



Government of the  
District of Columbia

**2021**

# D-30ES Unincorporated Business Declaration of Estimated Franchise Tax



2 1 0 3 0 0 2 1 0 0 0 2

Important: Print in CAPITAL letters using black ink.

Quarterly payment  
(dollars only)

\$

.00

OFFICIAL USE ONLY  
Vendor ID#0002

Taxpayer Identification Number

Fill in  if FEIN

Tax period ending (MMDDYYYY)

Fill in  if SSN

Business name or Designated Agent name

Business mailing address line 1

Business mailing address line 2

City

State

Zip Code + 4

Voucher number:

Due date:

DCE006U