

2019

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

D-40

All Individual Income Tax Filers

DCfreefile
fillable forms



DCfreefile



MyTax.DC.gov

Simpler. Faster. Safer.

- You may use **MyTax.DC.gov** to file and pay online for **Forms D-40ES (estimated tax) and FR-127 (extension of time to file)**.
- Payments can be made by **ACH debit, credit/debit card, check or money order (US dollars)**.
- **Direct deposit, U.S. Bank ReliaCard™ or paper check refund options are available.**

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At the time of printing all forms and line references were correct. Any language changes will be announced on the DC website, MyTax.DC.gov



GOVERNMENT OF THE DISTRICT OF COLUMBIA
OFFICE OF THE CHIEF FINANCIAL OFFICER



Jeffrey S. DeWitt
Chief Financial Officer

Dear Taxpayer:

On behalf of the Office of Tax and Revenue (OTR), I am pleased to welcome you to the 2019 tax season. OTR has been hard at work to improve your filing and payment experience. In the coming year, real property taxes will be added to the existing Modernized Integrated Tax System (MITS). This implementation, which will be completed December 2020, will allow taxpayers to submit the Homestead, Senior Deduction and other tax relief applications, file appeals, update account information, and view real-time posting of all real property tax transactions through the online portal, MyTax.DC.gov. This is part of our commitment to better serve you and all District taxpayers.

In our continuing efforts to keep you abreast of tax changes, I would like to bring to your attention a few updates for this filing season:

Forms D-40EZ no longer available:

Form D-40EZ is no longer available. If you used the D-40EZ form in the past, you must now use Form D-40 to file your 2019 taxes.

Individual Taxpayer Health Insurance:

The District has enacted legislation that requires all District residents to have minimal essential health care coverage. Taxpayers must maintain qualifying health coverage, get an exemption by completing the DC Health Care Shared Responsibility Schedule (HSR) form, or pay a tax penalty. This is modeled on the federal individual shared responsibility requirement that was in effect prior to 2019. The District law also requires every "applicable entity that provides minimum essential coverage to at least one District resident during a calendar year" to submit an information return regarding such coverage to OTR. To learn more, please visit the DC Health Link at dchealthlink.com.

To learn more about what's new this filing season, please visit MyTax.DC.gov.

A handwritten signature in black ink that reads "Jeffrey S. DeWitt".

Jeffrey S. DeWitt

New for 2019 Income Tax Returns

- **Filing Deadline**

For Tax Year 2019 the filing deadline is April 15, 2020.

- **Form D-40EZ - Income Tax Return for Single and Joint Filers with No Dependents is retired.**

- **The D-40 form has been revised with new lines and is now three (3) pages.**

- The standard deductions are increasing based on the federal law; beginning January 1, 2019, from:

- o \$12,000 to \$12,200 for single and married/registered domestic partner filers filing separately;
- o \$18,000 to \$18,350 for head of household filers;
- o \$24,000 to \$24,400 for married/registered partners filing jointly and qualifying widow(er) with dependent child(ren) filers;
- o An updated worksheet is available for use by dependent filers.

- o If born before January 2, 1955, or blind, an additional standard deduction of \$1,300 (**\$1,650** if single or head of household) is allowed – use Schedule S, Calculation G-1. The Schedule S, Calculation G-1 must be submitted with your return. When married filing separately, you may take an additional standard deduction for your spouse/registered domestic partner **only** if your spouse/registered domestic partner had no gross income, is not filing a return, and cannot be claimed as a dependent by another taxpayer.
- o State and Local Taxes (SALT). DC does not allow a deduction for state and local income taxes. However, you can deduct your entire state and local real estate taxes. Refer to Calculation D if a part-year resident, or Calculation F if a full-year resident.

- **New Schedules/Forms**

Schedule HSR - DC Health Care Shared Responsibility. If you and your health care shared responsibility family had full coverage the entire year, do not complete this schedule. Complete the oval on Line 3 of the D40 and enter zero (\$0) on Line 28

Schedule QCGI - Eligible Qualified High Technology Company (QHTC) Capital Gain Investment Tax. If more than four (4) investments are needed, visit the website, MyTax.DC.gov and select 'Forms'.

- **Schedule H - Homeowner and Renter Property Tax Credit**

- o The maximum property tax credit increases to \$1,200
- o Schedule H federal Adjusted Gross Income (AGI) eligibility threshold for under age 70 increases to \$55,000
- o Schedule H federal AGI eligibility threshold for age 70 and older increases to \$75,000

- **Schedule ELC - The Early Learning Tax Credit has been renamed the "Keep Child Care Affordable Tax Credit" and the District taxable income thresholds have changed.**

- **FR-127 - New option to select 'living or traveling outside the U.S.'**

- **1099-G - Beginning in January 2020, DC will be offering you a paperless option for receiving the 1099-G income tax refund statement. You will continue to receive your paper statement unless you choose the paperless option. See instructions.**

- **Statutory Resident/Part-Year Resident instructions have been updated. Some taxpayers who have filed in the past as part-year residents may now be required to file as statutory residents. See instructions.**

Reminders

- **DC Earned Income Tax Credit for Childless Workers**

A DC Earned Income Tax Credit Worksheet for Filers Without A Qualifying Child is included in the Individual Income Tax Forms and Instructions Booklet.

- **Receiving your refund via the U.S. Bank ReliaCard Pre-Acquisition Disclosures**

The Consumer Financial Protection Board (CFPB) has published its final Prepaid Account Rule, creating detailed consumer protections for prepaid accounts. For tax year 2019, if you elect to receive a refund using the U.S. Bank ReliaCard™ or use a pre-paid card to make payments, you are required to review and acknowledge the Pre-Acquisition Disclosures (Short and Long Forms) prior to selecting the ReliaCard option as method for receiving a refund or using a pre-paid card when making a payment. Copies of the U.S. Bank ReliaCard Pre-Acquisition Disclosure and the U.S. Bank ReliaCard Fee Schedule can be found on pages 17 and 18.

- **D-40WH, Withholding Tax Schedule**

Unless you are filing electronically, copy the information from your Forms W-2 or 1099's for DC income taxes withheld into the spaces provided. Attach the Forms W-2 or 1099s that show DC tax withheld to Form D-40 and submit the D-40WH with your return.

- An oval was added to the D-40 form (Line 46) if claiming Injured Spouse Allocation. When claiming this allocation, you must attach Form DC-8379 to your return, which can be found in this booklet.

General Instructions

Who must file a DC Income tax return?

You must file a 2019 DC Individual Income Tax Return if:

- You were a District of Columbia (DC) resident in 2019 and were required to file a federal income tax return. (A resident is an individual domiciled in DC at any time during the taxable year);
- You maintained a place of abode in DC for a total of 183 days or more during 2019 even if your permanent home was outside DC;
- You were a part-year resident of DC during 2019 (see instructions for part-year residents, page 21);
- 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 2019.
- If you want to receive a refund of DC taxes withheld or estimated payments made during the year, or if you qualify for and want to receive the following refundable credits:
 - DC Earned Income Credit;
 - Schedule N, Non-Custodial Parent Earned Income Credit;
 - Schedule H, Homeowner and Renter Property Tax Credit; or
 - Schedule ELC, Keep Child Care Affordable Tax Credit.

Note: If you are the spouse/registered domestic partner of someone not required to file, such as a nonresident Congressional appointee, and you meet any of the above requirements, you yourself must file.

You do not need to file a 2019 DC Individual Income tax return if:

- You were not required to file a 2019 federal income tax return;
- You were not considered a resident of DC during 2019;
- 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 2019; or
- You were a justice of the US Supreme Court and were not domiciled in DC during any part of 2019.

Other forms you may have to file

D-40WH Withholding Tax Schedule

Unless you are filing electronically, use this form to report DC taxes withheld. Copy the information from your Forms W-2 and 1099 for DC income taxes withheld into the spaces provided. Attach the Forms W-2 and 1099 to your D-40 return and submit the D-40WH with your return.

Unless you are filing electronically, you must file the D-40WH in order to receive credit for DC taxes withheld.

D-40B Nonresident Request for Refund

If you were not a DC resident and you had DC taxes withheld or you are requesting a refund for erroneous estimated taxes paid, file Form D-40B, Nonresident Request for Refund. Military Spouses must include DD FORM 2058, JAN 2018 to honor your request for refund.

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 trust is \$100 or more for the year.

FR-329 Consumer Use Tax on Purchases and Rentals

You should file this form and pay if during the tax year you paid a total of more than \$400 for merchandise, services, or rentals

subject to DC use tax on which you did not pay sales tax. Visit MyTax.DC.gov for more information.

When are your taxes due?

April 15, 2020 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 a DC 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-127 Extension of Time to File form is due by April 15, 2020. 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. Penalty and interest charges are imposed on any tax found owing and not paid on time with the extension request.
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 reasonably estimated your D-40 tax liability and paid the estimated amount of DC income taxes through withholding or estimated tax payment; and
3. If you do not expect to have a balance due and wish to request an extension for your DC income tax return, you should submit a Form FR-127.

Additional extensions

In addition to the 6-month extension, you may receive an additional 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 15, 2020 deadline before applying for the additional extension of time to file.

Extensions for Members of the US Armed Forces Deployed in a Combat Zone or Contingency Operation.

Deadlines for filing your return, paying your tax, claiming a refund, and taking other actions with OTR is extended for persons in the Armed Forces serving in a Combat Zone or a Contingency Operation. The extension also applies to spouses/registered domestic partners, whether they file jointly or separately on the same return. See IRS Pub. 3, Armed Forces Tax Guide for further information.

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.

- **Modernized e-File (MeF)**

MeF 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 IRS website or the OTR 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.

- **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 payment with your return, use the PO Box 96169 mailing label on your return envelope.

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

Do not include more than one return per envelope.



The DCfreefile fillable forms e-File program provides an online version of the D-40 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 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. To assure yourself the opportunity to e-File for free both your federal and District returns, you must select a product from the DC FreeFile page: <https://otr.cfo.dc.gov/page/dc-freefile-opportunities>

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. U.S. Bank ReliaCard™; or
3. Paper Check.

Be sure to make a selection on the return for the refund option that you want. If you do not select an option, you will receive a paper check. Please review the information about the refund card at the front of the book. Instructions for direct deposit can be found on page 15.

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

ACH Debit

ACH debit is available for taxpayers who have signed up for MyTax.DC.gov. There is no fee. Bank account information is stored within their online account. MyTax.DC.gov can store multiple bank accounts across multiple tax types. Taxpayers give the right to debit the money from their bank account. Ensure you allow 1-3 business days if entering change of banking information.

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 after the due date of the return.

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. Visit MyTax.DC.gov for more information.

Visit the website MyTax.DC.gov for Credit/Debit Card 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.

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 Taxpayer Identification Number (TIN), daytime telephone number, tax year "2019" and "Form D-40" 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. If you pay at the same time you file your return, include the D-40P with your D-40 in the return envelope provided. Use the PO Box 96169 mail label from the back flap of the return envelope.

Dishonored Payments

Make sure your check or electronic payment will clear. You will be charged a \$65 fee if your check or electronic payment is not honored by your financial institution and returned to OTR.

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).

For Estimated Tax Underpayment Interest, Form D-2210, use D-40 Line 42. The form can also be located at MyTax.DC.gov. 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 \$1,000 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 MyTax.DC.gov.

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 return **for the tax year** you are amending. To file an amended return for the current year, complete another 2019 DC Individual Income Tax 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 MyTax.DC.gov or call 202-727-4829 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 a final determination of the federal adjustment. Attach a copy of the adjusted federal return and/or determination letter.

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 2018 or 2019 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 Form FR-147, Statement of Persons Claiming Refund Due a Deceased Taxpayer, found on MyTax.DC.gov and a copy of the death certificate. Do not use the federal form to request a DC refund. Refunds will be issued by paper check only.

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 Form D-40, in general you will need:

- A copy of your completed 2019 federal return, as applicable (Form 1040, 1040-SR, 1040-NR, or 1040-NR-EZ) and any additional forms or worksheets related to the return. You can copy many entries directly from federal forms 1040, 1040-SR, 1040-NR or 1040-NR-EZ. Please be careful since the line numbers may differ from the District Form D-40 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 Federal Employer Identification Number (FEIN), Social Security Number (SSN), Individual Taxpayer Identification Number (ITIN) or Preparer Tax Identification Number (PTIN).

- **An FEIN is a valid number issued by the IRS.** To apply for an 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);
- **An SSN is a valid number issued by the Social Security Administration (SSA) of the United States Government.** To apply for an 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, Individual Taxpayer Identification Number is a valid number issued by the Internal Revenue Service (IRS).** The IRS issues ITINs to individuals who are required to have a U.S. taxpayer identification number but who do not have, and are not eligible to obtain, an SSN from the SSA. ITINs do not serve any purpose other than federal and state tax reporting.
- **A PTIN, Preparer Tax Identification Number is an identification number issued by the IRS** that all paid tax preparers must use on tax returns or claims for refund.

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 if your dependent's or other qualifying person's TINs are missing, incorrect or invalid.

Filling out the form

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

Do not print outside the boxes.

Use black ink.
Print in CAPITAL letters.

ROBERTS

Leave a space between words and between words and numbers.

8 ELM

Write 3s with a rounded top, not a flat top.

3.7 ~~37~~

Write 7s without a middle bar.

● ~~7~~

Fill in ovals completely.
Do not "✓" or "x" ovals.

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

57204.00

Note: Your taxpayer identification number is used for tax purposes only.

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, 1040-SR, 1040-NR, or 1040-NR-EZ, plus any unemployment compensation received on Line a, Income Information on the D-40.

DC income tax withheld (paper filers)

Add the DC income tax withheld as shown on your 2019 federal Forms W-2 and applicable Forms 1099. Attach all copies of your Forms W-2 and 1099 that show DC tax withheld to Form D-40 and submit Form D-40WH with Form D-40. You must file the D-40WH in order to receive credit for DC taxes withheld.

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/registered domestic partners filing separately* or *married/registered domestic partners filing separately on the same return*. If both have income, figure the tax both ways.

Single

You were unmarried, divorced or legally separated as of December 31, 2019, or were widowed prior to January 1, 2019, and did not remarry before January 1, 2020.

Filing Jointly

You were married or have a registered domestic partner and both spouses/registered domestic partners were DC residents as of December 31, 2019, or your spouse/registered domestic partner died

in 2019 and you did not remarry/register in 2019. 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 claiming injured spouse allocation, complete Form DC-8379 and attach it to your D-40 return.

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

Registered domestic partners

To be considered as a registered domestic partner for DC tax purposes, the parties must be registered with the Vital Records Division of the DC Department of Health. If you have registered your relationship you may either file a joint return or file separately on the same return. You may also file separately using the married filing separately 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 Individual 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 4 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 4, 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 or registered domestic partner filing separately

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 Taxpayer Identification Number (TIN) in the Personal Information section.

You will each report only your own income, 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.

You are not allowed to claim credit for child and dependent care or DC Earned Income Tax Credit (EITC) if married filing separately or registered domestic partner filing separately.

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 part-year residents of DC during different periods of 2019;
- 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 by someone else' oval.

Married or registered domestic partner filing separately on the same return

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. 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; and
- Each person's deductions.

NOTE: If you and your spouse/registered domestic partner were part-year residents of DC during different periods of 2019, you cannot file separately on the same return. You must file separate returns.

Injured Spouse Allocation

If either spouse/registered domestic partner has an outstanding liability for prior federal tax, DC income tax, DC unemployment compensation debt, child support, a federal nontax debt, such as a student loan or DC ticket and traffic penalties, 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” allocation. If not filing electronically, fill in the oval on the D-40 form, attach Form DC-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

You may claim this status if you were unmarried or legally separated as of December 31, 2019, 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 2019 may also be able to use this filing status. Use the appropriate section of Schedule S to enter the full name, TIN, relationship and Date of Birth (DOB) of the qualifying person whether that person is a dependent or the qualifying non-dependent. Failure to provide a Schedule S can delay processing. All the information must be complete, i.e., name, TIN, relationship and DOB.

Qualifying Widow(er) with Dependent Child

If your spouse/registered domestic partner died in 2019, you can use married filing jointly as your filing status for 2019 if you other-

wise 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 2017, and you have not remarried, you may be able to use this filing status for 2019.

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 2019 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 2017 or 2018 and you did not remarry by the end of 2019.
- You have a child or stepchild whom you can claim as a dependent. 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

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.

Single individuals, and married/registered domestic partners filing separately are allowed a standard deduction amount of \$12,200. Head of household filers are allowed a standard deduction of \$18,350. 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 \$24,400.

An additional standard deduction amount of \$1,300 (\$1,650 if single or head of household) is allowed if you were born before January 2, 1955, or blind. You must attach the Schedule S with a completed Calculation G-1 to claim the additional standard deduction except if you are a dependent filer.

Dependent filers are allowed a standard deduction in an amount based on a formula. Dependent filers should use the worksheet on page 11

to calculate their standard deduction only if someone can claim you, or your spouse/registered domestic partner if filing jointly, as a dependent.

DC Earned Income Tax Credit (EITC)

You cannot claim the DC EITC if:

- Your filing status is Married or Registered Domestic Partner filing separately (other than filing separately on same return); or
- Your filing status is Dependent claimed by someone else.

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:

- At the end of the filing year, younger than you (or your spouse, if you file a joint return) and younger than 19
- At the end of the filing year, younger than you (or your spouse, if you file a joint return), younger than 24 and a full-time student
- At the end of the filing year, any age and permanently and totally disabled

In addition, they must have lived with you in the US for more than half of 2019, **unless you are claiming the DC EITC** as a non-custodial parent (see instructions for Schedule N).

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

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. Enter the number of EITC qualifying child(ren), on Line 30a of the D-40.

*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.***

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.

Standard Deduction Worksheet for Dependent Filers

Use this worksheet **only** if someone can claim you, or your spouse/registered domestic partner if filing jointly, as a dependent. To find out if someone can claim you as a dependent, see IRS Pub. 501.

1. Check if **You** were born before January 2, 1955
 You are blind
 Spouse/registered domestic partner was born before January 2, 1955
 Spouse/registered domestic partner is blind
- Total number of boxes checked.....1. _____

2. Is your **earned income*** more than \$750?
 Yes. Add \$350 to your earned income.
 No. Enter \$1,100
- } Enter the total. 2. _____

3. Enter the amount shown below for your filing status.
 • Single or married/registered domestic partner filing separately - \$12,200
 • Married/registered domestic partners filing jointly or filing separately on the same return - \$24,400
 • Head of household - \$18,350
- } 3. _____

4. **Standard deduction.**
 a. Enter the **smaller** of Line 2 or Line 3. If born after January 1, 1955, and not blind, **stop here** and enter this amount on Form D-40, Line 17.4a. _____
 b. If born before January 2, 1955, or blind, multiply the number on Line 1 by \$1,300 (\$1,650 if single or head of household).....4b. _____
 c. Add Lines 4a and 4b. Enter the total here and on Form D-40, Line 17.....4c. _____

* **Earned income** includes wages, salaries, tips, professional fees, and other compensation received for personal services you performed. It also includes any taxable scholarship or fellowship grant. Generally, your earned income is the total of the amount(s) you reported on Form D-40, Line 4, **less any amount representing unemployment compensation received.**

Standard Deduction Chart for People who Were Born before January 2, 1955, or Are Blind

Don't use this chart if someone can claim you, or your spouse/registered domestic partner if filing jointly, as a dependent. Instead, use the worksheet above.

- You** were born before January 2, 1955
 You are blind
 Spouse/registered domestic partner was born before January 2, 1955
 Spouse/registered domestic partner is blind
- Enter the total number of boxes checked.....

If your filing status is....	AND the number in the box above is....	THEN your standard deduction is....	If your filing status is....	AND the number in the box above is....	THEN your standard deduction is....
Single	0	\$12,200	Head of Household	0	\$18,350
	1	13,850		1	20,000
	2	15,500		2	21,650
Married/registered domestic partner filing jointly or filing separately on the same return	0	\$24,400	Married filing separately	0	\$12,200
	1	25,700		1	13,500
	2	27,000		2	14,800
	3	28,300		3	16,100
Qualifying widow(er)	4	29,600	4	17,400	
	0	\$24,400			
	1	25,700			
	2	27,000			

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 \$25,477



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 2019? (born after December 31, 1954, and before January 2, 1995). If your spouse died in 2019 or if you are preparing a return for someone who died in 2019, 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 2019 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 2019 tax return, or are you someone else's qualifying child?
 - d. On your federal return are you filing form 2555?
 - e. Is your investment income more than \$3,600? (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?

- Were you or your spouse a nonresident alien for any part of 2019? If NO, continue to Line 5. If YES, see the special rule below.

Special Rule for nonresident Aliens: If you are not married, and were a nonresident 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.

- 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, and who were not members of the clergy or statutory employees)

If you were self-employed at any time in 2019, 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 as a statutory employee, DO 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 or a 1040-SR, 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 or 1040-SR.

- Enter the amount of your wages, salaries, tips, etc.,
(from federal Form 1040 or 1040-SR).....1. _____
- Enter any amount included on Line 1, that is a taxable scholarship or
fellowship grant not reported on a Form W-2..... 2. _____
- Enter any amount included on Line 1, for work performed while an
inmate in a penal institution..... 3. _____
- 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. _____
- Enter any amount included on Line 1, that is a Medicaid waiver
payment you exclude from income.....5. _____
- Add Lines 2, 3, 4, and 5.....6. _____
- Subtract Line 6 from Line 1.....7. _____
- Enter all of your nontaxable combat pay if you elect to include it in
earned income.....8. _____
- 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. 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 \$25,477, STOP, you cannot claim this credit.

1. Enter your earned income from Line 9 of the Earned Income worksheet on the previous page, or from Line 4b of Worksheet B from the IRS instructions.....1. _____

2. If earned income is less than \$6,915, multiply the amount by .0765, otherwise enter \$529. \$529 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.....2. _____

3. Enter your federal adjusted gross income (from Form 1040 or 1040-SR).....3. _____

4. Enter the higher of Line 1 or Line 3.....4. _____

5. If Line 4 is less than \$19,239, 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-40, Line 30e.....5. _____

6. If Line 4 is between \$19,239 and \$25,477 subtract \$19,239 from the amount on Line 4, enter result.....6. _____

7. Multiply the amount on Line 6 by 0.0848, enter result.....7. _____

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-40, Line 30e.....8. _____

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 your contribution cannot exceed your amount to be overpaid and the smallest contribution you can make to any one fund is \$1.00.

DC Statehood Delegation Fund

Enter on Part II Contributions, Line 1 of the Schedule U, and attach to the D-40.

Taxpayer Support for Afterschool Programs for At-Risk Students

Enter on Part II Contributions, Line 2 of the Schedule U, and attach to the D-40.

Anacostia River Cleanup and Protection Fund

Enter on Part II Contributions, 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 81-90 to find the tentative tax on Line 21 of the D-40.

If your taxable income is greater than \$100,000, use Calculation I on page 23 to determine your tentative tax.

Tax paid with extensions

Report tax paid with extension of time to file on Line 35 of the D-40.

Tax paid with original return

Report tax paid with original return if this is an amended return on Line 36 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

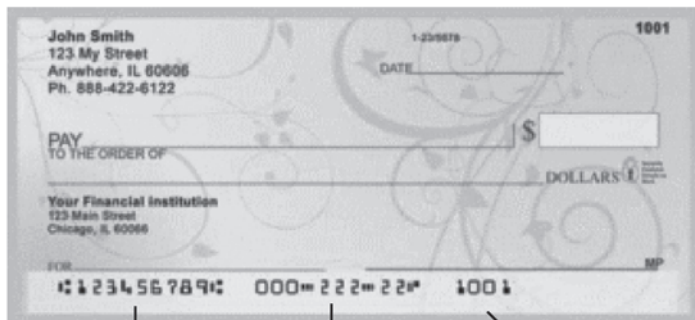
Direct Deposit Facts:

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 on the D-40. 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).



ABA
Routing
Number

Bank
Account
Number

Check Number
DO NOT INCLUDE
CHECK NUMBER

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 18 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: Identity 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. U.S. Bank ReliaCard™

If you want your refund on a **ReliaCard**, select "ReliaCard" under the Refund Options on the D-40 form. Refunds under \$2 or greater than \$4,000 do not qualify for the ReliaCard. Non-qualified refunds will receive a paper check if direct deposit is not selected. To obtain more information, visit <https://www.usbankreliacard.com>.

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 "ReliaCard" and it is beyond the threshold for a ReliaCard;
- taxpayer is a first time filer, even if they select direct deposit;
- there is a gap between filing i.e., filed in 2016 and 2017, but did not file in 2018; or
- the bank account changes from one year to the next; or
- the taxpayer requests a refund on behalf of a deceased taxpayer.

Refund status inquiry

To check the status of your refund visit [MyTax.DC.gov](https://www.mytax.dc.gov). You will need to enter your taxpayer identification number (TIN) and the refund amount you requested on your return.

Third Party Designee

If you want to authorize another person to discuss your 2019 tax return with the OTR, fill-in the oval in the Third Party Designee block on page 3 of the D-40, 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, filling in the third party designee block oval constitutes authorization by both filers.

Filing in 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 15, 2021 (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; please 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.

