Government of the District of Columbia

2015 D-20 SUB Corporation Franchise Tax Return

1 5 0 2 0 0 3 1 0 0 0 1

Federal Employer I.D. Number: 123456789

Number of business locations — In DC: 123 Outside DC: 123

SOFTWARE DEVELOPER USE ONLY

VENDOR ID # 1234

Name of corporation: ABCDEFGHIJKLABCDEFGHIJKLM

Tax period ending (MMYY): MMYY

Mark if:
- X AMENDED RETURN
- X FINAL RETURN
- X CERTIFIED QHTC
- X COMBINED RETURN*

*You must fill in the Designated Agent info below

- X WORLDWIDE**

**Worldwide form must be filed with this return

Business mailing address #1: 12345ABCDEFGHIJKLABCDEFGHIJKLA

Business mailing address #2: 12345ABCDEFGHIJKLABCDEFGHIJKLA

City: ABCDEFGHIJKLABCDEFGH

State: AB

Zipcode: 123456789

Designated Agent Name: ABCDEFGHIJKLABCDEFGHIJKLM

Designated Agent FEIN: 123456789

• READ INSTRUCTIONS BEFORE PREPARING RETURN (To allocate non-business items, see instructions.)

Enter dollar amounts only. If amount is zero, leave line blank. if minus, enter amount and mark X in oval.

GROSS INCOME

1 Gross receipts, minus returns and allowances		1	$123456789123.00
2 Cost of goods sold (*from Form D-20 Schedule A*) and/or operations (attach statement)		2	$123456789123.00
3 Gross profit from sales and/or operations. *Line 1 minus Line 2*	Mark if minus X	3	$123456789123.00
4 Dividends *from Form D-20, Schedule B*		4	$123456789123.00
5 Interest (attach statement)		5	$123456789123.00
6 Gross rental income from D-20, Schedule I, Column 3		6	$123456789123.00
7 Gross royalties (attach statement)		7	$123456789123.00
8(a) Net capital gain (attach copy of federal Form 1120, Schedule D)		8(a)	$123456789123.00
(b) Ordinary gain (loss) from Part II, federal Form 4797 (attach copy)	Mark if minus X	8(b)	$123456789123.00
9 Other income (loss) (attach statement)	Mark if minus X	9	$123456789123.00
10 **Total gross income** Add Lines 3 - 9	Mark if minus X	10	$123456789123.00

DEDUCTIONS

11 Compensation of officers *from Form D-20, Schedule C*			11	$123456789123.00
12 Salaries and wages			12	$123456789123.00
13 Repairs			13	$123456789123.00
14 Bad debts			14	$123456789123.00
15 Rent			15	$123456789123.00
16 Taxes From FormD-20, Schedule D			16	$123456789123.00
17(a) Interest payments	123456789123.00			
(b) Minus nondeductible payments to related entities	123456789123.00	=	17(c)	$123456789123.00
18 Contributions and/or gifts (attach statement)			18	$123456789123.00
19 Amortization (attach*a copy of your federal Form 4562*)			*19*	$123456789123.00
20 Depreciation (attach a copy of your federalForm 4562. Do not include any additional federal sec. 179 expenses or bonus depreciation.			*20*	$123456789123.00
21 Depletion (attach statement)			21	$123456789123.00
22(a) Enter royalty payments made	123456789123.00			
(b) Minus nondeductible payments to related entities	123456789123.00	=	22(c)	$123456789123.00

Taxpayer Name: ABCDEFGHIJKLABCDEFGHIJKL

Federal Employer I.D. Number: 123456789

1 5 0 2 0 0 3 2 0 0 0 1

Enter dollar amounts only

DEDUCTIONS

23 Pension, profit-sharing plans ..... Mark if minus X 23 $123456789123.00

24 Other deductions (attach statement) 24 $123456789123.00

25 **Total deductions** Add Lines 11 24 ..... 25 $123456789123.00

TAXABLE INCOME

26 Net income Line 10 minus Line 25 ..... Mark if minus X 26 $123456789123.00

27 Net operating loss deduction (For years before 2000) 27 $123456789123.00

28 Net income after net operating loss deduction Line 26 minus Line 27 ..... Mark if minus X 28 $123456789123.00

29(a) Non-business income/state adjustment (attach statement) ..... Mark if minus X 29a $123456789123.00

(b) Expense related to non-business income (attach statement) 29b $123456789123.00

(c) 29(a) minus 29(b) ..... Mark if minus X 29c $123456789123.00

30 Net income subject to apportionment Line 28 minus 29(c) ..... Mark if minus X 30 $123456789123.00

31 DC apportionment factor from Form D-20, Schedule F, col.3, Line 5 ..... 31 0.123456

32 Net income from trade or business apportioned to DC ..... Mark if minus X 32 $123456789123.00
Line 30 amount multiplied by Line 31 factor.

