

Government of the  
District of Columbia

**2021 D-65 SUB Partnership  
Return of Income**



2 1 0 6 5 0 S 1 0 0 0 1

Taxpayer Identification Number (TIN)

999999999

Tax period ending (MMDDYYYY)

99999999

SOFTWARE DEVELOPER USE

**VENDOR # 9999**

Business name

XXXXXXXXXXXXXXXXXXXXXXXXXX

Mark if ☒ QHTC - located in DC  
Mark if ☒ Ballpark TIF Area  
Mark if ☒ Amended return  
Mark if ☒ Final return  
Mark if ☒ Certified QHTC  
Mark if ☒ Unitary with a  
combined group\*  
\*You must fill in the  
Designated Agent info below

Address line #1

XXXXXXXXXXXXXXXXXXXXXXXXXX

Address line #2

XXXXXXXXXXXXXXXXXXXXXXXXXX

City

State

Zipcode + 4

XXXXXXXXXXXXXXXXXXXX

XX

999999999

Designated Agent Name

Designated Agent TIN

XXXXXXXXXXXXXXXXXXXX

999999999

Round cents to nearest dollar. If amounts zero, leave line blank;

if minus, enter amount and fill in oval.

**INCOME**

1 Gross receipts or sales, minus returns and allowances

1 999999999.00

2 Cost of goods sold and/or operations

2 999999999.00

3 Gross profit (Line 1 minus Line 2)

Mark if minus ☒ 3 999999999.00

4 Ordinary income (loss) from other partnerships,  
estates and trusts, etc.

Mark if minus ☒ 4 999999999.00

5 Net farm profit (loss)

Mark if minus ☒ 5 999999999.00

6 Net gain (loss)

Mark if minus ☒ 6 999999999.00

7 Capital gains deferred on federal return due to investment in  
a federal Qualified Opportunity Fund

7 999999999.00

8 Other income (loss)

Mark if minus ☒ 8 999999999.00

9 Total income (Add Lines 3-8)

Mark if minus ☒ 9 999999999.00

**DEDUCTIONS**

10 Salaries and wages paid to non partners

10 999999999.00

11 Payments to partners

11 999999999.00

12 Repairs and maintenance

12 999999999.00

13 Bad debts

13 999999999.00

14 Rent

14 999999999.00

15 Taxes and licenses

15 999999999.00

16 Interest (subject to federal limitations)

16 999999999.00

17 Depreciation, minus depreciation deducted elsewhere on return.

17 999999999.00

Do not include any additional IRC 179 expenses or IRC 168(k) depreciation.\*

18 Depletion

18 999999999.00

19 Retirement plans

19 999999999.00

20 Employee benefit programs

20 999999999.00

21 Capital gains deferred due to DC approved investment in a DC Qualified  
Opportunity Fund

21 999999999.00

22 Other deductions

22 999999999.00

23 Total deductions (Add Lines 10-22)

23 999999999.00

24 Ordinary income (loss) (Line 9 minus Line 23)

Mark if minus ☒ 24 999999999.00

\*Attach a copy of your federal Form 4562



Business Name: XXXXXXXXXXXXXXXXXXXXXXXXXX  
 Tax Identification Number 999999999

**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

1. **Sales Factor:** All gross receipts of the partnership other than gross receipts from items of non-business income.
- |  |                |                |                                |
|--|----------------|----------------|--------------------------------|
|  | Column 1 TOTAL | Column 2 in DC | DC Apportionment Factor        |
|  | 999999999.00   | 999999999.00   | (Column 2 divided by Column 1) |
2. **DC APPORTIONMENT FACTOR:** Column 2 divided by Column 1. **9.999999**
- A. Date entity was organized. (MMYY) **9999**
- B. Mark your accounting method ☒ cash ☒ accrual ☒ other (specify)  
 XXXXXXXXXXXXXXXXXXXXXXXXXX
- C. Number of partners in this partnership **9999**
- D. Is this a limited partnership? ☒ YES ☒ NO
- E. Is this a limited liability company? ☒ YES ☒ NO
- F. Are there any partners in this partnership also partnerships or corporate entities? ☒ YES ☒ NO
- G. Is this partnership a partner in another partnership? ☒ YES ☒ NO
- H. Was there a distribution or transfer of property that caused an adjustment of the basis of the partnership's assets under IRC Section 754? ☒ YES ☒ NO
- I. Was a D-65 filed for the preceding year? ☒ YES ☒ NO
- J. Was a **2021** DC unincorporated business franchise tax return (Form D-30) filed for this business?  
☒ YES ☒ NO  
 If "YES," enter the name under which the return was filed.
- K. Did you file and pay an annual ballpark fee return? ☒ YES ☒ NO
- L. Have you filed annual federal income tax information return Forms 1099 and 1096? ☒ YES ☒ NO
- M. Did you withhold DC income tax from the wages of your DC employees during **2021**? ☒ YES ☒ NO  
 If "NO," state reason: XXXXXXXXXXXXXXXXXXXXXXXXXX
- N. During **2021**, has the IRS made or proposed any adjustments to your federal partnership Form 1065, or did you file amended returns with the IRS?  
☒ YES ☒ NO  
 If "YES," submit a separate, detailed explanation and an amended D-65 return reflecting the adjustments to:  
 Office of Tax and Revenue, 1101 4th Street, SW, FL4, Washington DC 20024.

- Attach a copy of the Form 1065 with the K-1 and any other schedules you filed.
- Attach a schedule showing the pass-through distribution of income to all members of the partnership.
- If you are filing Form D-65, instead of Form D-30, attach an explanation.

Third Party Designee To authorize another person to discuss this return with OTR, mark here ☒ and enter the name and phone number of that person.  
 Designee's name XXXXXXXXXXXXXXXXXXXXXXXXXX Phone 999999999

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 information available to the preparer.

**PLEASE  
SIGN  
HERE**

PARTNER OR MEMBER'S SIGNATURE

999999999

DATE

9999999999

Telephone number of person to contact

PREPARER'S SIGNATURE (If other than taxpayer)

999999999

DATE

999999999

Paid Preparer's PTIN

**PAID  
PREPARER  
ONLY**

XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX

FIRM NAME

XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX

FIRM ADDRESS

Email Address

9XXXX9XXXX9XXXX9XXXXXXXXXXXXXXXXXXXXXXX

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

Mail return to: Office of Tax and Revenue, 1101 4th Street, SW, FL4, Washington DC 20024

Revised 10/2021

Make no payment with this return.