INDUSTRIAL INCOME & EXPENSE REPORT - TAX YEAR 2014

DUE DATE: ***April 15, 2013***

Report information from the period January 1, 2012 through December 31, 2012

Government of the District of Columbia
Office of the Chief Financial Officer
Office of Tax and Revenue
1101 4th Street, SW, Suite W550
Washington, DC 20024

SQUARE	SUFFIX	LOT	USE CODE	NEIGHBORHOOD

PREMISE ADDRESS:

MAILING ADDRESS

Owner:		
Address:		
Address:		
City:	**State:**	**Zip:**

INCOME AND EXPENSE INFORMATION MUST BE REPORTED ON THIS FORM. SUBSTITUTE FORMS ARE NOT PERMITTED. SUPPORTING DOCUMENTATION IS ACCEPTABLE. IN ORDER TO ASSIST YOU IN COMPLETING THIS FORM, DETAILED INSTRUCTIONS ARE INCLUDED WITH THIS REPORT. PLEASE BE SURE TO REPORT EXPENSES ONLY ONCE; DOUBLE REPORTING IS PROHIBITED. IF YOU HAVE ANY QUESTIONS, OR NEED ASSISTANCE, PLEASE CONTACT OUR ASSESSMENT PROGRAM COORDINATOR, ANTHONY DANIELS, AT 202-442-6794. COMPLETE THIS REPORT IN ACCORDANCE WITH ACCOUNTING METHODOLOGIES USED FOR FEDERAL INCOME TAX REPORTING. SUBMISSION OF AUDITED STATEMENTS IS NOT REQUIRED. AS PER THE D.C. CODE § 47-821, THE INFORMATION CONTAINED IN THIS REPORT SHALL BE KEPT IN STRICT CONFIDENCE. **FAILURE TO SUBMIT THE INFORMATION REQUESTED BY THE ABOVE DUE DATE IS A VIOLATION OF D.C. REAL PROPERTY TAX LAW AND WILL RESULT IN A PENALTY OF 10% OF THE REAL PROPERTY TAX AMOUNT DUE FOR THE FOLLOWING TAX YEAR.**

IS ANY PORTION OF THIS BUILDING OWNER OCCUPIED? ◯ YES ◯ NO
IF PROPERTY IS 100% OWNER OCCUPIED, COMPLETE SECTIONS F THROUGH O.
IS ANY PORTION OF THIS BUILDING EXEMPT FROM PROPERTY TAXES? ◯ YES ◯ NO
IF A PORTION IS EXEMPT, FORM **FP161,** THE ANNUAL USE REPORT MUST BE FILED.
ACCOUNTING METHODOLOGY: METHOD USED TO PREPARE THIS STATEMENT. (***THIS SHOULD REFLECT YOUR ACCOUNTING BOOKS, CHECK ONE***)
☐ **ACCRUAL** ☐ **CASH** ☐ **UNCERTAIN**

IF YOUR BUSINESS OPERATION ENCOMPASSES MORE THAN ONE **SQUARE, SUFFIX AND LOT** (SSL), YOU MAY LIST ALL OF THE SSLS THAT COMPRISE YOUR ECONOMIC UNIT BELOW. THIS WILL AFFORD YOU FILING CREDIT FOR ALL AFFECTED PARCELS WITHOUT THE NECESSITY OF FILING INDIVIDUAL FORMS FOR EACH PROPERTY. FAILURE TO ACCOUNT FOR AND /OR FILE ALL FORMS MAY SUBJECT YOU TO THE FILING PENALTY.

ADDITIONAL SSL: _____ , _____, _____, _____, _____, _____.

A. CERTIFICATION

I CERTIFY UNDER PENALTY OF LAW THAT THE INFORMATION PROVIDED IS TRUE, CORRECT AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND BELIEF. MAKING A FALSE STATEMENT AS TO MATERIAL FACTS IS PUNISHABLE BY CRIMINAL PENALTIES, D.C. CODE §22-2514.

