

10101 Montgomery Road, Montgomery, OH 45242 Phone: (513) 891-2424 Fax: (513) 891-2994

**EMPLOYER'S WITHHOLDING TAX RECONCILIATION**

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

Please complete and include this form with the following:

- W-2 forms of taxable employees.
- 1099 forms for non-employee compensation of \$600.00 or more per individual paid for work performed in the City of Montgomery.

FID # _____  Employer's Name _____  Address _____  City _____ State _____ Zip Code _____	ACCT # _____	Submitted By (please print) _____  Official Title _____  Signature _____  Date _____  Phone # _____
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**TAX YEAR 20** \_\_\_\_\_

1. Total number of W-2 forms submitted \_\_\_\_\_

2. Total number of 1099 forms submitted \_\_\_\_\_

3. Total number of **current** Montgomery employees \_\_\_\_\_

4. Total Montgomery payroll for the year \$ \_\_\_\_\_

5. Less payroll not subject to tax  
 (\*Must include explanation below) \$ \_\_\_\_\_

6. Payroll subject to tax \$ \_\_\_\_\_

7. Withholding tax liability @ 1%  
 of Line 6 \$ \_\_\_\_\_

8. Total income tax withheld from wage  
 as shown on employee W-2 forms \$ \_\_\_\_\_

9. Quarter ending March 31 \$ \_\_\_\_\_

10. Quarter ending June 30 \$ \_\_\_\_\_

11. Quarter ending September 30 \$ \_\_\_\_\_

12. Quarter ending December 31 \$ \_\_\_\_\_

13. Credits from prior year \$ \_\_\_\_\_

14. Total (Lines 9 thru 13) \$ \_\_\_\_\_

15. Tax due (the greater amount  
 of Line 7 or Line 8) \$ \_\_\_\_\_

16. Additional tax due \$ \_\_\_\_\_

17. Overpayment credited to next year \$ \_\_\_\_\_  
 (Refunds not issued to active accounts.)

No taxes or credits less than \$1.01 collected/refunded.

**EXPLANATION OF PAYROLL NOT SUBJECT TO TAX**  
 \*(If no explanation is provided, 1% of total payroll is due and payable.)

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<b>FOR OFFICE USE ONLY:</b>		
Filed: _____	Check #: _____	Amount: _____