



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

OFFICIAL USE ONLY

STAPLE OTHER REQUESTED DOCUMENTS IN UPPER LEFT

Personal information

Mark if X Amended return
Mark if X Filing for a deceased taxpayer

Your social security number (SSN) 123456789
Spouse's/registered domestic partner's SSN 123456789
Your daytime phone number 1234567890

Your first name ABCDEFGHIJKLMNOP M.I. A Last name ABCDEFGHIJKLMNOP

Spouse's/domestic partner's first name ABCDEFGHIJKLMNOP M.I. A Last name ABCDEFGHIJKLMNOP

Home address (number, street and apartment number if applicable)
12345ABCDEF...
12345ABCDEF...

City ABCDEFGHIJKLMNOP State AB Zipcode + 4 123456789

Filing Status

- 1 Mark only one: X Single X Married filing jointly X Married filing separately X Dependent claimed by someone else
X Married filing separately on same return Enter combined amounts for lines 4 - 42. See instructions.
X Registered domestic partners filing jointly X filing separately on same return
X Head of household Enter qualifying dependent and/or non-dependent information on Schedule S.
2 Mark if you are: X Part-year resident in DC from 00 (month) to 00 (month), # of months in DC 00 See instructions.

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

Income Information

- a Wages, salaries, unemployment compensation and/or tips, see instructions a \$123456789.00
b Business income or loss, see instructions Mark if loss X b \$123456789.00
c Capital gain or loss Mark if loss X c \$123456789.00
d Rental real estate, royalties, partnerships, etc. Mark if loss X d \$123456789.00

Computation of DC Gross and Adjusted Gross Income

- 3 Federal adjusted gross income From 1040, Line 37; 1040A, Line 21; 1040EZ, Line 4; 1040NR, Line 35 plus Line 86; 1040NR-EZ, Line 10 Mark if loss X 3 \$123456789.00

Additions to DC Income

- 4 Franchise tax deducted on federal forms, 1120 and 1120S, see instructions 4 \$123456789.00
5 Other additions from DC Schedule I, Calculation A, Line 8 5 \$123456789.00
6 Add lines 3, 4 and 5 Mark if loss X 6 \$123456789.00

Subtractions from DC Income

- 7 Income received during period of nonresidence, see instructions 7 \$123456789.00
8 Taxable refunds, credits or offsets of state and local income tax 8 \$123456789.00
9 Taxable amount of social security and tier 1 railroad retirement Forms 1040 Line 20b, or 1040A Line 14b 9 \$123456789.00
10 Income reported and taxed this year on a DC franchise or fiduciary return 10 \$123456789.00
11 DC and federal government pension and annuity limited exclusion, see instructions Mark X if you are 62 or older X if your spouse/domestic partner is 62 or older 11 \$123456789.00
12 DC and federal government survivor benefits, see instructions 12 \$123456789.00
13 Other subtractions from DC Schedule I, Calculation B, Line 16. 13 \$123456789.00
14 Add the subtractions from DC income, Lines 7 - 13 14 \$123456789.00
15 DC adjusted gross income, Line 6 minus Line 14. Mark if loss X 15 \$123456789.00

STAPLE W-2s AND ANY OTHER WITHHOLDING STATEMENTS HERE

STAPLE CHECK OR MONEY ORDER HERE

Enter your last name
Enter your SSN

ABCDEFGHIJKLMN
123456789



15 DC adjusted gross income. Enter adjusted gross income from Line 15, page 1. Mark if loss 15 \$123456789.00

16 Deduction type Take the same type of deduction you took on your federal return.

Mark which type: Standard See instructions for amount to enter on Line 17
 Itemized See instructions for amount to enter on Line 17. Attach DC Schedule S

17 DC deduction amount Do not copy from federal form. For amount to enter, see instructions. 17 \$123456789.00

If claiming std deduction and, if claimed on federal return, enter real estate taxes \$1234.00 and/or disaster loss \$1234.00. See instructions. Include in Line 17 amt.

18 Number of exemptions If more than 1 (more than 2 if filing jointly), or if you or your spouse/ domestic partner are over 65 or blind, attach a completed Calculation G, Schedule S. 18 00

19 Exemption amount Multiply \$1,675 by number on line 18. Part-year DC residents see Cal H 19 \$123456789.00

20 Add Lines 17 and 19. 20 \$123456789.00

21 Taxable income Subtract Line 20 from Line 15. Enter result. Mark if loss 21 \$123456789.00

DC tax, credits and payments

22 Tax If Line 21 is \$100,000 or less, use tax tables. If more, use Calculation I 22 \$123456789.00

Mark if filing separately on same return. Complete Calculation J on Schedule S.

23 Credit for child and dependent care expenses \$1234.00 x .32 Enter result 23 \$123456789.00

Enter from Line 13 of fed. forms 2441; if part-year DC resident from Line 5, DC D-2441.

24 Non-refundable credits from DC Schedule U, Part 1a, line 6. Attach Schedule U 24 \$123456789.00

25 DC Low Income Credit See LIC table (instructions). Take either this credit or Line 28 credit-not both. 25 \$123456789.00

26 Total non-refundable credits. Add Lines 23, 24 and 25. 26 \$123456789.00

27 Total tax Subtract Line 26 from Line 22. If Line 22 is less than Line 26, leave blank. 27 \$123456789.00

28 DC Earned Income Tax Credit Enter your federal EIC \$1234.00 x .40 Enter result 28 \$123456789.00

28a Enter the number of qualified EITC children 28 a 00

29 Property Tax Credit. From your DC Schedule H; attach a copy. 29 \$123456789.00

30 Refundable credits from DC Schedule U, Part 1b, line 4 Attach DC Schedule U 30 \$123456789.00

31 DC income tax withheld from Forms W-2 and 1099. Attach correct copies. 31 \$123456789.00

32 2009 estimated income tax payments 32 \$123456789.00

33 Tax paid with extension of time to file or with original return if this is an amended return. 33 \$123456789.00

34 Total payments and refundable credits. Add lines 28, 29 - 33. 34 \$123456789.00

Refund Complete if Line 34 is more than Line 27. Amount owed Complete if Line 34 is equal to or less than Line 27.

35 Amount you overpaid 35 \$123456789.00 40 Tax due 40 \$123456789.00

Subtract Line 27 from Line 34. Subtract Line 34 from Line 27.

36 Amount to be applied to your 2010 estimated tax. 36 \$123456789.00 41 Contribution amount 41 \$123456789.00

Contribution amount from Schedule U, Part II, Line 6 from Schedule U, Part II, Line 7.

37 Add Lines 36 and 37 37 \$123456789.00 42 Penalty \$12345

38 Refund 38 \$123456789.00 Interest \$12345

Enter total P & I. See instructions 42 \$123456789.00

39 Refund 39 \$123456789.00 43 Total amount due 43 \$123456789.00

Subtract Line 38 from Line 35. Add Lines 40 - 42.

Will this refund go to an account outside of the U.S.? Yes See instructions

Direct Deposit To have your refund deposited into your checking or savings account, mark X for only one account type and enter the routing and account numbers below, see instructions.

Routing Number 123456789

Account Number 0000000123456789

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

Designee's name

Phone number

1234567890

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

Your signature

Date

Paid preparer's signature

Date

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

Paid preparer's FEIN, SSN, or PTIN

Paid preparer's phone number

123456789

1234567890