

**P - 941 City of Pontiac - Income Tax Division
Employer's Return of Income Tax Withheld**

1 Q 2021

If this is your first return, enter date this business was started _____

If this is final return, or employer status has changed, see back of form for required information to be submitted. I certify the tax withheld as shown on this return is correct.

Signature _____ Date _____
Phone # _____

Make remittance payable to:
Treasurer, City of Pontiac
Mail to:
City of Pontiac Withholding Payments
P.O. Box 530
Eaton Rapids, MI 48827-0530

Tax withheld _____
Adjustments _____
Net tax withheld _____
Late payment penalty - 1% per month (\$2.00 minimum) _____
Interest due (contact city for daily rates) _____

**TOTAL DUE
PAY THIS AMOUNT**

FEDERAL EMPLOYER I D # _____
TAX YEAR 2021
PAYROLL PERIOD 1-1-2021 THRU 3-31-2021
DUE DATE April 30, 2021

DO NOT WRITE BELOW THIS LINE

**P - 941 City of Pontiac - Income Tax Division
Employer's Return of Income Tax Withheld**

2 Q 2021

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Signature _____ Date _____
Phone # _____

Make remittance payable to:
Treasurer, City of Pontiac
Mail to:
City of Pontiac Withholding Payments
P.O. Box 530
Eaton Rapids, MI 48827-0530

Tax withheld _____
Adjustments _____
Net tax withheld _____
Late payment penalty - 1% per month (\$2.00 minimum) _____
Interest due (contact city for daily rates) _____

**TOTAL DUE
PAY THIS AMOUNT**

FEDERAL EMPLOYER I D # _____
TAX YEAR 2021
PAYROLL PERIOD 4-1-2021 THRU 6-30-2021
DUE DATE July 31, 2021

DO NOT WRITE BELOW THIS LINE

**P - 941 City of Pontiac - Income Tax Division
Employer's Return of Income Tax Withheld**

3 Q 2021

If this is your first return, enter date this business was started _____

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Signature _____ Date _____
Phone # _____

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Mail to:
City of Pontiac Withholding Payments
P.O. Box 530
Eaton Rapids, MI 48827-0530

Tax withheld _____
Adjustments _____
Net tax withheld _____
Late payment penalty - 1% per month (\$2.00 minimum) _____
Interest due (contact city for daily rates) _____

**TOTAL DUE
PAY THIS AMOUNT**

FEDERAL EMPLOYER I D # _____
TAX YEAR 2021
PAYROLL PERIOD 7-1-2021 THRU 9-30-2021
DUE DATE October 31, 2021

DO NOT WRITE BELOW THIS LINE

1. Last pay period on which Pontiac Taxes were withheld _____

2. Check reason for "Final Return" and answer applicable questions

- Business permanently discontinued
- Business temporarily discontinued

Operations will be resumed on

(Date) _____

- Still operating – Ceased paying wages
- Wages will be paid starting

(Date) _____

Business sold to

Name _____

Street _____

City _____

State _____

Zip Code _____

Moved out of Pontiac

3. Your current address

Street _____

City _____

State _____

Zip Code _____

4. Other: _____

1. Last pay period on which Pontiac Taxes were withheld _____

2. Check reason for "Final Return" and answer applicable questions

- Business permanently discontinued
- Business temporarily discontinued

Operations will be resumed on

(Date) _____

- Still operating – Ceased paying wages
- Wages will be paid starting

(Date) _____

Business sold to

Name _____

Street _____

City _____

State _____

Zip Code _____

Moved out of Pontiac

3. Your current address

Street _____

City _____

State _____

Zip Code _____

4. Other: _____

1. Last pay period on which Pontiac Taxes were withheld _____

2. Check reason for "Final Return" and answer applicable questions

- Business permanently discontinued
- Business temporarily discontinued

Operations will be resumed on

(Date) _____

- Still operating – Ceased paying wages
- Wages will be paid starting

(Date) _____

Business sold to

Name _____

Street _____

City _____

State _____

Zip Code _____

Moved out of Pontiac

3. Your current address

Street _____

City _____

State _____

Zip Code _____

4. Other: _____

**P - 941 City of Pontiac - Income Tax Division
Employer's Return of Income Tax Withheld**

4 Q 2021

If this is your first return, enter date this business was started _____

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Signature _____ Date _____
Phone # _____

Make remittance payable to:
Treasurer, City of Pontiac

Mail to:
City of Pontiac Withholding Payments
P.O. Box 530
Eaton Rapids, MI 48827-0530

Tax withheld _____
Adjustments _____
Net tax withheld _____
Late payment penalty - 1% per month (\$2.00 minimum) _____
Interest due (contact city for daily rates) _____

TOTAL DUE PAY THIS AMOUNT

FEDERAL EMPLOYER I D # _____
TAX YEAR 2021
PAYROLL PERIOD 10-1-2021 THRU 12-31-2021
DUE DATE January 31, 2022

DO NOT WRITE BELOW THIS LINE

CITY OF PONTIAC-INCOME TAX DIVISION
RECONCILIATION OF PONTIAC INCOME TAX WITHHELD

Copies of PW-2s must accompany this document.

2021
PW-3

IMPORTANT INFORMATION
GROSS PAYROLL USED TO CALCULATE PAYROLL TAX
\$ _____

1. TOTAL PONTIAC TAX WITHHELD DURING YEAR AS SHOWN ON FORMS PW-2 OR W-2 ENCLOSED		\$		(A)	2021 PW-3
2. TOTAL NUMBER OF WITHHOLDING TAX STATEMENTS (FORMS PW-2 OR W-2) TRANSMITTED HEREWITH →					
3. TOTAL PONTIAC TAX WITHHELD AS SHOWN ON FORMS P-941 (use other side if forms P-941 were filed monthly) →	QUARTER ENDED MARCH 31	\$		(B) (A-B)	DUE ON OR BEFORE 2/28/2022
	QUARTER ENDED JUNE 30				
THE NAME ADDRESS AND IDENTIFICATION NUMBER ON THIS FORM MUST BE THE SAME AS USED ON FORMS P-941 AND PW-2 OR W-2. IF NOT CORRECT, PLEASE CORRECT NAME AND ADDRESS	QUARTER ENDED SEPTEMBER 30				
	QUARTER ENDED DECEMBER 31				
	TOTAL PAYMENTS TO PONTIAC	\$			
DIFFERENCE		\$			
EMPLOYER IDENTIFICATION NO.					

SIGNATURE _____ TITLE _____ DATE _____ PHONE # _____

City of Pontiac
Income Tax Division
P.O. Box 530
Eaton Rapids, MI 48827-0530

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(Date) _____

Still operating – Ceased paying wages
Wages will be paid starting _____

(Date) _____

Business sold to _____

Name _____
Street _____
City _____
State _____
Zip Code _____

Moved out of Pontiac

3. Your current address

Street _____
City _____
State _____
Zip Code _____

4. Other: _____

SUMMARY

LIST PAYMENTS MADE WITH P941
EMPLOYER'S RETURNS

JANUARY	_____
FEBRUARY	_____
MARCH	_____
1ST QUARTER TOTAL \$	_____
APRIL	_____
MAY	_____
JUNE	_____
2ND QUARTER TOTAL \$	_____
JULY	_____
AUGUST	_____
SEPTEMBER	_____
3RD QUARTER TOTAL \$	_____
OCTOBER	_____
NOVEMBER	_____
DECEMBER	_____
4TH QUARTER TOTAL \$	_____
YEARLY TOTAL \$	_____