Government of the
District of Columbia

2023 SCHEDULE H SUB Homeowner and Renter Property Tax Credit

2 3 9 9 8 2 S 1 0 0 0 1

Important: Read the eligibility requirements before completing.

SOFTWARE DEVELOPER USE ONLY

VENDOR ID# 9999

Personal information

Your daytime telephone number
9999999999

Your taxpayer identification number (TIN) 999999999
and Date of Birth (MMDDYYYY) 99999999

Spouse's/registered domestic partner's TIN 999999999
and Date of Birth (MMDDYYYY) 99999999

Your first name XXXXXXXXXXXXXXX
M.I. X
Last name XXXXXXXXXXXXXXXXXXXX

Spouse's/registered domestic partner's first name XXXXXXXXXXXXXXX
M.I. X
Last name XXXXXXXXXXXXXXXXXXXX

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

City XXXXXXXXXXXXXXXXXXXXXXXXXXXXXX
State XX
Zipcode + 4 999999999

Email
XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX

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

Type of property for which you are claiming credit. Mark only one:

X House X Apartment X Rooming house X Condominium X Cooperative

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

Section A Credit claim based on rent paid.

Roundcentsto the nearest dollar. If amount is zero, leave line blank.

1 Federal adjusted gross income of the tax filing unit (see instructions). *If less than zero, enter zero.* 1 9999999.00

2 Rent paid by you on the property in 2023. 999999.00 x .20 = 2 9999999.00

3 Property tax credit. ***Use the "Computing Your Property Tax Credit" worksheet.*** 3 9999999.00

4 Landlord's name
XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX

Landlord's address (number, street and suite/apartment number if applicable)
XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX
XXXXXXXXXXXXXXXXXXXXXX

Apartment number 99999

Landlord's telephone number 9999999999

City XXXXXXXXXXXXXXXXXXXX
State XX
Zipcode + 4 999999999

Section B Credit claim based on real property tax owed.

Roundcentsto the nearest dollar. If amount is zero, leave line blank.

5 Federal adjusted gross income of the tax filing unit *(see instructions). If less than zero, enter zero.* 5 9999999.00

6 DC real property tax bill for tax year 2023. *Do not include special assessments, interest, penalties and service charges* 6 9999999.00

7 Property tax credit. ***Use the "Computing YourProperty Tax Credit" worksheet.*** 7 9999999.00

8 Enter information from your real property tax bill or assessment. If a section in blank on your property tax bill, leave it blank here.

Square number	Suffix number	Lot number
9999	9999	9999

2023 SCHEDULE H PAGE 2

Last name and TIN XXXXXXXXXXXXXXXXXXXX
999999999

2 3 9 9 8 2 S 2 0 0 0 1

For STANDALONE FILERS only, please complete the following "Refund Options" information. Will this refund go to an account outside of the U.S.? X Yes X 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 X Direct deposit **or** X Reliacard (see instructions) **or** X Paper check

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

Routing Number 999999999 Account Number 99999999999999999

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 99999999	Preparer's signature	Date 99999999
Spouse's/domestic partner's signature if filing jointly or separately on same return	Date 99999999	Preparer's Tax Identification Number (PTIN) 999999999	PTIN telephone number 9999999999

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)
1	Wages, salaries, tips, etc.		1	999999999.00		999999999.00
2	Taxable interest		2	999999999.00		999999999.00
3	Ordinary Dividends		3	999999999.00		999999999.00
4	Taxable refunds, credits, or offsets of state and local income taxes		4	999999999.00		999999999.00
5	Alimony received (only if divorce or separation agreement on or before 12/31/2018)		5	999999999.00		999999999.00
6	Business Income	Mark if loss X	6	999999999.00	Mark if loss X	999999999.00
7	Capital gain	Mark if loss X	7	999999999.00	Mark if loss X	999999999.00
8	Other gains	Mark if loss X	8	999999999.00	Mark if loss X	999999999.00
9	IRA distributions: Taxable amount		9	999999999.00		999999999.00
10	Pensions and annuities: Taxable amount		10	999999999.00		999999999.00
11	Rental real estate, royalties, partnerships, S Corporations, trusts, etc.	Mark if loss X	11	999999999.00	Mark if loss X	999999999.00
12	Farm Income	Mark if loss X	12	999999999.00	Mark if loss X	999999999.00
13	Unemployment compensation		13	999999999.00		999999999.00
14	Social security benefits: Taxable amount		14	999999999.00		999999999.00
15	Other taxable income: Attach separate sheet(s)	Mark if loss X	15	999999999.00	Mark if loss X	999999999.00
16	**Add Lines 1 through 15 in each column.**	Mark if loss X	16	999999999.00	Mark if loss X	999999999.00
17	Educator expenses		17	999999999.00		999999999.00
18	Certain business expenses of reservists, performing artist, and fee-basis government officials		18	999999999.00		999999999.00
19	Health Savings account deduction		19	999999999.00		999999999.00
20	Moving expenses for members of the armed forces. Attach fed. Form 3903		20	999999999.00		999999999.00
21	Deductible part of self-employment tax		21	999999999.00		999999999.00
22	Self-employed SEP, SIMPLE, and qualified plans		22	999999999.00		999999999.00
23	Self-employed health insurance deduction		23	999999999.00		999999999.00
24	Penalty on early withdrawal of savings		24	999999999.00		999999999.00
25	Alimony paid (only if divorce or separation agreementon or before 12/31/18)		25	999999999.00		999999999.00
26	IRA deduction		26	999999999.00		999999999.00
27	Student loan interest deduction		27	999999999.00		999999999.00
28	Tuition and fees per federal Form 8917		28	999999999.00		999999999.00
29	**Add Lines 17 through 28 in each column**		29	999999999.00		999999999.00
30	Subtract Line 29 from Line 16	Mark if loss X	30	999999999.00	Mark if loss X	999999999.00
31	Total federal adjusted gross income. **Add amounts entered on Line 30, Columns A-B** and enter total here on Line 31 **and** on Section A, Line 1 or Section B, Line 5. If less than zero, enter zero.		31	999999999.00		