



Government of the District of Columbia
Office of the Chief Financial Officer
Office of Tax and Revenue

2014
FR-900M

2014 FR-900M

**Employer/Payor
Withholding Tax Booklet
Monthly Returns**

Secure - Accurate - Convenient ...

File Electronically Today!

www.taxpayerservicecenter.com



ELECTRONIC TAXPAYER SERVICE CENTER

FR-900M (REV. 7/13)

Reminders

- Employers or payors must file Forms W-2 or 1099 electronically if the number of W-2 or 1099 forms is 25 or more. If 24 or fewer, the employer or payor may file electronically (upload or on-line data entry, or CD), or as paper forms attached to the Transmittal Form W-2/1099T.
- W-2 or 1099 forms must be transmitted to the DC Office of Tax and Revenue (OTR) on or before January 31 of the year following the tax year for which they are issued whether they are filed on paper, on CD or electronically.
- The FR-900B, Annual Reconciliation form will be available only as a fill-in on the DC website, or the Software Developer's substitute form.
- The District now requires withholding at the highest DC income tax rate (8.95%) for DC residents on lump-sum distributions from retirement accounts or plans.

General Instructions

Withholding Monthly Tax Return

Who must file a Form FR-900M?

Every employer who pays wages to a DC resident or payor of lump-sum distributions who withholds DC income tax must file a DC withholding tax return. This includes individual employers who have household employee(s). Lump-sum distributions do not include:

- (a) any portion of a lump-sum payment that was previously subject to tax;
- (b) an eligible rollover distribution that is effected as a direct trustee to trustee transfer; and
- (c) a rollover from an individual retirement account to a traditional or Roth individual retirement account that is effected as a direct trustee to trustee transfer.

An employer or payor who fails to withhold or pay withholding taxes to DC is personally liable for the tax.

Who must file a Form FR-900B?

Every monthly or quarterly withholding taxpayer must file a Form FR-900B, Employer Withholding Tax Annual Reconciliation and Report. Visit www.taxpayerservicecenter.com for Form FR-900B.

What must be filed?

You must file your FR-900M returns and the FR-900B even if you withheld no tax or no payment is due.

If your withholding tax liability is less than or equal to \$200 per period, file an annual return, FR-900A. If your withholding tax liability is greater than or equal to \$201 and less than or equal to \$1200 per period, file a quarterly return, FR-900Q. If your withholding tax liability is greater than or equal to \$1201 per period, file a monthly return, FR-900M. If you need to change your filing frequency, contact Customer Service Administration at (202) 727-4TAX (4829).

If your tax liability is \$5,000 per period, you shall file and pay electronically.

Visit www.taxpayerservicecenter.com for instructions.

Which other DC form may withholding taxpayers need to file?**Combined Registration Application For Business DC Taxes/Fees/Assessments (FR-500)**

Before conducting business in the District of Columbia ("District") you must file a Combined Registration Application For Business DC Taxes/Fees/Assessments (Form FR-500) with the OTR. There is no charge for registering. You may obtain the FR-500 from our website: www.taxpayerservicecenter.com or you may call 202-442-6546. This form is also available at the OTR Customer Service Center, 1101 4th Street, SW, 2nd Floor, Washington, DC. You may also complete the registration on-line.

List on the FR-500 all locations in the District from which you will be making payments requiring withholding.

Wage and Tax Statement (W-2)

The W-2's must be accompanied with the FR-900B. You must include your Federal Employer Identification Number (FEIN) or Social Security Number (SSN) on all W-2 forms issued to employees from whom you withheld DC taxes. If you file electronically, you must file the W-2 forms electronically.

File W-2 forms electronically if filing 25 or more forms. If 24 or fewer forms, you

may file electronically via on-line data entry, or submit as paper forms attached to the transmittal, Form W-2/1099T to the:

Office of Tax and Revenue
1101 4th Street, SW, FL4
Washington, DC 20024

File Forms W-2 by January 31 of each year.

