# 2018 FP-31 District of Columbia (DC) Personal Property Tax Forms and Instructions

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The following forms are provided in this booklet:

- FP-31 Personal Property Tax Return
- FP-31P Payment Voucher
- FP-129A Extension of time to file a DC Personal Property Tax Return

#### **General Instructions for FP-31**

#### Who must file a FP-31?

Generally, every individual, corporation, partnership, executor, administrator, guardian, receiver, trustee (every entity) that owns or holds personal property in trust must file a District of Columbia (DC) personal property tax return, Form FP-31. This includes entities located in the District and those that, by legal definition, are located in the District. This includes property:

- used or available for use in DC in a trade or business, whether or not operated for profit; and
- kept in storage, held for rent or lease or similar business arrangement with third parties, government agencies or non-profit entities.

**NOTE**: By definition, you are engaged in a trade or business if you are carrying on the affairs of a trade, business, profession, vocation, rental of property, or any other activity, whether or not operated for profit or livelihood. Construction companies doing business in DC at any time during the tax year must apportion the remaining cost (current value) of tangible personal property as of July 1, 2017, by the number of days their tangible personal property was physically located in the District.

# Who is exempt from paying Personal Property Tax?

You are exempt from paying if:

- Your remaining cost (current value) is \$225,000 or less;
- You are a non-profit organization. If the tangible personal property of an Internal Revenue Code (IRC) §501(c)(3) organization has received a certificate of exemption from the DC Office of Tax and Revenue (OTR), it is exempt from the personal property tax.

**Note**: Any personal property used for activities that generate unrelated business income subject to tax under IRC §511 is not exempt from the personal property tax. If you are an IRC §501(c) (3) organization and would like a DC application for exemption (form FR-164), please visit our website at <a href="https://www.taxpayerservicecenter.com">www.taxpayerservicecenter.com</a> or call (202) 442-6546.

- You pay DC Gross Receipts Tax, Distribution Tax, Toll Telecommunication Service Tax or Commercial Mobile Service Tax.
- You are a Qualified High Technology (QHTC). If you are a QHTC within the meaning of DC Code §47-1817.01(5A), qualified tangible personal property within the meaning of DC Code §47-1521(4) purchased and used or held for use by you after December 31, 2000, is exempt from DC personal property tax for 10 years beginning with the year of purchase. After the 10th year the property must be reported at 25% of the original cost or exchange value, unless it is qualified as technological equipment. In that case it must be reported at 10% of the original cost or exchange value. See DC Code §§ 47-1523(b) and 47-1523(d)(2).

A QHTC claiming exemption from personal property tax must attach Form QHTC-CERT to Form FP-31. For additional information, see Publication FR-399, Qualified High Technology Companies. The FR-399 includes information on filing QHTC claims for a refund of personal property tax and the schedules to use for exempt QHTC property. (For additional information, visit our web site: www.taxpayerservicecenter.com).

• You are a qualified supermarket under DC Official Code §47-3801(2), have otherwise been subject to personal property tax for less than 10 years, and have applied for and received a certificate of eligibility for the exemption from the Office of the Mayor. See DC Code §§ 47-3802(c)(1) and 47-1508(a)(9).

# Simplified filing for those with remaining cost of \$225,000 or less

To determine if your personal property remaining cost (current value) is \$225,000 or less, do the following:

- Complete page 1 of the Form FP-31, except for "Fill in if remaining cost is \$225,000 or less" oval;
- Complete page 2 of Form FP-31, Lines 1-8;
- Complete Schedule A on page 3 even if remaining cost is \$225,000 or less;
- Complete page 1 of the Form FP-31, shading the oval for "Fill in if remaining cost is \$225,000 or less" oval if applicable;
- Sign the return; and
- Send the return to the OTR.

# Which other DC personal property tax forms may be filed?

- Railroad Tangible Personal Property Return, Form FP-32;
- Railroad Company Report, Form FP-33; and
- Rolling Stock Tax Return, Form FP-34

#### When are your taxes due?

You must file your return (FP-31, FP-32, FP-33, FP-34, FP-31P or FP-129A) by July 31, 2017. Please file the original signed return(s). **Do not send a photocopy.** 

#### How to file your return

Send the FP-31 or PF-31P:

By mail with a payment to:

Office of Tax and Revenue

PO Box 96183

Washington, DC 20090-6183

By mail without a payment to: Office of Tax and Revenue

PO Box 96144

Washington, DC 20090-6144

Send your FP-129A to: Office of Tax and Revenue

PO Box 96196

Washington, DC 20090-6196

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#### **Payment Options**

If the amount of the payment due for a period exceeds \$5,000, you must pay electronically.

Refer to the Electronic Funds Transfer (EFT) Payment Guide available on the DC website at <a href="https://www.taxpayerservicecenter.com">www.taxpayerservicecenter.com</a> for instructions for electronic payments.

Payment options are as follows:

- Electronic check (e-check). E-check is similar to ACH debit, but it is a one-time transaction where the taxpayer provides the banking information at the time of payment instead of storing the information. There is no fee for business e-check payments. eTSC does not allow the use of foreign bank accounts for business e-check.
- ACH Credit. ACH credit is for business taxpayers only. There is no fee charged by OTR, but the taxpayer's bank may charge a fee. The taxpayer directly credits OTR's bank account. The taxpayer does not need to be eTSC registered to use this payment type, and does not need access to the website.

Note: When making ACH Credit payments through your bank, please use the correct tax type code (00400) and tax period ending date (YYMMDD).

- ACH Debit. ACH debit is for registered eTSC business taxpayers only. There is no fee. The taxpayer's bank routing and account numbers are stored within their online eTSC account. This account can be used to pay any existing liability. The taxpayer gives OTR the right to debit the money from their bank account. eTSC does not allow the use of foreign bank accounts for business ACH Debit.
- Credit/Debit Card. The taxpayer may pay the amount owed using Visa®, MasterCard®, Discover® or American Express®. You will be charged a fee that is paid directly to the District's credit/debit card service provider. Payment is effective on the day it is charged.
- Check or money order. Include a check or money order (US dollars), payable to the DC Treasurer, with your completed return. Write your Taxpayer Identification Number (TIN), either FEIN/SSN, daytime telephone number, '2018', and FP-31 on the check or money order. Attach your payment to the Form FP-31P Payment Voucher provided in this booklet. Mail the FP-31P with, but not attached to the FP-31 tax return to:

Office of Tax and Revenue PO Box 96183 Washington, DC 20090-6183

**Note:** International ACH Transaction (IAT). Your payment cannot be drawn on a foreign account. Pay by money order (US dollars) or credit card instead. If you request your refund to be direct deposited into an account outside of the United States, you will receive a paper check.

#### **Penalties and Interest**

OTR will charge:

- A penalty of 5% per month if you fail to file a return or pay any tax due on time. It is computed on the unpaid tax for each month or fraction of a month, that the return is not filed or the tax is not paid. It may not exceed an additional amount equal to 25% of the tax due;
- A 20% penalty on the portion of an underpayment of taxes if attributable to negligence. Negligence is failure to make a reasonable attempt to comply with the law or to exercise ordinary and reasonable care in preparing tax returns without the intent to defraud.

One indication of negligence is failure to keep adequate books and records:

- Interest of 10% per year, compounded daily, on a late payment:
- A one-time fee to cover internal collection efforts on any unpaid balance. The collection fee assessed is 10% of the tax balance due 90 days after the issuance of a notice of enforcement.
- A civil fraud penalty of 75% of the underpayment which is attributable to fraud (see DC Code §47-4212).

#### **Special Circumstances**

#### **Amended Returns**

Use Form FP-31 to file an amended personal property tax return. Please shade the "Fill in if amended return" oval located below the address area. If amending a prior year form, check our web site at <a href="https://www.taxpayerservicecenter.com">www.taxpayerservicecenter.com</a> for the correct form. You must file a separate amended return for each year you are amending.

The personal property tax return is considered a standalone return for a single year. Any overpayment of tax for that year cannot be used as a credit carry forward to the next year. Credits created by the amended return will be refunded upon written request to the Customer Service Administration (CSA) within OTR.

