District of Columbia	2014 FR-800M SUB Sales and Use Tax Monthly Return				
File this return for each of	the months Oct 1, 2013 - Sept		1	4 8 0 0 0	4 1 0 0 0 1
Taxpayer Identification Number 123456789	Mark if: X FEIN Mark if: X SSN	Account Nu	^{mber} 23123123		DFTWARE DEVELOPER USE ONLY
Business Name ABCDEFGHIJKL Mailing Address Line #1	ABCDEFGHIJKLA	BCDEFG	HIJKL	Tax Period Ending (MMYY	Mark if: X amended return) Mark if: X final return (See instruction
	HIJKLABCDEFGH				State Zipcode + 4
	HIJKLABCDEFGH	ABCD	EFGHIJKLAI	BCDEFGH	State Zipcode + 4 AB 123456789
S	ales tax licensees must file a	a return even i	f no sales were ma	de or no tax or fees	are due.
COLUMN A - DESCRIPTION	COLUMN B - TAXAB	LE AMOUNT	TAX RATE	COLUMN C - TAX D	DUE - multiply col B by tax rate, enter he
1. Use Tax on Purchases Taxable at 5.75%	1в \$12345678	9 99	X .0575	1C	\$123456789.99
 Gross Sales Sales Taxable at 5.75% 	^{2в} \$12345678 _{3в} \$12345678		X .0575	3C	\$123456789.99
4. Sales and Purchases					
of Off-Premises Alcohol Taxable at 10%	_{4в} \$12345678	9.99	X .10	4C	\$123456789.99
5. Other Sales and Purchases Taxable at 10%	^з _{5В} \$12345678	9.99	X .10	5C	\$123456789.99
6. Sales for Parking Taxable at 18%	6в \$12345678	9 99	X .18	6C	\$123456789.99
7.Sales and Purchases of Oth					
Tobacco Taxable at 12%	^{ег} _{7В} \$12345678	9.99	X .12	7C	\$123456789.99
8. Sales and Purchases Taxable at 14.5%	8B \$12345678	9.99	X .145	8C	\$123456789.99
9. Reserved	9в \$12345678	9.99	X.	9C	\$123456789.99
			10. Enter 2% of 91		\$123456789.99
			less 3% discou		
			(Net of discount)	11C	\$123456789.99
			12. Reserved	12C	\$123456789.99
			13. Penalty - 5% pe	r month 13C	\$123456789.99
			with a maximum		
			14. Interest - 10% p	er year 14C	\$123456789.99
			15. Total Amount I		\$123456789.99
Will the funds f	or this payment come from an ac	count outside th	(Add lines 1C - 14 e US? Yes —	C) No 🔷 See instruction	ns.
	of law, I declare that this return is correc				
PLEASE		, ,			Telephone Number of Person to Contact
HERE Taxpayer's Sigr	ature		Title	MMDDYYYY Date	1234567890
PAID PRE- Preparer's Sign				MMDDYYYY	Paid Preparer's PTIN
PAID PRE- Preparer's Signa PARER ONLY	ature (If other than taxpayer)				123456789
Firm Name					
Firm Address					
		201	4 FR-800M SUB		