



GOVERNMENT OF THE DISTRICT OF COLUMBIA  
OFFICE OF THE CHIEF FINANCIAL OFFICER  
OFFICE OF TAX AND REVENUE

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**EMPLOYER'S WITHHOLDING TAX BOOKLET**  
MONTHLY RETURNS AND ANNUAL RECONCILIATION

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**2002**



**INTRODUCING...**



**Electronic Taxpayer Service Center**  
[www.taxpayerservicecenter.com](http://www.taxpayerservicecenter.com)

A new, secure and convenient way to  
pay and view your taxes online.  
Best of all, it's free!

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

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eTSC is a free Internet site where businesses can file District of Columbia tax returns electronically, make payments online, and view up-to-date tax account data. The following tax types are included in the eTSC:

- Corporate Franchise
- Unincorporated Business Franchise
- Employer Withholding
- Sales and Use
- Personal Property

Future improvements will bring additional tax account accessibility and filing capabilities.

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Office of Tax and Revenue ♦ 941 North Capitol Street, NE  
Washington, DC 20002 ♦ (202) 727-4TAX  
<http://cfo.washingtondc.gov>

## How does the eTSC work?

Enter the eTSC site at [www.taxpayerservicecenter.com](http://www.taxpayerservicecenter.com), download a registration form and follow mailing instructions. Once the registration is received and processed, the registrant will be sent a user ID and password by secure e-mail allowing access to the eTSC. With the ID and password, the service center can be accessed immediately and is available 24 hours a day, seven days a week. This free service is also available via District government Web sites at <http://cfo.washingtondc.gov> or <http://dc.gov>

## What taxes can be filed using eTSC?

Businesses can file the following returns online and account information can be viewed:

- Employer Withholding Tax Form Monthly Return (FR-900M)
- Sales and Use Tax Form Monthly Return (FR-800M)
- Declaration of Estimated Tax for Corporation Franchise Form (D-20ES)
- Declaration of Estimated Tax for Unincorporated Business Form (D-30ES)

The business receives immediate confirmation upon filing, as well as an electronic image of each return and form submitted that can be downloaded.

## How can I make payments using eTSC?

Businesses have the following options for filing and paying their taxes:

- Electronic Funds Transfer / Automated Clearinghouse debit — available to all businesses that provide a bank routing number when they sign up.
- Credit Cards — an alternative and convenient method of payment. A convenience fee is charged by the credit card processing company.
- Mail — still available as an option to businesses even if they file electronically.

## CONTENTS

- General Information/  
Instructions
- Change of Address Form  
FR-900W
- Final Report - FR-900W1
- Request for Withholding Tax  
Forms
- Monthly Withholding Tax  
Returns - FR-900M
- Annual Reconciliation and  
Report - FR-900B
- Address Labels
- Withheld Tax Monthly  
Payment Record

## IMPORTANT

- **You must include your Federal Employer Identification Number on all W-2 forms which you issue to District of Columbia resident employees.**
- **Enter whole dollar amounts – do not use cents. Round all amounts to the nearest dollars.**
- **To mail a monthly withholding tax return (FR-900M) and payment use the address labels in the back of this booklet or mail to: Government of the District of Columbia, P.O. Box 7792, Ben Franklin Station, Washington, D.C. 20044-7792.**  
**The Annual Reconciliation and Report - FR-900B should be mailed to the Government of the District of Columbia, 6th Floor, 941 North Capitol St., N.E., Washington, D.C. 20002.**
- **Checks or money orders should be made payable to the D.C. TREASURER. Write your Federal Employer Identification Number, “W” (for withholding tax), and the tax period on your payment.**  
**Payments may be made in person at the D.C. Treasurer’s Office, First Floor, 941 North Capitol St., N.E., Washington, D.C., or at any D.C. branch of the First Union Bank.**
- **Substitute forms, returns, or reports must be approved each year in advance by the Office of Tax and Revenue.**
- **RETURNS AND AN ANNUAL RECONCILIATION AND REPORT MUST BE FILED EVEN IF NO TAXES WERE WITHHELD OR DUE.**

# EMPLOYER'S WITHHOLDING TAX – GENERAL INFORMATION – MONTHLY RETURN

**NOTE: If you find that your monthly withholding tax liability is consistently less than \$100, you should call the Office of Tax and Revenue at 202-727-4829 to have your filing requirement frequency changed from monthly to annual.**

- 1. FILING PERIOD AND DUE DATES:** Monthly returns are due on or before the 20th of the month after the month being reported. In addition to monthly returns, the Annual Reconciliation and Report must be completed in full and filed by January 31st of the following year or within 30 days of your final payroll. If a due date falls on a Saturday, Sunday or legal holiday, the return or reconciliation and report is due on the next business day.
- 2. FORMS:** A booklet with all the necessary forms and instructions is mailed to each registered employer. **If an employer does not receive the forms, payments should be mailed with a cover letter.** The cover letter should include the employer's Federal Employer Identification Number, tax type "W" (for withholding tax), and the period for which payment is being made. Employers are responsible for filing on time. For more information on filing requirements call (202) 727-4TAX (4829). For forms call (202) 442-6546.
- 3. PAYMENT:** Make checks or money orders payable to the *D.C. Treasurer* and mail with the monthly return to the Government of the District of Columbia, P.O. Box 7792, Ben Franklin Station, Washington, D.C. 20044-7792. Write on your payment your Federal Employer Identification Number, "W" (for withholding tax) and the tax period. (Address labels are provided in this booklet.) For other payment options see the "IMPORTANT" section on the previous page.
- 4. CHARGE FOR DISHONORED CHECKS:** There is a charge of \$50 for each dishon-

ored check issued to the District of Columbia.