NAME OF MANAGEMENT COMPANY: _____

TITLE/RELATIONSHIP: _____

RESPONSIBLE CONTACT PERSON: _____ PHONE: _____

ADDRESS: _____

DATE: _____ OWNER'S FEDERAL TAX ID #: _____

PRINT OR TYPE NAME _____ SIGNATURE (ORIGINAL ONLY, NO STAMPED OR COPIED SIGNATURE) _____

THIS FORM MUST BE SIGNED AND DATED TO RECEIVE CREDIT FOR FILING. UNSIGNED OR SUBSTANTIALLY INCOMPLETE SUBMISSIONS WILL BE SUBJECT TO ALL APPLICABLE PENALTIES.

I1

PLEASE ROUND ALL AMOUNTS TO THE NEAREST WHOLE DOLLAR, EXCEPT RENT RATE INFORMATION

B. LEASED AREAS (PLEASE PROVIDE INFORMATION ON THE LEASED AREAS IN SQ. FT., SPECIFY OTHER USES)

GROSS BUILDING AREA	SQ. FT.	FINISHED AREA	SQ. FT.	UNFINISHED AREA	SQ. FT.	
WAREHOUSE USE	SQ. FT.	OTHER USE:	SQ. FT.	OTHER USE:	SQ. FT.	
YARD AREA	SQ. FT.	LOT SIZE	SQ. FT.	TYPICAL CEILING HEIGHT		FT.

C. VACANCY INFORMATION

1. SPACE VACANT JANUARY 1, 2013 (SQ. FT RENTABLE)								SQ. FT.
ANTICIPATED USE OF SPACE								
2. SPACE VACANT JANUARY 1, 2012								SQ. FT.
ANTICIPATED USE OF SPACE								
3. INCOME LOSS FROM VACANCY IN 2012								$
4. INCOME LOSS FROM BAD DEBTS IN 2012								$
5. CURRENT MARKET RENT PER SQ. FT. FOR VACANT SPACE								
a.	WAREHOUSE:	FULL SERVICE	$	NNN	$	OTHER	$	
b.	OTHER:	FULL SERVICE	$	NNN	$	OTHER	$	
SPECIFY OTHER:								

D. ANNUAL INCOME

INCOME FOR 12-MONTH PERIOD ENDING DECEMBER 31, 2012 OR / / TO / /

1.	GROSS POTENTIAL INDUSTRIAL RENTAL INCOME	$
2.	GROSS POTENTIAL OTHER RENTAL INCOME (EXPLAIN) _____	$
3.	GROSS POTENTIAL OTHER RENTAL INCOME (EXPLAIN) _____	$
4.	SALES OF UTILITIES/SERVICES	$
5.	ESCALATION INCOME	$
6.	OVERAGE/PERCENTAGE RENT	$
7.	INSURANCE REIMBURSEMENT	$
8.	OPERATING EXPENSE REIMBURSEMENT	$
9.	TAX ESCALATION OR REIMBURSEMENT	$
10.	PARKING AND SPECIAL AREAS (NUMBER OF SPACES _____)	$
11.	PARKING SPACES INCLUDED IN OFFICE INCOME ($_____)	
12.	OTHER RENTAL INCOME (EXPLAIN) _____	$
13.	MISCELLANEOUS (EXPLAIN) _____	$
14.	MISCELLANEOUS (EXPLAIN) _____	$
15.	**TOTAL GROSS POTENTIAL INCOME**	$ 0

E. ANNUAL OPERATING EXPENSE

1. MANAGEMENT AND ADMINISTRATIVE		
a.	MANAGEMENT FEES	$
b.	OTHER ADMINISTRATIVE/PAYROLL (SPECIFY)	$
2. UTILITIES		
a.	WATER AND SEWER	$
b.	ELECTRICITY (EXCLUDING HVAC)	$
c.	ELECTRICITY (INCLUDING HVAC)	$
d.	PRIMARY HEATING FUEL_____	$
e.	OTHER FUEL_____	$
3. REPAIRS AND MAINTENANCE *(DO NOT INCLUDE CAPITAL EXPENDITURES IN THIS SECTION)*		
a.	MAINTENANCE PAYROLL/SUPPLIES	$
b.	HVAC REPAIRS	$
c.	ELECTRICITY/PLUMBING REPAIRS	$
d.	ROOF REPAIRS	$
e.	ELEVATOR REPAIRS	$
f.	OTHER COMMON AREA OR EXTERIOR REPAIRS	$
g.	REDECORATING COSTS (CARPET, PAINT, ETC.)	$
h.	OTHER REPAIRS (EXPLAIN) _____	$
i.	TOTAL	$ 0

