

Government of the District of Columbia

2008 FP-31 SUB Personal Property Tax Return



0 8 0 3 1 0 2 1 0 0 0 0

Tax Year beginning July 1, 2007 and ending June 30, 2008
Due Date: July 31, 2007

OFFICIAL USE ONLY

Federal Employer I.D. Number (FEIN)
123456789

Social Security Number (SSN) if self employed
123456789

Business Name
ABCDEFGHIJKLMABCDEFGHIJKLMABCDEFGHIJ

Principal DC business address
12345ABCDEFGHIJKLMABCDEFGHI

Business address (continued)
12345ABCDEFGHIJKLMABCDEFGHI

City
ABCDEFGHIJKLMABCDEFGHI

State Zipcode
AB 123456789

Mailing address (if different from above)
12345ABCDEFGHIJKLMABCDEFGHI

Mailing address (continued)
12345ABCDEFGHIJKLMABCDEFGHI

City
ABCDEFGHIJKLMABCDEFGHI

State Zipcode
AB 123456789

Mark if Amended Return Mark if Certified QHTC Mark if Remaining cost is under \$50,000

STATEMENT OF PERSONAL PROPERTY AND COMPUTATION OF PERSONAL PROPERTY TAX

A. Kind of business or profession: ABCDEFGHIJKLMABCDEFGHIJKLMABCDEFGHIJKL

B. Number of DC locations..... 1234

C. If a hotel or motel, enter the number of rooms..... 1234

D. Are you a lessee or lessor of personal property not reported in Schedule A of this return? YES 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? YES 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, 2007
INCLUDE THE BUILDING ADDRESS, THEIR TAXPAYER ID AND ROOM NUMBERS.

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TAXPAYER NAME: ABCDEFGHIJKLMNOP

FEIN (or SSN): 123456789 or 123456789



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

Table with 2 columns: Description and Amount. Rows include items like Books, Furniture, Unregistered motor vehicles, Supplies, Total original cost, Remaining cost, Deduct: EXCLUSION, Taxable remaining cost, TAX, Tax paid, Balance Due, Penalties, Interest, TOTAL BALANCE DUE, Amount paid, Unpaid balance, and Overpayment.

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.

PLEASE SIGN HERE

PAID PREPARER ONLY

Officer's or owner's signature Title Preparer's signature (if other than taxpayer) Firm Name Firm Address

MMDDYYYY Date

MMDDYYYY Date

Telephone Number of Person to Contact 1234567890 Preparer's FEIN, SSN or PTIN 123456789 Preparer's Telephone Number 1234567890

Make check or money order payable to the DC Treasurer. Include your FEIN or SSN, "FP-31" and tax year 2008 on your payment. Mail return and payment voucher with payment to: Office of Tax and Revenue, PO Box 7862, Washington, DC 20044-7862, or if you are filing a no payment return, mail it to PO Box 96035, Washington, DC 20090-6035 by July 31, 2007.

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