



This is a FILL-IN format. Please do not handwrite any data on this form other than your signature.

OFFICIAL USE ONLY Vendor ID# 0002

Taxpayer Identification Number (FEIN) Fill in if FEIN Fill in if SSN

Business name

Tax Year beginning July 1, 2017 and ending June 30, 2018 Due Date: July 31, 2017

Business mailing address line 1

Business mailing address line 2

City State Zip Code + 4

Fill in if Amended Return Fill in if certified QHTC (Attach QHTC-Cert) Fill in if Final Return Fill in if remaining cost is \$225,000 or less

Statement of personal property and computation of personal property tax

A. Kind of business or profession:

B. Number of DC locations Consolidate reporting for all business locations in the District on one personal property tax return. Do not file separate returns for each location. (See instructions)

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

D. Are you a lessee or lessor of personal property not reported in Schedule A of this return? 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? 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, 2017. Include the building address, taxpayer ID and room number.





## Form FP-31 Personal Property Schedules D-3 and D-4

Tax Return Year Beginning \_\_\_\_\_, 20\_\_\_\_ and ending \_\_\_\_\_, 20\_\_\_\_

FEIN/SSN: \_\_\_\_\_

**SCHEDULE D-3—QUALIFYING TANGIBLE PERSONAL PROPERTY PURCHASED BY A CERTIFIED QHTC AND USED OR HELD FOR USE BY THE QHTC (OR LEASED UNDER A CAPITAL LEASE) TO A CERTIFIED QHTC.**

PROPERTY TYPE	PURCHASE DATE	QHTC CERTIFICATION DATE	ORIGINAL COST	REMAINING COST	LESSOR'S NAME AND ADDRESS	MONTHLY RENT	DATE LEASE BEGAN
			\$	\$		\$	
			TOTAL: \$	TOTAL: \$			

**SCHEDULE D-4—QUALIFYING TANGIBLE PERSONAL PROPERTY PURCHASED BY A NON QHTC AND LEASED TO A CERTIFIED QHTC UNDER A CAPITAL LEASE.**

PROPERTY TYPE	PURCHASE DATE	LESSEE'S CERTIFICATION DATE	ORIGINAL COST	REMAINING COST	LESSOR'S NAME AND ADDRESS	MONTHLY RENT	DATE LEASE BEGAN
			\$	\$		\$	
			TOTAL: \$	TOTAL: \$			