Using a Paid Preparer

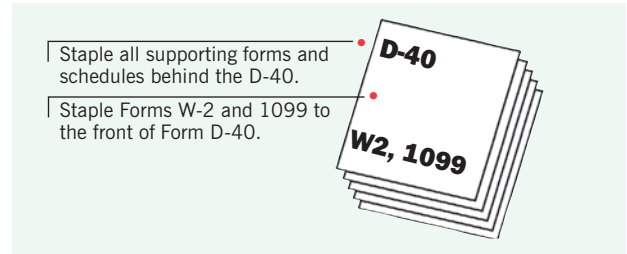
Although you may use a paid preparer, you the taxpayer(s) are responsible for the filing and payment of your tax return. Please review the tax return before you allow a paid preparer to issue a return on your behalf.

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-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 2019 return.** If you are not filing a 2019 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) 727-4829, or visit our Customer Service Administration (CSA) at 1101 4th Street, SW, Washington, DC 20024. You may also visit our website at [MyTax.DC.gov](https://www.mytax.dc.gov) 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 payment with your return, use the PO Box 96169 label on the return envelope. If you are filing a return with no payment due or refund return, 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 documents for D-40 filers

Staple these behind the D-40 return in file order.

- D-40WH Withholding Tax Schedule;
- Schedule S Supplemental Information and Dependents;
- Schedule H, Homeowner and Renter Property Tax Credit;
- Schedule U, Additional Miscellaneous Credits and Contributions;
- Schedule I, Additions to and Subtractions from Federal Adjusted Gross Income;
- Schedule N, DC Non-Custodial Parent EITC Claim;
- Schedule ELC, Keep Child Care Affordable Tax Credit;
- Schedule HSR, DC Health Care Shared Responsibility;
- Schedule QCGI, Eligible QHTC Capital Gain Investment Tax;
- DC-8379, Injured Spouse Allocation;
- D-2210, Underpayment of Estimated Income Tax by Individuals;
- D-40P, Payment Voucher;
- FR-127, Extension of Time to File a DC Income Tax Return;
- 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 Part-Year Residents;
- DC Residential Form, Alternative Fuel Vehicle Conversion and Infrastructure Credits

If any of the above-referenced forms are needed, visit [MyTax.DC.gov](https://www.mytax.dc.gov). Scroll to the "Individuals" section then click on "Current & Prior Year Tax Forms," and select form needed.

You may also contact our Forms Center at (202) 727-4829.

U.S. Bank ReliaCard® Pre-Acquisition Disclosure
 Program Name: District of Columbia Personal Income Tax
 Reference Date: June 2017

You have options as to how you receive your payments, including direct deposit to your bank account or this prepaid card. Ask your agency for available options and select your option.

Monthly fee	Per purchase	ATM withdrawal	Cash reload
\$0	\$0	\$0 in-network \$2.00 out-of-network	N/A

ATM Balance Inquiry (in-network or out-of-network)	\$0 or \$1.00
--	---------------

Customer Service (automated or live agent)	\$0 per call
--	--------------

Inactivity (after 90 days with no transactions)	\$2.00 per month
---	------------------

We charge 4 other types of fees. One of them is:

Card Replacement (standard or expedited delivery)	\$5.00 or \$30.00
---	-------------------

See the accompanying Fee Schedule for free ways to access your funds and balance information.

No overdraft/credit feature.
 Your funds are eligible for FDIC insurance.

For general information about prepaid accounts, visit cfpb.gov/prepaid.
 Find details and conditions for all fees and services inside the card package or call **1-877-528-6408** or visit usbankreliacard.com.

U.S. Bank ReliaCard® Fee Schedule

Program Name: District of Columbia Personal Income Tax

Effective Date: May 2018

All fees	Amount	Details
Get cash		
ATM Withdrawal (in-network)	\$0	This is our fee per withdrawal. "In-network" refers to the U.S. Bank or MoneyPass® or Allpoint® ATM networks. Locations can be found at usbank.com/locations or moneypass.com/atm-locator or allpointnetwork.com .
ATM Withdrawal (out-of-network)	\$2.00	This is our fee per withdrawal. "Out-of-network" refers to all the ATMs outside of the U.S. Bank or MoneyPass or Allpoint ATM networks. You may also be charged a fee by the ATM operator even if you do not complete a transaction.
Teller Cash Withdrawal	\$0	This is our fee for when you withdraw cash off your card from a teller at a bank or credit union that accepts Visa®.
Information		
ATM Balance Inquiry (in-network)	\$0	This is our fee per inquiry. "In-network" refers to the U.S. Bank or MoneyPass or Allpoint ATM networks. Locations can be found at usbank.com/locations or moneypass.com/atm-locator or allpointnetwork.com .
ATM Balance Inquiry (out-of-network)	\$1.00	This is our fee per inquiry. "Out-of-network" refers to all the ATMs outside of the U.S. Bank or MoneyPass or Allpoint ATM networks. You may also be charged a fee by the ATM operator.
Using your card outside the U.S.		
International Transaction	3%	This is our fee which applies when you use your card for purchases at foreign merchants and for cash withdrawals from foreign ATMs and is a percentage of the transaction dollar amount, after any currency conversion. Some merchant and ATM transactions, even if you and/or the merchant or ATM are located in the United States, are considered foreign transactions under the applicable network rules, and we do not control how these merchants, ATMs and transactions are classified for this purpose.
International ATM Withdrawal	\$2.00	This is our fee per withdrawal. You may also be charged a fee by the ATM operator even if you do not complete a transaction.
International ATM Balance Inquiry	\$2.00	This is our fee per inquiry. You may also be charged a fee by the ATM operator.
Other		
Card Replacement	\$5.00	This is our fee per replacement of a lost card mailed to you with standard delivery (up to 10 business days).
Card Replacement Expedited Delivery	\$25.00	This is our fee for expedited delivery (up to 3 business days) charged in addition to any Card Replacement fee.
Inactivity	\$2.00	This is our fee charged each month after you have not completed a transaction using your card for 90 consecutive days.

Your funds are eligible for FDIC insurance. Your funds will be held at U.S. Bank National Association, an FDIC-insured institution, and are insured up to \$250,000 by the FDIC in the event U.S. Bank fails. See fdic.gov/deposit/deposits/prepaid.html for details.

No overdraft/credit feature.

Contact Cardholder Services by calling **1-877-528-6408**, by mail at P.O. Box 551617, Jacksonville, FL 32255 or visit usbankreliacard.com.

For general information about prepaid accounts, visit cfpb.gov/prepaid. If you have a complaint about a prepaid account, call the Consumer Financial Protection Bureau at 1-855-411-2372 or visit cfpb.gov/complaint.

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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 onto your D-40. You may also need to attach DC schedules, or forms to your D-40. Unless instructed otherwise, if you complete any part of any D-40WH, Schedules S, H, U, I, N, ELC, HSR, QCGI, DC-8379, D-2210, D-40P, FR-127, attach it to your return.

D-40WH Withholding Tax Schedule.

Do not file the D-40WH if you are filing electronically. Use this schedule to transfer the information from your W-2 or 1099s. This schedule must be filed in order to receive credit for tax withheld.

DC-8379 Injured Spouse Allocation.

Complete this form if you have indicated on the D-40 that you are claiming an injured spouse allocation. Failure to provide this form at the time of filing may prevent you from receiving a refund.

Schedule ELC, Keep Child Care Affordable Tax Credit.

This schedule allows eligible taxpayers to claim an early learning tax credit for an eligible child under the age of 4 as of 9/30/19 and payments made during the taxable year after August 31st if the eligible child meets age requirements for enrollment in Pre-K according to DC Code §38-273.02(a).

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 2019 federal adjusted gross income (AGI) of your "tax filing unit" cannot exceed \$55,000 (under age 70) or \$75,000 (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, and are eligible for the property tax credit, you must file Schedule H with it. If you are not required to file a D-40, the Schedule H can be filed by itself and mailed to:

Office of Tax and Revenue
1101 4th St SW, FL4
Washington DC 20024

Schedule HSR, DC Health Care Shared Responsibility.

A new DC law requires all residents to have health care coverage, have an exemption or pay a tax penalty on their DC tax return. See instructions for Schedule HSR, DC Health Care Shared Responsibility.

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 100% 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 QCGI, Eligible QHTC Capital Gain Investment Tax.

For tax years beginning after December 31, 2018, the tax on capital gain from the sale or exchange of an investment in a Qualified High Technology Company (QHTC) shall be at the rate of 3% provided the requirements are met as outlined in the instructions for Schedule QCGI, Eligible QHTC Capital Gain Investment Tax.

Schedule S, Supplemental Information and Dependents.

If claiming dependents, use Schedule S to list each dependent's name, taxpayer identification number (TIN), relationship and date of birth (DOB). If filing head of household use Schedule S to report dependents or other qualifying non-dependent person.

Calculation G-1 is used to determine the computation of the standard deduction. You must also use Calculation G-1 to claim the additional standard deduction for yourself or your spouse/registered domestic partner for being blind and/or age 65 or older, unless you are a dependent claimed by someone else.

Calculation J is used to determine the DC tax amount for married or registered domestic partners filing separately on the same return.

List any TINs (EIN/SSN/ITIN) in the applicable space(s) if there is an amount on D-40, Line 11.

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.

Non-refundable credits include:

1. **Out of State tax credit.** 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 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 below, 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.

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.

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).	a	
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 15.	c	
d	Divide Line b by Line c. (Enter the percent.)	d	
e	DC Tax from D-40, Line 23.	e	
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	

2. Alternative Fuel Vehicle Conversion and Infrastructure

Credits. 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.

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 MyTax.DC.gov, by clicking on 'Forms', 'Alternative Fuel Vehicle Infrastructure and Conversion Residential Form' under Individual Income Tax Forms; attach it to the DC-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.

3. 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 who 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.

Refundable credits include:

- a. **DC Non-custodial parent EITC.** See Schedule N.
- b. **Keep Child Care Affordable Tax Credit.** See Schedule ELC

Contributions include:

- 1. DC Statehood Delegation Fund;
- 2. Taxpayer Support for Afterschool Programs For At-Risk Students; and
- 3. Anacostia River Cleanup and Protection Fund

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

Calculation C Standard deduction for part-year DC residents	
a Your standard deduction. See instructions, page 21.	a
b Number of days you lived in DC from D-40, Line 2.	b
c Divide Line b by the number 365 (366 if leap year).	c
d Part-year DC standard deduction. Multiply Line a by Line c, enter here and on D-40, Line 17.	d
Calculation D DC Itemized deductions for part-year DC residents.	
a Total Itemized Deductions from Form 1040 or 1040-SR, Schedule A, Line 17, or Form 1040-NR, Schedule A, Line 8.	a
b Portion of Line a that applies to the time you were a DC resident.	b
c Portion of your state and local tax deduction reported on Form 1040 or 1040-SR, Schedule A, Line 7, or Form 1040-NR, Schedule A, Line 1b that was paid to DC.	c
d Subtract Line c from Line b.	d
e Portion of your state and local real estate tax deduction from Form 1040 or 1040-SR, Schedule A, Line 5b that was paid to DC.	e
f Portion of your other taxes deduction from Form 1040 or 1040-SR, Schedule A, Line 6 that was paid to DC.	f
g DC itemized deductions. Add Lines d, e, and f. If your District Adjusted Gross Income (AGI) is equal to or less than \$200,000 (\$100,000 if married filing separately) stop here and enter this amount on Line 17 of the D-40.	g
Note: If your District AGI is greater than \$200,000 (\$100,000 if married filing separately) continue below to determine the allowable itemized deductions.	
h Enter the sum of Form 1040 or 1040-SR, Schedule A, Lines 4, 9, and 15 allocable to the time you were a DC resident.	h
i Subtract amount on Line h from Line g.	i
j Enter the amount of DC adjusted gross income.	j
k Enter \$200,000 (or \$100,000 if married filing separately).	k
l Subtract amount on Line k from Line j.	l
m Multiply amount on Line l by 5%.	m
n Subtract amount on Line m from amount on Line i (if < 0, enter 0).	n
o Add the amounts on Line h and Line n (enter this on Line 17 of the D-40).	o

Who is a Resident?

You are a resident of DC if:

1. You are an individual domiciled in DC at any time during the taxable year, or
2. You are an individual who maintains a place of abode within DC for an aggregate of 183 days or more during the taxable year, this is also known as a statutory resident.

Domiciliary

An individual is domiciled in DC if his/her permanent home is in DC. Domicile, once established, is presumed to continue until it is shown to have been changed. To establish a change of domicile, a person must demonstrate (1) physical presence, and (2) an intent to abandon the former domicile and remain [in the new one] for an indefinite period of time. An individual can only have one domicile at a time. An individual domiciled in DC is a full-year resident under DC law and must file a full-year individual income tax return, except, if you establish or abandon your DC domicile during the year, then you are a part-year resident and will file a part-year return.

Statutory Resident

An individual is a DC statutory resident, even though not domiciled in DC, if he/she maintained a place of abode in DC for an aggregate of 183 days or more days during the taxable year. The period of residency does not have to be consecutive days. In determining whether an individual has maintained a place of abode in DC for 183 or more days, temporary absences from the DC residence i.e. vacations, hospitalization, business trips, and the like, shall be considered as periods of District residency. A statutory resident is a full-year resident under DC law and, therefore, must file a tax return reporting his/her entire income for the taxable year. A statutory resident may seek credits for individual income taxes paid to other state(s), while concurrently a resident of DC. However, he/she must provide satisfactory proof of payment, including an individual income tax return filed with the other state(s), in order to be eligible for a credit.

Part-Year Resident

An individual is a part-year resident if he/she moves into or out of DC during the year with the intent to establish or abandon his/her domicile in DC. The calculation of tax liability for a part-year resident is prorated based on the income earned in DC, during the period of residency. An individual filing a part-year return must indicate the period of residency on Line 2 of Form D-40. All credits, exemptions and deductions must be prorated according to the time of DC residency.

Part-Year Instructions

If you are a part-year resident for the 2019 tax year, fill in the oval on Line 2 of the D-40, complete the applicable month, day and year in the "from" and "to" boxes. Divide the number of days lived in DC by 365 (366 if leap year). Use that number (standard rounding to four decimal places) and multiply by your credit, additions or subtractions amounts not previously prorated. 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 nonresident; and
- The total income reported on your federal return as adjusted for DC purposes.

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
- Allowable expenses paid or incurred when you resided in DC and when you resided outside of DC. The same allocation is required for credits, and other deductions.

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 2019 tax year, allocate your DC income and deductions attributable to the time of your DC residency. Also prorate your standard deduction and credits by dividing the number of days you were a resident of DC by 365 (366 if leap year) and multiplying the result times the standard deduction/credit amount.

Example: *71 days of residency in DC divided by 365 (366 for leap year) equals 0.1945. A taxpayer who is eligible to claim the maximum EITC For Filers Without a Qualifying Child, the credit amount is \$529. Multiply \$529 by 0.1945 and the result, \$103 is the prorated amount for credit.

January		February		March		
31	+	28	+	12	=	71 Days*

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 20.

Itemized deductions for part-year DC residents. 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 20.

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 24 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 33, 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, 4, 7, 15, 18 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, 1040-SR, 1040-NR or 1040-NR-EZ plus any unemployment compensation received.

All unemployment compensation received in 2019 is taxable.

Line b Business income or loss

If you had gross business/self-employment income from DC sources of more than \$12,000 from an unincorporated business or business activity, see the instructions for D-30, Unincorporated Franchise Tax Return, to see if you are required to file that return. If you are, do not include the income here, but report it on your D-30 return instead.

Calculation F DC Itemized deductions for full-year DC residents

a Total itemized deductions from Form 1040 or 1040-SR, Schedule A, Line 17, or Form 1040-NR, Schedule A, Line 8.	a	
b Total state and local tax deductions. Enter the amount from your Form 1040 or 1040-SR, Schedule A, Line 7, or Form 1040-NR, Schedule A, Line 1b.	b	
c Subtract Line b from Line a.	c	
d State and local real estate tax from Form 1040 or 1040-SR, Schedule A, Line 5b.	d	
e Other taxes from Form 1040 or 1040-SR, Schedule A, Line 6.	e	
f DC itemized deductions. Add Lines c, d, and e. If your District Adjusted Gross Income (AGI) is equal to or less than \$200,000 (\$100,000 if married filing separately) stop here and enter this amount on Line 17 of the D-40 form.	f	
Note: If your District AGI is greater than \$200,000 (\$100,000 if Married filing separately) continue below to determine the allowable itemized deductions		
g Enter the sum of Form 1040 or 1040-SR, Schedule A, Lines 4, 9 and 15	g	
h Subtract amount on Line g from Line f.	h	
i Enter the amount of DC adjusted gross income.	i	
j Enter \$200,000 (\$100,000 if married filing separately).	j	
k Subtract amount on Line j from Line i.	k	
l Multiply amount on Line k by 5%.	l	
m Subtract amount on Line l from amount on Line h (if < 0, enter 0).	m	
n Add the amounts on Lines g and m (enter this on Line 17 of the D-40).	n	

Line c Capital gains or loss

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

If you had farm income or loss, enter on Line c the amount on Line 6 of your 1040 or 1040-SR, or Line 19 of your 1040-NR in the amount entered on Line c. If a loss, fill in the oval.

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, 1040-SR or 1040-NR. If you had gross income, from DC sources, of more than \$12,000 from a unincorporated 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 4 Federal adjusted gross income**

Enter the amount from 1040, 1040-SR, 1040-NR, or 1040-NR-EZ. 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 5 Franchise Tax**

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

Line 6 Other additions from DC Schedule I

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

Line 7 Add Lines 4, 5 and 6

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

Subtractions from DC Income**Line 8 Income received by a part-year resident during period of nonresidence**

For each type of income reported on your federal 1040 or 1040-SR, determine the amount you received when you resided in DC. Subtract that amount from your total income and enter the results on Line 8.

Line 9 Taxable refunds, credits or offset of state and local income tax

Enter the amount from your 1040, 1040-SR or 1040-NR.

Line 10 Taxable amount of social security and tier 1 railroad retirement

Enter the amount from 1040 or 1040-SR.

Line 11 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 or 1040-SR included income reported and taxed on a DC franchise or DC fiduciary return, enter that amount here. Provide the taxpayer identification number (TIN) and your share of the income reported. Refer to General Instructions, page 8 regarding TINs. Include the TIN on page 2 of the Schedule S.

Calculation I/Tax Rate Schedule

If your tentative taxable income from D-40, Line 21 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 6.5% of the excess over \$40,000
Over \$60,000 but not over \$350,000	\$3,500, plus 8.5% of the excess over \$60,000
Over \$350,000 but not over \$1,000,000	\$28,150, plus 8.75% of the excess above \$350,000
Over \$1,000,000	\$85,025, plus 8.95% of the excess above \$1,000,000

Line 12 DC and federal government survivor benefits

If you are an annuitant's survivor and 62 years of age or older as of December 31, 2019, enter the total survivor benefits (do not include Social Security survivor benefits).

Line 13 Other subtractions from DC Schedule I

Line 14 Total subtractions from DC Income

Add Lines 8-13.

DC Adjusted Gross Income

Line 15 DC adjusted gross income

Line 7 minus Line 14.

DC Taxable Income

Line 16 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 17 DC deduction amount

Enter the amount from your federal return.

Standard deduction. Reference page 10 of the General Instructions. Part-year DC residents, reference page 21.

Itemized deductions. Do not copy the amount from your federal return. Use Calculation D if you are a part-year DC resident, or Calculation F if you are a full-year or statutory DC resident. DC does not allow a deduction for state and local income taxes. You can deduct your entire state and local real estate taxes.

If your DC AGI is \$200,000 or less, complete Calculation F on page 22. 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 22.

Line 18 DC tentative taxable income

Subtract Line 17 from Line 15. Enter the result, if a loss, fill in the oval.

Line 19 Net capital gain from sale or exchange of an eligible investment in a DC QHTC

From Schedule QCGI, Line 3. If you have net capital gain income from QHTC investments subject to 3% tax, and positive overall net income subject to tax, complete Schedule QCGI and enter the amount from Line 3. If you do not have positive overall net income subject to tax or net capital gain income from QHTC eligible investments, enter zero. See instructions for Schedule QCGI.

Line 20 DC taxable income

Subtract Line 19 from Line 18. Enter the result, if a loss, fill in the oval.

Line 21 Tentative Tax

If Line 20 is \$100,000 or less, use the tax tables on pages 81-90 to determine your tax. If Line 20 is more than \$100,000, use Calculation I on this page to determine your tax.

Line 22 3% tax on eligible QHTC capital gains income

From Schedule QCGI, Line 4. If you have net taxable income, a portion of which includes net capital gain income on eligible QHTC investments, complete Schedule QCGI and enter the amount from Line 4. Otherwise, enter zero. See instructions for Schedule QCGI.

Line 23 Add Line 21 and 22

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, and deductions. You must combine the separate amounts for each person before making entries on Lines 24-37 of the D-40.

DC tax, credits, and payments

The credits claimed on Lines 24 and 25 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 30d or 30e, 31 and 32 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 24 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 or statutory DC resident, to figure your DC credit, multiply by .32, the amount from federal Form 2441, Line 9. Enter the result on Line 24 of the D-40. (Do not use the DC Form D-2441.)

If you were a part-year resident, see the instructions on page 21.

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 25 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 26 Total non-refundable credits

Add Lines 24 and 25.

Line 27 Subtract Line 26 from Line 23

Subtract Line 26 from Line 23. If Line 23 is less than Line 26, enter zero.

Line 28 DC Health Care Shared Responsibility

If you, your spouse/registered domestic partner (If filing jointly or separately on the same return), and anyone you or your spouse/registered domestic partner can claim as a dependent, had qualifying health coverage (or an exemption) for every month of 2019, enter zero. Otherwise complete Schedule HRS and accompanying worksheets to determine the amount of your Health Care Shared Responsibility Payment. From Schedule HSR, Part IV, Line 17.

Line 29 Total tax

Add Lines 27 and 28.

DC EITC

Refer to General Instructions, page 10.

Line 30a Qualified EITC children

Refer to General Instructions, page 10.

Line 30b Enter your earned income amount.

Line 30c Enter your federal earned income credit (for taxpayers with qualifying children only).

Line 30d Multiply federal EIC x.40 and enter result (for taxpayers with qualifying children only).

Line 30e For filers without qualifying children, use the DC Earned Income Tax Credit Worksheet For Filers Without a Qualifying Child to determine your DC EITC and enter result.

Line 31 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 32 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 33 DC income tax withheld

Add the amount of DC income tax withheld as shown on your applicable 2019 federal Forms W-2 and 1099 that show DC tax withheld.

Line 34 2019 Estimated income tax payments and amount applied from 2018 return

Enter the total of your 2019 DC estimated income tax payments and any amount applied from your 2018 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 35 Tax paid with extension of time to file

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.

Line 36 If this is an amended 2019 return, enter payments made with original 2019 D-40 return.**Line 37 If this is an amended 2019 return, enter refunds requested with original 2019 D-40 return.****Line 38 Total payments and refundable credits**

Add Lines 30d or 30e through Line 36. Do not include Line 37.

Line 39 Tax due

Subtract Line 38 from Line 29.

Line 40 Amount overpaid

Subtract Line 29 from Line 38.

Line 41 Amount to be applied to your 2020 estimated tax**Line 42 Underpayment interest**

Fill in the oval if Form D-2210 is attached.

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 enter the interest amount on Line 42 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 43 Contribution amount from Schedule U, Part II, Line 5

(Cannot exceed refund amount on Line 45.) Reference General Instructions, page 19.

Line 44 Total amount due

Add Lines 39, 42 and 43.

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 43. Make your payment payable to the DC Treasurer and include it with your return.

Line 45 Net Refund

Subtract total of Lines 41, 42 and 43 from Line 40.

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

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

Line 46 Injured spouse allocation

Fill in the oval if either spouse is claiming injured spouse allocation, and attach Form DC-8379 (Injured Spouse Allocation).

Electronic 1099-G

Beginning in January 2020, the Office of Tax and Revenue (OTR) will begin offering you a paperless option for receiving the Form 1099-G income tax refund statement. If you agree to receive your statement electronically, fill in the oval. We will notify you in January 2021 that your statement is available to be viewed and printed from our web portal if you are a registered user. Otherwise, you will continue to receive your paper statement unless you choose the paperless option.

Key website resources

DC Official Code

www.lexisnexis.com/hottopics/dccode/

DC Regulations

www.dcregs.dc.gov/

DC Tax Forms/Publications

MyTax.DC.gov

Mailing Address for Returns

MyTax.DC.gov

Electronic Funds Transfer (EFT) Guide

MyTax.DC.gov

NACHA Guidelines

www.nacha.org/

Social Security Administration

www.ssa.gov/

Internal Revenue Service

www.irs.gov



Important: Print in CAPITAL letters using black ink.

