

TAX ADMINISTRATOR
P.O. Box 601 – Ashtabula, Ohio 44005-0601
RECONCILIATION OF
EMPLOYER'S RETURN OF TAX WITHHELD

1. Total number of employees as represented by employee's statements transmitted herewith	_____	First quarter ending Mar. 31 st	\$ _____
2. Total payroll for the year	\$ _____	Second quarter ending June 30 th	\$ _____
3. Less payroll not subject to tax	\$ _____	Third quarter ending Sept. 30 th	\$ _____
4. Payroll subject to tax	\$ _____	Fourth quarter ending Dec. 31 st	\$ _____
5. Withholding tax liability @ 1.8% of line 4	\$ _____	6. Total remitted for the year	\$ _____
		7. If additional tax due is indicated, attach payment when filing.	\$ _____

FOR YEAR OF

DUE ON OR BEFORE FEBRUARY 28
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INSTRUCTIONS FOR EMPLOYERS:
Complete the top portion of this form, attach or bundle carbon tearoff portion of commercially reproduced W-2 forms on which is shown the employer's name and address, the employee's name, address earnings and tax withheld.

Notify Income Tax Department Promptly of any change in ownership or name and address shown above.