#### **Final Return**

If you are not required to continue filing a return due to the ending of business operations, shade the "Fill in if final return" oval on the return. We will then cancel your filing requirement. Do not use this oval to indicate the return is the final for the period being reported.

#### **Electronic filing instructions**

The instructions in this booklet are designed specifically for filers of paper returns. If you are filing electronically and these instructions differ from the instructions for the electronic method being used, you should comply with the instructions appropriate for that method.

#### **Substitute forms**

You may file your DC tax return using a computer-prepared or computer-generated substitute form provided the form is approved in advance by OTR. The fact that a software package is available for retail purchase does not mean that the substitute form has been approved for use. Please contact your vendor for further information.

#### **Getting Started**

Not all items will apply. Fill in only those that do apply. If an amount is zero, make no entry, leave the line blank.

All entries on the return and attachments are whole dollars only. Do not enter cents. Round cents to the nearest dollar. *Examples:* 

\$10,500.50 rounds to \$10,501 \$10,500.49 rounds to \$10,500

#### **Taxpayer Identification Number (TIN)**

You must have a TIN, whether it is a Social Security Number (SSN), or Federal Employer Identification Number (FEIN)

- An SSN is a valid number issued by the Social Security Administration (SSA). To apply for an SSN, get Form SS-5, Application for a Social Security Card, from your local SSA office or online at <a href="https://www.ssa.gov">www.ssa.gov</a>. You may also get this form by calling 1-800-772-1213;
- An FEIN is a valid number issued by the Internal Revenue Service (IRS). To apply for an FEIN, get Form SS-4, Application for Employer Identification Number (EIN), or get this form online at www.irs.gov/businesses and clicking on 'Employer Identification Number' (EIN) under 'Starting a Business'. You may also get this form by calling 1-800-TAX-FORM (1-800-829-3676).

#### Incomplete forms will delay processing

Complete all items on the FP-31, otherwise OTR may send the return back to you for completion and resubmission.

#### Help us identify your forms and attachments

Write your FEIN or SSN, tax period, business name and address on any statements submitted with the return or filed separately. The FEIN or SSN is used for tax administration purposes only. **Note**: The District allows submission of the FP-31 return using a CD. FP-31 filers must print and submit pages 1-2. All other attachments must be on the CD. The CD should include a copy of the entire return and indicate on the CD the FEIN/SSN, tax year and tax type. Images on the CD should be submitted in PDF format.

#### Filling out the form

To aid us in processing your return, please follow these rules:

| Do not print outside the boxe                | es.                                 |
|--|-------------------------------------|
| Use black ink.                               | ROBERTS                             |
| Print in CAPITAL letters.                    | NOBLINIO                            |
| Leave a space between                        | 8 · E L M                           |
| words and between words and numbers.         | O L L IVI                           |
| words and numbers.                           |                                     |
| Write 3s with a rounded top, not a flat top. | 3.7 3 7                             |
| Write 7s without a                           |                                     |
| middle bar.                                  |                                     |
| Fill in ovals completely.                    |                                     |
| Do not "✓" or "x" ovals.                     |                                     |
| Do not enter cents. Round                    | 5720400                             |
| cents to the nearest dollar.                 | 5 / 2 0 4 00                        |
| Note: Your social security nu                | imber is used for tax nurnoses only |

Note: Your social security number is used for tax purposes only

#### **Personal Information**

Complete the personal information as instructed using CAPITAL letters and black ink. Use one block per character, including using a space between address fields. Please write clearly; otherwise this can delay processing your return.

#### **Assembling your FP-31 return**

- Do not staple or otherwise damage the Bar Code located in the upper right hand corner of this form or schedule(s) being attached;
- Do not cross out the tax year on the 2018 return. If you are not filing a 2018 FP-31, Personal Property Tax Return, do not use this booklet. Request a booklet for the specific year you are filing by calling our Forms Center at (202) 442-6546, or visit the Customer Service Center at 1101 4<sup>th</sup> Street, SW, 2<sup>nd</sup> Floor, Washington, DC 20024. You may also visit our website, <a href="www.taxpayerservicecenter.com">www.taxpayerservicecenter.com</a> for prior year personal property tax returns.

#### **Signature**

Sign and date your return. If the return was prepared by a tax preparer, the tax preparer must also sign the return and provide his or her preparer tax identification number (PTIN) and telephone number. Taxpayer(s) are responsible for the information prepared and submitted by a paid preparer. Please keep a copy for your records.

Preparer Tax Identification Number (PTIN). If you are a paid preparer, you are required to have a PTIN issued by the IRS. A PTIN is a number issued and authorized by the IRS to file a return on the taxpayers' behalf.

### **Specific instructions**

#### **Number of DC locations**

A business owner of tangible personal property having multiple locations in the District must report that property on one personal property tax return. Attach a separate schedule identifying tangible property for each location. Do not file separate returns for each location.

**Value of Tangible Personal Property** — You must report the remaining cost (current value) of all your tangible personal property as of July 1, 2017.

**Depreciation** — Depreciation is allowed only for the period of ownership from the month and year of acquisition. The straight-line method of depreciation is the only method allowed in calculating the remaining cost (current value). Do not use accelerated depreciation methods and property lives, including the Accelerated Cost Recovery System.

Tangible personal property (excluding qualified technological equipment) reported on the return **must not** be depreciated in excess of 75% of its original cost. Consequently, the remaining cost (current value) of all tangible personal property (excluding qualified technological equipment) must be at least 25% of the original cost.

Qualified technological equipment must be depreciated at the rate of 30% per year. It **must not** be depreciated in excess of 90% of its original cost. Consequently, the remaining cost (current value) of qualified technological equipment must be at least 10% of the original cost.

For personal property tax years beginning July 1, 2000, and thereafter, the remaining cost (current value) of qualified technological equipment acquired on or before June 30, 2000, must be calculated as if depreciation at the rate of 30% per year was used beginning with the acquisition date. However, there will be no credit granted nor refund of tax paid in earlier tax years under the prior depreciation rate for qualified technological equipment.

Depreciation rates for tangible personal property not listed in the Depreciation Guidelines in this booklet may be obtained by calling (202) 727-4TAX(4829).

Use Schedule A of the Personal Property Tax Return to report all depreciable property that you own which is subject to the personal property tax.

#### **Definition of Qualified Technological Equipment**

As used here, computer means a programmable electronically activated device capable of accepting information, applying prescribed processes to the information, and supplying the results with or without human intervention, that consists of a central unit containing extensive storage, logic, arithmetic and control capabilities.

Related peripheral equipment means any auxiliary machine (whether online or offline) designed to be placed under the control of a computer and operated in conjunction with the computer.

Qualified technological equipment means any computer or related peripheral equipment except:

• Equipment that is an integral part of other property that is not a computer;

- Typewriters, calculators, adding and accounting machines, copiers, duplicating equipment and similar devices;
- Equipment of a kind used primarily for the amusement or entertainment of the user;
- Mainframe computers capable of simultaneously supporting multiple transactions and multiple users, and having an original cost in excess of \$500,000, including any additional memory units, tape drives, disk drives, power supplies, cooling units and communication controllers that are peripheral equipment to such computers; or
- Computers used in operating industrial processing equipment, equipment used in a computer-assisted manufacturing system, equipment used in a computer-assisted design or engineering system integral to an industrial process, or a subunit or an electronic assembly comprising a component in a computer-integrated industry processing system.

**Leased Property** — Any tangible personal property owned by the lessor must be reported by the lessor in Schedule A. Any tangible personal property under a "Lease-Purchase Agreement" or a "Security Purchase Agreement", under which the lessee is obligated to become the owner, must be reported by the lessee in Schedule A.

**Schedules** — When attaching separate schedules to the FP-31, include your name, address, tax year, and the FEIN (or SSN) on each schedule.

All items of tangible personal property owned by the business and located or having a taxable situs in DC, whether or not currently in use, must be reported at their remaining cost (current value) as of July 1, 2017.