STAPLE OTHER DOCUMENTS IN UPPER LEFT IN BACK

Personal information Fill in if: Filing an amended return. See instructions. OFFICIAL USE ONLY
Vendor ID#0000

Your telephone number

Your taxpayer identification number (TIN) **and** Date of Birth (MMDDYYYY) Spouse's/registered domestic partner's TIN **and** Date of Birth (MMDDYYYY)

Your first name M.I. Last name Fill in if Deceased

Spouse's/registered domestic partner's first name M.I. Last name Fill in if Deceased

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

City State Zip Code +4

STAPLE W-2s AND ANY OTHER WITHHOLDING STATEMENTS HERE

Filing status

- 1 *Fill in only one:*
- Single, Married filing jointly, Married filing separately, Dependent claimed by someone else
 - Married filing separately on same return *Enter combined amounts for Lines 5-45. See instructions.*
 - Registered domestic partners filing jointly or filing separately on same return *Enter combined amounts for Lines 5-45. See instructions.*
 - Head of household *Enter qualifying dependent and/or non-dependent information on Schedule S.*
 - Qualifying widow(er) with dependent child *Enter qualifying dependent information on Schedule S.*

2 *Fill in if you are:* Part-year resident in DC from to *See instructions.*
(MMDDYYYY) (MMDDYYYY)

3 *Fill in ONLY if Full-year health care coverage or exempt, see instructions*

● Complete your federal return first – Enter your dependents' information on DC Schedule S ●

Income Information

Round cents to nearest dollar. If amount is zero, leave line blank; if minus, enter amount and fill in oval.

a Wages, salaries, unemployment compensation and/or tips, <i>see instructions.</i>	Fill in if loss <input type="radio"/>	a \$ <input type="text"/>	.00
b Business income or loss, <i>see instructions.</i>	Fill in if loss <input type="radio"/>	b \$ <input type="text"/>	.00
c Capital gain (or loss).	Fill in if loss <input type="radio"/>	c \$ <input type="text"/>	.00
d Rental real estate, royalties, partnerships, etc.	Fill in if loss <input type="radio"/>	d \$ <input type="text"/>	.00

Computation of DC Gross and Adjusted Gross Income

4 Federal adjusted gross income. From adjusted gross income lines on federal Forms 1040, 1040-SR, 1040-NR or 1040-NR-EZ. Fill in if loss 4 \$ 00

Enter your last name.

Enter your TIN



Additions to DC Income

- 5 Franchise tax deducted on federal forms, see instructions. 5 \$.00
6 Other additions from DC Schedule I, Calculation A, Line 8. 6 \$.00
7 Add Lines 4, 5 and 6. Fill in if loss 7 \$.00

Subtractions from DC Income

- 8 Part year residents, enter income received during period of nonresidence, see instructions. 8 \$.00
9 Taxable refunds, credits or offsets of state and local income tax. 9 \$.00
10 Taxable amount of social security and tier 1 railroad retirement 10 \$.00
11 Income reported and taxed this year on a DC franchise or fiduciary return. 11 \$.00
12 DC and federal government survivor benefits, see instructions. 12 \$.00
13 Other subtractions from DC Schedule I, Calculation B, Line 16. 13 \$.00
14 Total subtractions from DC income, Lines 8-13. 14 \$.00
15 DC adjusted gross income, Line 7 minus Line 14. Fill in if loss 15 \$.00

16 Deduction type. Take the same type as you took on your federal return. Fill in which type: Standard or Itemized See instructions for amount to enter on Line 17.

- 17 DC deduction amount. 17 \$.00
18 Tentative DC taxable income. Subtract Line 17 from Line 15. Fill in if loss 18 \$.00

19 Net capital gain from sale or exchange of an eligible investment in a QHTC, from Schedule QCGI, Line 3. If D-40 Line 18 is zero or less, enter zero here. 19 \$.00

20 DC taxable income. Subtract Line 19 from Line 18. Fill in if loss 20 \$.00

21 Tentative Tax. If Line 20 is \$100,000 or less, use tax tables to find the tax, if more, use Calculation I in instructions. 21 \$.00

22 3% tax on eligible QHTC capital gains income, from Schedule QCGI, Line 4. If D-40 Line 18 is zero or less, enter zero here. 22 \$.00

23 Add Line 21 and Line 22. Fill in if filing separately on same return. Complete Calculation J on Schedule S. 23 \$.00

24 Credit for child and dependent care expenses \$.00 X .32 From federal Form 2441; if part-year DC resident, from Line 5, DC Form 2441 24 \$.00

25 Non-refundable credits from DC Schedule U, Part 1a, Line 7. Attach Schedule U. 25 \$.00

26 Total non-refundable credits. Add Line 24 and Line 25. 26 \$.00

27 Subtract Line 26 from Line 23. If Line 23 is less than Line 26, enter zero. 27 \$.00

28 DC Health Care Shared Responsibility See instructions. If fully covered or fully exempt, enter zero. 28 \$.00

29 Total tax. Add Line 27 and Line 28. 29 \$.00

30 DC Earned Income Tax Credit

30a Enter the number of qualified EITC children. 30b Enter earned income amount 30b \$.00

30c For filers with qualifying children. Enter federal EIC \$.00 X .40 Enter result > 30d \$.00

30e For filers without qualifying children. See instructions for special calculations. Enter result > 30e \$.00

31 Property Tax Credit. From your DC Schedule H; attach a copy. 31 \$.00

Enter your last name.

Enter your TIN



DC tax credit and payments

32	Refundable credits from DC Schedule U, Part 1b, Line 3. <i>Attach Schedule U.</i>	32	\$.00
33	DC income tax withheld <i>shown on Forms W-2 and 1099. Attach these forms.</i>	33	\$.00
34	2019 estimated income tax payments and amount applied from 2018 return.	34	\$.00
35	Tax paid with Form FR-127 Extension of Time to File.	35	\$.00
36	If this is an amended 2019 return, enter payments made with original 2019 D-40 return.	36	\$.00
37	If this is an amended 2019 return, enter refunds requested with original 2019 D-40 return.	37	\$.00
38	Total payments and refundable credits. <i>Add Line 30d or 30e through Line 36. (Do not include Line 37).</i>	38	\$.00
39	Tax Due. <i>Subtract Line 38 from Line 29.</i>	39	\$.00
40	Amount to be overpaid. <i>Subtract Line 29 from Line 38.</i>	40	\$.00
41	Amount to be applied to your 2020 estimated tax.	41	\$.00
42	Underpayment Interest. Fill in the oval and attach Form D-2210. <input type="radio"/>	42	\$.00
43	Contribution amount from Schedule U, Part II, Line 5. (Cannot exceed refund amount on Line 40)	43	\$.00
44	Total Amount Due. <i>Add Lines 39, 42 and 43.</i>	44	\$.00
45	Net Refund. <i>Subtract total of Lines 41, 42 and 43 from Line 40.</i>	45	\$.00

Will this refund go to an account outside the U.S.? Yes No See instructions.

46 Fill in if either spouse is claiming injured spouse protection. You **must** attach Form DC-8379.

Refund Options: For information on the tax refund card and program limitations, see instructions or visit our website MyTax.DC.gov.

Mark **one** refund choice: Direct deposit **or** Reliacard (See instructions) **or** Paper check

Direct Deposit. To have your refund deposited to your checking **or** savings account, fill in oval and enter bank routing and account numbers. See instructions.

Routing Number

Account Number

Fill in if you agree to receive your 1099-G Income Tax refund statement electronically (see instructions).

Third party designee To authorize another person to discuss this return with OTR, fill in here and enter the name and phone number of that person. See instructions.

Designee's name

Phone number

Signature Under penalties of law, I declare that I have examined this return and, to the best of my knowledge, it is correct. Declaration of paid preparer is based on information available to the preparer.

Your signature	Date	Preparer's signature	Date
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Spouse's/registered domestic partner's signature if filing jointly or separately on same return	Date	Preparer's Tax Identification Number (PTIN)	PTIN telephone number
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>



Important: Print in CAPITAL letters using black ink.

STAPLE OTHER DOCUMENTS IN UPPER LEFT IN BACK

Personal information

Your telephone number

Fill in if Filing an amended return. See instructions.

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Your taxpayer identification number (TIN) and Date of Birth (MMDDYYYY) Spouse's/registered domestic partner's TIN and Date of Birth (MMDDYYYY)

Your first name M.I. Last name Fill in if Deceased

Spouse's/registered domestic partner's first name M.I. Last name Fill in if Deceased

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

City State Zip Code +4

STAPLE W-2s AND ANY OTHER WITHHOLDING STATEMENTS HERE

Filing status

- 1 Fill in only one: Single, Married filing jointly, Married filing separately, Dependent claimed by someone else, Married filing separately on same return, Registered domestic partners filing jointly or filing separately on same return, Head of household, Qualifying widow(er) with dependent child

2 Fill in if you are: Part-year resident in DC from (MMDDYYYY) to (MMDDYYYY) See instructions.

3 Fill in ONLY if Full-year health care coverage or exempt, see instructions

Complete your federal return first - Enter your dependents' information on DC Schedule S

Income Information

Round cents to nearest dollar. If amount is zero, leave line blank; if minus, enter amount and fill in oval.

Table with 4 rows (a-d) for income types and 4 columns for amount entry.

Computation of DC Gross and Adjusted Gross Income

4 Federal adjusted gross income. From adjusted gross income lines on federal Forms 1040, 1040-SR, 1040-NR or 1040-NR-EZ. Fill in if loss 4 \$ 00

Enter your last name.

Enter your TIN



32	Refundable credits from DC Schedule U, Part 1b, Line 3. <i>Attach Schedule U.</i>	32	\$.00
33	DC income tax withheld <i>shown on Forms W-2 and 1099. Attach these forms.</i>	33	\$.00
34	2019 estimated income tax payments and amount applied from 2018 return.	34	\$.00
35	Tax paid with Form FR-127 Extension of Time to File.	35	\$.00
36	If this is an amended 2019 return, enter payments made with original 2019 D-40 return.	36	\$.00
37	If this is an amended 2019 return, enter refunds requested with original 2019 D-40 return.	37	\$.00
38	Total payments and refundable credits. <i>Add Line 30d or 30e through Line 36. (Do not include Line 37).</i>	38	\$.00
39	Tax Due. <i>Subtract Line 38 from Line 29.</i>	39	\$.00
40	Amount to be overpaid. <i>Subtract Line 29 from Line 38.</i>	40	\$.00
41	Amount to be applied to your 2020 estimated tax.	41	\$.00
42	Underpayment Interest. Fill in the oval and attach Form D-2210. <input type="radio"/>	42	\$.00
43	Contribution amount from Schedule U, Part II, Line 5. (Cannot exceed refund amount on Line 40)	43	\$.00
44	Total Amount Due. <i>Add Lines 39, 42 and 43.</i>	44	\$.00
45	Net Refund. <i>Subtract total of Lines 41, 42 and 43 from Line 40.</i>	45	\$.00
	Will this refund go to an account outside the U.S.? Yes <input type="radio"/> No <input type="radio"/> <i>See instructions.</i>																			
46	Fill in <input type="radio"/> if either spouse is claiming injured spouse protection. You must attach Form DC-8379.																			

Refund Options: For information on the tax refund card and program limitations, see instructions or visit our website MyTax.DC.gov.

Mark **one** refund choice: Direct deposit **or** Reliacard (See instructions) **or** Paper check

Direct Deposit. *To have your refund deposited to your checking or savings account, fill in oval and enter bank routing and account numbers. See instructions.*

Routing Number

Account Number

Fill in if you agree to receive your 1099-G Income Tax refund statement electronically (see instructions).

Third party designee *To authorize another person to discuss this return with OTR, fill in here and enter the name and phone number of that person. See instructions.*

Designee's name

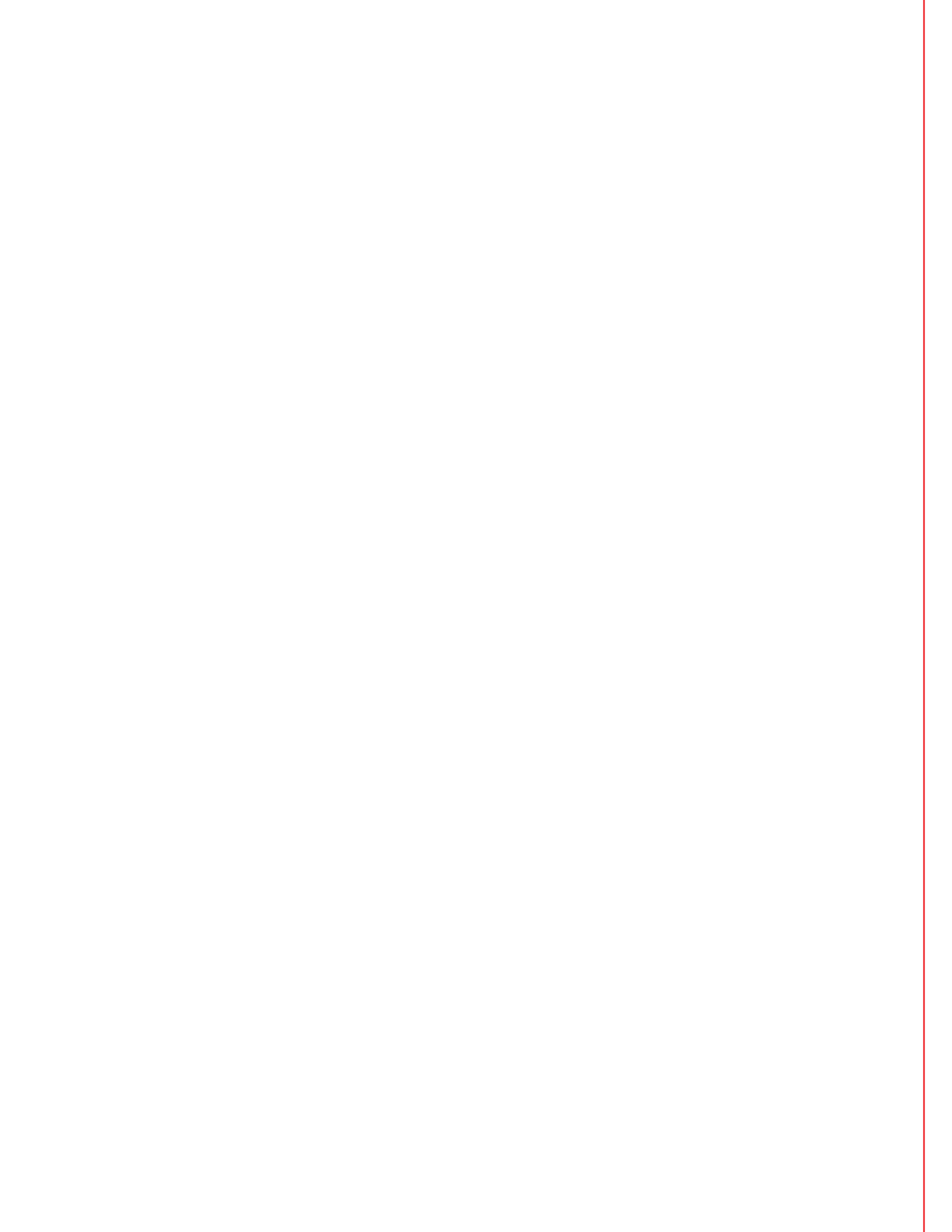
Phone number

Signature Under penalties of law, I declare that I have examined this return and, to the best of my knowledge, it is correct. Declaration of paid preparer is based on information available to the preparer.

Your signature _____ Date _____ Preparer's signature _____ Date _____

Spouse's/registered domestic partner's signature if filing jointly or separately on same return _____ Date _____ Preparer's Tax Identification Number (PTIN) _____ PTIN telephone number _____

DC tax credit and payments





Enter DC withholding information below.
Attach Forms W-2 and/or 1099 to Form D-40

THIS FORM MUST BE FILED IN ORDER TO RECEIVE CREDIT FOR TAX WITHHELD

Important: Print in CAPITAL letters using black ink.

OFFICIAL USE ONLY
Vendor ID#0000

Primary last name shown on Form D-40	Taxpayer Identification Number (TIN)
--------------------------------------	--------------------------------------

1 A - Employer or Payor Information	B - Employee or Taxpayer Information	C - DC Tax Withheld
Employer ID or Payor ID from W-2 or 1099 <input type="text"/> Employer or Payor Name <input type="text"/> Address <input type="text"/> City <input type="text"/> State Zip Code + 4 <input type="text"/>	Name <input type="text"/> Taxpayer Identification Number <input type="text"/> Income Subject to DC Withholding \$ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 00 from Box #1 of W-2 or the appropriate box from 1099	DC Withholding from Box #17 of W-2 or the appropriate box from 1099 \$ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 00 Check the appropriate box <input type="checkbox"/> W-2 <input type="checkbox"/> 1099 Enter State Abbreviation <input type="text"/> from Box #15 of W-2 or the appropriate box from 1099 <p style="text-align:center">Enter DC Withholding Only</p>
Employer ID or Payor ID from W-2 or 1099 <input type="text"/> Employer or Payor Name <input type="text"/> Address <input type="text"/> City <input type="text"/> State Zip Code + 4 <input type="text"/>	Name <input type="text"/> Taxpayer Identification Number <input type="text"/> Income Subject to DC Withholding \$ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 00 from Box #1 of W-2 or the appropriate box from 1099	DC Withholding from Box #17 of W-2 or the appropriate box from 1099 \$ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 00 Check the appropriate box <input type="checkbox"/> W-2 <input type="checkbox"/> 1099 Enter State Abbreviation <input type="text"/> from Box #15 of W-2 or the appropriate box from 1099 <p style="text-align:center">Enter DC Withholding Only</p>
Employer ID or Payor ID from W-2 or 1099 <input type="text"/> Employer or Payor Name <input type="text"/> Address <input type="text"/> City <input type="text"/> State Zip Code + 4 <input type="text"/>	Name <input type="text"/> Taxpayer Identification Number <input type="text"/> Income Subject to DC Withholding \$ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 00 from Box #1 of W-2 or the appropriate box from 1099	DC Withholding from Box #17 of W-2 or the appropriate box from 1099 \$ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 00 Check the appropriate box <input type="checkbox"/> W-2 <input type="checkbox"/> 1099 Enter State Abbreviation <input type="text"/> from Box #15 of W-2 or the appropriate box from 1099 <p style="text-align:center">Enter DC Withholding Only</p>

Total DC tax withheld from column C above..... \$ **00**

If you have DC withholding on multiple pages, add the totals together and enter the GRAND total on Form D-40, Line 33.



Last name and TIN

4 A - Employer or Payor Information	B - Employee or Taxpayer Information	C - DC Tax Withheld
Employer ID or Payor ID from W-2 or 1099 <input type="text"/> Employer or Payor Name <input type="text"/> Address <input type="text"/> City <input type="text"/> State Zip Code + 4 <input type="text"/>	Name <input type="text"/> Taxpayer Identification Number <input type="text"/> Income Subject to DC Withholding \$ <input type="text"/> 00 from Box #1 of W-2 or the appropriate box from 1099	DC Withholding from Box #17 of W-2 or the appropriate box from 1099 \$ <input type="text"/> 00 Check the appropriate box <input type="checkbox"/> W-2 <input type="checkbox"/> 1099 Enter State Abbreviation <input type="text"/> from Box #15 of W-2 or the appropriate box from 1099 Enter DC Withholding Only

5 A - Employer or Payor Information	B - Employee or Taxpayer Information	C - DC Tax Withheld
Employer ID or Payor ID from W-2 or 1099 <input type="text"/> Employer or Payor Name <input type="text"/> Address <input type="text"/> City <input type="text"/> State Zip Code + 4 <input type="text"/>	Name <input type="text"/> Taxpayer Identification Number <input type="text"/> Income Subject to DC Withholding \$ <input type="text"/> 00 from Box #1 of W-2 or the appropriate box from 1099	DC Withholding from Box #17 of W-2 or the appropriate box from 1099 \$ <input type="text"/> 00 Check the appropriate box <input type="checkbox"/> W-2 <input type="checkbox"/> 1099 Enter State Abbreviation <input type="text"/> from Box #15 of W-2 or the appropriate box from 1099 Enter DC Withholding Only

6 A - Employer or Payor Information	B - Employee or Taxpayer Information	C - DC Tax Withheld
Employer ID or Payor ID from W-2 or 1099 <input type="text"/> Employer or Payor Name <input type="text"/> Address <input type="text"/> City <input type="text"/> State Zip Code + 4 <input type="text"/>	Name <input type="text"/> Taxpayer Identification Number <input type="text"/> Income Subject to DC Withholding \$ <input type="text"/> 00 from Box #1 of W-2 or the appropriate box from 1099	DC Withholding from Box #17 of W-2 or the appropriate box from 1099 \$ <input type="text"/> 00 Check the appropriate box <input type="checkbox"/> W-2 <input type="checkbox"/> 1099 Enter State Abbreviation <input type="text"/> from Box #15 of W-2 or the appropriate box from 1099 Enter DC Withholding Only

Total DC tax withheld from column C above..... \$ **00**

If you have DC withholding on multiple pages, add the totals together and enter the GRAND total on Form D-40, Line 33.



Unless instructed otherwise – If you fill in any part 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 [] Enter your TIN []

Dependents If you have more than 8 dependents, list them on an attachment.

Grid for listing dependents with fields for First name, M.I., Last Name, Taxpayer identification number, Relationship, and Date of Birth (MMDDYYYY).

Head of household filers or qualifying widow(er) section with fields for TIN of qualifying non-dependent person, Date of Birth of qualifying non-dependent person, and First name of qualifying non-dependent person.





Last name and TIN []

Calculation G-1 Computation of Standard Deduction Calculation G-1 must be completed and submitted with the return except for dependent filers

Form for Calculation G-1 with lines a through i and corresponding dollar amounts.

Calculation J Tax computation for married or registered domestic partners filing separately on the same DC return.

Form for Calculation J with columns for 'You' and 'Your spouse/registered domestic partner' and lines a through m.

List TINs associated with Income reported and taxed on Franchise and Fiduciary Returns for the amount listed on D-40, Line 11.

Form for listing TINs with lines a through i and corresponding input boxes.



Unless instructed otherwise – If you fill in any part 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 [] Enter your TIN []

Dependents If you have more than 8 dependents, list them on an attachment.

Grid for listing dependents with fields for First name, M.I., Last Name, Taxpayer identification number, Relationship, and Date of Birth (MMDDYYYY).

Head of household filers or qualifying widow(er) section with fields for TIN of qualifying non-dependent person, Date of Birth of qualifying non-dependent person, and First name of qualifying non-dependent person.



Last name and TIN

Calculation G-1 Computation of Standard Deduction *Calculation G-1 must be completed and submitted with the return except for dependent filers*

a	Basic standard deduction amount. See instructions.	a	\$	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	.00
b	Enter 1 if you are age 65 or over	b		<input type="text"/>						
c	Enter 1 if you are blind	c		<input type="text"/>						
d	Enter 1 if married or registered domestic partner filing jointly or filing separately on same return and your spouse or registered domestic partner is 65 or over	d		<input type="text"/>						
e	Enter 1 if married or registered domestic partner filing jointly or filing separately on same return and your spouse or registered domestic partner is blind	e		<input type="text"/>						
f	Total number of additions to standard deductions. Add Lines b through e.	f		<input type="text"/>						
g	Additional standard deduction amount. Multiply \$1,300 (\$1,650 if single or head of household) by number on Line f.	g	\$	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	.00
h	Total standard deduction. Add Lines a and g, enter here and on D-40, Line 17.	h	\$	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	.00
i	Total number of dependents	i		<input type="text"/>	<input type="text"/>					

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 m.

You

Your spouse/registered domestic partner

		You	Your spouse/registered domestic partner
a	Federal adjusted gross income. Fill in if loss <input type="radio"/>	a \$ <input type="text"/> 00	<input type="radio"/> \$ <input type="text"/> 00
	<i>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.</i>		
b	Total additions to federal adjusted gross income. Enter each person's portion of additions entered on D-40, Lines 5 and 6.	b \$ <input type="text"/> 00	\$ <input type="text"/> 00
c	Add Lines a and b. Fill in if loss <input type="radio"/>	c \$ <input type="text"/> 00	<input type="radio"/> \$ <input type="text"/> 00
d	Total subtractions from federal adjusted gross income. Enter each person's portion of subtractions entered on D-40, Line 14.	d \$ <input type="text"/> 00	\$ <input type="text"/> 00
e	DC adjusted gross income. Subtract Line d from Line c. Fill in if loss <input type="radio"/>	e \$ <input type="text"/> 00	<input type="radio"/> \$ <input type="text"/> 00
f	Deduction amount. Enter each person's portion of the amount entered on D-40, Line 17. (You may allocate this amount as you wish.)	f \$ <input type="text"/> 00	\$ <input type="text"/> 00
g	Tentative taxable income. Subtract Line f from Line e. Fill in if loss <input type="radio"/>	g \$ <input type="text"/> 00	<input type="radio"/> \$ <input type="text"/> 00
h	Net capital gain from sale or exchange of an eligible investment in a QHTC, from D-40, Line 19.	h \$ <input type="text"/> 00	\$ <input type="text"/> 00
i	DC taxable income. Subtract Line h from Line g. Fill in if loss <input type="radio"/>	i \$ <input type="text"/> 00	<input type="radio"/> \$ <input type="text"/> 00
j	Tentative tax. If Line i is \$100,000 or less, use tax tables. If more than \$100,000, use Calculation i in instructions.	j \$ <input type="text"/> 00	\$ <input type="text"/> 00
k	3% tax on eligible QHTC capital gains income, from D-40, Line 22.	k \$ <input type="text"/> 00	\$ <input type="text"/> 00
l	Add Line J and Line K	l \$ <input type="text"/> 00	\$ <input type="text"/> 00
m	Add the amounts on Line l, enter here and on D-40, Line 23	m \$ <input type="text"/> 00	\$ <input type="text"/> 00 <i>Total tax</i>

List TINs associated with Income reported and taxed on Franchise and Fiduciary Returns for the amount listed on D-40, Line 11.

a	<input type="text"/>	b	<input type="text"/>	c	<input type="text"/>
d	<input type="text"/>	e	<input type="text"/>	f	<input type="text"/>
g	<input type="text"/>	h	<input type="text"/>	i	<input type="text"/>

2019 SCHEDULE H Homeowner and Renter Property Tax Credit



Important: Read eligibility requirements before completing.
Print in CAPITAL letters using black ink.