1099 Series

The 1099 series must be accompanied with the FR-900B. You must include your Federal Employer Identification Number (FEIN) or Social Security Number (SSN) on all 1099 series forms issued to taxpayers from whom you withheld DC taxes. File 1099 series forms on a CD in PDF format by January 31 of each year. Submit the CD to the:

Office of Tax and Revenue
1101 4th Street, SW, FL4
Washington, DC 20024

Please include the FEIN, 1099 and year on the CD.

NOTE: The OTR offers an electronic web-based interface for W-2 and W-2C

transmissions. This can be used both for 24 or fewer W-2's and for files containing more than 25 W-2's. A data entry interface is provided on the OTR website for on-line keying of small batches of W-2's (24 or fewer). A file transfer interface is provided for all W-2 or W-2C files, with EFW2 and EFW2C format specified. Visit the OTR website at www.taxpayerservicecenter.com for details.

When are your taxes due?

You must file your monthly return and pay any withholding due on or before the 20th day of the month following the month being reported. For example, the January 2014 return is due February 20, 2014.

You must file your annual reconciliation return and pay any withholding due on or before the 31th day of January following the year being reported.

If the due date falls on a Saturday, Sunday, or legal holiday, the filing of the return and payment is due the next business day. You must file a return, even if you did not withhold from wages or other payments. Otherwise, you will receive a delinquency notice.

How to file your return

This booklet has all the forms and instructions you will need. It is mailed to each

registered taxpayer except those who file electronically or use a substitute form. It also contains mailing labels. You are responsible for filing and submitting the withheld amounts on time whether or not you receive the printed forms.

Substitute forms

You may file your DC withholding return using a computer-prepared or computer-generated substitute form, provided the form is approved in advance by the OTR. The fact that a software package is available for retail purchase does not mean that the substitute form has been approved for use. Call or check with the software developer to determine if their form is a DC OTR approved form.

By mail

If mailing a return with a payment, make the check or money order payable to the DC Treasurer. Write your Federal Employer Identification Number (FEIN) or Social Security Number (SSN), FR-900M, and the tax year on the payment.

If mailing a return with or without a payment, send your return to:

Office of Tax and Revenue
PO Box 96385
Washington, DC 20090-6385

By accessing the DC Electronic Taxpayer Service Center (eTSC)

Withholding taxpayers may file and pay the FR-900M or FR-900B by accessing the DC eTSC website. A pre-registration is required. Allow 5-7 business days for processing. Visit www.taxpayerservicecenter.com for information on completing an eTSC application.

Electronic Filing Instructions

The instructions in this booklet are specifically for filers of paper returns. When you file electronically, note that the instructions may differ. Follow the “on screen” instructions. If you need further explanations, review the instructions in this booklet.

Electronic Payment Options

If your payment due is greater than \$5,000 per month, **you shall pay electronically.**

Refer to the Electronic Funds Transfer (EFT) Payment Guide available on the DC website at www.taxpayerservicecenter.com for instructions for electronic payments. The electronic taxpayer service center (eTSC) does not allow the use of foreign bank accounts.

Payment options are as follows:

- Electronic check (e-check). E-check is similar to ACH debit, but it is a one-time transaction where the taxpayer provides the banking information at the time of payment instead of storing the information. There is no fee for business e-check payments.
- ACH Credit. ACH credit is for business taxpayers only. There is no fee charged by OTR, but the taxpayer’s bank may charge a fee. The taxpayer directly credits OTR’s bank account. A taxpayer does not need to be eTSC registered to use this payment type, and does not need access to the website.

Note: When making ACH credit payments through your bank, please use the correct tax type code (00300) for FR900M and (00310) for FR900B and tax period ending date (YYMMDD).

- ACH Debit. ACH debit is for registered eTSC business taxpayers only. There is no fee. The taxpayer’s bank routing and account numbers are stored within their on-line eTSC account. They can use this account to pay any existing liability. They give OTR the right to debit the money from their bank account.
- Credit/Debit Card. The taxpayer may pay the amount owed using Visa®, MasterCard®, Discover® or American Express®. You will be charged a fee that is paid directly to the District’s credit card service provider. Payment is

effective on the day it is charged.

Note: Dishonored payments. Make sure your check or electronic payment will clear. You will be charged a \$65 fee if your check or electronic payment is not honored by your financial institution and returned to OTR.

