

Government of the District of Columbia

2006 D-20 SUB Corporation Franchise Tax Return



OFFICIAL USE ONLY

Federal Employer I.D. Number 123456789 Number of business locations In the District: 123 Outside the District: 123

Name of corporation ABCDEFGHIJKLMNOP Taxable year beginning MMY MMY Taxable year ending MMY MMY

Business address line #1 12345ABCDEF... Mark if X is your first return... Mark if: X AMENDED RETURN X CERTIFIED QHTC X CONSOLIDATED RETURN X FINAL RETURN

City ABCDEFGHIJKLMNOP State AB Zipcode 123456789

Mailing address line #1 12345ABCDEF...

Mailing address line #2 12345ABCDEF... NAICS CODE 123456

City ABCDEFGHIJKLMNOP State AB Zipcode + 4 123456789

READ INSTRUCTIONS BEFORE PREPARING RETURN Enter dollar amounts only. If amount is zero, leave line blank.

GROSS INCOME

STAPLE CHECK OR MONEY ORDER HERE

DEDUCTIONS

Table with 3 columns: Line number, Description, Amount. Includes lines 1-22 for Gross Income and Deductions.

Taxpayer Name: ABCDEFGHIJKLMNOPQRSTUVWXYZ



Federal Employer I.D. Number: 123456789

ENTER DOLLAR AMOUNTS ONLY

Table with columns for line numbers, descriptions, and dollar amounts. Includes sections for DEDUCTIONS, TAXABLE INCOME, and TAX AND CREDITS.

Make check or money order payable to the D.C. Treasurer. Include your FEIN, "D-20" and tax year on your payment. Mail return and payment (attached to D-2030P) to: Office of Tax and Revenue, (see instructions for correct address) by the 15th day of the third month following the close of the tax year.

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.

Signature and contact information section including fields for Officer's signature, Title, Date, Telephone number, Preparer's signature, Date, Firm name, Firm address, and Preparer's FEIN/SSN or PTIN.