OFFICIAL USE ONLY Vendor ID#0000

Personal information

Your daytime telephone number _____

Your taxpayer identification number (TIN) _____ and Date of Birth (MMDDYYYY) _____ Spouse's/registered domestic partner's TIN _____ and Date of Birth (MMDDYYYY) _____

Your first name _____ M.I. _____ Last name _____

Spouse's/registered domestic partner's first name _____ M.I. _____ Last name _____

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

City _____ State _____ Zip Code +4 _____

Address of DC property (number, street and suite/apartment number if applicable) for which you are claiming the credit if different from above _____

Type of property for which you are claiming the credit. Fill in only one: House Apartment Rooming house Condominium

◆ **Complete Section A or Section B, whichever applies.** ◆ Do not claim this credit for an exempt property owned by a government, a house of worship or a non-profit organization

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

Section A Credit claim based on rent paid

1	Federal adjusted gross income of the tax filing unit From Line 32 , on page 2 (see instructions)	\$.00	
2	Reserved														
3	Rent paid by you on the property in 2019	\$.00	x.20 =	\$.00
4	Property tax credit. Use the "Computing Your Property Tax Credit" worksheet.	\$								\$.00
5	Rent supplements received in 2019 by you or your landlord on your behalf.	\$								\$.00
6	Property tax credit. Subtract Line 5 from Line 4, D-40 filers enter here and on Line 31 of the D-40.	\$								\$.00

7 Landlord's name _____

Landlord's address (number, street and suite/apartment number if applicable) _____ Apartment number _____

Landlord's telephone number _____

City _____ State _____ Zip Code +4 _____

Section B Credit claim based on real property tax paid

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

8	Federal adjusted gross income of the tax filing unit (see instructions). From Line 32 on page 2.	\$.00
9	DC real property tax paid by you on the property in 2019.	\$								\$.00
10	Property tax credit Use the "Computing Your Property Tax Credit" worksheet. Enter here and on Line 31 of the D-40.	\$								\$.00



[Empty box for Last name and TIN]

For STANDALONE FILERS only, please complete the following "Refund Options" information Will this refund go to an account outside of the U.S.? Yes No

Refund Options: For information on the tax refund card and program limitations, see instructions or visit our website MyTax.DC.gov.

Mark one refund choice: Direct deposit or ReliaCard (See instructions) or Paper check

Direct Deposit. To have your refund deposited to your checking or savings account, fill in oval and enter bank routing and account numbers. See instructions.

Routing Number [] [] [] [] [] [] [] [] [] [] Account Number []

Signature under penalty of law, I declare that I have examined this return and, to the best of my knowledge, it is correct. Declaration of paid preparer is based on information available to the preparer.

Your signature _____ Date _____ Preparer's signature _____ Date _____

Spouse's/domestic partner's signature if filing jointly or separately on same return. _____ Date _____ Preparer's Tax Identification Number (PTIN) _____ PTIN telephone number _____

FOR STANDALONE FILERS ONLY - WORKSHEET TO DETERMINE FEDERAL ADJUSTED GROSS INCOME

This Worksheet is for use by standalone filers only. If you are filing a D-40 Return, do not complete this worksheet.

COLUMN A (YOU) COLUMN B (SPOUSE/DOMESTIC PARTNER)

Table with columns for INCOME and ADJUSTMENTS, and sub-columns for COLUMN A (YOU) and COLUMN B (SPOUSE/DOMESTIC PARTNER). Rows include items like Wages, salaries, tips, etc.; Taxable interest; Ordinary Dividends; Business Income; Capital gain; IRA distributions; Pensions and annuities; Rental real estate; Farm income; Unemployment compensation; Social security benefits; Other taxable income; Educator expenses; Health savings account deduction; Moving expenses; Deductible part of self-employment tax; Self-employed SEP, SIMPLE, and qualified plans; Self-employed health insurance deduction; Penalty on early withdrawal of savings; IRA deduction; Student loan interest deduction; Subtract Line 30 from Line 16; Total federal adjusted gross income.

WORKSHEET TO COMPUTE YOUR PROPERTY TAX CREDIT

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. The maximum credit amount is \$1200.

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 exceeds 3.0% of the adjusted gross income

\$25,000 - \$51,999

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

\$52,000 - \$55,000

The amount of property tax that exceeds 5.0% of the adjusted gross income

If you are age 70 or older and the

Federal AGI of your tax filing unit

Percentage -

is: \$0 - \$75,000

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

1. Enter federal AGI (Line 1, Section A, Schedule H or Line 8, Section B, Schedule H).

1. _____

2. Enter property taxes paid in 2019 or 20% of rent paid in 2019.

2. _____

3. Multiply Line 1 by the applicable percentage (.03), (.04) or (.05).

3. _____

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

4. _____

5. Property Tax Credit Limit.

5. \$1,200.00

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

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, 2019;
- 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 2019;
- Your 2019 federal adjusted gross income (AGI), was \$55,000 or less (\$75,000 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, 2019.

Additional Information:

- A Homeowner and Renter Property Tax Credit cannot be claimed on behalf of a taxpayer who died on or before December 31, 2019.
- Only one claimant per "tax filing unit" can claim the property tax credit.
- 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.

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 an individual income tax return. A married couple/ registered domestic partners residing in the same household are part of the same tax filing unit whether filing jointly, separately on the same return, or separately on separate returns.

D-40 Filers

If you are required to file a DC individual income tax return (D-40), attach Schedule H to your D-40 return. Use the federal adjusted gross income amount from Line 4 of your D-40 (and the AGI of your spouse/registered domestic partner if filing separately on separate returns).

Standalone Filers

If you are not required to file a DC individual income tax return because you are below the income tax filing threshold, you can file Schedule H as a standalone return. You may use the "Worksheet To Determine Federal Adjusted Income" on page 2 of Schedule H to calculate the total federal adjusted gross income for yourself, and, if applicable, your spouse or registered domestic partner.

When is Schedule H due?

The Schedule H is due by April 15, 2020.

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. Send it to:

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

If you file Schedule H as a standalone return, send it to:

Office of Tax and Revenue
1101 4th Street, SW, FL 4
Washington, DC 20024

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

If you filed a D-40, enter the amount, you and if applicable, your spouse or registered domestic partner reported on Line 4 of your D-40. If you are a standalone filer, you must compute your federal adjusted gross income and enter that amount on Line 1 of Schedule H. For assistance in computing your federal adjusted gross income you may complete the "Worksheet To Determine Federal Adjusted Gross Income".

If the sum of your federal AGI is more than \$55,000, (\$75,000 if you are age 70 or older) do not claim the property tax credit. You are not eligible.

If you are a standalone filer it is important that you list the name, taxpayer identification number, and date of birth on page 1 of Schedule H of the persons whose income is included in the total federal AGI of your tax filing unit.

Line 2 RESERVED

Line 3 Rent paid on the property in 2019

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 3, calculate your property tax credit amount using the "Computing Your Property Tax Credit Worksheet".

Line 5 Rent supplements received in 2019 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 \$1,200 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

If you filed a D-40, enter the amount, you, and if applicable, your spouse or registered domestic partner reported on Line 4 of your D-40. If you are a standalone filer, you must compute your federal adjusted gross income and enter that amount on Line 1 of Schedule H. For assistance in computing your federal adjusted gross income you may complete the "Worksheet To Determine Federal Adjusted Gross Income".

If the sum of your federal AGI is more than \$55,000 (\$75,000 if you are age 70 or older) do not claim the property tax credit. You are not eligible.

If you are a standalone filer, it is important that you list the name, taxpayer identification number, and date of birth on page 1 of the persons whose income is included in the total federal AGI of your tax filing unit.

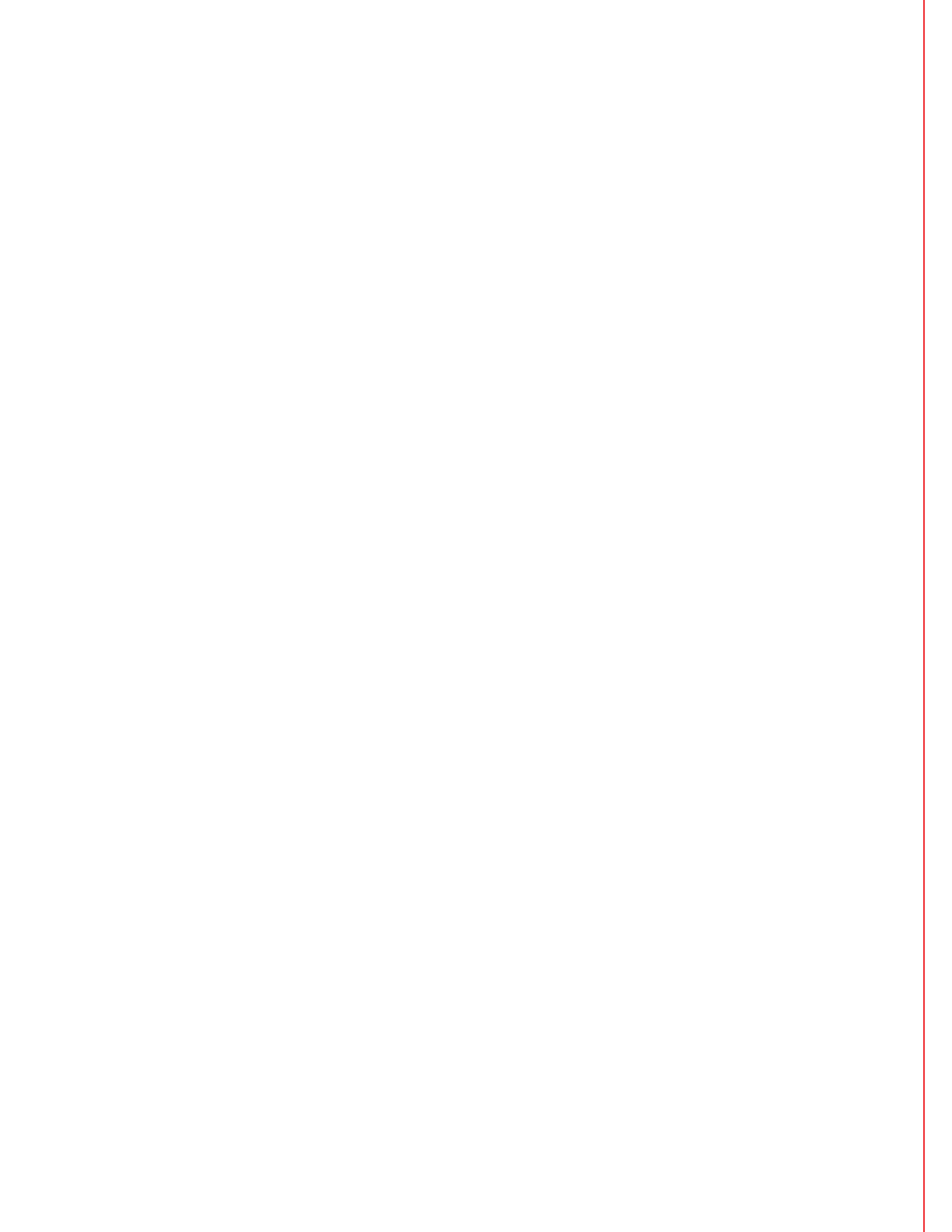
Line 9 DC real property tax paid by you in 2019

Enter the amount of DC real property tax you paid on the property in 2019 (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 the deferral occurred under the provisions of DC Code §§47-845, 47-845.02, and 47-845.03. 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, calculate your property tax credit amount using the "Worksheet to Compute Your Property Tax Credit".



SCHEDULE U Additional Miscellaneous Credits and Contributions



OFFICIAL USE ONLY
Vendor ID#0000

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).

Enter your last name Taxpayer Identification Number (TIN)

Part I Credits

a. Non-refundable Credits

1 Enter state income tax credit. List additional states on a separate sheet, attach it to this Schedule.
(Enter total of all state tax credits on Line 2 below.)

State (a) \$.00 (b) \$.00
State (c) \$.00 (d) \$.00

2 Total of Line 1 state tax credits and any additional tax credits from the attachments. 2 \$.00

3 Enter alternative fuel credits, see instructions. \$.00
3(a) Alternative fuel infrastructure - private residence. # of stations \$.00
3(b) Alternative fuel infrastructure - public use. # of stations \$.00
3(c) Alternative fuel vehicle conversion. # of vehicles \$.00

4 Total of Line 3 alternative fuel credits. Add Lines 3(a) - 3(c) only and enter here. 4 \$.00

5 DC Government Employee first-time homebuyer credit. See instructions. 5 \$.00

6 RESERVED 6 \$.00

7 Total your non-refundable credits, enter here and on Form D-40, Line 25. 7 \$.00

b. Refundable Credits

1 DC Non-custodial parent EITC. See Schedule N. 1 \$.00

2 Keep Child Care Affordable Tax Credit. See Schedule ELC. 2 \$.00

3 Total your refundable credits, enter here and on Form D-40, Line 32. 3 \$.00

Part II Contributions (The minimum contribution is \$1.00.)

1 DC Statehood Delegation Fund. 1 \$.00

2 Taxpayer Support for Afterschool Programs for At-Risk Students. 2 \$.00

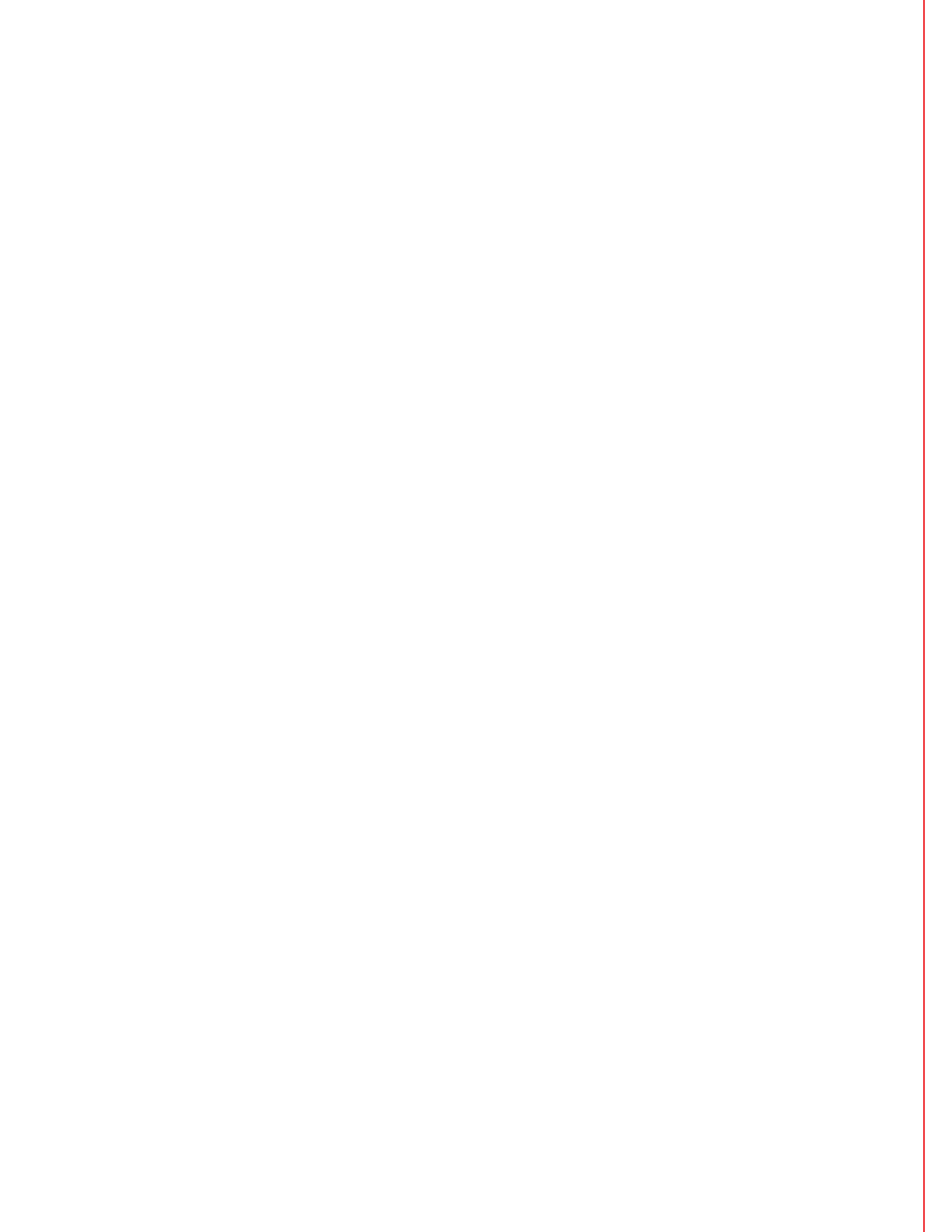
3 Anacostia River Cleanup and Protection Fund. 3 \$.00

4 RESERVED 4 \$.00

5 Total your contributions, enter here and on Form D-40, Line 43. 5 \$.00

If you are not due a refund and do not owe tax, you may still make contributions. Total your contributions and enter on Form D-40, Line 43
If you owe tax, make the payment plus any contributions, payable to the DC Treasurer and mail it with your return.

Attach this schedule to your D-40 Return.



2019 SCHEDULE I Additions to and Subtractions from Federal Adjusted Gross Income



Important: Print in CAPITAL letters using black ink. Attach to your D-40.

Last name	Taxpayer Identification Number (TIN)	OFFICIAL USE ONLY Vendor ID#0000
<input type="text"/>	<input type="text"/>	

Calculation A Additions to federal adjusted gross income. Fill in only those that apply.

Dollars only, do not enter cents

1	Part-year DC resident – enter the portion of adjustments (from Federal Form 1040, 1040-SR or 1040-NR) that relate to the time you <u>resided outside</u> DC. For Lines 2 – 7 below include only the amounts related to the time you <u>resided in</u> DC.	1	\$	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	.00
2	Income distributions eligible for income averaging on your federal tax return (from federal Form 4972).	2	\$	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	.00
3	100% federal bonus depreciation and/or extra IRC §179 expenses claimed on federal return.	3	\$	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	.00
4	Any part of a discrimination award subject to income averaging.	4	\$	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	.00
5	Deductions for S Corporations from Schedule K-1, Form 1120 S.	5	\$	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	.00
6	Other pass through losses from DC unincorporated businesses that exceed the \$12,000 threshold (reported as a loss on federal 1040 or 1040-SR return).	6	\$	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	.00
7	Other. See instructions on other side.	7	\$	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	.00
8	Total additions. Add entries on Lines 1– 7. Enter the total here and on D-40, Line 6.	8	\$	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	.00

Calculation B Subtractions from federal adjusted gross income. Fill in only those that apply.

1	Taxable interest from US Treasury bonds and other obligations. See instructions on other side.	1	\$	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	.00
2	Disability income exclusion from DC Form D-2440, Line 10. See instructions on other side.	2	\$	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	.00
3	Interest and dividend income of a child from Federal Form 8814*.	3	\$	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	.00
4	Awards, other than front and back pay, received due to unlawful employment discrimination.	4	\$	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	.00
5	Excess of DC allowable depreciation over federal allowable depreciation. See instructions.	5	\$	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	.00
6	Amount paid (or carried over) to DC College Savings plan in 2019 (maximum \$4,000 per person, \$8,000 for joint filers if each is an account owner). Part-year residents see instructions.	6	\$	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	.00
7a	Exclusion of up to \$10,000 for DC residents (certified by the Social Security Adm. as disabled) with adjusted annual household income of less than \$100,000. See instructions.	7a	\$	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	.00
7b	Annual household adjusted gross income. 7b \$			<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	.00
8	Expenditures by DC teachers for necessary classroom teaching materials, \$500 annual limit per person. See instructions on other side.	8	\$	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	.00
9	Expenditures by DC teachers for certain tuition and fees, \$1500 annual limit per person. See instructions on other side.	9	\$	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	.00
10	Loan repayment awards received by health-care professionals from DC government. See instructions on other side.	10	\$	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	.00
11	Health-care insurance premiums paid by an employer for an employee's registered domestic partner or same sex spouse. Make no entry if the premium was deducted on your federal return, see instructions on other side.	11	\$	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	.00
12	DC Poverty Lawyer Loan Assistance. See instructions on other side.	12	\$	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	.00
13	Other. See instructions on other side. _____	13	\$	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	.00
14	Military Spouse Residency Relief Act. See instructions on other side.	14	\$	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	.00
15	RESERVED	15	\$	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	.00
16	Total subtractions. Add entries on Lines 1–7a and 8-15. Enter the total here and on D-40, Line 13.	16	\$	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	.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 or 1040-SR 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 1040-SR, Line 2b or 1040-NR, Line 9a. 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 (100%) 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/registered domestic partner may deduct up to \$4,000 for contributions made to all accounts for which that spouse/registered 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 and 7b 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.

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.

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

- 1) has been approved by the DC public schools; and
- 2) 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 or 1040-SR) **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. Private Security Camera Systems and Home Composting Incentives. Other items not subject to DC tax subtracted from federal adjusted gross income, such as rebates/grants received from the Private Security Camera Systems Program, the Home Composting Incentive Program or the Safe at Home Grant Program.

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.

OFFICIAL USE ONLY
Vendor ID#0000

First name of non-custodial parent	M.I.	Last name
<input type="text"/>		
Address (number, street and suite/apartment number if applicable)		
<input type="text"/>		
City	State	Zip Code + 4
<input type="text"/>		
Taxpayer Identification Number (TIN)	Date of birth (MMDDYYYY)	
<input type="text"/>		

Even if you are not eligible to claim the Federal Earned Income Credit you may be able to claim the DC Earned Income Tax Credit.

DC Non-Custodial Parent EITC Eligibility – Please complete this checklist to determine your eligibility to file Schedule N. You may claim the DC Non-Custodial Parent EITC only if you can answer “Yes” to the following questions.

	YES	NO
1 Is your Federal Adjusted Gross Income for 2019 less than: \$41,094 (\$46,884 married filing jointly) with one qualifying child \$46,703 (\$52,493 married filing jointly) with two qualifying children \$50,162 (\$55,592 married filing jointly) with three or more qualifying children	<input type="radio"/>	<input type="radio"/>
2 Were you a DC resident taxpayer during the year?	<input type="radio"/>	<input type="radio"/>
3 Were you between the ages of 18 and 30 as of December 31, 2019?	<input type="radio"/>	<input type="radio"/>
4 Are you a parent of a minor child(ren) with whom you do not reside?	<input type="radio"/>	<input type="radio"/>
5 Are you under a court order requiring you to make child support payments?	<input type="radio"/>	<input type="radio"/>
6 Was the child support payment order in effect for at least 183 days in 2019?	<input type="radio"/>	<input type="radio"/>
7 Did you make child support payment(s) through a government sponsored support collection unit?	<input type="radio"/>	<input type="radio"/>
8 Did you pay all of the court ordered child support due for 2019 by December 31, 2019?	<input type="radio"/>	<input type="radio"/>

If you answered “Yes” to the above questions, you may claim the DC Non-Custodial Parent EITC. Complete Schedule N and attach it, and Schedule U, to your D-40.



Last name and TIN

Qualifying Child Information

	First Name	M.I.	Last Name
1. Child's name, #1	<input type="text"/>	<input type="text"/>	<input type="text"/>
Child's name, #2	<input type="text"/>	<input type="text"/>	<input type="text"/>
Child's name, #3	<input type="text"/>	<input type="text"/>	<input type="text"/>

If you have more than three qualifying children, you only need to list three to get the maximum credit.

	#1	#2	#3
2. Child's TIN	<input type="text"/>	<input type="text"/>	<input type="text"/>

	#1	#2	#3
3. Child's date of birth	<input type="text"/>	<input type="text"/>	<input type="text"/>

	First Name	M.I.	Last Name
4. Custodian's name	<input type="text"/>	<input type="text"/>	<input type="text"/>

5. Custodian's address	Number, street and suite/apartment number											
	City				State		Zip Code + 4					

6. Custodian's TIN	<input type="text"/>
--------------------	----------------------

7. Location of the court that ordered support payments for:	#1	<input type="text"/>	#3	<input type="text"/>
	#2	<input type="text"/>		

8. Case or Docket number for:	9. Name of government agency to which you make payments for:
#1 <input type="text"/>	#1 <input type="text"/>
#2 <input type="text"/>	#2 <input type="text"/>
#3 <input type="text"/>	#3 <input type="text"/>

10. Address of the government agency for:	#1	<input type="text"/>
	#2	<input type="text"/>
	#3	<input type="text"/>

11. Amount of court ordered payment	#1 \$ <input type="text"/> .00 per month	#3 \$ <input type="text"/> .00 per month
	#2 \$ <input type="text"/> .00 per month	

12. Date payments were ordered to start	#1 (MMDDYYYY)	#2 (MMDDYYYY)	#3 (MMDDYYYY)
	<input type="text"/>	<input type="text"/>	<input type="text"/>

13. Total payments made during 2019	#1	#2	#3
	\$ <input type="text"/> .00	\$ <input type="text"/> .00	\$ <input type="text"/> .00

14. Computation: Using the amount on Line 4 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.

Schedule ELC Keep Child Care Affordable Tax Credit



Complete and attach to Form D-40 only if you have an eligible child.

OFFICIAL USE ONLY Vendor ID# 0000

Name shown on return: Your first name, M.I., Last name, Taxpayer Identification Number (TIN)

- Before you begin: See the instructions on back of this form to make sure that 1) you can take the Keep Child Care Affordable Tax Credit and 2) you have an eligible child.

