

Government of the District of Columbia

2003 FP-129A SUB Extension of Time to File DC Personal Property Tax Return or Report



FEDERAL EMPLOYER I.D. NUMBER XX-XXXXXXX

SSN(IF SELF EMPLOYED) XXX-XX-XXXX

Tax Year beginning July 1, 2002 and ending June 30, 2003

OFFICIAL USE ONLY

BUSINESS NAME

XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX

MAILING ADDRESS

XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX

MAILING ADDRESS (CONTINUED)

XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX

CITY

XXXXXXXXXXXXXXXXXXXX

STATE

XX

ZIP + 4

XXXXX-XXXX

Mark if your address is different from your last return X

Submit this form along with your payment in full of any tax due as shown on Line 4 below.

1. A 3-month extension until October 31, 2003, is hereby requested in order to file the following District of Columbia return or report (check one):

X Personal Property Tax Return, Form FP-31

X Railroad Company Report, Form FP-33

X Railroad Tangible Property Return, Form FP-32

X Rolling Stock Tax Return, Form FP-34

2. ESTIMATED TAXABLE REMAINING COST (current value) OF TANGIBLE PERSONAL PROPERTY AS OF JULY 1, 2002..... \$ XXXXXXXXX.XX

3. TAX RATE (\$3.40 per hundred)..... .0340

4. BALANCE DUE (Multiply Line 2 by Line 3). Payment of the entire balance due must be submitted with this form, otherwise, your extension request will be denied. (Note: You will also be subject to failure-to-pay penalty and interest on any amount of the tax due that is not paid with this extension request)..... \$ XXXXXXXXX.XX

PLEASE

I declare under penalties of perjury provided by law that I have examined this return (including any accompanying schedules and statements) and, to the best of my knowledge and belief, it is true, correct and complete. If prepared by a person other than the taxpayer, this declaration is based on all information available to the preparer.

SIGN

HERE

TAXPAYER'S SIGNATURE

MM/DD/YYYY

DATE

XXX-XXX-XXXX

Telephone Number of Person to Contact

MARK "X" IF THE BOX IS SIGNED PURSUANT TO AN AUTHORIZED POWER OF ATTORNEY X

PREPARER'S SIGNATURE (if other than taxpayer)

MM/DD/YYYY

DATE

XXXXXXXXXX

Preparer's FEIN, SSN or PTIN

PAID

PREPARER

XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX

XXX-XXX-XXXX

FIRM NAME

Preparer's Telephone Number

ONLY

XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX

FIRM ADDRESS

Mail return and payment to: DC Office of Tax and Revenue, PO Box 7862, Washington, DC 20044-7862. Make check or money order payable to the DC Treasurer. Include your FEIN or SSN, "FP-129A" and tax year on your payment.