I2

4. SERVICES	
a. JANITORIAL/CLEANING (PAYROLL/CONTRACT)	$
b. LANDSCAPE	$
c. TRASH	$
d. SECURITY	$
e. ELEVATOR SERVICE (CONTRACT)	$
f. OTHER (EXPLAIN)_____	$
g. TOTAL	$ 0
5. MISCELLANEOUS EXPENSE	
a. MISCELLANEOUS EXPENSES (EXPLAIN)	$
6. TOTAL OPERATING EXPENSE * DO NOT INCLUDE REAL ESTATE TAXES*** **	
a. TOTAL OPERATING EXPENSES	$ 0
F. FIXED EXPENSE	
1. INSURANCE (ONE YEAR FIRE, CASUALTY)	$
2. MISCELLANEOUS TAXES	$
3. OTHER (EXPLAIN) _____	$
4. TOTAL FIXED EXPENSES	$ 0
G. TOTAL EXPENSES (SUM OF SECTION F LINE 6 AND SECTION G LINE 4) ***DO NOT INCLUDED REAL ESTATE TAXES***	
1. TOTAL EXPENSES	$ 0
H. CAPITAL RESERVES/INTEREST INCOME ***AS OCCURRED DURING REPORTING PERIOD* **	
1. ACTUAL CAPITAL RESERVES DEPOSITED	$
2. ACTUAL INTEREST INCOME	$
I. CODE COMPLIANCE	
1. CODE COMPLIANCEL EXPENDITURES FOR LAST 12 MONTHS	$
2. OTHER CODE COMPLIANCE EXPENDITURES	$
ANTICIPATED DATE OF EXPENDITURE / /	
J. REAL ESTATE TAXES (FROM PREVIOUS YEAR)	
1. PAID BY PROPERTY OWNER	$
2. PAID BY TENANT (LIST TENANT BY NAME) _____	$
3. PAID BY TENANT (LIST TENANT BY NAME) _____	$
4. PAID BY TENANT (LIST TENANT BY NAME) _____	$

K. CAPITAL IMPROVEMENTS/RENOVATIONS

HAS THERE BEEN ANY CAPITAL IMPROVEMENTS OR RENOVATIONS DONE TO THE PROPERTY DURING THIS REPORTING PERIOD?	☐	**YES**	☐ **NO**
IF YES, PLEASE PROVIDE TOTAL COST HERE AND ATTACH A DETAILED LIST ON A SEPARATE PAGE.			

TOTAL CAPITAL COST	**$**	**DATE OF EXPENDITURES**	

L. ENERGY CONFIGURATION (DO TENANTS PAY?)		
1. DO TENANTS PAY ANY:		
a. ELECTRICITY	☐ YES	☐ NO
b. HEATING/COOLING	☐ YES	☐ NO
c. WATER	☐ YES	☐ NO
d. GAS	☐ YES	☐ NO
2. IS THIS AN ALL-ELECTRIC BUILDING?	☐ YES	☐ NO

M. GROUND RENT	
1. ANNUAL GROUND RENT	$
2. INCEPTION DATE OF GROUND LEASE ____/____/_____	
3. ENDING DATE OF GROUND LEASE ____/____/_____	
4. EARLIEST RENEWAL DATE ____/____/_____	
5. LAND AREA LEASED IN SQUARE FEET	SQ. FT.

