

**Income Tax Department  
City of Portland  
259 Kent Street  
Portland, MI 48875  
Phone: (517) 647-2941  
Fax (517) 647-2938**



**City of Portland**

**Employer Withholding Booklet**

IMPORTANT TAX INFORMATION

## INSTRUCTIONS FOR PREPARING AND FILING WITHHOLDING RETURN

### Who is required to withhold?

Every employer who:

1. Has a location in the City of Portland; or
2. Is doing business in the City of Portland.

### Withholding Rates:

Use 1% (.01) for:

1. Residents of the City of Portland working in Portland
2. Residents of the City of Portland working outside of Portland who are not subject to withholding for the city where they work.

Use ½% (.005) for: Nonresidents of the City of Portland working in Portland.

### Deposit requirements:

**Quarterly-** The deposit must be received by the City of Portland by the last day of the month following the end of a quarterly period.

### Failure to file return and payment:

An employer who is required to withhold and who fails or refuses to deduct and withhold is liable for the payment of the amount required to be withheld. The liability shall be discharged upon payment of the tax and any penalties and interest charges assessed as provided in the Uniform City Ordinance for such failure or refusal.

### How to prepare this form:

- Please type or print Business name, address, employer identification number, and period covered.
- Enter the total Actual tax withheld from taxable employees during the quarter for the City of Portland-Income Tax. Adjust current payment of actual tax withheld for under payments from the prior quarter.
- Enter total amount to be remitted. Pay this amount in full.
- Sign and date the voucher.

**P941**

**CITY OF PORTLAND -INCOME TAX DIVISION  
EMPLOYER'S RETURN OF INCOME TAX WITHHELD**

TAX WITHHELD
ADJUSTMENTS
TOTAL TAX

MAKE REMITTANCE PAYABLE TO:  
**TREASURER, CITY OF PORTLAND**  
 MAIL CHECK WITH RETURN TO:  
 INCOME TAX DIVISION  
 CITY HALL  
 259 KENT STREET  
 PORTLAND MI 48875

<input type="checkbox"/>	BUSINESS DISCONTINUED DATE _____
<input type="checkbox"/>	NO EMPLOYEES SINCE _____
<input type="checkbox"/>	BUSINESS CHANGED TO:
<input type="checkbox"/>	DATE OF CHANGE: _____
<input type="checkbox"/>	INDIVIDUAL
<input type="checkbox"/>	PARTNERSHIP
<input type="checkbox"/>	CORPORATION

TYPE OF PRINT BUSINESS NAME, ADDRESS, AND EMPLOYER IDENTIFICATION NO.,  
 IF NAME, ADDRESS OR EMPLOYER NUMBER IS NOT CORRECT, PLEASE CORRECT

IF THIS IS YOUR FIRST RETURN ENTER DATE BUSINESS WAS STARTED

EMPLOYER NUMBER  
 EMPLOYER NAME

**DUE: APRIL 30TH**

PERIOD COVERED: JANUARY 1- MARCH 31

I CERTIFY THE TAX WITHHELD AS SHOWN ON THIS RETURN IS CORRECT

SIGNATURE
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**P941**

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EMPLOYER'S RETURN OF INCOME TAX WITHHELD**

TAX WITHHELD
ADJUSTMENTS
TOTAL TAX

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<input type="checkbox"/>	CORPORATION

TYPE OF PRINT BUSINESS NAME, ADDRESS, AND EMPLOYER IDENTIFICATION NO.,  
 IF NAME, ADDRESS OR EMPLOYER NUMBER IS NOT CORRECT, PLEASE CORRECT

IF THIS IS YOUR FIRST RETURN ENTER DATE BUSINESS WAS STARTED

EMPLOYER NUMBER  
 EMPLOYER NAME

**DUE: JULY 31ST**

PERIOD COVERED: APRIL 1 - JUNE 30

I CERTIFY THE TAX WITHHELD AS SHOWN ON THIS RETURN IS CORRECT

SIGNATURE
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**P941**

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EMPLOYER'S RETURN OF INCOME TAX WITHHELD**

TAX WITHHELD
ADJUSTMENTS
TOTAL TAX

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<input type="checkbox"/>	CORPORATION