#### Schedule A: Books, DVDs and other reference material

Report in this schedule all books and other reference material such as DVDs, tapes, etc., used in the business or profession. Enter the totals on page 2 of Form FP-31, Line 1 of columns A and B. Qualifying tangible personal property leased by a non QHTC under an operating lease (no ownership implication for the lessee) to either a certified QHTC or a non QHTC is subject to the personal property tax. The property must be reported on Schedule A of Form FP-31.

#### Furniture, fixtures, machinery and equipment

Report furniture, fixtures, machinery, equipment, and other fixed assets used in the business or profession. Report the furniture, furnishings and equipment of hotels, apartments, schools, hospitals, sanitariums, rooming and boarding houses, estate property, property in storage and private dwellings that are rented furnished as a complete unit or as individual rooms or apartments. Enter the totals on page 2 of Form FP-31, Line 2 of columns A and B. Hotels and motels must also report their total number of rooms on page 1 of Form FP-31, Line C.

#### Unregistered motor vehicles and trailers

Report on Schedule A the totals for all unregistered (not registered in DC) motor vehicles and trailers. Include the totals along with the totals for other tangible personal property on page 2 of Form FP-31, Line 3 of columns A and B.

#### Other tangible personal property

Report on Schedule A the following tangible personal property: trailers, construction equipment, special equipment mounted on

a vehicle or trailer (not used primarily for the transportation of persons or property), boats, barges, dredges, aircraft, and other tangible personal property. Enter the total original cost on page 2 of Form FP-31, Line 3, of column A and the total remaining cost (current value) on page 2, Line 3, of column B. Owners (lessors) of leased property located in DC in addition to completing Schedule A must also complete Schedule D-2, if the property is not included in Schedule A.

#### Schedule B: Supplies

Report the cost of any consumable items not held for sale, such as office and other supplies.

- Office supplies include, but are not limited to, items such as stationery and envelopes used in the business or profession.
- Other supplies include, but are not limited to, wrapping and packing materials, advertising items, sales books, fuel oil, china, glass and silverware. Enter the totals on page 2 of Form FP-31, Line 4 of columns A and B.

#### Schedule C: Dispositions of tangible personal property

Report all fixed assets that were traded in, sold, donated, discarded or transferred out of a DC location during the preceding tax year. This includes items reported on last year's return that are not reported in either Schedules A or D-2 of the current year's return.

#### Schedule D-1: Possession of leased property

Complete this schedule only if you are a non QHTC and had in your possession tangible personal property under either a rental or lease agreement or under some other arrangement with another business or individual and the tangible personal property is not owned by you. Any tangible personal property in your possession under a "Lease-Purchase Agreement" or a "Security-Purchase Agreement" which obligates you to become the owner, must be reported in Schedule A.

#### Schedule D-2: Leased property in DC

Complete this schedule only if you are a non QHTC and, as lessor, rented or leased to any business or individual, tangible personal property under a "Lease-Purchase Agreement" or a "Security-Purchase Agreement" under which the lessee is required to become the owner. Any other tangible personal property owned by you and subject to a rental or lease agreement or any other similar arrangement is reported in Schedule A.

Complete and file the following schedules, as applicable, if you are a QHTC amending your originally filed FP-31 return.

#### Schedule D-3: Purchased property and QHTCs

This schedule is used to report qualifying tangible personal property purchased after December 31, 2000, by a certified QHTC and used or held for use by the QHTC, or leased under a capital lease to a certified QHTC. (This schedule is also in Publication FR-399, Qualified High Technology Companies.) A certified DC QHTC claiming exemption for qualifying tangible personal property which it purchased after December 31, 2000, or which is in its possession pursuant to a lease - purchase or security-purchase agreement (a capital lease - under which it is required to become the owner of the property) must report the property in a Schedule D-3 filed with Form FP-31.

All such property acquired or leased under a lease-purchase or security-purchase agreement prior to January 1, 2001, is not tax exempt. The property must be reported in Schedule A of Form FP-31.

#### Schedule D-4: Leased property and QHTCs

This schedule is used to report qualifying tangible personal property purchased after December 31, 2000, by a non QHTC and leased to a certified QHTC under a capital lease. This schedule is to be completed by the lessor of the property. (This schedule is in Publication FR-399, Qualified High Technology Companies.) A non QHTC which after December 31, 2000, rents or leases qualifying tangible personal property to a certified DC QHTC under a lease- purchase or security-purchase agreement must report the property in a Schedule D-4 filed with Form FP-31.

**Note:** A non QHTC lessor of such property acquired <u>prior</u> to January 1, 2001, under a similar lease arrangement must report the property in Schedule D-2 of Form FP-31.

#### **DEPRECIATION GUIDELINES**

Assets (excluding qualified technological equipment) may not be depreciated in excess of 75% of the original cost.

Qualified technological equipment may not be depreciated in excess of 90% of the original cost.

Each category includes, but is not limited to, the items listed below.

#### Category A: 6.67% depreciation per year ( 15 year life )

- (1) Antennas, transmitting towers, fiber optic cables, shelters, satellite dishes and repeaters
- (2) Cement gravel and sand bins
- (3) Pianos and organs
- (4) Plating equipment
- (5) Safes
- (6) Watercraft, docks, slips, wharves, piers and floating equipment (boats, ships, barges)

#### Category B: 10% depreciation per year ( 10 year life )

- (1) Air conditioning equipment (compressors, ducts, package units and window units)
- (2) Asphalt, cement and slurry plants and equipment
- (3) Automobile repair shop and gasoline service station equipment
- (4) Automobile sales agency furniture, fixtures and equipment
- (5) Bakery equipment
- (6) Banking furniture, fixtures and equipment (automatic teller machines)
- (7) Barber shop, beauty salon and cosmetic salon furniture, fixtures and equipment
- (8) Bottling equipment
- (9) Bowling alley equipment
- (10) Burglar alarm, security alarm and monitoring systems
- (11) Catering equipment
- (12) Clay products manufacturing equipment
- (13) Cold storage, ice making and refrigeration equipment
- (14) Conveyors
- (15) Dentists and physicians office furniture and equipment
- (16) Department store furniture, fixtures and equipment
- (17) Drug store furniture, fixtures and equipment
- (18) Emergency power generators
- (19) Fire extinguishing systems
- (20) Garbage disposals, trash compactors and trash containers
- (21) Hotel and motel furniture, fixtures and equipment (restaurant, bar, meeting rooms, office rooms, lobby and other public rooms)
- (22) Intercom systems
- (23) Kitchen equipment
- (24) Laundry and dry cleaning equipment
- (25) Libraries
- (26) Mail chutes and mail boxes
- (27) Musical instruments (portable)
- (28) Office furniture, fixtures and equipment (any kind whether modular or system furniture, desks, chairs, cabinets, shelving, awnings, typewriters, calculators, adding machines, files, partitions, carrels, cash registers, paper cutters, etc.)
- (29) Paper products industry machinery and equipment
- (30) Printing industry machinery and equipment
- (31) Pulp industry machinery and equipment
- (32) Restaurant, carry out, supermarket and delicatessen furniture, fixtures and equipment
- (33) Shoe repairing furniture, fixtures and equipment
- (34) Signs (neon and others)
- (35) Solar panels
- (36) Special tools (dies, jigs, gauges, molds)
- (37) Surveying and drafting equipment
- (38) Theater furniture and equipment
- (39) X-ray and diagnostic equipment
- (40) Wax museum (wax figures, displays, sets, barriers, rails)

#### Category C: 12.5% depreciation per year ( 8 year life )

- (1) Building and lawn maintenance equipment
- (2) Car wash equipment
- (3) Construction, road paving and road maintenance equipment
- (4) Fabricated metal products machinery and equipment (machine shop)

- (5) Hospital and nursing home furniture, fixtures and equipment
- (6) Junk yard machinery and equipment
- (7) Meat, fruit, and vegetable packing equipment
- (8) Meters, tickometers and automatic mailer equipment
- (9) Music boxes
- (10) Non-registered motor vehicles (forklifts and golf carts)
- (11) Pipe contractor machinery and equipment
- (12) Radio, television, telecommunications, microwave and satellite transmitting systems (multiplexers, switches, transmitters, receivers, telephones, fiber optic equipment, terminal equipment)
- (13) Recreation, health fitness, health club, golf course and sporting equipment
- (14) Special equipment mounted on any motor vehicle (welders, compressors)
- (15) Trailers
- (16) Vending machines (cigarettes, slot, change, soft drink, food)