Table with 4 columns: Eligible Child Information, Child 1, Child 2, Child 3. Rows include questions 1a-1b, 2 (Child's name), 3 (Child's taxpayer identification number), 4 (Child's Date of Birth), 5 (Child's relationship to you), 6 (Name of Child Development Facility), 7a (Child Development Facility address), 7b (Is the child development facility operated by the federal government or by a private provider on federal property?), 8 (Child Development Facility taxpayer identification number), 9 (For payment purposes, was the child under age 3 as of 9/30/2019?), 10 (Amount paid), 11 (The maximum credit you can receive for each eligible child is \$1,000), 12 (Enter the lesser of Line 10 or Line 11 for each eligible child here).

Instructions for Keep Child Care Affordable Tax Credit (Schedule ELC)

You are not eligible to receive this credit if:

1. You do not claim the eligible child as a dependent on your federal or District income tax return for that taxable year;
2. A person other than the taxpayer claimed the eligible child as a dependent on his or her federal and District income tax returns for that taxable year;
3. The child of the taxpayer was eligible for and received subsidized child care services pursuant to Chapter 4, Title 4 of the D.C. Code, during the taxable year;
4. A person other than the taxpayer received a credit under DC Code 47-1806.15 for the same taxable year for the same eligible child;
5. The payments for child care services for which you seek a tax credit were paid to an entity not licensed by the District to operate a child development facility unless operated by the federal government or by a private provider on federal property; or
6. The taxpayer's District taxable income for the taxable year exceeds the amounts for taxable year 2019:
 - a. Single and head of household: \$150,000;
 - b. Married/Registered Domestic Partners Filing Jointly: \$150,000;
 - c. Married/Registered Domestic Partners Filing Separately on the same return: \$150,000;
 - d. Married/Registered Domestic Partners Filing Separately: \$75,000

Definitions

1. "Eligible child" means a dependent, claimed by a taxpayer who has not reached the age of 4 years by September 30th of the taxable year.
2. "Eligible child care expenses" means payments made by a taxpayer to a licensed child development facility for child care services of an eligible child during the taxable year but does not include any payments for child care services provided after August 31st of the taxable year of an eligible child who meets the age requirements for enrollment for Pre-K.
3. "Child development facility" means a center, home, or other structure that provides care and other services, supervision, and guidance for children, infants, and toddlers on a regular basis licensed to operate as a childcare development facility in the District unless operated by the federal government or by a private provider on federal property. Child development facility does not include a public or private elementary or secondary school engaged in legally required educational and related functions or a pre-kindergarten education program licensed pursuant to the Pre-K Act of 2008.
4. Taxpayer Identification Number (TIN) means a valid federal employer identification number (FEIN) issued by the IRS; or a valid social security number issued by the Social Security Administration.

Eligible Expenses

1. Eligible expenses are limited to the amounts paid to a licensed child development facility for child care services of the eligible child;
2. Child support payments are not qualified expenses even if intended to be used to pay for child care services;
3. Child care expenses that are paid for upfront by a taxpayer but then reimbursed by a state social service agency are not eligible expenses; or
4. Expenses do not include food, lodging, clothing or entertainment even if provided for eligible child.

Line by Line Instructions for Child 1, 2 and 3:

Line 1a: Is the eligible child a recipient of the District's subsidized child care program? If yes, your child does not qualify for the credit. If no, continue to Line 1b.

Line 1b: The child must be under the age of 4 as of 9/30/19. If under age 4, continue to Line 2. If age 4 or over, your child does not qualify for this credit.

Line 2: Enter your eligible child's first and last name.

Line 3: Enter your eligible child's tax identification number. Ensure the name and tax identification number entered matches the eligible child's social security card.

Line 4: Enter your eligible child's date of birth in MMDDYYYY format.

Line 5: Enter the eligible child's relationship to you. Example, son, daughter, grandchild, niece, nephew, eligible foster child.

Line 6: Enter the name of the Child Development Facility.

Line 7a: Enter the address of the Child Development Facility.

Line 7b: Check the applicable box.

Line 8: Enter the TIN of the Child Development Facility.

Line 9: Enter the date range of the payments made during the taxable year. This date cannot be a date after August 31st of the taxable year if eligible child meets age requirements for enrollment in Pre-K according to DC Code § 38-273.02(a).

Line 10: Enter the total amount actually paid in 2019 but do not include any payments for child care services provided after August 31, 2019 of the taxable year if your eligible child meets the age requirement for enrollment in Pre-K according to DC Code § 38-273.02(a).

Line 11: The maximum credit amount that can be claimed is \$1,000.

Line 12: Enter the lesser of Line 10 or Line 11 and enter here and on Schedule U, Part 1B, Line 2.



Important: Print in CAPITAL letters using black ink. File with your D-40.

OFFICIAL USE ONLY Vendor ID#0000

Personal information

Form fields for personal information including telephone number, TIN, Date of Birth, first and last names, mailing address, city, state, and zip code.

PART I Do you have qualifying health coverage?

- 1 Did you and, if applicable, all members of your health care shared responsibility family have qualifying health coverage for every month in 2019? Yes. STOP. No. If you answered No, complete Part II.

PART II Do you have an exemption?

- 2 Can someone else claim you as a dependent on their federal income tax return for 2019?
3 Was your federal adjusted gross income below the applicable filing threshold for your filing status for 2019?
4 Was your federal adjusted gross income reported on your D-40, Line 4 for 2019 equal to or less than \$27,728?

If you answered Yes to any of questions 2 - 4, enter zero on Line 28 of your D-40. If not, continue by answering questions 5 - 6.

- 5 Do you affirm under the penalties of perjury that you or any member of your health care shared responsibility family lacked qualifying health coverage in 2019 on the basis of a sincerely held religious belief during the entire taxable year?
6 Are you claiming an exemption (other than a sincerely held religious belief) for at least one month for 2019 for yourself or any member of your health care shared responsibility family?

After answering questions 5 - 6, complete Part IV to determine the amount to enter on Line 28 of your D-40. If you answered yes to question 5 or 6, you must also complete Part III.

A. Flat Dollar Amount Calculation

Worksheet A-1 (No exemptions claimed)

Worksheet A-1 - Complete this worksheet if you are **not** claiming any exemptions for any month for any member of your health care shared responsibility family. (See instructions for available exemptions and who is included in your health care shared responsibility family.)

1. Multiply \$695 for each member in your health care shared responsibility family who was at least 18 years old as of December 31, 2019.	1.	<input type="text"/>	.00
2. Multiply \$347.50 for each member in your health care shared responsibility family who was under the age of 18 years old as of December 31, 2019.	2.	<input type="text"/>	.00
3. Add Lines 1 and 2.	3.	<input type="text"/>	.00
4. Maximum flat dollar amount for 2019.	4.		\$2,085.00
5. Enter the smaller of Lines 3 or 4 here and on Schedule HSR, Part IV, Line 13. (Proceed to Worksheet B-1)	5.	<input type="text"/>	.00

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

Worksheet A-2 (Exemptions claimed for at least one month for at least one member in your health care shared responsibility family)

Worksheet A-2 - Complete the monthly columns by placing an "X" in each month to represent any member of your health care shared responsibility family that did not have minimum essential coverage or a coverage exemption. **Only complete this worksheet if you are claiming an exemption for any month for any member in your health care shared responsibility family.** (See instructions for available exemptions and who is included in your health care shared responsibility family.)

Name	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
1a. Total number of X's in a month. If 5 or more, enter 5.												
1b. Add the total number reported in Line 1a here and on Worksheet C-2, Line 1.	<input type="text"/>	<input type="text"/>										
2. Total number of X's in a month for members age 18 or older as of December 31, 2019.												
3. One-half the number of X's in a month for members under the age of 18 years old as of December 31, 2019.												
4. Add Lines 2 and 3 for each month.												
5. Multiply Line 4 by \$695 for each month. If \$2085 or more, enter \$2085.												
6. Total the amounts for each month on Line 5.												
7. Divide Line 6 by 12.0. This is your flat dollar amount. Enter this amount on Schedule HSR, Part IV, Line 13. (Proceed to Worksheet B-1)												
										\$.00
										\$.00

B. Percentage Income Calculation

Worksheet B-1

Worksheet B-1 - Complete this worksheet if you completed either Worksheet A-1 or Worksheet A-2. If you completed Worksheet A-2, you must also complete Worksheet B-2.

	<i>Round cents to nearest dollar. If amount is zero, leave line blank.</i>
1. Enter your federal adjusted gross income reported on your D-40, Line 4 for 2019.	1. <input type="text"/> .00
2. Enter the standard deduction amount that corresponds to the filing status that you claimed on your D-40. (See instructions for amounts).	2. <input type="text"/> .00
3. Subtract Line 2 from Line 1.	3. <input type="text"/> .00
4. Multiply Line 3 by 2.5% (0.025). This is your percentage of income amount. Enter this amount on Schedule HSR, Part IV, Line 14 if you completed Worksheet A-1, and proceed to Worksheet C-1. (If you were required to complete Worksheet A-2, you must proceed to Worksheet B-2 to calculate your percentage of income amount. Do not enter this amount on Schedule HSR, Part IV, Line 14.)	4. <input type="text"/> .00

Worksheet B-2 (Exemptions claimed for at least one month for at least one member in your health care shared responsibility family)

Worksheet B-2 - Complete this worksheet only if you were required to complete Worksheet A-2. Do not complete this worksheet if you completed Worksheet A-1. * If the amount on Line 1a of Worksheet A-2 is zero for any month, leave all columns of this worksheet blank for that month.

For each month, you must determine if the amount on Line 5 of Worksheet A-2 is less than the amount on Line 4 of Worksheet B-1.	(a)	(b)	(c)
	Enter the amount from Worksheet A-2, Line 5	Enter the amount from Worksheet B-1, Line 4	Enter the larger of column (a) or column (b)
1. January			.00
2. February			.00
3. March			.00
4. April			.00
5. May			.00
6. June			.00
7. July			.00
8. August			.00
9. September			.00
10. October			.00
11. November			.00
12. December			.00
13. Add the amounts in column (c)			.00
14. Divide Line 13 by 12.0 Enter this amount on Schedule HSR, Part IV, Line 14. (Proceed to Worksheet C-2.)			.00

C. District Average Bronze Plan Premium Calculation

Worksheet C-1 (No exemptions claimed)

Worksheet C-1 - Complete this worksheet if you completed Worksheet A-1. If **you were** required to complete Worksheet A-2, you must complete Worksheet C-2. (See instructions on who is included in your health care shared responsibility family.)

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

1. Enter the number of members in your health care shared responsibility family. 1.

2. Enter the amount that corresponds to the number of members in your health care shared responsibility family.

- 1 person - \$3,072
- 2 persons - \$6,144
- 3 persons - \$9,216
- 4 persons - \$12,288
- 5 or more persons - \$15,360

Enter this amount on Schedule HSR, Part IV, Line 16. 2. .00

Worksheet C-2 (Exemptions claimed for at least one month for at least one member in your health care shared responsibility family)

Worksheet C-2 - Complete this worksheet only if you were required to complete Worksheet A-2. If **you were not** required to complete Worksheet A-2, complete Worksheet C-1. Do not complete this worksheet if you completed Worksheet A-1. (See instructions on who is included in your health care shared responsibility family.)

1. Enter the total number reported on Worksheet A-2, Line 1b. 1.

2. Multiply Line 1 by \$256. Enter this amount on Schedule HSR, Part IV, Line 16. 2. .00

**INSTRUCTIONS FOR SCHEDULE HSR
DC HEALTH CARE SHARED RESPONSIBILITY PAYMENT
STOP: If you answered 'yes' to Part I, Line 1, or Part II, Lines 2, 3, and 4,
DO NOT complete this schedule. Mark the oval on Line 3 of the D-40
and enter zero (0) on Line 28 of the D-40**

A new DC law requires all residents to have health coverage, have an exemption, or pay a tax penalty on their D-40. DC enacted the law in response to the reduction of the federal individual responsibility payment and modeled it after the federal requirement. Beginning with 2019, all District residents must either:

(1) Have qualifying health care coverage (see definition below) for yourself, your spouse/registered domestic partner (if filing jointly or separately on the same return), and anyone you or your married/registered domestic partner claim (or can claim) as a dependent;

(2) Have a coverage exemption for yourself, your spouse/registered domestic partner (if filing jointly or separately on the same return), and anyone you or your married/registered domestic partner claim (or can claim) as a dependent; or

(3) Make a health care shared responsibility payment.

D-40

If you and, if applicable, all members of your shared responsibility family (see definition below) had qualifying health care coverage for every month in 2019, fill-in the oval on Page 1 of your D-40 and enter zero on Line 28 of your D-40. You do not need to complete Schedule HSR or make a shared responsibility payment. If you (and, if applicable, all members of your shared responsibility family) did not have qualifying health care coverage for every month in 2019, you must complete Schedule HSR to calculate your shared responsibility payment and/or to claim an exemption.

Schedule HSR

Part I - Complete Part I of the Schedule HSR. If you answer 'yes' to question 1, enter zero on Line 28 of the D-40. If you answer 'no' to question 1, you must complete Part II.

Part II - If you answer 'yes' to question 2, 3 or 4, enter zero on Line 28 of the D-40. If you answer 'no' to questions 2-4, you must answer questions 5-6 and complete Part III.

Part III – Complete the name and taxpayer identification number (TIN) for each member of your shared responsibility family, the code for the exemption claimed and the number of exempt months claimed for each exemption type claimed. For a list of exemption codes, see the Exemption Chart.

- If you are claiming one exemption type for the entire year, enter the applicable exemption code and “12” for the number of exempt months claimed for that member.
- If you are claiming an exemption for less than 12 months, enter the applicable exemption code and the total number of months claimed for that exemption type for that member.
- If you are claiming multiple exemption types for one member, list that member more than once and enter exemption code and number of months claimed for each exemption type for that member.
- If a member of your shared responsibility family is not claiming any exemptions for the year, enter “X” for code for the exemption type and “0” for number of exempt months claimed.

Part IV – Complete Part IV of Schedule HSR to compute your shared responsibility payment. You must complete the worksheets to compute your shared responsibility payment. (If you claimed an exemption for all members of your shared responsibility family for every month of 2019, enter zero on Lines 13-17 of your Schedule HSR.) The worksheets contain the following:

A. Flat Dollar Amount Calculation (Line 13)

1. Complete Worksheet A-1 if no exemptions are claimed by anyone in your shared responsibility family
2. Complete Worksheet A-2 if exemptions are claimed for at least one month for at least one member of your shared responsibility family.

B. Percentage Income Amount Calculation (Line 14)

1. Complete Worksheet B-1. (If you completed Worksheet A-2, you must also Complete Worksheet B-2.)
2. Complete Worksheet B-2 if you claimed exemptions for at least one month for at least one member of your shared responsibility family.

C. District Average Bronze Plan Premium Calculation (Line 16)

1. Complete Worksheet C-1 if no exemptions were claimed.
2. Complete Worksheet C-2 if you claimed exemptions for at least one month for at least one member in your shared responsibility family.

A. Flat Dollar Amount Calculation Worksheets

- Worksheet A-1

Complete this worksheet if you are not claiming any exemptions for any month for any member of your shared responsibility family.

Follow the line by line directions provided on the form. Enter the amount from Line 5 on Schedule HSR, Part IV, Line 13. Proceed to Worksheet B-1.

- Worksheet A-2

Complete this worksheet only if you are claiming an exemption for any month for any member of your shared responsibility family.

List the name of each member of your shared responsibility family in the provided row. Then, for each month, mark an X in the appropriate column if listed the member of your shared responsibility family did not have minimum essential coverage or a coverage exemption. For example, if your dependent “John” had a health care coverage only for the month of January and had no coverage exemptions for the remainder of the year, mark an “X” in each of the month columns February through December on the row associated with John’s name.

Line 1a: For each month, add the total number of “X’s” in the column. The maximum number entered in any month’s column is 5, even if that column includes more than 5 “X’s”. For example, if each of the 6 members of your shared responsibility family did not have health care coverage or a coverage exemption for January, you should enter “5” on Line 1 in the January column.

Line 1b: After you have completed the step above for each month, add the total calculated for each month together. Enter this sum on the provided space in the "Line 1b" box. For example, if you entered "5" in the January column for Line 1a, "4" in the April column, and "0" in all other columns, enter "9" in the space provided in the "Line 1b" box.

Line 2: Enter the total number of "X's" in each month that correspond to members age 18 or older as of December 31, 2019.

Line 3: Enter one-half the total number of "X's" in each month that correspond to members under the age of 18 as of December 31, 2019.

Line 4: Add Lines 2 and 3 for each month.

Line 5: Multiply Line 4 by \$695 for each month. If \$2,085 or more, enter \$2,085.

Line 6: Total the amounts reported in each month's column on Line 5.

Line 7: Divide the amount reported on Line 6 by 12.0. This is your flat dollar amount. Enter this amount on Schedule HSR, Part IV, Line 13 and proceed to Worksheet B-1.

B. Percentage Interest Calculation Worksheets

Worksheet B-1

Complete this worksheet if you completed either Worksheet A-1 or Worksheet A-2. If you completed Worksheet A-2, you must also complete Worksheet B-2.

Follow the line by line directions provided on the form. The applicable D-40 filing threshold amounts for 2019 are:

- Single (under 65) – \$12,200
- Single (65 or older) – \$13,850
- Married/Registered domestic partner filing jointly or separately on the same return (both spouses under 65) – \$24,400
- Married/Registered domestic partner filing jointly or separately on the same return (one spouse 65 or older) – \$25,700
- Married/Registered domestic partner filing jointly or separately on the same return (both spouses 65 or older) – \$27,000
- Married filing separately (any age) – \$12,200
- Head of household (under 65) – \$18,350
- Head of household (65 or older) – \$20,000
- Qualifying Widow(er) (under 65) – \$24,400
- Qualifying Widow(er) (65 or older) – \$25,700

If you completed Worksheet A-1, enter the amount from Line 4 on Schedule HSR, Part IV, Line 14 and proceed to Worksheet C-1. If you completed Worksheet A-2, proceed to Worksheet B-2 to calculate your percentage of income amount.

Worksheet B-2

Complete this worksheet only if you completed Worksheet A-2 (if you claimed exemptions for at least one month for at least one member of your shared responsibility family).

Line 1-12: For each month enter the amount from Worksheet A-2, Line 5 in column (a) and the amount from Worksheet B-1, Line 4 in column (b). In column (c), enter the larger of column (a) or column (b).

Line 13: Add the amounts reported in column (c) for Lines 1-12.

Line 14: Divide the total on Line 13 by 12. Enter this amount on Schedule HSR, Part IV, Line 14. Proceed to Worksheet C-2.

C. District Average Bronze Plan Premium Calculation Worksheets

Worksheet C-1

Complete this worksheet if you completed Worksheet A-1. Do not complete this worksheet if you completed Worksheet A-2 (if you claimed no exemptions for any member of your shared responsibility family).

Follow the line by line directions provided on the form. Enter the amount from Line 2 on Schedule HSR, Part IV, Line 16.

Worksheet C-2

Complete this worksheet if you completed Worksheet A-2. Do not complete this worksheet if you completed Worksheet A-1 (if you claimed exemptions for at least one month for at least one member of your shared responsibility family).

Follow the line by line directions provided on the form. Enter the amount from Line 2 on Schedule HSR, Part IV, Line 16.

Definitions

- **DC resident.** For purposes of Schedule HSR, DC resident has the same meaning as “resident” defined in D.C. Official Code § 47-1801.04(42). (Part-year residents should claim an exemption as a nonresident of the District for the month(s) during the tax year that that he or she was not a DC resident.)
- **Shared responsibility family.** For purposes of Schedule HSR, shared responsibility family includes the following individuals:
 - The taxpayer;
 - The taxpayer’s spouse or registered domestic partner if they file D-40 jointly or separately on the same return; and
 - Any dependents that that the taxpayer (or the taxpayer’s spouse or registered domestic partner) claimed or could have claimed on their D-40.
- **Qualifying health coverage.** For purposes of Schedule HSR, qualifying health coverage means:
 - Minimum essential coverage as defined by section 5000A of the Internal Revenue Code of 1986 (26 U.S.C. § 5000A) and its implementing regulations, as that section and its implementing regulations were in effect on December 15, 2017;
 - The Immigrant Children's Program; and
 - Health coverage provided under a multiple employer welfare arrangement; provided, that the multiple employer welfare arrangement provided coverage in the District on December 15, 2017, or complies with federal law and regulations applicable to multiple employer welfare arrangements that were in place as of December 15, 2017.

For additional information regarding qualifying coverage, contact DC Health Link at www.dchealthlink.com or (855) 532-5465.

Exemptions Chart

Exemption Type	Exemption Code
Affordability —You received an affordability exemption certificate from the Health Benefits Exchange Authority. For information regarding the affordability exemption contact DC Health Link at www.dchealthlink.com or (855) 532-5465.	A
Short coverage gap —You went without coverage for less than 3 consecutive months during the year.	B
Citizens living abroad and certain noncitizens —You were: <ul style="list-style-type: none"> • A U.S. citizen or a resident alien who was physically present in a foreign country or countries for at least 330 full days during any period of 12 consecutive months; • A U.S. citizen who was a bona fide resident of a foreign country or countries for an uninterrupted period that includes the entire tax year; • A bona fide resident of a U.S. territory; • A resident alien who was a citizen or national of a foreign country with which the U.S. has an income tax treaty with a nondiscrimination clause, and you were a bona fide resident of a foreign country for an uninterrupted period that includes the entire tax year; • Not lawfully present in the U.S. and not a U.S. citizen or U.S. national. For more information about who is treated as lawfully present in the U.S. for purposes of this coverage exemption, visit www.HealthCare.gov; or • A nonresident alien, including (1) a dual-status alien in the first year of U.S. residency and (2) a nonresident alien or dual-status alien who elects to file a joint return with a U.S. spouse. This exemption doesn't apply if you are a nonresident alien for 2018, but met certain presence requirements and elected to be treated as a resident alien. For more information, see IRS Pub. 519. 	C
Members of a health care sharing ministry —You were a member of a health care sharing ministry.	D
Members of Indian tribes —You were either a member of a federally recognized Indian tribe including an Alaska Native Claims Settlement Act (ANCSA) Corporation Shareholder (regional or village), or you were otherwise eligible for services through an Indian health care provider or the Indian Health Service.	E
Incarceration —You were in a jail, prison, or similar penal institution or correctional facility after the disposition of charges.	F
General hardship — You received a hardship exemption certificate from the Health Benefits Exchange Authority. For information regarding the hardship exemption contact DC Health Link at www.dchealthlink.com or (855) 532-5465.	G
Member of shared responsibility family born or adopted during the year —The months before and including the month that an individual was added to your shared responsibility family by birth or adoption. <i>You should claim this exemption only if you also are claiming another exemption in Part III.</i>	H
Member of shared responsibility family died during the year —The months after the month that a member of your shared responsibility family died during the year. <i>You should claim this exemption only if you also are claiming another exemption in Part III.</i>	H
Nonresident of the District – You were not a resident of the District of Columbia.	I
Sincerely Held Religious Belief —You lacked qualifying health coverage on the basis of a sincerely held religious belief during the entire taxable year.	J
DC Health Alliance – You were enrolled in the DC Health Alliance Program.	K

Low income– Your federal adjusted gross income reported on your D-40, Line 3 is equal to or below the amounts that correspond to the number of members in your shared responsibility family and the age of the individual for which the exemption is claimed. **(If you qualify for this exemption, you may be eligible for Medicaid. Contact DC Health Link at (855) 532-5465 or www.dchealthlink.com or the Department of Health Care Finance at (202) 727-5355 or <https://dhcf.dc.gov/service/medicaid> or for more information.)**

L

Number of Shared Responsibility Family Members:	If your AGI is equal to or below the following amounts, members age 21 or older as of 12/31/2019 are exempt:	If your AGI is equal to or below the following amounts, members under age 21 as of 12/31/2019 are exempt:
1	\$27,727.80	\$40,467.60
2	\$37,540.20	\$54,788.40
3	\$47,352.60	\$69,109.20
4	\$57,165.00	\$83,430.00
5	\$66,977.40	\$97,750.80
6	\$76,789.80	\$112,071.60
7	\$86,602.20	\$126,392.40
8	\$96,414.60	\$140,713.20
For Each Additional Member, add:	\$9,812.40	\$14,320.80

No exemptions claimed.

X

SCHEDULE QCGI Eligible QHTC Capital Gain Investment Tax



OFFICIAL USE ONLY Vendor ID#0000

Important: Print in CAPITAL letters using black ink. Complete and attach to Form D-40, D-41, D-20 or D-30, as applicable

Header section containing Taxpayer Identification Number (TIN), filer information (first name, M.I., last name), and filing instructions.

Investment entry 1: Taxpayer Identification Number of QHTC, Number shares of common or preferred stock, Gain or (Loss), Legal Name of QHTC, Date acquired, Date sold or disposed of, Publicly traded at time of investment?

Investment entry 2: Taxpayer Identification Number of QHTC, Number shares of common or preferred stock, Gain or (Loss), Legal Name of QHTC, Date acquired, Date sold or disposed of, Publicly traded at time of investment?

Investment entry 3: Taxpayer Identification Number of QHTC, Number shares of common or preferred stock, Gain or (Loss), Legal Name of QHTC, Date acquired, Date sold or disposed of, Publicly traded at time of investment?