TYPE OF PRINT BUSINESS NAME, ADDRESS, AND EMPLOYER IDENTIFICATION NO.,  
 IF NAME, ADDRESS OR EMPLOYER NUMBER IS NOT CORRECT, PLEASE CORRECT

IF THIS IS YOUR FIRST RETURN ENTER DATE BUSINESS WAS STARTED

EMPLOYER NUMBER  
 EMPLOYER NAME

**DUE: OCTOBER 31ST**

PERIOD COVERED: JULY 1 - SEPTEMBER 30

I CERTIFY THE TAX WITHHELD AS SHOWN ON THIS RETURN IS CORRECT

SIGNATURE
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**P941**

**CITY OF PORTLAND -INCOME TAX DIVISION  
EMPLOYER'S RETURN OF INCOME TAX WITHHELD**

TAX WITHHELD
ADJUSTMENTS
TOTAL TAX

MAKE REMITTANCE PAYABLE TO:  
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 MAIL CHECK WITH RETURN TO:  
 INCOME TAX DIVISION  
 CITY HALL  
 259 KENT STREET  
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TYPE OF PRINT BUSINESS NAME, ADDRESS, AND EMPLOYER IDENTIFICATION NO.,  
 IF NAME, ADDRESS OR EMPLOYER NUMBER IS NOT CORRECT, PLEASE CORRECT

IF THIS IS YOUR FIRST RETURN ENTER DATE BUSINESS WAS STARTED

EMPLOYER NUMBER  
 EMPLOYER NAME

**DUE: JANUARY 31ST**

PERIOD COVERED: OCTOBER 1- DECEMBER 31

I CERTIFY THE TAX WITHHELD AS SHOWN ON THIS RETURN IS CORRECT

SIGNATURE
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## Quarterly Withholding Tax Worksheet

(Keep for your records-Do not file)

**Quarter Ending**      **Payment Due**      **Check No.**      **Date**      **Amount Paid**

March 30 <sup>th</sup>	April 30 <sup>th</sup>			\$
June 30 <sup>th</sup>	July 31 <sup>st</sup>			\$
September 30 <sup>th</sup>	October 31 <sup>st</sup>			\$
December 31 <sup>st</sup>	January 31 <sup>st</sup>			\$

Total: \$ \_\_\_\_\_

**PW-3**

Mail this form, together with  
Forms W-2 and adding  
machine tape or accounting  
machine listing showing the  
total of income tax withheld  
on Forms W-2 to:

**City of Portland  
259 Kent Street  
Portland MI 48875**

**CITY OF PORTLAND - INCOME TAX DIVISION  
RECONCILIATION OF PORTLAND - INCOME TAX WITHHELD**

1. TOTAL PORTLAND TAX WITHHELD DURING THE YEAR AS SHOWN ON FORMS W-2 ENCLOSED (A)		\$
2. TOTAL NUMBER OF WITHHOLDING TAX STATEMENTS (FORMS W-2 ) TRANSMITTED HEREWITH		
3. TOTAL PORTLAND TAX WITHHELD AS SHOWN ON FORMS P941	QUARTER ENDED MARCH 31ST	\$
	QUARTER ENDED JUNE 30TH	\$
	QUARTER ENDED SEPTEMBER 30TH	\$
	QUARTER ENDED DECEMBER 31ST	\$
	<b>TOTAL (B)</b>	<b>\$</b>
	<b>DIFFERENCE (C)</b>	<b>\$</b>

Employer Identification No.  
Employer Name:

Due Date:

I CERTIFY THAT THE ENCLOSED W-2'S AND TOTALS HEREWITH ARE CORRECT AND COMPLETE		
SIGNATURE	TITLE	DATE

**Due: February 28<sup>th</sup>**

**Instructions for Employer's Annual Reconciliation of Income Tax Withheld**

- Type or print clearly the business name, address, and identification number.
- Enter amount withheld as shown on employee's W-2s enclosed.
- Enter the total number of W-2s or tax statements enclosed with the reconciliation. Attach an adding machine tape totaling the W-2 forms and/ or include copies of the computer generated summary W-2 forms.
- **It is being requested that you attach a copy of your 3 ½ -inch diskette or CD if available of your W-2s. (Make sure you include box 18, 19, and 20 of W-2's on the diskette; diskette instructions are included in this booklet)**
- Enter the amounts paid each quarter on your P-941s.
- Total the amount paid with your P-941s.
- Enter the difference between amount withheld and the amount paid. If the amount paid is less than amount withheld on the W-2s, the balance due must be paid in full with the PW-3 form. Make remittance payable to: **Treasurer, City of Portland.**
- If the amount withheld from W-2s is less than amount paid, enter refund amount.
- If the amount withheld from W-2s equals the tax paid, enter zero (0).
- Sign and date the reconciliation.
- Attach required copies of W-2 forms and payment for any balance due to the completed form and mail to: **City of Portland Income Tax Department, 259 Kent Street, Portland MI 48875**

## W3 FORMATS

There are four acceptable formats for electronic filing.

### Federal Filing Format – MMREF

This format is required starting with the 2002 tax year.

Information about the Federal MMREF format is available on the Social Security Administration website at [www.ssa.gov/employer](http://www.ssa.gov/employer)

### State Formats- 1A and A

The Federal site states that the new format is accepted by the State of Michigan as well. However, the Sales, Use and Withholding Taxes Annual Return Instructions still show the old formats. They will continue to be supported.

### City Tax Proprietary Format (CTP)

This is a sample format for a single employer. It may be created using Microsoft Excel. It is a comma Delimited format. Details are on a later page.

The following table lists critical fields, with the location in that format.

		<b>MMREF</b>	<b>1A</b>	<b>A</b>	<b>CTP</b>
<b>Local Entity Code</b>	Record	RS	2S	S	CTW
	Start Position	5	82	219	12
	Length	5	5	5	---
<b>Local Withholding</b>	Record	RS	2S	S	CTW
	Start Position	320	96	233	13
	Length	12	7	9	---
<b>Local Taxable</b>	Record	RS	2S	S	CTW
	Start Position	309	87	224	11
	Length	12	9	9	---

### Local Entity Codes

Use the following entity codes for Portland: POR

## CityTax Proprietary

This is a comma-delimited format. That means that each field is separated by a comma. See below for instructions on creating this file from Microsoft Excel. All text must be in upper case. If leading zeros on TaxIds or Zipcodes do not show, this is all right.

### First Line: Employer

A. CTE	text exactly as shown
B. Employer FEIN or TaxID	9 digits no spaces or punctuation
C. Tax Year	4 digits
D. Employer name	
E. Corporate	C if a corporation, blank otherwise
F. Employer street address	No commas
G. Employer City of Portland	
H. Employer State	2 characters
I. Employer Zipcode	5 digits (or 6 characters if foreign country)
J. Employer Plus4	4 digits

### Remaining Lines: One per Employee

A. CTW	text exactly as shown
B. Employee SSN	9 digits no spaces or punctuation
C. Employee Last Name	
D. Employee First Name	
E. Employee Middle Name	
F. Employee street address	No commas
G. Employee City	
H. Employee State	2 characters
I. Employee Zipcode	5 digits (or 6 characters if foreign country)
J. Employee plus4	4 digits
K. Federal Wages	Box 1
L. Local Entity Code	POR
M. Local Withholding	Entered as normal number with decimal point
N. Social Security Wages	Box 3
O. Medicare Wages	Box 5
P. Local Wages	Box 18
Q. Total Deferred	Included in Box 12

## How to Create CTP format using Microsoft Excel

Note: All dollar amounts should be entered as normal number with decimal point, such as 15100.50

1. Open a new spreadsheet.
2. On the first line, enter the Employer data as specified above, entering one value per column. The letter shown at the start of each line must match the letter at the top of the column in Excel. Skip the column if blank. Insure all entries are upper case. To start, enter 'CTE' in the first column.
3. For each employee, enter another line, entering CTE in the first column (A) and entering one field per column.
4. Click on the Save button (or select Save from the file menu). At the bottom is a drip down box for Save as type. Click on this drop-down and select 'CSV (Comma delimited)(\* .csv)'. Then enter a file name and click save.
5. Copy this file to a diskette or compact disc and send to the Income Tax office.