I3

N. SALE OF PROPERTY OR CHANGES IN OWNERSHIP				
1. HAS A PARTIAL OR COMPLETE INTEREST IN THE REAL PROPERTY BEEN SOLD IN THE LAST THREE YEARS?		YES		NO

ANSWER YES EVEN IF THE TRANSFER OR CONVEYANCE IS NON-TAXABLE OR INCLUDES A TRANSFER OR CONVEYANCE OF AN ECONOMIC INTEREST IN AN ENTITY THAT OWNS REAL PROPERTY (I.E. SHARES OR STOCKS IN PARTNERSHIPS, CORPORATION, OR TRUST, ETC. INCLUDING MULT-TIERED ENTITIES THAT OWN THE REAL PROPERTY). IF THE TRANSFER WAS THROUGH AN ENTITY, THE OWNER MUST COMPLETE THE TRANSFER OR ECONOMIC INTEREST FORM. TO OBTAIN THE FORM, CALL THE RECORDER OF DEEDS (202) 727-5374.

2. NATURE OF THE OWNERSHIP (CHECK ONE)			FEE SIMPLE		LEASE HOLD
3. PERCENT OF OWNERSHIP	%	TRANSFER DATE		
4. AMOUNT PAID FOR THE OWNERSHIP INTEREST $				

O. DEBT SERVICE INFORMATION (WITHIN THE LAST 3 YEARS)					
LOAN AMOUNT	ORIGIN DATE	INT. RATE %	TERM	PAYMENT (P & I)	ANNUAL OR MONTHLY PAYMENT
$				$	☐ Annual ☐ Monthly
$				$	☐ Annual ☐ Monthly

Loan balance as of 12/31/2012 $_____

Lender's Name _____

Has there been an independent fee appraisal of this real property done in the last three years? ☐ YES ☐ NO

What was the appraised value and date of appraisal? $_____ _____

HAVE YOU ROUNDED AMOUNTS TO THE NEAREST DOLLAR? IF NOT, CROSS OUT CENT AMOUNTS, EXCEPT FOR AVERAGE RENT PER. SQ. FT.

INSTRUCTIONS FOR COMPLETING INDUSTRIAL / SPECIAL PURPOSE INCOME AND EXPENSE REPORT

The following instructions are provided to aid you in filling out this form. The information provided on the report should be in accordance with the accounting methodology used for Federal income tax purposes. Expenses are to be reported only once; double reporting is prohibited.

- ROUND AMOUNTS TO THE NEAREST DOLLAR EXCEPT FOR DOLLARS PER SQUARE FOOT AND OTHER RENTAL ENTRIES.
- Identify if the property is owner occupied or exempt from property taxes.
- Identify the accounting methodology used to complete this form.

If you have any questions, please call this office at (202) 442-6794.

A. Certification

District of Columbia Law (D.C Code §22-2514) requires certification of this information by the owner or officially authorized representative. Please print or type the name and title of the person certifying the information, the name and phone number of the person to contact with questions on the information, and the property owner's Federal tax I.D. number.

B. Leased Areas

Please identify all leased areas of the property. Gross building area should equal the sum of finished area and unfinished area. Show size of the area used for warehousing and the size and type of any other areas being leased. Additionally, list the size of any yard area, the total size of the property and the typical ceiling or eave height of buildings. Attach an additional sheet, if necessary.

C. Vacancy Information

1. Please provide the amount of vacant space, in square feet, available for lease on January 1 of the current year.
   Please provide the anticipated use for the property during the indicated period.
2. Please provide the amount of vacant space, in square feet, available for lease on January 1 of the previous year.
   Please provide the anticipated use for the property during the indicated period.
3. Please provide the estimated income loss due to the vacancy reported in question 2 above.
4. Please provide the actual income loss from collection, or bad debts.
5. Please provide the current asking price for the vacant space in question 1. Please indicate the type of space currently vacant.

D. Annual Income

Please enter income information for the period covered by this statement. Total potential income is 100% of the leasable square footage as though leased for 100% of 12-months at the actual contract rent for areas leased plus vacant space at the rents specified in Section C.