Note: International ACH Transaction (IAT). Electronic banking rules have changed. If you request a refund to be direct deposited into an account outside of the United States, you will receive a paper check.

Your payment cannot be drawn on a foreign account. You must pay by money order or credit card instead.

Penalties and interest

OTR will charge:

- A penalty of 5% per month if you fail to file a return or pay any tax due on time. It is computed on the unpaid tax for each month or fraction of a month, that the return is not filed or the tax is not paid. It may not exceed an additional amount equal to 25% of the tax due;
- A 20% penalty on the portion of an underpayment of taxes if attributable to

negligence. Negligence is failure to make a reasonable attempt to comply with the law or to exercise ordinary and reasonable care in preparing tax returns without the intent to defraud. One indication of negligence is failure to keep adequate books and records;

- Interest of 10% per year, compounded daily, on a late payment;
- A one-time fee to cover internal collection efforts on any unpaid balance. The collection fee assessed is 10% of the tax balance due after 90 days. Payments received by OTR on accounts are first applied to the collection fee, then to penalty, interest and tax owed;
- A civil fraud penalty of 75% of the underpayment which is attributable to fraud (see DC Official Code §47-4212).

Criminal penalties

You will be penalized under the criminal provisions of the DC Official Code, Title 47 and any other applicable penalties, if you are required to file a return or report, or perform any act and you:

- Fail to file the return or report timely. If convicted, you will be fined not more than \$1,000 or imprisoned for not more than 180 days, or both, for each failure or neglect;
- Willfully fail to file the return or report timely. If convicted, you will be fined

- not more than \$5,000 or imprisoned for not more than 180 days, or both;
- Willfully attempt to evade or defeat a tax; willfully fail to collect, account for, or pay a tax or willfully make fraudulent or false statements.

Corporate officers may be held personally liable for the payment of taxes owed to DC.

Enforcement actions

OTR may use lien, levy, seizure, collection agencies and liability offset if a taxpayer fails to pay the District within 20 days after receiving a Notice of Tax Due and a demand for payment. Visit www.taxpayerservicecenter.com. Click “Information”, “Collection Division”, “Enforcement Actions”.

Special circumstances

Final return

If you are not required to continue filing a return due to the ending of business operations, fill in the “final return” oval on the return. We will then cancel your filing requirement.

If you are not going out of business, do not use this oval to indicate the return is the final for the month, year or quarter.

Change of Name or Address

For any name or address change, fill out the FR-900C, “Change of Name or Address,” form in this booklet and mail it to the Office of Tax and Revenue, PO Box 470, Washington, DC 20044-0470. Do not make a change on the return if you received a personalized return.

Getting started

To complete the Form FR-900M, in general you will need:

- A pen with black ink
- A calculator

Not all items will apply. Fill in only those that do apply. If an amount is zero, make no entry, leave the line blank.

Account Number

The account number must be the number that was provided by OTR when you registered. **Omission of the account number will cause delays in processing your return. Taxpayers are responsible for providing their assigned OTR account number to their tax practitioner or persons that are completing the withholding tax return.**

Taxpayer Identification Number(s) (TIN)

You must have a TIN, whether it is a Social Security Number (SSN) or a Federal Employer Identification Number (FEIN).

- A SSN is a valid number issued by the Social Security Administration (SSA) of the US Government. To apply for a SSN, get Form SS-5, Application for a Social Security Card, from your local SSA office or get this form online at www.ssa.gov. You may also get this form by calling 1-800-772-1213;
- A FEIN is a valid number issued by the Internal Revenue Service (IRS). To apply for a FEIN, get Form SS-4, Application for Employer Identification Number (EIN) under Starting a Business. You may also get this form by calling 1-800-TAX-FORM (1-800-829-3676).

You must wait until you receive either number before you file a DC return. Your return may be rejected if your TIN is missing, incorrect or invalid. The District conforms with Section 405, Title 42, of the US Code in requesting your SSN be provided in the completion of this form. Your SSN will be used to establish your identity for tax purposes only.

Help us identify your forms and attachments

Write your FEIN/SSN, tax period, business name and address on any statements submitted with the return or filed separately. The FEIN/SSN is used for tax administration purposes only.

