

	-40EZ Individual In	2000 toome Tax Return acome Tax Return Come	BIA OFFI	A OFFICIAL USE ONLY			
			A	В	С	D	
	ble year beginning	See instructions on back to determine if you can use this form	•		1		
First Name M.I. Last Name				Security No.			
				Security No.			
Home Address BER L			▲ YO	U MUST ENT	FER YOU Apt. N		
		C. LOE					
City	5	State Zip code					
OFFICIAL USE ONLY							
		<u> </u>		Dolla	rs	Cents	
	Report	1 Total wages, salaries, and tips.					
	Your	2 Taxable interest and dividend income. If you have taxable interest and dividend income of more than \$400, you cannot use this form. (2)		Г			
	Income						
		3 Adjusted gross income. Add lines 1 and 2. 3					
	1 <i>4 / /</i> 1	4 Standard deduction. 4		2 0	00	0 0	
	Attach Withholding	5 Net income. Line 3 minus Line 4. 5			ТТ	•	
	Statements	6 Enter amount of your personal exemption (\$1,370). If you can be claimed				•	
	W-2) here	as a dependent on someone else's tax return, check here \Box and do not				• – – –	
	Taxable	claim an exemption (enter zero). 6					
	Income	7 Taxable income, Line 5 minus Line 6 7					
	Your	8 Tax. Use the tax tables in the instruction booklet (pg. 12-21) to find the tax				•	
		on your taxable income shown on Line 7.89Low income credit. (See instructions on page 6 to determine if you qualify).					
	Tax	You <u>must</u> attach a copy of your Federal return if you claim this credit.					
		10 Net Tax. Line 8 minus Line 9				• • • •	
\vdash		If Line 9 is equal to or more than Line 8, enter "0". 10		╶┝┿		┿┽	
here	Amount You Owe	11 Total D.C. income tax withheld shown on Form(s) W-2 (11)					
rder]	Iou Owe	12 AMOUNT OWED. If Line 10 is more than Line 11, subtract and enter here. PAY IN FULL WITH THIS RETURN ⊑ (12)				•	
ney O	Overpayment	13 OVERPAYMENT. If Line 11 is more than Line 10,				•	
or Mo	Overpayment	subtract and enter here. THIS IS YOUR REFUND r (13)			П		
heck)					
Attach Check or Money Order here	Voluntary Contribution	14 VOLUNTARY CONTRIBUTION to the Public Trust for Drug Prevention and Children At-Risk. Indicate amount you want to contribute.					
		15 Enter amount of refund or payment due <u>after</u> any contribution (see instructions). If amount is a refund, check box. \Box (15)			П		
	Sign	Under penalties of law, including criminal penalties for false statements and tax preparer penalties under D.C. Coo that I have examined this return and, to the best of my knowledge and belief, it is true, correct and complete. If prep this declaration is based on all information available to the preparer.					
	Here	TAXPAYER'S SIGNATURE DATE	DAYT	IME TELEPHON	ΙE		
		PREPARER'S SIGNATURE PTIN		DATE			

PAYMENTS: Attach to the return your check or money order for the amount you owe made payable to *D.C. Treasurer*. Write your Social Security Number, daytime phone number, and "2000 D-40EZ" on your payment. Mail to the Office of Tax and Revenue, Ben Franklin Station, P.O. Box 7861, Washington, D.C. 20044-7861. You may also pay by credit card – see instructions.

INSTRUCTIONS FOR FORM D-40EZ

(Do not use a pencil to complete the form that you will be filing)

YOU MAY USE FORM D-40EZ IF:

- 1. Your filing status is single;
- 2. You were under the age of 65 and not legally blind on or before December 31, 2000;
- 3. You do not claim any dependents;
- 4. Your Adjusted Gross Income (Line 3) is less than \$100,000 and consists only of wages, salaries, tips, taxable scholarships and fellowships and your taxable interest and dividend income was \$400 or less;
- 5. You have no adjustments to income;
- 6. You were a resident of the District of Columbia for the full calendar year;
- 7. You do not itemize your deductions;
- 8. You are not filing a Schedule H, Homeowner and Rental Property Tax Credit; and
- 9. You do not pay estimated tax.