Investment entry 4: Taxpayer Identification Number of QHTC, Number shares of common or preferred stock, Gain or (Loss), Legal Name of QHTC, Date acquired, Date sold or disposed of, Publicly traded at time of investment?

If more than 4 eligible investments, attach an additional Schedule QCGI. Complete Lines 1 through 4 on the first schedule only with the line totals for all investments.

Summary lines 1-4: 1 Total net capital gain or loss from all investments, 2 Total realized net capital gain on QHTC investments subject to 3% tax, 3 Enter the smaller of Line 1 and Line 2, 4 Tax on eligible QHTC investments.

INSTRUCTIONS FOR SCHEDULE QCGI ELIGIBLE QHTC CAPITAL GAIN INVESTMENT TAX

Pursuant to DC Code § 47-1817.07(a) for tax years after December 31, 2018, the tax on a capital gain from the sale or exchange of an investment in a DC Qualified High Technology Company (QHTC) shall be at the reduced rate of 3% if:

- (1) The investment was made after March 11, 2015;
- (2) The investment was held by the investor for at least 24 continuous months;
- (3) At the time of the investment, the stock of the QHTC was not publicly traded; and
- (4) The investment is in common or preferred stock of the QHTC.

To determine the total taxes due incorporating the reduced 3% tax rate on QHTC eligible capital gain income, the QHTC eligible capital gain income must be removed from DC taxable income and a tentative tax derived. Then 3% of the eligible QHTC capital gain income is added to the tentative tax to determine the total tax due.

The following steps must be taken:

1. Determine whether there is overall positive net capital gain from all investments using the IRS netting rules for capital gain/loss. Use the federal Form 8949, Sales and Other Dispositions of Capital Assets, federal Schedule D, Capital Gains or Losses, and federal Form 1099-B or Form 1099-S you may have used to report gains or losses on the federal return that you filed. If your net capital gain is zero, or a loss, or if your tentative taxable income is zero or less, STOP HERE. You do not have taxable capital gain from the sale or exchange of an investment in a QHTC that is subject to the 3% tax rate. You do not

have to complete Schedule QCGI. Enter zero on your applicable District return on the line that asks for the amount of capital gain from the sale or exchange of an eligible investment in a QHTC, and enter zero on the line of your applicable return that asks for 3% tax on QHTC eligible capital gains income.

Capital gains or losses amounts reported on your federal tax return are reported on the applicable District of Columbia tax return on the following District tax return lines:

District individual income tax return, form D-40, Line c;

District fiduciary tax return, form D-41, Line 1 (from federal 1041, Line 5);

District corporate business franchise tax return, form D-20, Line 8(a); or

District unincorporated business franchise tax return, form D-30, Line 8(a).

2. If the applicable District tax return line reports positive capital gain income, the next step is to determine the amount of net capital gain from the sale or exchange of an investment in QHTC common or preferred stock subject to the 3% tax rate. In cases where you may not have received Form 1099-B, or you were not required to file federal Form 8949 and/or federal Schedule D with your federal return, you may use those forms to assist you in listing, identifying and computing net capital gain or loss from the investment in QHTC common or preferred stocks subject to the 3% tax rate.

Use federal Form 8949 and federal Form 1099-B or any statement you may have received to complete District Schedule QCGI. List only those investments in QHTC common or preferred stock acquired after March 11, 2015 and held for at least 24 continuous months before disposition on Schedule QCGI. (At the time of

investment, the stock must not have been publicly traded). Add the gains and subtract the losses to derive the total net capital gain. If the result is a loss or zero, STOP. You do not have taxable gain from the sale or exchange of an investment in a QHTC that is subject to the 3% tax rate. Enter zero on your applicable District return on the line that asks for the amount of capital gain from the sale or exchange of an eligible investment in a QHTC, and enter zero on the line of your applicable return that asks for 3% tax on QHTC eligible capital gains income.

3. If there is positive net capital gain income of QHTC eligible investment, complete Line 3 of Schedule QCGI by entering the smaller amount of Line 1 and Line 2. Allocate or apportion this amount by your DC apportionment factor as applicable. Enter this amount on the applicable District return as follows:

District individual income tax return, form D-40, Line 19;

District fiduciary tax return, form D-41, Line 13;

District corporate franchise tax return, D-20, Line 37; or

District unincorporated business franchise tax return, D-30, Line 37.

4. Multiply Line 3 by 3%. Enter amount on Line 4 of Schedule QCGI and on Line 22 of the D-40, Line 16 of the D-41; Line 40 of the D-20; or Line 40 of the D-30.

Schedule QCGI Specific Line Instructions

Line 1 Total Overall Net Capital Gain or Loss as Reported in Your Federal Return

The total capital gain or loss amount reported on your federal tax return (1040, Schedule 1, Line 13; 1120, Line 8; or 1041, Line 4) are derived from federal Form 8949, "Sales and Other Dispositions of Capital Assets", federal Schedule D, "Capital Gains and Losses", and federal Forms 1099-B and 1099-S. If the total overall net capital gain or loss as reported on your federal and applicable DC

return is zero or less, or your tentative taxable income is zero or less, STOP. Enter zero on Lines 19 and 22 of the D-40; Lines 13 and 16 of the D-41; Lines 37 and 40 of the D-20; or Lines 37 and 40 of the D-30, as applicable. You do not have to fill out Schedule QCGI. You do not have an eligible QHTC capital gain to be taxed at 3%.

If the overall capital gain or loss as reported on your federal and applicable DC return is a gain, then you must determine the amount of net capital gain that is attributable to QHTC eligible capital gains investment. Proceed to Line 2 of Schedule QCGI.

Line 2 Total Realized Net Capital Gain on QHTC Investments Subject to 3% Tax.

On Schedule QCGI, list all QHTC common or preferred stock investments acquired after March 11, 2015, not publicly traded at the time of investment, and held for at least 24 months before disposition, that were reported on your Federal Form 8949, Part II. Enter the net amount of the total eligible investments on Line 2 of Schedule QCGI. If zero or less, STOP. You do not have QHTC eligible capital gain income to be taxed at 3%. Enter zero on Lines 19 and 22 of the D-40; Lines 13 and 16 of the D-41; Lines 37 and 40 of the D-20; or Lines 37 and 40 of the D-30, as applicable.

Line 3 Enter the smaller of Line 1 and Line 2.

Enter the smaller amount of Line 1 and Line 2, on Line 3 of Schedule QCGI. Allocate or apportion this amount by your DC apportionment factor as applicable. Enter the same amount on the appropriate line of the applicable District of Columbia return you are filing: for the D-40, enter on Line 19; for the D-41, Line 13; for the D-20, Line 37; or for the D-30, Line 37.

Line 4 Tax on QHTC Eligible Investments.

Multiply Line 3 by 3% and enter the amount on Line 4 of Schedule QCGI. Enter the same amount on the appropriate line of the applicable District return you are filing: for the D-40, Line 22; for the D-41, Line 16; for the D-20, Line 40; or for the D-30, Line 40.

DC-8379 Injured Spouse Allocation



OFFICIAL USE ONLY Vendor ID# 0000

Information About the Tax Return for Which This Form Is Filed

Enter the following information exactly as it is shown on the tax return for which you are filing this form.

The spouse's name and taxpayer identification number shown first on that tax return must also be shown first below.

First name, initial, and last name shown first on the return	Taxpayer identification number shown first	If Injured Spouse, check here <input type="checkbox"/>
First name, initial, and last name shown second on the return	Taxpayer identification number shown second	If Injured Spouse, check here <input type="checkbox"/>
Mailing address (number, street, and suite/apartment number if applicable)		
City	State	Zip Code +4

Part I Should You File This Form? You must complete this part.

- Enter the tax year for which you are filing this form. _____ Answer the following questions for that year.
- Did you (or will you) file a joint return or married/registered domestic partners filing separately on same return?
 - Yes.** Go to Line 3.
 - No. Stop here.** Do not file this form. You are not an injured spouse.
- Did (or will) DC use the joint overpayment to pay any of the following legally enforceable past-due debt(s) owed only by your spouse?
 - * DC income tax * DC unemployment compensation * Child support * DC tickets and traffic penalties * federal income tax
 - * federal student loans
 - Yes.** Go to Line 4.
 - No. Stop here.** Do not file this form. You are not an injured spouse.
- Are you legally obligated to pay this past-due amount?
 - Yes. Stop here.** Do not file this form. You are not an injured spouse.
 - No.**
- Did you make and report payments, such as DC income tax withholding or estimated tax payments?
 - Yes.** Skip Line 6 and **go to Part II** and complete the rest of this form.
 - No.** Go to Line 6.
- Did you have earned income, such as wages, salaries, or self-employment income?
 - Yes.** Go to Part II and complete the rest of the form.
 - No. Stop here.** Do not file this form. You are not an injured spouse.



Enter your last name

Enter your TIN

Part II Allocation Between Spouses of Items on the Tax Return (See the separate DC Form 8379 instructions for Part II).

Allocated Items (Column (a) must equal columns (b) + (c))	Fill in if loss	(a) Amount shown on joint return	Fill in if loss	(b) Allocated to injured spouse	Fill in if loss	(c) Allocated to other spouse
7 Federal adjusted gross income	<input type="radio"/>	\$	<input type="radio"/>	\$	<input type="radio"/>	\$
8 Total additions to federal adjusted gross income		\$		\$		\$
9 Add Line 7 and Line 8	<input type="radio"/>	\$	<input type="radio"/>	\$	<input type="radio"/>	\$
10 Total subtractions from federal adjusted gross income		\$		\$		\$
11 DC adjusted gross income (subtract Line 10 from Line 9)	<input type="radio"/>	\$	<input type="radio"/>	\$	<input type="radio"/>	\$
12 Deduction amount		\$		\$		\$
13 Tentative DC taxable income (subtract Line 12 from Line 11)	<input type="radio"/>	\$	<input type="radio"/>	\$	<input type="radio"/>	\$
14 Net capital gain from sale or exchange of an eligible investment in a QHTC, from D-40, Line 19.		\$		\$		\$
15 DC taxable income. Subtract Line 14 from Line 13		\$		\$		\$
16 Tentative Tax. If Line 15 is \$100,000 or more, use Calculation I		\$		\$		\$
17 3% tax on eligible QHTC capital gains income, from D-40, Line 22.		\$		\$		\$
18 Total Tax. Add Lines 16 and 17		\$		\$		\$
19 Total refundable and/or non-refundable credits excluding earned income		\$		\$		\$
20 DC estimated tax payments		\$		\$		\$
21 DC withholding tax paid		\$		\$		\$

Part III Signature.

Under penalties of perjury, I declare that I have examined this form and any accompanying schedules or statements and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Keep a copy of this form for your records.	Injured spouse's signature		Date	Phone number	
	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
Paid Preparer Use Only	Firm's name ▶		Firm's EIN ▶		
	Firm's address ▶		Phone no.		

Instructions for DC-8379 Injured Spouse Allocation

Purpose of form

DC-8379 is filed by one spouse/registered domestic partner (the injured spouse/registered domestic partner) on a jointly filed tax return when the joint overpayment was (or is expected to be) applied (offset) to a past-due obligation of the other spouse/registered domestic partner. By filing DC-8379, the injured spouse/registered domestic partner may be able to get back his or her share of the joint refund.

Are you an injured spouse?

You may be an injured spouse/registered domestic partner if you file a joint tax return and all or part of your portion of the overpayment was, or is expected to be, applied (offset) to your spouse's/registered domestic partner legally enforceable past-due federal tax, DC income tax, DC unemployment compensation debts, child support, a federal nontax debt, such as a student loan or DC tickets and traffic penalties.

A Notice of Offset for federal tax debts is issued by the Internal Revenue Service (IRS). All other Notices of Offsets are issued by the DC Office of Tax and Revenue (OTR) on behalf of the affected agency.

Complete Part I to determine if you are an injured spouse/registered domestic partner.

Innocent spouse relief

Do not file DC-8379 if you are claiming innocent spouse relief.

When to file

File DC-8379 when you file your return and all or part of your share of an overpayment is expected to be, applied (offset) against your spouse/registered domestic

partner's legally enforceable past-due obligations. You must file DC-8379 for each year you meet this condition and want your portion of any offset refunded.

How to file

You can file DC-8379 with your joint tax return. If you file DC-8379 with your joint return, attach it to your return. The processing of DC-8379 may be delayed if the form is incomplete when filed.

Specific Instructions

Part I

Complete Lines 1-6 to determine if you are an injured spouse.

Part II

Line 7. Enter your federal adjusted gross income.

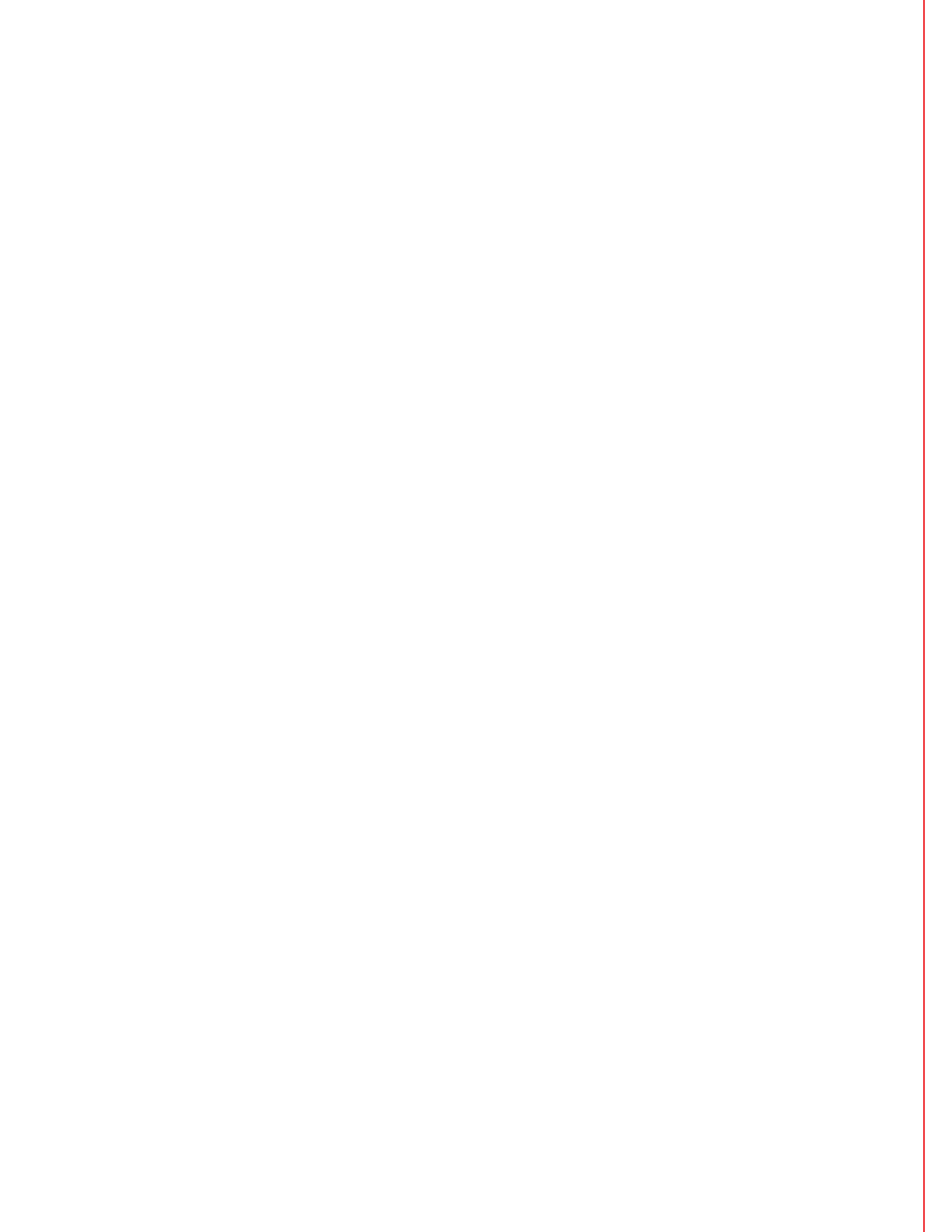
Line 8. Enter total additions to federal adjusted gross income.

Line 10. Enter total subtractions from federal adjusted gross income.

Lines 11 – 21. Amounts come from your DC D-40 return.

Part III Signature

Ensure to sign and date DC-8379.



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

Your First name, M.I., Last name	Taxpayer Identification Number (TIN)
Spouse's/registered domestic partner's First name, M.I., Last name	Spouse's/ registered domestic partner's TIN
	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 (DC) withholding tax and applicable credits is less than \$100, or
- B. You made periodic estimated tax payments and had amounts withheld as required and the total is equal to or more than 110% of your last year's taxes or is at least 90% of your current year's taxes. Note: You must have been a 12-month DC resident last year in order to use the prior year 110% exception.

Computation of Underpayment Interest

1	2019 DC Tax Liability "total tax" from your DC Individual Income Tax Return.	\$	
2	Multiply the amount on Line 1 by 90% (.90)	\$	
3	2018 DC Tax Liability "total tax" from your DC Individual Income Tax Return x 110%.	\$	
4	Minimum withholding and estimated tax payment required for tax year 2019 (lesser of Line 2 and 3).	\$	
5	Multiply Line 4 amount by 25% (.25) for amount required for each periodic payment	\$	

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
	04/15/19	06/15/19	09/15/19	01/15/20
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 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.

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 instructions on reverse)	Pay this amount		\$	

Make check or money order payable to: DC Treasurer

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 2019 DC return; or
- 110% of the tax due shown on your 2018 DC tax return. You must have been a DC resident during all of 2018 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 2018 and in that year, you lived in DC the entire 12 months;
- The tax due for 2019 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 2018 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 enter the underpayment interest amount on Line 42 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 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 before filing your D-40 return. If you complete this form after 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 39.

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 2018 DC Form D-40, Line 32. If your 2018 return was amended or corrected, multiply 110% times the corrected amount. You must have been a DC resident during all of 2018 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 2018, 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, enter the amount of underpayment interest on Line 42, page 3 of the D-40.
- If you are filing the D-2210 separately, pay the amount you owe. Attach payment to Form D-40P, Payment Voucher.

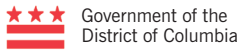
Make the check or money order (U.S. dollars) payable to the **DC Treasurer** and mail the D-2210 and D-40P with payment to:

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.



2019 D-40P Payment Voucher for Individual Income Tax



1 9 0 4 0 P 1 1 0 0 0 0 0
Official Use Only Vendor ID# 0000

Important: Print in CAPITAL letters using black ink.

Amount of payment \$ _____ 00 To avoid penalties and interest, your payment must be postmarked no later than April 15, 2020.

Your first name _____ M.I. _____ Last name _____

Spouse's/registered domestic partner's first name _____ M.I. _____ Last name _____

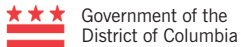
Your taxpayer identification number (TIN) _____ Spouse's/registered domestic partner's TIN _____ Taxpayer daytime telephone number _____

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

City _____ State _____ Zip Code + 4 _____

STAPLE CHECK OR MONEY ORDER HERE

Revised 05/19



2019 D-40P Payment Voucher for Individual Income Tax



1 9 0 4 0 P 1 1 0 0 0 0 0
Official Use Only Vendor ID# 0000

Important: Print in CAPITAL letters using black ink.

Amount of payment \$ _____ 00 To avoid penalties and interest, your payment must be postmarked no later than April 15, 2020.

Your first name _____ M.I. _____ Last name _____

Spouse's/registered domestic partner's first name _____ M.I. _____ Last name _____

Your taxpayer identification number (TIN) _____ Spouse's/registered domestic partner's TIN _____ Taxpayer daytime telephone number _____

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

City _____ State _____ Zip Code + 4 _____

STAPLE CHECK OR MONEY ORDER HERE

Revised 05/19

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

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

- Do not use this voucher to make estimated tax payments.
- Enter your name, taxpayer identification number (TIN) and address. If you are filing a joint return or filing separately on the same return, enter the name and TIN shown first on your return, then enter the name and TIN 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 TIN, the tax period and - D-40 - on your payment.
- To avoid penalties and interest, pay in full by April 15, 2020.
- Staple your payment to the D-40P voucher. Do not attach your payment to your D-40 return.
- Mail the D-40P **with**, but not attached to, your D-40 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

Dishonored Payments

Make sure your check or electronic payment will clear. You will be charged a \$65 fee if your check or electronic payment is not honored by your financial institution and returned to OTR.

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 15, 2020 deadline. By filing this form, you can receive an extension of time to file until October 15, 2020.

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

A filing extension is not an extension of the due date for paying 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 15, 2020.

If filing jointly, or filing separately on the same return, enter the taxpayer identification number (TIN) and name shown first on your D-40 return, then enter the TIN 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 the first 6-month extension by the April 15, 2020 deadline before applying for the additional

extension of time to file by October 15, 2020

Extensions for Members of US Armed Forces Deployed in a Combat Zone or Contingency Operation.

Deadlines for filing your return, paying your tax, claiming a refund, and taking other actions with OTR is extended for persons in the Armed Forces serving in a Combat Zone or Contingency Operation. The extension also applies to spouses/registered domestic partners, whether they file jointly or separately on the same return. See IRS Pub.3, Armed Forces Tax Guide for detailed information. Fill in the 'if Military Combat Zone' oval.

How to avoid penalties and interest.

You will be charged 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 penalty 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.

Dishonored Payments

Make sure your check or electronic payment will clear. You will be charged a \$65 fee if your check or electronic payment is not honored by your financial institution and returned to OTR.

If more than \$100,000, use Calculation I instructions on page 23.

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

Taxable income		Amount of tax	Taxable income		Amount of tax	Taxable income		Amount of tax	Taxable income		Amount of tax
\$0 - 2,499			\$2,500 - 4,999			\$5,000 - 7,499			\$7,500 - 9,999		
\$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
\$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
\$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

Taxable income		Amount of tax	Taxable income		Amount of tax	Taxable income		Amount of tax	Taxable income		Amount of tax
\$10,000 - 12,499			\$12,500 - 14,999			\$15,000 - 17,499			\$17,500 - 19,999		
\$10,000 -	10,049	\$402	\$12,500 -	12,549	\$552	\$15,000 -	15,049	\$702	\$17,500 -	17,549	\$852
10,050 -	10,099	405	12,550 -	12,599	555	15,050 -	15,099	705	17,550 -	17,599	855
10,100 -	10,149	408	12,600 -	12,649	558	15,100 -	15,149	708	17,600 -	17,649	858
10,150 -	10,199	411	12,650 -	12,699	561	15,150 -	15,199	711	17,650 -	17,699	861
10,200 -	10,249	414	12,700 -	12,749	564	15,200 -	15,249	714	17,700 -	17,749	864
10,250 -	10,299	417	12,750 -	12,799	567	15,250 -	15,299	717	17,750 -	17,799	867
10,300 -	10,349	420	12,800 -	12,849	570	15,300 -	15,349	720	17,800 -	17,849	870
10,350 -	10,399	423	12,850 -	12,899	573	15,350 -	15,399	723	17,850 -	17,899	873
10,400 -	10,449	426	12,900 -	12,949	576	15,400 -	15,449	726	17,900 -	17,949	876
10,450 -	10,499	429	12,950 -	12,999	579	15,450 -	15,499	729	17,950 -	17,999	879
10,500 -	10,549	432	\$13,000 -	13,049	\$582	15,500 -	15,549	732	\$18,000 -	18,049	\$882
10,550 -	10,599	435	13,050 -	13,099	585	15,550 -	15,599	735	18,050 -	18,099	885
10,600 -	10,649	438	13,100 -	13,149	588	15,600 -	15,649	738	18,100 -	18,149	888
10,650 -	10,699	441	13,150 -	13,199	591	15,650 -	15,699	741	18,150 -	18,199	891
10,700 -	10,749	444	13,200 -	13,249	594	15,700 -	15,749	744	18,200 -	18,249	894
10,750 -	10,799	447	13,250 -	13,299	597	15,750 -	15,799	747	18,250 -	18,299	897
10,800 -	10,849	450	13,300 -	13,349	600	15,800 -	15,849	750	18,300 -	18,349	900
10,850 -	10,899	453	13,350 -	13,399	603	15,850 -	15,899	753	18,350 -	18,399	903
10,900 -	10,949	456	13,400 -	13,449	606	15,900 -	15,949	756	18,400 -	18,449	906
10,950 -	10,999	459	13,450 -	13,499	609	15,950 -	15,999	759	18,450 -	18,499	909
\$11,000 -	11,049	\$462	13,500 -	13,549	612	\$16,000 -	16,049	\$762	18,500 -	18,549	912
11,050 -	11,099	465	13,550 -	13,599	615	16,050 -	16,099	765	18,550 -	18,599	915
11,100 -	11,149	468	13,600 -	13,649	618	16,100 -	16,149	768	18,600 -	18,649	918
11,150 -	11,199	471	13,650 -	13,699	621	16,150 -	16,199	771	18,650 -	18,699	921
11,200 -	11,249	474	13,700 -	13,749	624	16,200 -	16,249	774	18,700 -	18,749	924
11,250 -	11,299	477	13,750 -	13,799	627	16,250 -	16,299	777	18,750 -	18,799	927
11,300 -	11,349	480	13,800 -	13,849	630	16,300 -	16,349	780	18,800 -	18,849	930
11,350 -	11,399	483	13,850 -	13,899	633	16,350 -	16,399	783	18,850 -	18,899	933
11,400 -	11,449	486	13,900 -	13,949	636	16,400 -	16,449	786	18,900 -	18,949	936
11,450 -	11,499	489	13,950 -	13,999	639	16,450 -	16,499	789	18,950 -	18,999	939
11,500 -	11,549	492	\$14,000 -	14,049	\$642	16,500 -	16,549	792	\$19,000 -	19,049	\$942
11,550 -	11,599	495	14,050 -	14,099	645	16,550 -	16,599	795	19,050 -	19,099	945
11,600 -	11,649	498	14,100 -	14,149	648	16,600 -	16,649	798	19,100 -	19,149	948
11,650 -	11,699	501	14,150 -	14,199	651	16,650 -	16,699	801	19,150 -	19,199	951
11,700 -	11,749	504	14,200 -	14,249	654	16,700 -	16,749	804	19,200 -	19,249	954
11,750 -	11,799	507	14,250 -	14,299	657	16,750 -	16,799	807	19,250 -	19,299	957
11,800 -	11,849	510	14,300 -	14,349	660	16,800 -	16,849	810	19,300 -	19,349	960
11,850 -	11,899	513	14,350 -	14,399	663	16,850 -	16,899	813	19,350 -	19,399	963
11,900 -	11,949	516	14,400 -	14,449	666	16,900 -	16,949	816	19,400 -	19,449	966
11,950 -	11,999	519	14,450 -	14,499	669	16,950 -	16,999	819	19,450 -	19,499	969
\$12,000 -	12,049	\$522	14,500 -	14,549	672	\$17,000 -	17,049	\$822	19,500 -	19,549	972
12,050 -	12,099	525	14,550 -	14,599	675	17,050 -	17,099	825	19,550 -	19,599	975
12,100 -	12,149	528	14,600 -	14,649	678	17,100 -	17,149	828	19,600 -	19,649	978
12,150 -	12,199	531	14,650 -	14,699	681	17,150 -	17,199	831	19,650 -	19,699	981
12,200 -	12,249	534	14,700 -	14,749	684	17,200 -	17,249	834	19,700 -	19,749	984
12,250 -	12,299	537	14,750 -	14,799	687	17,250 -	17,299	837	19,750 -	19,799	987
12,300 -	12,349	540	14,800 -	14,849	690	17,300 -	17,349	840	19,800 -	19,849	990
12,350 -	12,399	543	14,850 -	14,899	693	17,350 -	17,399	843	19,850 -	19,899	993
12,400 -	12,449	546	14,900 -	14,949	696	17,400 -	17,449	846	19,900 -	19,949	996
12,450 -	12,499	549	14,950 -	14,999	699	17,450 -	17,499	849	19,950 -	19,999	999

