

2024 D-30ES SUB Unincorporated Business Declaration of Estimated Franchise Tax

Instructions

- Enter the amount of your payment in whole dollars only. Do not enter cents.
• Enter your Federal Employer Identification Number (FEIN) or Social Security Number (SSN)
• Enter the tax period ending date of the taxperiod you are filing for (MMDDYYYY)
• Enter the business or designated agent name and address exactly as they appear on the unincorporated business tax return.
• Make your check or money order payable (US dollars)to the DC Treasurer.
• Include your FEIN/SSN, "D-30ES", tax period, name and address on your payment.

Mail this return and payment to:
DC Office of Tax and Revenue
Corporation Estimated Franchise Tax
PO Box 96020
Washington, DC 20090-6020

Notes:

- If the amount of your payment due for a period exceeds \$5000, you shall pay electronically. Visit www.MyTax.DC.gov
• 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.

Detach at perforation before mailing

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Make check or money order payable to DC Treasurer.

Quarterly Payment (dollars only) 99999999.00

Taxpayer Identification Number Mark if [X] FEIN
99999999 Mark if [X] SSN

Tax Period Ending (MMDDYYYY) 99999999

SOFTWARE DEVELOPER USE ONLY
VENDOR # 9999

Business name or Designated Agent Name
XX

Business mailing address line #1
XX

Business mailing address line #2
XX

City State Zip Code + 4
XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX XX 99999999 Voucher Number: 99 Due Date 99999999