Incomplete forms will delay processing

Complete the identification section and then complete all applicable withholding Lines 1 through 4 on the FR-900M, otherwise processing your return will be delayed.

Filling out the form

To aid us in processing your return, please follow these rules:

Using black ink, print in CAPITAL letters.

ROBERTS

Leave a space between words and between numbers and words.

8 ELM

Write 3s with rounded tops, not flat tops.

Yes No
37 ~~37~~

Write 7s without middle bars.

Enter cents in the appropriate boxes.

\$ 57204

Personal Information

Complete the personal information as instructed, using CAPITAL letters and black ink. Use one block per letter, including a space between address fields. Please write clearly, otherwise, processing your return may be delayed.

Signature and verification

An authorized officer of the corporation must sign and date the return. A receiver, trustee, or assignee must sign any return that he/she is required to file for the corporation. Any person who prepared the return for compensation must also sign, date and provide the necessary identification number. If a firm or corporation prepares a return, it should be signed in the name of the entity. The signature requirement does not apply when a taxpayer's regular employee prepares the return. Please review the tax return before you allow a paid preparer to issue a return on your behalf.

Preparer Tax Identification Number (PTIN)

If you are a paid preparer of federal returns, you are required to have a PTIN issued by the IRS. A PTIN is a number issued and authorized by the IRS to file a return on the taxpayers' behalf. Please include your PTIN.

Specific Line Instructions for the FR-900M

Line 1 Enter total DC income tax withheld for W-2 this month. If you were not required to withhold, leave this line blank

Line 2 Enter total DC income tax withheld for 1099 this month.

Line 3 Enter adjustments from the previous month only. If minus, fill in the oval.

Line 4 Enter the amount of the tax due.

Key website resources

- **DC Official Code**
<http://www.lexisnexis.com/hottopics/dccode/>
- **DC Regulations**
<http://www.dcregs.dc.gov/>
- **US Department of State Tax Exemption Cards**
www.state.gov/ofm/tax/
- **DC Tax Forms/Publications**
<http://otr.cfo.dc.gov/page/tax-forms-and-publications>
- **Mailing Address for Returns**
<http://otr.cfo.dc.gov/otr/node/392882>
- **Electronic Funds Transfer (EFT) Guide**
<http://otr.cfo.dc.gov/otr/publication/2013-electronic-funds-transfer-payment-guide-eft>
- **NACHA Guidelines**
<http://www.nacha.org/>
- **Social Security Administration**
<http://ssa.gov/>
- **Internal Revenue Service**
<http://www.irs.gov>

2014 FR-900M Employer/Payor
Withholding Tax – Monthly Return



Important: Print in CAPITAL letters using black ink.

Taxpayer Identification Number

Fill in if FEIN

Account Number

Fill in if SSN

Business name

Business mailing address line 1

Business mailing address line 2

City

State

Zip Code + 4

Telephone number of person to contact

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

Taxpayer's Signature

Title

Date

Preparer's PTIN

Preparer's Signature

Date

Tax Period Ending (MMYY)

01/31/2014

Fill in if final return

Due Date

02/20/2014

OFFICIAL USE ONLY
Vendor ID#0000

1. DC income tax withheld this month per W-2

\$

2. DC income tax withheld this month per 1099

\$

3. Adjustment from the previous month (W-2/1099) only. Fill in circle if minus.

\$

4. Tax Due

\$



2014 FR-900M Employer/Payor Withholding Tax – Monthly Return



Important: Print in CAPITAL letters using black ink.

Taxpayer Identification Number

Fill in if FEIN

Account Number

Fill in if SSN

Business name

Business mailing address line 1

Business mailing address line 2

City

State

Zip Code + 4

Telephone number of person to contact

Under penalties of law, I declare that, to the best of my knowledge, this return is correct.

Declaration of preparer is based on the information available to the preparer.

Taxpayer's Signature

Title

Date

Preparer's PTIN

Preparer's Signature

Date

Tax Period Ending (MMYY)

02/28/2014

Fill in if final return

Due Date

03/20/2014

OFFICIAL USE ONLY
Vendor ID#0000

1. DC income tax withheld this month per W-2

\$																				
----	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

2. DC income tax withheld this month per 1099

\$																				
----	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

3. Adjustment from the previous month (W-2/1099) only. Fill in circle if minus.

\$																				
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4. Tax Due

\$																				
----	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--



2014 FR-900M Employer/Payor Withholding Tax – Monthly Return



Important: Print in CAPITAL letters using black ink.

