

Government of the
District of Columbia
Instructions

2025 D-30P SUB Payment Voucher for
Unincorporated Franchise Tax

Use the D-30P Payment Voucher to make any payments due on your **D-30** return.

- Do not use this voucher to make estimated tax payments.
- Enter your Taxpayer Identification Number. Mark an X indicating if this is your FEIN or SSN.
- Enter name and address exactly as they appear on your return.
- Enter the amount of your payment.
- Make the check or money order (US dollars) payable to the DC Treasurer.
- Write your TIN, tax period and type of return filed (D-30) on the payment.
- **Staple your check or money order to the D-30P voucher only.** Do not attach your payment to your D-30 return.
- Mail the D-30P **with**, but not attached to, your D-30 tax return to:

Office of Tax and Revenue
PO Box 96165
Washington, DC 20090-6165

Notes:

- If your payment exceeds \$5,000 in any period, **you must pay electronically.** Visit www.MyTax.DC.gov
- **For electronic filers**, in order to comply with 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. You will be charged a \$65 fee if your check or electronic payment is not honored by your financial institution and returned to OTR.

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Government of the
District of Columbia

2025 D-30P SUB Payment Voucher for
Unincorporated Business Franchise Tax



To avoid penalties and interest, your payment must be postmarked no later than the due date of your return.

Amount of Payment (dollars only) **9999999999.00**

Taxpayer Identification Number Mark if ☒ FEIN Tax period ending (MMDDYYYY)
99999999 Mark if ☒ SSN **99999999**

SOFTWARE DEVELOPER USE ONLY
VENDOR # **9999**

Business or Designated Agent Name Telephone number of person to contact
XX **9999999999**

Business mailing address (number, street and suite/apartment number if applicable)
XX

Business mailing address (number, street and suite/apartment number if applicable)
XX

City State Zipcode + 4
XXXXXXXXXXXXXXXXXX XX 999999999