Government of the District of Columbia

2010 FR-800M SUB Sales and Use Tax Monthly Return

1 0 8 0 0 0 4 1 0 0 0 1

OFFICIAL USE ONLY

Taxpayer Identification Number: 123456789

Mark if: X FEIN
Mark if: X SSN

Tax Period Ending (MMYY): MMYY

Business Name: ABCDEFGHIJKLABCDEFGHIJKLMABCDEFGHIJ

Mailing Address Line #1: 12345ABCDEFGHIJKLABCDEFGHIJKLA

Due Date: MMDDYY

Mark if: X Amended return
Mark if: X final return

Mailing Address Line #2: 12345ABCDEFGHIJKLABCDEFGHIJKLA

Account Number: 123123123123

City: ABCDEFGHIJKLABCDEFGH

State: AB

Zipcode + 4: 123456789

Sales tax licensees must file a return even if no sales were made or no tax or fees are due.

COLUMN A - DESCRIPTION		COLUMN B - TAXABLE AMOUNT	TAX RATE	COLUMN C - TAX DUE - multiply col B by tax rate, enter here	
1. Use Tax on Purchases Taxable at 6%	1B	$123456789.99	X .06	1C	$123456789.99
2. Gross Sales	2B	$123456789.99			
3. Sales Taxable at 6%	3B	$123456789.99	X .06	3C	$123456789.99
4. Sales and Purchases Taxable at 9%	4B	$123456789.99	X .09	4C	$123456789.99
5. Sales and Purchases Taxable at 10%	5B	$123456789.99	X .10	5C	$123456789.99
6. Sales for Parking Taxable at 12%	6B	$123456789.99	X .12	6C	$123456789.99
7. Sales and Purchases of Other Tobacco Taxable at 12%	7B	$123456789.99	X .12	7C	$123456789.99
8. Sales and Purchases Taxable at 14.5%	8B	$123456789.99	X .145	8C	$123456789.99
9. Total Sales and Use Tax Due (Add Lines 1C - 8C)				**9C**	$123456789.99
10. Disposable Carryout Bag Fee (Net of discount)				**10C**	$123456789.99
11. Total Tax and Fee (Add lines 9C and 10C)				**11C**	$123456789.99
12. Penalty - 5% per month with a maximum of 25% See instructions				12C	$123456789.99
13. Interest - 10% per year See instructions				13C	$123456789.99
14. Total Amount Due (Add lines 11C - 13C)				**14C**	$123456789.99

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

PLEASE SIGN HERE

Taxpayer's Signature

Title

MMDDYYYY
Date

Telephone Number of Person to Contact: 1234567890

PAID PREPARER ONLY

Preparer's Signature (If other than taxpayer)

MMDDYYYY
Date

Paid Preparer's FEIN, SSN or PTIN: 123456789

Firm Name

Firm Address

Make check or money order payable to the DC Treasurer. Include your FEIN or SSN, "FR-800M" and tax year on your payment.
Mail return and payment to: DC Office of Tax and Revenue, PO Box 96384 , Washington, DC 20090-6384