Taxpayer Identification Number

Fill in if FEIN

Account Number

Fill in if SSN

Tax Period Ending (MMYY)

03/31/2014

Fill in if final return

OFFICIAL USE ONLY
Vendor ID#0000

Business name

Business mailing address line 1

Business mailing address line 2

City

State

Zip Code + 4

Telephone number of person to contact

Under penalties of law, I declare that, to the best of my knowledge, this return is correct.

Declaration of preparer is based on the information available to the preparer.

1. DC income tax withheld this month per W-2

\$																				
----	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

2. DC income tax withheld this month per 1099

\$																				
----	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

3. Adjustment from the previous month (W-2/1099) only. Fill in circle if minus.

\$																				
----	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

4. Tax Due

\$																				
----	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Preparer's PTIN

Taxpayer's Signature

Title

Date

Preparer's Signature

Date





2014 FR-900M Employer/Payor Withholding Tax – Monthly Return



Important: Print in CAPITAL letters using black ink.

Taxpayer Identification Number

Fill in if FEIN

Account Number

Fill in if SSN

Tax Period Ending (MMYY)

05/31/2014

Fill in if final return

OFFICIAL USE ONLY
Vendor ID#0000

Business name

Business mailing address line 1

Business mailing address line 2

City

State

Zip Code + 4

Telephone number of person to contact

Under penalties of law, I declare that, to the best of my knowledge, this return is correct.

Declaration of preparer is based on the information available to the preparer.

1. DC income tax withheld this month per W-2

\$

2. DC income tax withheld this month per 1099

\$

3. Adjustment from the previous month (W-2/1099) only. Fill in circle if minus.

\$

4. Tax Due

\$

Preparer's PTIN

Taxpayer's Signature

Title

Date

Preparer's Signature

Date





2014 FR-900M Employer/Payor Withholding Tax – Monthly Return



Important: Print in CAPITAL letters using black ink.

Taxpayer Identification Number

Fill in if FEIN

Account Number

Fill in if SSN

Business name

Business mailing address line 1

Business mailing address line 2

City

State

Zip Code + 4

Telephone number of person to contact

Under penalties of law, I declare that, to the best of my knowledge, this return is correct.

Declaration of preparer is based on the information available to the preparer.

Taxpayer's Signature

Title

Date

Preparer's PTIN

Preparer's Signature

Date

Tax Period Ending (MMYY)

07/31/2014

Fill in if final return

Due Date

08/20/2014

OFFICIAL USE ONLY
Vendor ID#0000

1. DC income tax withheld this month per W-2

\$																				
----	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

2. DC income tax withheld this month per 1099

\$																				
----	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

3. Adjustment from the previous month (W-2/1099) only. Fill in circle if minus.

\$																				
----	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

4. Tax Due

\$																				
----	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--



2014 FR-900M Employer/Payor
Withholding Tax – Monthly Return



Important: Print in CAPITAL letters using black ink.

Taxpayer Identification Number

Fill in if FEIN

Account Number

Fill in if SSN

Business name

Business mailing address line 1

Business mailing address line 2

City

State

Zip Code + 4

Telephone number of person to contact

Under penalties of law, I declare that, to the best of my knowledge, this return is correct.

Declaration of preparer is based on the information available to the preparer.

Taxpayer's Signature

Title

Date

Preparer's PTIN

Preparer's Signature

Date

Tax Period Ending (MMYY)

08/31/2014

Fill in if final return

Due Date

09/20/2014

OFFICIAL USE ONLY
Vendor ID#0000

1. DC income tax withheld this month per W-2

\$

2. DC income tax withheld this month per 1099

\$

3. Adjustment from the previous month (W-2/1099) only. Fill in circle if minus.

\$

4. Tax Due

\$



2014 FR-900M Employer/Payor Withholding Tax – Monthly Return



Important: Print in CAPITAL letters using black ink.