If you are required to file a D.C. Individual Income Tax return and cannot use Form D-40EZ, file Form D-40.

DO NOT USE D-40EZ to file a return for a deceased taxpayer. DO NOT USE D-40EZ to claim the D.C. Earned Income Tax Credit.

DO NOT enclose more than one return per envelope.

NAME AND ADDRESS

If a label has been provided, attach it to the return. If any of the information on the label is incorrect, please make corrections on the label. If you do not have a pre-printed label, write your name, address, and social security number in the space provided on the form.

REPORTING YOUR INCOME

- Line 1. Enter any amount you received in wages, salaries, tips, taxable scholarships and fellowships.
- **Line 2.** Enter the total amount of any taxable interest and dividend income. You cannot use this form if your taxable interest and dividend income was more than \$400.
- **Line 6.** If you are claimed as a dependent on someone else's tax return, enter "0". Otherwise, enter \$1370.
- **Line 7.** This is your taxable income.

FIGURING YOUR TAX

- **Line 8.** Use the Tax Tables in the D-40 Individual Income Tax Booklet (pages 12-21) to find the tax on the taxable income on Line 7. Enter the tax amount from the Tax Tables.
- Line 9. Use the correct Low Income Credit Table (pages 10 and 11 of the D-40 Tax Booklet) to compute your Low Income Credit. Enter the credit on Line 9. Attach a copy of your Federal return if you claim this credit. Do not enter the Earned Income Credit shown on your Federal return.

To be eligible for the Low Income Credit, your federal tax liability should be "0".

Line 10. <u>Net Tax</u>. Line 8 minus Line 9. If the amount on Line 9 is

equal to or more than Line 8, enter "0". If no entry is made on Line 9, enter the amount from Line 8.

Line 11. Enter the amount of D.C. Income Tax withheld as shown on your Form(s) W-2. Be sure to attach the proper copy of the Form(s) W-2.

AMOUNT YOU OWE

Line 12. If Line 10 is more than Line 11, subtract Line 11 from Line 10. This is the amount of tax that you owe. Attach your check or money order for the full amount made payable to the D.C. Treasurer. Write your social security number and "2000 D-40EZ" on the check or money order.

NOTE: There are no payment arrangements made on current year taxes due. Any unpaid amount will be assessed both penalty and interest amounts on the 15th day of each month after the due date that the tax remains unpaid.

OVERPAYMENT

Line 13. If Line 11 is more than Line 10, subtract Line 10 from Line 11. This is your refund <u>before</u> any voluntary contribution.

VOLUNTARY CONTRIBUTION

- Line 14. If you choose to contribute to the Public Trust for Drug Prevention and Children At-Risk. Enter on Line 14 the amount of your contribution. The minimum contribution is \$1.
- **Line 15.** If you are making a contribution to the Public Trust for Drug Prevention and Children At-Risk, you must do one of the following:
 - a. If you are due a refund, <u>reduce</u> the amount of the refund by the contribution and enter the balance.
 - b. If you owe tax, <u>add</u> the amount of the contribution to the tax due and enter the total. This total is the amount you owe.

SIGN YOUR RETURN

You must sign and date your return. If you pay someone to prepare your return, that person must sign the return below your signature and provide his/her tax preparer identification number.

PAYING BY CREDIT CARD

If paying by credit card, see the instructions for this payment method that appear in the front of the D-40 booklet.

MAILING YOUR RETURN

Your return must be postmarked no later than April 16, 2001. Mail it using the pre-addressed envelope included in the D-40 instruction booklet. If you do not have a pre-addressed envelope, mail your return to the Office of Tax and Revenue, Individual Income Tax, Ben Franklin Station, P.O. Box 7861, Washington, D.C., 20044-7861. Note: if the due date falls on a Saturday, Sunday or legal holiday the return is due the next business day.