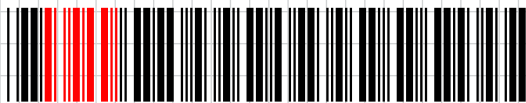


2016 FP-31 SUB Personal Property Tax Return



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SOFTWARE DEVELOPER USE ONLY

VENDOR ID # 1234

Taxpayer Identification Number
123456789

Mark if FEIN
Mark if SSN

Tax Year beginning July 1, 2015
and ending June 30, 2016
Due Date: July 31, 2015

Business name
ABCDEFGHIJKLMNABCDEFGHIJKLMN

Business mailing address line 1
12345ABCDEFGHIJKLMNABCDEFGHIJKLMN

Business mailing address line 2
12345ABCDEFGHIJKLMNABCDEFGHIJKLMN

City: ABCDEFGHIJKLMN State: AB Zip Code + 4: 123456789

Mark if Amended Return

Mark if Certified QHTC

Mark if Final Return

Mark if Remaining cost is \$225,000 or less

Statement of personal property and computation of personal property tax

A. Kind of business or profession: ABCDEFGHIJKLMNABCDEFGHIJKLMN

B. Number of DC locations: 1234

Consolidate reporting for all business locations in the District on one personal property tax return. Do not file separate returns for each location.

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 FR-399 Schedule D-3 or D-4 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 name of each company.

Office building owners must attach a list of tenants as of July 1, 2015
Include the building address, taxpayer ID and room number

Business name ABCDEFGHIJKLMNOPQRSTUVWXYZ

FEIN or SSN 123456789



Column A - Original Cost Dollars (Round cents to the nearest dollar)
Column B - Remaining Cost (Current Value) Dollars (Round cents to the nearest dollar)

Table with 3 columns: Description, Column A - Original Cost, Column B - Remaining Cost. Rows include 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, Overpayment.

Will this refund go to an account outside of the U.S.? [X] Yes [X] No See instructions

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 is based on the information available to the preparer.

PLEASE SIGN HERE

Officer's or owner's signature Title Date MMDDYYYY

Preparer's signature (If other than taxpayer) Date MMDDYYYY

Firm name

Telephone Number of Person to Contact

1234567890

Preparer's PTIN

123456789

Preparer's Telephone Number

1234567890

PAID PREPARER ONLY

Firm address

Make check or money order payable to the DC Treasurer. Include your FEIN or SSN, "FP-31" and the tax year 2016 on your payment. Mail this return and payment voucher FP-31P with payment to: Office of Tax and Revenue, PO Box 96183, Washington, DC 20090-6183. If this return does not require a payment, mail the return to: Office of Tax and Revenue, PO Box 96144, Washington, DC 20090-6144.