- 5. SUBMISSION OF W-2s:** A copy of every Form W-2 issued by an employer and showing D.C. Income Tax withheld must be submitted to the Office of Tax and Revenue each year with the Annual Reconciliation and Report or the final return. If prior approval is received from the Office of Tax and Revenue magnetic tapes or ADP printouts may be submitted in lieu of W-2s. **The employer's Federal Employer Identification Number MUST be entered on each W-2 form issued to D.C. resident employees.**

Mail Form W-2 magnetic tapes to: Office of Tax and Revenue, Information Systems Administration, 3rd floor, 941 North Capitol St., N.E., Washington, D.C. 20002.

If the number of W-2s is large, they may be packaged in convenient sizes. In such cases, follow these instructions.

- Number the packages consecutively.
- Write the employer's name, address, and the Federal Employer Identification Number on each package.
- Mail separately from the W-2s, the Form FR-900B, Annual Reconciliation and Report and indicate the number of W-2 packages immediately after the employer's name.
- Send the payment of any tax owed with the Annual Reconciliation and Report. Enclose with the report a brief statement indicating that W-2 forms for the period are being mailed in separate packages.

**IMPORTANT NOTE:** FOR WITHHOLDING TAX RATES REFER TO D.C. INCOME TAX WITHHOLDING INSTRUCTIONS, SAMPLE FORMS AND TABLES (FR-230). TO OBTAIN A COPY OF THE BOOKLET FR-230, CALL 202-442-6546. The tables are also available on our website — [www.cfo.dc.gov](http://www.cfo.dc.gov)

## 6. PENALTY AND INTEREST CHARGES:

- (a) There is a penalty of 5 percent per month imposed for the failure to file a return or pay any tax due on time. The penalty is computed on the unpaid tax for each month, or any fraction of a month, that the return is not filed or the tax is not paid. The penalty may not exceed 25 percent of the tax due.
- (b) There is a 20 percent penalty on that portion of an underpayment of taxes that is attributable to negligence. Negligence means a 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 a failure to keep adequate books and records.
- (c). Interest at the rate of .0355921 percent per day (13% annual rate), will be assessed on any tax remaining unpaid after the due date of the return.

## 7. FAILURE TO WITHHOLD OR PAY TAX:

An employer who fails to withhold or pay over to the District of Columbia withholding taxes is personally liable for the tax.

## ANNUAL RECONCILIATION AND REPORT (FR-900B) Instructions

- Line 1.** Enter the total of D.C. income tax withheld during the reporting period as reflected on the Withholding Statements (W-2s). If you were not required to withhold, enter zeros.
- Line 2.** Enter the total of D.C. income tax withheld and paid to the District of Columbia during the reporting period.
- Line 3.** If Line 1 is more than Line 2, enter the difference on Line 3.
- Line 4.** If you do not pay the tax due (Line 3), or do not timely file a return, calculate the penalty at 5 percent per month, or fraction of a month, of the tax due. The penalty may not exceed 25 percent of the tax due.
- Line 5.** Calculate the interest at .0355921 percent per day (13% annually), of the tax due (Line 3).
- NOTE:** Calculate the penalty and interest from the due date of the return to the date the tax is paid.
- Line 6.** Add Lines 3, 4 and 5 and enter the total.
- Line 7.** If the amount on Line 1 is less than the amount of Line 2, enter the difference on Line 7.

## CHANGE OF ADDRESS

If you have moved, please complete this form and mail it to the Government of the District of Columbia, Office of Tax and Revenue, P.O. Box 470, Washington, DC 20044-0470.

FEDERAL EMPLOYER IDENTIFICATION NUMBER	BUSINESS NAME AND NEW ADDRESS
DATE MOVED	
PREVIOUS BUSINESS ADDRESS	NEW BUSINESS MAILING ADDRESS
PREVIOUS MAILING ADDRESS	
PERSON TO CONTACT AND PHONE NUMBER	REMARKS

## FINAL REPORT

**Complete this form if your business is sold, closed, or discontinued.**

FEDERAL EMPLOYER ID NUMBER																			
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Business name and Address:

Mail to: **Government of the District of Columbia  
Office of Tax and Revenue  
P.O. Box 470  
Washington, D.C. 20044-0470**

If the business was sold, give the purchaser's name, address  
and date when sold:

Name \_\_\_\_\_

Address \_\_\_\_\_

Date Sold \_\_\_\_\_

### PERSON TO CONTACT FOR ADDITIONAL INFORMATION

NAME AND TITLE: \_\_\_\_\_

If business has been closed or discontinued:

Date closed or discontinued: \_\_\_\_\_

Reason: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_



<b>EMPLOYER'S REQUEST FOR WITHHOLDING TAX FORMS</b>		GOVERNMENT OF THE DISTRICT OF COLUMBIA OFFICE OF TAX AND REVENUE First Floor, 941 North Capitol St., N.E., Washington, D. C. 20002		
<b>INSTRUCTIONS:</b> If additional D.C. forms are needed, complete the applicable blocks and return this request to the address shown in the upper right block.		<b>PRINT YOUR NAME AND MAILING ADDRESS BELOW</b>		
Withholding Forms	Quantity Needed	Business Name		
<b>FORM D-4</b> Employee's Withholding Allowance Certificate		Trade Name		
<b>FORM D-4A</b> Certificate of Non-Residence in the District of Columbia		Business Address (Mailing Address)		
<u>Note:</u> District of Columbia Forms D-2 are NO longer issued. Employers are to use Federal W-2 Forms.		City	State	Zip Code



Government of the  
District of Columbia  
Office of Tax and Revenue

## FR-900M : 2002 Employer Withholding Tax-Monthly Return



\*029000910000\*

FEDERAL EMPLOYER I.D. NUMBER

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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PERIOD ENDING (MM/DD/YY)

<input type="text"/>	<input type="text"/>	/	<input type="text"/>	<input type="text"/>	/	<input type="text"/>	<input type="text"/>
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ACCOUNT ID

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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**FOR OFFICIAL USE ONLY**

BUSINESS NAME

<input type="text"/>
----------------------

MAILING ADDRESS LINE 1

<input type="text"/>
----------------------

MAILING ADDRESS LINE 2

<input type="text"/>
----------------------

CITY

<input type="text"/>
----------------------

STATE

<input type="text"/>
----------------------

ZIP CODE

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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1. D.C. INCOME TAX  
WITHHELD THIS MONTH

\$	<input type="text"/>	<input type="text"/>	<input type="text"/>	,	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	,	<input type="text"/>	<input type="text"/>	<input type="text"/>
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2. ADJUSTMENT FOR  
PRIOR MONTH ONLY

\$	<input type="text"/>	<input type="text"/>	<input type="text"/>	,	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	,	<input type="text"/>	<input type="text"/>	<input type="text"/>
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3. TAX DUE

\$	<input type="text"/>	<input type="text"/>	<input type="text"/>	,	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	,	<input type="text"/>	<input type="text"/>	<input type="text"/>
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4. PENALTY

\$	<input type="text"/>	<input type="text"/>	<input type="text"/>	,	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	,	<input type="text"/>	<input type="text"/>	<input type="text"/>
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5. INTEREST

\$	<input type="text"/>	<input type="text"/>	<input type="text"/>	,	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	,	<input type="text"/>	<input type="text"/>	<input type="text"/>
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6. TOTAL DUE

\$	<input type="text"/>	<input type="text"/>	<input type="text"/>	,	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	,	<input type="text"/>	<input type="text"/>	<input type="text"/>
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TAXPAYER NAME : \_\_\_\_\_

FEDERAL EMPLOYER ID NUMBER : \_\_\_\_\_



\*029000920000\*

**PLEASE  
SIGN  
HERE**

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

\_\_\_\_\_  
TAXPAYER'S SIGNATURE

\_\_\_\_\_  
TITLE

\_\_\_\_\_  
DATE

TELEPHONE NUMBER OF PERSON TO CONTACT

			-				-			
--	--	--	---	--	--	--	---	--	--	--

**PAID  
PREPARER  
ONLY**

\_\_\_\_\_  
PREPARER'S SIGNATURE (If other than taxpayer)

\_\_\_\_\_  
DATE

PREPARER'S SSN OR PTIN

--	--	--	--	--	--	--	--	--	--

\_\_\_\_\_  
FIRM NAME

PREPARER'S FEDERAL EMPLOYER ID NUMBER

--	--	--	--	--	--	--	--	--	--

\_\_\_\_\_  
FIRM ADDRESS

Mail return and payment to: Government of the District of Columbia, Ben Franklin Station, P.O. Box 7792, Washington, D.C. 20044-7792.

Make check or money order payable to the D.C. Treasurer. Include your Federal Employer ID Number, "FR-900M" and tax period on your payment.





GOVERNMENT OF THE DISTRICT OF COLUMBIA  
P.O. BOX 7792  
BEN FRANKLIN STATION  
WASHINGTON DC 20044-7792



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## EMPLOYER'S MONTHLY WITHHOLDING RECORD

MONTH	D.C. PAYROLL TAX WITHHELD	DATE PAID
JAN		
FEB		
MAR		
APR		
MAY		
JUN		
JUL		
AUG		
SEP		
OCT		
NOV		
DEC		
<b>RECONCILIATION</b>		
Annual Payroll	(a) Payroll Tax paid	Difference (Block a minus Block b)
	(b) Tax per W-2s	