

2016 FR-800V Street Vendors and Mobile Food Services Minimum Sales Tax Quarterly Return



This is a FILL-IN format. Please do not handwrite any data on this form other than your signature.

File this return for each of the 4 quarters of 2016 (Oct 2015 - Sept 2016).

Taxpayer Identification Number Fill in if FEIN Account Number
 Business name Fill in if SSN Due date
 Mailing address line 1 Tax period ending (MMYY)
 Mailing address line 2 City State Zip Code + 4

OFFICIAL USE ONLY Vendor ID#0002
 Fill in one of the following:
 if food truck
 if sidewalk vendor
 if ice cream truck
 if other vendor
 Fill in if amended return
 Fill in if final return (See instructions)

You must file a return to pay the minimum \$375 even if no sales were made. Sales tax licensees must file one return per license.

Column A — Description	Column B — Taxable amount	Tax rate	Column C — Tax due — multiply column B by tax rate, enter here
1. Sales Taxable at 5.75%	1B \$ <input type="text"/>	X .0575	1C \$ <input type="text"/>
2. Sales Taxable at 10%	2B \$ <input type="text"/>	X .10	2C \$ <input type="text"/>
3. Reserved	3B \$ <input type="text"/>	X .__	3C \$ <input type="text"/>
4. Sales Tax Collected Add Lines 1C, 2C and 3C Enter total on Line 4C			4C \$ <input type="text"/>
5. Sales Tax Due Enter the greater of Line 4C or \$375 on Line 5C			5C \$ <input type="text"/>
		6. Enter 2% of 911 sales receipts less 3% discount	6C \$ <input type="text"/>
		7. Disposable Carryout Bag Fee (Net of discount)	7C \$ <input type="text"/>
		8. Reserved	8C \$ <input type="text"/>
		9. Penalty — 5% per month with a maximum of 25%	9C \$ <input type="text"/>
		10. Interest — 10% per year	10C \$ <input type="text"/>
		11. Total Amount Due (Add Lines 5C - 10C)	11C \$ <input type="text"/>

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

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

PLEASE SIGN HERE

Taxpayer's signature Title Date
 Preparer's signature (if other than taxpayer) Date
 Firm name and address

Telephone Number of Person to Contact

PAID PREPARER ONLY

Preparer's Tax Identification Number (PTIN)

Make check or money order payable to the DC Treasurer. Include your FEIN or SSN, "FR-800V" and tax year on your payment. Mail return and payment to: Office of Tax and Revenue, PO Box 96384, Washington DC 20090-6384.