Taxable income			Taxable income			Taxable income			Taxable income		
Amount of tax			Amount of tax			Amount of tax			Amount of tax		
\$20,000 - 22,499			\$22,500 - 24,999			\$25,000 - 27,499			\$27,500 - 29,999		
\$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	24,450 -	24,499	1,269	26,950 -	26,999	1,419	29,450 -	29,499	1,569
\$22,000 -	22,049	\$1,122	24,500 -	24,549	1,272	\$27,000 -	27,049	\$1,422	29,500 -	29,549	1,572
22,050 -	22,099	1,125	24,550 -	24,599	1,275	27,050 -	27,099	1,425	29,550 -	29,599	1,575
22,100 -	22,149	1,128	24,600 -	24,649	1,278	27,100 -	27,149	1,428	29,600 -	29,649	1,578
22,150 -	22,199	1,131	24,650 -	24,699	1,281	27,150 -	27,199	1,431	29,650 -	29,699	1,581
22,200 -	22,249	1,134	24,700 -	24,749	1,284	27,200 -	27,249	1,434	29,700 -	29,749	1,584
22,250 -	22,299	1,137	24,750 -	24,799	1,287	27,250 -	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	24,850 -	24,899	1,293	27,350 -	27,399	1,443	29,850 -	29,899	1,593
22,400 -	22,449	1,146	24,900 -	24,949	1,296	27,400 -	27,449	1,446	29,900 -	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			Taxable income			Taxable income			Taxable income		
\$30,000 - 32,499			\$32,500 - 34,999			\$35,000 - 37,499			\$37,500 - 39,999		
\$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	34,750 -	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		Amount of tax	Taxable income		Amount of tax	Taxable income		Amount of tax	Taxable income		Amount of tax
\$40,000 - 42,499			\$42,500 - 44,999			\$45,000 - 47,499			\$47,500 - 49,999		
\$40,000 -	40,049	\$2,202	\$42,500 -	42,549	\$2,364	\$45,000 -	45,049	\$2,527	\$47,500 -	47,549	\$2,689
40,050 -	40,099	2,205	42,550 -	42,599	2,367	45,050 -	45,099	2,530	47,550 -	47,599	2,692
40,100 -	40,149	2,208	42,600 -	42,649	2,371	45,100 -	45,149	2,533	47,600 -	47,649	2,696
40,150 -	40,199	2,211	42,650 -	42,699	2,374	45,150 -	45,199	2,536	47,650 -	47,699	2,699
40,200 -	40,249	2,215	42,700 -	42,749	2,377	45,200 -	45,249	2,540	47,700 -	47,749	2,702
40,250 -	40,299	2,218	42,750 -	42,799	2,380	45,250 -	45,299	2,543	47,750 -	47,799	2,705
40,300 -	40,349	2,221	42,800 -	42,849	2,384	45,300 -	45,349	2,546	47,800 -	47,849	2,709
40,350 -	40,399	2,224	42,850 -	42,899	2,387	45,350 -	45,399	2,549	47,850 -	47,899	2,712
40,400 -	40,449	2,228	42,900 -	42,949	2,390	45,400 -	45,449	2,553	47,900 -	47,949	2,715
40,450 -	40,499	2,231	42,950 -	42,999	2,393	45,450 -	45,499	2,556	47,950 -	47,999	2,718
40,500 -	40,549	2,234	\$43,000 -	43,049	\$2,397	45,500 -	45,549	2,559	\$48,000 -	48,049	\$2,722
40,550 -	40,599	2,237	43,050 -	43,099	2,400	45,550 -	45,599	2,562	48,050 -	48,099	2,725
40,600 -	40,649	2,241	43,100 -	43,149	2,403	45,600 -	45,649	2,566	48,100 -	48,149	2,728
40,650 -	40,699	2,244	43,150 -	43,199	2,406	45,650 -	45,699	2,569	48,150 -	48,199	2,731
40,700 -	40,749	2,247	43,200 -	43,249	2,410	45,700 -	45,749	2,572	48,200 -	48,249	2,735
40,750 -	40,799	2,250	43,250 -	43,299	2,413	45,750 -	45,799	2,575	48,250 -	48,299	2,738
40,800 -	40,849	2,254	43,300 -	43,349	2,416	45,800 -	45,849	2,579	48,300 -	48,349	2,741
40,850 -	40,899	2,257	43,350 -	43,399	2,419	45,850 -	45,899	2,582	48,350 -	48,399	2,744
40,900 -	40,949	2,260	43,400 -	43,449	2,423	45,900 -	45,949	2,585	48,400 -	48,449	2,748
40,950 -	40,999	2,263	43,450 -	43,499	2,426	45,950 -	45,999	\$2,588	48,450 -	48,499	2,751
\$41,000 -	41,049	\$2,267	43,500 -	43,549	2,429	\$46,000 -	46,049	\$2,592	48,500 -	48,549	2,754
41,050 -	41,099	2,270	43,550 -	43,599	2,432	46,050 -	46,099	2,595	48,550 -	48,599	2,757
41,100 -	41,149	2,273	43,600 -	43,649	2,436	46,100 -	46,149	2,598	48,600 -	48,649	2,761
41,150 -	41,199	2,276	43,650 -	43,699	2,439	46,150 -	46,199	2,601	48,650 -	48,699	2,764
41,200 -	41,249	2,280	43,700 -	43,749	2,442	46,200 -	46,249	2,605	48,700 -	48,749	2,767
41,250 -	41,299	2,283	43,750 -	43,799	2,445	46,250 -	46,299	2,608	48,750 -	48,799	2,770
41,300 -	41,349	2,286	43,800 -	43,849	2,449	46,300 -	46,349	2,611	48,800 -	48,849	2,774
41,350 -	41,399	2,289	43,850 -	43,899	2,452	46,350 -	46,399	2,614	48,850 -	48,899	2,777
41,400 -	41,449	2,293	43,900 -	43,949	2,455	46,400 -	46,449	2,618	48,900 -	48,949	2,780
41,450 -	41,499	2,296	43,950 -	43,999	2,458	46,450 -	46,499	2,621	48,950 -	48,999	\$2,783
41,500 -	41,549	2,299	\$44,000 -	44,049	\$2,462	46,500 -	46,549	2,624	\$49,000 -	49,049	\$2,787
41,550 -	41,599	2,302	44,050 -	44,099	2,465	46,550 -	46,599	2,627	49,050 -	49,099	2,790
41,600 -	41,649	2,306	44,100 -	44,149	2,468	46,600 -	46,649	2,631	49,100 -	49,149	2,793
41,650 -	41,699	2,309	44,150 -	44,199	2,471	46,650 -	46,699	2,634	49,150 -	49,199	2,796
41,700 -	41,749	2,312	44,200 -	44,249	2,475	46,700 -	46,749	2,637	49,200 -	49,249	2,800
41,750 -	41,799	2,315	44,250 -	44,299	2,478	46,750 -	46,799	2,640	49,250 -	49,299	2,803
41,800 -	41,849	2,319	44,300 -	44,349	2,481	46,800 -	46,849	2,644	49,300 -	49,349	2,806
41,850 -	41,899	2,322	44,350 -	44,399	2,484	46,850 -	46,899	2,647	49,350 -	49,399	2,809
41,900 -	41,949	2,325	44,400 -	44,449	2,488	46,900 -	46,949	2,650	49,400 -	49,449	2,813
41,950 -	41,999	2,328	44,450 -	44,499	2,491	46,950 -	46,999	2,653	49,450 -	49,499	2,816
\$42,000 -	42,049	\$2,332	44,500 -	44,549	2,494	\$47,000 -	47,049	\$2,657	49,500 -	49,549	2,819
42,050 -	42,099	2,335	44,550 -	44,599	2,497	47,050 -	47,099	2,660	49,550 -	49,599	2,822
42,100 -	42,149	2,338	44,600 -	44,649	2,501	47,100 -	47,149	2,663	49,600 -	49,649	2,826
42,150 -	42,199	2,341	44,650 -	44,699	2,504	47,150 -	47,199	2,666	49,650 -	49,699	2,829
42,200 -	42,249	2,345	44,700 -	44,749	2,507	47,200 -	47,249	2,670	49,700 -	49,749	2,832
42,250 -	42,299	2,348	44,750 -	44,799	2,510	47,250 -	47,299	2,673	49,750 -	49,799	2,835
42,300 -	42,349	2,351	44,800 -	44,849	2,514	47,300 -	47,349	2,676	49,800 -	49,849	2,839
42,350 -	42,399	2,354	44,850 -	44,899	2,517	47,350 -	47,399	2,679	49,850 -	49,899	2,842
42,400 -	42,449	2,358	44,900 -	44,949	2,520	47,400 -	47,449	2,683	49,900 -	49,949	2,845
42,450 -	42,499	2,361	44,950 -	44,999	2,523	47,450 -	47,499	2,686	49,950 -	49,999	2,848

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

Taxable income			Taxable income			Taxable income			Taxable income		
		Amount of tax			Amount of tax			Amount of tax			Amount of tax
\$50,000 - 52,499			\$52,500 - 54,999			\$55,000 - 57,499			\$57,500 - 59,999		
\$50,000 -	50,049	\$2,852	\$52,500 -	52,549	\$3,014	\$55,000 -	55,049	\$3,177	\$57,500 -	57,549	\$3,339
50,050 -	50,099	2,855	52,550 -	52,599	3,017	55,050 -	55,099	3,180	57,550 -	57,599	3,342
50,100 -	50,149	2,858	52,600 -	52,649	3,021	55,100 -	55,149	3,183	57,600 -	57,649	3,346
50,150 -	50,199	2,861	52,650 -	52,699	3,024	55,150 -	55,199	3,186	57,650 -	57,699	3,349
50,200 -	50,249	2,865	52,700 -	52,749	3,027	55,200 -	55,249	3,190	57,700 -	57,749	3,352
50,250 -	50,299	2,868	52,750 -	52,799	3,030	55,250 -	55,299	3,193	57,750 -	57,799	3,355
50,300 -	50,349	2,871	52,800 -	52,849	3,034	55,300 -	55,349	3,196	57,800 -	57,849	3,359
50,350 -	50,399	2,874	52,850 -	52,899	3,037	55,350 -	55,399	3,199	57,850 -	57,899	3,362
50,400 -	50,449	2,878	52,900 -	52,949	3,040	55,400 -	55,449	3,203	57,900 -	57,949	3,365
50,450 -	50,499	2,881	52,950 -	52,999	3,043	55,450 -	55,499	3,206	57,950 -	57,999	3,368
50,500 -	50,549	2,884	\$53,000 -	53,049	\$3,047	55,500 -	55,549	3,209	\$58,000 -	58,049	\$3,372
50,550 -	50,599	2,887	53,050 -	53,099	3,050	55,550 -	55,599	3,212	58,050 -	58,099	3,375
50,600 -	50,649	2,891	53,100 -	53,149	3,053	55,600 -	55,649	3,216	58,100 -	58,149	3,378
50,650 -	50,699	2,894	53,150 -	53,199	3,056	55,650 -	55,699	3,219	58,150 -	58,199	3,381
50,700 -	50,749	2,897	53,200 -	53,249	3,060	55,700 -	55,749	3,222	58,200 -	58,249	3,385
50,750 -	50,799	2,900	53,250 -	53,299	3,063	55,750 -	55,799	3,225	58,250 -	58,299	3,388
50,800 -	50,849	2,904	53,300 -	53,349	3,066	55,800 -	55,849	3,229	58,300 -	58,349	3,391
50,850 -	50,899	2,907	53,350 -	53,399	3,069	55,850 -	55,899	3,232	58,350 -	58,399	3,394
50,900 -	50,949	2,910	53,400 -	53,449	3,073	55,900 -	55,949	3,235	58,400 -	58,449	3,398
50,950 -	50,999	2,913	53,450 -	53,499	3,076	55,950 -	55,999	3,238	58,450 -	58,499	3,401
\$51,000 -	51,049	\$2,917	53,500 -	53,549	3,079	\$56,000 -	56,049	\$3,242	58,500 -	58,549	3,404
51,050 -	51,099	2,920	53,550 -	53,599	3,082	56,050 -	56,099	3,245	58,550 -	58,599	3,407
51,100 -	51,149	2,923	53,600 -	53,649	3,086	56,100 -	56,149	3,248	58,600 -	58,649	3,411
51,150 -	51,199	2,926	53,650 -	53,699	3,089	56,150 -	56,199	3,251	58,650 -	58,699	3,414
51,200 -	51,249	2,930	53,700 -	53,749	3,092	56,200 -	56,249	3,255	58,700 -	58,749	3,417
51,250 -	51,299	2,933	53,750 -	53,799	3,095	56,250 -	56,299	3,258	58,750 -	58,799	3,420
51,300 -	51,349	2,936	53,800 -	53,849	3,099	56,300 -	56,349	3,261	58,800 -	58,849	3,424
51,350 -	51,399	2,939	53,850 -	53,899	3,102	56,350 -	56,399	3,264	58,850 -	58,899	3,427
51,400 -	51,449	2,943	53,900 -	53,949	3,105	56,400 -	56,449	3,268	58,900 -	58,949	3,430
51,450 -	51,499	2,946	53,950 -	53,999	3,108	56,450 -	56,499	3,271	58,950 -	58,999	3,433
51,500 -	51,549	2,949	\$54,000 -	54,049	\$3,112	56,500 -	56,549	3,274	\$59,000 -	59,049	\$3,437
51,550 -	51,599	2,952	54,050 -	54,099	3,115	56,550 -	56,599	3,277	59,050 -	59,099	3,440
51,600 -	51,649	2,956	54,100 -	54,149	3,118	56,600 -	56,649	3,281	59,100 -	59,149	3,443
51,650 -	51,699	2,959	54,150 -	54,199	3,121	56,650 -	56,699	3,284	59,150 -	59,199	3,446
51,700 -	51,749	2,962	54,200 -	54,249	3,125	56,700 -	56,749	3,287	59,200 -	59,249	3,450
51,750 -	51,799	2,965	54,250 -	54,299	3,128	56,750 -	56,799	3,290	59,250 -	59,299	3,453
51,800 -	51,849	2,969	54,300 -	54,349	3,131	56,800 -	56,849	3,294	59,300 -	59,349	3,456
51,850 -	51,899	2,972	54,350 -	54,399	3,134	56,850 -	56,899	3,297	59,350 -	59,399	3,459
51,900 -	51,949	2,975	54,400 -	54,449	3,138	56,900 -	56,949	3,300	59,400 -	59,449	3,463
51,950 -	51,999	2,978	54,450 -	54,499	3,141	56,950 -	56,999	3,303	59,450 -	59,499	3,466
\$52,000 -	52,049	\$2,982	54,500 -	54,549	3,144	\$57,000 -	57,049	\$3,307	59,500 -	59,549	3,469
52,050 -	52,099	2,985	54,550 -	54,599	3,147	57,050 -	57,099	3,310	59,550 -	59,599	3,472
52,100 -	52,149	2,988	54,600 -	54,649	3,151	57,100 -	57,149	3,313	59,600 -	59,649	3,476
52,150 -	52,199	2,991	54,650 -	54,699	3,154	57,150 -	57,199	3,316	59,650 -	59,699	3,479
52,200 -	52,249	2,995	54,700 -	54,749	3,157	57,200 -	57,249	3,320	59,700 -	59,749	3,482
52,250 -	52,299	2,998	54,750 -	54,799	3,160	57,250 -	57,299	3,323	59,750 -	59,799	3,485
52,300 -	52,349	3,001	54,800 -	54,849	3,164	57,300 -	57,349	3,326	59,800 -	59,849	3,489
52,350 -	52,399	3,004	54,850 -	54,899	3,167	57,350 -	57,399	3,329	59,850 -	59,899	3,492
52,400 -	52,449	3,008	54,900 -	54,949	3,170	57,400 -	57,449	3,333	59,900 -	59,949	3,495
52,450 -	52,499	3,011	54,950 -	54,999	3,173	57,450 -	57,499	3,336	59,950 -	59,999	3,498

Taxable income			Taxable income			Taxable income			Taxable income		
\$60,000 - 62,499			\$62,500 - 64,999			\$65,000 - 67,499			\$67,500 - 69,999		
\$60,000 - 60,049	\$3,501	60,049	\$62,500 - 62,549	\$3,714	62,549	\$65,000 - 65,049	\$3,926	65,049	\$67,500 - 67,549	\$4,139	67,549
60,050 - 60,099	3,505	60,099	62,550 - 62,599	3,718	62,599	65,050 - 65,099	3,930	65,099	67,550 - 67,599	4,143	67,599
60,100 - 60,149	3,510	60,149	62,600 - 62,649	3,722	62,649	65,100 - 65,149	3,935	65,149	67,600 - 67,649	4,147	67,649
60,150 - 60,199	3,514	60,199	62,650 - 62,699	3,726	62,699	65,150 - 65,199	3,939	65,199	67,650 - 67,699	4,151	67,699
60,200 - 60,249	3,518	60,249	62,700 - 62,749	3,731	62,749	65,200 - 65,249	3,943	65,249	67,700 - 67,749	4,156	67,749
60,250 - 60,299	3,522	60,299	62,750 - 62,799	3,735	62,799	65,250 - 65,299	3,947	65,299	67,750 - 67,799	4,160	67,799
60,300 - 60,349	3,527	60,349	62,800 - 62,849	3,739	62,849	65,300 - 65,349	3,952	65,349	67,800 - 67,849	4,164	67,849
60,350 - 60,399	3,531	60,399	62,850 - 62,899	3,743	62,899	65,350 - 65,399	3,956	65,399	67,850 - 67,899	4,168	67,899
60,400 - 60,449	3,535	60,449	62,900 - 62,949	3,748	62,949	65,400 - 65,449	3,960	65,449	67,900 - 67,949	4,173	67,949
60,450 - 60,499	3,539	60,499	62,950 - 62,999	3,752	62,999	65,450 - 65,499	3,964	65,499	67,950 - 67,999	4,177	67,999
60,500 - 60,549	3,544	60,549	\$63,000 - 63,049	\$3,756	63,049	65,500 - 65,549	3,969	65,549	\$68,000 - 68,049	\$4,181	68,049
60,550 - 60,599	3,548	60,599	63,050 - 63,099	3,760	63,099	65,550 - 65,599	3,973	65,599	68,050 - 68,099	4,185	68,099
60,600 - 60,649	3,552	60,649	63,100 - 63,149	3,765	63,149	65,600 - 65,649	3,977	65,649	68,100 - 68,149	4,190	68,149
60,650 - 60,699	3,556	60,699	63,150 - 63,199	3,769	63,199	65,650 - 65,699	3,981	65,699	68,150 - 68,199	4,194	68,199
60,700 - 60,749	3,561	60,749	63,200 - 63,249	3,773	63,249	65,700 - 65,749	3,986	65,749	68,200 - 68,249	4,198	68,249
60,750 - 60,799	3,565	60,799	63,250 - 63,299	3,777	63,299	65,750 - 65,799	3,990	65,799	68,250 - 68,299	4,202	68,299
60,800 - 60,849	3,569	60,849	63,300 - 63,349	3,782	63,349	65,800 - 65,849	3,994	65,849	68,300 - 68,349	4,207	68,349
60,850 - 60,899	3,573	60,899	63,350 - 63,399	3,786	63,399	65,850 - 65,899	3,998	65,899	68,350 - 68,399	4,211	68,399
60,900 - 60,949	3,578	60,949	63,400 - 63,449	3,790	63,449	65,900 - 65,949	4,003	65,949	68,400 - 68,449	4,215	68,449
60,950 - 60,999	3,582	60,999	63,450 - 63,499	3,794	63,499	65,950 - 65,999	4,007	65,999	68,450 - 68,499	4,219	68,499
\$61,000 - 61,049	\$3,586	61,049	63,500 - 63,549	3,799	63,549	\$66,000 - 66,049	\$4,011	66,049	68,500 - 68,549	4,224	68,549
61,050 - 61,099	3,590	61,099	63,550 - 63,599	3,803	63,599	66,050 - 66,099	4,015	66,099	68,550 - 68,599	4,228	68,599
61,100 - 61,149	3,595	61,149	63,600 - 63,649	3,807	63,649	66,100 - 66,149	4,020	66,149	68,600 - 68,649	4,232	68,649
61,150 - 61,199	3,599	61,199	63,650 - 63,699	3,811	63,699	66,150 - 66,199	4,024	66,199	68,650 - 68,699	4,236	68,699
61,200 - 61,249	3,603	61,249	63,700 - 63,749	3,816	63,749	66,200 - 66,249	4,028	66,249	68,700 - 68,749	4,241	68,749
61,250 - 61,299	3,607	61,299	63,750 - 63,799	3,820	63,799	66,250 - 66,299	4,032	66,299	68,750 - 68,799	4,245	68,799
61,300 - 61,349	3,612	61,349	63,800 - 63,849	3,824	63,849	66,300 - 66,349	4,037	66,349	68,800 - 68,849	4,249	68,849
61,350 - 61,399	3,616	61,399	63,850 - 63,899	3,828	63,899	66,350 - 66,399	4,041	66,399	68,850 - 68,899	4,253	68,899
61,400 - 61,449	3,620	61,449	63,900 - 63,949	3,833	63,949	66,400 - 66,449	4,045	66,449	68,900 - 68,949	4,258	68,949
61,450 - 61,499	3,624	61,499	63,950 - 63,999	3,837	63,999	66,450 - 66,499	4,049	66,499	68,950 - 68,999	4,262	68,999
61,500 - 61,549	3,629	61,549	\$64,000 - 64,049	\$3,841	64,049	66,500 - 66,549	4,054	66,549	\$69,000 - 69,049	\$4,266	69,049
61,550 - 61,599	3,633	61,599	64,050 - 64,099	3,845	64,099	66,550 - 66,599	4,058	66,599	69,050 - 69,099	4,270	69,099
61,600 - 61,649	3,637	61,649	64,100 - 64,149	3,850	64,149	66,600 - 66,649	4,062	66,649	69,100 - 69,149	4,275	69,149
61,650 - 61,699	3,641	61,699	64,150 - 64,199	3,854	64,199	66,650 - 66,699	4,066	66,699	69,150 - 69,199	4,279	69,199
61,700 - 61,749	3,646	61,749	64,200 - 64,249	3,858	64,249	66,700 - 66,749	4,071	66,749	69,200 - 69,249	4,283	69,249
61,750 - 61,799	3,650	61,799	64,250 - 64,299	3,862	64,299	66,750 - 66,799	4,075	66,799	69,250 - 69,299	4,287	69,299
61,800 - 61,849	3,654	61,849	64,300 - 64,349	3,867	64,349	66,800 - 66,849	4,079	66,849	69,300 - 69,349	4,292	69,349
61,850 - 61,899	3,658	61,899	64,350 - 64,399	3,871	64,399	66,850 - 66,899	4,083	66,899	69,350 - 69,399	4,296	69,399
61,900 - 61,949	3,663	61,949	64,400 - 64,449	3,875	64,449	66,900 - 66,949	4,088	66,949	69,400 - 69,449	4,300	69,449
61,950 - 61,999	3,667	61,999	64,450 - 64,499	3,879	64,499	66,950 - 66,999	4,092	66,999	69,450 - 69,499	4,304	69,499
\$62,000 - 62,049	\$3,671	62,049	64,500 - 64,549	3,884	64,549	\$67,000 - 67,049	\$4,096	67,049	69,500 - 69,549	4,309	69,549
62,050 - 62,099	3,675	62,099	64,550 - 64,599	3,888	64,599	67,050 - 67,099	4,100	67,099	69,550 - 69,599	4,313	69,599
62,100 - 62,149	3,680	62,149	64,600 - 64,649	3,892	64,649	67,100 - 67,149	4,105	67,149	69,600 - 69,649	4,317	69,649
62,150 - 62,199	3,684	62,199	64,650 - 64,699	3,896	64,699	67,150 - 67,199	4,109	67,199	69,650 - 69,699	4,321	69,699
62,200 - 62,249	3,688	62,249	64,700 - 64,749	3,901	64,749	67,200 - 67,249	4,113	67,249	69,700 - 69,749	4,326	69,749
62,250 - 62,299	3,692	62,299	64,750 - 64,799	3,905	64,799	67,250 - 67,299	4,117	67,299	69,750 - 69,799	4,330	69,799
62,300 - 62,349	3,697	62,349	64,800 - 64,849	3,909	64,849	67,300 - 67,349	4,122	67,349	69,800 - 69,849	4,334	69,849
62,350 - 62,399	3,701	62,399	64,850 - 64,899	3,913	64,899	67,350 - 67,399	4,126	67,399	69,850 - 69,899	4,338	69,899
62,400 - 62,449	3,705	62,449	64,900 - 64,949	3,918	64,949	67,400 - 67,449	4,130	67,449	69,900 - 69,949	4,343	69,949
62,450 - 62,499	3,709	62,499	64,950 - 64,999	3,922	64,999	67,450 - 67,499	4,134	67,499	69,950 - 69,999	4,347	69,999