Taxpayer Identification Number

Fill in if FEIN

Account Number

Fill in if SSN

Business name

Business mailing address line 1

Business mailing address line 2

City

State

Zip Code + 4

Telephone number of person to contact

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

Taxpayer's Signature

Title

Date

Preparer's PTIN

Preparer's Signature

Date

Tax Period Ending (MMYY)

09/30/2014

Fill in if final return

Due Date

10/20/2014

OFFICIAL USE ONLY
Vendor ID#0000

- DC income tax withheld this month per W-2
- DC income tax withheld this month per 1099
- Adjustment from the previous month (W-2/1099) only. Fill in circle if minus.
- Tax Due

\$																				
\$																				
\$																				
\$																				

DCW006M





2014 FR-900M Employer/Payor Withholding Tax – Monthly Return



Important: Print in CAPITAL letters using black ink.

Taxpayer Identification Number

Fill in if FEIN

Account Number

Fill in if SSN

Tax Period Ending (MMYY)

11/30/2014

Fill in if final return

OFFICIAL USE ONLY
Vendor ID#0000

Business name

Business mailing address line 1

Business mailing address line 2

City

State

Zip Code + 4

Telephone number of person to contact

Under penalties of law, I declare that, to the best of my knowledge, this return is correct.

Declaration of preparer is based on the information available to the preparer.

Taxpayer's Signature

Title

Date

Preparer's PTIN

Preparer's Signature

Date

1. DC income tax withheld this month per W-2

\$

2. DC income tax withheld this month per 1099

\$

3. Adjustment from the previous month (W-2/1099) only. Fill in circle if minus.

\$

4. Tax Due

\$



2014 FR-900M Employer/Payor Withholding Tax – Monthly Return



Important: Print in CAPITAL letters using black ink.

Taxpayer Identification Number

Fill in if FEIN

Account Number

Fill in if SSN

Business name

Business mailing address line 1

Business mailing address line 2

City

State

Zip Code + 4

Telephone number of person to contact

Under penalties of law, I declare that, to the best of my knowledge, this return is correct.

Declaration of preparer is based on the information available to the preparer.

Taxpayer's Signature

Title

Date

Preparer's PTIN

Preparer's Signature

Date

Tax Period Ending (MMYY)

12/31/2014

Fill in if final return

Due Date

01/20/2015

OFFICIAL USE ONLY
Vendor ID#0000

1. DC income tax withheld this month per W-2

\$

2. DC income tax withheld this month per 1099

\$

3. Adjustment from the previous month (W-2/1099) only. Fill in circle if minus.

\$

4. Tax Due

\$



FR-900C Change of Name or Address

If there are changes to your FEIN, business name, address or contact person, please complete both sides of this form and mail it to the Office of Tax and Revenue, PO Box 470, Washington, DC 20044-0470. For all other changes, call the Customer Service Administration at (202) 727-4(TAX) 4829.

Important: Print in CAPITAL letters using black ink.

Previous taxpayer identification number	OFFICIAL USE	
<input type="text"/>	Fill in <input type="radio"/> if FEIN	<input type="radio"/> if SSN
Old business name	<input type="text"/>	
Old business address	<input type="text"/>	
Old mailing address	<input type="text"/>	
City	State	Zip Code + 4
<input type="text"/>	<input type="text"/>	<input type="text"/>

OFFICE OF TAX AND REVENUE
PO BOX 96385
WASHINGTON DC 20090-6385

OFFICE OF TAX AND REVENUE
PO BOX 96385
WASHINGTON DC 20090-6385

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WASHINGTON DC 20090-6385

OFFICE OF TAX AND REVENUE
PO BOX 96385
WASHINGTON DC 20090-6385



**EMPLOYER'S
MONTHLY WITHHOLDING RECORD**

MONTH	DC INCOME TAX WITHHELD	DATE PAID
JAN		
FEB		
MAR		
APR		
MAY		
JUNE		
JULY		
AUG		
SEPT		
OCT		
NOV		
DEC		
RECONCILIATION		
Annual Payroll	(a) Payroll Tax Paid	Difference (Block a minus Block b)
	(b) Tax per W-2's/ 1099's	