33 Other income/deductions attributable to DC ..... Mark if minus X 33 $123456789123.00
(for Combined Reporting filers) (attach statement - see instructions)

34 Total taxable income *before* apportioned NOL deduction ..... Mark if minus X 34 $123456789123.00
Line 32 plus or minus Line 33

35 Apportioned NOL deduction (Losses occurring in year 2000 and later) 35 $123456789123.00

36 **Total DC taxable income** Line 34 minus Line 35 ..... Mark if minus X 36 $123456789123.00

TAX - PAYMENTS AND CREDITS

37 **TAX** 9.4% of Line 36 ..... 37 $123456789123.00

38 Minus nonrefundable credits from Schedule UB, Line 8 ..... 38 $123456789123.00

39 Total DC Gross Receipts (from Line '4' MTLGR worksheet.) $123456789123.00

40 Net Tax Line 37 minus Line 38. The minimum tax is $250 *if* DC gross receipts are $1M or less or $1,000 if DC gross receipts are greater than $1M 40 $123456789123.00

41 Payments and Refundable Credits:

(a) Tax paid if any, with request for an extension of time to file or paid with original return if this is an amended return 41a $123456789123.00

(b) 2015 estimated franchise tax payments 41b $123456789123.00

(c) Refundable credits from Schedule UB, Line 11 ..... 41c $123456789123.00

42 Add Lines 41(a), 41(b) and 41(c) 42 $123456789123.00

43 **Tax due** If Line 40 amount is larger, subtract Line 42 from Line 40 ..... 43 $123456789123.00

Will this payment come from an account outside the U.S.? X Yes X No See instructions

44 **Overpayment** If Line 42 amount is larger, subtract Line 40 from Line 42 ..... 44 $123456789123.00

45 **Amount you want to apply to your 2016 estimated franchise tax** 45 $123456789123.00

46 **Amount to be refunded** Line 44 minus Line 45 ..... 46 $123456789123.00

Will this refund go to an account outside the U.S.? X Yes X No See instructions

47 Estimated tax interest (Fill in oval if D-2220 attached) X $123456789123.00

Under penalties of law, I declare that I have examined this return and, to the best of my knowledge, it is correct. Declaration of paid preparer is based on the information available to the preparer.

PLEASE SIGN HERE

Officer's signature | Title | Date | 1234567890 Telephone number of person to contact

PAID PREPARER ONLY

Preparer's signature (If other than taxpayer) | Date | Firm name | Firm address

Preparer's PTIN 123456789

If you want to allow the preparer to discuss this return with the Office of Tax and Revenue, mark here X

1 5 0 2 0 0 3 4 0 0 0 1

Schedule F - DC apportionment factor (See instructions.)

Round cents to the nearest dollar. If an amount is zero, leave the line blank.

Carry all factors to six decimal places

For all businesses other than financial institutions:

	Column 1 TOTAL	Column 2 TOTAL	Column 3 Factor (Column 2 divided by Column 1)
1. **SALES FACTOR:** All gross receipts of the business other than gross receipts from non-business income.	$ .00	$ .00	.

For Financial Institutions:

2. **SALES FACTOR:** All gross income of the financial institution other than gross income from non-business income.	$ .00	$ .00	.
3. **PAYROLL FACTOR:** Total compensation paid or accrued by the financial institution.	$ .00	$ .00	.
4. **SUM OF FACTORS:** (For Financial Institutions add Lines 2 and 3 of Column 3)			.
5. **DC APPORTIONMENT FACTOR:** For businesses other than financial institutions enter the number from Line 1, Col. 3. Enter on D-20, Line 31. For financial institutions divide Line 4, Column 3 by 2. If there are less than two factors, use Line 4, Column 3. Enter on D-20, Line 31.			

Schedule 1 - Combined Report Tax Due

Tax Due Combined Group Report	Tax Due Intercompany Eliminations	Tax Due Total Before Eliminations	Tax Due Designated Agent	Tax Due Member 1
Tax Due Member 2	Tax Due Member 3	Tax Due Member 4	Tax Due Member 5	

Schedule G - Balance Sheets

		Beginning of Taxable Year (A) Amount	Beginning of Taxable Year (B) Total	End of Taxable Year (A) Amount	End of Taxable Year (B) Total
ASSETS	1. Cash				
	2. Trade notes and accounts receivable				
	(a). MINUS: Allowance for bad debts				
	3. Inventories				
	4. Gov't obligations: (a) U.S. and its instrumentalities				
	(b) States, subdivisions thereof, etc				
	5. Other current assets (attach statement)				
	6. Loans to stockholders				
	7. Mortgage and real estate loans				
	8. Other investments (attach statement)				
	9. Buildings and other fixed depreciable assets				
	(a) MINUS: Accumulated depreciation				
	10. Depletable assets				
	(a) MINUS: Accumulated depletion				
	11. Land (net of any amortization)				
	12. Intangible assets (amortization only)				
	(a) MINUS: Accumulated amortization				
	13. Other assets (attach statement)				
	14. TOTAL ASSETS				
LIABILITIES AND CAPITAL	15. Accounts payable				
	16. Mortgages, notes, bonds payable in less than 1 year				
	17. Other current liabilities (attach statement)				
	18. Loans from stockholders				
	19. Mortgages, notes, bonds payable in 1 year or more				
	20. Other liabilities (attach statement)				
	21. Capital stock (a) Preferred stock				
	(b) Common stock				
	22. Paid-in or capital surplus (attach statement)				
	23. Retained earnings- Appropriated (attach statement)				
	24. Retained earnings - Unappropriated				
	25. MINUS: Cost of treasury stock		( )		( )
	26. TOTAL LIABILITIES AND CAPITAL				