1. Total potential income from the rental of industrial space.
2. Total potential income from the rental of space other than industrial. Please indicate the type of space.
3. Total potential income from the rental of space other than industrial. Please indicate the type of space.
4. Income from the sale of utilities and services in addition to actual rental income. Usually these are cost reimbursements by the tenants over and above the base rent.
5. Actual income received for escalations in the base rents in accordance with the terms of the applicable leases.
6. Rents received over and above the guaranteed rent in accordance with the terms of the applicable leases.
7. Reimbursements paid to the owners for insurance claims.

8. Income to the property from the tenants' pro rata share of the operating expenses (pass-throughs), usually above a base amount or expense stop as specified in the terms of the lease/s.
9. Income to the property from the tenants pro rata share of real estate taxes (pass-throughs), usually above a base amount or tax stop as specified in the terms of the lease/s.
10. Any rental income received for garage and/or surface parking. Please list the number of parking spaces.
11. Please provide the number of parking spaces incorporated in office income.
12. Rental income for any specially designated space, which is not covered by the categories listed above. Specify the type of space to which the income relates.

13.-14. Please specify the type and source of any additional income received not covered in another category.

15. Sum of lines 1 thru 14.

E. ANNUAL OPERATING EXPENSES

These are expenses necessary to maintain the production of income from operation of the property. Do not include under any expense category items such as tenant improvements, ground rent, mortgage interest or amortization, depreciation, income taxes, or capital expenditures. **These are not operating expenses.** Capital expenditures include investments in remodeling, or replacements, which materially add to the value of the property or appreciably prolong its life. Capital expenditures are requested in Section K. Please include here all other expenses to the property, including those reimbursed by the tenants.

1. a. Amount paid to a management company or self for operating the building. Do not count management expenses here if the same administrative costs are shown elsewhere.
   b. Include advertising, administrative payroll, office supplies, accounting and legal fees. (Please detail each line item. If necessary, attach a separate sheet).
2. a. Expense of water and sewer services for this reporting period.
   b. – c. Electricity expense. Please be sure to enter your electricity expense for HVAC on the appropriate line.
   d. Specify the primary heating fuel (oil, gas, etc.) used for heating the building and its expense. Do not include an amount for electric if it is listed above.
   e. If more than one type of fuel is used indicate the type and cost.
3. a. Payroll expenses for maintenance staff and expenses for maintenance supplies. Include insurance, bonding and worker's compensation.
   b. Maintenance and repair expense for heating, ventilating and air-conditioning, and related maintenance and/or repairs. Do not include capital items.
   c. Maintenance expense for electric and plumbing repairs.
   d. Include repairs and routine maintenance expense to roof. Do not enter the cost to replace entire roof. Roof replacement is a capital expense, which should be shown in Section K.
   e. Maintenance expense for elevator repairs.
   f. Repairs to exterior of the property not covered elsewhere. Do not include capital items.
   g. Interior maintenance and repair (carpet, paint, etc.). Do not include capital items or major tenant fit-up.
   h. Specify any other maintenance and /or repair expenses not covered in another category. Do not include capital items.

4. a. Janitorial and cleaning expenses for the property.
   b. Please identify all landscaping or grounds keeping service expenses for the property.
   c. Expense for trash service.
   d. Expense for security services, guards, etc.
   e. Expense for elevator contract services.
   f. Specify any other service expenses incurred in the operation of the property.

5. Specify any other expenses not identified elsewhere. (ex. Vault rental space). Do not include ADA upgrades here, they should go in Section I.

6. Total operating expenses should equal the sum of items E1 through E5.

F. FIXED EXPENSES

List all fixed expenses incurred by the property.

1. Identify fire/casualty insurance expenses relevant to the reporting period only. Some insurance policies are multi-year contracts. Please include only one year's cost.
2. Specify any miscellaneous taxes and license fees (ex. Payroll taxes, bid Tax, Vault Tax, etc.). Do not include real estate tax, this goes in Section K.
3. Specify any other fixed expenses and the amount. Do not include ground rent here, it goes in Section M.
4. Total Fixed Expenses should equal the sum of items F1 thru F3.

G. TOTAL EXPENSES

TOTAL EXPENSES SHOULD EQUAL THE SUM OF SECTIONS E, LINE 6 AND F LINE 4.

