filed or the tax is not paid. It may not exceed an additional amount equal to 25% of the tax due;
- A 20% penalty on the portion of an underpayment of taxes if attributable to negligence. Negligence is a failure to make a reasonable attempt to comply with the law or to exercise ordinary and reasonable care in preparing tax returns without the intent to defraud. One indication of negligence is a failure to keep adequate books and records;
- Interest of 10% per year, compounded daily, on a late payment.
- A one-time fee to cover internal collection efforts on any unpaid balance. The collection fee assessed is 10% of the tax balance due after 90 days. Payments received by OTR on accounts subject to the fee are first applied to the fee then to penalty, interest and tax owed:
- A civil fraud penalty of 75% of the underpayment which is attributable to fraud (see DC Code §47-4212).

Enforcement actions

OTR may use lien, levy, seizure, collection agencies and liability offset if a taxpayer fails to pay the District within 20 days after receiving a Notice of Tax Due and a demand for payment. Visit www.taxpayerservicecenter.com. click "Individual Income Tax", "Collection Division", "Enforcement Actions".

Criminal penalties

You will be penalized under the criminal provisions of the DC Code, Title 47 if you are required to file a return or report, or perform any act and you –

- Fail to file the return or report timely. If convicted, you will be fined not more than \$1,000 or imprisoned for not more than 180 days, or both, for each failure or neglect;
- Willfully fail to file the return or report timely. If convicted, you will be fined not more than \$5,000 or imprisoned for not more than 180 days, or both;
- Willfully attempt to evade or defeat a tax; willfully fail to collect, account for, or pay a tax; or willfully make fraudulent or false statements. See DC Code §47-4101 through 4107.

These penalties are in addition to penalties under DC Code §22-2405 for false statements (and any other applicable penalties). Corporate officers may be held personally liable for the payment of taxes owed to DC.

Sales tax you owe

Include shipping and handling charges in the sales price when they are listed as a line item on the bill.

Line 1 Merchandise, services and rentals

Enter the total sales price of all your purchases of merchandise, services and rentals on which you did not pay any DC or state sales tax. Multiply the amount by .0575 and enter the result in the tax column.

Taxable merchandise includes, but is not limited to, furniture, clothing, shoes, jewelry, perfume, cosmetics, computer hardware and software, appliances, electronic equipment, cameras, antiques, art, office supplies, sporting goods and rare coins.

Taxable services include data processing, real property maintenance, information services, dry cleaning, landscaping, photographic services and film processing.

Taxable rentals include rental of furniture, televisions, stereos, computer hardware and software and lawn equipment.

Line 2 Alcoholic beverages

Enter the total sales price of all your purchases of alcoholic beverages on which you did not pay any DC or state sales tax. Multiply the amount by .10 and enter the result in the tax column.

Line 3 Purchases of catered food or drink or rentals of non-commercial vehicles.

Enter the total sales price of all your purchases and rentals on which you did not pay any DC or state sales tax. Multiply the amount by .10 and enter the result in the tax column.

Line 4 RESERVED

Preparer Tax Identification Number (PTIN)

IRS rules have changed. If you are a paid preparer, you are required to have a PTIN issued by the IRS. A PTIN is a number issued and authorized by the IRS to file a return on the taxpayers' behalf.



D-2848 Power of Attorney and Declaration of Representation

OFFICIAL USE ONLY

	ntormation				
Your first nam	ne, M.I., Last name for individ	ual or Business name for busines	SS		
Spouse first n	ame, M.I., Last name for indiv	vidual			
·					
Your SSN or El	N for business	Spouse's SSN	Your da	aytime phone number	
Home address	s (number and street) or busi	iness address			Apartment number
City			State	Zip code	
hereby appoint Representation date this form	ve(s) This Power of Attorney	ative(s) as attorney(s)-in-fact: will not be valid unless the Repr	esentative(s) complete the	Declaration of Represen	tative, sign and
Name and ad			EIN/SSN		
			PTIN Telephone Number		
			Fax No. E-mail Address		
Name and ad	dress		EIN/SSN		
			PTIN Telephone Number		
			Fax No. E-mail Address		
Name and ad	dress		EIN/SSN		
			PTIN Telephone Number		
			Fax No. E-mail Address		
Name and ad	aress		EIN/SSN PTIN		
			Telephone Number Fax No.		
			E-mail Address		
Tax Matte	e rs ncome, Sales, etc)	Type Form		Years or Periods	
Type of Tax (II	ricome, Jaies, etc)	,			
inspect confidence consents, or consents, or consents, or consents.	tatives are authorized to repr dential tax information and to other documents). This autho	resent the taxpayer(s) before the o perform any and all acts that I (ority does not include the power is below. List specific additions o	(we) can perform (for examp to receive or cash refund cl	ole, the authority to sign a necks. If you wish to grant	ny agreements, this authority to your

