

2014 FR-329 SUB Consumer Use Tax on Purchases and Rentals



Leave lines blank that do not apply. File this form separately from your D-40 return.

Personal information

SOFTWARE DEVELOPER USE ONLY

Your first name ABCDEFGHIJKLMNOP M.I. A Last name ABCDEFGHIJKLMNOPQ

VENDOR ID# 1234

Your social security number 123456789 Your Daytime phone number 1234567890

Home address (number, street and apartment number if applicable) 12345ABCDEF... ABCDEFGHIJKL...

City ABCDEFGHIJKLMNOPQ State AB Zipcode + 4 123456789

Sales and Use tax calculation

Round cents to the nearest dollar. If the amount is zero, leave the line blank.

Table with 3 columns: Description, Amount purchased, Rate, Tax. Includes rows for Merchandise, Alcoholic beverages, Catered food, Tobacco products, and Total tax due.

Attach check or money order made payable to DC Treasurer. Write your social security number and "2014 FR-329" on your payment.

Signature Under penalties of the 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 all information available to the preparer.

Your signature Date Preparer's signature Date

Preparer's Tax Identification Number (PTIN) 123456789 Preparer's phone number 1234567890

Do not mail this form with your individual income tax return. Please use a separate envelope. Complete and sign this form. Mail it by April 15, 2015 to: Office of Tax and Revenue, 1101 4th Street, SW FL4 Washington, DC 20024