

Government of the District of Columbia

2005 FP-31 SUB Personal Property Tax Return

050310210000

Tax Year beginning July 1, 2004 and ending June 30, 2005 Due Date: July 31, 2004

X Mark if your address changed from your last return

Federal Employer I.D. Number (FEIN)

Social Security Number (SSN) if self employed

XX - XX XXXXX

XXX - XX - XXXX

OFFICIAL USE ONLY

Business Name

Mark if

XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX

X AMENDED RETURN

X CERTIFIED QHTC

Principal DC business address

Mailing address (if different from above)

XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX

XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX

Business address (continued)

Mailing address (continued)

XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX

XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX

City State Zipcode XXX XXXXX - XXXX

City State Zipcode XXX XXXXX - XXXX

STATEMENT OF PERSONAL PROPERTY AND COMPUTATION OF PERSONAL PROPERTY TAX

STAPLE CHECKER OR MONEY ORDER HERE

A. Kind of business or profession: XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX

B. Number of DC locations..... XXXX

C. If a hotel or motel, enter the number of rooms..... XXXX

D. Are you a lessee of personal property not reported in Schedule A of this return? X YES X NO If "yes", complete Schedule D-1 or D-2 as appropriate. If you are a certified QHTC, complete Schedule D-3 or D-4 from FR-399, as appropriate.

E. Are there other companies doing business from your address under a lease, sublease or concession? X YES X NO If "Yes" attach a separate schedule listing the names of each company.

OFFICE BUILDING OWNERS MUST ATTACH A LIST OF TENANTS AS OF JULY 1, 2004. INCLUDE THE BUILDING ADDRESS, THEIR TAXPAYER ID AND ROOM NUMBERS.

TAXPAYER NAME: XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX

050310220000

FEIN (or SSN): XX-XXXXXXX or XXX-XX-XXXX

Column A - Original Cost		Column B - Remaining Cost (Current Value)	
Dollars	Cents	Dollars	Cents

- | | | |
|---------------------------------------------------------------------------------------------------|--------------------|--------------------|
| 1. Books, cassettes and other reference material (from Schedule A) | \$ XXXXXXXXXX . XX | \$ XXXXXXXXXX . XX |
| 2. Furniture, fixtures, machinery and equipment (from Schedule A) | \$ XXXXXXXXXX . XX | \$ XXXXXXXXXX . XX |
| 3. Unregistered motor vehicles or trailers and other tangible personal property (from Schedule A) | \$ XXXXXXXXXX . XX | \$ XXXXXXXXXX . XX |
| 4. Supplies (from Schedule B) | \$ XXXXXXXXXX . XX | \$ XXXXXXXXXX . XX |
| 5. Total original cost of tangible personal property (Add Lines 1 through 4, Column A) | \$ XXXXXXXXXX . XX | |

6. Remaining cost (Current Value) of personal property (Add Lines 1 through 4, Column B) \$ XXXXXXXXXX . XX

7. Deduct: EXCLUSION 50000.00

8. Taxable remaining cost (Current Value) of personal property (Line 6 minus Line 7. If Line 7 is equal to or greater than Line 6, make no further entries, sign and mail) \$ XXXXXXXXXX . XX

TAX RATE (\$3.40 per hundred) x.0340

9. TAX (Line 8 multiplied by .0340 tax rate) XXXXXXXXX . XX

10. Tax paid with FR-129A, Request for Extension of Time to File \$ XXXXXXXXXX . XX

11. Balance Due (Line 9 less Line 10) \$ XXXXXXXXXX . XX

12. Penalties (See general instructions) \$ XXXXXXXXXX . XX

13. Interest (See general instructions) \$ XXXXXXXXXX . XX

14. TOTAL BALANCE DUE, PENALTIES and INTEREST (Add Lines 11, 12 and 13) \$ XXXXXXXXXX . XX

15. Amount paid with this return \$ XXXXXXXXXX . XX

16. Unpaid balance (if any) \$ XXXXXXXXXX . XX

17. Overpayment (if any) \$ XXXXXXXXXX . XX

PLEASE SIGN HERE 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, other than taxpayer, is based on all information available to the preparer.

Officer's or owner's signature Title MM/DD/YYYY XXX-XXX-XXXX Telephone Number of Person to Contact

Preparer's signature (if other than taxpayer) Date Preparer's FEIN, SSN or PTIN

PAID PREPARER ONLY Firm Name Firm Address XXX-XXX-XXXX Preparer's Telephone Number

Make check or money order payable to the DC Treasurer. Include your FEIN or SSN, "FP-31" and tax year 2005 on your payment. Mail return and payment to: Office of Tax and Revenue, PO Box 7862, Washington, DC 20044-7862, on or before July 31, 2004.