

0041319311700-5

Form **730**  
(Rev. December 2017)  
Department of the Treasury  
Internal Revenue Service

**Monthly Tax Return for Wagers**  
(Section 4401 of the Internal Revenue Code)

**2505**

OMB No. 1545-0235

► Go to [www.irs.gov/Form730](http://www.irs.gov/Form730) for the latest information.

For IRS Use Only

Enter your  
name,  
address,  
employer  
identification  
number,  
and  
month and  
year of  
return.

Name

**Frank Garter**

Month and year

**May/2025**

Number, street, and room or suite no.

**119 Gila Dr.**

Employer identification number

**00-9924005**

City or town, state or province, country, and ZIP or foreign postal code

**Houston TX 77013 00-9924003**

Check applicable boxes:



Final return



Address change

T	
FF	
FD	
FP	
I	
T	

**Re-Entry  
Document  
Control****File Type**

- ☐ IMF  
☒ BMF  
☐ Other: \_\_\_\_\_

1. Alpha/Numeric  
block control no.**ABC**

2. Document locator number

**0041319311700-5**

3. Batch number

**0320**

4. Document count

**1**

5. Credit amount

6. Debit amount

7. Transaction code

**610**

8. Transaction date

9. Header MFT code

10. Secondary amount

11. Re-entry source code (check one)

- ☐ **R – Reprocessable:** Has posted to MF incorrectly; not open on SCCF. Check applicable box in Block 19.
- ☒ **N – Reinput of Unpostable Document:** Has not posted to MF; open on SCCF. Check applicable box in Block 18. Check applicable box in Block 19.
- ☐ **4 – SC reinput:** Has not posted to MF; open on SCCF. Check applicable box in Block 18.

12. DLN year  
digit**3**13. RPS return; payment  
has posted to same  
account with match-  
ing DLN  
☐

14. Remarks

**Input to 00-9924003**

15. Process as:

- ☒ Remittance (Enter the  
amount in Item 5 or 6)
- ☐ Non-Remittance (Items 5, 6,  
and 10 are normally blank)

16. Serial number

**00**

17. Prepared by

**0051102345**

Telephone ext.

**1234**

Date

**8-22-25**18. Reinput  
document

- ☐ SC reject  
☐ Tape deletion  
☐ SCCF review  
☐ Other: \_\_\_\_\_

19. Reprocessable document (must be  
non-remittance)

- ☒ EIN or SSN corrected  
☐ Tax period corrected  
☐ Corrected to original return  
☐ Other

- ☐ Accounting ☐ Data Control ☐ Unpostables  
☐ Adjustments ☐ Examination ☐ Other: \_\_\_\_\_  
☐ Collection ☒ Rejects

Form **3893** (Rev. 1-89)

Catalog Number 22525M

Department of the Treasury—Internal Revenue Service

(Rev. December 2017)  
Department of the Treasury  
Internal Revenue Service

► Don't staple or attach this voucher to your payment.

1 Enter your employer identification  
number.2 **Enter the amount of your payment. ►**

Make your check or money order payable to "United States Treasury"

Dollars

Cents

3 Enter year and month as shown on Form 730.

**Y Y Y Y M M**

4 Enter your business name (individual name if sole proprietor).

Enter your address.

Enter your city, state, and ZIP code.

Send Form 730, this voucher, and payment to:

**Department of the Treasury  
Internal Revenue Service  
Ogden, UT 84201-0100**