#### Category D: 20% depreciation per year ( 5 year life )

- Blinds, drapes and shades (used as secondary window covering)
- (2) Brain scanners, CAT scanners, MRI scanners and dialysis equipment
- 3) Canvas
- (4) Carpets over finished floor, loose carpet and rugs
- (5) Coffee makers and soda fountain equipment
- (6) Computers and related peripheral equipment (excluding qualified technological equipment)
- (7) Duplicating machines, photocopiers and photographic equipment
- (8) Hot air balloons
- (9) Outdoor Christmas decorations
- (10) Portable toilets
- (11) Self-service laundries (washers, dryers)
- (12) Swimming pool furniture, fixtures and equipment
- (13) Telephone answering equipment (beepers)
- (14) Television, stereo, radio and recorder equipment
- (15) Test equipment and electronic manufacturing equipment
- (16) Wood pallets (used in warehouses)

#### Category E: 30% depreciation per year

(1) Qualified technological equipment

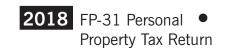
#### Category F: 50% depreciation per year ( 2 year life )

- Amusement arcade machines, pinball machines and video games
- (2) Cable T.V. decoders
- (3) China, glassware, pots, pans, serving dishes, utensils and silverware (in service)
- (4) Linens (in service)
- (5) Microfilms, movie films and video movie tapes
- (6) Small hand tools
- (7) Tuxedos and uniforms (in service)

#### Category G: No depreciation — report at 100% of cost

- (1) Antiques, tapestries and oriental rugs (items appreciating in value)
- (2) Chemicals
- (3) Cleaning, office and other supplies
- (4) China, glassware, pots, pans, serving dishes, utensils and silverware (new in reserve)
- (5) Linens (new in reserve)
- (6) Oil paintings and sculptures (items appreciating in value)
- (7) Paper products
- (8) Tuxedos and uniforms (new in reserve)







| Print in CAPITAL letters using black ink   |                         |                 |              |                 | OFFICIAL           | USE ONLY                           |
|--|-------------------------|-----------------|--------------|-----------------|--------------------|------------------------------------|
| Taxpayer Identification Number (FEIN)  | Fill in if FEIN         |                 |              |                 |                    | D# 0000                            |
| Business name  | Fill in if SSN          |                 |              |                 | and ending         | ning July 1, 2017<br>June 30, 2018 |
|  |                         |                 |              |                 | Due Date:          | July 31, 2017                      |
| Business mailing address line 1  |                         |                 |              |                 |                    |                                    |
| Duain and madiling address line 2  |                         |                 |              |                 |                    |                                    |
| Business mailing address line 2  |                         |                 |              |                 |                    |                                    |
| City   |                         |                 |              | State Zir       | Code + 4           |                                    |
|  |                         |                 |              |                 |                    |                                    |
|  |                         |                 |              |                 |                    |                                    |
|  |                         |                 |              |                 |                    |                                    |
|  |                         |                 |              |                 |                    |                                    |
|  |                         |                 |              |                 |                    |                                    |
| Fill in if Amended Return  |                         | Fill in         | if certified | QHTC (Attac     | ch QHTC-Cert)      |                                    |
| Fill in if Final Return  |                         | Fill in         | if remainir  | ng cost is \$22 | 5,000 or less      |                                    |
|  |                         |                 |              |                 |                    |                                    |
|  |                         |                 |              |                 |                    |                                    |
| Statement of   | f personal proper       | ty and com      | putation o   | f personal p    | roperty tax        |                                    |
|  |                         |                 |              |                 |                    |                                    |
|  |                         |                 |              |                 |                    |                                    |
| A. Kind of business or profession  | :                       |                 |              |                 |                    |                                    |
|  |                         |                 |              |                 |                    |                                    |
| D N 1 (DO) (   |                         |                 |              |                 |                    |                                    |
| B. Number of DC locations  Consolidate reporting for all bu  |                         |                 | ne personal  | property tax re | eturn. Do not file |                                    |
| separate returns for each loca   | tion. (See instructions | s)              |              |                 |                    |                                    |
|  |                         |                 |              |                 |                    |                                    |
| C. If a hotel or motel, enter the nu   | umber of rooms          |                 |              |                 |                    |                                    |
|  |                         |                 |              |                 |                    |                                    |
| D. Are you a lessee or lessor of p   | personal property not   | reported in So  | chedule A of | this return?    |                    | Yes No                             |
| If "Yes", complete Schedule Document of the Sc | -1 or D-2 as appropri   | ate. If you are |              |                 |                    |                                    |
| ,  |                         |                 |              |                 |                    |                                    |
| E. Are there other companies do  | ing business from you   | ur address und  | der a lease  | sublease or     |                    | Yes No                             |
| concession? If "Yes", attach a   |                         |                 |              |                 |                    |                                    |
|  |                         |                 |              |                 |                    |                                    |
|  | Office building own     |                 |              |                 |                    |                                    |

| Taxpayer name      |  |                          |  |                 |              |                                    |             |           |           |             |              |
|--------------------|--|--------------------------|--|-----------------|--------------|------------------------------------|-------------|-----------|-----------|-------------|--------------|
| FEIN (or SSN)      | :  |                          |  |                 | 1            | 8 0 3 1                            | 0 0 2       | 0 0       | 0 (       | )           | l            |
| 1. Books. D        | VDs and other  |                          | Column A - Origin<br>ound cents to the i |                 | ar)          |                                    | B - Rema    |           |           |             |              |
| ,                  | material (from   | \$                       |  |                 | 00           | \$                                 |             |           | Ш         |             | 00           |
|                    | fixtures, machinery pment (from e A)                                 | \$                       |  |                 | 00           | \$                                 | П           |           | П         |             | 00           |
| unregiste          | ered motor vehicles,<br>ered trailers and other<br>personal property |                          |  |                 |              |                                    |             |           |           |             |              |
|                    | hedule A)  | \$                       |  |                 | 00           | \$                                 | Щ           | Щ         | Щ         | Щ           | 00           |
|                    | (from Schedule B)  | \$                       |  | ш               | 00           | \$                                 | Ш           | Ш         | Щ         | Ш           | 00           |
| personal           | ginal cost of tangible property (Add Lines h 4, Column A)            | \$                       |  |                 | 00           |                                    |             |           |           |             |              |
|                    | ng cost (Current Value) of<br>es 1 through 4, Column                 |                          | ty                                       |                 |              | \$                                 | П           |           | П         |             | 00           |
| 7. Deduct:         | Exclusion  |                          |  |                 |              | \$                                 | 2           | 2 5       | 0 0       | 0           | 00           |
|                    | remaining cost (current value) to or greater than Lin                |                          |  |                 |              | \$                                 | П           |           |           |             | 00           |
|                    | TAX RATE (\$   | 3.40 ner h               | undred)                                  |                 |              |                                    |             |           | >         | <b>(</b> _0 | 340          |
| 9. <b>TAX</b> (Lir | ne 8 amount multiplied b   | •                        |  |                 |              | \$                                 |             |           |           |             | 00           |
| 10. Tax paid       | l (if any) with FP-129A, i   | request for extens       | sion of time to file                     | 9               |              | \$                                 | П           |           | П         |             | 00           |
| 11. If this is     | an amended 2018 retur  | n, payments mad          | de with original 2                       | 018 FP-31       |              | \$                                 |             |           | П         |             | 00           |
| 12. Balance        | due (Line 9 minus Line   | 10 and Line 11)          | )  |                 |              | \$                                 |             |           | П         |             | 00           |
| 13. Penaltie       | s (See instructions)   |                          |  |                 |              | \$                                 |             | П         | П         |             | 00           |
| 14. Interest       | (See instructions)   |                          |  |                 |              | \$                                 | П           |           | Ш         |             | 00           |
| 15. Total - b      | palance due, penalties an  | d interest <i>(Add i</i> | Lines 12, 13 and                         | 114)            |              | \$                                 |             |           | П         |             | 00           |
| 16. Amount         | paid with this return  |                          |  |                 |              | \$                                 | П           | Ш         | Щ         |             | 00           |
| 17. Unpaid         | balance ( <i>If any</i> )  |                          |  |                 |              | \$                                 |             |           | П         |             | 00           |
| ' '                | rment ( <i>If any</i> )<br>s refund go to an account                 | outside of the U         | J.S.? Yes                                | No See          | e instructio | ns. \$                             | П           |           | П         |             | 00           |
| Third party desi   | gnee To authorize another p  | person to discuss to     | his return with OTF                      | R, fill in here | and e        | nter the name and                  | phone num   | ber of th | nat perso | n. See      | instructions |
| Designee's nam     | е  |                          |  |                 |              | Phone number                       |             |           |           |             |              |
| PLEASE<br>SIGN     | Under penalties of law, I preparer is based on the                   |                          |  |                 | , to the bes | st of my knowledg<br>Telephone Nun |             |           |           | n of p      | aid          |
| HERE               | Officer's or owner's signa   | ture                     | Title                                    | Da              | te           |                                    |             |           |           |             | Ш            |
|                    |  |                          |  |                 |              | Preparer's FEII                    | N, SSN or F | PTIN      |           |             |              |
| PAID<br>PREPARER   | Preparer's signature (If other                                       | ner than taxpayer)       |  | Da              | te           |                                    |             |           |           |             |              |
| ONLY               | Firm name  |                          |  |                 |              | Preparer's Tele                    | phone Nun   | nber      | 7.        |             |              |
|                    | Firm address   |                          |  |                 |              |                                    |             |           |           |             |              |