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

Taxable income		Amount of tax	Taxable income		Amount of tax	Taxable income		Amount of tax	Taxable income		Amount of tax
\$70,000 - 72,499			\$72,500 - 74,999			\$75,000 - 77,499			\$77,500 - 79,999		
\$70,000 - 70,049	70,049	\$4,351	\$72,500 - 72,549	72,549	\$4,564	\$75,000 - 75,049	75,049	\$4,776	\$77,500 - 77,549	77,549	\$4,989
70,050 - 70,099	70,099	4,355	72,550 - 72,599	72,599	4,568	75,050 - 75,099	75,099	4,780	77,550 - 77,599	77,599	4,993
70,100 - 70,149	70,149	4,360	72,600 - 72,649	72,649	4,572	75,100 - 75,149	75,149	4,785	77,600 - 77,649	77,649	4,997
70,150 - 70,199	70,199	4,364	72,650 - 72,699	72,699	4,576	75,150 - 75,199	75,199	4,789	77,650 - 77,699	77,699	5,001
70,200 - 70,249	70,249	4,368	72,700 - 72,749	72,749	4,581	75,200 - 75,249	75,249	4,793	77,700 - 77,749	77,749	5,006
70,250 - 70,299	70,299	4,372	72,750 - 72,799	72,799	4,585	75,250 - 75,299	75,299	4,797	77,750 - 77,799	77,799	5,010
70,300 - 70,349	70,349	4,377	72,800 - 72,849	72,849	4,589	75,300 - 75,349	75,349	4,802	77,800 - 77,849	77,849	5,014
70,350 - 70,399	70,399	4,381	72,850 - 72,899	72,899	4,593	75,350 - 75,399	75,399	4,806	77,850 - 77,899	77,899	5,018
70,400 - 70,449	70,449	4,385	72,900 - 72,949	72,949	4,598	75,400 - 75,449	75,449	4,810	77,900 - 77,949	77,949	5,023
70,450 - 70,499	70,499	4,389	72,950 - 72,999	72,999	4,602	75,450 - 75,499	75,499	4,814	77,950 - 77,999	77,999	5,027
70,500 - 70,549	70,549	4,394	\$73,000 - 73,049	73,049	\$4,606	75,500 - 75,549	75,549	4,819	\$78,000 - 78,049	78,049	\$5,031
70,550 - 70,599	70,599	4,398	73,050 - 73,099	73,099	4,610	75,550 - 75,599	75,599	4,823	78,050 - 78,099	78,099	5,035
70,600 - 70,649	70,649	4,402	73,100 - 73,149	73,149	4,615	75,600 - 75,649	75,649	4,827	78,100 - 78,149	78,149	5,040
70,650 - 70,699	70,699	4,406	73,150 - 73,199	73,199	4,619	75,650 - 75,699	75,699	4,831	78,150 - 78,199	78,199	5,044
70,700 - 70,749	70,749	4,411	73,200 - 73,249	73,249	4,623	75,700 - 75,749	75,749	4,836	78,200 - 78,249	78,249	5,048
70,750 - 70,799	70,799	4,415	73,250 - 73,299	73,299	4,627	75,750 - 75,799	75,799	4,840	78,250 - 78,299	78,299	5,052
70,800 - 70,849	70,849	4,419	73,300 - 73,349	73,349	4,632	75,800 - 75,849	75,849	4,844	78,300 - 78,349	78,349	5,057
70,850 - 70,899	70,899	4,423	73,350 - 73,399	73,399	4,636	75,850 - 75,899	75,899	4,848	78,350 - 78,399	78,399	5,061
70,900 - 70,949	70,949	4,428	73,400 - 73,449	73,449	4,640	75,900 - 75,949	75,949	4,853	78,400 - 78,449	78,449	5,065
70,950 - 70,999	70,999	4,432	73,450 - 73,499	73,499	4,644	75,950 - 75,999	75,999	4,857	78,450 - 78,499	78,499	5,069
\$71,000 - 71,049	71,049	\$4,436	73,500 - 73,549	73,549	4,649	\$76,000 - 76,049	76,049	\$4,861	78,500 - 78,549	78,549	5,074
71,050 - 71,099	71,099	4,440	73,550 - 73,599	73,599	4,653	76,050 - 76,099	76,099	4,865	78,550 - 78,599	78,599	5,078
71,100 - 71,149	71,149	4,445	73,600 - 73,649	73,649	4,657	76,100 - 76,149	76,149	4,870	78,600 - 78,649	78,649	5,082
71,150 - 71,199	71,199	4,449	73,650 - 73,699	73,699	4,661	76,150 - 76,199	76,199	4,874	78,650 - 78,699	78,699	5,086
71,200 - 71,249	71,249	4,453	73,700 - 73,749	73,749	4,666	76,200 - 76,249	76,249	4,878	78,700 - 78,749	78,749	5,091
71,250 - 71,299	71,299	4,457	73,750 - 73,799	73,799	4,670	76,250 - 76,299	76,299	4,882	78,750 - 78,799	78,799	5,095
71,300 - 71,349	71,349	4,462	73,800 - 73,849	73,849	4,674	76,300 - 76,349	76,349	4,887	78,800 - 78,849	78,849	5,099
71,350 - 71,399	71,399	4,466	73,850 - 73,899	73,899	4,678	76,350 - 76,399	76,399	4,891	78,850 - 78,899	78,899	5,103
71,400 - 71,449	71,449	4,470	73,900 - 73,949	73,949	4,683	76,400 - 76,449	76,449	4,895	78,900 - 78,949	78,949	5,108
71,450 - 71,499	71,499	4,474	73,950 - 73,999	73,999	4,687	76,450 - 76,499	76,499	4,899	78,950 - 78,999	78,999	5,112
71,500 - 71,549	71,549	4,479	\$74,000 - 74,049	74,049	\$4,691	76,500 - 76,549	76,549	4,904	\$79,000 - 79,049	79,049	\$5,116
71,550 - 71,599	71,599	4,483	74,050 - 74,099	74,099	4,695	76,550 - 76,599	76,599	4,908	79,050 - 79,099	79,099	5,120
71,600 - 71,649	71,649	4,487	74,100 - 74,149	74,149	4,700	76,600 - 76,649	76,649	4,912	79,100 - 79,149	79,149	5,125
71,650 - 71,699	71,699	4,491	74,150 - 74,199	74,199	4,704	76,650 - 76,699	76,699	4,916	79,150 - 79,199	79,199	5,129
71,700 - 71,749	71,749	4,496	74,200 - 74,249	74,249	4,708	76,700 - 76,749	76,749	4,921	79,200 - 79,249	79,249	5,133
71,750 - 71,799	71,799	4,500	74,250 - 74,299	74,299	4,712	76,750 - 76,799	76,799	4,925	79,250 - 79,299	79,299	5,137
71,800 - 71,849	71,849	4,504	74,300 - 74,349	74,349	4,717	76,800 - 76,849	76,849	4,929	79,300 - 79,349	79,349	5,142
71,850 - 71,899	71,899	4,508	74,350 - 74,399	74,399	4,721	76,850 - 76,899	76,899	4,933	79,350 - 79,399	79,399	5,146
71,900 - 71,949	71,949	4,513	74,400 - 74,449	74,449	4,725	76,900 - 76,949	76,949	4,938	79,400 - 79,449	79,449	5,150
71,950 - 71,999	71,999	4,517	74,450 - 74,499	74,499	4,729	76,950 - 76,999	76,999	4,942	79,450 - 79,499	79,499	5,154
\$72,000 - 72,049	72,049	\$4,521	74,500 - 74,549	74,549	4,734	\$77,000 - 77,049	77,049	\$4,946	79,500 - 79,549	79,549	5,159
72,050 - 72,099	72,099	4,525	74,550 - 74,599	74,599	4,738	77,050 - 77,099	77,099	4,950	79,550 - 79,599	79,599	5,163
72,100 - 72,149	72,149	4,530	74,600 - 74,649	74,649	4,742	77,100 - 77,149	77,149	4,955	79,600 - 79,649	79,649	5,167
72,150 - 72,199	72,199	4,534	74,650 - 74,699	74,699	4,746	77,150 - 77,199	77,199	4,959	79,650 - 79,699	79,699	5,171
72,200 - 72,249	72,249	4,538	74,700 - 74,749	74,749	4,751	77,200 - 77,249	77,249	4,963	79,700 - 79,749	79,749	5,176
72,250 - 72,299	72,299	4,542	74,750 - 74,799	74,799	4,755	77,250 - 77,299	77,299	4,967	79,750 - 79,799	79,799	5,180
72,300 - 72,349	72,349	4,547	74,800 - 74,849	74,849	4,759	77,300 - 77,349	77,349	4,972	79,800 - 79,849	79,849	5,184
72,350 - 72,399	72,399	4,551	74,850 - 74,899	74,899	4,763	77,350 - 77,399	77,399	4,976	79,850 - 79,899	79,899	5,188
72,400 - 72,449	72,449	4,555	74,900 - 74,949	74,949	4,768	77,400 - 77,449	77,449	4,980	79,900 - 79,949	79,949	5,193
72,450 - 72,499	72,499	4,559	74,950 - 74,999	74,999	4,772	77,450 - 77,499	77,499	4,984	79,950 - 79,999	79,999	5,197

Taxable income		Amount of tax	Taxable income		Amount of tax	Taxable income		Amount of tax	Taxable income		Amount of tax
\$80,000 - 82,499			\$82,500 - 84,999			\$85,000 - 87,499			\$87,500 - 89,999		
\$80,000 -	80,049	\$5,201	\$82,500 -	82,549	\$5,414	\$85,000 -	85,049	\$5,626	\$87,500 -	87,549	\$5,839
80,050 -	80,099	5,205	82,550 -	82,599	5,418	85,050 -	85,099	5,630	87,550 -	87,599	5,843
80,100 -	80,149	5,210	82,600 -	82,649	5,422	85,100 -	85,149	5,635	87,600 -	87,649	5,847
80,150 -	80,199	5,214	82,650 -	82,699	5,426	85,150 -	85,199	5,639	87,650 -	87,699	5,851
80,200 -	80,249	5,218	82,700 -	82,749	5,431	85,200 -	85,249	5,643	87,700 -	87,749	5,856
80,250 -	80,299	5,222	82,750 -	82,799	5,435	85,250 -	85,299	5,647	87,750 -	87,799	5,860
80,300 -	80,349	5,227	82,800 -	82,849	5,439	85,300 -	85,349	5,652	87,800 -	87,849	5,864
80,350 -	80,399	5,231	82,850 -	82,899	5,443	85,350 -	85,399	5,656	87,850 -	87,899	5,868
80,400 -	80,449	5,235	82,900 -	82,949	5,448	85,400 -	85,449	5,660	87,900 -	87,949	5,873
80,450 -	80,499	5,239	82,950 -	82,999	5,452	85,450 -	85,499	5,664	87,950 -	87,999	5,877
80,500 -	80,549	5,244	\$83,000 -	83,049	\$5,456	85,500 -	85,549	5,669	\$88,000 -	88,049	\$5,881
80,550 -	80,599	5,248	83,050 -	83,099	5,460	85,550 -	85,599	5,673	88,050 -	88,099	5,885
80,600 -	80,649	5,252	83,100 -	83,149	5,465	85,600 -	85,649	5,677	88,100 -	88,149	5,890
80,650 -	80,699	5,256	83,150 -	83,199	5,469	85,650 -	85,699	5,681	88,150 -	88,199	5,894
80,700 -	80,749	5,261	83,200 -	83,249	5,473	85,700 -	85,749	5,686	88,200 -	88,249	5,898
80,750 -	80,799	5,265	83,250 -	83,299	5,477	85,750 -	85,799	5,690	88,250 -	88,299	5,902
80,800 -	80,849	5,269	83,300 -	83,349	5,482	85,800 -	85,849	5,694	88,300 -	88,349	5,907
80,850 -	80,899	5,273	83,350 -	83,399	5,486	85,850 -	85,899	5,698	88,350 -	88,399	5,911
80,900 -	80,949	5,278	83,400 -	83,449	5,490	85,900 -	85,949	5,703	88,400 -	88,449	5,915
80,950 -	80,999	5,282	83,450 -	83,499	5,494	85,950 -	85,999	5,707	88,450 -	88,499	5,919
\$81,000 -	81,049	\$5,286	83,500 -	83,549	5,499	\$86,000 -	86,049	\$5,711	88,500 -	88,549	5,924
81,050 -	81,099	5,290	83,550 -	83,599	5,503	86,050 -	86,099	5,715	88,550 -	88,599	5,928
81,100 -	81,149	5,295	83,600 -	83,649	5,507	86,100 -	86,149	5,720	88,600 -	88,649	5,932
81,150 -	81,199	5,299	83,650 -	83,699	5,511	86,150 -	86,199	5,724	88,650 -	88,699	5,936
81,200 -	81,249	5,303	83,700 -	83,749	5,516	86,200 -	86,249	5,728	88,700 -	88,749	5,941
81,250 -	81,299	5,307	83,750 -	83,799	5,520	86,250 -	86,299	5,732	88,750 -	88,799	5,945
81,300 -	81,349	5,312	83,800 -	83,849	5,524	86,300 -	86,349	5,737	88,800 -	88,849	5,949
81,350 -	81,399	5,316	83,850 -	83,899	5,528	86,350 -	86,399	5,741	88,850 -	88,899	5,953
81,400 -	81,449	5,320	83,900 -	83,949	5,533	86,400 -	86,449	5,745	88,900 -	88,949	5,958
81,450 -	81,499	5,324	83,950 -	83,999	5,537	86,450 -	86,499	5,749	88,950 -	88,999	5,962
81,500 -	81,549	5,329	\$84,000 -	84,049	\$5,541	86,500 -	86,549	5,754	\$89,000 -	89,049	\$5,966
81,550 -	81,599	5,333	84,050 -	84,099	5,545	86,550 -	86,599	5,758	89,050 -	89,099	5,970
81,600 -	81,649	5,337	84,100 -	84,149	5,550	86,600 -	86,649	5,762	89,100 -	89,149	5,975
81,650 -	81,699	5,341	84,150 -	84,199	5,554	86,650 -	86,699	5,766	89,150 -	89,199	5,979
81,700 -	81,749	5,346	84,200 -	84,249	5,558	86,700 -	86,749	5,771	89,200 -	89,249	5,983
81,750 -	81,799	5,350	84,250 -	84,299	5,562	86,750 -	86,799	5,775	89,250 -	89,299	5,987
81,800 -	81,849	5,354	84,300 -	84,349	5,567	86,800 -	86,849	5,779	89,300 -	89,349	5,992
81,850 -	81,899	5,358	84,350 -	84,399	5,571	86,850 -	86,899	5,783	89,350 -	89,399	5,996
81,900 -	81,949	5,363	84,400 -	84,449	5,575	86,900 -	86,949	5,788	89,400 -	89,449	6,000
81,950 -	81,999	5,367	84,450 -	84,499	5,579	86,950 -	86,999	5,792	89,450 -	89,499	6,004
\$82,000 -	82,049	\$5,371	84,500 -	84,549	5,584	\$87,000 -	87,049	\$5,796	89,500 -	89,549	6,009
82,050 -	82,099	5,375	84,550 -	84,599	5,588	87,050 -	87,099	5,800	89,550 -	89,599	6,013
82,100 -	82,149	5,380	84,600 -	84,649	5,592	87,100 -	87,149	5,805	89,600 -	89,649	6,017
82,150 -	82,199	5,384	84,650 -	84,699	5,596	87,150 -	87,199	5,809	89,650 -	89,699	6,021
82,200 -	82,249	5,388	84,700 -	84,749	5,601	87,200 -	87,249	5,813	89,700 -	89,749	6,026
82,250 -	82,299	5,392	84,750 -	84,799	5,605	87,250 -	87,299	5,817	89,750 -	89,799	6,030
82,300 -	82,349	5,397	84,800 -	84,849	5,609	87,300 -	87,349	5,822	89,800 -	89,849	6,034
82,350 -	82,399	5,401	84,850 -	84,899	5,613	87,350 -	87,399	5,826	89,850 -	89,899	6,038
82,400 -	82,449	5,405	84,900 -	84,949	5,618	87,400 -	87,449	5,830	89,900 -	89,949	6,043
82,450 -	82,499	5,409	84,950 -	84,999	5,622	87,450 -	87,499	5,834	89,950 -	89,999	6,047

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

Taxable income		Amount of tax	Taxable income		Amount of tax	Taxable income		Amount of tax	Taxable income		Amount of tax
\$90,000 - 92,499			\$92,500 - 94,999			\$95,000 - 97,499			\$97,500 - 99,999		
\$90,000 -	90,049	6,051	\$92,500 -	92,549	\$6,264	\$95,000 -	95,049	\$6,476	\$97,500 -	97,549	\$6,689
90,050 -	90,099	6,055	92,550 -	92,599	6,268	95,050 -	95,099	6,480	97,550 -	97,599	6,693
90,100 -	90,149	6,060	92,600 -	92,649	6,272	95,100 -	95,149	6,485	97,600 -	97,649	6,697
90,150 -	90,199	6,064	92,650 -	92,699	6,276	95,150 -	95,199	6,489	97,650 -	97,699	6,701
90,200 -	90,249	6,068	92,700 -	92,749	6,281	95,200 -	95,249	6,493	97,700 -	97,749	6,706
90,250 -	90,299	6,072	92,750 -	92,799	6,285	95,250 -	95,299	6,497	97,750 -	97,799	6,710
90,300 -	90,349	6,077	92,800 -	92,849	6,289	95,300 -	95,349	6,502	97,800 -	97,849	6,714
90,350 -	90,399	6,081	92,850 -	92,899	6,293	95,350 -	95,399	6,506	97,850 -	97,899	6,718
90,400 -	90,449	6,085	92,900 -	92,949	6,298	95,400 -	95,449	6,510	97,900 -	97,949	6,723
90,450 -	90,499	6,089	92,950 -	92,999	6,302	95,450 -	95,499	6,514	97,950 -	97,999	6,727
90,500 -	90,549	6,094	\$93,000 -	93,049	\$6,306	95,500 -	95,549	6,519	\$98,000 -	98,049	\$6,731
90,550 -	90,599	6,098	93,050 -	93,099	6,310	95,550 -	95,599	6,523	98,050 -	98,099	6,735
90,600 -	90,649	6,102	93,100 -	93,149	6,315	95,600 -	95,649	6,527	98,100 -	98,149	6,740
90,650 -	90,699	6,106	93,150 -	93,199	6,319	95,650 -	95,699	6,531	98,150 -	98,199	6,744
90,700 -	90,749	6,111	93,200 -	93,249	6,323	95,700 -	95,749	6,536	98,200 -	98,249	6,748
90,750 -	90,799	6,115	93,250 -	93,299	6,327	95,750 -	95,799	6,540	98,250 -	98,299	6,752
90,800 -	90,849	6,119	93,300 -	93,349	6,332	95,800 -	95,849	6,544	98,300 -	98,349	6,757
90,850 -	90,899	6,123	93,350 -	93,399	6,336	95,850 -	95,899	6,548	98,350 -	98,399	6,761
90,900 -	90,949	6,128	93,400 -	93,449	6,340	95,900 -	95,949	6,553	98,400 -	98,449	6,765
90,950 -	90,999	6,132	93,450 -	93,499	6,344	95,950 -	95,999	\$6,557	98,450 -	98,499	6,769
\$91,000 -	91,049	\$6,136	93,500 -	93,549	6,349	\$96,000 -	96,049	\$6,561	98,500 -	98,549	6,774
91,050 -	91,099	6,140	93,550 -	93,599	6,353	96,050 -	96,099	6,565	98,550 -	98,599	6,778
91,100 -	91,149	6,145	93,600 -	93,649	6,357	96,100 -	96,149	6,570	98,600 -	98,649	6,782
91,150 -	91,199	6,149	93,650 -	93,699	6,361	96,150 -	96,199	6,574	98,650 -	98,699	6,786
91,200 -	91,249	6,153	93,700 -	93,749	6,366	96,200 -	96,249	6,578	98,700 -	98,749	6,791
91,250 -	91,299	6,157	93,750 -	93,799	6,370	96,250 -	96,299	6,582	98,750 -	98,799	6,795
91,300 -	91,349	6,162	93,800 -	93,849	6,374	96,300 -	96,349	6,587	98,800 -	98,849	6,799
91,350 -	91,399	6,166	93,850 -	93,899	6,378	96,350 -	96,399	6,591	98,850 -	98,899	6,803
91,400 -	91,449	6,170	93,900 -	93,949	6,383	96,400 -	96,449	6,595	98,900 -	98,949	6,808
91,450 -	91,499	6,174	93,950 -	93,999	6,387	96,450 -	96,499	6,599	98,950 -	98,999	6,812
91,500 -	91,549	6,179	\$94,000 -	94,049	\$6,391	96,500 -	96,549	6,604	\$99,000 -	99,049	\$6,816
91,550 -	91,599	6,183	94,050 -	94,099	6,395	96,550 -	96,599	6,608	99,050 -	99,099	6,820
91,600 -	91,649	6,187	94,100 -	94,149	6,400	96,600 -	96,649	6,612	99,100 -	99,149	6,825
91,650 -	91,699	6,191	94,150 -	94,199	6,404	96,650 -	96,699	6,616	99,150 -	99,199	6,829
91,700 -	91,749	6,196	94,200 -	94,249	6,408	96,700 -	96,749	6,621	99,200 -	99,249	6,833
91,750 -	91,799	6,200	94,250 -	94,299	6,412	96,750 -	96,799	6,625	99,250 -	99,299	6,837
91,800 -	91,849	6,204	94,300 -	94,349	6,417	96,800 -	96,849	6,629	99,300 -	99,349	6,842
91,850 -	91,899	6,208	94,350 -	94,399	6,421	96,850 -	96,899	6,633	99,350 -	99,399	6,846
91,900 -	91,949	6,213	94,400 -	94,449	6,425	96,900 -	96,949	6,638	99,400 -	99,449	6,850
91,950 -	91,999	6,217	94,450 -	94,499	6,429	96,950 -	96,999	6,642	99,450 -	99,499	6,854
\$92,000 -	92,049	\$6,221	94,500 -	94,549	6,434	\$97,000 -	97,049	\$6,646	99,500 -	99,549	6,859
92,050 -	92,099	6,225	94,550 -	94,599	6,438	97,050 -	97,099	6,650	99,550 -	99,599	6,863
92,100 -	92,149	6,230	94,600 -	94,649	6,442	97,100 -	97,149	6,655	99,600 -	99,649	6,867
92,150 -	92,199	6,234	94,650 -	94,699	6,446	97,150 -	97,199	6,659	99,650 -	99,699	6,871
92,200 -	92,249	6,238	94,700 -	94,749	6,451	97,200 -	97,249	6,663	99,700 -	99,749	6,876
92,250 -	92,299	6,242	94,750 -	94,799	6,455	97,250 -	97,299	6,667	99,750 -	99,799	6,880
92,300 -	92,349	6,247	94,800 -	94,849	6,459	97,300 -	97,349	6,672	99,800 -	99,849	6,884
92,350 -	92,399	6,251	94,850 -	94,899	6,463	97,350 -	97,399	6,676	99,850 -	99,899	6,888
92,400 -	92,449	6,255	94,900 -	94,949	6,468	97,400 -	97,449	6,680	99,900 -	99,949	6,893
92,450 -	92,499	6,259	94,950 -	94,999	6,472	97,450 -	97,499	6,684	99,950 -	99,999	6,897
									100,000 -		\$ 6,901



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