Government of the District of Columbia

2011 FR-900B SUB Employer Withholding Tax – Annual Reconciliation and Report

1 1 9 0 0 0 5 1 0 0 0 1

TAXPAYER IDENTIFICATION NUMBER
123456789

MARK IF X FEIN
MARK IF X SSN
MARK IF X AMENDED RETURN

TAX PERIOD ENDING (MMYY)
MMYY

SOFTWARE DEVELOPER USE ONLY
VENDOR ID# 1234

BUSINESS NAME
ABCDEFGHIJKLABCDEFGHIJKLABCDEF

ACCOUNT NUMBER
1 2 3 4 5 6 7 8 9 0 0 0

DUE DATE
01312012

MAILING ADDRESS LINE #1
12345ABCDEFGHIJKLABCDEFGH

MAILING ADDRESS LINE #2
12345ABCDEFGHIJKLABCDEFGH

CITY
ABCDEFGHIJKLABCDEFGH

STATE
AB

ZIPCODE + 4
123456789

1. DC INCOME TAX WITHHELD THIS YEAR PER W-2s..... $ 123456789.99

2. TOTAL WITHHOLDING TAX PAID TO DC THIS YEAR ON FORMS FR-900M or FR-900Q ..... $ 123456789.99

3. ADDITIONAL TAX DUE (If Line 1 is more than Line 2) ..... $ 123456789.99

4. OVERPAYMENT (If Line 1 is less than Line 2)..... $ 123456789.99

Mail this return separately from your quarterly or annual return. This return is due January 31, 2012 or within thirty (30) days of your final payroll.

EMPLOYER'S DC WITHHOLDING TAX RECONCILIATION

	Date Paid	Tax Paid	Explanation
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
Total for the year			

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

PLEASE SIGN HERE

TAXPAYER'S SIGNATURE _____ TITLE _____ MMDDYYYY DATE

Telephone Number of Person to Contact
1234567890

PAID PREPARER ONLY

PREPARER'S SIGNATURE (If other than taxpayer) _____ MMDDYYYY DATE

Preparer's FEIN, PTIN or SSN
123456789

FIRM NAME _____

FIRM ADDRESS _____

Make check or money order payable to the DC Treasurer.
Include your FEIN or SSN, "FR-900B" and the tax year on your payment.
Mail return and payment to: DC Office of Tax and Revenue, PO Box 96385 Washington, DC 20090-6385.

Rev. 04/11