Make check or money order (US dollars) payable to the DC Treasurer. Include your FEIN/SSN, "FP-31" and tax year 2018 on your payment. See mailing instructions. Use the return envelope in this booklet.

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| Use                 | only the  | straight-line  | depreciation   | method   |
|---------------------|-----------|----------------|----------------|----------|
| <b>U</b> 3 <b>U</b> | OIII TIIC | 3ti dibiltilli | uchi coidtioii | IIICUIUU |

| Schedi                              | ule A                     | Books, DVDs an<br>trailers and other  |                               |                       |             |                         |              |  |   |                             |                        | ed   |
|-------------------------------------|---------------------------|---------------------------------------|-------------------------------|-----------------------|-------------|-------------------------|--------------|--|---|-----------------------------|------------------------|--|
| (1)<br>Type<br>Prope                |                           | (2)<br>Date<br>Acquired<br>Month/Year | Depre                         | 3)<br>ciation<br>Used |             | (4)<br>Original<br>Cost | l            | Depred   | (5)<br>umulated<br>ciation a<br>30, 201 | s of                        | (C                     | (6)<br>maining Cos<br>urrent Value)<br>uly 1, 2017 |
|                                     |                           |                                       |                               |                       | \$          |                         |              |  |   |                             | \$                     |  |
|                                     |                           |                                       |                               |                       |             |                         |              |  |   |                             |                        |  |
|                                     |                           |                                       |                               |                       |             |                         |              |  |   |                             |                        |  |
|                                     |                           |                                       |                               |                       |             |                         |              |  |   |                             |                        |  |
|                                     |                           |                                       |                               |                       |             |                         |              |  |   |                             |                        |  |
|                                     |                           |                                       |                               |                       |             |                         |              |  |   |                             |                        |  |
|                                     |                           |                                       |                               |                       |             |                         |              |  |   |                             |                        |  |
| otal Original Co<br>age 2 of FP-31) |                           | appropriate Line(s) 1,                | 2 and/or 3 of Col.            | Α,                    | \$          |                         |              | Total Remainir<br>(Also enter on<br>and/or 3 of Co | appropria                               | ite Line(s) 1, 2            | \$                     |  |
| ched                                | ule B cos                 | t of office and othe                  | r supplies on h               | and as of J           | luly 1, 20  |                         | √aluation I  | f ∩ther  |   | R                           | emaining               | Cost   |
|                                     | Тур                       | e of Supplies                         |                               |                       |             |                         | nysical Inv  |  |   | ((                          | Current V<br>July 1, 2 | /alue)   |
|                                     |                           |                                       |                               |                       |             |                         |              |  |   |                             |                        |  |
| _                                   |                           | on hand (Enter o                      |                               |                       |             |                         |              |  |   | \$                          |                        |  |
|                                     |                           | ngible personal pro                   |                               |                       |             | and dispose             | ed of subse  | equently.  |   |                             |                        | (7)  |
| (1)<br>Type of<br>Property          | (2)<br>Date<br>Acquired   | (3)<br>Original<br>Cost               | (4)<br>Date of<br>Disposition | (5<br>Metho<br>Dispos | d of        |                         | Nam          | ne and Addres<br>Purchaser                         | ss of                                   |                             |                        | Sales<br>Price                                     |
|                                     |                           | \$                                    |                               |                       |             |                         |              |  |   |                             | \$                     |  |
| ched                                | ule D-1                   | Leased tangible pers                  | onal property in D            | C in your pos         | session. To | be completed            | by lessee (c | other than a QH                                    | ΓC) only. (                             | See the specific            | c instructio           | ns for Schedule                                    |
| Т                                   | (1)<br>Type of<br>Toperty |                                       |                               | (2)                   |             |                         | Or           | (3)<br>iginal<br>Cost                              | Da                                      | (4)<br>ate Lease<br>Started |                        | (5)<br>Annual<br>Rent                              |
|                                     |                           |                                       |                               |                       |             |                         | \$           |  |   |                             | \$                     |  |
|                                     |                           |                                       |                               |                       |             |                         |              |  |   |                             |                        |  |
| ched                                | ule D-2                   | Leased tangible pers                  |                               | (2)                   | leased to   | a QHTC). To b           |              | by lessor only. (                                  | See the s                               | pecific instructi (4)       | ons for Sch            | (5)  |
|                                     | roperty                   | Ow                                    | ner's Name an                 |                       | e Addres    | SS                      | Or           | iginal<br>Cost                                     |   | ate Lease<br>Started        |                        | Annual<br>Rent                                     |
|                                     |                           |                                       |                               |                       |             |                         | \$           |  |   |                             | \$                     |  |
|                                     |                           |                                       |                               |                       |             |                         |              |  |   |                             |                        |  |

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

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

FEIN/SSN:

TOTAL:

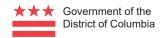
\$

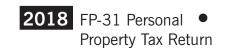
|                  | -                |                               |                  |                   | Y PURCHASED BY A CEF<br>AL LEASE) TO A CERTIFII | -               | C AND USEI             |
|------------------|------------------|-------------------------------|------------------|-------------------|---|-----------------|------------------------|
| PROPERTY<br>TYPE | PURCHASE<br>DATE | QHTC<br>CERTIFICATION<br>DATE | ORIGINAL<br>COST | REMAINING<br>COST | LESSOR'S NAME<br>AND ADDRESS                    | MONTHLY<br>RENT | DATE<br>LEASE<br>BEGAN |
|                  |                  |                               | \$               | \$                |   | \$              |                        |
|                  |                  |                               |                  |                   |   |                 |                        |
|                  |                  |                               |                  |                   |   |                 |                        |