H. CAPITAL RESERVES / INTEREST INCOME

Please list all capital reserves on hand and interest income earned during the current reporting period.

1. Report all capital reserves held for pending expected and unexpected improvements to the property.
2. Report all interest income to this property from interest earned on capital improvement accounts, reserve accounts and monthly management operating accounts.

I. CODE COMPLIANCE

1. Report any code compliance renovation costs that were incurred in the last 12 months.
2. Explain and report any future anticipated code compliance expenses.
   A. List the anticipated date of expenditure for future code compliance expenses.

J. REAL ESTATE TAXES

1.-4. List the amounts paid in real estate taxes for this reporting period by property owner or tenants as designated. This should reflect any adjustments in assessments during the current reporting period.

K. CAPITAL IMPROVEMENTS/RENOVATIONS

Please report in detail any capital improvements or renovations to the property during the current reporting period.

L. ENERGY CONFIGURATION

1. Please indicate if tenants pay any electric, gas, heating and cooling or water expenses.
2. Please indicate if the building is all-electric or not.

M. GROUND RENT

1. Please complete if the property is subject to a land lease.

N. SALE OF PROPERTY OR CHANGES IN OWNERSHIP

1. Indicate if any percentage of ownership or configuration of ownership has changed in the last three years.
2. Identify the nature of the ownership interest that changed.
3. List the percent of ownership that changed whether it is fractional or complete, and the effective date of the change.

4. Indicate the amount paid for the real property subject to a change in ownership.

O. Debt Service Information

Please provide information concerning any loan placed on this property within the last three years. Please include any new loans or refinancing of original debt. This information is requested to study the financing trends for this property type to determine typical debt coverage ratios.

GOVERNMENT OF THE DISTRICT OF COLUMBIA

Office of the Deputy Chief Financial Officer

Office of Tax and Revenue

INCOME-EXPENSE FORM

Dear Property Owner:

To estimate the value of your real property for assessment purposes, our staff must analyze the property individually and in relation to similar properties. The Income-Expense Form provides information needed to complete this analysis. It must be completed accurately to allow for a comprehensive analysis. This form has been revised to provide for data entry of information into our computer system. Please print legibly on the lines to ensure accurate processing of data.

Filing of the Income-Expense Form is required for income-producing or investment-type properties whether **RENTED, VACANT** or **OWNER-OCCUPIED** during the reporting period. **EXCEPTION:** RESIDENTIAL RENTAL PROPERTIES CONTAINING FOUR (4) OR LESS DWELLING UNITS are not required to report income-expense data. However, to avoid a non-compliance penalty PLEASE note on the form that the property has 4 units or less and return the ***signed*** form.

The *"E-Conomy Transformation Act of 2000"* provides a real property tax abatement for Qualified High Technology Companies (QHTC). To be considered for this program an approved **QHTC-CERT** must be submitted with the filing of an income-expense form. To be eligible, the commercial property must have met the following criteria:

Non-residential or mixed-use building in which 50% of the tenants are QHTC; or 50% of the aggregate square footage is leased to a QHTC;

A newly constructed building in which the initial certificate of occupancy or initial temporary certificate of occupancy was received after December 31, 2000 and the building meets the aforementioned requirements; and

A building improved or renovated to adapt to use by a QHTC

It is important that you file for your property ONLY on the form coded for that specific property. The forms are credited as coded. **If you do not receive a form for a property that you own, please call Anthony Daniels, at (202) 442-6794 and arrange to have a correctly coded form sent to you.** Do not photocopy forms with a computer printed address line to use for another property. If you photocopy blank forms, make sure that they have the following: 1) square, lot and premise address and 2) **all signatures are ORIGINALS.** Photocopied and stamped signatures will not be accepted.

Please make a copy of your filing for your records and mail the completed form to the following address:

Real Property Assessment Division-Income/Expense
P. O. Box 71440
Washington, DC 20024

You may also deliver it to our office at **1101 4th Street, SW -2nd floor** between 8:15 A.M. – 4:30 P.M., conveniently located next to the Waterfront/SWU Metro station.

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