



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, 2013 and ending June 30, 2014 Due Date: July 31, 2013

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 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? [] 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? If "Yes", attach a separate schedule listing the name of each company [] Yes [] No

Office building owners must attach a list of tenants as of July 1, 2013. Include the building address, taxpayer ID and room number.