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

TOTAL:

| PROPERTY<br>TYPE | PURCHASE<br>DATE | LESSEE'S<br>CERTIFICATION<br>DATE |              | REMAINING<br>COST | LESSOR'S NAME<br>AND ADDRESS | MONTHLY<br>RENT | DATE<br>LEASE<br>BEGAN |
|------------------|------------------|-----------------------------------|--------------|-------------------|------------------------------|-----------------|------------------------|
|                  |                  |                                   | \$           | \$                |                              | \$              |                        |
|                  |                  |                                   |              |                   |                              |                 |                        |
|                  |                  |                                   |              |                   |                              |                 |                        |
|                  |                  |                                   |              |                   |                              |                 |                        |
|                  |                  |                                   | TOTAL:<br>\$ | TOTAL:<br>\$      |                              |                 |                        |







| Print in CAPITAL letters using black ink                       |                          |            |                |                 | OFFICIAL          | USE ONLY                       |    |
|--|--------------------------|------------|----------------|-----------------|-------------------|--------------------------------|----|
| Taxpayer Identification Number (FEIN)                          | Fill in if FEIN          |            |                |                 |                   | D# 0000                        |    |
|  | Fill in if SSN           |            |                |                 | Tax Year begin    | ning July 1, 2017              |    |
| Business name  |                          |            |                |                 | and ending        | June 30, 2018<br>July 31, 2017 |    |
| Business mailing address line 1                                |                          |            |                |                 | Due Date.         | July 51, 2017                  |    |
| Dusiness maining address line 1                                |                          |            |                |                 |                   |                                |    |
| Business mailing address line 2                                |                          |            |                |                 |                   |                                |    |
|  |                          |            |                |                 |                   |                                |    |
| City   |                          |            | S              | state Zip       | Code + 4          |                                |    |
|  |                          |            |                |                 |                   |                                |    |
|  |                          |            |                |                 |                   |                                |    |
|  |                          |            |                |                 |                   |                                |    |
|  |                          |            |                |                 |                   |                                |    |
| Fill in if Amended Return                                      |                          | Fill in    | if certified C | HTC (Attack     | n QHTC-Cert)      |                                |    |
|  |                          |            |                | `               | ,                 |                                |    |
| Fill in if Final Return  |                          | Fill in    | if remaining   | cost is \$225   | 5,000 or less     |                                |    |
|  |                          |            |                |                 |                   |                                | -  |
| Statement o  | f personal proper        | tv and com | outation of    | personal pr     | operty tax        |                                |    |
|  | . porosiiai propo        | .,         |                | p 0. 0 0        |                   |                                |    |
|  |                          |            |                |                 |                   |                                |    |
| A. Kind of business or profession                              | 1:                       |            |                |                 |                   |                                |    |
|  |                          |            |                |                 |                   |                                |    |
| P. Number of DC legations                                      |                          |            |                |                 |                   |                                |    |
| B. Number of DC locations Consolidate reporting for all b      |                          |            | ne personal p  | roperty tax ret | turn. Do not file |                                |    |
| separate returns for each loca                                 | ilion. (See instructions | 5)         |                |                 |                   |                                |    |
|  |                          |            |                |                 |                   |                                |    |
| C. If a hotel or motel, enter the n                            | umber of rooms           |            |                |                 |                   |                                |    |
|  |                          |            |                |                 |                   |                                |    |
| D. Are you a lessee or lessor of If "Yes", complete Schedule D |                          |            |                |                 |                   | Yes N                          | No |
| complete FR-399 Schedule D                                     |                          |            | a cortinea Qr  | 110             |                   |                                |    |
|  |                          |            |                |                 |                   |                                |    |
| E. Are there other companies do concession? If "Yes", attach a |                          |            |                |                 |                   | Yes N                          | lo |
|  | ,                        | J          |                | ,               |                   |                                |    |
|  | Office building own      |            |                |                 |                   |                                |    |

| Taxpayer name      |  |                          |  |                 |              |                                    |             |           |           |             |              |
|--------------------|--|--------------------------|--|-----------------|--------------|------------------------------------|-------------|-----------|-----------|-------------|--------------|
| FEIN (or SSN)      | :  |                          |  |                 | 1            | 8 0 3 1                            | 0 0 2       | 0 0       | 0 (       | )           | l            |
| 1. Books. D        | VDs and other  |                          | Column A - Origin<br>ound cents to the i |                 | ar)          |                                    | B - Rema    |           |           |             |              |
| ,                  | material (from   | \$                       |  |                 | 00           | \$                                 |             |           | Ш         |             | 00           |
|                    | fixtures, machinery pment (from e A)                                 | \$                       |  |                 | 00           | \$                                 | П           |           | П         |             | 00           |
| unregiste          | ered motor vehicles,<br>ered trailers and other<br>personal property |                          |  |                 |              |                                    |             |           |           |             |              |
|                    | hedule A)  | \$                       |  |                 | 00           | \$                                 | Щ           | Щ         | Щ         | Щ           | 00           |
|                    | (from Schedule B)  | \$                       |  | ш               | 00           | \$                                 | Ш           | Ш         | Щ         | Ш           | 00           |
| personal           | ginal cost of tangible property (Add Lines h 4, Column A)            | \$                       |  |                 | 00           |                                    |             |           |           |             |              |
|                    | ng cost (Current Value) of<br>es 1 through 4, Column                 |                          | ty                                       |                 |              | \$                                 | П           |           | П         |             | 00           |
| 7. Deduct:         | Exclusion  |                          |  |                 |              | \$                                 | 2           | 2 5       | 0 0       | 0           | 00           |
|                    | remaining cost (current value) to or greater than Lin                |                          |  |                 |              | \$                                 | П           |           |           |             | 00           |
|                    | TAX RATE (\$   | 3.40 ner h               | undred)                                  |                 |              |                                    |             |           | >         | <b>(</b> _0 | 340          |
| 9. <b>TAX</b> (Lir | ne 8 amount multiplied b   | •                        |  |                 |              | \$                                 |             |           |           |             | 00           |
| 10. Tax paid       | l (if any) with FP-129A, i   | request for extens       | sion of time to file                     | 9               |              | \$                                 | П           |           | П         |             | 00           |
| 11. If this is     | an amended 2018 retur  | n, payments mad          | de with original 2                       | 018 FP-31       |              | \$                                 |             |           | П         |             | 00           |
| 12. Balance        | due (Line 9 minus Line   | 10 and Line 11)          | )  |                 |              | \$                                 |             |           | П         |             | 00           |
| 13. Penaltie       | s (See instructions)   |                          |  |                 |              | \$                                 |             | П         | П         |             | 00           |
| 14. Interest       | (See instructions)   |                          |  |                 |              | \$                                 | П           |           | Ш         |             | 00           |
| 15. Total - b      | palance due, penalties an  | d interest <i>(Add i</i> | Lines 12, 13 and                         | 114)            |              | \$                                 |             |           | П         |             | 00           |
| 16. Amount         | paid with this return  |                          |  |                 |              | \$                                 | П           | Ш         | Щ         |             | 00           |
| 17. Unpaid         | balance ( <i>If any</i> )  |                          |  |                 |              | \$                                 |             |           | П         |             | 00           |
| ' '                | rment ( <i>If any</i> )<br>s refund go to an account                 | outside of the U         | J.S.? Yes                                | No See          | e instructio | ns. \$                             | П           |           | П         |             | 00           |
| Third party desi   | gnee To authorize another p  | person to discuss to     | his return with OTF                      | R, fill in here | and e        | nter the name and                  | phone num   | ber of th | nat perso | n. See      | instructions |
| Designee's nam     | е  |                          |  |                 |              | Phone number                       |             |           |           |             |              |
| PLEASE<br>SIGN     | Under penalties of law, I preparer is based on the                   |                          |  |                 | , to the bes | st of my knowledg<br>Telephone Nun |             |           |           | n of p      | aid          |
| HERE               | Officer's or owner's signa   | ture                     | Title                                    | Da              | te           |                                    |             |           |           |             | Ш            |
|                    |  |                          |  |                 |              | Preparer's FEII                    | N, SSN or F | PTIN      |           |             |              |
| PAID<br>PREPARER   | Preparer's signature (If other                                       | ner than taxpayer)       |  | Da              | te           |                                    |             |           |           |             |              |
| ONLY               | Firm name  |                          |  |                 |              | Preparer's Tele                    | phone Nun   | nber      | 7.        |             |              |
|                    | Firm address   |                          |  |                 |              |                                    |             |           |           |             |              |

Make check or money order (US dollars) payable to the DC Treasurer. Include your FEIN/SSN, "FP-31" and tax year 2018 on your payment. See mailing instructions. Use the return envelope in this booklet.

