

WITHHOLDING TAX RECONCILIATION

VILLAGE OF MORROW  
DEPARTMENT OF TAXATION  
W-3

EMPLOYER'S NAME AND ADDRESS \_\_\_\_\_ ACCOUNT NUMBER \_\_\_\_\_ TAX YEAR \_\_\_\_\_

1. Total number of employees _____	Total Morrow Income Tax Withheld During
	Year For:
2. Total payroll for the year \$ _____	First quarter ending March 31 \$ _____
3. Less payroll not subject to tax \$ _____	Second quarter ending June 30 \$ _____
4. Payroll subject to tax \$ _____	Third quarter ending Sept. 30 \$ _____
5. Withholding tax liability @1% _____	Fourth quarter ending Dec. 31 \$ _____
of line 4 \$ _____	
6. Total remitted for the year \$ _____	
7. Line 5 Less Line 6 - Overpayments \$ _____	or Additional Tax Due \$ _____

INSTRUCTIONS

If item 7 above indicates overpayment and refund is desired, attach explanation and request to this form if additional tax is due, attach payment when filing. The tax ordinance requires the annual preparation and filing of this report from all employers subject to the tax. Reports must be completed and mailed to Village of Morrow, Department of Taxation, 150 E. Pike St. Morrow, Ohio 45152 on or before April 30th of the following year. Other information required to be submitted with this report is the name and address of each employee subject to tax during the year; the total gross earnings of each employee and the amount of Morrow Tax withheld from those earnings. The form below is provided for the use of employers in submitting this information. Commercially reproduced copies of Federal Forms, W-2 or electronic reproductions bearing the required information in either card or listing form may do so in lieu of the listing form below.

NAME AND ADDRESS OF EMPLOYEE	TOTAL EARNINGS FOR THE YEAR	MORROW TAX WITHHELD
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Total this page \_\_\_\_\_  
Total all pages \_\_\_\_\_