Revised 05/2015 D-2848 Page 1

Taxpayer's S	SN or FEIN	Taxpayer's Name		
Retention earlier pow by this doo	ver(s) of attorney on file v	wer(s) of attorney By filing th with the Office of Tax Revenue	is power of attorney form, you autom for the same tax matters and years or	atically revoke all periods covered
·	want to revoke a prior power of	of attorney, check here:	*	
Signatures Signature representa	of taxpayer(s) If a tax n tion is requested. If sigr	natter concerns a joint return, k	both husband and wife must sign if jo ner, guardian, tax matters partner, exe nave the authority to execute this forr	int ecutor, receiver, n on behalf of the
Your Signatu	re	Date Ti	itle if other than individual	
Spouse's sign	ature if filing jointly	Date To	elephone number if other than the taxpayer	
If not signed	and dated, this power of att	orney will be returned		
follow a. Am b. AC c. An d. Ak e. Af f. Ar g. Ag h. Stu	ing: nember in good standing fertified Public Accounta Enrolled Agent under the cona fide officer of the ta ull-time employee of the nember of the taxpayer's eneral partner of a partn dent Attorney or CPA-re w, business, or accounti	of the bar of the highest court nt duly qualified to practice in t e requirements of Treasury Dep xpayer's organization. taxpayer, trust, receivership, g immediate family (i.e., spouse ership. eceives permission to represen	oartment Circular # 230.	of his/her status as
Designation- Insert above letter (a-i)	Licensing jurisdiction (state) or other licensing authority (if applicable)	Bar, license, certification, registration, or enrollment number (if applicable)	Signature	Date
1101 4th		DC 20024; or call (202) 72	he Office of Tax and Revenue, Custome 7-4TAX (4829).	er Service Administration

GOVERNMENT OF THE DISTRICT OF COLUMBIA OFFICE OF THE CHIEF FINANCIAL OFFICER OFFICE OF TAX AND REVENUE



2:	REQUEST FOR CERTIFIED COPY
	c 2000 and prior years are no longer available. However, if a return was filed for those years of acknowledgment.
To Be Mailed	☐ For Pick-Up at Customer Service Center
INDIVIDUAL I	NCOME TAX RETURNS:
Tax Period (s):	
Name(s) as show	wn on Return (s)
(1)	(2)
Last	First Middle Last First Middle
	umber: (1) (2)
Current Address: Approximate date	e return was filed:
Current Address: Approximate date Signature:	e return was filed: Daytime Phone Number: ()
Current Address: Approximate date	e return was filed: Daytime Phone Number: ()
Current Address: Approximate date Signature: BUSINESS TAX	Preturn was filed:
Current Address: Approximate date Signature: BUSINESS TAX Tax Period (s):	Daytime Phone Number: ()

CS-001. Rev. 7/12

Official	Type of I.D
Use	Verified By:



Government of the District of Columbia Office of Tax and Revenue

1101 4th St., SW, Floor 2 Washington, D.C. 20002 Tele. (202) 727-4TAX (4829) FAX (202) 442-6550

(Mail or fax bottom portion)

TAX FORMS ORDER SHEET

D-4	Employee Withholding Allowance Certificate
D-4A	Certificate of Nonresidence in the District of Columbia
D-20	Corporation Franchise Tax Booklet Return and Instructions
D-20ES	Declaration of Estimated Tax for Corporations
D-30	Unincorporated Business Franchise Tax Booklet Return and Instructions
D-30ES	Declaration of Estimated Franchise Tax for Unincorporated Businesses
D-40/D-40EZ	Individual Income Tax Booklet Return and Instructions
D-40 Flat	Individual Income Tax Return
D-40EZ Flat	Individual Income Tax Return
Schedule H Flat	Homeowner and Renter Property Tax Credit
Schedule I	Additions to and Subtractions from Federal Adjusted Gross Income
Schedule L	Lower Income Long-Term Homeowner Credit
Schedule N	DC Non-Custodial Parent EITC Claim
Schedule S	Supplemental Information and Dependents
Schedule U	Additional Miscellaneous Credits and Contributions
Schedule UB	Business Credits
D-40B	Nonresident Request for Refund
D-40ES	Declaration of Estimated Income Tax for Individuals
D-41	Fiduciary Income Tax Return
D-41ES	Estimated Payment for Fiduciary Income Tax
D-65	Partnership Return of Income
D-2210	Underpayment of Estimated Income Tax by Individuals
D-2220	Underpayment of Estimated Franchise Tax by Businesses
D-2440	Disability Income Exclusion
D-2441	Child and Dependent Care Credit for Part-Year Residents
D-76	Estate Tax Return
D-76A	Amended Estate Tax Return
FR-127	Extension of Time to File Individual Return
FR-127F	Extension of Time to File Fiduciary Return
FR-128	Extension of Time to File Franchise/Partnership Return
FR-147	Statement of Person Claiming Refund Due a Deceased Taxpayer
FR-164	Application for Exemption
FR-230	Income Tax Withholding – Tables and Instructions
FR-329	Consumer Use Tax on Purchases and Rentals
FR-500	Combined Business Tax Registration Application
FR-500B	Special Event Registration Application
FP-31	Personal Property Tax Return
FP-129A	Extension of Time to File D.C. Personal Property Tax Return or Report

DELIVER TO:	
Name of Individual	Telephone ()
Name of Organization	
Street Address	Room Number
City, State, Zip Code	