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| Use                 | only the  | straight-line  | depreciation   | method   |
|---------------------|-----------|----------------|----------------|----------|
| <b>U</b> 3 <b>U</b> | OIII TIIC | 3ti dibiltilli | uchi coidtioii | IIICUIUU |

| Schedi                              | ule A                     | Books, DVDs an<br>trailers and other  |                               |                       |             |                         |              |  |   |                             |                        | ed   |
|-------------------------------------|---------------------------|---------------------------------------|-------------------------------|-----------------------|-------------|-------------------------|--------------|--|---|-----------------------------|------------------------|--|
| (1)<br>Type<br>Prope                |                           | (2)<br>Date<br>Acquired<br>Month/Year | Depre                         | 3)<br>ciation<br>Used |             | (4)<br>Original<br>Cost | l            | Depred   | (5)<br>umulated<br>ciation a<br>30, 201 | s of                        | (C                     | (6)<br>maining Cos<br>urrent Value)<br>uly 1, 2017 |
|                                     |                           |                                       |                               |                       | \$          |                         |              |  |   |                             | \$                     |  |
|                                     |                           |                                       |                               |                       |             |                         |              |  |   |                             |                        |  |
|                                     |                           |                                       |                               |                       |             |                         |              |  |   |                             |                        |  |
|                                     |                           |                                       |                               |                       |             |                         |              |  |   |                             |                        |  |
|                                     |                           |                                       |                               |                       |             |                         |              |  |   |                             |                        |  |
|                                     |                           |                                       |                               |                       |             |                         |              |  |   |                             |                        |  |
|                                     |                           |                                       |                               |                       |             |                         |              |  |   |                             |                        |  |
| otal Original Co<br>age 2 of FP-31) |                           | appropriate Line(s) 1,                | 2 and/or 3 of Col.            | Α,                    | \$          |                         |              | Total Remainir<br>(Also enter on<br>and/or 3 of Co | appropria                               | ite Line(s) 1, 2            | \$                     |  |
| ched                                | ule B cos                 | t of office and othe                  | r supplies on h               | and as of J           | luly 1, 20  |                         | √aluation I  | f ∩ther  |   | R                           | emaining               | Cost   |
|                                     | Тур                       | e of Supplies                         |                               |                       |             |                         | nysical Inv  |  |   | ((                          | Current V<br>July 1, 2 | /alue)   |
|                                     |                           |                                       |                               |                       |             |                         |              |  |   |                             |                        |  |
| _                                   |                           | on hand (Enter o                      |                               |                       |             |                         |              |  |   | \$                          |                        |  |
|                                     |                           | ngible personal pro                   |                               |                       |             | and dispose             | ed of subse  | equently.  |   |                             |                        | (7)  |
| (1)<br>Type of<br>Property          | (2)<br>Date<br>Acquired   | (3)<br>Original<br>Cost               | (4)<br>Date of<br>Disposition | (5<br>Metho<br>Dispos | d of        |                         | Nam          | ne and Addres<br>Purchaser                         | ss of                                   |                             |                        | Sales<br>Price                                     |
|                                     |                           | \$                                    |                               |                       |             |                         |              |  |   |                             | \$                     |  |
| ched                                | ule D-1                   | Leased tangible pers                  | onal property in D            | C in your pos         | session. To | be completed            | by lessee (c | other than a QH                                    | ΓC) only. (                             | See the specific            | c instructio           | ns for Schedule                                    |
| Т                                   | (1)<br>Type of<br>Toperty |                                       |                               | (2)                   |             |                         | Or           | (3)<br>iginal<br>Cost                              | Da                                      | (4)<br>ate Lease<br>Started |                        | (5)<br>Annual<br>Rent                              |
|                                     |                           |                                       |                               |                       |             |                         | \$           |  |   |                             | \$                     |  |
|                                     |                           |                                       |                               |                       |             |                         |              |  |   |                             |                        |  |
| ched                                | ule D-2                   | Leased tangible pers                  |                               | (2)                   | leased to   | a QHTC). To b           |              | by lessor only. (                                  | See the s                               | pecific instructi (4)       | ons for Sch            | (5)  |
|                                     | roperty                   | Ow                                    | ner's Name an                 |                       | e Addres    | SS                      | Or           | iginal<br>Cost                                     |   | ate Lease<br>Started        |                        | Annual<br>Rent                                     |
|                                     |                           |                                       |                               |                       |             |                         | \$           |  |   |                             | \$                     |  |
|                                     |                           |                                       |                               |                       |             |                         |              |  |   |                             |                        |  |

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

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

FEIN/SSN:

TOTAL:

\$

|                  | -                |                               |                  |                   | Y PURCHASED BY A CEF<br>AL LEASE) TO A CERTIFII | -               | C AND USEI             |
|------------------|------------------|-------------------------------|------------------|-------------------|---|-----------------|------------------------|
| PROPERTY<br>TYPE | PURCHASE<br>DATE | QHTC<br>CERTIFICATION<br>DATE | ORIGINAL<br>COST | REMAINING<br>COST | LESSOR'S NAME<br>AND ADDRESS                    | MONTHLY<br>RENT | DATE<br>LEASE<br>BEGAN |
|                  |                  |                               | \$               | \$                |   | \$              |                        |
|                  |                  |                               |                  |                   |   |                 |                        |
|                  |                  |                               |                  |                   |   |                 |                        |

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

TOTAL:

| PROPERTY<br>TYPE | PURCHASE<br>DATE | LESSEE'S<br>CERTIFICATION<br>DATE |              | REMAINING<br>COST | LESSOR'S NAME<br>AND ADDRESS | MONTHLY<br>RENT | DATE<br>LEASE<br>BEGAN |
|------------------|------------------|-----------------------------------|--------------|-------------------|------------------------------|-----------------|------------------------|
|                  |                  |                                   | \$           | \$                |                              | \$              |                        |
|                  |                  |                                   |              |                   |                              |                 |                        |
|                  |                  |                                   |              |                   |                              |                 |                        |
|                  |                  |                                   |              |                   |                              |                 |                        |
|                  |                  |                                   | TOTAL:<br>\$ | TOTAL:<br>\$      |                              |                 |                        |

# Form FP-31P Payment Voucher for DC Personal Property Tax

| Government of the District of Columbia 201  Important: Print in CAPITAL le  | 8 FP-31P Paymen tters using black ink.          | t Voucher  | 1 8                            | 0 3 1 P 1 1 0 0 0 0  |
|---|---|--|--------------------------------|--|
| Amount of payment \$ (dollars only)   |   |  |                                | and interest, your payment<br>ed no later than the due date of your return                     |
| Taxpayer Identification Number  | ar  | ax Year beginning July ′<br>nd ending June 30, 201<br>ue Date: July 31, 2017               |                                | official use only<br>Vendor ID# 0000   |
| Business name   |   |  |                                |  |
| Business mailing address line 1   |   |  |                                |  |
| Business mailing address line 2   |   |  |                                |  |
|   |   |  |                                |  |
| City  |   |  | State                          | Zip Code + 4   |
|   |   |  |                                |  |
| Revised 03/17   | 2018 FP-<br>Payment                             |  |                                |  |
| •   | ·   |  |                                |  |
| Government of the District of Columbia  | Detach  8 FP-31P Paymen                         | at perforation befo  | ore mailing                    | 0 3 1 P 1 1 0 0 0 0  |
| Government of the District of Columbia  | Detach  8 FP-31P Paymen                         | at perforation before t Voucher  | void penalties                 | 0 3 1 P 1 1 0 0 0 0 0 and interest, your payment and no later than the due date of your return |
| Government of the District of Columbia  Important: Print in CAPITAL le  Amount of payment (dollars only)  Taxpayer Identification Number                | Detach  8 FP-31P Payment tters using black ink. | at perforation before t Voucher  | void penalties at be postmarke |  |
| Government of the District of Columbia 201 Important: Print in CAPITAL le   | Detach  8 FP-31P Payment tters using black ink. | at perforation before  t Voucher  To a must ax Year beginning July and ending June 30, 201 | void penalties at be postmarke | ed no later than the due date of your return OFFICIAL USE ONLY                                 |
| Government of the District of Columbia  Important: Print in CAPITAL le  Amount of payment (dollars only)  Taxpayer Identification Number                | Detach  8 FP-31P Payment tters using black ink. | at perforation before  t Voucher  To a must ax Year beginning July and ending June 30, 201 | void penalties at be postmarke | ed no later than the due date of your return OFFICIAL USE ONLY                                 |
| Government of the District of Columbia  Important: Print in CAPITAL le  Amount of payment (dollars only)  Taxpayer Identification Number  Business name | Detach  8 FP-31P Payment tters using black ink. | at perforation before  t Voucher  To a must ax Year beginning July and ending June 30, 201 | void penalties at be postmarke | ed no later than the due date of your return OFFICIAL USE ONLY                                 |

2018 FP-31P P1 Payment Voucher

Revised 03/17

#### **Instructions for FP-31P - Please print clearly**

The FP-31P Payment Voucher is used when making any payment due on your FP-31 return.

