

Instructions Employer Withholding Registration

Each employer withholding City of Jackson Income Tax from employee's wages should register with the Income Tax Office. For the convenience of the employer, the Federal Identification Number assigned to the employer by the Federal District Director of Internal Revenue will be used for the City of Jackson Income Tax Office records.

Please fill out and send to Lisa Skalski at lskalski@cityofjackson.org

S-SS-4 City of Jackson – Income Tax Office Employer's Withholding Registration		<u>Employer's Federal Identification Number</u>
1. TRADE NAME:		
2. OWNER'S NAME: (IF DIFFERENT FROM TRADE NAME)		
3. MAIN OFFICE MAILING ADDRESS:		
4. JACKSON ADDRESS:		
(CHECK TYPE OF ORGANIZATION)		LOCAL TELEPHONE NO.
5. <input type="checkbox"/> SOLE PROPRIETOR <input type="checkbox"/> PARTNERSHIP <input type="checkbox"/> CORPORATION <input type="checkbox"/> OTHER		6.
7. NO. OF EMPLOYEES	8. ACCOUNTING PERIOD <input type="checkbox"/> CALENDAR YEAR <input type="checkbox"/> FISCAL YEAR ENDING -----	
9. IF THIS BUSINESS WAS PREVIOUSLY OWNED BY ANOTHER EMPLOYER PRINT NAME BELOW.		10. GIVE THE DATE THE BUSINESS WAS ACQUIRED BY CURRENT EMPLOYER.
11. (PAYMENT FREQUENCY) MONTHLY <input type="checkbox"/> QUARTERLY <input type="checkbox"/>		10. (FOR INTERNAL USE ONLY) P I N:
SIGNATURE	TITLE	DATE