- Enter your federal employer identification number (FEIN) or your social security number (SSN).
- Fill in the oval for the identification number you entered.
- Enter your business name and mailing address.
- Enter the amount you are paying by check or money order (do not send cash).
- Make your check or money order (US dollars) payable to the DC Treasurer.
- Write your FEIN/SSN, FP-31 and the tax year on your check or money order.
- Enter your name and address on your payment.
- Staple your payment to the FP-31P.
- Mail the FP-31P with the FP-31 return to the Office of Tax and Revenue, PO Box 96183, Washington, DC 20090-6183. **Do not attach this voucher to your return**.

By using the FP-31P Payment Voucher, you are helping us process your return.

#### **Notes:**

- If the amount of the payment due for a period exceeds \$5,000, you must pay electronically. Visit <a href="https://www.taxpayerservicecenter.com">www.taxpayerservicecenter.com</a>
- For electronic filers, in order to comply with new banking rules, you will be asked the question
  "Will the funds for this payment come from an account outside of the United States?".
   If the answer is yes, you will be required to pay by money order (US dollars) or credit card. Please notify this agency if your response changes in the future.

# Form FP-129A Extension of Time to File DC Personal Property Tax Return Woksheet

| mated taxable remaining cost (cu<br>sonal property as of July 1, 2017                  |  | Dollars .00                       |
|--|--|-----------------------------------|
| rate (\$3.40 per hundred)  |  | X .0340                           |
| ance due (Multiply Line 1 amour<br>st be submitted with this form, o                   | nt by Line 2 rate) Payment of the total balance due therwise your extension request will be denied. and interest due, it will be added to any tax due quest) | \$ .00                            |
| er the amount from Line 3 onto the   |  |                                   |
| Detach and submit the  | e FP-129A form with your payment in ful  | l of any tax due shown on Line 3. |
| Government of the District of Columbia portant: Print in CAPITAL letters and black ink | FP-129A Extension of Time to File DC Personal Property Tax Return  |                                   |
| Amount of payment<br>(dollars only)<br>Taxpayer Identification Number                  | Fill in if FEIN Tax Year beginning July and ending June 30, 20   | 18                                |
| Business name  Business mailing address line 1   | Fill in if SSN Due Date: July 31, 2017   |                                   |
| Business mailing address line 2  |  |                                   |
| Dubinioso maining address into 2   |  |                                   |
| City   |  | State Zip Code + 4                |
| Request for a 3-month extension  | n until October 31, 2017.  |                                   |
| Rev 03/17  | 2018 FP-129A P1 Extension of Time to file DC Personal Property Tax   | Return                            |
|  | Detach at perforation before   | mailing                           |
| Government of the District of Columbia Cortant: Print in CAPITAL letters and black ink | 8 FP-129A Extension of Time to File DC Personal Property Tax Return  |                                   |
| Amount of payment (dollars only) Taxpayer Identification Number Business name          | Fill in if FEIN Tax Year beginning July and ending June 30, 20. Due Date: July 31, 2017  | 18                                |
| Business mailing address line 1  |  |                                   |
|  |  |                                   |
| Business mailing address line 2  |  |                                   |

## **Instructions**

#### Form FP-129A

#### **Extension of Time to File DC Personal Property Tax Return**

#### **Extension of time to file**

A 3-month extension of time to file will be granted if you properly complete and timely file Form FP-129A together with full payment of any tax due. If you are granted an extension of time to file you must attach a copy of your Form FP-129A when you actually file your personal property tax return or report.

A taxpayer must use Form FP-129A to request a 3-month extension of time to file Forms FP-31, FP-32, FP-33 or FP-34. A separate Form FP-129A must be submitted for each return or report for which an extension of time to file is requested. No extension of time to file will be granted beyond the 3-month extension.

#### When to file

The request for an extension of time to file must be submitted no later than the due date of the return or report.

#### Where to file

Mail the completed Form FP-129A together with the payment of any tax due to the Office of Tax and Revenue, PO Box 96196, Washington DC 20090-6196. Be sure to sign and date the form. Make the check or money order (US dollars) payable to the DC Treasurer. Include on the payment your FEIN/SSN, "FP-129A" and tax year 2018.

#### **Interest and penalty**

If any tax due is not paid by the due date of the return or report, without regard to any extension of time to file, <u>interest</u> of 10% per year, compounded daily, will be assessed on any tax remaining unpaid after the due date of the return. Interest on a late payment is computed from the due date of the return to the date the tax is paid.

A penalty of 5% per month, or portion of a month (limited to a 25% maximum), will be assessed on unpaid taxes.

#### **Signature**

The request for an extension to file must be signed by the taxpayer or the taxpayer's authorized agent.

#### **Notes:**

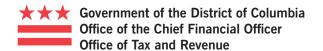
- If the amount of the payment due for a period exceeds \$5,000, you must pay electronically.

  Visit www.taxpayerservicecenter.com for instructions.
- For electronic filers, in order to comply with the banking rules, you will be asked the question "Will the funds for this payment come from an account outside of the United States?"
   If the answer is yes, you will be required to pay by money order (US dollars) or credit card. Please notify this agency if your response changes in the future.

#### Detach at perforation before mailing

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 all the information available to the preparer.

| PLEASE<br>SIGN<br>HERE   | Print name  Taxpayer's signature  Fill in if you are granting the preparer power of attorn | Date Date authority | Telephone Number of Person to Contact                     |
|--------------------------|--|---------------------|---|
| PAID<br>PREPARER<br>ONLY | Preparer's signature (if other than taxpayer)  Firm name                                   | Date                | Preparer's FEIN, SSN or PTIN  Preparer's Telephone Number |
|                          | Firm address   |                     |   |



### **Need assistance?**

Pay online: www.taxpayerservicecenter.com

**Get tax forms** Download forms at www.taxpayerservicecenter.com Request forms by mail: 202-442-6546

Pick up forms:

**Office of Tax and Revenue** 1101 4th St SW 2nd Floor 8:15 am–5:30 pm

#### Ask tax questions; get tax forms preparation help free

Visit our Walk-In Center, 1101 4th St SW 2nd Floor; or Contact our Customer Service Center: 202-727-4TAX(4829)

**Regular hours** 8:15 am–5:30 pm Monday–Friday

# Do you need help with this form?

Visit our Walk-In Center, at 1101 4th St SW 2nd Floor.

## Are you unable to hear or speak?

Call the DC Relay Service, 202-727-3363.

[Spanish] Si necesita ayuda en Español, por favor llame al <u>(202) 727-4829</u> para proporcionarle un intérprete <u>de manera gratuita</u>.

[Vietnamese] Nếu quý vị cần giúp đỡ về tiếng Việt, xin gọi (202) 727-4829 để chúng tôi thu xếp có thông dịch viên đến giúp quý vị miễn phí.

[French] Si vous avez besoin d'aide en Français appelez-le (202) 727-4829 et l'assistance d'un interprète vous sera fournie gratuitement.

[Amharic] በአጣርኛ አርዳታ ከፊለጉ በ <u>(202) 727-4829</u> ይደውሉ። የ<u>ነፃ</u> አስተርጓሚ ይመደብልዎታል።

[Korean] 한국어로 언어 지원이 필요하신 경우 <u>(202) 727-4829</u> 로 연락을 주시면 <u>무료로</u> 통역이 제공됩니다.

[Chinese] 如果您需要用(中文)接受幫助,請電治 (202) 727-4829 將**產費** 向您提供口譯員服務。